

HUMAN TRAFFICKING CAPACITY SURVEY REPORT

Purpose

The Ohio Departments of Alcohol and Drug Addiction Services (ODADAS) and Mental Health (ODMH) conducted a survey of 644 alcohol and other drug and mental health providers¹ in accordance with the Ohio Human Trafficking Task Force June 2012 recommendation to assess the capacity and needs of existing behavioral health programs and local systems to provide effective, evidence-based and trauma-focused treatment and services to victims of human trafficking. This task force was formed under Governor John Kasich by Executive Order 2012-06K to organize resources and coordinate efforts to identify and serve victims of human trafficking. The task force recommendations are to work in conjunction with House Bill 262, which promulgates the provision for increased penalty for committing human trafficking, diversion of juvenile victims and expunging records of adult victims. This survey was designed to assist in those efforts.

Method

Participating Agencies and Programs

A total of 224 agencies/programs participated in the survey resulting in a response rate of nearly 35 percent (34.8%). Responses were received from 59 counties (67 percent of the Ohio's 88 counties) and 42 boards (84 percent of the 50² alcohol, drug addiction and mental health services (ADAMHS) and alcohol and drug addiction services (ADAS)/community mental health (CMH) boards) (see Map I). Most survey participants were from Metropolitan counties (60%), followed by Suburban and Appalachian counties (16% each) and Rural, Non-Appalachian counties (8%).³ Figure 1 shows the type of position held by the survey respondent.

About half of the survey participants (49.3%) were in executive positions such as executive director, chief executive officer, president and vice president; 44.4 percent of the survey participants were involved with direct service such as clinical director, clinical supervisor, counselor and program manager; and 6.3 percent were in administrative type positions such as grants manager, quality improvement administrator and administrative assistant.

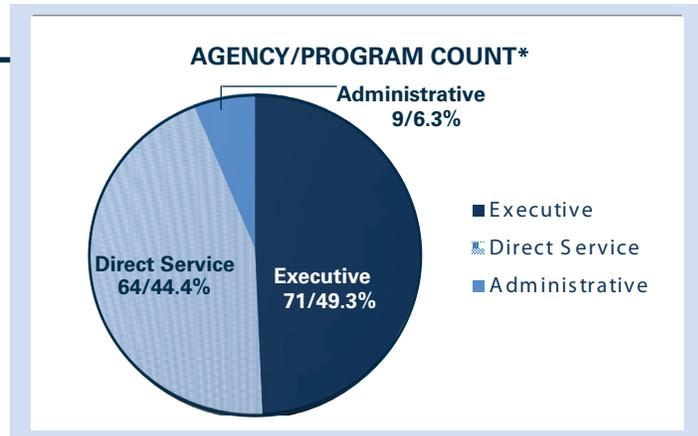


Figure 1.
 Survey respondent's position at agencies/programs (n = 144).
 *Eighty (80) survey respondents did not provide their position.

