

**Appendix A-3:
Case Manager Survey**

OMB No. 0970-0487

Expiration Date: XX/XX/20XX

Domestic Victims of Human Trafficking Program: Cohort 3

Case Manager Survey

Introduction

Thank you for taking the time to complete the Case Manager Survey for the Evaluation of the Domestic Victims of Human Trafficking (DVHT) Program.

[GRANTEE ORGANIZATION] was awarded a cooperative agreement in 2016 by the Administration for Children and Families (ACF) to carry out activities under the DVHT Program. The DVHT Program aims to build, expand, and sustain organizational and community capacity to deliver trauma-informed, strength-based, and victim-centered services for domestic victims of severe forms of human trafficking. You are receiving this survey because of your role in providing case management services to individuals served by [DVHT PROJECT NAME]. Case managers from all fiscal year (FY) 2016 DVHT projects are being asked to complete this survey.

This survey asks about your organization and organizational practices; your role and case management activities; training; service needs of trafficking victims; service delivery strategies; and your perspectives on the DVHT project's successes and challenges. This survey will take about 20 minutes to complete. You will be able to save your answers and return if you cannot complete the survey in one sitting.

This survey is voluntary and your responses will be kept private to the extent permitted by law. No one outside the RTI evaluation team will know how you answered a specific question and your name will not be used in any report. Information collected from DVHT project staff and partners will be combined for reporting; however, some information will be reported at the project-level which will identify your DVHT project by name.

This survey is part of the data collection for a cross-site evaluation that aims to (1) describe how DVHT projects approach and accomplish the goals of the DVHT Program and (2) inform ACF's efforts to improve services for domestic victims of human trafficking. The evaluation is overseen by ACF's Office of Planning, Research, and Evaluation (OPRE), in collaboration with ACF's Office of Trafficking in Persons (OTIP), and conducted by RTI International, an independent, nonprofit scientific research and development institute.

If you have any questions about the survey or have technical difficulties completing the survey, please contact Jennifer Hardison Walters, Project Director for the Evaluation of the DVHT Program, toll-free at 1-866-784-1958, extension 27724 or by email jhardison@rti.org.

Thank you for your participation!

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number for this information collection is 0970-0487 and the expiration date is XX/XX/XXXX.

Throughout this survey, you will see questions referring to your DVHT project. When you see “DVHT project”, you should think of [DVHT PROJECT NAME].

This survey uses the term *victim* to refer to individuals who have experienced human trafficking victimization; however, we acknowledge that some people may prefer *survivor* or other terminology.

PROGRAM ENTRY / REFERRALS

1. For this question, think about the DVHT project client referrals you have received since the beginning the project. By *client referrals* we mean individuals who are confirmed or suspected to be domestic victims of human trafficking who are referred to your DVHT project for services.

On average, how often do you receive client referrals from the following sources?

		Never	Rarely	Occasionally	Often	Very frequently	Don't know
Internal Referral Sources							
a	Internal referrals within your organization (e.g., individual is receiving non-trafficking related services from your organization and is referred for trafficking-related services)	0	0	0	0	0	0
b	Outreach conducted by DVHT project staff (e.g., street outreach)	0	0	0	0	0	0
External Agency Referral Sources							
c	Hospital/ER/other medical	0	0	0	0	0	0
d	Law enforcement (e.g., local police, FBI)	0	0	0	0	0	0
e	Criminal justice (e.g., court, corrections, supervision, defense attorney, public defender, legal aid)	0	0	0	0	0	0
f	Child welfare agency	0	0	0	0	0	0
g	Homeless agency/shelter	0	0	0	0	0	0
h	Runaway homeless youth agency/shelter	0	0	0	0	0	0
i	Domestic violence/sexual assault agency	0	0	0	0	0	0
j	Tribal organization	0	0	0	0	0	0
k	National Human Trafficking Hotline	0	0	0	0	0	0
l	State or local hotline (<i>please specify</i>): _____	0	0	0	0	0	0
m	Other type of agency (<i>please specify</i>): _____	0	0	0	0	0	0
n	Other type of agency (<i>please specify</i>): _____	0	0	0	0	0	0

