

National Association of Women Judges
2024 Annual Conference

What Every Judge Needs to Know: Best Practices for Hidden Faces and Forms of Human Trafficking

SPEAKERS:

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DESCRIPTION:

This session consists of three parts. First, San Diego’s District Attorney will provide overview of labor and human trafficking law and an update on current trends and how a human trafficking situation could be hidden in your courtroom. Second, this program will feature a conversation between San Diego’s Assistant Presiding Judge of the Juvenile Division and a sexual exploitation survivor about how specialty courts such as R.I.S.E. (Resiliency is Strength and Empowerment) engage with exploited youth through collaboration, harm reduction, and lived experience. Third, panelists will address new perspectives in human trafficking including institutional abuse and the “troubled teen” industry, trafficking in commercial trucking, and empowering the transition from survivor to thriver. At the end of the session, participants should be able to: Recognize current trends in human trafficking; evaluate starting or expanding a human trafficking specialty court based in collaboration, harm reduction, lived experience, and empowerment; identify new legislation and law regarding youth residential programs and commercial driver’s license revocation after a human trafficking conviction.

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Handout Materials and Supplemental Resource Links

- **Human Trafficking Overview Slide-Presentation** (page-5)
- **Human Trafficking Judicial Tip Sheet & link to Training Video** (page-33)
- **Harm Reduction and Commercial Sexual Exploitation of Children and Youth: Bench Cards** (page-35)
- **Research Brief - From Survivor to Thriver: Analyzing Challenges and Support in the Reintegration of Human Trafficking Survivors** (page-63)
- **Research Brief - Dismantling Vulnerabilities - Exploring LGBTQ+ Populations Risks, Challenges, Abuses and Barriers to Identification, Intervention, and the Exiting of Trafficking** (page-73)
- **Article - Improving services for youth survivors of commercial sexual exploitation: Insights from interventions with other high-risk youth** (page-81)
- **Top Ten Resources for Understanding Child Trafficking In Youth Residential Treatment Facilities** (page-91)
- **NJC Disqualification Bench Card** (page-95)
- **New NTLC Resource Guide** (page-101)
- **BSCC Brochure - Forced Labour & Forced Marriage** (page-123)
- **National Youth Law Center** - Pamphlets about working with CSEC youth and establishing a collaborative court.
<https://youthlaw.org/resources/>
- **Article - The relationship between commercial sexual exploitation and foster care placement in the U.S.: A scoping review**
<https://www.sciencedirect.com/science/article/abs/pii/S0145213424003405>

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National Association of Women Judges

**HUMAN TRAFFICKING:
WHAT EVERY JUDGE NEEDS TO KNOW**

NAWJ Human Trafficking Committee
co-chair District Attorney Summer Stephan
co-chair Judge Bobbie McCartney
Honorary Chair- Judge Ann Breen-Greco

Presenter: Summer Stephan
San Diego County District Attorney
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NAWJ Human Trafficking Committee History

- 1979- NAWJ is formed to preserve judicial independence and ensure equal justice for women and vulnerable populations.
- 2010- NAWJ adopts human trafficking as their worldwide priority issue.
- 2021 and 2022- Three webinars focused on vulnerable populations in human trafficking
- 2023- Spotting Human Trafficking Judicial Training Video- In your packet

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Why is Understanding Human Trafficking Important to the Judiciary

1. Human Trafficking is a global problem with local solutions
2. Human Trafficking intersects with law and justice but is rarely clearly labeled as human trafficking. It can be disguised as domestic violence, sexual abuse, child abuse, immigration, dependency and wage disputes
3. Judicial / legal education is essential

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Out of the Shadows: A Tool for the Identification of Victims of Human Trafficking

Vera Institute

One of the biggest obstacles for providing human trafficking victims with the services and support they need is the lack of an effective tool to identify them.

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Trafficking in Persons Report

- Human Trafficking is a global phenomenon to which no country is immune. Despite its global reach, human trafficking takes place locally.
- Human Trafficking is driven by human greed (trafficker and buyer) and human vulnerability (victim).

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Scope of Problem

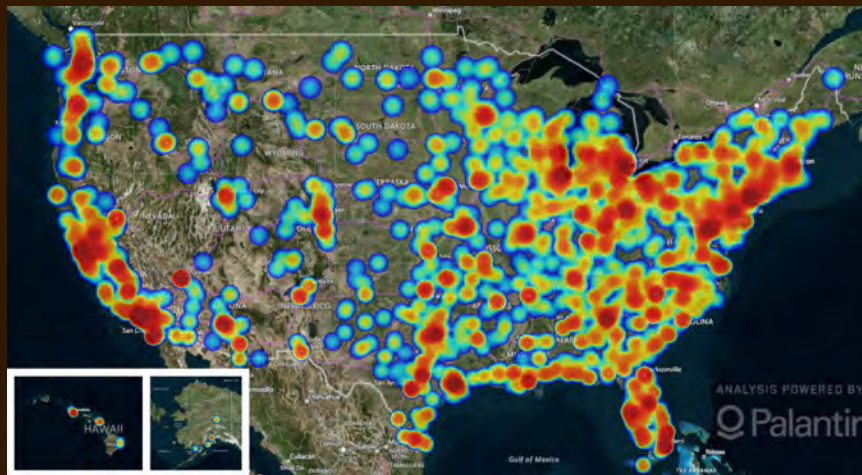
- United States:

Tier 1 country for Human Trafficking.
Cases have been investigated in ALL
50 states



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Polaris Locations of Human Trafficking in the U.S.



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High Intensity Areas (HICPA)- Child Sex Trafficking



Chicago
Dallas
Detroit
Las Vegas
Los Angeles
Miami
Minneapolis
New York
San Diego
San Francisco Bay Area
St. Louis
Tampa
Washington, D.C.

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Why is Human Trafficking a Priority for Public Safety?

