



An Evaluation of the Safe Harbor Initiative in Minnesota – 2025

REPORT TO COMMISSIONER AND LEGISLATURE

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An Evaluation of the Safe Harbor Initiative in Minnesota 2025 – Report to Commissioner and Legislature

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Executive summary

Safe Harbor became Minnesota law in 2011, and in the years since, the state has built an extensive network in response to the sexual exploitation of youth and, more recently, human trafficking, both sex and labor. The network spans from state and local government to Tribal Nations and community-based nonprofit programs.

Safe Harbor is led by the Minnesota Department of Health (MDH), recognizing the serious health and social effects of exploitation and trafficking. To provide a strong, coordinated response, MDH works closely with partners in public safety, human services, and human rights, including the Minnesota Department of Human Services (DHS), the Minnesota Department of Public Safety (DPS), the Minnesota Department of Children, Youth, and Families (DCYF), the Minnesota Department of Labor and Industry (DLI), and the Minnesota Attorney General's Office, as well as Tribal Nations. MDH and DHS, through state and federal funds, provided over 50 grants for supportive services, regional navigation, outreach, emergency shelter, supportive housing, and law enforcement efforts.

State law (Minnesota Statute Section 145.4718) requires the MDH Safe Harbor Director to submit a biennial evaluation of the program to the commissioner of health and legislature evaluating whether Safe Harbor is:

- Reaching its intended participants
- Helping identify more youth who have been exploited or trafficked
- Improving the coordination among key disciplines, like law enforcement and child welfare
- Providing access to services, including housing
- Ensuring the quality of services
- Using penalty funds to support services

The evaluation process is an opportunity to hear and learn from trafficked and exploited youth as well as participants from a variety of disciplines who respond to the needs of these youth daily. The Improve Group conducted the 2023 and the current evaluation under a competitive contract. MDH presents this 2025 legislative report as a summary of key information contained within the larger and more lengthy evaluation completed by The Improve Group. The evaluation centered youth and applied mixed methods to tell the whole story of Safe Harbor. Youth advisors with lived experience provided valuable input on the evaluation design and interpretation of findings. Findings in The Improve Group evaluation report focus on the Safe Harbor network and activities between April 1, 2023, and June 30, 2025. The complete Improve Group evaluation is available on the MDH website at [Minnesota Safe Harbor Evaluation \(www.health.state.mn.us/communities/humantrafficking/reports/sheval.html\)](https://www.health.state.mn.us/communities/humantrafficking/reports/sheval.html) hereinafter Improve Group report).

During the next period ending in 2027, MDH will improve the evaluation design by including more Tribal consultation, implementing innovative approaches for data gathering from youth that may increase participation, providing cost analyses for staffing and services, and enhancing data gathering tools in languages other than English to increase inclusivity for all youth, and working in partnership with grantees to support and improve service data collection.

Also, this legislative report and the Improve Group report use the terms “trafficking” and “exploitation” throughout, depending on context, but recognize that youth may describe their experiences differently.

Evaluation report highlights

Safe Harbor serves more than 2,000 youth. During the 2023-2025 evaluation period, 1,783 individuals initiated services with Safe Harbor. When including individuals who initiated services prior to this period, Safe Harbor served a total of 2,312 individuals. Youth most often connected with Safe Harbor through self-referral or a referral from child protection or child welfare. Almost all youth survey respondents reported satisfaction with the services from Safe Harbor organizations.

Safe Harbor grantees educate the state on sexual exploitation. Grantee agencies conducted at least 442 trainings and 794 consultations with other service providers and system professionals, as well as the public.

Key outcomes in the evaluation of Safe Harbor include strong, multidisciplinary partnerships and access to services, including culturally specific services. The evaluation also highlighted the factors contributing to Safe Harbor's impact, as well as ongoing gaps and challenges, such as distinct regional needs, building staff retention, and improvement opportunities for training.

Opportunities for improvement in Safe Harbor were noted in training, policy change, data quality, public awareness, and making programs accessible. The evaluation emphasized the need for increased support for survivors to access employment and education.

