



Frontline Workers' Perceptions of Human Trafficking: Warning Signs and Risks in the Midwest

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ABSTRACT

Research on human trafficking in the U.S. has centered overwhelmingly on coastal regions, border states, and urban hubs. In an attempt to understand perceptions of exploitation and human trafficking more broadly, this paper focuses on frontline workers in the Midwest. Service providers in the legal/law enforcement, medical, non-profit, social service, and foster care sectors often encounter exploited or trafficked persons in their work. Their perceptions offer a unique insight into how trafficking may manifest and how frontline workers interface with vulnerable, exploited, or trafficked persons seeking resources or assistance. Using survey data from 667 participants across two Midwestern states, we find important similarities in perceived trafficking warning signs and risk factors, as well as differences in how these providers can address their clients' immediate needs. We present these findings through both descriptive statistical summaries of questions regarding micro-level and macro-level trafficking factors and qualitative data from a set of open-ended survey questions. Results indicate the need for better site-specific policy to address the nuances of anti-trafficking work across the Midwest.

KEYWORDS

Human trafficking; Midwest; warning signs; risk factors; street-level bureaucracy

1. Introduction

Since the 2000 passage of both the Trafficking Victims Protection Act (TVPA) and the UN's Palermo Protocols, human trafficking has gained a notable global presence as a human rights concern. Countless non-government organizations (NGOs) and non-profits, government researchers, scholars, policymakers, legislators, law enforcement officers, and religious organizations have programs in place to protect survivors, prosecute traffickers, and prevent trafficking from occurring. However, this influx of efforts is not without concern, as human trafficking is notoriously challenging to document and quantify (Merry, 2016). Within the United States, estimates of trafficked persons range from 527 survivors identified through prosecuted cases (U.S. Department of Justice, 2011); 5,544 potential survivors addressed on an anti-trafficking tip hotline (National Human Trafficking Resource Center, 2016); and 44,000 trafficked men, women, and children named in the *Trafficking in Persons Report* (U.S. Department of State, 2014).

While anti-trafficking advocacy, education, and awareness thrives globally and in the U.S., many people do not think it happens in their own communities, especially in rural areas. Trafficking remains an urban problem in the dominant discourse, reinforcing particular stereotypes of human trafficking as thriving in major global cities or along transit hubs (Center for Court Innovation, 2013; Dank et al., 2014; Owens et al., 2014; Srikantiah, 2007; Weitzer, 2014; Zhang, Spiller, Finch, & Qin, 2014). Indeed, much of

what Kempadoo (2015) suggests was the first generation of contemporary human trafficking scholarship focused primarily on trafficking as a global problem and on foreign-born survivors who were moved across national borders. The second push of trafficking scholarship has concentrated more on understanding domestic survivors of trafficking – both in the US and elsewhere (Chuang, 2014). This new focus on more site-specific research answers the call for more empirically rigorous and context-rich scholarship (Weitzer, 2014). Heil and Nichols (2015) argue that “much of the Midwest is overlooked when discussing domestic human trafficking” in favor of larger, urban cities or Southern, border states (p. 5). This regional oversight fails to account for the ways Midwestern communities may be susceptible to trafficking through structural inequalities that perpetuate vulnerability or geographic proximity to interstate highways and international airports (Wilson & Dalton, 2007). This article extends previous scholarship on human trafficking in the Midwest (Cole & Sprang, 2015; Heil & Nichols, 2015; Moser, 2015; Ozalp, 2009; Rajaram & Tidball, 2018; Schwarz & Britton, 2015; Williamson & Prior, 2009; Wilson & Dalton, 2007) by focusing on perceptions and manifestations of trafficking in this region.

Using survey results from 667 frontline workers¹ who work with exploited or trafficked persons, this project adds to the growing body of research on human trafficking in the Midwest. The findings of this study indicate that place and location generally matter in anti-trafficking efforts. Specifically, service providers identified micro-level warning signs and macro-level risk factors with a great degree of similarity across region and sector of work. Since human trafficking occurs across geographic spaces, contrary to the dominant narrative that trafficking is exclusively occurring in coastal hubs or border states, there can be shared sites of identification and assistance efforts that target these mutual concerns. Additionally, when including survey participants’ open-ended responses, the nuances of Midwestern anti-trafficking efforts become clearer. These findings point toward the need for better site-specific policies that address differences in resource gaps and accessibility, both within the Midwest and across urban and rural geographies.

2. Street-Level Bureaucracy in Anti-Trafficking Work

According to the TVPA, severe trafficking in persons is defined as commercial sex or labor induced by fraud, force, or coercion. The requirements for force, fraud, or coercion do not exist for individuals under the age of 18; any and all commercial sex performed by minors is legally considered sex trafficking. Importantly, the TVPA explicitly defines sex trafficking separately, as “the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act” (U.S. Department of State, 2000). There is no explicit parallel for labor trafficking in the definitions; labor violations are nested within the definition for severe trafficking in persons. Across the US, each state has the latitude to implement more detailed legislation beyond the TVPA, creating a policy environment where trafficking can be defined and punished differently across state lines or jurisdictions (Polaris Project, 2014). In sum, the landscape of trafficking definitions can be complicated and muddled even for the most well-trained anti-trafficking advocates, as conflicting state-level definitions and limited understandings of labor trafficking are embedded within the policies themselves.

Current research on human trafficking has explored the role of law enforcement officials (Farrell, McDevitt, & Fahy, 2010; Farrell, Owens, & McDevitt, 2014; Farrell & Pfeffer, 2014; Musto, 2013), medical providers (Becker & Bechtel, 2015; Greenbaum & Crawford-Jakubiak, 2015; Miller, Decker, Silverman, & Raj, 2007; Patel, Ahn, & Burke, 2010), and NGO and social service providers (Baye & Heumann, 2014; Busza, 2004; Durgana, 2013; Musto, 2008). These studies indicate that – across sectors – these frontline workers are frequently the first contacts vulnerable or trafficked persons may make as they attempt to leave or are removed from exploitative situations. Additionally, service providers frequently struggle with the challenges of identification, especially in the face of institutional norms (Farrell et al., 2010; Farrell & Pfeffer, 2014), limited trafficking-specific resources (Musto, 2013),

¹We use “street-level bureaucrat,” “frontline worker,” and “street-level worker” interchangeably throughout the text to discuss service providers, as these scholarly terms all encompass individuals engaged in direct service provision.

or moral judgments (Brennan, 2014; Chapkis, 2003; Schwarz & Britton, 2015) that define trafficking in particular ways.