		Never	Rarely	Occasionally	Often	Very frequently	Don't know
Other Referral Sources							
o	Client self refers / walks in	0	0	0	0	0	0
p	Client's family member / guardian	0	0	0	0	0	0
q	Client's friend / peer	0	0	0	0	0	0
r	Other source (please specify): _____	0	0	0	0	0	0
s	Other source (please specify): _____	0	0	0	0	0	0

VICTIM IDENTIFICATION / SCREENING AND ASSESSMENT

2. Does your organization use a standardized screening and/or assessment tool to determine whether individuals have experienced human trafficking victimization?
- Yes
 - No
 - Do not know

CASE MANAGEMENT

3. Do you currently have a caseload of clients that you personally work with through the DVHT project?
- Yes
 - No [[→ Go to 6](#)]
4. How many active clients are on your DVHT project caseload currently? *By active, we mean clients who have engaged in case management or other services in the past 8 weeks and who you anticipate you may be in contact with again in the near future.*
- _____
- Check box if this is an estimate
5. Is this number fewer, about the same, or more than the number of clients you typically serve on your DVHT project caseload at a given time?
- Fewer
 - About the same
 - More
6. With what portion of your DVHT project clients do you develop a service plan or a formal record to document information such as the services clients received and their needs and goals?
- None of my clients [[→ Go to 8](#)]
 - Some of my clients
 - Most of my clients
 - All of my clients

7. Which of the following elements are included in the service plan or formal record? Check all that apply.

- Client service needs
- Client goals
- Timeline of service plan goals/actions
- Client progress toward goals
- Services provided to/received by client
- Referrals provided for/to client
- Goals met
- Other (please specify): _____

8. How often do you typically see or communicate with your DVHT project clients?

- Daily
- Several times a week
- Weekly
- Monthly
- A few times a year
- Other (please specify): _____

9. When you communicate with your DVHT project clients, how often do you typically communicate in the following ways?

		Never	Rarely	Occasionally	Often	Very Frequently
a	Meet/talk in-person	0	0	0	0	0
b	Talk by phone	0	0	0	0	0
c	Text	0	0	0	0	0
d	Email	0	0	0	0	0
e	Social media (e.g., Instagram, Facebook)	0	0	0	0	0

10. How often do you personally perform the following activities for your DVHT project?

		Never	Rarely	Occasionally	Often	Very Frequently
a	Conduct a client intake	0	0	0	0	0
b	Conduct a screening and/or an assessment using a formal tool (i.e., a standard set of questions)	0	0	0	0	0
c	Meet with a client and other providers and/or supports in a team setting (e.g., multi-disciplinary team)	0	0	0	0	0
d	Have a formal/scheduled meeting with a client	0	0	0	0	0
e	Informally “check-in” with a	0	0	0	0	0

		Never	Rarely	Occasionally	Often	Very Frequently
	client					
f	Make a referral to in-house services	0	0	0	0	0
g	Make a referral to outside service providers	0	0	0	0	0
h	Communicate with other service providers on behalf of a client	0	0	0	0	0
i	Arrange appointments with/for a client	0	0	0	0	0
j	Accompany a client to an appointment	0	0	0	0	0
k	Accompany a client on errands (e.g., grocery shopping, to pick up paperwork)	0	0	0	0	0
l	Transport a client	0	0	0	0	0
m	Provide one-on-one counseling to a client	0	0	0	0	0
n	Provide advocacy on behalf of a client	0	0	0	0	0
o	Provide crisis intervention to a client	0	0	0	0	0
p	Develop a safety plan with a client	0	0	0	0	0
q	Teach and/or model life skills to/for a client	0	0	0	0	0
r	Facilitate a group activity with two or more clients	0	0	0	0	0
s	Conduct street outreach to identify and engage potential trafficking victims	0	0	0	0	0
t	Conduct training or community awareness-raising activities	0	0	0	0	0
u	Participate in a DVHT project-level team or partnership meeting	0	0	0	0	0
v	Participate in a community-level anti-trafficking task force or workgroup	0	0	0	0	0

11. Please describe any other activities not listed above that you do regularly for your DVHT project.

SERVICE AVAILABILITY

12. For the following list of services and resources, check all the places from where the service is available to DVHT clients—the DVHT grantee/lead organization, a formal DVHT project partner, and/or another organization that is not a formal project partner. Select the last column if the service is not currently available to DVHT project clients.