Recommended actions from The Improve Group to MDH Safe Harbor include identifying better definitions for “trauma-informed” in the context of services, centering youth voice as a “trauma-informed practice,” building more collaboration among grantees and community organizations, building grantee staff retention through pay equity and turnover or succession planning, improving training beyond “101” levels, and providing continuous training on data quality for grantees, among others listed in the Improve Group report.

Recommended actions from youth advisors to MDH Safe Harbor include providing language assistance to youth whose primary language is not English, using more accessible descriptive language for youth (e.g., not all youth perceive “trafficking” as describing their experiences), building public awareness campaigns with youth input, and creating pathways from Safe Harbor programming to meaningful employment, among others listed in the Improve Group report.

Background and methodology summary

Safe Harbor serves young people who are experiencing, have experienced, or are at risk of experiencing sexual exploitation. Three agencies distributed Safe Harbor funds from April 2023 through June 2025:

- The Minnesota Department of Health (MDH) administered state funds for 10 Regional Navigators (Northwest, North Central, Northeast, West Central, East Central, South Central, Southeast, Southwest, West Metro, and East Metro); two Tribal Regional Navigators (White Earth Nation and Mille Lacs Band of Ojibwe); 51 supportive service grantees, including seven Tribal Nations; protocol implementation; and this evaluation. Using federal funds, MDH supported seven Tribal Nations, supportive services for victim-survivors of human trafficking and exploitation (sex and labor), and state agency partners.
- The Minnesota Department of Human Services (DHS) administered funds for outreach, emergency shelter, and supportive housing to 16 grantees.
- The Minnesota Department of Public Safety (DPS) Office of Justice Programs administered funds to local and county law enforcement entities to aid in the investigation and coordination of sex trafficking cases.

An analysis conducted by the University of Minnesota in 2012 suggests that every \$1 spent on sex trading and trafficking intervention and prevention services, returns \$34 in benefit.¹

After Safe Harbor became law in 2011, a three-year planning period called No Wrong Door laid the groundwork for full enactment of the network in 2014. In the years since, Safe Harbor has submitted five evaluation reports to the legislature, all of which are available at [Minnesota Safe Harbor Evaluation \(www.health.state.mn.us/communities/humantrafficking/reports/sheval.html\)](http://www.health.state.mn.us/communities/humantrafficking/reports/sheval.html).

MDH contracted with the Improve Group through the Equity Select process to conduct the evaluation. The Improve Group is a worker-owned evaluation consulting cooperative based in St. Paul, Minnesota. Improve Group also conducted the 2023 Safe Harbor evaluation.

Data sources for this evaluation included a survey of youth, key informant interviews with youth, analysis of the MDH Safe Harbor program data, and focus groups with grantees and multidisciplinary partners. Where necessary, the evaluation report indicates the method(s) used for the described data. The following questions developed by The Improve Group guided the evaluation process:

1. Which services and supports are needed by and being provided to youth, and are these services and supports culturally appropriate for all who need them?
2. What factors contribute to Safe Harbor's impact?
3. What are the gaps and challenges that impede the work of Safe Harbor?
4. What are the opportunities for improvement?

MDH presents this 2025 legislative report as a summary of key information contained within the Improve Group report, providing details on service provision, participant experience, and findings supporting recommendations

¹ Martin, Lauren; Lotspeich, Richard; Stark, Lauren. (2012). Early Intervention to Avoid Sex Trading and Trafficking of Minnesota's Female Youth: A Benefit-Cost Analysis Executive Summary. Retrieved from [benefit_cost_study_es.pdf \(https://uroc.umn.edu/sites/uroc/umn.edu/files/2019-11/benefit_cost_study_es.pdf\)](https://uroc.umn.edu/sites/uroc/umn.edu/files/2019-11/benefit_cost_study_es.pdf).

listed below. Table numbers sometimes differ from the Improve Group report in this 2025 legislative report due to summarization (footnotes or parentheticals provide guidance). The reader should review the full Improve Group report for all tables and figures, evaluation methodology, participant input, and recommendations. Also, this legislative report and the Improve Group report use the terms “trafficking” and “exploitation” throughout, depending on context, but recognize that youth may describe their experiences differently.