A further complicating factor is the perception of human trafficking as occurring primarily in urban centers, coastal regions, or border states. Studies have shown that human trafficking is understood as an issue of national security (Choi-Fitzpatrick, 2015; Farrell & Fahy, 2009) and can follow transnational criminal networks (Bales & Lize, 2005; Lee, 2011; Omelicheva & Markowitz, *forthcoming*). Yet trafficking also exists outside of these frameworks and does not necessitate cross-border movement. Additionally, since human trafficking is challenging to quantify (Merry, 2016), much public discourse is built on recurrent media constructions and stereotypical notions of victimhood (Bernstein, 2012; Kempadoo, 2015; Srikantiah, 2007) that reinforce this narrative of where trafficking occurs.

With respect to geography, research on human trafficking in the Midwest does not exist to the same scope or scale as in major global cities (Center for Court Innovation, 2013; Dank et al., 2014; Macias Konstantopoulos et al., 2013; Owens et al., 2014; Weitzer, 2014). However, as Wilson and Dalton (2008) write in their study of human trafficking in Ohio, “Although human trafficking is a growing global concern, it is ultimately a problem identified locally” (p. 297). This project takes that cue and seeks to build on the growing body of literature addressing rural and Midwestern geographies while also complicating the conflation of Midwestern geographies as entirely rural spaces (Cole & Sprang, 2015; Heil & Nichols, 2015; Moser, 2015; Ozalp, 2009; Rajaram & Tidball, 2018; Schwarz & Britton, 2015; Williamson & Prior, 2009; Wilson & Dalton, 2007).

For example, Heil and Nichols’ (2015) study of the St. Louis metropolitan area linked the challenges found in this Midwestern region to broader concerns faced by anti-trafficking advocates across the United States. Regardless of regional location, service providers generally face issues with identification and resources for trafficked persons; gaps in services that specifically address trafficking; and perceptions of ideal victimhood that halt prosecutions for traffickers. In their recommendations, Heil and Nichols (2015) call attention to the increased need for more expansive labor trafficking awareness, particularly in rural agricultural areas, which may be even more salient in Midwestern regions with a higher prevalence of rural communities.

Cole and Sprang (2015) found that service providers in rural and micropolitan communities do in fact encounter domestic minor sex trafficking (DMST), but the scale, access to services for trafficked youth, and individual expertise handling these cases differ compared to their professional counterparts in metropolitan areas. Metropolitan areas have more resources – including trafficking-specific task forces, investigation units, and survivor supports – and service providers in these more densely populated areas are more likely to have more awareness of and training on DMST. Similarly, in their qualitative study of survivors of sex trafficking in Nebraska, Rajaram and Tidball (2018) address the general issue of awareness in Midwestern communities. Their participants “felt that the general public thought that sex trafficking only occurred in other countries and not in the United States” (p. 191). By defining trafficking as an international problem, these survivors’ experiences were not legible within their communities and misconceptions about the complexity and violence of trafficking were allowed to proliferate. In the worst manifestations of this lack of awareness, survivors risked judgment or outright disbelief when disclosing their trauma to service providers.

In this study, we chose to focus on street-level workers because of their system-wide knowledge of vulnerability as well as their specific understandings of particular client experiences. These service providers offer both depth and breadth: intimate knowledge of cases they have managed or worked and broader perspectives on how their work fits into larger systems over time. We use Lipsky’s (2010) formulation of street-level bureaucracies to understand the role of service providers in anti-trafficking efforts. According to Lipsky (2010), street-level bureaucrats are “public service workers who interact directly with citizens in the course of their jobs, and who have substantial discretion in the execution of their work” within their agency (p. 3). These bureaucrats are the same service providers analyzed in human trafficking research: “teachers, police officers and other law

enforcement personnel, social workers, judges, public lawyers and other court officers, health workers, and many other public employees who grant access to government programs” (Lipsky, 2010, p. 3). The focus on service providers avoids a number of problems encountered when researching the hidden issue of trafficking. Research specifically targeting survivors of human trafficking runs the risk of re-traumatization as well as limits the scope of study due to the number of identified survivors.

Because of the haziness surrounding quantification and the range of ideologies that inform anti-trafficking efforts, this article examines the perceptions of trafficking that shape how service providers describe their experiences with vulnerable, exploited, or trafficked persons. In the face of these varying definitions and understandings of trafficking, we emphasize the importance of perception: specifically, what forms of trafficking they have identified and which commonly used markers of trafficking identification resonate with their experiences.

3. Methods

3.1. Survey Design and Implementation

To understand the way in which various anti-trafficking sectors in the Midwest characterize the risks and needs of vulnerable and trafficked clients, we surveyed 3,605 service providers in two Midwestern states. The survey tool² was developed based on the research team’s previous semi-structured interview study with frontline workers across a range of sectors in one geographic area (Schwarz & Britton, 2015). The survey allowed the research team to understand the perspectives of a broader range of organizations, as well as the views and ideas of organizations spread across multiple locations and geographies.

In our institutional human subjects approval, the research team agreed to remove specific references to the two Midwestern states in question upon publication of data. However, knowing that anti-trafficking efforts, especially policy creation and implementation, exist differently between states, it is important to provide some general context for site selection. First, both of these states fall within the Census-designated Midwestern region. Both states have major city centers, suburban spaces, and rural communities, offering an interesting regional comparison both within and across states. They also share some commonalities in state budgeting. For example, during the time we conducted this survey, both states were engaged in some degree of defunding their social service and education sectors. At the same time, both were also increasing their anti-trafficking efforts through state-level policies, work groups, and task forces.

