Human Trafficking Sources

Validated: Evidence-Based Sources						
Name of Tool	Citation		Overview		Limitations	
Trafficking Victim Identification Tool (TVIT)	Vera Institute. (2014). Screening for Human Trafficking: Guidelines for administering the Trafficking Victim Identification Tool (TVIT).	•	The TVIT is the most referenced identification tool in the field of human trafficking. This tool has been through validation testing (for sex and labor trafficking) and includes evidence-based measures. There are two versions of this tool: long and short. O The long version of the tool is 26 items O The short version is 16 items	•	Has not been validated in different settings (only victim service organizations). Administered in eleven (11) victim services organizations in California, Colorado, New York, Texas, and Washington. Can take 60 minutes to administer and requires a human trafficking expert for interpretation. Even for the short assessment, it can take more than an hour to ask all the questions, and even more time should be accounted for due to the rapport that must be built prior to asking these indepth and invasive questions. No isolated question results in a clear identification of a trafficking experience, therefore the interviewer	
					must synthesize the data	



			provided to make a trafficking determination.			
Validated: Evidence-Based Sources						
Name of Tool	Citation	Overview	Limitations			
Human Trafficking Interview and Assessment Measure (HTIAM-14)	Covenant House. (2013). Human Trafficking Interview and Assessment Measure.	Validated screening tool to evaluate for trafficking among the homeless young adult population.	 Takes up to 45 min to administer and also requires an interviewer with human trafficking expertise Tested only amongst youth experiencing homelessness and seeking services at Covenant House New York. 			
Quick Youth Indicators for Trafficking (QYIT)	Chisolm-Straker, M., Sze, J., Einbond, J. (2019). Quick Youth Indicators for Trafficking (QYIT). <i>Children and Youth Services Review</i> , 98, 72-79. doi:10.1016/j.childyouth.2018.12.014	 QYIT Questionnaire is brief, and does not require a trafficking expert to administer An affirmative answer to at least one QYIT question is 86.7% sensitive and 76.5% specific in identifying a trafficking experience 	Tested and designed only for use at social service providers providing services to homeless young adults who have labor and/or sex trafficking experiences			

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	tation		Overview		Limitations		
Baldwin, S. B., et. al. (2011 trafficking victims in health Human Rights Journal, 13(https://www.hhrjournal.org/human-trafficking-victims-i	care setting. <i>Health and</i> 1). Available at /2013/08/identification-of-	•	Two-part study consisting of 1) face-to- face, in-depth, semi- structured interviews with six (6) key informants who worked closely with trafficking victims, and 2) interviews with twelve (12) female trafficking survivors in Los Angeles County with script developed from data gathered in Phase 1. All interviews were done in English, with assistance of professional interpreters in six languages, including Spanish Korean, Russian, other Asian and African languages. Survivors were subjected to a mixture of labor and sex trafficking	•	Extremely small sample size Study confined to Los Angeles County Because of small sample size, data all qualitative in the form of direct testimony from survivors and Key Informants		

	Un-validated: Practice-Based Sources						
Name of Tool	Citation		Overview		Limitations		
PEARR (Provide privacy, Education, Ask, Respect, & Respond) Tool	Dignity Health Human Trafficking Response Program (2019). PEARR Tool. Available at https://www.dignityhealth.org/hello-humankindness/human-trafficking/victim-centered-and-trauma-informed	•	Tool developed by Dignity Health, HEAL Trafficking, and Pacific Survivor Center to help guide social workers, nurses and other professionals on how to provide assistance to victims/survivors of any form of abuse, neglect, or violence, including human trafficking, in a trauma-informed manner.	•	Not scientifically validated, but designed based on years of case debriefings with frontline staff, as well as collaborations with subject matter experts.		
	Schwarz, C., Unruh, E., Cronin, K., Evans-Simpson, S., Britton, H., & Ramaswamy, M. (2016). Human Trafficking Identification and Service Provision in the Medical and Social Service Sectors. <i>Health and Human Rights, 18</i> (1), 181-192. Available at https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5070690/	•	Protocol developed by Kansas University School of Law's Medical-Legal Partnership (MLP Clinic) and the KU School of Medicine's Department of Public Health and Preventive Medicine for use in the KU Emergency Department (ED). Focuses on both identification and intervention to assist trafficked persons, encompassing victims of both labor trafficking and sex trafficking.	•	Not scientifically validated. Guidelines were developed from most recent protocols and recommendations from multiple field experts, and feedback obtained from physicians, nurse managers, social work representatives, and Sexual Assault Nurse Examiners (SANE).		