- It is a violation of human rights
- It is a violation of International and U.S. Law
- It is a form of modern-day slavery where perpetrators profit from the sexual exploitation or forced labor of men, women and children
- It is one of the most profitable criminal enterprises and most difficult to detect

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Common Misconceptions (bias) with Negative Consequences

- It doesn't happen in the US
- Victims are all undocumented immigrants
- If victims agree to trafficking conditions-there is no crime ("consent" to prostitution)
- If victims are paid a certain amount, there is no crime
- If victims are not physically restrained there is no crime

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The Key Laws Addressing Human Trafficking in the in the United States

- October of 2000, the Trafficking Victims Protection Act of 2000 (TVPA) made human trafficking a federal crime.
- It established the 3Ps of the fight against human trafficking: protection, prevention and prosecution. In 2009, a 4th P (partnerships) was added
- It was reauthorized and improved over the years including in 2022
- Victim centered law that defined severe forms of human trafficking and provided effective punishment and rights for victims

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Human Trafficking Laws

As defined under U.S., and most states, victims of human trafficking can be divided into three populations:

- Children under age 18 induced into commercial sex (prostitution, pornography)
- Adults aged 18 or over induced into commercial sex through force, fraud, or coercion
- Children and adults induced to perform labor or services through force, fraud, or coercion (Hospitality, Construction, Manufacturing, Agriculture)

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TVPA Includes a Civil Remedy

- The Reauthorization of the TVPA in 2003 created a new civil action that allowed trafficking victims to sue their traffickers in federal court
- The 2022 Reauthorization added provisions for employment opportunities for victims and survivors

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Vacatur and Expungement Laws

- States have a variety of relief statutes for victims and survivors that result from human trafficking
- Vacatur is the strongest remedy allowing for true relief
- Many states only allow expungement

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Mandated Reporting of Commercially Sexually Exploited Children

- Many States now interpret mandated reporting for teachers, doctors, etc. as including sex trafficking

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Current Research in the U.S. on Labor Trafficking

- Research by Urban Institute Oct. 2014: “Understanding the Organization, Operation, and Victimization Process of Labor Trafficking in the United States”
- *All were immigrants working in the U.S. 71% entering on a temporary Visa (H-2A, H-2B)
- By the time escaped 69% unauthorized

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Labor Trafficking Study

- Traffickers were both foreign nationals and US citizens, and were most often males in their 30's and 40's- Family connection operated through 3rd and 4th party employment agencies. Fee about \$6000
- Recruitment – through social networks in home country. Promise of more opportunities

Urban Institute Oct. 2014: “Understanding the Organization, Operation, and Victimization Process of Labor Trafficking in the United States

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Groundbreaking NIJ 2016 Study: “Measuring the Nature and Extent of Gang Involvement in Sex Trafficking in San Diego”

- Dr. Ami Carpenter, University of San Diego and Dr. Jamie Gates, Point Loma Nazarene University
- National Institute of Justice Grant
- *The Next slides are adapted with some modifications from Power Point from Researchers Carpenter & Gates 2015*

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Study: How Big is San Diego’s Underground Sex Economy?



\$810 Million
\$536,000 per facilitator (Trafficker)

- San Diego Padres: **\$800 million**

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Study: Gang Members Involvement



- 85% of facilitators were gang-affiliated
- 110 gangs involved in underground sex economy

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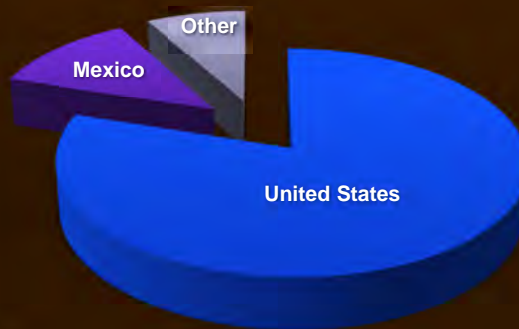
Study: Victim Ethnicity and Nationality

Country Of Origin	Percentage
United States:	80%
Mexico:	12%
Other:	8%

Including:

- Taiwan
- Russia
- China
- Korea
- Philippines
- Honduras
- Germany
- Puerto Rico
- Colombia
- Cameroon

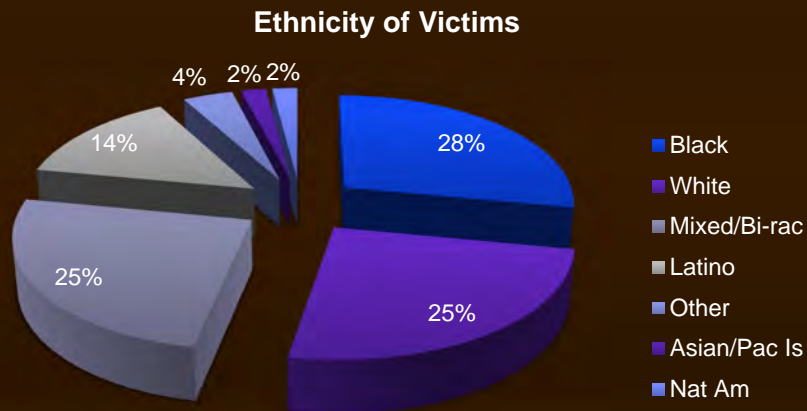
80% of sex-trafficking victim/survivors are **domestically trafficked**
20% are foreign born



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Study: Ethnicity of Victims

The majority are Black, White and mixed ethnicity



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Study: Average Age of Entry into Sex Trafficking: 16

- Victims in our schools
- Average entry into sex trafficking High School Age 15-16 average entry so some younger and some older

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Study: Human Trafficking in San Diego's Schools

County-wide recruitment in middle schools and high schools

- Focus groups from all **20 schools** identified suspected victims; **90% confirmed CSEC cases**
- **30% of facilitators** witnessed or participated in sex trafficking recruitment related to schools



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Human Trafficking has a clear intersection with our Schools