One major difference between these two states is the historical focus on human trafficking – one state took pride in itself as a leader in anti-trafficking efforts while the other was attempting to implement some collaborative teams for the first time. Additionally, each state has slightly different approaches for defining and punishing sex and labor trafficking. Given the differences across each state’s policies, if we made reference to this legislation, readers would be able to identify these locations with ease (for example, searching for all states that use a particular punishment for domestic minor sex trafficking or a specific definition for traffickers). However, speaking in general terms, one state had a more robust policy framework for prosecuting and arresting traffickers, rooted in its longer anti-trafficking precedents. While the other state in this project had less complicated frameworks for anti-trafficking prosecution, it did have a more expansive definition of trafficking at the time of the survey by including online advertisements for commercial sex as a component of sex trafficking.

The survey took place from July to September 2016, with service providers in five different sectors: legal services and law enforcement, non-profit organizations, medical providers, social services, and foster care (see [Table 1](#) for the response rates). The research team developed an original database of service providers from the two states and sent unique surveys links to

²The full survey tool is available upon request of the corresponding author.

Table 1. Survey response rates.

<i>Sector</i>	Surveys Received	Surveys Distributed	Response Rate
<i>Medical</i>	116	474	24.5%
<i>Legal/Law Enforcement</i>	149	1073	13.9%
<i>Non-Profit</i>	90	316	28.5%
<i>Social Service</i>	42	142	29.6%
<i>Foster Care</i>	270	1600	16.9%
<i>Total Across All Sectors</i>	667	3605	18.5%

respondents to both ensure there was no duplication and determine the response rate for the survey as a whole. The legal services and law enforcement sector included county sheriffs, police chiefs, district attorneys, immigration lawyers, and public defenders. The non-profit sector encompassed a range of advocacy programs, such as immigration rights groups, anti-violence groups, mentorship and youth initiatives, and community-based organizations. The non-profit pool was created using service provider lists publicly available from states, including lists from the Office of the State Attorney General, universities, and religious organizations, as well as online searches. The medical sector included crisis pregnancy centers; Women, Infants, and Children offices; hospital case managers; SANE/SART nurses; behavioral health centers; and Indian Health Services offices. The social services sector included government offices related to families and children, as well as Court Appointed Special Advocate (CASA) offices. The foster care sector broadly included all direct service providers in the foster care system, as well as many administrators with previous or continued experience in direct service provision.

Before launching the online survey, the research team conducted a beta test of key stakeholders in the anti-trafficking movement and local service providers who were not part of the final survey sample. These testers reviewed the survey questions and offered feedback on the organization and question wording. From this information, adjustments were made to integrate sector-specific language into the survey. For example, participants were asked about “patients” in the medical sector but about “clients” in all other sectors. Other than this difference in phrasing, the questions remained the same across all versions of the online survey.

The online survey launched in multiple waves through July and August of 2016, with the response time frame closing in September 2016. Reminders were sent in two-week intervals to those who had not completed the survey until the window for response ended. Utilizing an automated website for survey hosting, email invitations, and reminder and thank you messages, an individual, unique survey link was sent to each participant for the majority of contacts. This system only changed when our research team was contacted by some specific organizations in the legal/law enforcement and foster care systems. Organizational representatives – usually an administrator or department head – asked to distribute the link themselves through internal listservs or email systems. For example, one organization asked to spread the survey among over 800 employees, all of whom were believed to have experienced first-hand interaction with exploited and/or trafficking victims. This organizational representative believed that the survey would have more currency – and thus more participating service providers – if it were circulated on an internal email chain. Additionally, for privacy purposes, others preferred to forward a survey link to relevant staff members rather than share their email addresses with our research team. To accommodate this request, we created a confidential survey link that these representatives could share internally. Participants’ data were protected in the same manner as those who received an individual survey link directly. Additionally, their managers and administrators would have no recourse to see whether or not they participated in the survey, only that they received the link.

The survey moved through a series of questions about participants’ experience with vulnerability, exploitation, and trafficking. After providing an initial definition of trafficking – using a modified version of the TVPA’s definition of severe trafficking in persons, per the guidance of the beta testers – the survey questions asked if service providers had encountered trafficking or not in their

workplace experiences. Based on their answer to this first question, service providers were sent on three different wings of the survey: questions for those who had not encountered trafficking, questions for those who had encountered sex trafficking (a category that included trafficking of adults and minors), and questions for those who had encountered labor trafficking. Service providers were also asked to gauge the quantity of experiences they had with trafficked persons – both within the past year and over their entire time in the workforce – and to rate the perceived effectiveness of these encounters.

The subsequent questions, while phrased uniquely to reflect providers' experiences with trafficking, fit into three thematic areas: trafficking warning signs that could be identified at the micro-level with specific individuals; trafficking risk factors that exist structurally at a more macro-level; and preventive resources that exist (or need to exist in a larger capacity) within communities. These factors emerged from our previous research (Schwarz & Britton, 2015) and a human trafficking literature review conducted by the research team, particularly scholarship on trafficking risk factors and identification practices (Ahn et al., 2013; Farrell et al., 2010; Macias Konstantopoulos et al., 2013; Musto, 2008; Srikantiah, 2007).

At the end of the survey, participants were invited to answer open-ended questions about clients' barriers to services; intersecting factors of vulnerability and exploitation; unique challenges associated with their jobs; and place-based differences related to working in the Midwest. The long-form responses to these questions illuminate the findings from the multiple-choice section of the survey and provide a more in-depth understanding of how these service providers understand their work. 81 service providers across all sectors (12.1% of respondents) opted to answer at least one of the open-ended questions at the end of the survey.

3.2. Response Rates

Table 1 illustrates the sector-based and total responses rates for the survey. Outside of these numbers, 151 bounced or failed emails across all sectors were received in the Qualtrics system due to incorrect email information or deactivated email addresses.