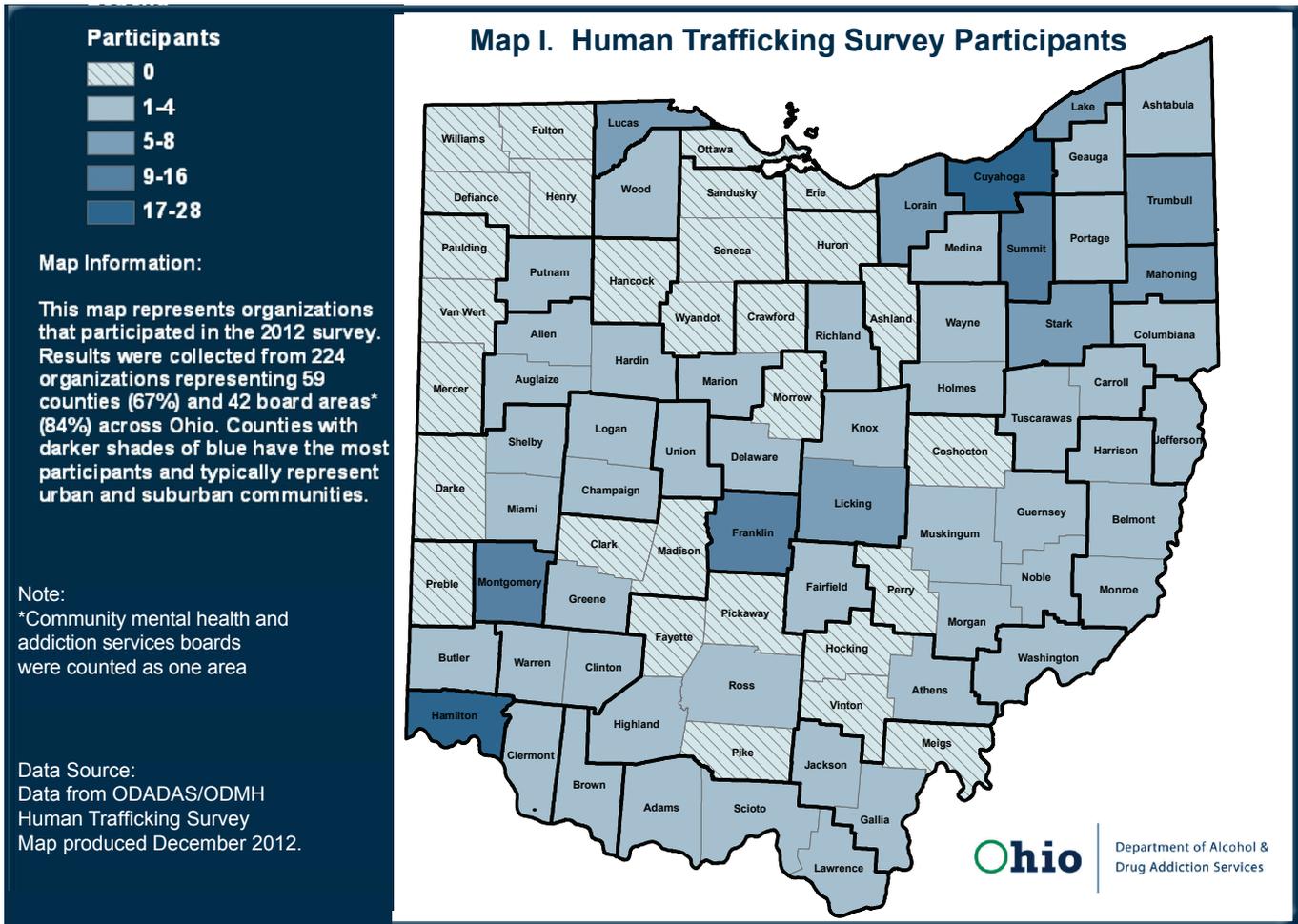
Procedures

Data were collected by questionnaire during late October, early November 2012 via email using SurveyMonkey web-based survey technology. To recruit a representative sample of agencies/programs, a link to the survey was sent to all licensed and certified alcohol and other drug and mental health agencies and programs across Ohio (N = 644).

¹ODADAS and ODMH listservs were combined; therefore, duplication of providers may have occurred.

²ADAS and CMH boards could not be distinguished.

³For data analysis purposes, ODADAS uses the Ohio Department of Health county type designation.



All eligible participating agencies/programs were made aware that Ohio Human Trafficking Taskforce may use this information for future planning of behavioral health services for victims of human trafficking in Ohio. Participants were asked to provide their contact information if they wanted to be recognized or wanted further technical assistance. Sixty-five percent of the respondents provided contact information. Questions about the survey were fielded by the research and program areas of both ODADAS and ODMH. Analysis was completed by the Division of Planning, Outcomes and Research at ODADAS.

Measurement

A 25-question survey was developed in accordance with the Ohio Human Trafficking Taskforce recommendations and based on a literature search. The survey, which follows this report, was divided into four sections: Identification; Treatment; Staffing; and Agency/Program and Community (see Attachment B). The length of time to complete the survey was estimated to be between five to 10 minutes. There were two open-ended questions at the end of the survey asking participants what type of technical assistance they needed to build capacity and for further comments and suggestions. A definition of human trafficking was provided to give participants a common basis and understanding of the state's view on human trafficking. The definition used was "Human trafficking is a form of modern-day slavery where people profit from the control and exploitation of others. Victims of human trafficking

"Don't Know" Responses

The large number of "Don't Know" responses warranted closer examination. The percentage of "Don't Know" responses ranged from 6.8 percent to 71.3 percent depending on the question. This in itself was a significant finding in that the survey respondents did not know answers for many questions. Potential questions for the relatively large number of "Don't Know" responses may include, but are not limited to: The lack of emphasis or focus given to human trafficking, lack of awareness to the scope of this problem and under-identification of clients as victims. Therefore, to gain a better understanding of how best to serve victims of human trafficking, this report is based on *known* responses. Where applicable, a brief description of "Don't Know" responses are highlighted in blue boxes at the end of each section. See Attachment A for a complete outline of "Don't Know" responses.

include children involved in the sex trade, adults age 18 or over who are coerced or deceived into commercial sex acts, and anyone forced into different forms of 'labor or services,' such as domestic workers held in a home, or farm-workers forced into labor against their will. In each of these situations the elements of force, fraud or coercion are used to control people."⁴

Analysis

Descriptive statistics included totals, percentages, means, medians, and modes. Results for select questions are displayed in choropleth maps at the county level. Themes were generated for written comment.

Results

Identification of Victims

Slightly over half of the survey participants (57.1%) reported victims of human trafficking could be identified through the agency/program current intake, screening or assessment processes ($n = 168$), which represents 40 counties (45%) and 34 board areas (68%) (see Map II). Most services are provided to adult age victims. More agencies/programs serve female only victims, though many providers serve both. And, most victims served are in the sex industry. Table 2 shows the age, sex and industry of the victims being served.

Table 2. Age, sex and industry of victims being served.

