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Testimony of the Human Trafficking Prevention Project

BILL NO: TITLE:	House Bill 296 Interim and Temporary Protective Orders – Electronic Filing and Video Conferencing Hearings
COMMITTEE:	Judiciary
HEARING DATE:	February 3, 2022
POSITION:	SUPPORT

House Bill 296 would allow a victim of interpersonal violence to seek access to a protective order while receiving medical treatment in a hospital setting. The Human Trafficking Prevention Project at the University of Baltimore School of Law supports this bill because it promotes the health, independence, and safety of survivors of interpersonal violence, many of whom are also survivors of human trafficking.

Experiences with interpersonal violence commonly overlap with human trafficking. It is not uncommon for a victim's spouse or romantic partner to be their trafficker, subjecting them to forced prostitution or other forms of forced labor, including forced non-commercial sex.¹ The growing recognition of the connection between the two crimes is crucial as service providers work to assist survivors in obtaining justice for what has been done to them.

Given the level of physical and psychological abuse that survivors of human trafficking face,² it is not surprising that approximately 88% of human trafficking victims access health care during their trafficking situation.³ As such, "[t]he comparative frequency with which individuals who are actively being trafficked have access to the health care system suggests that this is where [] meaningful interventions can be made."⁴ Given that screenings for domestic violence and human trafficking already take place regularly in the hospital setting,⁵ hospitals seem well-suited to provide this additional supportive service to victims of interpersonal violence and trafficking.

HB 296 would allow for victims to request a protective order from a hospital setting while seeking medical attention. Yet current court rules require that a victim must leave the safety of a hospital and the professionals available to assist them to obtain a protective order. A victim may lack the necessary transportation to the courthouse, may be too unwell, both mentally and physically, to travel to the courthouse, or the abuser might be sitting in the waiting room.

Courts in Maryland have successfully conducted virtual hearings throughout the course of the nearly two yearlong COVID-19 pandemic. It should no longer be necessary to require a victim of violence to potentially undermine their physical and/or emotional safety by leaving the security of a hospital setting to obtain a protective order. Maryland must remove barriers to victim safety and HB 296 is a crucial step in the process of removing barriers to safety for victims of violence and for these reasons, we urge a favorable report with sponsor amendments on HB 296.

¹ See generally The Human Trafficking Legal Center, *Human Trafficking and Domestic Violence Fact Sheet* (2018), https://www.htlegalcenter.org/wp-content/uploads/Human-Trafficking-and-Domestic-Violence-Fact-Sheet.pdf.

² See generally Cathy Zimmerman & Nicola Pocock, *Human Trafficking and Mental Health: "My Wounds are Inside; They are Not Visible"* 19 Brown Journal of World Affairs 2 (Spring/Summer 2013), https://healtrafficking.org/wp-content/uploads/2021/04/24590833.pdf.

³ See generally Brittany Anthony, On-Ramps, Intersections, and Exit Routes: A Roadmap for Systems and Industries to Prevent and Disrupt Human Trafficking (July 2018), https://polarisproject.org/wp-content/uploads/2018/08/A-Roadmap-for-Systems-and-Industries-to-Prevent-and-Disrupt-Human-Trafficking-Health-Care.pdf.

⁴ *Id.* at 31.

⁵ See generally Women's Health, Maternal and Child Health, Maryland Department of Health and Mental Hygiene, *Intimate Partner Violence (IPV): A Guide for Health Care Providers* (January 2013).

https://health.maryland.gov/phpa/mch/Documents/IPV%20Guide%20for%20providers.January.pdf; Susie Baldwin, Jeffret Barrows, & Hanni Stoklosa, *Protocol Toolkit for Developing a Response to Victims of Human Trafficking in Health Care Settings* (2017) (on file with author).