Estimating Prevalence in Minnesota

Prevalence of human trafficking is difficult to estimate, given the illicit nature of the enterprise, the stigma around reporting one’s involvement, limited surveillance data sources, and the reality that many incidents of trafficking are never reported to authorities. However, an estimate based on an analysis of data from the 2022 Minnesota Student Survey (MSS) suggests **that at least 4,800 high school-aged youth in Minnesota traded sex or sexual activity** for money, food, drugs, alcohol, a place to stay or other reasons.² While it is not possible to fully compare Safe Harbor and MSS data due to different methodologies, age ranges, and survey settings, among other factors, the MSS data is one of several data sets indicating how many youth in the state experience sexual exploitation and is an important companion to the evaluation of Safe Harbor services.

Description of youth receiving services

MDH shared aggregated, non-identifying data with The Improve Group to describe youth receiving services. Overall, from April 2023 through March 2025, **1,783 individuals initiated Safe Harbor services, and 2,312 were reported receiving Safe Harbor services by grantee agencies (meaning that 529 people had initiated services prior to April 2023)**. The data summarized in this section describes the types of exploitation and trafficking, the average age of service recipients, and their race, ethnicity, gender identification, and sexual orientation. Forty agencies (community, county, or Tribal based) provided Safe Harbor services during the evaluation period, and their data was reported in the Safe Harbor program database. A list of Safe Harbor agencies represented during the evaluation period and the services they provide is listed in the Improve Group report Appendix, Tables 13 and 14. In some cases, the data includes information collected through surveys for youth created by The Improve Group and distributed through Safe Harbor grantee agencies.

Exploitation or trafficking by family members

At least 8% (140 out of 1,783) of youth enrolling in Safe Harbor reported sexual exploitation or trafficking by a family member. More youth, 24% (428 out of 1,783), were unsure if a family member was responsible. Agency staff and youth advisors shared that someone who is sexually exploited by a family member may not be aware of the exploitation and/or may not see their family member as a trafficker.

² Martin, Lauren; Brown, Camille; McMorris, Barbara; Johnston-Goodstar, Katie; Rider, G. Nic; Filoteo, Montana. (2024). Trading Sex and Sexual Exploitation among High School Students: Data from the 2022 Minnesota Student Survey. Retrieved from the University Digital Conservancy, <https://hdl.handle.net/11299/256516>.

Demographic information of clients

Demographic results from the 2022 MSS, Safe Harbor program data, and the youth survey show that young people of any race/ethnicity, gender identity, or sexual orientation can experience sexual exploitation, as illustrated in Tables 1-3 below. Some groups reported higher rates of experiencing sexual exploitation than others. Grouping clients by demographics helps illustrate Safe Harbor's reach within specific population groups. Understanding who accesses services enables MDH and its partners to more effectively implement Safe Harbor. Additionally, demographic insights help MDH fulfill its vision for health equity for all communities in Minnesota.

According to the data from the Safe Harbor program database, the average age of youth determined eligible for services at enrollment was 17, and overall, youth enrolled in services ranged in age from under one year old to 59.³ The average age of individuals ineligible for services was 31, ranging from under one year old to 68 years old.⁴ The 2022 MSS data showed Indigenous and transgender or gender-diverse students reporting higher rates of sexual exploitation than others.⁵ Safe Harbor program data showed White (37%) and Black, African, or African American (21%) youth were the two largest groups receiving services out of those who completed the survey.

Table 1. Unique enrollments and total housing and supportive services respondents by race/ethnicity (Safe Harbor program data)⁶

Race/ethnicity	Unique enrollments (n=1,769)	Total housing and supportive services (n=2,306)
White	37%	33%
Black, African, or African American	21%	22%
Hispanic, Latino, or Spanish origin	15%	15%
Indigenous, American Indian or Alaska Native	8%	8%
Biracial or Multiracial	9%	10%

³ The minimum age of less than one year old may be an error, may be a case with a very young victim-survivor, or may represent the child of a victim-survivor.

⁴ The maximum age of 59 may be an error, a response to a REDCap directive to intake all potential clients (even if ineligible), or it may be due to grantees processing individuals into their programming anticipating expanded age eligibility for Safe Harbor, which did not occur. Grantees are reminded grants are for youth through age 24.

⁵ Martin et al., *supra* note 3.

⁶ Figure 1 in The Improve Group report.