	Age ($n = 83$)			Sex ($n = 69$)			Industry ($n = 50$)		
	Under 18	18 and Over	Both	Female	Male	Both	Labor	Sex	Both
Agency/Program Count	21	35	27	38	0	31	1	38	22
Percentage	25.3%	42.2%	32.5%	55.1%	0.0%	44.9%	2.0%	76.0%	22.0%

Map II. Identification of Human Trafficking Victims

Legend

Number of Agencies



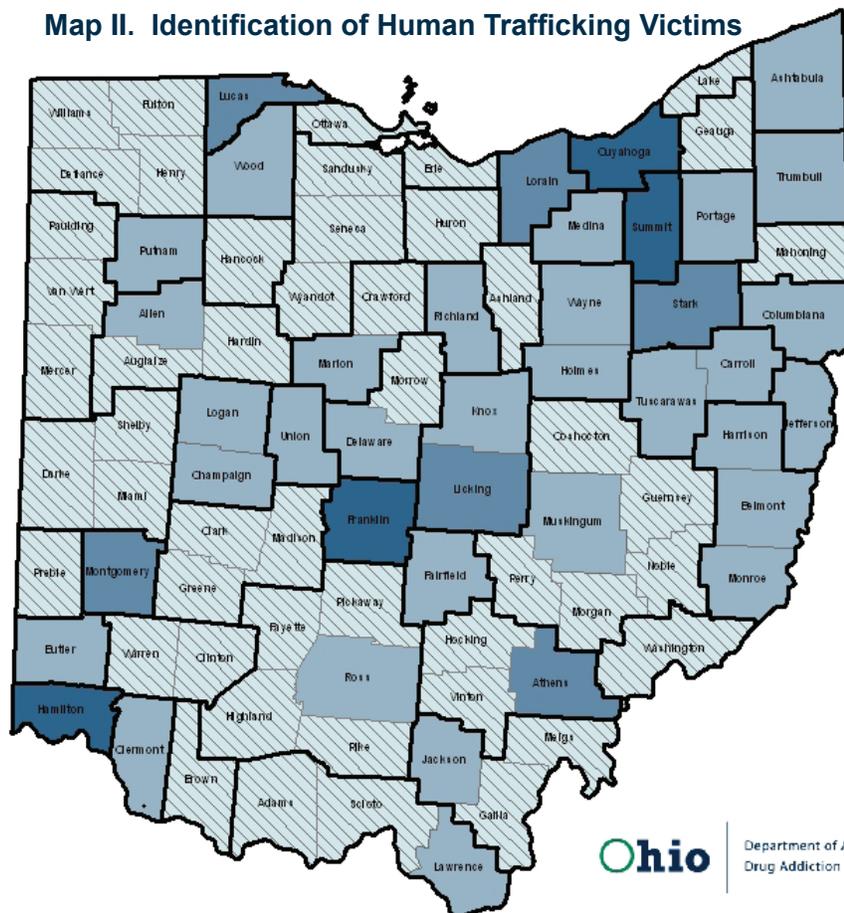
Map Information:

This map represents agencies and programs that can identify human trafficking victims. Results indicate agencies in 40 counties (45%) and 34 board areas* (68%) can identify victims. Counties with darker shades of blue have more agencies that are able to identify trafficking victims and typically represent urban and suburban communities.

Note:

*Community mental health and addiction services boards were counted as one area

Data Source:
Data from ODADAS/ODMH
Human Trafficking Survey
Map produced December 2012.



Ohio

Department of Alcohol & Drug Addiction Services

⁴Polaris Project. www.PolarisProject.org. Retrieved April 26th, 2012.

None of survey participants reported using the “Rescue/Child Assessment” ($n = 79$). This instrument was developed to help identify child victims and their needs. A small percentage of agencies/programs provide outreach to victims (16.2%, $n = 197$), which represent 14 counties (16%) and 13 board areas (26%) (see Map III).

Twenty-two survey respondents indicated they served an estimated total of 275 victims of human trafficking per year. The range of the number of victims served per year was from one to 44 resulting in an average of eight victims per agency/program.

