



MAY 2019



OPENING DOORS

Louisiana Human Trafficking
Survivor Housing Report



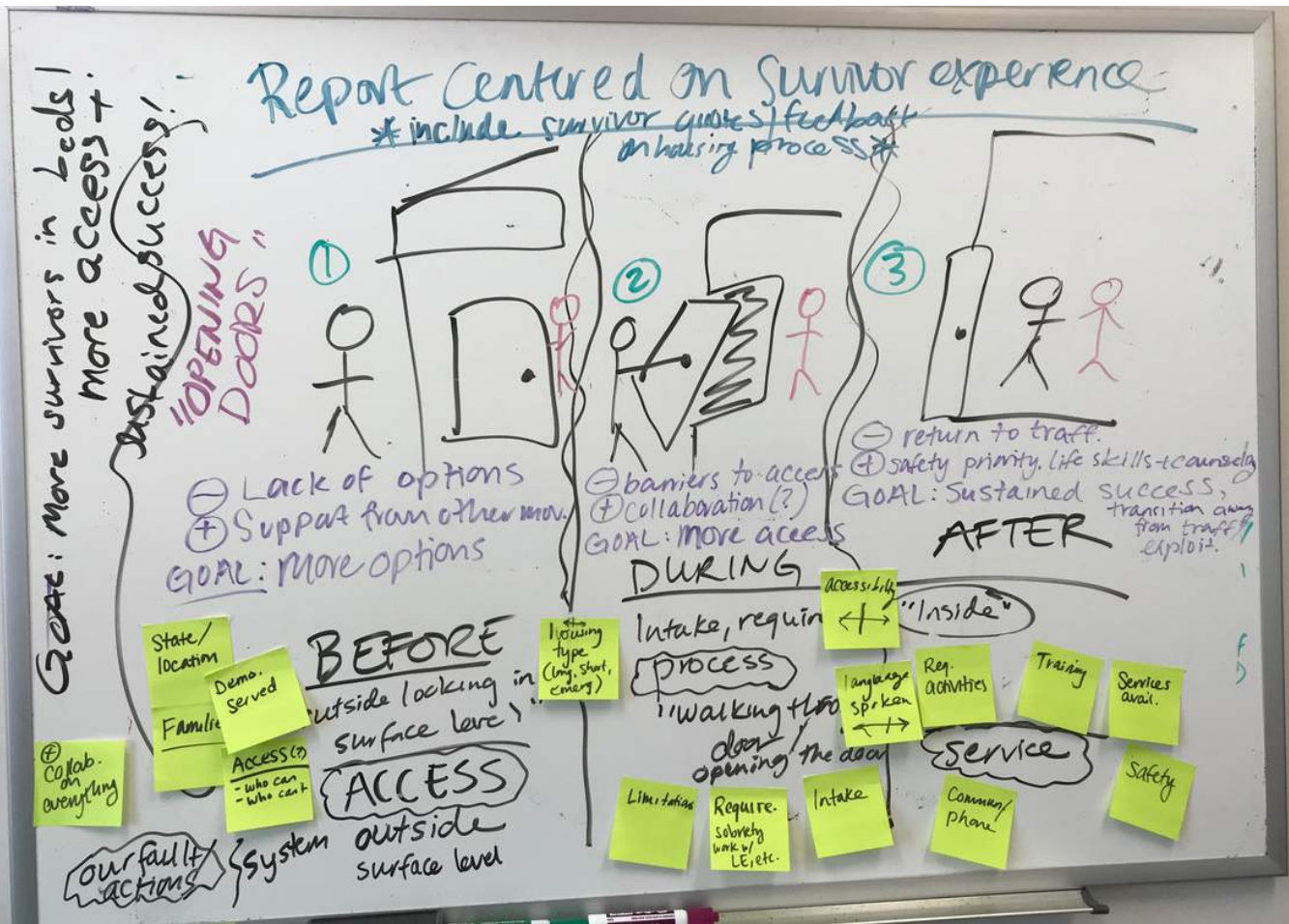
GREATER NEW ORLEANS
HUMANTRAFFICKING
TASK FORCE

DISCLAIMER

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GREATER NEW ORLEANS
HUMANTRAFFICKING
 TASK FORCE



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The statewide success of this project was made possible by the assistance of the Louisiana Children's Anti-Trafficking Initiative (LCAT) members who disseminated this survey to housing providers outside of the Greater New Orleans region. Particularly, we are grateful to Katherine Shipley for her assistance connecting this project with providers throughout the state of Louisiana.

We are also grateful to the Freedom Network USA for assistance and support throughout this process. Most importantly, we owe thanks to the housing providers, housing advocates, and trafficking survivors who provided critical information on survivor housing in Louisiana.

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EXECUTIVE SUMMARY

PROJECT OVERVIEW

This housing project had three primary goals: to collect baseline data on housing for trafficking survivors in Louisiana, to create a housing resource guide, and to produce a housing report. To keep the scope manageable, the project focuses on social service organizations and programs that provide housing to vulnerable populations (including but not limited to: human trafficking survivors, people experiencing homelessness, at-risk or system-involved youth, people living with addiction, domestic violence survivors, sexual assault/sexual violence survivors, and immigrants) in Louisiana.

The housing report was created by integrating survey data of three primary stakeholders in the housing process: housing providers, housing advocates, and trafficking survivors. The data illuminated three key phases trafficking survivors experience during the housing process: access, process, and service. The report organizes its findings using the three phases to identify barriers and challenges encountered by survivors during each respective point in the housing experience.

ACCESS PHASE: KEY TAKEAWAYS

Not enough general housing and specialized housing options.

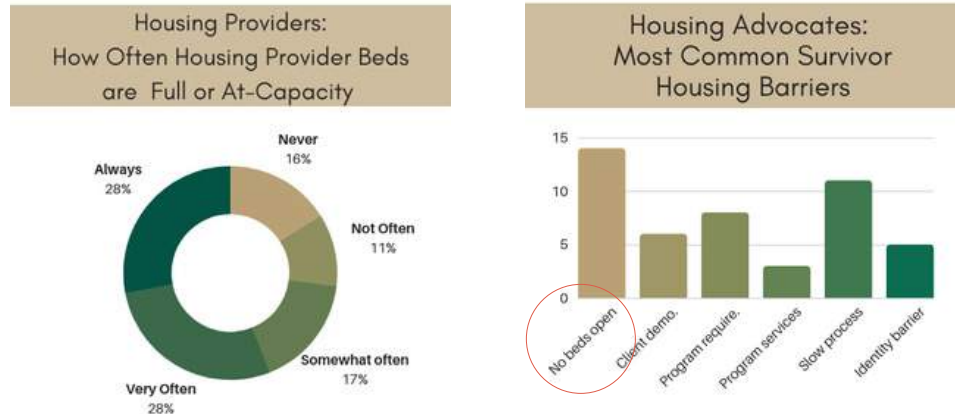


Housing advocates voiced a need for more general housing beds for survivors, as well as specialized housing options for all trafficking survivors. As of January 2019, specialized housing for trafficking survivors in Louisiana was only available to female sex trafficking survivors. Additionally, advocates identified that certain client demographics such as men, adults with children, and labor trafficking survivors have few general housing options.

82% of housing advocates believed that lack of beds was one of them most common barriers to survivors attempting to access housing. When we coded advocate responses about challenges in the housing process "lack of housing or limits in beds available" was the most common long answer response.

PROCESS PHASE: KEY TAKEAWAYS

Contrasting opinions between housing providers and advocates on key housing process issues.



This report illuminates a contrast between the perspectives of housing providers and housing advocates in the process phase of housing. Important topics that highlight the contrasting points of view include: perceptions of bed availability and shelter fullness, intake process speed, and intake rigidity. For example, housing providers have a wide range of responses about how often they are full, which contrasted with housing advocate perception that beds are constantly full or unavailable.

SERVICE PHASE: KEY TAKEAWAYS

Varied success housing trafficking survivors.

Stabilization was identified as the top success in the service phase by both housing providers and advocates. Stabilization is a process of helping survivors feel more safe, addressing basic needs, and addressing the survivor's acute needs. The most common successes housing providers identified were short and long term stability; and the most common success identified by housing advocates was general stabilization.

However, when we coded the responses of housing advocates we found that “no success” was the second most common phrase used to describe successes in the housing process. Housing advocates reported that a large portion of the survivors they serve do not make it into housing programs due to factors including identity, bed availability, and behavioral health. The most common challenge that housing providers identified in the service phase of housing is that survivors prematurely exit housing programs (such as running away, relapsing, or returning to their abuser).

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WHO WE ARE



The Greater New Orleans Human Trafficking Task Force (GNOHTTF) is a coalition of more than 80 state, civil society, and citizen organizers committed to the prevention of human trafficking in the Greater New Orleans area through education, outreach, and collaboration.

The group's primary goal is to collaborate in sharing and disseminating information, contacts, and protocols related to the existence, prevention, and response to human trafficking in and around New Orleans. Members represent a diverse coalition of New Orleans area organizations, institutions, state agencies, and political and religious affiliations. The group maintains a working list of service providers and organizers who address this multi-faceted issue.