- The U.S. Department of Education published in 2015 : “Human Trafficking in America’s Schools” with strong incorporation of SD school model
- **CA Education Code and most states have education codes that address human trafficking in schools. U.S. Department of Justice** is now engaged in vetting and providing Human Trafficking prevention education in schools

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Study: How Teens are Recruited

- “Boyfriend” asks his girl “just this one time”...
- Social Media
- Girl recruiters
- Material enticements
- Involvement with drugs, payment for drugs
- Fraudulent job offers
- Parents offering their kids to friends/associates for money
- Family members (generational or cultural ties)

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Particularly Vulnerable Populations

- 55% had experienced **homelessness**
- 28% had been in the **Foster Care system**

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Factors Promoting Exploitation

- History of child abuse and domestic violence
- **Involvement in foster care** or group homes
- Being a **runaway** teen
- Truancy from school, **learning disabilities**, mental health issues and substance abuse
- A culture that accepts gender inequity and demand for sex or cheap labor
- Immigration status
- Social media means No family is immune

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Polaris Top Recruitment Tactics Sex Trafficking

- Intimate partner/marriage proposition
- Familial
- Posing as a Benefactor
- Job offer
- False promises/fraud

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Polaris Top Recruitment Tactics Labor Trafficking

- Job offer
- False promises/fraud
- Smuggling related
- Familial
- Posing as a benefactor

Polaris 2017 Statistics from the National Human Trafficking Hotline and BeFree Textline

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The Internet Hides the Crime in Plain Sight

- Hotels are the top location where the crime of sexually based human trafficking occurs
- **The DEMAND:** Buyers that drives sex trafficking: 98 Unique criminal purchasers “Johns” responded to 4 ads on Backpage in a 24-hour period
- Approximately 70% of the transactions utilize social media
- Criminal buyers conduct transactions while on the job in businesses-Legal Responsibility for Businesses and Corporations

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Looking for Labor Trafficking Warning Signs

- Are they not being paid?
- Is their work different than what they were promised or told?
- Does anyone at work make them feel scared or unsafe?
- Did anyone at work harm or threaten to harm them?
- Do they feel they cannot leave their work or where live?
- Do they have control of their documents



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Barriers to Exiting

- Dangerous & life threatening / afraid to leave
- Stay to protect family
- Lack of resources
- Afraid of what others will think
- Isolated and away from home
- Hopelessness / brokenness
- Discrimination against survivors
- In love with trafficker
- Don't see themselves as victims

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Violence and risk is elevated with Commercial Sexual Exploitation of Children = Sex Trafficking

- Violence is very common among CSEC victims
- Twelve times more likely to have pelvic inflammatory disease, three times more likely to become pregnant, and twice as likely to abuse drugs, have an STD or have uncontrolled asthma.

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Medical and Mental Health Issues

The Department of State groups health problems related to sex trafficking into six categories:

1. Infectious diseases
2. Non-infectious diseases: malnutrition, dental health problems, and skin diseases
3. Reproductive health problems
4. Substance abuse
5. Mental health problems
6. Violence

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Validated Questions to identify Victims of Sex and Labor Trafficking (Vera Institute):

- Did you ever have sex for things of value (for example money, housing, food, gifts, or favors)?
- Have you ever worked in a place where the work was different from what you were promised or told it would be?

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Challenges and Considerations with Minors with trauma especially CSEC victims:

- Safety, risk, fear, shame, guilt
- Hostile and cynical attitude about help
- May not see themselves as victims
- View their situation as an improvement
- View exploiter as a 'boyfriend'
- Experience poor recall of important events or an impaired sense of time
- Fear of retribution and distrust of adults and authority figures may lead to refusal to disclose information, or to provide false information

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Barriers to detecting child victims include:

1. Isolation from others
2. Constant monitoring while in public
3. Victim reluctance to disclose abuse
4. Victim attachment to abuse lifestyle or abuser
5. Lack of awareness of victimization
6. Lack of knowledge or resources to escape
7. Mistrust of authorities and professionals

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TATTOOS AS METHOD OF CONTROL / OWNERSHIP



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Warning Signs

- ✓ Are there bruises, tattoos or other signs?
- ✓ Are there new items that are not accounted for: purse, clothes, jewelry?
- ✓ Are there signs of psychological abuse? Isolation, lack of interest?
- ✓ Is the person being controlled? Appears hypervigilant and secretive?
- ✓ weight loss or signs of poor health?
- ✓ Is the person a minor engaged in commercial sex?
- ✓ Does a minor appear to be in a relationship with an older person?

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COMBAT PLAN

Prevention

Protection

Prosecution

Partnerships

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Education

Prevention-Intervention Strategies

- Training of professional school staff: High School focus currently
- Training of students
- Training of parents
- Training of medical staff
- Law enforcement training
- **Legal, Judicial and Community training**

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Intersection with Justice Systems and Legal Practice

- Criminal cases- Federal, State, Prosecution, Defense, Domestic Violence, sexual assault, drug cases, human trafficking cases
- Juvenile and Dependency, Education law
- Family Law
- Business Law
- Corporate Law Practice- Transparency chains
- Employment Law
- Immigration Law

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Operation Reclaim and Rebuild



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Operation Better Pathways

- Following decriminalization of loitering for prostitution
- 8 children recovered, 13 to 17 years old
- 8 adults recovered including pregnant 20 year old

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**Sex trafficking.
It's not just global.
It's local.**

Get the facts at TheUglyTruthSD.org



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The Ugly Truth: Myth
**If a woman chooses to sell her body
that's her business**

The UGLY TRUTH

Prostitution is rarely a choice.

Most prostituted people entered the sex trade while still in their teens, after fleeing abusive homes. They're coerced by pimps and johns who too often abuse them. And without economic support, breaking free is more difficult than you might think.

