

## HANDOUT #1: AMP MODEL

### Action

- Recruits
- Harbors
- Transports
- Provides
- Obtains or so attempts

### Means

(Force, Fraud, Coercion)

- Causing or threatening serious harm
- Physical restraint
- Debt bondage
- Abuse of legal process
- Withholding documents

### Purpose

- Commercial sex acts
- Labor or Services

## HANDOUT #2:

### Service Needs Screening Tool: Guide for Service Providers

Gender-based violence can take multiple forms – often these forms are not mutually exclusive of each other. The Domestic Violence Advocacy Consortium service providers strive to identify and address all forms and intersections of gender-based, including: domestic violence, sexual assault, labor and sex trafficking.

#### Purpose

The purpose of the COC Service Needs Screening Tool is to:

- 1) Provide service providers with a screening tool that can identify the three most common forms and intersections of gender-based violence (domestic violence, sexual assault, and human trafficking); and
- 2) Ensure individuals are connected to all of the services for which they are eligible.

The purpose of this tool is not to establish that an individual *is or has been* a victim of domestic violence, sexual assault, or human trafficking – but rather to identify that they *may be or may have been* victims/survivors of these crimes, then connect them with a confidential advocate who can provide a thorough assessment and comprehensive support. This tool should only be used with adults age 18 and older. The tool is available in English and Spanish.

#### Contents of the Tool

There are five questions for clients to self-report. Clients may choose to directly answer the question asked, decline to answer the question, or skip the question entirely.

#### Domestic Violence/Intimate Partner Abuse: Questions 1 & 2

Questions 1 and 2 are meant to identify any current or past intimate partner abuse. Question 1 specifically asks whether the individual feels safe at home or at the place they are currently staying. Question 2 asks if the individual is being hurt by someone they know. If the individual responds yes to either question 1 or 2, please refer them to the appropriate domestic violence service provider.

#### Human Trafficking: Question 3

Question 3 is designed to identify potential instances of labor trafficking or wage theft. The purpose of these questions is to ascertain if the individual was potentially put into a situation, through the use of force, fraud, or coercion, where she/he was exploited for labor. If the person responds yes to this question, please connect them to the South Bay Coalition to End Human Trafficking by calling **1877-363-7238**.

**Sexual Assault: Question 4**

Questions 4 was included to identify potential cases of sexual assault and/or sexual exploitation. This questions may be especially difficult for individuals to answer. Please ensure individuals understand they do not have to answer any question that they do not feel comfortable answering. The two sexual assault service providers in Santa Clara County are Community Solutions (serving Morgan Hill, San Martin, and Gilroy), and the YWCA (serving the rest of the county).

**General Safety: Question 5**

Question 5 is an open-ended question intended to identify general potential safety risks for the individual. If the individual expresses concern regarding current issues of domestic violence, sexual assault, or human trafficking, please refer them to the corresponding agency.

## HANDOUT #3:

# Domestic Violence, Sexual Assault, and Trafficking Pre-Screening Questions

### INSTRUCTIONS

Assessors must ask these questions of each adult in a household before administering the VI-SPDAT. These questions must be asked one-on-one in a private location. If a client is already in HMIS because they have undergone a Family VI-SPDAT with their alleged abuser, the survivor should be given the option to be re-assessed without that individual.

If a client is in immediate crisis or begins exhibiting signs of a trauma response at any point during your interaction, immediately stop the pre-screening and call one of the crisis hotlines listed on the Domestic Violence, Sexual Assault, and Trafficking Referral List.

### SCRIPT

Before I learn more about your housing situation, I want to ask you some questions about whether you feel safe or are in danger right now. These are questions that I ask everyone because these issues are very common. The questions are personal and difficult for some people to answer, and if you don't want to answer them that's fine – you don't have to. You can stop anytime, or you can choose to answer some questions and not answer others.

The reason I'm going to ask these questions is to determine the services that will best fit your needs. Any information you share with me today will stay between us, unless you give me permission to share it.