Race/ethnicity	Unique enrollments (n=1,769)	Total housing and supportive services (n=2,306)
Undisclosed	9%	9%
Asian or Asian American	2%	3%
Undisclosed	8%	12%

Most youth enrolled in Safe Harbor programs (90%) identified as cisgender. Cisgender females made up about three-quarters of youth served (76% of unique enrollments and 73% of total services), while cisgender males made up 14% of unique enrollments and 12% of total services. Many youth identified as heterosexual (46% enrolled, 47% receiving services), though 40% did not disclose their sexual orientation when enrolling in services (39% did not disclose while receiving services) (Table 3).

Table 2. Unique enrollments and total housing and supportive services respondents by gender identity (Safe Harbor program data)⁷

Gender identity	Unique enrollments	Total housing and supportive services
Cisgender female	76%	73%
Cisgender male	14%	12%
Gender identity expansive, non-binary	3%	3%
Undisclosed gender identity	5%	9%
Transgender (male & female)	3%	3%

⁷ Figure 2 in the Improve Group report.

Table 3. Unique enrollments and total housing and supportive services respondents by sexual orientation (Safe Harbor program data)⁸

Sexual orientation	Unique enrollments	Total housing and supportive services
Heterosexual	46%	47%
Undisclosed sexual orientation	40%	47%
Pansexual or bisexual	9%	9%
Queer or Questioning	3%	3%
Gay or Lesbian	2%	2%

Housing and supportive services program data show many Safe Harbor clients have needs for physical and mental health care. These needs, however, vary across regions; notable differences have been reported for youth seeking care in the metro area programs and those in Greater Minnesota. For example, 11% of metro enrollees reported experiencing depression compared with 30% of Greater Minnesota enrollees. Many youth reported having an unseen disability. Not all physical or behavioral disabilities or mental health are diagnosed. The data reflects that youth may have reported more than one disability, thus the total enrollment numbers for physical and mental health status provided in Table 4 are higher than the program enrollment numbers.

Table 4. Physical and mental health status by region (Safe Harbor program data)⁹

Physical and mental health status	Metro (n=827)	Greater Minnesota (n=1046)
Unseen disability	18%	37%
Autism Spectrum Disorder, Attention Deficit Hyperactivity Disorder (ADHD), or Neurodivergent	5%	8%

⁸ Figure 3 in The Improve Group report.

⁹ Appendix Table 7 in Improve Group report.

Physical and mental health status	Metro (n=827)	Greater Minnesota (n=1046)
Cognitive or learning disability	3%	9%
Depression	11%	30%
Anxiety	9%	25%
Post Traumatic Stress Disorder (PTSD)	9%	22%
Mental health condition like Bipolar Disorder, Dissociative Identity Disorder, Obsessive Compulsive Disorder, Oppositional Defiance Disorder	4%	9%
Substance use disorder	4%	11%
Self-harm or suicidal ideation	4%	14%
Reactive attachment or disorganized attachment	<15*	3%

* Groups with fewer than 15 members are protected for privacy.

Housing and supportive services provided; trends and needs

MDH funds specialized services and Regional Navigators; DHS funds housing, shelter, and outreach.¹⁰ During the 2023-25 evaluation period, 10 Regional Navigators and two Tribal-based Navigators existed. This section includes a summary of types of services, trends, and remaining needs identified in the Improve Group report.

There were 458 unique enrollments in the Safe Harbor program database for the Regional Navigators, 1,341 for supportive services, and 480 (648 including reenrollment) in housing services.¹¹ Table 3 in the Improve Group report indicates that according to Safe Harbor program data more youth are entering and exiting Safe Harbor services in the West Metro, East Metro, Southwest, and Southeast Navigator regions. The East Central,

¹⁰ A map of Safe Harbor regions is available at [Human Trafficking/Exploitation Prevention and Response \(https://www.health.state.mn.us/communities/humantrafficking/documents/htmap.pdf\)](https://www.health.state.mn.us/communities/humantrafficking/documents/htmap.pdf).

¹¹ Table 2 in the Improve Group report.

West Central, and North Central navigator regions have higher rates of ineligible youth compared to intakes, enrollments, total services, and exits. See more on common reasons for ineligibility below under "Ineligibility and exiting services." The Northwest region became operational in early 2024 and time was needed to develop the local response and hire a navigator (spring 2025). The 2027 evaluation will have data for that region.