Out of the 667 survey responses, 205 (30.7%) of these respondents self-identified as working in a rural location, 89 (13.3%) in a suburban location, 136 (20.4%) in an urban location, and 65 (9.7%) in more than one location (172 respondents did not provide location information). Out of these 65 participants, 19 (2.8%) identified as rural/suburban, 5 (0.7%) identified as rural/urban, 13 (1.9%) identified as suburban/urban, and 28 (4.2%) identified as rural/suburban/urban. The higher number of rural respondents reflects the rural composition of Midwestern states in the study. It is important to note that, because survey participants could stop the survey at any time or could choose not to answer a given question, these totals reflect some degree of self-selection and do not add up to the 667 total responses.

Participants were then asked about their encounters with human trafficking per the TVPA framing of trafficking as “the use of force, fraud, or coercion to exploit someone for labor or commercial sex” or “any commercial sexual act performed by someone under the age of 18” (U.S. Department of State, 2000). According to this definition, 357 (53.5%) service providers said they had encountered human trafficking, while 294 (44.1%) service providers had not. We did not ask for respondents to qualify if these identified cases had been charged or prosecuted in a formal context. While later questions asked how service providers received information about the context of trafficking their clients had experienced, we did not limit our participants' responses to only those cases or individuals who had been legally recognized as trafficked. In our previous research, service providers identified a range of harms that they defined as meeting the standards of force, fraud, or coercion (Schwarz & Britton, 2015; Schwarz et al., 2018) without being taken through a full legal process.

Frontline workers who responded in the affirmative were routed to a question regarding the forms of trafficking they had encountered in their work: adult sex trafficking, child sex trafficking (or

Table 2. Participants’ experience with human trafficking.

Form(s) of Trafficking	Number of Respondents
Only Adult Sex Trafficking	46
Only Child Sex Trafficking	121
Only Labor Trafficking	5
Adult Sex Trafficking and Child Sex Trafficking	86
Adult Sex Trafficking and Labor Trafficking	25
Child Sex Trafficking and Labor Trafficking	21
Adult Sex Trafficking, Child Sex Trafficking, and Labor Trafficking	47
Total Across All Forms of Trafficking	351

domestic minor sex trafficking), labor trafficking, or other forms of trafficking beyond these three. Given the structure of this question, service providers could select more than one response if they had encountered multiple forms of human trafficking in their work. [Table 2](#) details a description of the range of responses across all survey participants.

4. Survey Results

In the sections below, we delve into the descriptive statistics for both the micro-level trafficking warning signs and macro-level trafficking risk factors. This two-level approach allowed us to identify the factors that could be isolated to individual clients as well as the systems-wide, structural elements of vulnerability and precarity. We provide summary statistics for these marker variables of human trafficking from three angles: 1) experience with trafficking (no-witness vs. witness), 2) information tabulated by the public service sectors, and 3) information tabulated by the regions. While there are nuances between these levels of analysis, the common warning signs and risk factors across experience, workplace, and geographic location point to important moments for intervention strategies.

4.1. Warning Signs

Per the language of our survey, service providers across the three survey wings were asked, “Which of the following conditions are you likely to see among individuals who may be at risk of exploitation or human trafficking/labor trafficking/sex trafficking?” These conditions were designated as warning signs or “red flags” because of their individual-level visibility in an intake or identification process. At the micro-level, these are the conditions that a trafficked person may display or disclose interpersonally. Participants could select their response on a Likert scale from “completely likely” to “not at all likely.”

The following tables show the results aggregated for the “completely likely” and “very likely categories.” We used this strategy to categorize the factors our participants determined the most likely to indicate exploitation or trafficking. Because this question involved 17 factors, the following tables highlight the top five responses, with the full table located in the [Appendix A](#).

[Table 3](#) shows the top responses across levels of experience with human trafficking: no witness of human trafficking ($n = 294$), witnessing labor trafficking ($n = 98$), and witnessing sex trafficking ($n = 253$) in their professional workplace experiences. In order to generate this table, we selected the top five factors for the “No Witness of Trafficking” category and compared across categories of experience.

Table 3. Top identified warning signs of trafficking (Witness-level).

	No Witness of Trafficking	Labor Trafficking	Sex Trafficking
<i>Sexual assault</i>	81%	64%	94%
<i>Mental health concerns</i>	80%	79%	88%
<i>Chronic runaway</i>	80%	64%	89%
<i>Drug/alcohol abuse or overdose</i>	78%	62%	89%
<i>Untreated STIs</i>	78%	55%	85%

As [Table 3](#) demonstrates, the percentages are fairly high across each of these identified factors and levels of experience, with the lowest level at 55% of labor trafficking respondents identifying untreated STIs as a highly likely warning sign. This still means over half of the service providers who answered this question consider this warning sign relevant to their work with exploited or trafficked persons.

The high percentages of responses for sex trafficking are unsurprising from both a theoretical and methodological perspective. Within the field of critical trafficking studies, scholars have interrogated the sometimes-singular focus on sex trafficking to the detriment of labor trafficking (Bernstein, 2010; Brennan, 2014; Shih, 2016). Additionally, as addressed earlier, our sample identified more experiences with sex trafficking than labor trafficking. Having prior experiences with sex trafficking may lead to stronger response rates from service providers who feel completely or very likely to identify sex trafficking or believe it is prevalent. Service providers who have had fewer encounters with sex trafficking may lower the strength of their responses, as they may have more doubt or insecurity in their identification. The same may be true for those providers who have encountered more complex presentations of trafficking, especially those survivors that may not fit the ideal model of a trafficking victim or survivors that may not identify themselves as exploited (Brennan, 2014; Goździak, 2016; Srikantiah, 2007).

Because of the significantly higher number of respondents who indicated experience with sex trafficking ($n = 253$) – and the comparably limited number of labor trafficking responses ($n = 98$) – we also conducted an analysis exclusively looking at sex trafficking-specific responses. [Tables 4](#) and [5](#) provide a comparison of these trafficking red flags/warning signs across regions and sectors of work.

