

## Colorado High Risk Victim Identification Tool

Youth Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Screening Date: \_\_\_\_\_ Completed by: \_\_\_\_\_

Agency: \_\_\_\_\_ Case #: \_\_\_\_\_

**Identifiers:**

**Source: (Indicate self report or documentation)**

|   |  |
|---|--|
| <input type="checkbox"/> Three or more runs in 12 months  |  |
| <input type="checkbox"/> First run at the age of 12 or younger  |  |
| <input type="checkbox"/> Longest run more than 20 days  |  |
| <input type="checkbox"/> Credible report of commercial sexual exploitation                                      |  |
| <input type="checkbox"/> Found in a motel/hotel or area known for commercial sex. (See local guide for details) |  |

**Enhancers:**

**Source: (Indicate self report or**

**documentation)**

|  |  |
|--|--|
| <input type="checkbox"/> Drug charges/substance abuse  |  |
| <input type="checkbox"/> Tattoos/Brands-unexplained, reluctance to explain   |  |
| <input type="checkbox"/> Truancy and/or not enrolled in school   |  |
| <input type="checkbox"/> In relationship/expressed interest in older men/women who may be intimate partner, friend or relative   |  |
| <input type="checkbox"/> Possession of expensive items, large amounts of cash, unexpected travel   |  |
| <input type="checkbox"/> Giving false info/no ID/lying about age/NOT in control of ID  |  |
| <input type="checkbox"/> Homeless, not living with adults, couch surfing, etc.   |  |
| <input type="checkbox"/> History of, or current concern about Sexual Abuse, Physical Abuse or Neglect  |  |
| <input type="checkbox"/> History of law enforcement contact related to prostitution or other charges that may occur while being trafficked (theft, drugs, assault). May have multiple curfew violations. |  |
| <input type="checkbox"/> Stays with individual(s) who require payment for housing. Payment could be sexual favors, drugs or money.   |  |
| <input type="checkbox"/> Family, friends, peers known to be involved in illegal commercial sex and/or criminal activities  |  |

**Additional Red Flags:****Source: (Indicate self report or documentation)**

|  |  |
|--|--|
| <input type="checkbox"/> Sexually explicit social networking profiles/chat room engagement   |  |
| <input type="checkbox"/> Demeanor: unable to make eye contact, afraid to speak   |  |
| <input type="checkbox"/> Not in control of money earned, owes a debt or has intense sense of financial responsibility toward family or intimate partner.                               |  |
| <input type="checkbox"/> Using the language of the commercial sex industry ("the life"). Ask local experts for examples  |  |
| <input type="checkbox"/> Relationships/found in the presence of older, non-related adults  |  |
| <input type="checkbox"/> STIs, pregnancy, abortions  |  |
| <input type="checkbox"/> Lack of support system or supportive relationships  |  |
| <input type="checkbox"/> Cannot identify address or residence  |  |
| <input type="checkbox"/> Gang Involvement  |  |
| <input type="checkbox"/> Family dysfunction  |  |
| <input type="checkbox"/> Bruises/unexplained marks   |  |
| <input type="checkbox"/> Mental health: Fear, anxiety, depression, paranoia, PTSD, suicidal, etc.  |  |
| <input type="checkbox"/> Physical: malnourished, poor hygiene, skin rash, exhaustion, etc.   |  |
| <input type="checkbox"/> Not in control of eating and/or sleeping  |  |
| <input type="checkbox"/> Inconsistent stories-different accounts of relationships, events, etc. to different people or at different times.   |  |
| <input type="checkbox"/> Has received threats to self, family or friends if they do not work or participate in criminal activity.  |  |
| <input type="checkbox"/> Appears to be monitored-unable to have private meetings, phone conversations, whereabouts are being monitored, fear of not sharing location/who they are with |  |

**Labor Trafficking Indicators**

**Source: (Indicate self report or documentation)**

**If your MDT does not have this expertise, please call the CONEHT Hotline (866-455-5075) for assistance and resources.**

|  |  |
|--|--|
| <input type="checkbox"/> Recruited with false promises of work conditions or pay   |  |
| <input type="checkbox"/> Works long hours with few or no breaks  |  |
| <input type="checkbox"/> Pay is inconsistent   |  |
| <input type="checkbox"/> Some or all pay goes towards debt, housing , food, etc.   |  |
| <input type="checkbox"/> Some or all pay is given to someone else  |  |
| <input type="checkbox"/> Unexplained signs of injury or illness, possibly untreated                                      |  |
| <input type="checkbox"/> Shows anxiety in maintain job for duty to family, intimate partner or to pay a debt to employer |  |
| <input type="checkbox"/> Desperation to make a sale (magazines, beauty products, etc) or for money while begging         |  |
| <input type="checkbox"/> Resides with a number of unrelated co-workers and others  |  |
| <input type="checkbox"/> Forced, threatened or coerced to participate in illegal activities including drug sales         |  |

*Disclaimer: While this checklist can be a useful tool to improve identification of potential victims of exploitation, it is not a validated diagnostic tool. The checklist is intended to be used to supplement comprehensive screening, assessment and/or intake processes that explore a multitude of domains such as family, peers , school, employment, substance abuse, protective factors, etc. Even if a youth’s profile suggests a presence of multiple indicators on the checklist, it does not confirm trafficking/victimization, but highlights a need for further assessment. Information noted on this checklist will be part of a confidential database and only shared by professionals involved in the youth’s care.*