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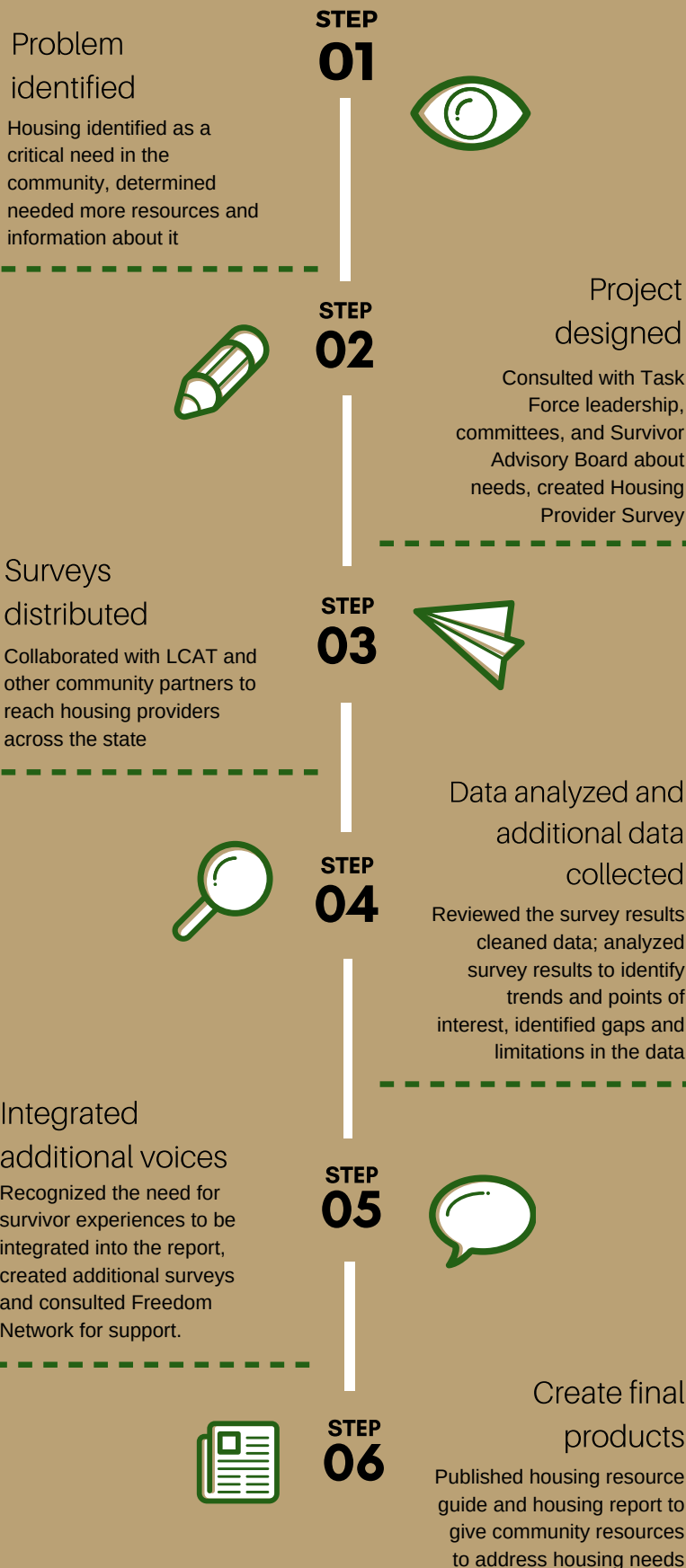
PROJECT OVERVIEW

Over the past several years, the GNOHTTF identified housing as one of the greatest needs for trafficking survivors in Louisiana.

The GNOHTTF conducted this project in response to survivor housing needs identified by the Greater New Orleans community. Important milestones that led to this report include:

- 2016: The GNOHTTF co-hosted the Human Trafficking Resource Expo, during which participants identified housing as the top issue facing trafficking survivors in Greater New Orleans;
- March 2017: The mid-term evaluation of GNOHTTF identified improving housing access as a key recommendation;
- July 2017: Following the publication of the Trafficking Survivor Services Resource Guide by the New Orleans Children's Advocacy Center and the GNOHTTF, service providers expressed need for in-depth information on housing providers to improve the housing process and make intake more transparent.

Project Implementation Process



PROJECT DESIGN

This housing project had three primary output goals: to collect baseline data on housing for trafficking survivors in Louisiana, to create a housing resource guide, and to produce a housing report.

COLLECT DATA

Data collection was the heart of this project. The goal was to collect data on the housing landscape and housing process in Louisiana to identify trends, gaps, and successes. To address this, we conducted a Community Resource Inventory to determine which organizations were either already providing housing services or willing to provide housing services in the future to trafficking survivors in Louisiana. After the conclusion of the housing provider data collection, we determined that the report was lacking data about survivor experiences. To address this, we create surveys for trafficking survivors and for housing advocates to share feedback about the housing process in Louisiana.

CREATE A HOUSING GUIDE

We believe that data collection should be actionable and useful to the community that provides the data. We determined that one resource we could create using the data was an in-depth housing directory that could provide case managers, housing advocates, and survivors a tool to identify housing options.

PRODUCE A HOUSING REPORT

In addition to the housing resource guide, we aimed to create a report to benefit the community. We created an accessible report that provides evidence for the community to galvanize future work to improve housing access for trafficking survivors. Our goal is for this report to be a step toward evidence-based changes to the housing system to benefit trafficking survivors.

METHODOLOGY

This report was created by integrating survey data of three different stakeholders in the housing process: housing providers, housing advocates, and trafficking survivors. To keep the scope manageable the project focuses on social service organizations and programs that provide housing to vulnerable populations (including, but not limited to: human trafficking, homelessness, at-risk or system-involved youth, addiction, domestic violence, sexual assault/ sexual violence, immigrants, people with disabilities) in Louisiana.

HOUSING PROVIDER SURVEY

The Task Force created a survey for housing providers based on feedback from community partners. It was administered through an online survey platform.

Surveys were distributed through Task Force listserv, advertised on websites, and disseminated through statewide channels. LCAT contacted providers outside of Greater New Orleans to get a more robust response. The survey was distributed over an 11-month period, and was shared with more than 70 different housing providers across the state of Louisiana.

The survey had 23 total respondents, of which 5 were screened out (3 were replications from responding agencies, 2 were non-housing providers). The remaining 18 responses were used to create the dataset. Following the data cleaning and verification process, the team conducted follow up calls with all respondents to ensure their interpretation and cleaning of the data was correct and approved by the housing provider. In the follow up phone calls, additional questions about language access were included to make the data set more robust.

HOUSING ADVOCATE AND SURVIVOR SURVEYS

Following the conclusion of the data collection from housing providers, the team realized that the report needed to integrate survivor experiences into the data. To achieve that goal, the team created simple online surveys for 1) housing advocates (people helping trafficking survivors identify housing in Louisiana) and 2) human trafficking survivors to give feedback on their challenges and success in the housing process. The survey was distributed over a 6-month period, and was distributed through the Task Force listserv, advertised on websites, direct email invitations, and statewide communication channels. 19 housing advocates responded, 2 survivors responded. Given the low number of responses to our survivor survey, we were unable to conduct data analysis on the survivor response data. Responses from the housing advocates were analyzed and coded to identify the most common responses. The quotes and anecdotes throughout the report represent the voices of those with lived experience navigating the housing process.

DATA ANALYSIS AND LIMITATIONS

DATA ANALYSIS

Using the umbrella categories “access, process, and service” survey responses were organized under each category respectively. Because of the small sample size of housing providers (N=18), there was not enough statistical power to determine statistically significant relationships among variables, but crosstabulation analysis was conducted to see if relationships in the data were potentially emerging. A summary of those findings is listed in Appendix A, but throughout the report our findings mostly rely on descriptive statistics and qualitative interpretations. Responses to open-ended questions were deductively coded to determine if responses and comments were applicable to the access, process, or service experience for a survivor. Once those were organized, a second coder reviewed the coding assignments for agreement. Any disagreement was discussed and reconciled. The qualitative findings serve to support and further explain how respondents answered closed-ended survey questions. Quotes are extracted from the qualitative data to highlight sections of the report. The presentation of these findings were reviewed by a variety of stakeholders, including researchers and leaders in the anti-trafficking movement.

DATA LIMITATIONS

The data collection efforts conducted as part of this report were done by community members, for community members. This report should be seen as an opportunity for existing knowledge within the community to be shared, and should be a catalyst for future empirical research. All housing provider data was self-reported. While some information was verified using open source data and follow up communication with the providers, there was no way to confirm all information provided by survey participants. Due to the somewhat low response rate for the surveys included in this report, the conclusions drawn in this report may not necessarily represent the current state of human trafficking survivor housing in Louisiana. In future iterations of this assessment, we hope to increase the number of shelters that respond. Additionally, housing providers represented in the survey solely represent shelter and housing program entities- the sample does not include affordable housing options, continuum of care representatives, Housing and Urban Development (HUD), or other non-shelter setting housing entities. Future research that included a larger sample size would help stakeholders better understand the complex experiences and challenges survivors face while securing housing (both emergency and longer term). Additionally, future research should more effectively engage with survivors and integrate their input into the dialogue around housing.

KEY TERMS

HOUSING DEFINITIONS

TERM	DEFINITION
EMERGENCY HOUSING	Facilities with overnight sleeping accommodations that provide temporary shelter (one night – three months) for homeless individuals/ families.
TRANSITIONAL HOUSING	Programs that include short-term (3 to 24 months) residential housing, congregate housing, or rental assistance in scattered site apartments for individuals or families experiencing homelessness for the purpose of facilitating their movement to independent living.
GROUP HOME	Housing for individuals in need of support or supervision (i.e.: youth in foster care, youth in recovery, people recovering from substance abuse or addiction, etc.)
LONG TERM HOUSING	Housing options that are available for a client for a long-term solution, such as: permanent supportive housing, shelter setting where clients can stay for a year or more, etc.
PERMANENT SUPPORTIVE HOUSING	Programs that provide long-term community-based housing with support systems for homeless individuals/ families with a disability who have been living on the street or in places unfit for human habitation, in emergency shelters, or in transitional housing, having entered that housing from the streets or from emergency shelters.
RAPID REHOUSING	Connects families and individuals experiencing homelessness to permanent housing through a tailored package of assistance that may include the use of time-limited financial assistance and targeted supportive services.

OTHER DEFINITIONS

TERM	DEFINITION
INTAKE	The process of screening potential clients prior to their entrance into a program. This process can include interviews, drug tests, questionnaires, background checks, and other screening mechanisms.
FAITH-BASED	An organization with religious affiliation or connection to a religious group.
SURVIVOR-CENTERED	A service provider approach that seeks to minimize re-traumatization associated with survivor's experience by prioritizing the survivor's rights, needs, and wishes.
TRAUMA-INFORMED	An organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma.
HUMAN TRAFFICKING	A crime in which: a) a person is forced, tricked, or coerced into providing sex or labor services; or b) a person is under the age of 18 years old and engages in commercial sex (trading a commercial sex act for anything of value).
SPECIALIZED SERVICES	Services that are specifically tailored to one population's needs.
HOUSING PROVIDER	A social service entity that manages a housing program (shelter, rehousing, permanent supportive housing placement, etc.)
HOUSING ADVOCATE	A person who has helped trafficking survivors attempt to navigate the Louisiana housing landscape – this can be formal (for example, as a housing navigator, hotline advocate, or case manager) or informal (as a friend or colleague trying to help).
TRAFFICKING SURVIVOR	A person who self-identifies as a survivor of human trafficking. For the purposes of this report, we focuses on survivor services for individuals who fit the federal definition of human trafficking.