- **(If you are a mandated reporter)** However, if you tell me something that leads me to believe that a child has been abused or neglected, the law requires me to report this.
- **(If you are not a mandated reporter)** I will not call the police or do anything with this information that you don't want me to do.

Based on your answers, I may offer you referrals to specific resources in the community. It is always your choice whether you accept a referral to work with another program or continue talking to me about your housing situation. Also, whatever you tell me will not affect your eligibility for housing assistance. You will have the same ability to access housing as anyone else regardless of how you answer these questions.

Do you have any questions before I start?

### QUESTIONS

1) Do you feel safe at home or at the place you are staying currently?

Yes

No

Decline to answer

- 2) Are you being hurt (physically, emotionally, sexually, etc.) by someone you know?  
 **Yes**                       **No**                       **Decline to answer**
- 3) In United States, have you ever worked [or done other activities] without getting the payment you thought you would get?
- 4) Has anyone forced or pressured you to touch them or someone else sexually in exchange for safety, money, or something of value (for example, food, shelter, drugs, gifts, etc.)  
 **Yes**                       **No**                       **Decline to answer**
- 5) Is there anything else that you would like to tell me about your safety?

---



---



---



---



---

**[IF CLIENT DISCLOSES DOMESTIC VIOLENCE, SEXUAL ASSAULT, OR TRAFFICKING, PROCEED WITH SCRIPT. IF NO, CONTINUE WITH THE ROI AND THE VI-SPDAT.]**

I'm glad you told me about this, and I want to help you to stay healthy and safe. I am happy to continue working with you, but I also want to let you know that there are several organizations in Santa Clara County that specialize in working with people who have similar experiences. These organizations can help you access the same housing and services that I can and would store your information in a different confidential database which isn't shared by the County or other organizations. They can also link you to counseling services, legal assistance, emergency shelters, and other services that you might need. If you would like, I can help connect you with one of these agencies. Would you like to work with one of those organizations?

**[IF YES, MAKE REFERRAL TO AN AGENCY FROM THE DOMESTIC VIOLENCE, SEXUAL ASSAULT, AND TRAFFICKING REFERRAL LIST TO PROVIDE SERVICES AND CONDUCT THE VI-SPDAT. IF NO, CONTINUE WITH SCRIPT.]**

The next step in this process is an assessment that helps us identify the housing resources you might be eligible for. I would be happy to do the assessment with you now if you would like.

After you take the assessment, the next step is to enter your information into the County's database, which means that some County staff and service providers will have access to information like your name, location, and answers to the assessment questions. However, if you are concerned about agencies having access to this information I can enter your information anonymously. This means that I will not include your first or last name, Social Security Number, or location and will only enter the year of your birth rather than the whole date.

**[ENTER CLIENT'S INFORMATION AS USUAL OR ANONYMOUSLY DEPENDING ON THE CLIENT'S CHOICE.]**

## Preguntas de Evaluación Preliminar sobre Violencia Doméstica, Asalto Sexual, y Trata de Personas

### INSTRUCCIONES

Los evaluadores deben preguntar estas preguntas a cada adulto en un hogar antes de administrar el VI-SPDAT. Estas preguntas se deben preguntar en un lugar privado cara a cara entre el evaluador y el individuo. Si un cliente ya está en HMIS porque ya han experimentado el VI-SPDAT Familiar con el supuesto abusador, al sobreviviente se le debe dar la opción de ser re-evaluado sin ese individuo.

Si un cliente está en crisis inmediata o empieza a exhibir señales de respuesta a trauma en cualquier momento durante su interacción, detenga la evaluación preliminar inmediatamente y llame a una de las líneas de asistencia en crisis anotadas en la Lista de Referencia de Violencia Doméstica, Asalto Sexual, y Trata de Personas.