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Legal Professionals- Guidance with Special Victims

Key Concept: Trauma-informed Care

- The guiding principles of trauma-informed care are:
 - Safety
 - Trustworthiness
 - Choice
 - Collaboration
 - Empowerment

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Legal Duty and Moral Responsibility

- *Our Society will be judged by how we treat our most vulnerable citizens- Children, Seniors and those with Disabilities*
- *The law is a useful guide as a starting point*

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“The only thing necessary for the triumph of evil is for good [people] to do nothing.”

Edmund Burke, English Philosopher

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Judicial Tip Sheet

Human Traffickers Don't Discriminate

Victims of human trafficking and traffickers include people of **ALL** races, genders, backgrounds, and education levels.

Labor trafficking involves the use of force, fraud, or coercion to take advantage of someone for labor.

Sex trafficking of an **adult** involves the use of force, fear, fraud, or coercion to take advantage of them for commercial sex.

Sex trafficking of a **minor** does **NOT** require force, fear, fraud or coercion.

****The specific definitions of human trafficking may have some slight variation from state to state but the general concepts remain the same.****

Potential Red Flags and Warning Signs a Person is a Victim of Human Trafficking

- Wears clothing that doesn't match current weather conditions
- Shows signs of poor hygiene, malnourishment, fatigue or emotional distress
- Has tattoos (e.g. *Victim*: Roses, Crowns, \$'s, someone else's name; *Trafficker*: AOB, MOB,\$'s)
- Has multiple cellphones
- Is texting or talking on one of the phones constantly
- Not allowed to speak for themselves (e.g. 3rd party insists on translating or being present)
- Is monitored closely or restricted
- Is in fear of someone else
- Can't provide a cohesive timeline or story
- Can't say where they live
- Has few or no personal items
- Lives and works in the same place
- Is unpaid, paid very little or paid only through tips
- Doesn't control their own money, financial records or bank account
- Doesn't control their own identification documents (e.g. ID, passport or visa)

This list represents some of the factors you may see; these factors may not be present in all cases and must be considered in context.

If you suspect a person in one of your cases is a victim of human trafficking, remember:



- victims rarely self-identify as victims
- always assume their trafficker or someone associated with the trafficker is in the courtroom
- be mindful of not putting on the record your suspicions or the name/location of their service providers



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Identifying Human Trafficking Victims in Justice Systems NAWJ Video Trailer

NATIONAL ASSOCIATION OF WOMEN JUDGES PRESENTS:

IDENTIFYING HUMAN TRAFFICKING VICTIMS IN JUSTICE SYSTEMS

*TRAINING FOR JUDGES
AND THE LEGAL COMMUNITY*

WITH SPECIAL THANKS TO THE NAWJ HUMAN TRAFFICKING COMMITTEE



Scan the QR-Code to access the full 35-minute version of this video and other NAWJ Human Trafficking Resources posted on www.NAWJ.org

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You are invited to access an important National Association of Women Judges (NAWJ) training video *Identifying Human Trafficking Victims in Justice Systems*. January is National Human Trafficking Awareness Month and this brief but packed with information video will allow judges and legal professionals to gain awareness that can have a profound impact on justice for human trafficking victims and survivors.

Victims of human trafficking are hiding in plain sight – both in the world and in the cases that judges, and the legal community may see in a courtroom. The 2022 Trafficking in Persons Report from the United States Department of State focused on the “grave and urgent concern, including the inequitable impact of human trafficking on vulnerable and marginalized populations.” The International Labour Organization estimates human trafficking to be a \$150 billion global industry.

In under 40 minutes, this training will provide a primer on what human trafficking is and give important information on how to identify potential victims of human trafficking in criminal or civil cases. Speakers include federal and state criminal and civil judges, juvenile/dependency judge, prosecutor, public defender, Human Trafficking Task Force officer, service provider and victims/survivors. This training is a project of the National Association of Women Judges Human Trafficking Committee and aligns with the mission and priorities of NAWJ.

You can access both the training video and the accompanying tip sheet on the [NAWJ Human Trafficking Committee](#) web page.

Harm Reduction and Commercial Sexual Exploitation of Children and Youth:

Bench Cards



Judicial Council of California

The bench cards were created for and available to judicial officers, as they are an accompaniment to the Harm Reduction Series-Juvenile Court document the California Department of Social Services created to be available to all court professionals that can be found [HERE](#). We have hard copies available upon request to

Vida Castaneda at: vida.castaneda@jud.ca.gov

Acknowledgments

This bench card set was produced by staff at the Judicial Council of California as a collaborative project with the California Department of Social Services' Child Trafficking Response Unit (CTRU). These bench cards serve as a companion to *CTRU Harm Reduction Series—Courts*, which describes how to use this approach when serving youth abused through commercial sexual exploitation.

NATIONAL CENTER FOR YOUTH LAW

Collaborative Responses to Commercial Sexual Exploitation Initiative

Mae Ackerman-Brimburg

Senior Attorney

Kate Walker Brown

Senior Director

Many others provided input, suggestions, and feedback. We are very thankful to the numerous state and tribal judges, attorneys, advocates, the CSEC Action Team Executive Committee, and the CSEC Action Team Advisory Board for their work reviewing and advising this project.

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March 2023

www.courts.ca.gov



Judicial Council of California



This series of bench cards assists judicial officers in ensuring that young people impacted by commercial sexual exploitation (CSE) or sex trafficking who appear in dependency or juvenile justice court are treated in a trauma-informed, youth-centered manner, using harm reduction principles. For additional information on human trafficking generally, refer to the Judicial Council of California's *Human Trafficking in California: Toolkit for Judicial Officers* (2017).*



Pre-reading. Review these cards in advance to learn more about CSE and harm reduction:

CARD A | page 1

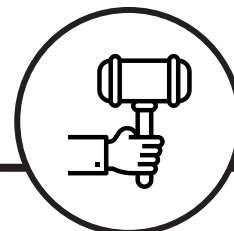
Key Laws & Definitions: Harm Reduction and Commercial Sexual Exploitation of Children and Youth

CARD B | page 4

Language Matters

CARD C | page 6

Putting Harm Reduction Into Practice in the Courtroom With Youth Impacted by CSE



On the bench. Have these cards with you in court to prompt your discussions about particular topics with youth and parties:

CARD D | page 9

Harm Reduction Through Goal Setting and Services for Youth and Families Impacted by CSE

CARD E | page 14

Housing & Placement

CARD F | page 19

Common Orders

Pre-reading and/or as needed. Explore examples and strategies of what harm reduction looks like in real-life situations:

APPENDIX | page 21

Examples of Harm Reduction in the Courtroom

* Available at www.courts.ca.gov/documents/human-trafficking-toolkit-cfcc.pdf. The toolkit provides an overview of human trafficking laws through 2016 and definitions of commonly used terms.