As these tables both demonstrate, regardless of whether we parsed the data by experience, region, or sector, the top five factors are consistently high. Sexual assault, mental health concerns, chronic runaway, drug/alcohol abuse or overdose, and untreated STIs factors emerged as closely related percentages.

This result is meaningful because of the general similarities across all categories of classification. Although the dominant anti-trafficking narrative points to differences based on form of trafficking or region, our results push against these widely held beliefs about trafficking. Specifically, the sharp distinctions between sex and labor trafficking in policy and legislation may not manifest in the lived experiences of survivors – here, the micro-level warning signs that can be used to identify individuals in need of assistance. Additionally, this result complicates the narrative of trafficking as exclusive to urban regions, as rural and suburban service providers note similar factors in their work in different geographic spaces. As the responses on [Table 4](#) explicitly show, the percentages for each factor are all comparably high, making it difficult to ascertain any drastic differences between regions. For example, the mental health concerns factor ranges from 87% in multiple regions to 90% in rural regions. Those differences in which factors are considered highly likely to be warning signs of sex

Table 4. Top identified warning signs of sex trafficking by region.

	Rural	Suburban	Urban	Multiple
<i>Sexual assault</i>	95%	92%	91%	98%
<i>Mental health concerns</i>	90%	88%	88%	87%
<i>Drug/alcohol abuse or overdose</i>	86%	89%	90%	95%
<i>Chronic runaway</i>	90%	94%	86%	89%
<i>Untreated STIs</i>	86%	87%	82%	91%

Table 5. Top identified warning signs of sex trafficking by sector.

	Legal	Non-Profit	Medical	Social Service	Foster Care
<i>Sexual assault</i>	93%	96%	100%	89%	92%
<i>Mental health concerns</i>	71%	96%	79%	92%	93%
<i>Drug/alcohol abuse or overdose</i>	85%	94%	84%	84%	90%
<i>Chronic runaway</i>	84%	84%	72%	93%	94%
<i>Untreated STIs</i>	80%	82%	90%	93%	87%

trafficking are small enough to argue that across *all* regions, these five factors should be treated as similarly important to identify.

Across service sectors, the results are a bit more complex. While the percentages are all high across all factors – there is no response lower than 71% – the results for mental health concerns and chronic runaway point to subtle differences within and across sectors. As our qualitative data demonstrate below, service providers noted mental health services and assistance are lacking across the Midwest. Frontline workers in the legal and medical sectors are noting that mental health concerns are slightly less likely to be trafficking warning signs. This difference could be attributed to the fact that these workplaces are simply less equipped to handle mental health issues and are subsequently not looking to identify these factors in their clients or patients. This may seem particularly troublesome for the medical sector, but this finding does ring true for the sampled survey participants. Many medical professionals in this category did not have sustained, long-term connections with clients. Instead, they worked in public health clinics or emergency rooms with instantaneous encounters and inconsistent follow-up meetings. In contrast, individuals in the non-profit, social service, and foster care sectors saw comparably high response rates – over 90% – for mental health concerns. This, in turn, may be related to the fact that the providers in these sectors may interface more regularly with case managers and therapeutic staff who can adequately and appropriately diagnose and treat mental illnesses.

Street-level workers in social services and foster care systems identify chronic runaway status as more highly likely to be a sex trafficking “red flag”/warning sign than providers in other sectors. This is unsurprising given the client base of both of these sectors skews toward more youth. If individuals under the age of 18 are running away from home or leaving foster care placements, their absences will be more observable and noticeable to the social service case manager or foster care staff with whom they more regularly interface. Runaways may simply have less contact with service providers in the legal, medical, or non-profit sectors, leading to those frontline workers being less attuned to the chronic runaway warning signs.

4.2. Risk Factors

In a similar vein, survey participants were asked to assess a range of conditions: “Given your experience, which of these are likely to increase the risk of someone experiencing exploitation or human trafficking/labor trafficking/sex trafficking?” Unlike the warning signs of the previous question, these conditions are more structural or systemic in nature. Rather than being particular health conditions that are visible on the body, as was the nature of many warning sign factors, these risk factors were indicative of broader social inequalities. Participants used the same “completely likely” to “not at all likely” Likert scale to respond. Echoing the structure of the previous section, the full table with all 19 risk factors can be found in our [Appendix A](#), while we focus our analysis here on the top five conditions by level of experience with trafficking, region, and sector.

On [Table 6](#), the top risk factors are listed with respect to trafficking experience. As with [Table 3](#), these factors were determined based on the top five conditions for the “No Witness of Trafficking” category and compared across categories of experience. Because of a tie between two risk factors – running away from home and lack of social support networks – [Table 6](#) addresses six conditions.

Table 6. Top identified structural/systemic risk factors of trafficking (Witness-level).

	No Witness of Trafficking	Labor Trafficking	Sex Trafficking
<i>Housing instability/homelessness</i>	88%	84%	88%
<i>Addiction</i>	88%	69%	87%
<i>Family instability/dysfunction</i>	87%	84%	91%
<i>History of abuse</i>	84%	76%	91%
<i>Running away from home</i>	83%	70%	91%
<i>Lack of social support networks</i>	83%	85%	80%

The findings for service providers experienced with labor trafficking are important to note here. Unlike [Table 3](#), where the “Labor Trafficking” category included the lowest percentages for all identified factors, the risk factors here are more comparable to their counterparts in the “No Witness of Trafficking” and “Sex Trafficking” categories. One condition, the lack of social support networks, is highest for service providers with labor trafficking experience.

Table 8. Top identified structural/systemic risk factors of sex trafficking by sector.

	Legal	Non-Profit	Medical	Social Service	Foster Care
<i>History of abuse</i>	79%	94%	95%	96%	95%
<i>Family instability/dysfunction</i>	82%	91%	95%	96%	93%
<i>Running away from home</i>	80%	90%	95%	96%	96%
<i>Housing instability/homelessness</i>	80%	96%	95%	88%	88%
<i>Addiction</i>	83%	89%	95%	92%	86%

This speaks to the even stronger overlap between risk factors of exploitation, labor trafficking, and sex trafficking. While these are certainly unique phenomena, the conditions that create challenges in individuals’ lives may be similar across forms of violence and trauma. If, for example, housing instability/homelessness is highly considered a risk factor across all levels of experience, then it is a meaningful site for intervention, identification, and assistance. Opening access to stable, safe housing could ameliorate risk for a trafficked person *and* improve the conditions for someone facing exploitation that did not yet meet a legal standard for sex or labor trafficking.