INTRODUCTION

The Concept of Opening Doors

Across Louisiana, housing has been at the center of the dialogue about services for trafficking survivors. **This report represents an attempt at radical transparency about what we do know and what we do not know about housing services for trafficking survivors in our state.** Our goal for this report is to spark a conversation about survivor housing access that is guided by feedback from housing providers and also grounded in survivors' lived experiences. We hope this information can be a catalyst for future in-depth analysis of the housing system. Our concept for this housing report is 'opening doors.' We are encouraged by the open

Our goal for this report is to spark a conversation about survivor housing access that is guided by feedback from housing providers and also grounded in survivors' lived experiences.

and honest feedback we received throughout this process, and we hope that this report will spark change that will open doors for more survivors to successfully access housing in our community.



VIZUALIZING THE HOUSING PROCESS

This project identified three key phases trafficking survivors experience during the housing process: access, process, and service. We have chosen these phases to help guide the conversation and explain common barriers and challenges that survivors may be facing during each respective point in the housing experience.



OUTSIDE THE DOOR

ACCESS

BEFORE THE HOUSING PROCESS

- Housing location
- Demographics served
- Program types



OPENING THE DOOR

PROCESS

DURING THE HOUSING PROCESS

- Intake process
- Program requirements
- Available beds



INSIDE THE DOOR

SERVICE

AFTER BEING HOUSED

- Services available
- Required activities & rules
- Safety & security

PHASES OF THE HOUSING PROCESS

ACCESS

Access is the point at which a survivor knows that they need housing, but has not yet identified housing for which they qualify. We visualize this phase as the point when the survivor is 'outside the door'. This is when the survivor may be trying to figure out where to get housing, what is available in their community, and what they generally qualify for. The access phase includes geographic locations of housing, housing types available, service regions, total beds available, and basic demographic information.

PROCESS

Process is the point at which the client has identified housing (in the access phase) but has not yet entered a specific housing program. We visualize this phase as the point when the survivor opens the door. The client may go through multiple intakes or be rejected by multiple housing providers in the process phase prior to entering the service phase. This phase includes intake process, intake requirements, and beds available.

SERVICE

Service is the point after a client has identified housing (in the access phase) and been approved for entering housing (in the process phase). We visualize this phase as the point when the survivor is accepted at the door, and has been invited inside. The story does not end once the survivor has 'walked through the door'- the service phase of housing is an ongoing experience. The client may exit the housing abruptly, graduate or move on to a longer-term housing program, or may have new needs that arise over time. This phase of the housing process includes program rules, required activities, services available to survivors, and safety measures.

CAVEAT: CYCLE OF HOUSING

It is important to remember that the housing process is not necessarily linear for the survivors seeking housing in our community. This process can be cyclical or survivors can move between phases in different orders. While we have chosen to organize this report into three sections to help explain the data, we acknowledge that this may not represent the experience of all survivors.

ACCESS

Outside the door



Access is the point at which a survivor knows that they need housing, but has not yet identified specific housing options for which they qualify.

We visualize this phase as the point when the survivor is 'outside the door'. This is when the survivor may be trying to figure out where to get housing, what is available in their community, and what they generally qualify for.

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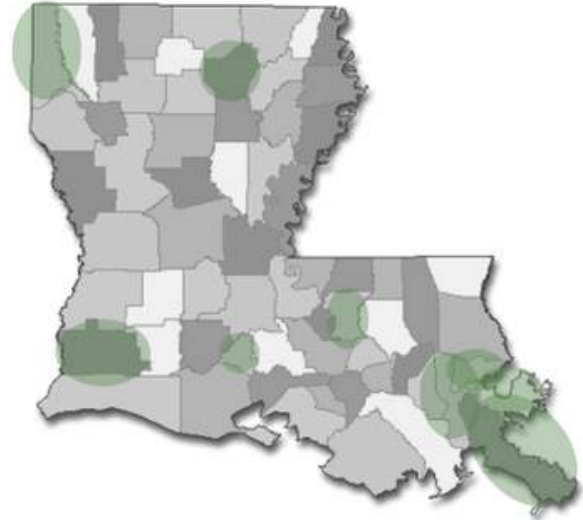
- Geographic location
- Housing type
- Provider landscape
- Specialized housing
- Service demographics

GEOGRAPHIC LANDSCAPE

Where are the housing providers?

Housing providers are located in the following parishes: Caddo, Calcasieu, East Baton Rouge, Jefferson, Lafayette, Orleans, Ouachita, St. Bernard, St. Tammany, and West Baton Rouge. Though the housing providers are scattered throughout the state, advocates indicated they have had success finding housing for trafficking survivors both inside and outside of their respective parishes. Half of the housing providers represented in the survey responses were located in the Greater New Orleans area.

Location of Housing Providers (By Parish)



Service Regions of Housing Providers



*Of 18 respondents, 13 serve clients from all parishes in Louisiana.
5 serve clients within set regions (pictured above)*

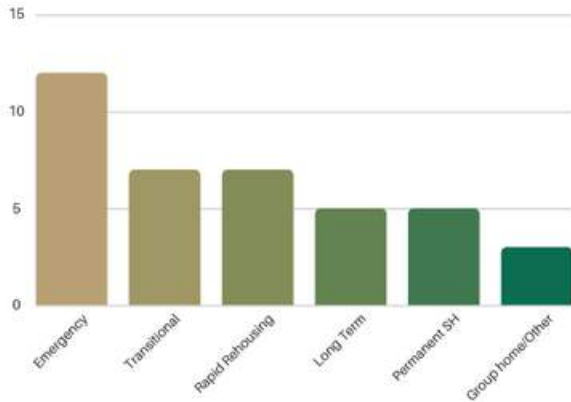
Housing providers mostly hail from major cities in Louisiana, such as New Orleans, Baton Rouge, Shreveport, and Lafayette. Housing option responses were limited in central Louisiana, which is a largely rural part of the state. The majority of housing providers could serve clients from anywhere in Louisiana, however about 28% of the providers can only serve clients from specific service regions within Louisiana.

Three of the shelters are in rural locations, four are suburban, and twelve are located in urban areas (note that one provider has multiple shelter sites). 22% of the shelter locations are inaccessible to public transportation.

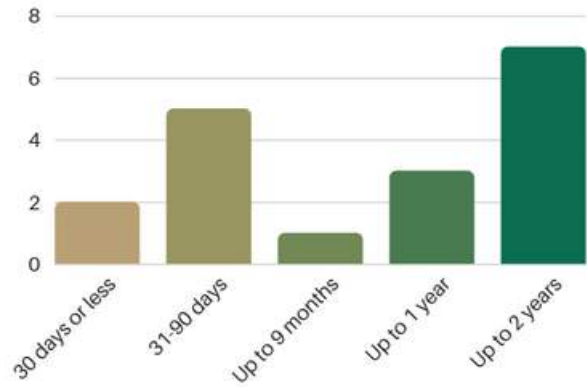
HOUSING TYPE

What type of housing is available?

Housing Types Offered by Housing Providers



Maximum Duration of Housing Available



The majority of housing providers that responded to our survey have emergency shelter programs. There are a variety of housing duration options available to survivors. Some housing providers (particularly providers serving homeless populations) offer multiple types of housing in-house, while others expressed that duration of stay can be flexible depending on the needs of the survivor. Flexible housing duration based on client needs is an encouraging survivor-centered practice.



PROVIDER LANDSCAPE

Who's housing trafficking survivors?

Louisiana has a variety of social service movements working together to serve trafficking survivors. This means that survivors do not just have to rely on specialized housing providers- they can seek other options from providers who are knowledgeable about the needs of trafficking survivors and other forms of trauma. **291 total beds were available to trafficking survivors through the housing providers who participated in this survey.**

The anti-trafficking movement in Louisiana started with cooperation between social service providers serving other populations, such as homeless youth and immigrant communities. To date, support from non-specialized services remain a vital resource for trafficking survivors. **78% of the housing providers surveyed serve a primary population that is not trafficking survivors.** Housing providers that participated in this survey primarily served: people experiencing homelessness, domestic violence and/or sexual assault survivors, people with addictions, pregnant individuals, and homeless/runaway youth. 33% of providers serve people experiencing homelessness, which represented the largest group of providers caring for trafficking survivors. Several of the housing providers with primary populations that are not trafficking survivors have established programs to address the housing needs of trafficking survivors. One example of this is Covenant House New Orleans, a housing provider for homeless and at-risk youth in New Orleans that has federal funding to provide



housing and services to trafficking survivors. It has become a 24/7 housing lifeline where emergency shelter is available to all trafficking survivors until appropriate alternative housing options can be identified for the survivor. Housing advocates acknowledged that this was a key part of their success housing survivors during the access phase.

WHAT ARE THE SUCCESSES YOUR CLIENTS HAVE HAD WHEN TRYING TO ACCESS HOUSING?



Having a 24/7 emergency shelter option in Covenant House New Orleans has been a huge relief, because the immediate needs of the client are met.

HOUSING ADVOCATE

SPECIALIZED HOUSING

What's available that's *just* for trafficking survivors?

“Specialized housing” is housing that is specifically designated for a niche group. In this case, specialized housing for trafficking survivors is a housing program that primarily serves trafficking survivors, or a program that has allotted beds specifically set aside for trafficking survivors. Unsurprisingly, there are fewer specialized housing providers in the state than there are housing options for other demographic populations, such as housing providers serving people experiencing homelessness. Only 22% of the housing providers surveyed for this report specifically had housing options or beds reserved for trafficking survivors.

As of January 2019, Louisiana had a total of 46 specialized beds available to trafficking survivors in Louisiana. **Only four housing providers identified their primary population as trafficking victims and survivors, and those providers only serve female-identifying sex trafficking survivors**[1]. In addition to the concerns that few survivor identities are able to access specialized housing, those 46 beds are not nearly enough beds to fill the needs of survivors of trafficking who



identify as female sex trafficking survivors. For example, In 2017 alone the GNOHTTF provided housing to 93 trafficking survivors[2]. The 2018 Louisiana Department of Children and Family Services Annual Report identified 681 potential and confirmed trafficking survivors had been identified by 24 service providers across the state[3]. **The need for housing far outpaces the number of beds available, causing a constant strain on resources and bed availability.**

[1]: NOTE: Both adult housing providers serving sex trafficking survivors also serve women exiting the commercial sex industry- however, since their organizations’ stated mission and purpose is to serve sex trafficking victims/survivors, they were included as specialized service providers.