		Service is available from DVHT project lead/ grantee organization	Service is available from formal project partner organization	Service is available from another organization, not formal partner	Service is not available
a	Basic needs / Personal items <i>Material goods or support to obtain goods including but not limited to food, clothing, toiletries</i>	0	0	0	•
b	Child care	0	0	0	0
c	Crisis intervention <i>Short-term immediate help</i>	0	0	0	0
d	Education <i>Includes but not limited to literacy, GED assistance, school enrollment</i>	0	0	0	0
e	Employment <i>Includes but is not limited to employment assistance, job training, vocational services</i>	0	0	0	0
f	Family reunification	0	0	0	0
g	Financial assistance <i>All types of money given to the client including phone, gas, and gift cards; does not include transportation</i>	0	0	0	0
h	Short-term housing	0	0	0	0
i	Long-term housing	0	0	0	0
j	Legal <i>Services to address legal needs, including information from or representation by civil attorneys and prosecutors</i>	0	0	0	0
k	Victim advocacy <i>Information and support to help client understand and exercise his or her rights as a victim of crime within the criminal justice process</i>	0	0	0	0
l	Life skills training/support <i>Services to help clients achieve self-sufficiency; includes but is not limited to managing personal finances, self-care</i>	0	0	0	0
m	Medical	0	0	0	0

		Service is available from DVHT project lead/ grantee organization	Service is available from formal project partner organization	Service is available from another organization, not formal partner	Service is not available
n	Dental	0	0	0	0
o	Mental health <i>Services by a licensed mental health provider; includes assessment and treatment; does not include informal counseling or support groups</i>	0	0	0	0
p	Public benefits <i>Assistance related to obtaining public benefits (e.g., Medicaid, Temporary Assistance for Needy Families [TANF], Supplemental Nutrition Assistance Program [SNAP] and Women Infants and Children [WIC])</i>	0	0	0	0
q	Reproductive/sexual health <i>Services related to gynecological and obstetric care, STD screening and treatment, and family planning</i>	0	0	0	0
r	Religious/spiritual	0	0	0	0
s	Safety planning <i>Development of a personalized plan to remain safe in a situation, during the process of leaving, and afterwards</i>	0	0	0	0
t	Substance use <i>Services to address alcohol and/or chemical dependency; includes assessment and treatment</i>	0	0	0	0
u	Support (individual and group) <i>Informal counseling by organization staff or volunteers who are not mental health providers; includes peer support group</i>	0	0	0	0
v	Transportation	0	0	0	0
w	Other type of service/resource <i>(please specify):</i>	0	0	0	
x	Other type of service/resource <i>(please specify):</i>	0	0	0	

SERVICE NEEDS

13. Think about the domestic human trafficking victims you have worked with since the beginning of the DVHT project. About what portion of them have needed the following services and resources? Consider clients' needs across the entire time you have worked with them, even if they have cycled in and out of services.