### GUIÓN

Antes de conocer más sobre la situación de su hogar, le quiero preguntar algunas preguntas acerca de si usted se siente seguro/a o si está en peligro en este momento. Estas son preguntas que le hago a todos/as porque estas cuestiones son muy comunes. Las preguntas son personales y difíciles de contestar para algunas personas, y si usted no desea contestarlas, está bien – usted no tiene que contestarlas. Usted puede detenerse en cualquier momento, o usted puede elegir contestar unas preguntas y no otras.

La razón porque le hago estas preguntas es para determinar los servicios que mejor sirvan a sus necesidades. Cualquier información que usted comparta conmigo hoy se queda entre nosotros, a menos que usted me de permiso para compartirla.

- **(Si usted está obligado a reportar)** Sin embargo, si usted me dice algo que me haga creer que un menor ha sido abusado o descuidado, la ley ordena que yo reporte esto.
- **(Si usted no está obligado a reportar)** Yo no llamaré a la policía ni haré nada con esta información si usted no quiere que lo haga.

Basado en sus respuestas, yo le puedo ofrecer recursos específicos en la comunidad. Siempre es usted quien elige si acepta la referencia a trabajar con otro programa o continúa hablando conmigo sobre su situación de vivienda. Además, cualquier cosa que usted me diga no afectará su elegibilidad para asistencia en conseguir vivienda. Usted tendrá la misma habilidad de obtener vivienda al igual que cualquier otra persona sin importar cómo contesta usted estas preguntas.

¿Tiene usted alguna pregunta antes de comenzar?

### PREGUNTAS

1) ¿Se siente usted seguro/a en su hogar o en el lugar donde se está quedado ahora?

**Sí**

**No**

**Niego contestar**

2) ¿Está usted siendo lastimado/a (físicamente, emocionalmente, sexualmente, etc.) por alguien a quien usted conoce?

**Sí**

**No**

**Niego contestar**

3) Dentro de los Estados Unidos, ¿alguna vez ha trabajado [o hecho otras actividades] sin recibir pago que usted pensaba que recibiría?

4) ¿Alguna persona le ha forzado o presionado a tocarlos a ellos u otras personas sexualmente a cambio de seguridad, dinero, o alguna cosa de valor (por ejemplo, alimento, vivienda, drogas, regalos, etc.)?

**Sí**

**No**

**Niego contestar**

5) ¿Hay alguna otra cosa que desea decirme sobre su seguridad?

---



---



---



---

**[SI EL CLIENTE REVELA VIOLENCIA DOMÉSTICA, ASALTO SEXUAL, O TRATA DE PERSONAS, PROCEDA CON EL GUIÓN. SI NO, CONTINUE CON EL ROI Y EL VI-SPDAT.]**

Me alegra que me haya hablado de esto, y deseo ayudarle a estar sano y salvo. Me da gusto continuar trabajando con usted, pero también quiero informarle que hay varias organizaciones en el Condado Santa Clara que se especializan en trabajar con personas que tiene experiencias similares a las suyas. Estas organizaciones le pueden ayudar a tener acceso a las mismas viviendas y servicios que yo le puedo ofrecer y guardarían su información en diferentes bases de datos confidenciales que no se comparten con el Condado u otras organizaciones. También le pueden conectar con servicios de consejo, asistencia legal, viviendas de emergencia, y otros servicios que usted pueda necesitar. Si usted lo desea, le puedo ayudar a conectar con estas agencias. ¿Desea trabajar con alguna de esas organizaciones?

**[SI ES SÍ, HAGA LA REFERENCIA A UNA AGENCIA DE LA LISTA DE VIOLENCIA DOMÉSTICA, ASALTO SEXUAL, O TRATA DE PERSONAS PARA PROVEER SERVICIOS Y HAGA EL VI-SPDAT. SI NO, CONTINUE CON EL GUIÓN.]**

El siguiente paso en este proceso es una evaluación que nos ayuda a identificar los recursos de vivienda a los cuales usted puede ser eligible. Me complacería hacer la evaluación con usted si así lo desea.