[2] 2017 Annual Report, Greater New Orleans Human Trafficking Task Force.

[3] Annual Report, Louisiana Department of Children and Family Services (2018).

Who has access to specialized housing options, and who doesn't?

All of the specialized beds for trafficking survivors serve female or female-identifying sex trafficking survivors. On top of that limitation, only one specialized provider serving youth could take foreign nationals, and only one specialized provider for adults could take foreign nationals.

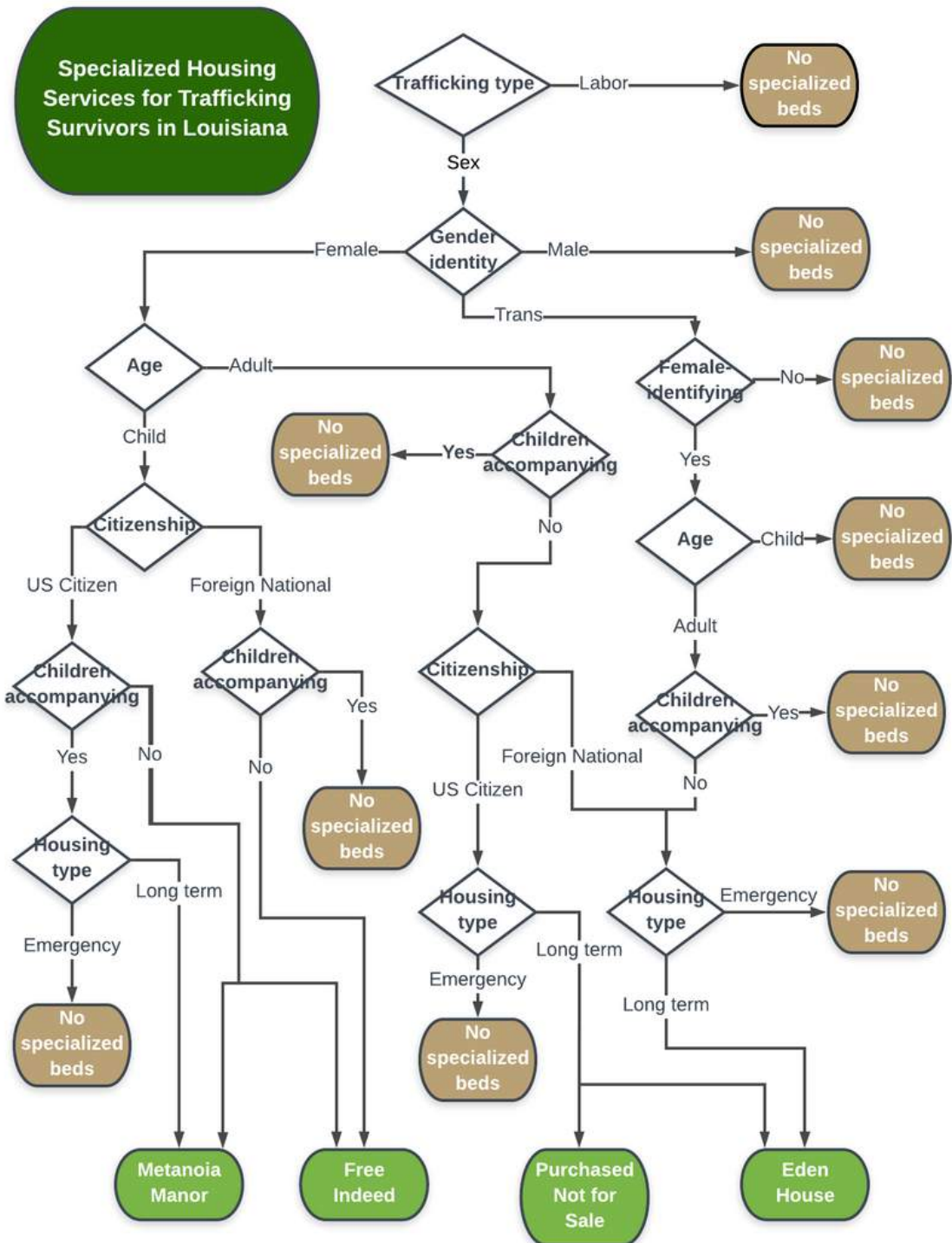
Individuals who identify as male, trans/non-binary/gender-non conforming, boys, labor trafficking survivors, or adults who have children or dependents accompanying them are unable to access specialized housing services in Louisiana.



See the flow chart on the next page to see which demographics are served in the current specialized housing landscape.



Need to find a specialized housing option for a survivor in Louisiana? Use this flow chart to see who would qualify for one of the housing options specifically for trafficking survivors.



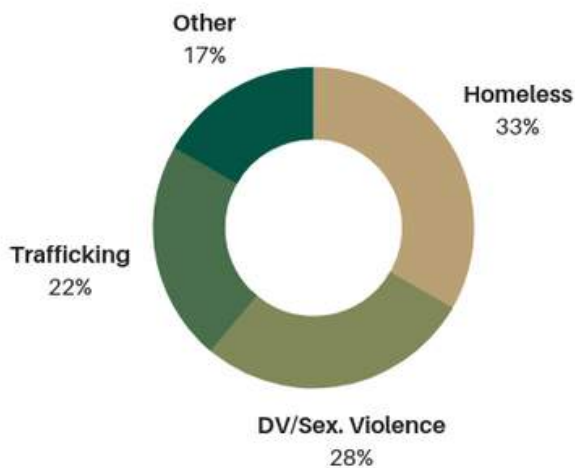
NOTE: This flow chart is based on specialized trafficking survivor housing services available in Louisiana as of January 2019. To learn about future housing options and changes, go to page 47.

SERVICE DEMOGRAPHICS

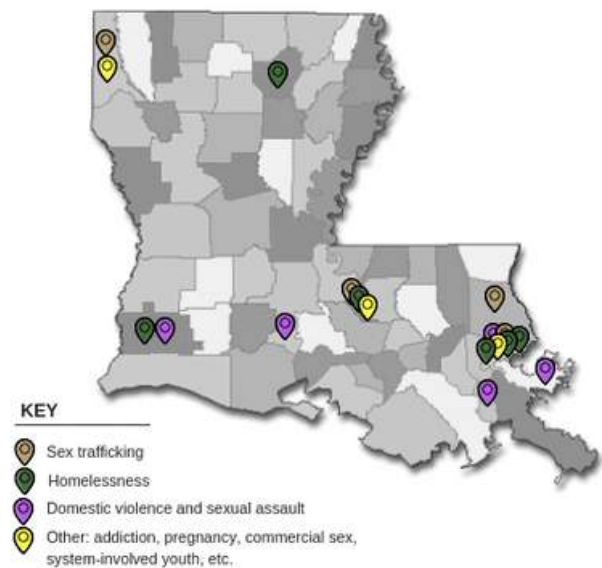
Who can access housing?

The housing providers serve a variety of primary populations. This includes human trafficking survivors, people experiencing homelessness, domestic violence/sexual assault survivors, people living with substance use disorders, transitional youth, and pregnant individuals. Clients seeking to access housing in non-specialized housing programs usually must qualify as a member of the primary population the provider serves. For example, a trafficking survivor may not be able to access housing at a homeless shelter unless they have documented their experience of homelessness. This can be a challenge for some trafficking survivors whose identity does not overlap with the programs available in their geographic area. Though some housing providers will make exceptions to take trafficking survivors even if they do not fit their primary population demographic, this is on a case-by-case basis, and therefore is not always accessible for survivors.

Primary Population Served by Housing Provider



Primary Population Served by Housing Providers



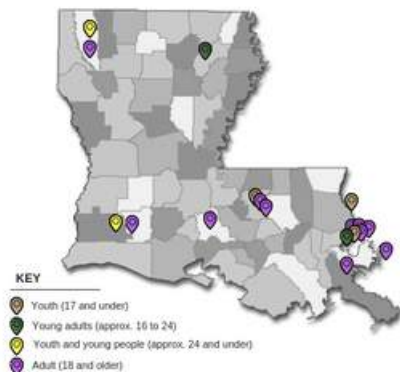
Accompanying Children

56% of housing providers take survivors who have children accompanying them. Of those providers, 30% had limitations on the age and gender of accompanying children accepted into the program. This means that survivors with accompanying children have significantly fewer housing options than survivors without accompanying children.

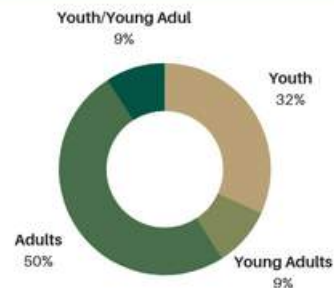
Age

A variety of age groups are served by the housing providers. Young adults ranging from 16-24 years old had the most housing options available to them.

Primary Age Served by Housing Provider (Statewide)



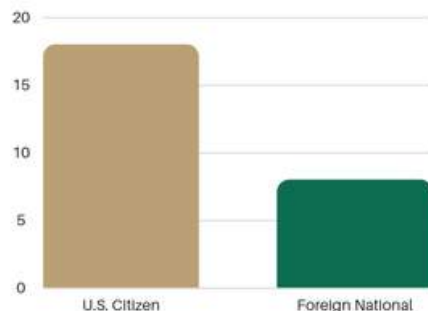
Age Range Served by Housing Providers



Citizenship

There were significantly fewer housing options for survivors who were not U.S. citizens (referred to as "foreign nationals" for the purpose of this report). Every responding housing provider is able to serve U.S. citizens. Funding streams can dictate whether service agencies can serve foreign nationals: for example, some state-based funding does not allow for non-emergency services to be provided to non-U.S. citizens. This means that foreign nationals may sometimes have a harder time than others when attempting to access housing, and they have fewer options than survivors who are US citizens.

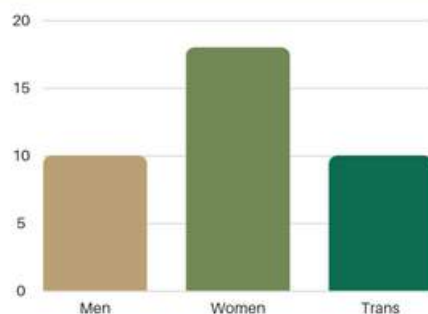
Citizenship Status Served by Housing Providers



Gender Identity

There were significantly fewer housing options for survivors who identify as male or trans/non-binary/gender non-conforming. Every responding housing provider is able to serve females.