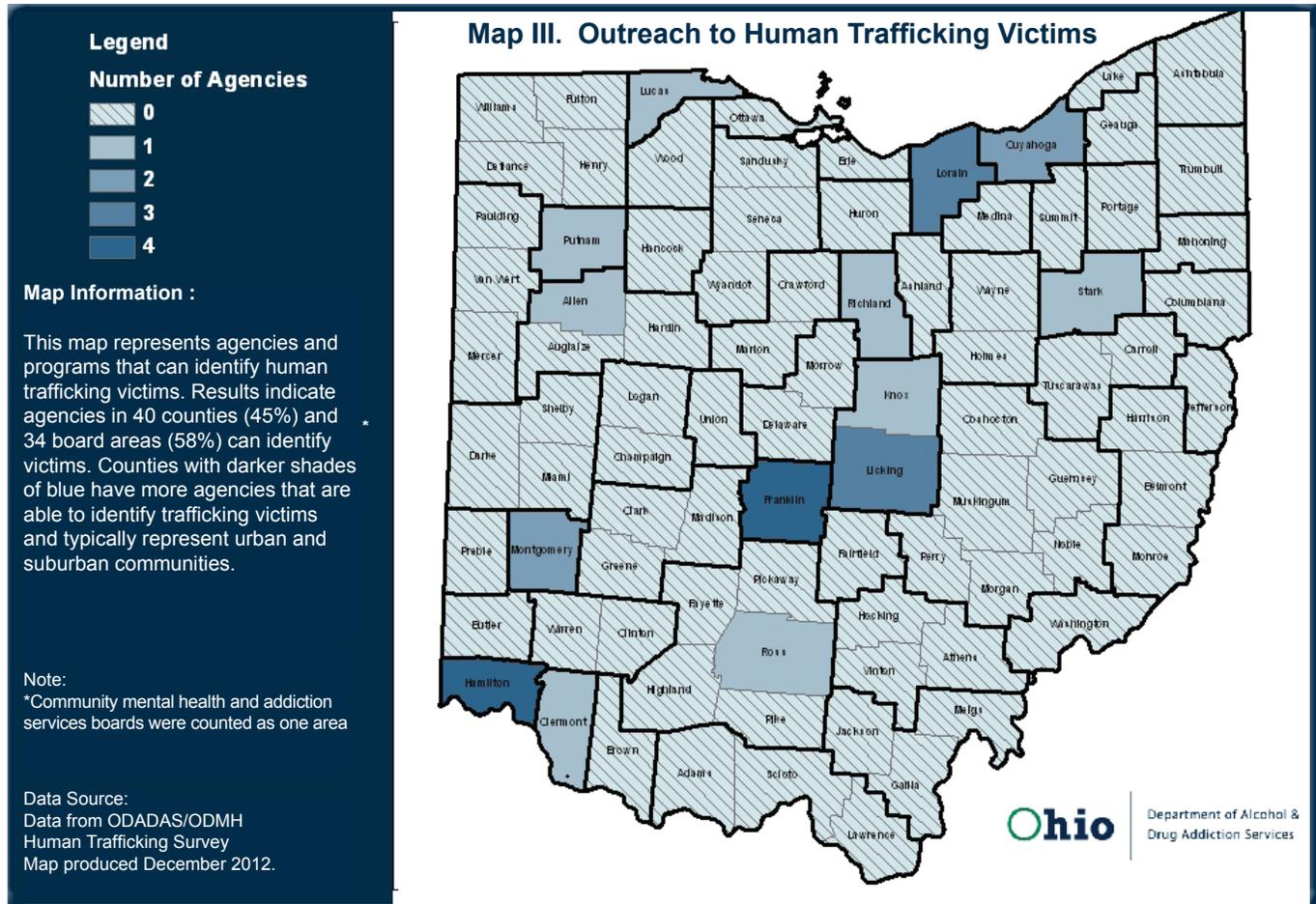
Clinical Approaches

Nearly 40 percent of survey participants (39.7%) indicated that their agency/program is equipped to provide effective treatment for victims of human trafficking ($n = 141$). This represents agencies in 33 counties (38%) and 26 board areas (52%) (see Map IV). Almost three-fourths of the participants (71.4%) reported ($n = 160$) the approach that their agency/program currently uses, 28.6 percent of survey respondents skipped the question ($n = 64$) that asked about therapeutic approaches.

Cognitive Behavioral Therapy (CBT) is the most commonly used therapeutic approach or method (87.5%), followed by Motivational Interviewing (71.9%), Life Skills Training (52.5%), Cognitive Therapy (50.0%), Peer Support Group (42.5%) and ancillary activities such as art, breath work, dance, drama, gardening journaling, outdoors, physical, poetry, writing or yoga (31.8%). Figure 2 shows the percentage of therapeutic approaches or methods currently used. The spiritual approach includes, but is not limited to meditation.

“Don’t Know” Responses

Almost one-fourth of survey participants (23.6%) did not know if the agency/program current intake, screening or assessment processes could identify victims of human trafficking. Nearly 50 percent the survey participants could not identify the age (44.7%), sex (48.2%) or industry (64.7%) of victims served. About ten percent did not know if the agency/program used the “Rescue/Child Assessment” (10.2%) or provided outreach for victims (9.6%). Almost three-fourths of participants (71.3%) did not know an estimated number of victims served per year.



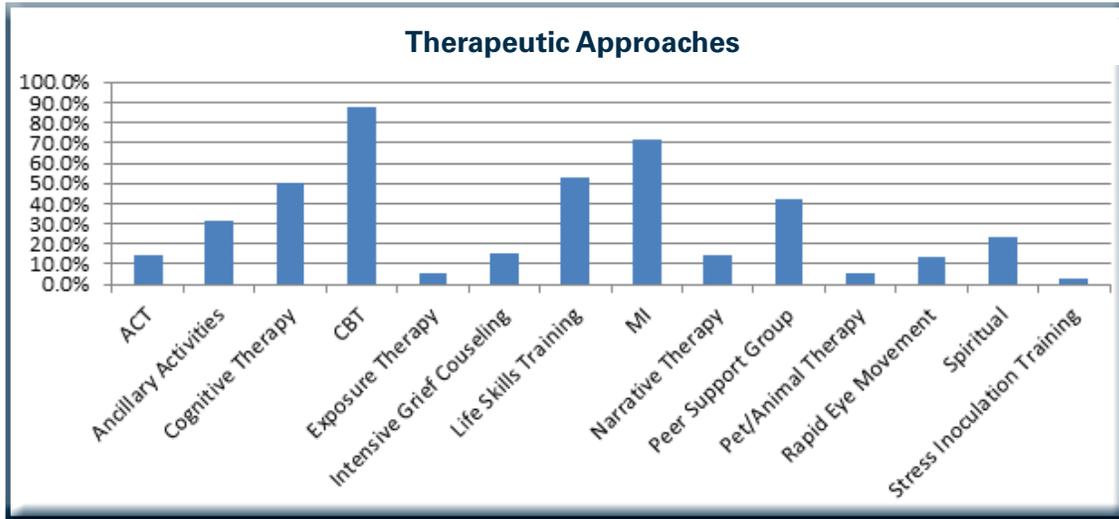


Figure 2.
Therapeutic Approaches.