Después de hacer la evaluación, el siguiente paso es poner la información en la base de datos del Condado, lo que significa que algunos empleados del Condado y proveedores de servicios tendrán acceso a la información como su nombre, lugar donde vive, y las respuestas a las preguntas de la evaluación. Sin embargo, si a usted le preocupa que estas agencias tengan acceso a esta información, puedo poner su información de forma anónima. Esto significa que yo no incluiré su nombre, apellido, número de Seguro Social, ni lugar donde vive y sólo anotaré el año de su nacimiento en lugar de la fecha completa.

**[ANOTE LA INFORMACIÓN DEL CLIENTE COMO ES COSTUMBRE O ANÓNIMO DEPENDIENDO DE SU ELECCIÓN.]**

## **HANDOUT #4:**

Viviana walks into your office looking for housing support after Jorge, her abusive partner, kicked her out of his house and threatened to use the legal process to gain full custody of their one-year old child. Viviana stated that she met Jorge online and he convinced her to relocate from Mexico to the US. The plan was that they would live together and eventually get married. Shortly after arriving in the US, Viviana found out that her partner already had a fiancé. For the next couple of years, Jorge proceeded to use Viviana as a domestic servant without pay, pressure her to work at his janitorial business without pay, and to beat and rape her regularly.

Cindy became homeless when she left her boyfriend Greg after he severely beat her. When they first met, Greg was really sweet and generous. Then, he began beating Cindy and coercing her into sleeping with other men for money. When she refused, he would beat her or kick her out of their apartment.



# Referral and Warm Handoff Processes

## HANDOUT #5

The Santa Clara County Domestic Violence Advocacy Consortium (DVAC) member agencies are committed to ensuring prompt trauma-informed support to survivors of intimate partner abuse, sexual assault, and/or human trafficking in Santa Clara County. The following guidelines outline each member agency's process for referrals, warm handoffs, and in-person responses.

### Intimate Partner Abuse (IPA)

There are five confidential IPA service providers in Santa Clara County: Asian Americans for Community Involvement (AACI), Community Solutions, Maitri, Next Door, and the YWCA of Silicon Valley. Each organization has unique processes for warm handoffs and in-person responses:

#### AACI

- *Service Area:* Santa Clara County
- *Language Capacity:* English, Mandarin, Vietnamese, Laos, Thai, Mien, Tagalog, Spanish, Korean, Cantonese, Khmer, other Asian and non-Asian languages and dialects available
- *Referrals:* Service providers and community members can refer victims and survivors to AACI Asian Women's Home's 24-hour crisis line: **(408)975-2739**
- *Warm Handoffs:* Victims or survivors requiring a warm handoff can be linked to IPV services as follows: referring party can call our 24-hour crisis line at **(408)975-2739** to speak to a confidential advocate. Additionally, IPV survivors can be referred to the Central County Family Justice Center (FJC), located at 749 Story Road, Suite 50, San Jose, CA 95122. The FJC operates every Thursday from 9am to 5pm. Upon arriving at the FJC, the referring party can request to speak with a legal advocate. No appointment is needed.

#### Community Solutions:

- *Service Area:* South Santa Clara County – including Morgan Hill, San Martin, and Gilroy.
- *Language Capacity:* English, Portuguese, Punjabi, and Spanish
- *Referrals:* Service providers and community members can refer IPA victims and survivors to Community Solutions' 24-hour crisis line: **877-363-7238** or to the Community Solutions Morgan Hill Office located at 16264 Church Street, Suite 103, Morgan Hill, CA, or our Gilroy office located at 9015 Murray Avenue, Suite 100, Gilroy. Our office hours are Monday through Friday from 9am – 5pm.
- *Warm Handoffs:* Victims or survivors requiring a warm handoff can be linked to IPA services as follows: referring party can call our 24-hour crisis line at **877-363-7238** to speak to a confidential advocate. Additionally, IPA survivors can be referred to the South County Family Justice Center (SCC FJC), located within Community Solutions Morgan Hill Office located at 16264 Church Street, Suite 103, Morgan Hill, CA. The SCC FJC operates every Wednesday from 9am to 4pm. Upon arriving at the FJC, the referring party can request to speak with the FJC Coordinator. No appointment is needed.