Gender Identities Served by Housing Providers



Who has access to general housing options, and who doesn't?

Overall, housing advocates voiced concern over the general lack of housing options. **82% of housing advocates believed that a lack of beds is one of the most common barriers to survivors attempting to access housing.** When we coded advocate responses about challenges in the housing process, "lack of housing or limits in beds available" was the most common long answer response.

For certain survivors, there are even fewer options available to them due to their identity. 35% of housing advocates believed that client demographic limits (such as age, gender, or immigration status) was one of the most common barriers for clients to access housing. Specifically, housing options for men, labor trafficking survivors, non-English speaking people, and mothers with teenage children are limited.

Housing isn't available for certain clients, like mothers with teenage children, or young men, or labor trafficking survivors.

HOUSING ADVOCATE

STRUGGLING
TO FIND OPTIONS:

Adult survivors with children

Although many housing providers will serve survivors with children, these agencies often have limitations on which families they can serve. Of housing providers who accept children accompanying trafficking survivors, some will not take male children- particularly if they are over the age of 10-12 years old. In some cases, clients who are pregnant also face challenges finding housing due to rigid shelter insurance policies around maternity and babies.

PROCESS

Opening the door



Process is the point at which the client has identified housing (in the access phase) but has not yet entered a specific housing program.

We visualize this phase as the point when the survivor opens the door. The client may go through multiple intakes or be rejected by multiple housing providers in the process phase prior to entering the service phase.

This phase includes intake process, intake requirements, and beds available.

In this section:

- Intake requirements
- Intake process
- Intake duration
- Screening process

INTAKE

What do you need to know?

OVERVIEW

Housing providers, survivors, and advocates recognized the intake process as an important step in the housing process. During intake a person is examined to determine if they qualify for a housing program. Generally, before a client can enter housing they must complete the intake process.

Intake is the way that housing providers determine whether a survivor qualifies for their program. Each housing program has a distinctly different intake process based on their rules and regulations. Some housing providers conduct intake via phone, while others will only allow in-person intake. Some require the survivor to directly answer questions, others will allow advocates or case managers to call on behalf of clients. Others may require that you complete a background check or provide documentation.



TELL US YOUR STORY

One of the most common components of intake is that clients are required to share details about their victimization or their trauma experiences. This process can be very traumatic for victims. In some cases the client may tell their trauma story, and then be rejected and have to repeat the process of telling their trauma story to other housing providers. Several advocates expressed concern that the housing intake process can require survivors to tell their trauma story over and over while they try to find beds. Other advocates have shared that intake processes ask unnecessarily invasive personal questions that can be triggering or disruptive to the survivors. When this happens, clients may be unable to continue the housing search or may choose to stop seeking housing.

*Go to page 33
to learn about
ways providers and
advocates are working
together to improve
the housing
process for trafficking
survivors!*

INTAKE REQUIREMENTS

Is this a low barrier program?

Intake processes often ask a series of questions about a person's identity, history, habits, and health to determine whether they are a good fit for a program. Some programs are low barrier, meaning they have few requirements to enter housing, while others are higher barrier, meaning they have strict guidelines about who can and cannot access their housing program. Below are several examples of intake barriers that can prevent a survivor from being accepted into a housing program.

CRIMINAL HISTORY

Only 1 responding housing provider required a background check during intake (although it's important to note that most providers serving youth are given client history information by the child welfare system prior to intake.) Some housing providers may not be able to serve registered sex offenders due to the location and proximity to children also housed in the programs. We know that some trafficking survivors may have a criminal record as a result of their trafficking situation. Excluding a background check from intake allows clients with criminal records to seek housing without the blame and shame of focusing on justice system involvement.

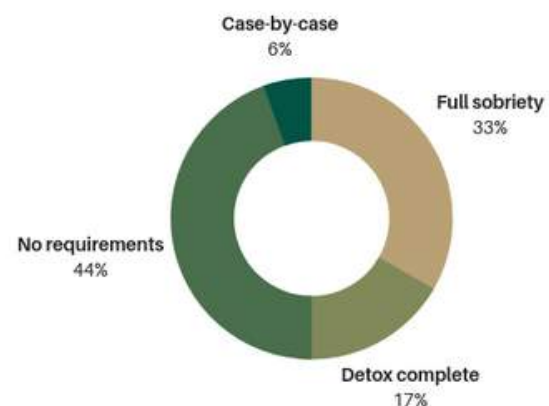
COOPERATION WITH LAW ENFORCEMENT

28% of housing providers always or on a case-by-case basis require residents to cooperate with law enforcement in order to access housing. Many survivors do not want to report their trafficking experience to law enforcement, so this can be a barrier to accessing housing.

SUBSTANCE USE

There is a strong relationship between type of housing and restrictions related to sobriety. **All housing providers that are not emergency (such as group homes, transitional, and long term) require some form of sobriety or detox prior to entering housing.** Half of emergency shelter providers also have sobriety or detox requirements- severely limiting housing options for survivors with substance use disorders. Several housing advocates expressed that this is a barrier for many survivors.

Intake Requirements:
Drug Use Policy for Housing Providers



SCREENED OUT: Who qualifies for housing?

Housing advocates reported that some survivors were not making it through the intake process based on their life experiences and their identities. Here are two examples of issues that can prevent a survivor from being accepted into housing.

BEHAVIORAL HISTORY

100% of the housing providers stated that survivors who had previously been in their housing program had the possibility to be re-admitted into the program, depending on the circumstances.

Advocates serving youth allege that some youth housing providers will not take clients who have a history of running away from housing programs, or will not take clients who have a history of causing disturbances in other programs. Given the nature of complex trauma, these behaviors are common in trafficking survivors. Strict rules related to behavior can keep a housing environment safe and secure for the clients in the program, but they can also be barriers for survivors to access housing.

MENTAL HEALTH

Many trafficking survivors are living with complex post-traumatic stress disorder, depression, anxiety, or other mental health issues that can impact the way they interact with others. 100% of housing providers said they take clients with chronic behavioral or mental health issues- however, 67% said this was on a cases-by-case basis. Housing providers generally use these exceptions for cases when the client may be a danger to themselves or the other residents of the home. Access to in-patient mental health facilities is limited in Louisiana. As a result, in some cases survivors are unable to be housed as a result of their mental health.

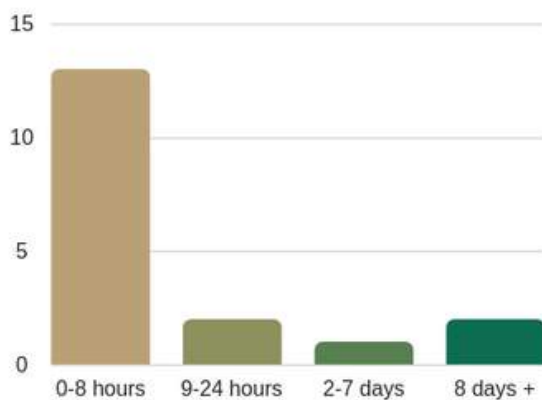


INTAKE DURATION

How long will this intake be?

HOUSING PROVIDERS

Average Length of Intake Process for Housing Providers



There was a strong relationship between the type of housing and the length of time for the intake process. 100% of emergency shelter providers stated they take 8 hours or less to complete the intake process, while 83% of non-emergency housing providers take more than 8 hours to complete the intake process.

Our data collection illuminated a disconnect between housing provider and housing advocate satisfaction with intake duration.

HOUSING ADVOCATES

Advocates surveyed listed the housing process taking too long as the second most common barrier to housing for the survivors they serve. Housing advocates identified a number of ways the housing process was slowed down. Some examples shared by housing advocates are:

- Survivors frequently will complete an entire intake process, only to find out that they do not fit the program requirements or that beds are unavailable. The client then has to repeat the intake process with a new program, or will have to wait until a bed is available for them.
- Other systems involved in placement such as the justice system or child welfare can slow the process.
- Survivors may be required to provide identification or other documents, which they do not always have available (trafficking often take these documents away as a means of control).

The factors that slow the housing process create barriers to housing. The more rejections or roadblocks that survivors face, the more discouraged they can get while attempting to access housing. Additionally, the longer the housing process takes, the more time survivors may be stuck in dangerous situations. **For some survivors, the process is so discouraging and difficult to navigate that they will stop attempting to access housing.**

ACCESSIBILITY

Can you accommodate me?

LANGUAGE ACCESS

28% of housing providers have bilingual language capacity. 5 providers have staff who can speak Spanish, and other languages available through the housing providers include: Tagalog, Vietnamese, and German. Though housing providers have access to language lines and other tools to complete the intake process for non-English speaking clients, if a shelter does not have bi-lingual staff, survivors may not be able to access the housing. Once in housing, lack of language access can lead survivors to feel isolated, confused, or unwelcome.



PEOPLE WITH DISABILITIES

83% of shelters identified that they are compliant with the Americans with Disabilities Act (ADA) standards for people with limited mobility, or could accommodate a client with physical disabilities. If shelter is not ADA compliant, the setting will not be suitable for a survivor with physical disabilities or a person who is wheelchair bound. Advocates noted that members of the deaf community and people with developmental disabilities may have issues finding culturally appropriate options. **Future research is necessary to understand the communication and cultural barriers for this population during the process phase.**

More than a process problem

Accessibility is not just a consideration for the process phase of housing. This can be an issue during the service phase as well. Survivors may be admitted to a program that does not have staff or logistical support for their needs, and this could impact their likelihood of staying in the program. If a survivor feels isolated, confused, or that their needs are not being met, they may leave the housing program to find a different option that addresses their needs. Sometimes, that means the survivor feels their only option is to return to their trafficking situation.

BED AVAILABILITY

Do you have any beds available?

HOUSING PROVIDERS

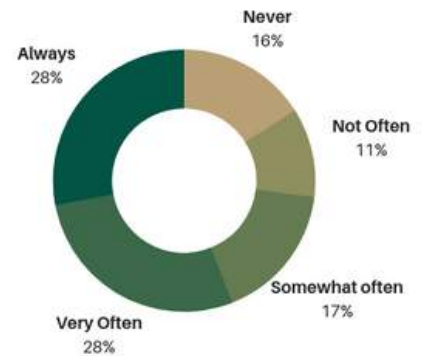
More than half of housing providers said they are always or very often full (56% of the housing providers). There was no conclusive relationship between the type of housing (emergency versus long term housing) and how often it is full. There may be a relationship between sobriety requirements and how often a shelter is full- in shelters where sobriety or detox were not required, 83 percent were often or always full.