Forty-four survey participants provided written responses. Almost half of the responses ($n = 21$) were grouped as trauma-informed care or evidence-based practices (EBPs). Other more common therapies reported included play therapy and anger management. Substance abuse treatment, including 12-step, was stated by 10 providers as their therapeutic approach.

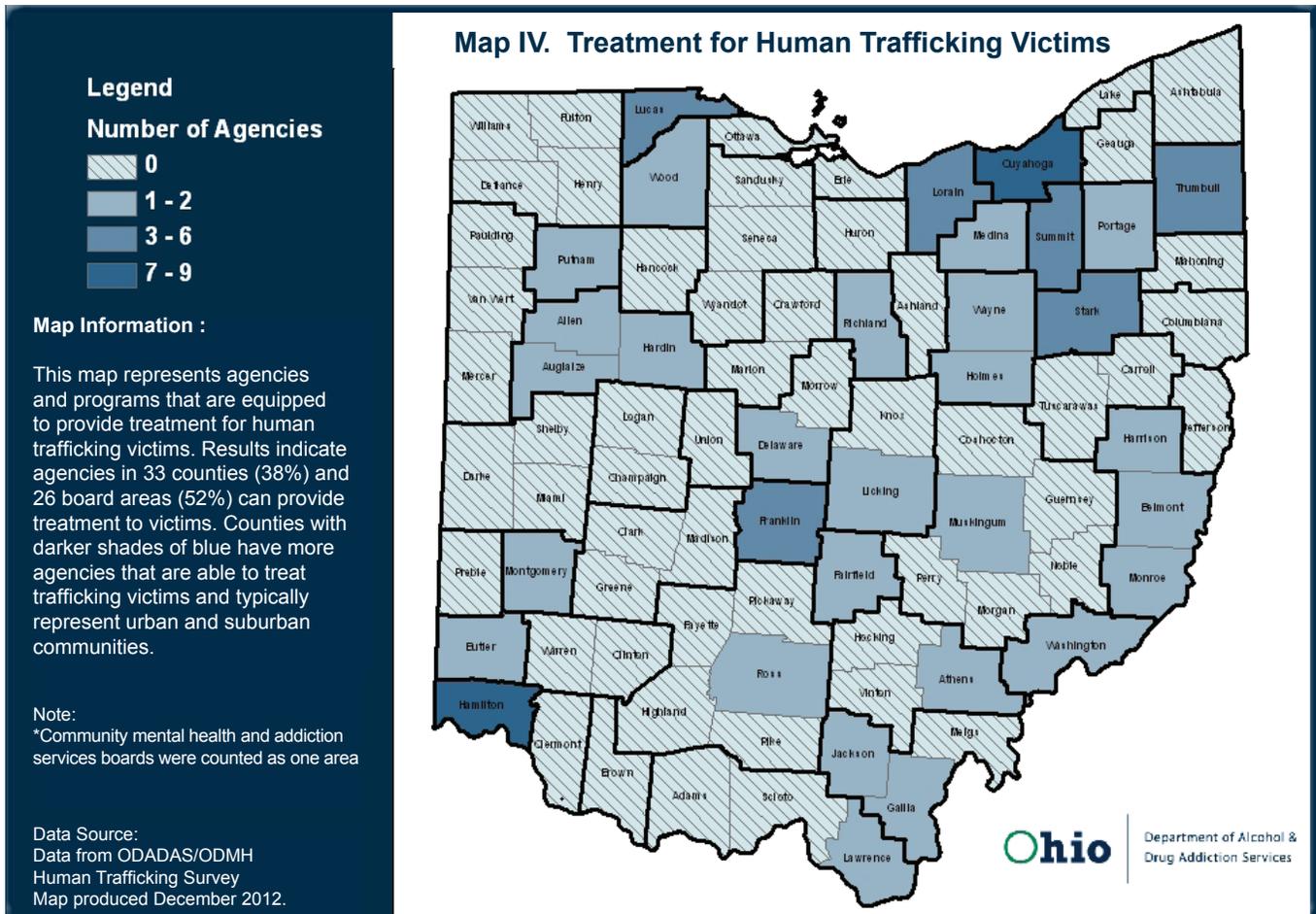


Table 3 outlines the type of approach used by the survey participants who indicated their agency/program is equipped to provide effective treatment to victims of human trafficking ($n = 141$). The range of approaches reported was from one to 11, out of a total of 14.

Therapeutic Approach	Number of Agency/Programs	Percentage
Acceptance and Commitment Therapy (ACT)	10	43.5%
Ancillary Activities	21	41.2%
Cognitive Therapy	26	48.1%
Cognitive Behavioral Therapy (CBT)	51	36.4%
Exposure Therapy	5	5.5%
Intensive Grief Counseling	16	64.0%
Life Skills Training	24	28.6%
Motivational Interviewing (MI)	39	33.9%
Narrative Therapy	10	43.5%
Peer Support Group	18	26.5%
Pet/Animal Therapy	4	50.0%
Rapid Eye Movement Desensitization and Reprocessing	5	23.8%
Spiritual Approaches	15	40.5%
Stress Inoculation Training	1	25.0%

One item on the survey asked about trauma-informed care or sensitive EBPs that are currently being used. Fifty percent of survey participants responded ($n = 224$). As like with therapeutic approaches, survey participants could indicate more than one EBP. Trauma-Focused Cognitive Behavioral Therapy is the most commonly used trauma-informed care or sensitive EBPs (66.4%), followed by Dialectical Behavioral Therapy (45.1%), Seeking Shelter (18.6%) and three EBPs--Addiction and Trauma Recovery Integration Model (ATRIUM), Trauma Addiction Mental Health and Recovery (TAMAR) and Trauma Recovery and Empowerment Model (TREM/M-TREM) received 11.5 percent of responses each. Fourteen survey participants provided written responses and included Sensory Interventions for Children Adolescents and Parent (SITCAP) and Parent-Child Interaction Therapy (PCIT).