Referral pathways and types of referrals

Self-referrals and referrals from child protection/child welfare were most common (Table 6 in the Improve Group report). Youth self-referred 18% of the time, while child protection/child welfare referred youth to services at about the same rate. Youth were also often referred by police/law enforcement (14%) and school or education providers (12%). Referrals came at lower rates from social service agencies and case managers/social workers (7% each), Safe Harbor Regional Navigators, supportive services, or housing providers (5%), a friend or trusted adult (5%), court/public defender/probation (4%), or other (9%).

Types of housing and supportive services provided and referred

Grantees reported most often providing emotional support, case management, personal items, criminal justice advocacy, and transportation services (Improve Group report Table 5). Across all regions, most services were provided in person. Mental health, medical, education, social, and legal services were the services for which youth were most frequently referred elsewhere. Criminal justice advocacy, employment assistance, substance use treatment, dental care, and housing assistance were the least frequent service referrals.

Ineligibility and exiting services

Grantees reported various reasons they deemed people ineligible for Safe Harbor services. One common reason for ineligibility was age – the prospective client was over 24 years old, the maximum age of eligibility. Other reasons for ineligibility were no connection to Minnesota (a person needs to either be physically in the state, from the state, or have a concrete connection to the state, such as the harm happening here), a history with the agency that bars the client from future services, client needs are outside the agency's capacity, not enough Safe Harbor funding or space, or appropriate services were not available for a pregnant or parenting person. On the latter point, only some Safe Harbor housing and shelter options have capacity to house pregnant and parenting youth.

Grantees shared that there is not always a clear exit for youth from programs and services. Grantees welcome and are available to help youth, whether they stay with the program or not. Youth decide to leave a program for many reasons, including dissatisfaction with a program or fear of being found by an abuser/trafficker.

Training and relationship-building activities

In addition to providing services and referrals, grantees increase awareness of sexual exploitation and trafficking and build partnerships. Grantee agencies conducted at least 442 trainings across all topics throughout the state, most often on exploitation and human trafficking awareness and trafficking prevention. Agencies reported at least 794 consultations with other disciplines, the most being with child protection/child welfare, community members/groups, law enforcement/corrections, and K-12 schools (Improve Group Report Appendix Table 11).

Survey responses by Safe Harbor program participants

The above-mentioned program data is based on grantee reports into REDCap, MDH's grantee data collection system. To complement that data with what youth had to say themselves, the evaluation directly engaged youth through a survey and interviews. See the Improve Group report for survey methodology.

While MDH REDCap data provides a more comprehensive picture of the demographics of the youth served, it is also helpful to understand the characteristics of the youth who took the survey to know who is represented in that data. Of the 93 youth who took the survey and were eligible for inclusion in the study:

- A third of the youth reported receiving services for one to two years; 32% said they had received services for less than a year; 6% said they had received services for three to four years; and 3% said they had received services for five or more years.
- 55% had a high school diploma or equivalent; some were in college or other post-secondary program (12%).
- Cisgender individuals made up three-quarters (77%) of survey respondents.
- 39% identified as White and 38% identified as Black, African, or African American.
- 38% identified as heterosexual; almost one-third (29%) identified as bisexual or pansexual.
- The average age of youth who took the survey was 21 and ranged from 13 to 49 years old. Most youth respondents (47%) were ages 20 to 24 and over one-third were ages 15 to 19 (38%). See the Improve Group report for an explanation of reasons for responses outside of age eligibility.

Importantly, only 12 (of 40 funded) agencies were represented in the survey results, based on where youth reported receiving services. This illustrates that because it used a convenience sampling approach, the survey results are not representative of all youth served by Safe Harbor.

Safe Harbor strengths and areas for improvement

From analysis of grantee focus groups, youth survey data, and youth interviews, evaluators identified key needs facing youth and how Safe Harbor is doing in responding. Almost all youth survey respondents reported satisfaction with the services from Safe Harbor organizations. In reflection on the two-year period covered by the 2025 evaluation, youth, Safe Harbor grantees, and multidisciplinary partners highlighted several essential supports Safe Harbor provides:

- Meeting youths' basic needs.
- Helping youth secure permanent housing.
- Ensuring consistency and stability of services.
- Providing culturally responsive services.
- Providing services to support youth to grow toward independence.