Interestingly, all of the housing providers who stated they are “always full” serve adults, while all of the housing providers who stated they are “never full” serve youth. 60% of adult-only shelters reporting being “often or always full,” whereas 60% shelter providers serving children responded that they were not often or never full.

HOUSING ADVOCATES

82% of housing advocates who responded to our survey cited lack of beds as a barrier to housing for the clients they serve- making it the mostly commonly cited barrier to housing for trafficking survivors. Advocates serving all different age groups stated that bed availability was a barrier for trafficking survivors.

How Often Housing Provider Beds are Full or At-Capacity



What does this mean?

This could suggest that there is a higher demand for adult beds than for youth beds. However, there may be other explanations why youth shelter providers are not at-capacity as often as adult programs. Other explanations for this could be: more total beds are available for children, high barriers to enter programs, and issues with child welfare system/ housing placement system. *Further research is necessary to explore whether youth or adult housing is full more often.*

WHAT ARE THE CHALLENGES YOUR CLIENTS FACE WHEN TRYING TO ACCESS HOUSING?



The emergency beds are full so often- it can take 5-10 calls just to find a bed... Resources are stretched so thin that clients don't get housing when they need it.

HOUSING ADVOCATE

INNOVATION: Improving the intake process to benefit survivors

Some housing providers and housing advocates have created systems to work together to streamline the housing process. 83% of housing providers allow the intake process to be conducted over the phone. 89% of housing providers allow case managers or housing advocates to call on behalf of survivors to inquire about housing availability. This can be a tool to minimize the number of times that survivors are required to share their trauma story. One caveat for some providers is that they require survivors speak directly to staff prior to admitting them into the housing program to ensure the survivor is not being forced into a program they do not wish to enter.

WHAT ARE THE SUCCESSES YOUR CLIENTS HAVE HAD IN THE HOUSING PROCESS?

“

When, as an advocate, I can call in my network and use those relationships to speed up the housing process for the client.

HOUSING ADVOCATE

STREAMLINING HOUSING TRIAGE:

Using networks to speed up the housing process

In Greater New Orleans, providers serving adults have teamed up to streamline triage for emergency homeless shelter services. Unity Continuum of Care, STAR, New Orleans Family Justice Center, Metro Center, Covenant House, and the GNOHTTF teamed up to create a new process to triage housing for people fleeing violence within the homeless services continuum of care. This process aims to ensure people fleeing violence- including trafficking survivors- have immediate access to emergency shelter. Some housing providers in this collaborative have committed to sharing resources and speeding up the housing process.

SERVICE

Inside the door



Service is the point after a client has identified housing (in the access phase), and been approved for entering housing (in the process phase).

We visualize this phase as the point when the survivor is accepted at the door, and has been invited inside. The story does not end once the survivor has 'walked through the door'- the service phase of housing is an ongoing experience. The client may exit the housing abruptly, graduate or move on to a longer-term housing program, or may have new needs that arise over time.

This phase of the housing process includes program rules, required activities, services available to survivors, and safety measures.

In this section:

- Services available
- Program requirements
- After housing

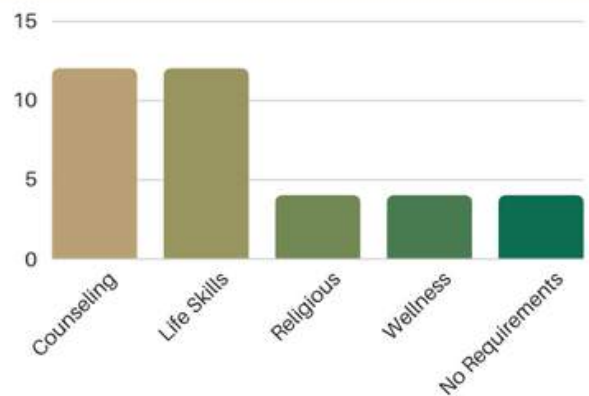
PROGRAM REQUIREMENTS

What do I have to do to stay?

Required activities for survivors in housing programs varied widely. For some survivors, required activities can create structure as they enter a new phase of their lives. For other survivors it can be challenging to adhere to program requirements. **All the housing providers that did not provide emergency housing had at least one required activity, and the majority of emergency housing providers had required activities.**

Required activities included: counseling/therapy, life skills activities (educational activities, professional development/vocational, mentorship, etc.), religious activities (bible study, church services, etc.), and group or wellness meetings for residents. Nearly every program required that clients in their housing program engage in

Required Activities in Housing Program



counseling or therapeutic activities and life skills activities. It is worth noting that state-funded domestic violence programs are not allowed to require activities of residents.



RULES

What rules do I have to follow?

Rules and regulations make housing environments safe, and can help build life skills for residents. However, these rules can be challenging for some residents to follow. Here are two examples of rules in housing settings for trafficking survivors.

CURFEW

89% of housing provider had restrictions on curfew for residents of their housing programs. Particularly for youth housing providers, these restrictions are required by child welfare regulations. For adults however, there were a wide variety of restriction severity and type based on the program.

COMMUNICATION

2 out of every 3 of the housing providers had some restrictions on communication via phone or internet. Communication restrictions included prohibition of cell phones, limited access to cell phones, limited access to landline phones, and limited access to computers and the internet. 39% of housing providers had limits on who could contact clients in housing, 28% had rules that clients would be dismissed or rehoused at a different facility if the client disclosed the housing location to an abuser, and 17% had monitored calling and communication. 33% had no rules about phone use. Limiting survivor communication is a practice that housing providers attributed to safety and client stability in programs, while housing advocates and survivors view this practice as restrictive.

Do rules and restrictions impact how often a shelter is full?

When we compared shelter fullness information with program restriction factors, there was not a significant relationship in the housing provider survey. [Learn more on the next page.](#)

LIFTED RESTRICTIONS OVER TIME

Many of the housing providers with restrictions reported that they allow clients to have fewer restrictions after a grace period or period of trust-building. This is a way that housing providers create structure and set boundaries, and also give survivors more freedom as they move through their recovery process.

PROGRAM RIGIDITY:

Concerns with rigid program requirements

Housing advocates expressed concern over programs with rigid requirements and rules. **When we coded the housing advocate responses about challenges during the service phase of housing, we found that “too strict” was a highly mentioned issue.** Examples of requirements that advocates cited as barriers for clients were: communication limitations, curfews, and required activities. One common response from housing advocates was that faith-based programs with required religious activities are particularly difficult for clients to comply with. Another common response was that rules related to client behavior incidents were causing clients to be discharged from housing programs. Advocates viewed this as concerning, because clients may display aggressive behavior or negative responses because of trauma or mental health issues.

Though logically it may seem from advocate feedback that shelters that require participation as a condition of housing may be less popular than those that do not, the housing provider crosstabulation analysis between required participation in activities and how often a shelter is full did not give any indication of a relationship. And certainly, the percentages (75% of shelters that have no required participation are often or always full as opposed to only 46% of shelters that do require participation) suggests there may be differences. This analysis should be taken as anecdotal evidence, not statistical.

ALTERNATIVE HOUSING APPROACHES

Taking a human rights based approach to housing is one way to improve housing access, process, and service for all survivors. A rights-based approach places a survivor's priorities and narrative at the center of anti-trafficking work. The model relies on voluntary, non-judgmental assistance with an emphasis on self-determination to best meet survivor's short- and long-term needs, and is a lower barrier approach that meets survivors where they are when they are ready to access housing [4].

The housing **rules and requirements can be very strict**, which means the client ends up leaving or getting kicked out for 'bad behavior'. Then the client is back at square one trying to find emergency shelter.

HOUSING ADVOCATE

[4] *Human Rights Based Approach in Housing for Survivors of Human Trafficking*, Freedom Network Training Network (2019).
<https://freedomnetworkusa.org/app/uploads/2019/02/Human-Rights-Based-Approach-Fact-Sheet-Final.pdf>

SAFETY

Am I safe here?

Survivor safety is an important component of the stabilization process. Feeling safe and secure can give space for survivors to focus on healing.

A safe place is a place where survivors can heal and thrive. Given the danger that survivors may face after they leave a trafficking situation, resident safety is an important component of a stable housing program. **Security measures were present in every shelter that responded to our survey.** The most common security measure in the client housing setting was security cameras, followed by controlled door entry (locked doors, buzz-in doors, door alarms, or a gated entrance), undisclosed location of shelter, security guards or 24-hour safety personnel, security alarms, and de-escalation and crisis intervention training for staff. For the housing providers, safety was a major component of success with clients. **Keeping clients safe was the third most common 'biggest success' housing providers said they have had with trafficking survivors.**

Some housing providers have undisclosed locations to further protect their residents from harm at the hands of abusers and/or traffickers. 28% of housing providers had rules that survivors would be dismissed or rehoused at a different facility if the client disclosed the housing location to an abuser.

Interestingly, none of the housing providers mentioned safety planning in their safety & security options. However, the survey did not ask a question about this topic, so this would be an important topic to explore in future assessments.

Keeping clients safe was the third most common success housing providers said they have had working with trafficking survivors.

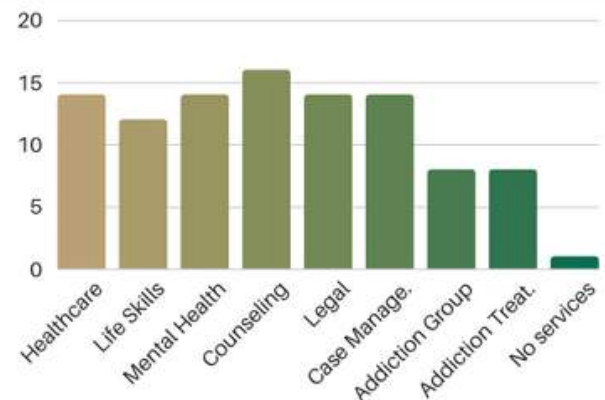
ACCESS TO SERVICES

What services can I get while I'm housed?