		None	Less than half	Approximately half	Most	All
a	Basic needs / Personal items <i>Material goods or support to obtain goods including but not limited to food, clothing, toiletries</i>	0	0	0	0	0
b	Child care	0	0	0	0	0
c	Crisis intervention <i>Short-term immediate help</i>	0	0	0	0	0
d	Education <i>Includes but not limited to literacy, GED assistance, school enrollment</i>	0	0	0	0	0
e	Employment <i>Includes but not limited to employment assistance, job training, vocational services</i>	0	0	0	0	0
f	Family reunification	0	0	0	0	0
g	Financial assistance <i>All types of money given to the client including phone, gas and gift cards; does not include transportation</i>	0	0	0	0	0
h	Short-term housing	0	0	0	0	0
i	Long-term housing	0	0	0	0	0
j	Legal <i>Services to address legal needs, including information from or representation by civil attorneys and prosecutors</i>	0	0	0	0	0
k	Victim advocacy <i>Information and support to help client understand and exercise his or her rights as a victim of crime within the criminal justice process</i>	0	0	0	0	0
l	Life skills training/support <i>Services to help clients achieve self-sufficiency; includes but not limited to managing personal finances, self-care</i>	0	0	0	0	0
m	Public benefits <i>Assistance related to obtaining public benefits (e.g., Medicaid, Temporary Assistance for Needy</i>	0	0	0	0	0

		None	Less than half	Approximately half	Most	All
	<i>Families [TANF], Supplemental Nutrition Assistance Program (SNAP) and Women Infants and Children [WIC]</i>					
n	Religious/spiritual	0	0	0	0	0
o	Safety planning <i>Development of a personalized plan to remain safe in a situation, during the process of leaving, and afterwards</i>	0	0	0	0	0
p	Substance use <i>Services to address alcohol and/or chemical dependency; includes assessment and treatment</i>	0	0	0	0	0
q	Mental health <i>Services by a licensed mental health provider; includes assessment and treatment; does not include informal counseling or support groups</i>	0	0	0	0	0
r	Reproductive/sexual health <i>Services related to gynecological and obstetric care, STD screening and treatment, and family planning (does not include abortion)</i>	0	0	0	0	0
s	Other Medical	0	0	0	0	0
t	Dental	0	0	0	0	0
u	Vision	0	0	0	0	0
v	Support (individual and group) <i>Informal counseling by organization staff or volunteers who are not mental health providers; includes peer support group</i>	0	0	0	0	0
w	Transportation	0	0	0	0	0
x	Other type of service/resource <i>(please specify):</i>		0	0	0	0
y	Other type of service/resource <i>(please specify):</i>		0	0	0	0

TRAUMA-INFORMED CARE

14. How much do you agree or disagree with the following statements?

When working with domestic victims of human trafficking, my organization...

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
a	Successfully screens clients for trauma.	0	0	0	0	0
b	Promotes trustworthiness and transparency throughout program delivery.	0	0	0	0	0
c	Ensures safety throughout all aspects of service delivery.	0	0	0	0	0
d	Provides choices for clients throughout service delivery.	0	0	0	0	0
e	Makes efforts to prevent triggering or re-traumatization.	0	0	0	0	0
f	Uses motivational interviewing techniques.	0	0	0	0	0
g	Empowers clients to make their own goals and service delivery plans.	0	0	0	0	0
h	Provides culturally sensitive services and/or referrals.	0	0	0	0	0
i	Provides or makes referrals for language interpretation/ translation services.	0	0	0	0	0
j	Provides age-appropriate services.	0	0	0	0	0
k k	Provides access to treatment services specifically designed for individuals who have experienced trauma.	0	0	0	0	0
l	Promotes opportunities for clients to reestablish positive social connections.	0	0	0	0	0
m	Helps clients visualize and pursue their path to economic independence	0	0	0	0	0

STAFF QUALIFICATIONS, TRAINING, AND STANDARDS OF CARE

15. How important do you think the following qualifications (skills, experience, education, and attributes) are for staff who work with domestic victims of human trafficking?

		Not important	Somewhat important	Very important
a	Training in and/or experience working with victims of human trafficking	0	0	0
b	Training in and/or experience working with victims of other types of crimes or trauma	0	0	0
c	Training in and/or experience working with individuals with a substance use disorder	0	0	0
d	Training in and/or experience providing case management and advocacy	0	0	0
e	Training in and/or experience providing trauma-informed care	0	0	0
f	Training in and/or experience providing crisis intervention and safety planning	0	0	0
g	Experience working with law enforcement and/or the justice system	0	0	0
h	Knowledge of community-based services and resources	0	0	0
i	Knowledge of the justice system	0	0	0
j	Knowledge of laws relevant to human trafficking	0	0	0
k	Passion for serving victims of human trafficking	0	0	0
l	Being a survivor of human trafficking	0	0	0
m	Training or formal degree in social work, counseling, psychology, or a related field	0	0	0
n	Training in and/or experience assisting persons to find paid employment	0	0	0

16. What additional skills or qualifications not included above do you believe individuals who work with trafficking victims need? Please describe.