Most providers (93.8%) can refer and link with a safe house, domestic violence shelter or rape crisis center ($n = 178$). Refer and link is defined as having a relationship with at least one entity who can provide this service (refer), and the agency/program ensures that the client accesses the service (link). Only 6.8 percent of survey participants did not know if the agency/program could refer and link to appropriate services.

Staffing and Training Capacity and Needs

Most survey respondents (84.3%) reported the number of staff or volunteers at their agency/program ($n = 191$). Less than one-fifth of survey participants (17.9%) reported the number of staff who had been trained in human trafficking ($n = 34$), which totaled 385. Most agencies/programs (85.2%) do not have in-service training for human trafficking ($n = 169$). Survey participants could indicate more than one reason when asked why staff have not been trained in human trafficking. More than one-third (39.3%) responded ($n = 88$). The most common reason reported was that there is not a need for services (42.0%). Other reasons given were that they could not afford training (40.9%), they could not locate training (36.4%), they would suffer a loss of productivity if they attended training (29.5%), and that there was a lack of interest in the topic (4.5%). There were 51 written responses to this question, of which over half (52.9%) indicated there was no need or victims were not their mission or target population. Other responses included that there already was training or plans

“Don’t Know” Responses

Slightly over ten percent (11.5%) of survey participants did not know if the agency provided in-service training ($n = 191$). Over half of survey participants (57.4%) did not know if the agency/program is planning to send staff to training within the next 12 months ($n = 190$).

for training, clients are currently being identified as victims, and finally, that training has not focused on human trafficking but on more general trauma-informed care. Slightly over half (54.3%) of survey participants plan to send staff to training within the next 12 months ($n = 81$).

Agency/Program and Community Awareness and Capacity

About one-fourth of agencies/programs (22.7%) who serve victims of human trafficking reported victims participate in the planning and evaluation of services ($n = 75$). Nearly half of survey participants (48.1%) are aware of a coalition that works for victims of human trafficking ($n = 185$); however, only 38.2 percent of these agencies/programs coordinate efforts with a coalition that works for victims ($n = 63$). Eighty-five percent of providers are interested in building the capacity to serve victims ($n = 120$).

Survey participants were asked what type of assistance they would like. The most common type reported was training to identify or screen for victims, followed by training in issues unique to victims and treatment, including trauma-related EBPs. Some survey participants asked for in-house training or regional training to reduce training costs. Funding for training and for direct and ancillary services was the next most common request. The third most common assistance was help to build referral or resource networks, collaboration and linkage with coalitions. Awareness and education of staff and community was also indicated as an area of assistance, as well as learning about the level of the problem in communities.

Additional comments focused primarily on current efforts with working with victims of human trafficking, followed by the need for more information or training, and that human trafficking is not a problem or victims are not served.

“Don’t Know” Responses IV

Twenty-one percent did not respond whether the agency/program is aware of a coalition that does work for victims of human trafficking. There were no “Don’t Know” responses for this question. And, 36.1 percent did not know if the agency/program was interested in building capacity to serve victims.

Summary

Survey results could be limited in determining capacity based on the number of providers who responded (approximately 35 percent); however, readiness to some degree could be implied by the findings. The following are common response themes among the survey participants:

- Most providers do not focus on victims of human trafficking or are not aware of victims of human trafficking
- Most providers can refer and link clients to safe housing and crisis facilities, which are two critical services for victims of human trafficking
- Many agencies/programs are equipped to provide services to victims based on their therapeutic approaches and trauma-informed care or evidence-based practices; however, it is not apparent that providers have the knowledge, skills and/or ability to apply these approaches and practices to this population
- Almost half (48.1%) of the survey participants are aware of a coalition that works with victims, though only 38.2 percent of those participants also coordinate with such entities
- Providers that might not have been aware of human trafficking or victims prior to the survey are now interested in building capacity
- The most common type of technical assistance requested was training

The mapping of survey participants and related findings provides a quick reference for provider location and service(s) provided. This information can help with technical assistance planning. Table 4 summarizes these findings.

Table 4. Summary of agencies/providers.

	Survey Participants		Can Identify		Provide Outreach		Equipped to Treat	
	Counties	Boards*	Counties	Boards	Counties	Boards	Counties	Boards
Count	59	42	40	34	14	13	33	26
Percentage	67%	84%	45%	68%	16%	26%	38%	52%

*Community mental health and addiction services boards were counted as one area.