[Tables 7](#) and [8](#) look specifically at risk factors for sex trafficking by regions and sectors.

Again, much like the regional responses for “red flags”/warning signs, the responses on [Table 7](#) are all very similar, ranging from a low of 86% to a high of 98%. This supports our finding that sex trafficking is not as contingent upon geographic location as the dominant narrative presupposes. While we cannot say with certainty that this can be extended to other forms of exploitation or trafficking given our data set, this does point to a necessary shift to reconceptualizing trafficking outside of urban cores.

On [Table 8](#), participants in the legal sector offered slightly different responses than their counterparts in the other four sectors. While the responses in the non-profit, medical, social service, and foster care sectors have small differences, the legal sector consistently ranks their risk factors at lower percentages. This may point to levels of disclosure between clients and service providers in this sector, which included law enforcement officers, immigration attorneys, pro bono lawyers, and legal staffers. Law enforcement officers may be reacting to a client in a short-term, reactive context, such as arresting an individual for

Table 7. Top identified structural/systemic risk factors of sex trafficking by region.

	Rural	Suburban	Urban	Multiple
<i>History of abuse</i>	91%	91%	88%	98%
<i>Family instability/dysfunction</i>	90%	93%	87%	98%
<i>Running away from home</i>	92%	94%	86%	95%
<i>Housing instability/homelessness</i>	91%	87%	87%	91%
<i>Addiction</i>	88%	87%	89%	87%

a crime or identifying a sex trafficking survivor in a sting operation. Unlike lawyers who have to work intimately with a client to build a case and have more opportunities to identify risk factors – through their clients’ disclosures or fact-finding missions – law enforcement officers may have less time with their trafficked clients and simply less ideal conditions for disclosure of such dense, complex risk factors.

5. Site-Specific Findings

As stated earlier, 81 participants (12.1%) responded to the open-ended questions at the conclusion of the survey. Their qualitative answers illuminated many of our descriptive statistics, especially with regards to specific gaps in service provision in the Midwest and general concerns with awareness of trafficking as Midwestern concern across geographically diverse communities. The following findings emerged from an inductive qualitative data analysis (Thomas, 2006) focused on reading and rereading these responses from a fine-grained perspective to determine which themes were most salient in these longer, open-ended responses.

Many of their responses echoed literature from other more heavily researched regions, including a lack of funding, lack of support, and lack of awareness. This in and of itself is an important finding, as our work strengthens the evidence-base for more general approaches to trafficking that can cut across regions. At the same time, what we found to be even more important was that the service providers in this study also clearly articulated what they believe to be site-specific or geographically-specific (1) gaps in service, (2) issues of limited awareness, and (3) approaches to addressing human trafficking in the Midwest. While our work suggests there may be several general program and policy lessons for trafficking nationally, it also supports the idea that these approaches should be adapted to particular regions and contexts. We discuss these site-specific findings below.

5.1. Gaps in Midwestern Service Provision

In general, frontline workers indicated they needed more stable, accessible resources to meet exploited or trafficked persons' immediate and long-term needs. This ranged from mental health care to housing assistance and jobs training. While many of these gaps can be found throughout the U.S., there were at the time of our research – and continue to be – state-specific policies and spending cuts that drive particular sectors into jeopardy. Some of these needs were embedded in social service systems that faced major defunding efforts at the state level, such as the public educational system. However, participants consistently – and strongly – addressed one major gap in service provision across both states: foster care services. They generally described the need for stable placements and targeted services for youth in foster care, especially youth with mental health needs and previous experience with trauma:

The shortage of foster placements and the screening tool for youth to access psychiatric residential treatment facilities exacerbates the instability children in foster care experience. When children sleep at a different place literally every night for weeks at a time, they are at high risk for running away and being trafficked. (Legal service provider, urban location)

Thinking from a preventive perspective, consistent care could serve as a buffer against the instability of multiple placements and potentially prevent some youth from being exploited or trafficked. However, the larger structural concerns of limited foster care placements and underfunded foster care programs make this increasingly challenging.

These particular concerns – the challenges of working within and alongside a foster care system facing budget cuts and limited access to resources – were visibly divided between states. At the time of our survey, one Midwestern state had already restricted funding to state welfare programs broadly, including the foster care system. Qualitative responses reflected the effects of these cuts in specific, direct terms, as one rural law enforcement officer explained:

In the past few years, the [...] governor and state legislature have done everything they can to cut services and money to those who so desperately need assistance and help. Without government aid, these folks simply fall through the cracks and continue their downward spiral. It's very sad when you see it daily and have to work in such budget-constrained conditions. Privatizing the services that were once provided by the [state] [...] was the worst thing to ever happen [...]. For-profit private companies [...] make a living from the plight and perils of those citizens who have been abused, exploited, and harmed – that is an atrocity. (Law enforcement officer, rural location)

In this law enforcement officer's perspective, the limited resources for marginalized or exploited citizens can be directly linked to a political agenda focused on defunding and privatizing social services.

The other Midwestern state had not experienced such extreme budget cuts, though their state welfare programs were still facing limited funding on a smaller scale. An urban non-profit service provider explained these issues, stating, "Our state has not expanded Medicaid and funding for health care and social services is the lowest in the country." While the language was not as pointed, these two examples demonstrate the necessity for well-funded social support programs, including foster care, to assist exploited and trafficked persons, even in the face of highly politicized arguments over the role of state welfare.