*In Person Response:* Community Solutions IPA advocates provide in-person response to Morgan Hill Police Department, Gilroy Police Department, South County Sheriff's Office, South County DFCS locations, and South County-based emergency rooms. The purpose of an in-person response is to ensure IPA survivors' emergency needs are met (shelter, food, safety). To request an in-person response request, please call our 24-hour crisis line at **877-363-7238**.

## Referral and Warm Handoff Processes

### NEXT DOOR

- *Service Area:* Santa Clara County
- *Language Capacity:* English, Spanish
- *Referrals:* Service providers and community members can refer victims and survivors to Next Doors 24-hour crisis line; **(408) 279-2962**
- *Warm Handoffs:* Victims or survivors requiring a warm handoff can be linked to IPV services as follows: referring party can call our 24-hour crisis line at **(408) 279-2962** to speak to a confidential advocate. Translation services are available.

### Maitri

- *Service Area:* Santa Clara County and adjacent counties
- *Language Capacity:* Bengali, English, Gujarati, Hindi, Marathi, Punjabi, Tamil, Telegu, and other languages used in South Asia.
- *Referrals and Warm handoffs:* Service Providers and Members of the community can refer victims and survivors of IPV to Maitri Toll Free Helpline 1-888-862-4874. Helpline is live 9 am to 3 pm.
- Address is confidential and meeting by appointment only.
- In person response not available

### YWCA Silicon Valley

- *Service Area:* Santa Clara County
- *Language Capacity:* English and Spanish \*Voiance Language Services are always available
- *Referrals:* Service Providers and community members can refer survivors to our 24/7 Support Line, **1-800-572-2782** for support, or to make an appointment. Survivors can also walk-in to any of the following:
  - *Linda Haskell Empowerment Center* located at 375 S Third St, San Jose, CA 95112. Walk-in hours & business hours are Monday through Friday from 9am – 5pm.
  - *Family Violence Center*, 1671 The Alameda, Suite #100, San Jose, CA. 95126 Walk-ins accommodated on Tuesday, Wednesday and Thursday: 8:00 AM to 5:00 PM. Appointments can be made on Mondays by calling 408-277-3700.
  - *North County Family Justice Center*, located at 298 S Sunnyvale, Ave, Ste 105, Sunnyvale, CA, The FJC operates every Friday from 9am to 4pm. No Appointments needed.
  - *YWCA Satellite Office* by appointment only located at 298 S Sunnyvale Ave, Ste 105, Sunnyvale, CA. Call 1-800-572-2782 to schedule appointment.

### **Sexual Assault (SA)**

Two of the five confidential IPA service providers in Santa Clara County also provide sexual assault services: Community Solutions and the YWCA of Silicon Valley. Each organization has unique processes for warm handoffs and in-person responses:

### Community Solutions:

- *Service Area:* South Santa Clara County – including Morgan Hill, San Martin, and Gilroy.
- *Language Capacity:* English, Portuguese, Punjabi, and Spanish

## Referral and Warm Handoff Processes

- *Referrals:* Service providers and community members can refer IPA victims and survivors to Community Solutions' 24-hour crisis line: **877-363-7238** or to the Community Solutions Morgan Hill Office located at 16264 Church Street, Suite 103, Morgan Hill, CA, or our Gilroy office located at 9015 Murray Avenue, Suite 100, Gilroy. Our office hours are Monday through Friday from 9am – 5pm.
- *Warm Handoffs:* Victims or survivors requiring a warm handoff can be linked to SA services as follows: referring party can call our 24-hour crisis line at **877-363-7238** to speak to a confidential advocate. Additionally, SA survivors can be referred to the South County Family Justice Center (SCC FJC), located within Community Solutions Morgan Hill Office located at 16264 Church Street, Suite 103, Morgan Hill, CA. The SCC FJC operates every Wednesday from 9am to 4pm. Upon arriving at the FJC, the referring party can request to speak with the FJC Coordinator. No appointment is needed.
- *In Person Response:* Community Solutions SA advocates provide in-person response to Morgan Hill Police Department, Gilroy Police Department, South County Sheriff's Office, South County DFCS locations, Schools, and South County-based emergency rooms. The purpose of an in-person response is to ensure SA survivors' emergency needs are met (shelter, food, safety). To request an in-person response request, please call our 24-hour crisis line at **877-363-7238**.