Limitations

The survey design chosen for this study imposed some limitations on the data analysis and conclusions. First, the purpose for asking the number of clients served and number of victims served as separate questions was to calculate the percentage of victims served among the reported clients served. This calculation could not be done, and the information regarding the number of clients served was not used since some of the numbers appeared unrealistic, possibly due to data entry errors, which would have distorted findings. Providing a range of the number of clients served and victims served for survey participants to check may have reduced possible data entry errors. Also, a definition for “clients served” may also have helped since some numbers appeared to have been based on total admissions instead of unique client admissions.

The same situation also appeared to have occurred with regards to number of employees or volunteers at the agencies/programs. This question was asked along with how many employees/volunteers had been trained in human trafficking so that a percentage of trained staff to total staff could be calculated. The number of employees or volunteers also appeared unrealistic; therefore, this information was not used.

Adding “Trauma-Informed Care” to the list of therapeutic approaches (question #10) may have reduced the number of written responses and possibly contributed to duplication and confusion. Close to 50 percent of the written responses (21 out of 44) for therapeutic approaches or methods currently being used by agencies/program were “Trauma-Informed Care” or related EBPs.

One final limitation was the use of two separate list serves, ODADAS and ODMH, which may have caused unintentional duplication of providers to have occurred. Therefore, there is the possibility that a provider may have completed more than one survey.

Recommendations

The following are the recommendations:

- Assist providers in determining the level of the problem in their communities
- Develop a communication plan to increase awareness of victims of human trafficking among service providers and within their community systems and to establish referral networks, collaborations and linkage to coalitions who work with victims
- Design education and training curricula to learn how to identify or screen for victims; and to learn how to provide treatment for victims or work with their unique issues
- Establish a working committee to plan for training and technical assistance
- Identify potential peer leaders who can facilitate the training and technical assistance

Report written by:

Patel, T, Massati, R, Doodley, J., Knudsen, K., Adhikari, S. (2013, January). Human Trafficking Capacity Survey Report. Columbus, OH: Ohio Departments of Alcohol & Drug Addiction Services and Mental Health.

With Contributions by: Bowen, S., Jones, T. Martt, N., Nixon-Hughes, D. Sherba, R. T., Starr, S.

Attachment A

Tables for “Don’t Know” Responses

Table A. Can identify victims through current processes (n = 220).

	Yes	No	Don’t Know
Count	96	72	52
Percentage	43.7%	32.7%	23.6%

Table B. Age, sex and industry of victims.*

	Age (n = 199)			Sex (n = 193)			Industry (n = 173)		
	Under 18	18 and Over	Don’t Know	Female	Male	Don’t Know	Labor	Sex	Don’t Know
Count	48	62	89	69	31	93	12	49	112
Percentage	24.1%	31.2%	44.7%	35.7%	16.1%	48.2%	7.0%	28.3%	64.7%

*Number of survey participants who answered the age question = 199, which means 27 answered both; number of survey participants who answered the sex question = 193, which means 31 answered both; and number of survey participants who answered the industry question = 173, which means 11 answered both.

Table C. Uses the Rescue/Child Assessment (n = 88).

	Yes	No	Don’t Know
Count	0	79	9
Percentage	0.0%	89.8%	10.2%

Table D. Provides outreach (n = 218).

	Yes	No	Don’t Know
Count	32	165	21
Percentage	14.7%	75.7%	9.6%

Table E. Provided an estimate of the number of victims served (n = 209).

	Yes	Zero	Not Applicable	Don’t Know	Provided Percentage
Count	22	35	2	149	1
Percentage	10.5%	16.7%	1.0%	71.3%	0.5%

Table F. Equipped to provide effective treatment. (n = 192).

	Yes	No	Don’t Know
Count	56	85	51
Percentage	29.2%	44.3%	26.5%

Table G. Can refer and link (n = 191).

	Yes	No	Don't Know
Count	167	11	13
Percentage	87.4%	5.8%	6.8%

Table H. Provided number of staff or volunteers trained in human trafficking (n = 190).

	Yes	Zero	Don't Know	"PP"
Count	34	55	100	1
Percentage	17.9%	28.9%	52.6%	0.6%

Table I. In-service training (n = 191).

	Yes	No	Don't Know
Count	25	144	22
Percentage	13.1%	75.4%	11.5%

Table J. Plan to send staff to training (n = 190).

	Yes	No	Don't Know
Count	44	37	109
Percentage	23.1%	19.5%	57.4%

Table K. Victims participate in planning and evaluation (n = 183).

	Do Not Serve Victims	Yes	No	Don't Know
Count	51	17	58	57
Percentage	27.8%	9.3%	31.7%	31.2%

Table L. Aware of a coalition that does work with victims (n = 185).

	Yes	No
Count	89	96
Percentage	48.1%	51.9%

Table M. Coordinate with a coalition that does work with victims (n = 92).

	Yes	No	Don't Know
Count	34	29	29
Percentage	37.0%	31.5%	31.5%

Table N. Interested in building capacity (n = 188).

	Yes	No	Don't Know
Count	102	18	68
Percentage	54.3%	9.6%	36.1%

HUMAN TRAFFICKING CAPACITY SURVEY

Introduction: The Ohio Departments of Alcohol and Drug Addiction Services and Mental Health are conducting this survey in accordance with the Ohio Human Trafficking Task Force June 2012 recommendations to assess the capacity and needs of existing behavioral health programs and local systems to provide effective, evidence-based and trauma-focused treatment and services to victims of human trafficking. The survey will take 5-10 minutes to complete.