Youth, grantees, and multidisciplinary partners also pointed to strengths that make Safe Harbor effective:

- Strong relationships between youth and providers.
- Youths' resourcefulness and determination.
- Providing a community so youth feel less alone.
- Protecting privacy and confidentiality.
- Enabling youth to co-create services.

- Provider partnerships.

Opportunities for improvement include, and are described further the Improve Group 2025 report:

- Supporting and providing more trauma-informed approaches as well as more training on being trauma informed and dealing with secondary trauma.
- Shelter-specific challenges such as lack of beds or instances of bullying or racism from other youth or staff (see full evaluation report for examples).
- Improving statewide coordination of services and care, including improved access to mental health services.
- Increasing training and resources to adequately serve youth with diverse needs and backgrounds, including LGBTQ+ and Two Spirit youth. More training on anti-racism, crisis de-escalation skills, cultural competency, and immigration and asylum processes.

Key findings and areas to address

Ultimately, Safe Harbor is about treating youth with dignity and creating systems that give young people choices in how to lead their lives. Results point to the strengths of youth receiving services, aspects of Safe Harbor that work well for youth, and areas to build upon for improved dignity, choice, and healing. First and foremost, the findings emphasized the strengths of youth. Youth want services that support them to grow toward self-sufficiency; they are thinking about the future and want independence. The following section describes key findings about the quality and availability of Safe Harbor services and what is needed to improve Safe Harbor.

Meeting basic needs is a key first step for youth to overcome exploitation

As has come up in previous evaluations, participants emphasized the importance of helping youth meet basic needs before moving onto additional priorities. Youth survey respondents most often reported receiving emotional support, housing assistance, case management, housing advocacy, and personal items services.¹² In interviews, youth said they sought help first for housing/shelter; then additional basic needs like food, clothing, and hygiene products; then mental health services and therapy. Ninety-one percent of youth survey respondents said housing services are very important to successfully help youth who are at risk of or experience sexual exploitation; 85% said the same about shelter services (Improve Group Report Appendix Table 15). The number of youth needing shelter vastly outpaces the number of available shelter beds, participants said. Permanent housing is a particularly critical basic need.

The survey asked youth about their current living situation (Improve Group Report Table 7). The most common living situations were a rented apartment (38%) or supportive housing (20%) with 12% living in shelter.

¹² Youth were asked about their experiences with Safe Harbor as this was the focus of the evaluation. However, it is possible youth also reflected on non-Safe Harbor services (e.g., if they have stayed in multiple shelters) in their responses.

Mental health services persist as a need

Most youth survey respondents (83%) said mental health support services are very important to successfully help youth who are at risk of or experience sexual exploitation (Improve Group Report Appendix Table 15). However, grantees report there are long waiting lists for mental health services and not enough providers.

More culturally responsive services are needed

A need for culturally responsive services has been a recurring issue in the evaluation of Safe Harbor. Service agencies during this period described varying levels of providing culturally responsive services. Some examples of efforts to be culturally responsive included: Hiring diverse staff, using language lines, and reaching out to partners from the youth's culture, for example, Indigenous partners for Indigenous youth.

In the youth survey, 91% of respondents either agreed or somewhat agreed that Safe Harbor staff “understand or strive to understand and respect youth culture and language” (Improve Group Report Appendix Table 16). A lower proportion, 89%, agreed or somewhat agreed that staff “provide me with services and resources that fit my culture” (Improve Group report Appendix Table 16).

Survey participants said programs refer youth for LGBTQIA support and culturally inclusive connections. Most survey respondents agreed that staff who work for Safe Harbor organizations respected their privacy and kept their information confidential when possible (87%), provided them with services and resources that fit their gender identity (85%), and respected their gender identity (83%) (Improve Group report Appendix Table 16).

Grantees said they see a lot of language and cultural barriers for immigrant youth. Grantees are trying to partner with culturally specific organizations and trying to diversify their staff as a result.