Housing providers offer a variety of services to clients in their programs. Services can be an important component of client stabilization. **Stabilization is a process of helping survivors feel more safe, addressing basic needs, and addressing the survivor's acute needs.** Stabilization for trafficking survivors can often include medical care, addiction treatment, counseling and trauma therapy, basic needs like sleep and food, and legal services. 89% of housing programs offered access to counseling and trauma therapy. 78% of housing providers offered healthcare, life skills, behavioral and mental health, legal services, and case management. Other services provided were addiction groups/AA, addiction treatment, and immigration services. Only one housing provider did not offer services to survivors in housing. According to advocates, survivor experiences with support services in housing programs varied considerably. Lack of trauma-informed care and therapeutic services were a concern for some advocates. However, other advocates expressed that survivors have had positive experiences with services.

The two top successes that housing providers identified about housing survivors were providing short and long term stability. Long term stability included finishing the program, returning to 'normal' life, or reintegrating into life with a family unit. Short term stability emphasized the basic needs of client's safety and security being met. Advocates echoed this sentiment: stabilization was the most common success shared by housing advocates. **Client stabilization in housing is one of the few topics that housing providers and advocates agreed upon.**

Services Available in Housing Programs



WHAT ARE THE SUCCESSES YOU HAD AFTER BEING PLACED IN HOUSING?

“

Being able to connect to services while in shelter

SURVIVOR



AFTER HOUSING

What happens when I leave here?

Both housing providers and advocates identified clients exiting the programs prematurely as a common occurrence, and also a cause for concern.

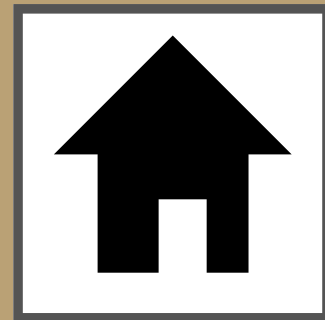
There are a variety of reasons why survivors might leave a housing program. Survivors may leave a program abruptly prior to finishing, or may finish the program and need to transition to another housing option. All of the housing providers reported that they allow clients who have previously exited a program or been asked to leave a program reenter the program. Some had strong requirements or low rates of re-admittance. However, the opportunity for clients to return to housing is encouraging because conventional knowledge understands that survivors often return to exploitative situations several times. The most common challenge that housing providers identified about housing trafficking survivors is that many prematurely exit the program (running away, relapsing, or returning to their abuser).

However, most housing providers viewed clients leaving housing as a normal part of the process. Long term housing providers particularly did not identify 'completing the program' as a goal. This perspective may not align with housing advocate and survivor goals for longer term, stable housing.

The most common challenge that housing providers identified about housing survivors is that many prematurely exit housing programs (either running away, relapsing, or returning to their abuser).

CONCLUSION

Opening doors



This report is an attempt at radical transparency about the survivor housing landscape in Louisiana. So what did we learn, and what more do we need to improve? To open doors for more survivors of trafficking, we need to consider how housing provider and advocate perspectives overlap and contrast.

In this section:

- Conclusions
- Future research topics
- Changes since this survey
- Contact information

CONCLUSION

What did we learn from housing providers?



Housing providers gave us important information to understand the housing landscape for trafficking survivors in Louisiana.

Although there are limited specialized housing options for trafficking survivors, housing providers from other movements have stepped up to serve trafficking survivors. All of the specialized beds for trafficking survivors serve either female or female-identifying sex trafficking survivors. Individuals who identify as male, trans/non-binary/non-gender conforming, labor trafficking survivors, or adults who have children accompanying them are unable to access specialized housing services in Louisiana.

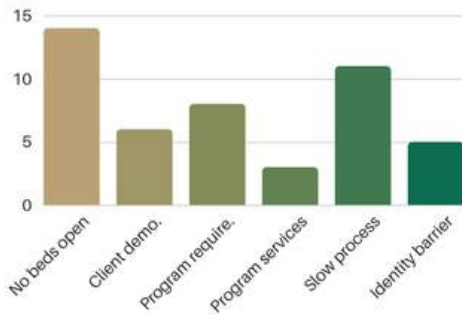
More than half of housing providers said they are always or very often full (56% of the housing providers). The majority of housing providers are able to complete intake for survivors in less than 8 hours. Most housing providers expressed the ability to take certain clients outside of their normal service demographics on a case-by-case basis.

Housing providers felt that their top successes serving trafficking survivors were short term stability, long term stability, and keeping clients safe. The top challenge identified by housing providers was that clients often leave their programs prematurely.

CONCLUSION

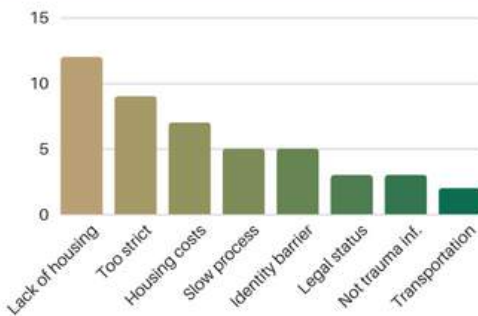
What did we learn from housing advocates?

Housing Advocates:
Most Common Survivor
Housing Barriers



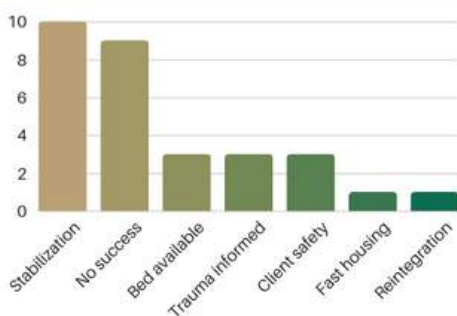
Housing advocates provide a unique perspective into the experience of all different survivors- including the experiences of those who do not successfully enter housing programs.

Housing Advocate Responses:
Most Common Survivor
Housing Challenges



Housing advocates overwhelmingly shared challenges in the housing process. When we coded housing advocate responses about successes in the housing process, the second most common answer was no success.

Housing Advocate Responses:
Most Common Survivor
Housing Successes



Housing advocates reported that a large portion of the survivors they serve are not making it into housing programs at all. Lower barrier shelter options, and housing that serves a more diverse range of identities and life experiences, should be a topic for future dialogue and research to explore. Feedback from housing advocates indicate that there are many barriers for trafficking survivors seeking housing who do not fall into a specific identity group.

CONCLUSION

What did we learn about the survivor housing system in Louisiana?

This project illuminated points of overlap and points of tension between key stakeholders in the survivor housing system.

Stabilizing survivors was identified as top success for housing advocates and providers.

Housing providers and advocates had differing perspectives on many topics, but they did agree on one thing: stabilizing survivors was a top success within the housing system. The two top cited successes that housing providers identified were providing short and long term stability. When we coded housing advocate responses, client stabilization was the most common success.

There are contrasting opinions between housing providers and advocates on key housing issues.

This report illuminated a contrast between the experiences of housing providers and housing advocates in the process of housing survivors. Important topics that highlighted the contrasting points of view include: perceptions of bed availability and shelter fullness, intake process speed and accessibility, program rigidity and intake rigidity.

Bed and housing availability are key issues in Louisiana.

This housing project confirmed what housing providers and advocates already have identified: there are not enough housing options available to trafficking survivors in Louisiana. Housing is particularly needed for labor trafficking survivors, males, and trans/non-binary/gender non-conforming people. Further research is necessary to understand the discrepancy between shelter provider fullness and housing advocate perspectives on shelter fullness.

RECOMMENDATIONS

What can we do with this information?

This is the beginning of a data-informed conversation about housing for human trafficking survivors. Here are some ways that the community can take steps to build upon this information.

- **Convene a summit** with key stakeholders (survivors, housing providers, advocates) to discuss the success and gaps identified in this report to discuss ways to improve survivor outcomes in the housing process.
- **Implement this housing project** for a second iteration in 2-3 years to see how the landscape has changed in Louisiana.
- **Apply for funding** to support the expansion of existing housing programs or development of trauma-informed, survivor-centered housing programs that serve trafficking survivors- particularly those who do not currently have specialized housing options.
- **Support future research** that explore topics identified as key issues in this report, such as: how often shelters are full or at-capacity, which client demographics are successfully accessing housing, what housing success looks like for trafficking survivors and providers, and what alternative housing options (outside of the housing service provider landscape assessed in this report, such as therapeutic foster care programs) are available to trafficking survivors.
- **Conduct program evaluations** of existing housing programs to understand client outcomes in the service phase of the housing process, and assess potential opportunities to improve housing accessibility and outcomes for survivors.
- **Host focus groups** with trafficking survivors and at-risk community members to collect data on individuals who have not successfully accessed housing, with the goal of: integrating survivors expertise into the housing dialogue, identifying barriers in the housing process, and examining opportunities to improve access for all survivors.



HOUSING LANDSCAPE CHANGES

What has happened since this project finished?

There have been some positive changes and new developments in Louisiana since the data collection concluded for this project.

NEW SPECIALIZED HOUSING OPTIONS

Since the conclusion of data collection in January 2019, there have been several new specialized housing options that have opened up. Free NOLA opened a respite facility for adult female sex trafficking survivors. Covenant House and the New Orleans Family Justice Center were awarded 60 HUD-funded apartments for rapid rehousing for survivors of sexual assault, domestic violence, and sex trafficking which will be available some time in 2019. Eden House will be opening a second facility for female-identifying sex trafficking survivors, which will add 8 additional specialized beds in 2020.



ADDITIONAL CAPACITY FOR ANTI-TRAFFICKING WORK

In fall 2018, Louisiana was awarded a \$1.2 million dollar grant from the U.S. Dept. of Justice Office for Victims of Crime to improve outcomes for child victims of human trafficking. It will be used to implement a multi-year federal project known as the Louisiana Child Trafficking Collaborative.

In fall 2018, the GNOHTTF had its federal grant from the U.S. Dept. of Justice renewed, ensuring three more years of efforts to combat trafficking. This grant began implementation in February 2019.

In April 2019, New Orleans was chosen by Freedom Network USA to be one of four cities to host a human trafficking housing summit. This summit marks a step to improve community dialogue and collaboration around trafficking survivor housing in the Greater New Orleans community. This summit will take place in Spring 2020.