Harm Reduction and Commercial Sexual Exploitation of Children and Youth

What is commercial sexual exploitation of youth?

- A commercially sexually exploited child¹ or youth
 - is “a child who is sexually trafficked, as described in Section 236.1 of the Penal Code”;² or
 - “who receives food or shelter in exchange for, or who is paid to perform, sexual acts described in Section 236.1 or 11165.1 of the Penal Code”;³ and
 - includes “survival sex,” where a child or youth trades sex to meet their own needs (food, clothing, shelter) without the involvement of a third party trafficker/exploiter.⁴
- A “commercial sex act” is
 - “sexual conduct on account of which anything of value is given or received by a person”;⁵ and
 - can include money, food, shelter, drugs, clothing, or other things of value.
- If the person performing the commercial sex act is under the age of 18, no force, fraud, or coercion is required for it to be considered CSE or trafficking.⁶
- Familial trafficking takes place when the above actions are facilitated by a family member.⁷

Can a child or youth be arrested for engaging in a commercial sex act?

No. As of January 1, 2017, no individual under 18 years of age in California can be arrested or charged with prostitution or loitering with intent to commit prostitution.⁸

What is the juvenile court’s basis for jurisdiction over a youth impacted by CSE?

- A youth who has experienced CSE may fall within the jurisdiction of the dependency court when the youth meets the definition of commercially sexually exploited child (above) *and* the youth’s “parent or guardian failed to, *or was unable to*, protect the child.”⁹
- Youth who were found to be under the jurisdiction of the juvenile court prior to age 18, either as a ward or dependent child, including due to CSE, can continue receiving child welfare services up to but not including 21 years of age. Youth between the ages of 18 and 21 are referred to as nonminor dependents.¹⁰
- A youth who is eligible for foster care and extended foster care remains eligible even if the court vacates the youth’s underlying adjudication because the youth was a victim of human trafficking.¹¹
- Even though no one under age 18 can be arrested for prostitution, young people impacted by CSE often still end up in court, on probation, or in

1 These bench tools refer to commercial sexual exploitation (CSE) rather than commercial sexual exploitation of children (CSEC). Because young people in juvenile court may be both children and nonminor dependents, the word “youth” is used to mean all young people in juvenile court regardless of age.

2 W&IC § 300(b)(2). The term “sex trafficking” refers to the offense committed by a person who causes, induces, or persuades, or attempts to cause, induce, or persuade, a person who is a minor at the time of commission of the offense to engage in a commercial sex act, with the requisite mental state required by statute. (PC § 236.1(b) & (c).)

3 W&IC § 300(b)(2).

4 See SB 855 (Stats. 2014, ch. 29), which clarified that CSE constitutes child abuse.

5 PC § 236.1(h)(2).

6 22 USC § 7102(11)(A). See Administration for Children & Families, Office on Trafficking in Persons, *Fact Sheet: Human Trafficking* (Nov. 21, 2017), www.acf.hhs.gov/sites/default/files/documents/otip/fact_sheet_human_trafficking_fy18.pdf.

7 U.S. Dept. of State, Office to Monitor and Combat Trafficking in Persons, *Navigating the Unique Complexities in Familial Trafficking* (June 2021), www.state.gov/navigating-the-unique-complexities-in-familial-trafficking/.

8 PC § 647(b)(5); SB 1322 (Stats. 2016, ch. 654); see California Dept. of Social Services, All County Information Notice No. I-79-17 (Dec. 4, 2017), www.cdss.ca.gov/Portals/9/ACIN/2017/I-79_17.pdf?ver=2019-06-17-124914-723.

9 W&IC § 300(b)(2).

10 W&IC § 303.

11 W&IC § 303(f).

detention for behaviors and actions both related and unrelated to their exploitation.¹² For example, youth may engage in theft or transporting drugs at the direction of a trafficker/exploiter, or to survive while on the street. Other common reasons for arrest and/or ongoing juvenile legal system involvement include giving false identification to law enforcement, leaving (also known as running away) home or care without permission, and getting into a fight while in out-of-home care.

What are county obligations related to youth impacted by CSE?

- All counties must implement policies and procedures requiring county social workers and probation officers to do the following for youth receiving child welfare services who are experiencing, or at risk of, CSE:¹³

- 1 Identify youth who are experiencing or at risk of CSE.
- 2 Document in Child Welfare Services/Case Management System (CWS/CMS).
- 3 Determine appropriate services.
- 4 Receive relevant training to carry out 1–3.
- 5 Expeditiously locate any child or nonminor dependent missing from care.
- 6 Determine the primary factors contributing to their absence from care *and* respond to those factors in subsequent placements.
- 7 Determine the child's or nonminor dependent's experiences while absent from care.

8 Determine whether the child or nonminor dependent is a possible victim of commercial sexual exploitation.

9 Document the activities in 5–8.¹⁴

- Counties that have opted into California's CSEC program¹⁵ must use “a multidisciplinary team [MDT] approach to provide coordinated case management, service planning, and services to these children.” The MDT must include representatives from the following organizations: child welfare, probation, mental health, public health providers, and substance use treatment providers.¹⁶

The Court's Role

Judicial officers can hold the parties accountable to their duties to be trained on CSE, to hold MDTs, and to collaborate, identify, and determine appropriate services and support for youth impacted by CSE. Judicial officers also set the tone in court by using youth-centered, strengths-based, and harm reduction approaches.¹⁷

What is harm reduction?