17. As part of your role as a human trafficking case manager for the DVHT project, have you received training or continuing education?

- Yes
- No [[→ Go to 20](#)]

18. Please briefly describe the training or continuing education you received, including the number of trainings/courses and topics covered.

19. How much do you agree or disagree with the following statements?

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
The training and continuing education I received was beneficial to my role and job responsibilities as a case manager serving victims of human trafficking.	0	0	0	0	0

20. How much do you agree or disagree with the following statements?

		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
a	I believe that I have the skills needed to do a good job as a case manager serving victims of human trafficking.	0	0	0	0	0
b	I feel that I need additional training or continuing education to help me do a good job as a case manager serving victims of human trafficking.	0	0	0	0	0
c	My organization has documented guidelines or practice standards for service delivery to victims of human trafficking.	0	0	0	0	0

DVHT PROJECT ACCOMPLISHMENTS

21. How successful would you say your DVHT project has been in carrying out the following activities?

		Not at all successful	Not very successful	Somewhat successful	Very successful	Extremely successful
a	Raising community awareness about human trafficking through outreach, training and technical assistance activities	0	0	0	0	0
b	Conducting client-level outreach activities	0	0	0	0	0
c	Identifying individuals who have experienced <i>sex trafficking</i>	0	0	0	0	0
d	Identifying individuals who have experienced <i>labor trafficking</i>	0	0	0	0	0
e	Facilitating meaningful collaboration and coordination with and among community partners	0	0	0	0	0
f	Establishing formal Memoranda of Understanding (MOU) to delineate partner roles and responsibilities and the sharing of project resources	0	0	0	0	0
g	Developing/expanding a comprehensive menu of services for domestic victims of human trafficking	0	0	0	0	0
h	Providing victim-centered case management	0	0	0	0	0
i	Establishing and following protocols for information sharing and client confidentiality	0	0	0	0	0
j	Using the National Human Trafficking Hotline as a resource for victims	0	0	0	0	0
l	Implementing and following guidelines or practice standards for service delivery	0	0	0	0	0
m	Addressing the <i>mental health</i> treatment needs of victims	0	0	0	0	0
n	Addressing the <i>substance use</i> treatment needs of victims	0	0	0	0	0
o	Addressing the <i>short-term housing</i> and shelter needs of	0	0	0	0	0

		Not at all successful	Not very successful	Somewhat successful	Very successful	Extremely successful
	victims					
p	Addressing the <i>long-term housing</i> and shelter needs of victims	0	0	0	0	0
q	Helping clients identify and achieve their goals	0	0	0	0	0
r	Integrating survivors into program development and service delivery roles	0	0	0	0	0
s	Helping adult survivors gain paid employment	0	0	0	0	0
t	Working with adult victims (who are age 18 or older) <i>[Programming note: Add response option for Not Applicable]</i>	0	0	0	0	0
u	Working with minor victims (who are age 17 or younger) <i>[Programming note: Add response option for Not Applicable]</i>	0	0	0	0	0

21. Please describe any **innovative** strategies that your organization or your DVHT project have used to assist domestic trafficking victims meet their **short- and long-term housing** needs.

22. Please describe any **innovative** strategies that your organization or your DVHT project have used to assist domestic trafficking victims meet their **mental health and substance use treatment** needs.

23. Please describe any **innovative** strategies that your organization or your DVHT project have used to **integrate trafficking survivors in the development and delivery of services**.