Foster care workers themselves articulated the challenges perpetuated by cuts and limited budgets. According to one urban respondent, "My state is unique. We don't do Social Welfare like other states and our funds are limited due to the current political climate." This same respondent also articulated how robust funding fits into anti-trafficking prevention: "Family Preservation funded and staffed properly can probably help put a huge dent in the reduction of new human trafficking issues but it probably can't help stop the ones already out there." Much anti-trafficking work is reactive: assisting individuals who have already been exploited, prosecuting perpetrators who have already been identified, raising awareness about trafficking cases that have already occurred. Preventive work would require more money on the front-end to provide adequate services and foster care workers to address those who may be vulnerable or facing challenges that could eventually become trafficking. If the foster care sector remains underfunded, these preventive components of their work may not be fully realized, and their limited budgets may only be able to address the reactive components of their work.

Grant funding did emerge in some responses as a potential solution to these problems. As one service provider who worked in both rural and urban regions explained, "I work in the foster care system. A lot of the barriers are the frequent moving/unstable placement. Luckily with the [...] grant we have been able to follow victims around the state to provide therapeutic services." While this particular grant afforded foster care workers to continue to work with particular youth regardless of their regional location, grants are short-term solutions. If a grant funding opportunity was to disappear or if the terms of the grant expired, the limited financial support of the state could only cover so many critically important services. More specialized care, such as the traveling therapeutic services this service provider mentioned, may not be a budgetary concern and could lapse. These gaps then leave particularly vulnerable youth without longer-term services.

Additionally, trafficked youth are sometimes involved in the foster care system, and their particular needs are often not adequately addressed in the existing services. As a rural foster care provider stated, "There is a severe shortage of placements for youth who have been trafficked and having foster parents who understand the unique needs of these vulnerable youth." Aging out of foster care is a pivotal moment for youth, who become exceptionally vulnerable to predatory relationships and trafficking. These missed opportunities have implications for policy and practice (Goździak, 2016; Schwarz & Britton, 2015). If organizations had more wrap-around resources – holistic, collaborative resources that involve multiple stakeholders to address the complex, interwoven needs faced by exploited or trafficked youth – they could develop interventions to prevent human trafficking before it begins, rather than attempting to help victims after they have already experienced trafficking.

5.2. Awareness of Trafficking in Midwestern Communities

Many service providers saw unique challenges in working with vulnerable or trafficked persons in the Midwest, especially when human trafficking is believed to not exist in these regions. Though our quantitative data draw attention to the similarities in perceptions of trafficking across region,

frontline workers across location and sector faced issues of awareness, as demonstrated by the following quotes:

Our rural setting includes parts of the community with small town mindedness; this can mean being ignorant and naive about these issues, or simply denying that they exist to the extent they do. We believe some also may realize there is a problem but choose to overlook and ignore. (Medical service provider, rural and suburban location)

In most communities, trafficking, poverty, and any at-risk individuals are swept in places of our city that most people don't, or are afraid to go. Almost like the saying, if you can't see it, it didn't happen. (Foster care provider, urban location)

Both of these service providers identified the same broader community mindset in their Midwestern communities, even though they operated in different sectors and locations – this mindset is not unique to rural regions or specific organizations. Thus, while urban locations in Midwestern states may be more resource-dense, they are not immune to the stereotypes that shape anti-trafficking efforts. The “small town mindedness” mentioned by the medical service provider can manifest through isolating and ignoring vulnerable populations in urban spaces. Additionally, the pervasiveness of this conception of human trafficking as only occurring in other communities – or in marginalized sections of communities – further perpetuates problematic notions about who counts as a trafficked victim and what regions are affected by trafficking preempting improvements to services (Srikantiah, 2007; Weitzer, 2014).

A suburban non-profit staffer stated, “(T)he Midwest is predominantly rural or suburban, making resources for adequate transportation, housing, and jobs more difficult to obtain. [...] There are limited resources and funding available for organizations due to the central location.” Even in urban communities, transportation infrastructures are not as expansive compared to other major metropolitan areas. If a client must access multiple services – as is common for individuals with complex, interconnected needs that often cannot be served by just one service provider – transportation can be a huge barrier to timely, holistic service provision. Rural service providers mentioned the necessity of carpooling to take their clients to services across multi-county regions and the challenges of finding adequate placements, especially for foster care and housing assistance, within nearby communities.

5.3. Midwestern Approaches to Anti-Trafficking Efforts

However, it is important to note that a Midwestern location is not just a source of challenges. As a rural medical provider explained, “(W)e have the benefit of our small communities as well though. Folks here do care about others, and once they realize that there is an issue or that there are at-risk people among them, there is rarely a lack of individuals to step up to help out.” Close-knit communities may have informal support networks that could be affirming for some vulnerable or trafficked persons or address specific gaps in services in geographically disparate regions. The major caveat to this geographically-based benefit is that these collective, communal efforts can only do so much in the face of increasingly defunded social welfare systems. Communities can and do step in, but these efforts often cannot take the place of necessary funding of health services, schools, and housing programs.

Additionally, specific communities in the Midwest have made an explicit effort to robustly promote and fund anti-trafficking efforts at the city or county-level. An urban foster care worker described the environment in her area as deeply invested:

I feel like my community [is] very progressive [...]. There is a specialized unit [...] that is a joint venture between law enforcement and child/family services investigating cases of trafficking and exploitation. The CAC (Child Advocacy Center) is active in addressing this concern, plus an organized grassroots non-profit working to support direct service providers that assist this population, as well as a local university with a wealth of knowledge, research, and training on the issue of trafficking. The multi-disciplinary and cross-agency collaboration is very good compared to other communities in [the state].

Clearly, this level of infrastructure and investment can exist and thrive within Midwestern communities; there has to be buy-in from stakeholders across sectors and a willingness to devote time, resources, and personnel to anti-trafficking efforts. Importantly, this service provider worked in an urban community with a larger number of resources from which to draw. This points to a meaningful comparison across regions: urban spaces may be considered more ideal for anti-trafficking collaborations due to the sheer number of organizations already located in that larger city space, but they cannot be the only sites for outreach and intervention. Accessible resources must be present in suburban and rural locales to address the exploitation and trafficking that does manifest in these spaces.