Harm reduction is a concept that grew out of the substance use treatment field as a way to reduce the harm of drug use. It is a framework to meet the needs of people engaged in unsafe or risky behavior or circumstances by making dangerous situations safer. It does not require abstinence—it focuses on reducing the negative impact of risky behaviors or situations, rather than attempting to immediately

12 Carly B. Dierkhising & Kate Walker Brown, *Commercially Sexually Exploited Girls and Young Women Involved in Child Welfare and Juvenile Justice in Los Angeles County: An Exploration and Evaluation of Placement Experiences and Services Received* (2018), https://youthlaw.org/sites/default/files/attachments/2022-02/CSEC-Research-Report_Placement-Exp-Svcs-Recd__NCYL_Cal-State.pdf.

13 See Preventing Sex Trafficking and Strengthening Families Act (Pub.L. No. 113-18, 128 Stat. 1919); SB 794 (Stats. 2015, ch. 425); see also California Dept. of Social Services, All County Information Notice No. I-83-16 (Nov. 23, 2016), www.cdss.ca.gov/lettersnotices/entres/getinfo/acin/2016/i-83_16.pdf.

14 W&IC § 16501.35(a) & (b).

15 California Dept. of Social Services, All County Information Notice No. I-83-16 (Nov. 23, 2016), www.cdss.ca.gov/lettersnotices/entres/getinfo/acin/2016/i-83_16.pdf.

16 W&IC §§ 16524.7(d)(2)(A) & (B), 16524.8(b); SB 855 (Stats. 2014, ch. 29) (created an opt-in CSEC program for counties to receive state funding to support CSE-related services; currently 47 of 58 counties have elected to participate in the program).

17 Cal. Stds. Jud. Admin., std. 5.40(e).

eliminate the behaviors or situations altogether.¹⁸ It also shifts power back to the individual, as the expert in their own life, allowing them to drive the approach.

Why use harm reduction with youth impacted by commercial sexual exploitation?

CSE is, by definition, harmful. Many young people impacted by CSE are involved in high-risk situations, including having sex (protected or unprotected) with multiple partners, being exposed to violence, using or being forced to use substances, and being away from home or care. However, escaping or leaving exploitation and related activities may not be possible, or even desired by the young person, in

the short term. (See Stages of Change, Card C.) Harm reduction focuses on working toward **safer options, even if not perceived as the safest**, as a means for the youth to achieve long-term health and safety. This approach recognizes the importance of **restoring the youth's autonomy** as an essential component of healing from abuse and exploitation, supporting youth to **define and achieve their own safety**. This framework also allows for consideration of how broad system failures, such as poverty and racism, among others, contribute to ongoing exploitation and other harms for youth involved in CSE.¹⁹



¹⁸ For more information, see generally California Dept. of Social Services & Child Trafficking Response Unit, *Harm Reduction Series: Introduction* (Aug. 2017–Feb. 2019), www.courts.ca.gov/documents/BTB25-3E-01.pdf.

¹⁹ It is important to note that often young people, especially those with third party exploiters, have very little, if any, control over their bodies, their daily activities, the food they eat, and where they stay, among other things. The court needs to understand that the restrictions and requirements it imposes on young people might feel like a replication of that exploitative situation and may only provide short-term safety and may stifle the young person's growth and development. Young people, especially those who have had little control, benefit from learning to and being empowered to make safe choices and decisions.

The Court's Role

1

Both on and off the record, lead by example using strengths-based, people-first language.

2

Avoid labels that blame young people for what has happened to them. Labels can cause further harm, reducing youth to one experience, rather than whole people, and often leads to more stigmatization.

3

Remember that although some people identify as victims, survivors, or people with lived experience with trafficking or exploitation, many don't self-identify as victims or survivors of trafficking or CSE, even if they meet the legal definition. The court/MDT partners should support youth no matter how they identify or whether they self-disclose exploitation.

4

Understand that the experience of exploitation often begins before age 18 and continues into adulthood. The language we use must recognize this.

5

Note that some people who have engaged in conduct that falls under the legal definitions of being a trafficker may also be victims or survivors of exploitation.

6

It's not just about girls. Youth of all genders are impacted by CSE.¹

7

Learn key terms, coded language, and even emojis that youth use to describe their experiences. This will help you pick up on red flags and the nuances of their experiences. For a glossary of terms, see *Human Trafficking in California: Toolkit for Judicial Officers*.

¹ For more information on how courts can take a holistic approach when working with people who have experienced trafficking and are being charged with trafficking-related crimes, see generally Shared Hope International & Villanova Law Institute, *Responding to Sex Trafficking Victim-Offender Intersectionality: A Guide for Criminal Justice Stakeholders* (2020), spopy1bvira2mldnj1hd926e-wpengine.netdna-ssl.com/wp-content/uploads/2020/04/SH_Responding-to-Sex-Trafficking-Victim-Offender-Intersectionality2020_FINAL_updatedApril2020.pdf.