ORGANIZATIONAL AND RESPONDENT CHARACTERISTICS

24. Which of the following best describes your organization? Please choose one.

- Government agency (federal, state, or local) [[→ Go to A](#)]
- Non-profit or faith-based entity [[→ Go to B](#)]
- Educational institution [[→ Go to C](#)]
- For-profit entity [[→ Go to D](#)]

A. Government agency

a. At what level of government do you primarily work?

- Federal
- State
- County/city/local
- Tribal government

b. Which designation best describes your government agency?

- Public health
- Child welfare
- Law enforcement
- Judicial (courts, prosecution, public defender)
- Juvenile justice/adult corrections/supervision
- Multi-agency (e.g., task forces, response teams, etc.)
- Other government agency (*please specify*): _____

B. Non-profit or faith-based entity

a. Which designation best describes your organization?

- Medical facility (hospital, clinic, etc.)
- Mental health services
- Substance use treatment center
- Justice or legal center
- Adult/family homeless shelter/organization
- Youth homeless shelter/organization
- Other youth/child services organization
- Domestic violence, sexual assault, family violence shelter/organization
- General social services and case management
- Refugee and immigrant organization
- Other (*please specify*): _____

b. Is your organization faith-based?

- Yes
- No

C. Educational institution

- a. **At what level of education do you primarily work?**
 - College/university
 - K-12
 - Other (please specify): _____
- b. **Which designation best describes your organization?**
 - Law enforcement/campus security
 - Physical health program
 - Mental health program
 - Victim services or advocacy group
 - Campus disciplinary or student conduct body
 - Other (please specify): _____
- c. **Is your organization faith-based?**
 - Yes
 - No

D. For-profit entity

- a. **Which designation best describes your company?**
 - Medical facility (hospital, clinic, etc.)
 - Private counseling service or other mental health care provider
 - Private law office/legal firm
 - Other (please specify): _____

25. Where is your organization located? *If your organization has more than one location, please fill in the location that works most closely with your DVHT project.*

City: _____ State: _____

26. How long have you been employed by your organization?

- Less than 1 year
- 1-4 years
- 5-9 years
- 10 or more years

27. What is your professional title at your organization?

28. How long have you been in your current position?

- Less than 1 year
- 1-4 years
- 5-9 years
- 10 or more years

29. Do you work full-time or part-time in your current position?

- Full-time

- Part-time

30. On average, what percentage of your time do you work on the DVHT project?

If you are part-time, please indicate the percentage of your total hours that you work on the project. For example, if you are employed 20-hours a week and you spend all 20 hours on the DVHT project, then you would choose "100%".

- Less than 25%
- 25-49%
- 50-74%
- 75-99%
- 100% [[→ Go to 32](#)]

31. What job responsibilities do you have other than those for the DVHT project?

32. What is the highest degree or level of school you have completed? Please select one.

- Grade 1 through 11 [[→ Go to 32a](#)]
 32a. Please specify grade 1 - 11 _____
- 12th grade - NO DIPLOMA
 HIGH SCHOOL GRADUATE
- Regular high school diploma
- GED or alternative credential
 COLLEGE OR SOME COLLEGE
- Some college credit, but less than 1 year of college credit
- 1 or more years of college credit, no degree
- Associate's degree (for example: AA, AS)
- Bachelor's degree (for example: BA, BS, BSW)
 AFTER BACHELOR'S DEGREE
- Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA, MPH)
- Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)
- Doctorate degree (for example: PhD, EdD)

33. Did you have experience working with victims of human trafficking before the DVHT project?

- Yes, foreign national victims
- Yes, domestic victims
- Yes, foreign national and domestic victims
- No

34. Do you have experience providing services to or working with any of the following populations?

Check all that apply.

- Victims of domestic violence/dating violence

- Victims of rape/sexual assault (*adult*)
- Child victims of physical abuse or neglect
- Child victims of sexual abuse/assault
- Justice-involved youth/adults
- Homeless youth/adults
- Other (*please specify*): _____

35. Is there anything else that you would like to share about the DVHT project?

Thank you for your participation! We appreciate your time to complete this survey. [\[END SURVEY\]](#)