Services that support youth to grow toward independence

Youth expressed joy in their ability to become more independent, e.g., graduating from high school or obtaining their GED, getting housing, and gaining experience and skills. But they also need more help to support their drive to independence such as childcare support, which is not available in all Safe Harbor programs and is discussed further in the Improve Group evaluation report. For youth, independence means making their own choices while maintaining relationships with service providers, so that if needed, they are available for help or questions. Youth who said they had a good experience credited that to the fact that they were allowed independence and had caring staff. Relatedly, grantees mentioned working on addressing “savior complexes” in their response, recognizing that their role is not to rescue but rather to walk alongside youth.

In the youth survey, just over half of respondents (54%) said they feel “very well prepared” to support themselves financially in a safe/healthy way because of receiving Safe Harbor services (Improve Group Report Appendix Table 18). In addition, grantees say they need resources for youth who need driver's licenses. In rural areas, the lack of transportation or the inability to drive is a barrier to youth accessing services that require them to travel long distances. Driver education enables young people to access jobs and earn and save money, which is crucial for all youth, especially those aging out of foster care, to prevent them from becoming homeless.

Grantee and partner training and supports

In the youth survey, almost all respondents said it is either very important (82%) or somewhat important (12%) for youth to experience “well-trained staff who can appropriately help youth who are at risk or experience sexual exploitation” (Improve Group Report Appendix Table 15). Grantee and multidisciplinary partners said some trainings are mandatory and some are not. Child welfare professionals said diversity, equity, and inclusion training is mandatory for some organizations, but not all. A few people have training on digital sexual exploitation, but said they could benefit from more training. Staff expressed support for ongoing trainings due to staff turnover, plus increased flexibility with training availability. Grantees expressed a desire for more training on crisis de-escalation, traumatic brain injury, and online-based sexual abuse. Some have had training on digital forms of exploitation, but not all staff have had training in, or know how to address, digital exploitation, which is growing and causes long-term trauma to youth.

Law enforcement wished for mental health support for officers and for service providers. In a focus group, officers said the work can be mentally draining, so they must walk a fine line between supporting victims and not becoming overly involved. Officers, navigators, and service providers are exposed to secondary trauma, and addressing their mental health and providing support can address burnout and staff retention.

Assessment, collection, and distribution of funds

MDH and DHS, through state and federal funds, provided over 50 grants for supportive services, regional navigation, outreach, emergency shelter, supportive housing, and law enforcement efforts during the evaluation period. In addition, Minnesota Statutes section 609.3241 sets forth penalty assessments by the courts and Minnesota Statutes section 609.5315 sets forth disposition of forfeited property. Assessments under these statutes are distributed to MDH to further support grants to services for sexually exploited youth. In addition, these funds are distributed to DPS to support the law enforcement response to sexual exploitation of youth. During fiscal years 2024 and 2025, MDH allocated these penalty funds to The Advocates for Human Rights, The Center for Child Abuse Prevention (aka Family Enhancement Center), The Enitan Story, Standpoint, and Victim Services of Olmsted County.

Funding adequacy and gaps

Since the inception of Safe Harbor in Minnesota over a decade ago, the legislature has acted in a bipartisan manner to provide funding for regional navigators, supportive services, shelter and housing, outreach, protocol development, training and technical assistance, and program evaluation. It is not hyperbole to say that Minnesota is often looked to as a national model for its response to sexually exploited youth. While the legislative support is significant, gaps still persist, particularly in greater Minnesota, where there are still geographic areas without readily available services, and a need for services tailored for male youth and LGBTQ+ youth. Community-based grantees are also working within a challenging economic environment which particularly impacts access to housing and mental health care, among other resources, emphasizing the need for the legislature to maintain, and build upon, its strong commitment to Safe Harbor.

2025 evaluation recommendations

The Improve Group report indicates growth in the Safe Harbor system and specific recommendations in each area. Evaluators and MDH identified opportunities based on the above findings. Summarized recommendations from youth advisors are also included below. The findings echo what youth, grantees, and multidisciplinary partners said in previous evaluations, reinforcing the need for continued systems change.

Trauma-informed practices

Youth bring deep trauma that manifests in different ways; providers and multidisciplinary partners engaging youth need to be trauma-informed to avoid further harm and provide more effective support. Being trauma-informed is an ongoing learning process, therefore providers and multidisciplinary partners should continue to receive training and develop their skills in this area. Being trauma-informed also means not taking a one-size-fits-all approach. For example, some youth participants mentioned positive experiences with support groups; however, other youth participants said these groups may be uncomfortable and feel forced.