Human trafficking is defined under U.S. federal law as a form of modern-day slavery where people profit from the control and exploitation of others. Victims of human trafficking include children involved in the sex trade, adults age 18 or over who are coerced or deceived into commercial sex acts, and anyone forced into different forms of "labor or services," such as domestic workers held in a home, or farm-workers forced into labor against their will. In each of these situations the elements of force, fraud or coercion are used to control people.

Please read each of the following questions and indicate your agency's or program's experience working with victims of Human Trafficking. Select the answer that best fits your agency/program's experience and/or provide a written response. If you do not have information on a question, please write the number "99" in the blank space. For this survey, the number "99" is reserved for when information is not known. To advance to the next page of the survey, click "next" at the bottom of each page. To complete and send the survey, click "done" at the bottom of the last page. Please respond to this survey by November 21, 2012 at 11:59 PM. Thank you!

The Departments thank you in advance for completing the survey.

If you have any questions about the survey, please contact:

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Identification

1. Is this agency/program able to identify victims of human trafficking through the current intake, screening or assessment processes?

- Yes
- No
- Don't Know

2. Does this agency/program provide outreach for victims of human trafficking?

- Yes
- No
- Don't Know

3. Estimated number of clients served per year at this agency/program (please enter 99 when the information is not known):

4. Estimated number of victims of human trafficking served per year at this agency/program (please enter 99 when the information is not known):

5. If your agency or program provides services to victims of human trafficking, what is the age of those being served (Check All That Apply):

- Under 18 years of age
- 18 years or older
- Don't know

6. Does your agency/program use the "Rescue/Child Assessment" to identify victims of human trafficking?

- Yes
- No
- Don't Know

7. If your agency or program provides services to victims of human trafficking, what is the gender of those being served? (Check All That Apply)

- Female
- Male
- Don't Know

8. If your agency or program provides services to victims of human trafficking, in what type of industry do the victims of human trafficking work? (Check All That Apply)

- Sex
- Labor
- Don't Know

Treatment

9. Is this agency/program equipped to provide effective treatment for victims of human trafficking?

- Yes
- No
- Don't Know

10. Please indicate the therapeutic approaches or methods that are currently being used at this agency/program (Check all that apply):

- Acceptance and Commitment Therapy
- Ancillary activities such as art, breath work, dance, drama, gardening, journaling, outdoors, physical, poetry, writing, yoga
- Cognitive Therapy
- Cognitive Behavioral Therapy
- Exposure Therapy
- Intensive Grief Counseling
- Life Skills Training
- Motivational Interviewing
- Narrative Therapy
- Peer Support Group
- Pet/Animal Therapy
- Rapid Eye Movement Desensitization and Reprocessing Therapy
- Spiritual approaches such as meditation mindfulness
- Stress Inoculation Training

Other (please specify)

11. Please indicate the trauma-informed care or sensitive evidence-based practices that are currently being used at this agency/program (Check all that apply):

- Addiction and Trauma Recovery Integration Model (ATRIUM)
- Beyond Trauma and Healing Trauma
- Dialectical Behavioral Therapy
- Essence of Being Real
- Risking Connection
- Sanctuary Model
- Seeking Safety
- Trauma, Addiction, Mental Health and Recovery (TAMAR)
- Trauma Affect Regulation: Guide for Education and Therapy (TARGET)
- Trauma-Focused Cognitive Behavioral Therapy
- Trauma Recovery and Empowerment Model (TREM/M-TREM)

Other (please specify)

12. Can the agency/program refer and link* clients with a safe house, domestic violence shelter or rape crisis shelter?

*** "refer and link" is defined as the agency/program having a relationship with at least one entity which can provide this service (refer), and the agency/program ensures that the client accesses the service (link).**

- Yes
- No
- Don't Know

Staffing

13. How many people are employed or volunteer at this agency/program (please enter 99 when the information is not known)?

14. What is the number of employed or volunteer staff who have been trained in human trafficking (please enter 99 when the information is not known)?

15. Does this agency/program provide any in-service training for human trafficking?

- Yes
- No
- Don't Know

16. Why have agency/program staff not been trained in human trafficking? (Check all that apply)

- Cannot locate any training
- Cannot afford training
- Loss of productivity to attend
- Do not have a need
- Do not have an interest

Other (please specify)

17. Does the agency/program plan to send staff to human trafficking training within the next 12 months?

- Yes
- No
- Don't Know

Agency/Program and Community

18. Do victims of human trafficking participate in planning and evaluation of agency/program's services?

- Do not serve victims of human trafficking
- Yes
- No
- Don't Know

19. What county is this agency/program located in?

20. Is this agency/program aware of a coalition that does work for victims of human trafficking?

- Yes
- No

21. Does this agency/program coordinate efforts with a coalition that does work for victims of human trafficking?

- Yes
- No
- Don't Know

22. Is this agency/program interested in building the capacity to serve victims of human trafficking?

- Yes
- No
- Don't Know

23. What kind of assistance would you like to have to build the capacity to provide services for victims of human trafficking?

24. Please provide any additional information, remarks or comments or areas of need not included in these questions.

25. Please provide your contact information for recognition or technical assistance purposes.

Name	<input type="text"/>
Position	<input type="text"/>
Agency/Program	<input type="text"/>
Email Address	<input type="text"/>
Telephone Number	<input type="text"/>

Thank You for Your Participation