Non-Harm Reduction Approach
What Not to Say

Harm Reduction Approach
Trauma-Informed Language²

child prostitute, child prostitution

instead

the youth's name or chosen name

underage sex worker, a CSEC

instead

child, youth, or person impacted by or experiencing exploitation/CSE/trafficking

case, delinquent, juvenile

instead

person/child/youth/
their name

runaway, AWOL

instead

youth who leaves or is away from home or care

pimp

instead

exploiter/trafficker

john

instead

buyer

bed/placement

instead

home

trigger

instead

trauma reminder

² Eileen Mayers Pasztor, Eshel Williams & Amber Davies, "Strength-Based Words and Expressions: Why Language Matters" (Nov./Dec. 2020) *Fostering Families Today* at 24, nfaonline.org/resources/Documents/Article%206%20Why%20Language%20Matters%20FFT%20November-December%202020.pdf.

in the Courtroom With Youth Impacted by CSE

Key Principles

- **Center the youth's and family's voice and choice.** Always ask youth and families first what they want and need. Learn about who they are as individuals and what they care about. Supporting a youth's autonomy is essential.
- **Ensure the youth's perspective is free from interference.** Where familial exploitation exists or is suspected, or where there may be other risks to the youth speaking freely, ensure youth have a chance to voice their perspectives separately.
- **Prioritize relationship building.** Do not recreate the unhealthy power dynamics of exploitation through exertion of control, making love and care conditional on compliance, and punishment. One of the best ways to combat the cycle of exploitation is to help youth build safe relationships with supportive people.
- **Balance the risks and benefits.** Consider all types of safety the youth may be balancing (physical, financial, emotional, psychological). What may appear risky is often what the youth finds best among difficult or limited options. Start from a place of trust. Be transparent with young people and families about what you're balancing and why when making decisions in the case.
- **Celebrate incremental progress and change.** Focus on strengths and goal setting, rather than adversarial or punitive processes. Small steps increase long-term safety. When we celebrate the positive and encourage youth to progress at their own pace, it builds confidence and trust that leads to long-term safety.
- **Do not focus exclusively on exploitation.** Recognize the youth as a whole person and do not define them by their exploitation. Recognition of

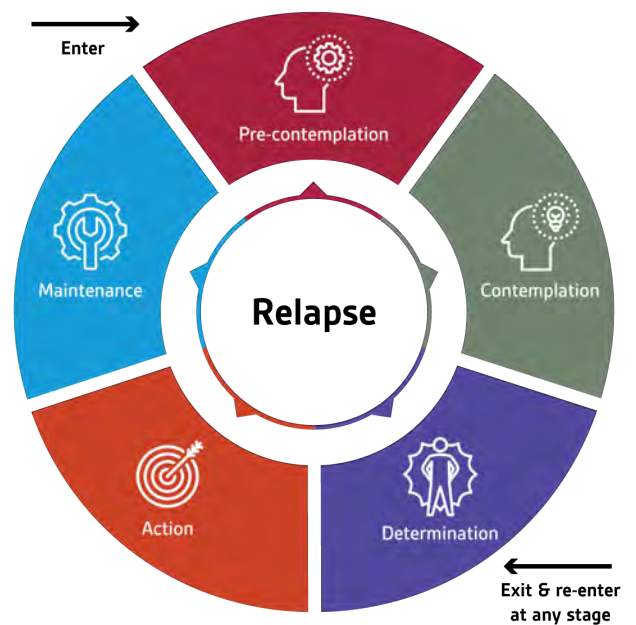
progress in other areas of the youth's life can be protective against exploitation or minimize the risk of exploitation in general.

Top Tips for Using Harm Reduction in the Courtroom

- **Judicial risk tolerance.** Recognize and accept the risk of making harm reduction–focused decisions, that something may go wrong, and that you cannot guarantee safety. This approach aims to reduce potential harm, even if this approach seems risky or potentially dangerous.
- **Offer education for court personnel on CSE and harm reduction.** Effective harm reduction requires collaboration and commitment from all parties, not just the judicial officer. Everyone interacting with youth, including bailiffs, clerks, and attorneys, should have basic training on the issue and how to practice harm reduction.
- **Safety planning.** Encourage the youth to make a safety plan and be proactive about anticipating potential risks. Encourage the youth's trusted adults to take the youth's lead and discuss collectively how to support the youth when those risks arise.
- **Use off-the-record conversations and avoid the CSE label.** Avoid stigmatizing the youth by speaking to the parties off the record if more specifics are needed about CSE experience for goal or service planning.
- **Slow down.** Do not rush through proceedings. Make time to listen, understand, and build rapport. Pause if a youth is upset or is having a trauma response and restart later if needed. Moving too quickly can reinforce feelings of lack of control and autonomy.

- **Calendar control.** Limit the number of youths seen per day/court session to ensure there is sufficient time to treat each youth as an individual.
- **Prioritize credible messengers.** Have survivor leaders and advocates in the courtroom to support the youth, and be a bridge between the youth, court, and partners.
- **Quality over quantity.** Be thoughtful about what services and conditions are ordered—more is not always better. Overburdening youth and families can cause more harm.
- **Take notice.** Observe and get to know the young person so you can recognize changes over time, including red flags for exploitation or other trauma,¹ as well as positive change. Use motivational interviewing techniques to inquire about those changes and inform the youth about services and supports that the court/MDT partners can provide.
- **Consider frequency of court contact.** More frequent, less formal check-ins between youth and judicial officers in court, and other MDT partners outside of court, can help to build trust and consistency and create space for celebrating successes.
- **Create a supportive physical environment.** Sit at eye level at a table rather than high up on a bench when speaking with the youth, wear plain clothes (if permitted), provide support animals, and have youth-friendly and culturally responsive art or imagery in the courtroom. Remove handcuffs from the youth; they reinforce a message (both for the youth and others in court) that the youth is in trouble.
- **Focus on service and positive development, not compliance.** Provide young people with resources and information to build on strengths,

- promote leadership skills, and encourage positive decision-making. Maintain access to services and important people even when youth are otherwise disconnected, including when they are away from home or care.
- **Virtual hearings.** Permit virtual hearings to promote engagement and relationship building when youth are disconnected, away from home or care, or unable to come to court.
- **Understand stages of change.** Recognize that the path to safety and stability (including life away from exploitation) is nonlinear, and that individuals may cycle in and out of exploitation and other high-risk situations over time due to circumstances both within and beyond their control. Harm reduction encourages the use of interventions and support that meet the person in whichever stage they are in.



For more information on using harm reduction approaches with youth impacted by CSE, see the California Department of Social Services' *Harm Reduction Series*.