CONTACT INFORMATION

This report was prepared by the Greater New Orleans Human Trafficking Task Force. For more information on the content of this report or for inquiries regarding the use of content in this report, please reach out via the following methods:



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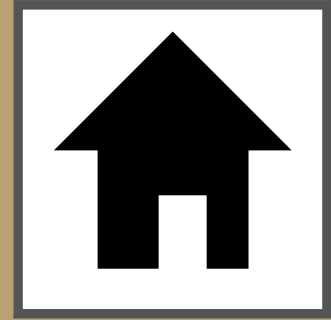
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APPENDIX

Data analysis



Even though the sample size of housing providers who responded to the housing provider survey was somewhat small (N=18), crosstabulations were conducted to determine what, if any, relationships in the data might be emerging and could be further explored with future research.

In this section:

- Appendix A: Crosstabulation Analysis of Housing Provider Survey

Appendix A: Crosstabulation Analysis of Housing Provider Survey

Even though the sample size is small (N=18), crosstabulations were conducted to determine what, if any, relationships in the data might be emerging and could be further explored with future research. The relationships explored below were about the rigidity of the shelter (as far as limitations and requirements for residents) as well as whether or not the shelter was an emergency shelter and various outcomes.

How Often Is the Shelter Full?

Adult Shelters

Only two (25 percent) of the shelters that were for adult clients only were not very often or never full. In other words, 75 percent of the adult only shelters were often or always full. On the other hand, six (60 percent) of shelters that only served or also served youth clients were not very often or never full. The sample size was too small to show statistical significance on this and many other crosstabulation calculations, but compared to the other variable relationship tests, this test produced a p value of 0.18¹. The standard is usually that if a p value is less than or equal to 0.05, then you can say there is a statistically significant relationship. In this case, it might be worth exploring if there is a relationship between youth and adult shelters and how often each are full with further research (either by future studies or with follow up calls to different types of shelters).

		How often is your program full?		Total
		<i>Not very often or never (less than 60% of the time)</i>	<i>Often or always (more than 60% of the time)</i>	
Is this an adult shelter?	No	6 (60%)	4 (40%)	10
	Yes	2 (25%)	6(75%)	8

Fisher's exact test; p=0.188

Sobriety or Detox Requirements

In shelters where sobriety or detox were not required, 83 percent were often or always full. The p value of this test of association was 0.152. Again, there was not enough power to produce statistically significant results, but as compared to the other crosstabulations, there is an indication that there might be a relationship between sobriety requirements and how often a shelter is full. It is something to explore further.

¹ A Fisher's exact test was used to determine the p value on all of these crosstabulations because of the expected small return in each cell.

		How often is your program full?		Total
		<i>Not very often or never (less than 60% of the time)</i>	<i>Often or always (more than 60% of the time)</i>	
What are you requirements related to sobriety of a potential client?	Sobriety or detox not required	1 (17%)	5 (83%)	6
	Sobriety or detox required	7 (58%)	5 (42%)	12

Fisher's exact test; p=0.152

The other interesting potential is that some of these analyses show there is no indication of a relationship between restrictive/rigid traits of a shelter and how often it is full.

Required Participation

Even though logically it may seem that shelters that require participation as a condition of housing may be less popular than those that do not, the crosstabulation between required participation and how often a shelter is full did not give any indication there might be a relationship. And certainly, the percentages (75 percent of shelters that have no required participation are often or always full as opposed to only 46 percent of shelters that do require participation) suggests there may be differences. But this should be taken as anecdotal evidence, not statistical.

		How often is your program full?		Total
		<i>Not very often or never (less than 60% of the time)</i>	<i>Often or always (more than 60% of the time)</i>	
Are clients required to participate in any activities?	No	1 (25%)	3 (75%)	4
	Yes	7 (54%)	6 (46%)	13

Fisher's exact test; p=0.576

Cooperation with Law Enforcement

Another logical assumption might be that shelters that require their clients to cooperate with law enforcement (whether they always require it or it is on a case-by-case basis) would be less popular than those that never require it. Indeed, the anecdotal evidence from the breakdown of percentages below is that a larger percentage (62 percent) of shelters that do not require client

cooperation with law enforcement are often or always full versus those that always or sometimes require participation (40 percent). But this relationship needs more exploration and evidence before any claim could be made or suggested.

		<u>How often is your program full?</u>		Total
		<i>Not very often or never (less than 60% of the time)</i>	<i>Often or always (more than 60% of the time)</i>	
Does your organization require that a person seeking your services has cooperated with law enforcement or filed a report against an abuser?	No	5 (38%)	8 (62%)	13
	Yes or Sometimes, depends on case	3 (60%)	2 (40%)	5

Fisher's exact test; p=0.608

Intake Process (length of time)

The burden of entering a shelter just based on the length of intake time could also be related to how often a shelter is full. It stands to reason that shelters that have less intake time might be more popular, and therefore, more often full. However, the data collected in this survey shows a pretty even split between shelters that take eight hours or less versus those that take more than eight hours for their intake process and how often they are full.

		<u>How often is your program full?</u>		Total
		<i>Not very often or never (less than 60% of the time)</i>	<i>Often or always (more than 60% of the time)</i>	
Approximately how long on average does it take to complete the intake process for a client/patient?	8 hours or less	6 (46%)	7 (54%)	13
	More than 8 hours	2 (40%)	3 (60%)	5

Fisher's exact test; p=1.000

Communication Restrictions

Like with intake process time, there is a fairly even split between shelters that have no restrictions on their clients' communication with outside persons versus those that indicated some level of restriction and how often they are full.

		How often is your program full?		Total
		<i>Not very often or never (less than 60% of the time)</i>	<i>Often or always (more than 60% of the time)</i>	
Are there any restrictions on communication?	No restrictions	2 (40%)	3 (60%)	5
	Some limitations	6 (46%)	7 (54%)	13

Fisher's exact test; $p=1.000$

Children Permitted with Client

There are three children and youth (under 18 years of age) only shelters, and initially it seemed that those shelters should be removed from this analysis, but children under the age of 18 sometimes do have children of their own, so those shelters were left in the analysis. However, there seems to be no distinction (anecdotal or otherwise) of any difference between shelters that allow clients' children to accompany them versus shelters that do not and how often the respective shelters are full.

		How often is your program full?		Total
		<i>Not very often or never (less than 60% of the time)</i>	<i>Often or always (more than 60% of the time)</i>	
Are children accompanying clients permitted?	No	3 (38%)	5 (62%)	8
	Yes or sometimes, depends on case	5 (50%)	5 (50%)	10

Fisher's exact test; 0.664

Emergency versus Non-emergency Shelters

How does the type of shelter (emergency or not) affect how often shelters are full as well as what types of requirements or restrictions are imposed by shelters? These relationships are explored below and even with a small dataset (N=18), some statistically significant relationships were found: Relationship between type of shelter and intake time as well as detox/sobriety requirements. These relationships may seem like common sense, but it is useful to have data to confirm these assumptions.

Type of Shelter and How Often Full

Half of the shelters that provide emergency housing reported that they were not very often or never full. It may seem intuitive to think that those that provide emergency housing shelter would be the shelters that were full often or always, but the data provided do not suggest this. While only 2 (33 percent) of the shelters that did not provide emergency housing were not very often or never full, it should not be concluded that the type of housing (emergency or not) impacts how often a shelter is full. But if more data can be collected in future studies, it is a relationship that could be explored.

		How often is your program full?		Total
		<i>Not very often or never (less than 60% of the time)</i>	<i>Often or always (more than 60% of the time)</i>	
Does your shelter provide emergency housing?	Does not provide emergency housing	2 (33%)	4 (67%)	6
	Provides emergency housing	6 (50%)	6 (50%)	12

Fisher’s exact test; p=0.638

Type of Shelter and Sobriety/Detox Requirements

Technically, if we are using the standard of $p < 0.05$, then this relationship is not statistically significant, but for a dataset that cannot produce much statistical power, a p value of 0.054 is “significant.” And the distinction is clear. All of the shelters that *do not* provide emergency housing have a sobriety or detoxification requirement. That makes common sense, but the data confirm this. Half of the shelters that provide emergency housing have a sobriety or detox requirement and half do not.

		What are your requirements related to sobriety of a potential client?		Total
		<i>Sobriety or detox not required</i>	<i>Sobriety or detox required</i>	
Does your shelter provide emergency housing?	Does not provide emergency housing	0	6 (100%)	6
	Provides emergency housing	6 (50%)	6 (50%)	12

Fisher’s exact test; p=0.054

Type of Shelter and Intake Time

Another relationship that makes common sense and is borne out by the data is that all of the shelters that provide emergency housing have intake times of 8 hours or less. Only one of the shelters that did not provide emergency housing had an intake time of 8 hours or less. The relationship is obvious and statistically significant.

		Approximately how long on average does it take to complete the intake process for a client/patient?		Total
		<i>8 hours or less</i>	<i>More than 8 hours</i>	
Does your shelter provide emergency housing?	Does not provide emergency housing	1 (17%)	5 (83%)	6
	Provides emergency housing	12 (100%)	0	12

Fisher's exact test; $p=0.001$

Type of Shelter and Participation Requirements

All of the shelters that do not provide emergency housing have a participation requirement. More than half of the shelters that provide emergency housing have this requirement. The relationship is not statistically significant, but it seems there is possibly a relationship here and more data in future studies could confirm this relationship. The relationship makes sense. Shelters that are for transitional or long term purposes likely want their clients to participate in activities such as counseling or life skills are looking to provide tools to clients for long term success. Also, this may be a way for a shelter to encourage buy-in from the client.

		Are clients required to participate in any activities?		Total
		<i>No</i>	<i>Yes</i>	
Does your shelter provide emergency housing?	Does not provide emergency housing	0	6 (100%)	6
	Provides emergency housing	4 (36%)	7 (64%)	11

Fisher's exact test; $p=0.237$

Type of Shelter and Cooperation with Law Enforcement

While only a couple of the shelters that provide emergency housing require that their clients cooperate with law enforcement, and half of those that do not provide emergency housing do (or sometimes do depending on case), more data are needed to determine if there is a relationship between type of housing provided and any requirement to cooperate with law enforcement.

		Does your organization require that a person seeking your services has cooperated with law enforcement or filed a report against an abuser?		
		<i>No</i>	<i>Yes or Sometimes, depends on case</i>	Total
Does your shelter provide emergency housing?	Does not provide emergency housing	3 (50%)	3 (50%)	6
	Provides emergency housing	10 (83%)	2 (17%)	12

Fisher's exact test; $p=0.268$



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