The examples above do not ameliorate the general gaps in awareness and resources that service providers broadly mentioned, but it is important to think about rural and Midwestern spaces beyond their challenges. Urban Midwestern cities can offer examples of anti-trafficking infrastructure and collaboration that take into account the state-level political environment, anti-trafficking policy, and population of at-risk persons – all factors that operate differently in the heartland. It may be more helpful, for example, for advocates in Nebraska to look towards Ohio, not California, for models of anti-trafficking efforts.

6. Limitations

This research is not without important limitations to address. First, even with such an expansive sample of service providers, we are missing voices in our survey. Frontline workers with enormous caseloads, long hours, and limited access to email may not have had the time to take the survey or may have dropped out of the survey before they could share their full thoughts.

Additionally, as addressed earlier, the definition of trafficking used in our project – though it was the definition that resonated best with our beta testers – may not be the most reflective of the terms mobilized by other anti-trafficking stakeholders. Since we focused on perceptions of trafficking and embraced the fuzziness embedded its definitions, this model was appropriate for our study. It will not work in the same way for research questions that hope to answer the prevalence of trafficked persons in a region or the number of successfully prosecuted cases in a jurisdiction.

Finally, the two states selected for this project may not be reflective of the nuances in other Midwestern states with different political climates, anti-trafficking policies, or historical commitments to ending sex and labor trafficking. This limitation points to the continued need for anti-trafficking scholarship exploring the complexities of the Midwest.

7. Conclusion: “It Does Happen Here”

As the results of our survey demonstrate, human trafficking is not a phenomenon isolated to specific coastal or border regions of the U.S. It is perceived to happen with some degree of regularity in the Midwest. Service providers demonstrated a level of familiarity, especially with sex trafficking, that contradicts the dominant narrative of trafficking as exclusively occurring outside of the heartland. Importantly, our findings demonstrated that there are mutual concerns across communities in the Midwest – namely, communities share fairly similar trafficking warning signs and risk factors across rural, urban, and suburban regions and sectors of work.

Additionally, as our qualitative data highlight, service providers have a sense of the importance of place in their own work, particularly with respect to the challenges of working in Midwestern communities with limited resource networks. While all service providers felt the impact of limited resources, providers located in rural areas felt these gaps more deeply. Service providers see these resource gaps especially for youth in the foster care system. As discussed in the findings above, survey respondents indicated place-specific challenges they faced, including the distance between services, the lack of available transportation to services, and the lack of adequate affordable housing and foster care placements. These findings suggest that the policies that work well in a more densely populated, urban city in a Midwestern state may not translate to the more rural regions separated by

hours of highway. For example, service providers in urban areas may be able to access multiple homeless shelters with designated beds for trafficking survivors within a few blocks or bus stops. Rural communities may have one shelter within a three-hour radius to serve multiple counties' needs. If an anti-trafficking policy requires a secure housing component, it may be challenging but workable for urban service providers to find a shelter opening – or, conversely, near-impossible for rural frontline workers with service scopes across hundreds of miles.

From this analysis, the solutions to combatting trafficking appear to require community-based solutions. These findings demonstrate the need to take site-specific policy under consideration beyond a statewide or even national anti-trafficking approach. Much of the national and state level policies tend to focus on urban understandings of trafficking, but implementation needs to focus more locally. This does not mean that larger anti-trafficking policies should not be implemented. In fact, these policies should be implemented with further attention to how different communities and stakeholders within the same state or region may be differentially affected. Anti-human trafficking efforts must account for the unique ways communities across regions and states can address trafficking warning signs and risk factors, as well as the specific gaps in access to resource and services that can inhibit these efforts from coming to fruition.

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Appendix A

Table A1. Comparing warning signs of trafficking (Witness-level).

	No Witness of Trafficking	Labor Trafficking	Sex Trafficking
<i>Physical injuries</i>	53%	49%	49%
<i>Medical issue/illness</i>	55%	62%	59%
<i>Untreated chronic health issues</i>	52%	70%	55%
<i>“On the job” injury</i>	34%	59%	28%
<i>Hunger/malnutrition</i>	70%	57%	58%
<i>Untreated STIs</i>	78%	55%	85%
<i>Sexual assault</i>	81%	64%	94%
<i>Urinary tract infections</i>	69%	55%	80%
<i>Evidence of abuse/torture</i>	74%	47%	71%
<i>Dental damage</i>	60%	48%	51%
<i>Drug/alcohol abuse or overdose</i>	78%	62%	89%
<i>Attempted suicide</i>	73%	54%	76%
<i>Chronic runaway</i>	80%	64%	89%
<i>Truancy</i>	73%	68%	82%
<i>Prior unsuccessful social service involvement</i>	66%	65%	81%
<i>Mental health concerns</i>	80%	79%	88%
<i>Presence of branding/tattoos</i>	61%	45%	67%

Table A2. Comparing structural/systemic risk factors of trafficking (Witness-level).

	No Witness of Trafficking	Labor Trafficking	Sex Trafficking
<i>Poverty</i>	82%	83%	81%
<i>Housing instability/homelessness</i>	88%	84%	88%
<i>Family instability/dysfunction</i>	87%	84%	91%
<i>Controlling presence</i>	82%	76%	84%
<i>Addiction</i>	88%	69%	87%
<i>Physical disability</i>	40%	36%	34%
<i>Cognitive disability</i>	63%	58%	56%
<i>Racial discrimination</i>	45%	59%	42%
<i>LGBTQ status</i>	49%	38%	48%
<i>Undocumented status</i>	69%	86%	62%
<i>English language limitation</i>	64%	80%	57%
<i>Teen pregnancy</i>	60%	49%	56%
<i>Dropping out of school</i>	75%	67%	78%
<i>Running away from home</i>	83%	70%	91%
<i>Having sex at an young age</i>	75%	64%	78%
<i>History of abuse</i>	84%	76%	91%
<i>History of financial abuse/control</i>	72%	76%	70%
<i>Lack of social support networks</i>	83%	85%	80%