Recommendations: Define what being trauma-informed means and trauma-informed services. Provide more resources for centering youth voice as a trauma-informed practice.

Staff turnover

Staff turnover results in lost experience and skills, while sometimes also requiring youth to start anew with relationships and trust.

Recommendations: Provide more time for collaboration among grantees and community organizations to foster stronger relationships, facilitate new introductions after turnover occurs, and increase staff retention rates. Pay staff more to retain their expertise. Regional Navigators experience pay disparities across different regions. Turnover is an issue across organizations, including MDH, which impacts technical assistance to navigators.

Mental health services

Both youth and service providers cite the shortage of mental health providers, especially culturally diverse mental health providers, as a hindrance to youth recovery.

Recommendation: Work to increase the supply of and connections to mental health providers, especially culturally specific services.

Connecting cross-disciplinary partners

System partners often experience information gaps, especially outside of traditional business hours (i.e., 9-5). Law enforcement, especially, reported information gaps at night and on weekends when they intercept a suspected trafficker and must find a safe place for youth that is inaccessible to their trafficker. Cross-disciplinary professionals need immediate access to accurate information whenever they encounter youth. Regional

Navigators get many referrals from schools that are spread out geographically. They do not have capacity to develop relationships in all schools or table at all events in their region.

Recommendations: Create a 24/7 resource portal for accessing navigators and finding trauma-informed services. Develop a collaborative system that brings together schools and social services. Recruit other systems of care in a region to spread awareness of trafficking.

Training and partnerships to effectively serve all youth

Current training options do not fully equip grantees with the necessary skills. Training could better equip grantees to address what trafficking/sexual exploitation looks like today, such as internet-based abuse. In addition to training, grantees can partner more with organizations rooted in specific communities, as well as ensure their organizations know how to recruit and retain staff who reflect the communities they are serving. However, every youth is different, and some youth from small close-knit communities might be uncomfortable having their case discussed with someone from their community due to privacy reasons.

Recommendations: Provide training that goes beyond trafficking and diversity 101, addressing current challenges. Increase partnerships with providers who are diverse in the many ways youth identify.

Institutionalizing best practices

Institutionalizing and sharing best practices benefits everyone working with Safe Harbor, reduces training costs, and enhances partnerships, while improving services for youth.

Recommendation: Institutionalize best practices and share them across all groups in all relevant forums.

Recommendations from youth advisors

Youth voice matters. Youth advisors attended an Emerging Findings meeting and helped contextualize data in this year's report as well as make recommendations, noting that language assistance, creating more pathways to independence through higher education and employment, connecting with services outside of Safe Harbor, and focusing on outreach in rural communities throughout the state are priorities. In addition, they suggested changing the language around sexual exploitation as the language itself may not resonate or could even deter some youth from seeking help. The phrase "human trafficking" is often used in advocacy/marketing efforts yet is such a loaded term that it may not resonate with those experiencing sexual exploitation. Making language about trafficking accessible to parents and youth who come from cultures where the subject holds a lot of stigma will help families with sexually exploited loved ones seek services.

Next steps for MDH and legislature

This report contains many areas for action by MDH and the legislature to strengthen the Safe Harbor response. Three areas that rise to a level of high priority are:

- Increased access to comprehensive and culturally responsive mental health services throughout the state, for youth through age 24.
- Support for services and programs that support pathways to youth independence through higher education and employment.
- Consistent and expanded funding for Safe Harbor programs so they retain experienced staff and provide reliable services in their communities statewide and in Tribal Nations.

Conclusion

This report summarized the findings of an evaluation of Safe Harbor services provided from April 1, 2023 through March 30, 2025. The evaluation centered on youth experiences. Results point to the strengths of youth receiving services, aspects of Safe Harbor that work well for youth, and areas to build upon for improved dignity and choice. Additionally, findings in this report echo those of previous evaluations since the inception of Safe Harbor. Meeting basic needs, increasing access to housing, and serving youth of all racial, ethnic, gender, and sexual orientation identities are recurrent themes.