### YWCA Silicon Valley

- Service Area: Central and North parts of Santa Clara County
- Language Capacity: English, Spanish, Vietnamese, Cantonese \*Voiance Language  
Services are always available
- Referrals: Service Providers and community members can refer survivors to our 24/7 Support Line, 1-800-572-2782 for support, or to make an appointment. Survivors can also walk-in to any of the following:
  - Linda Haskell Empowerment Center located at 375 S Third St, San Jose, CA 95112. Walk-in hours & business hours are Monday through Friday from 9am – 5pm.
  - YWCA Satellite Office by appointment only located at 298 S Sunnyvale Ave, Ste 105, Sunnyvale, CA. Call 1-800-572-2782 to schedule appointment.
  - North County Family Justice Center, located at 298 S Sunnyvale, Ave, Ste 105, Sunnyvale, CA, The FJC operates every Friday from 9am to 4pm. No Appointments needed.
- In Person Response: As part of the Sexual Assault Response Team (SART), advocates provide in-person response to Valley Medical, San Jose PD, Santa Clara PD, Sunnyvale DPS, Palo Alto PD, Campbell PD, Los Gatos PD, Mountain View, Los Altos PD, Milpitas PD, Stanford DPS, San Jose State University PD, the Sherriff's Office and all Santa Clara County correctional facilities. As part of the coordinated response to the crime of sexual assault, advocates provide support to survivors of sexual assault and violence to ensure emergency needs are met. If someone would like to make a report or request an in-person response please call our 24-hour Support Line at 1-800-572-2782.

### Human Trafficking (HT)

Community Solutions serves as the Point Agency for all human trafficking referrals in Santa Clara County. For assistance with a human trafficking crisis, please call our crisis line at **877-363-7238**. For consultations regarding potential human trafficking cases, please call Kim Gutierrez at **408-776-6205**.

# HANDOUT #6: HT POINT PERSON REFERRAL FORM

South Bay Coalition to End Human Trafficking  
POINT PERSON REFERRAL FORM



CLIENT INFORMATION	REFERRED BY:
NAME: _____	NAME: _____
LANGUAGE: _____ DOB: _____	ORGANIZATION: _____
ETHNICITY: _____ AGE: _____	PHONE NUMBER: _____
PHONE: _____ GENDER: _____	REFERRAL DATE: _____
CITY: _____	TYPE OF CASE: <input type="checkbox"/> LABOR <input type="checkbox"/> SEX <input type="checkbox"/> CSEC
<b>CURRENT NEEDS:</b>	
<input type="checkbox"/> Shelter	<input type="checkbox"/> Accompaniment
<input type="checkbox"/> Food	<input type="checkbox"/> Transportation
<input type="checkbox"/> Clothing	<input type="checkbox"/> Immigration Representation
<input type="checkbox"/> Advocacy	<input type="checkbox"/> Case Management
<input type="checkbox"/> Medical	<input type="checkbox"/> Resources/Referrals
<input type="checkbox"/> Dental	<input type="checkbox"/> SSA Benefits
<input type="checkbox"/> Counseling	<input type="checkbox"/> Victim Witness
Additional Comments: _____	

**POINT PERSON NOTES:**

---



---



---



---



---



---

**ASSIGNED TO:**

CASE MANAGER: \_\_\_\_\_ DATE REFERRED: \_\_\_\_\_

AGENCY: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

EMAIL COMPLETED FORM TO:  
[HTPointPersonReferral@CommunitySolutions.org](mailto:HTPointPersonReferral@CommunitySolutions.org)