¹ New York State Office of Children and Family Services, *Red Flags of CSEC and Child Trafficking* (undated), ocfs.ny.gov/programs/human-trafficking/assets/docs/red-flags-of-CSEC-and-child-trafficking.pdf; Children's Advocacy Center of Suffolk County & Support to End Exploitation Now, *Red Flags and Indicators: Commercially Sexually Exploited Youth (CSEC)* (undated), www.familyjusticecenter.org/wp-content/uploads/2021/03/Red-Flags-and-Indicators-of-Commercially-Sexually-Exploited-Youth-CSEC-and-Labor-Trafficking.pdf.

Stages of Change

Harm reduction goes hand in hand with stages of change, another framework commonly used in connection with substance use and other types of behavioral change. Individuals vary in their readiness and ability to change. As indicated in the illustration, the process is nonlinear and emphasizes meeting people where they are at a given time.

In the context of CSE, **pre-contemplation** usually means the youth may not see the harm of exploitation, denies victimization, and is not considering leaving exploitation or engaging in services; **contemplation** means the youth may be showing ambivalence and understands the reasons why exploitation is harmful, but is hesitant or does not feel able to make change. During **determination**, the youth may be considering or have committed to change and may be taking small steps. In **action**, the youth is taking concrete steps to separate and heal from the exploitative situation. In **maintenance**, the person has moved away from the exploitation and is taking steps to avoid trauma reminders and maintain a life away from exploitation.²

This model isn't necessarily about encouraging movement through the stages, but rather it is a way to frame how to support a youth given their current context.

Note that there are limitations with using this model within the context of exploitation, and in particular with youth, given that many circumstances contributing to exploitation are beyond an individual's ability and control and change. For example, a violent exploiter, a lack of access to meet basic needs, such as food or housing, or the absence of any healthy, supportive relationship may and probably will hinder a person's ability to move from precontemplation to contemplation.

² For more information on applying stages of change with youth impacted by CSE, see generally U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, Commercial Sexual Exploitation of Children Community Intervention Project, *Stages of Change*, m.policy.dcfslacounty.gov/Content/Attachments/007053510_att7.pdf; Kate Walker, California Child Welfare Council, *Ending the Commercial Sexual Exploitation of Children: A Call for Multi-System Collaboration in California* 78 (2013), youthlaw.org/sites/default/files/attachments/2022-03/Ending-CSEC-A-Call-for-Multi-System_Collaboration-in-CA.pdf.

Top Tips for Using Harm Reduction When Making Orders

- **Needs, not punishment.** Orders should focus on what the child/youth needs to be safe and thrive; orders should not be used as a form of punishment or control.
- **Be flexible.** Orders should be flexible, realistic, attainable, developmentally appropriate, strengths based, and culturally responsive.
- **Hold MDT partners accountable.** Orders should define other parties' (MDT partners such as social workers, mental health clinicians, advocates, probation officers, etc.) roles and responsibilities to hold them accountable in supporting the youth, rather than focusing exclusively on their compliance with requirements placed on them.

for Youth and Families Impacted by CSE

Under standard 5.40(e) of the California Standards of Judicial Administration, juvenile court judges are encouraged to “[i]nvestigate and determine the availability of specific prevention, intervention, and treatment services in the community for at-risk children and their families.”¹ In addition, counties also have specific duties to determine appropriate services for young people experiencing or at risk of CSE.² Harm reduction should be infused into these decisions throughout your time with the youth and their family.

The Court’s Role

For each decision and in each area outlined below, ask yourself, the youth, and encourage the MDT partners to explore the following:

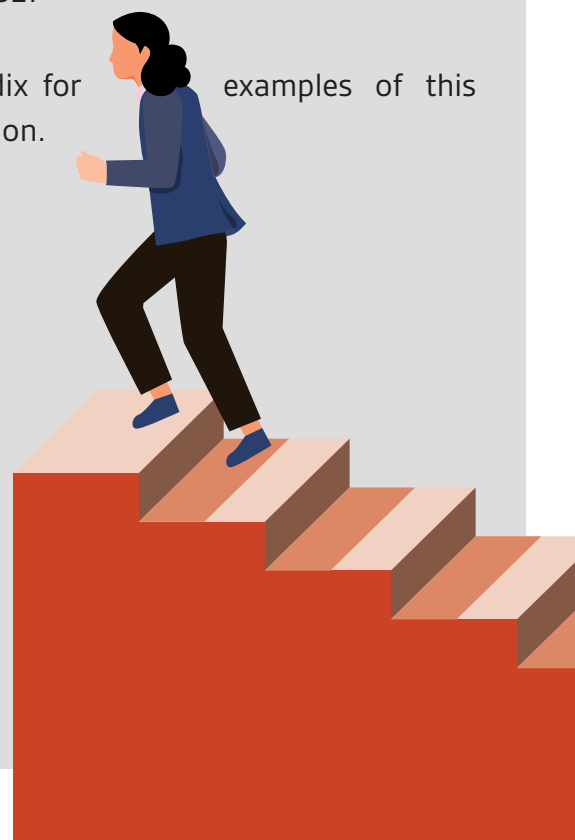
- What are the youth’s and family’s perspectives on what they want or need?
- How are the youth’s behaviors, needs, progress, and goals impacted by current or past trauma, including exploitation?
- How can the court/partners help youth and families meet their goals? What can the court/partners do to support the youth’s strengths, celebrate successes, and reduce barriers and circumstances impacting their and their family’s progress?
- How can the court/partners work together to reduce the risk of harm of a possible course of action? How can the court/partners support a safer outcome, even if it may not feel like the safest?

Additional questions to consider:

- If the ultimate decision does not align with the youth’s preference, have the reasons behind the decision been clearly explained by the court and/or MDT partners?

- How can the youth’s progress be measured (and communicated to the youth) in a way that acknowledges the youth’s stage of change and recognizes incremental change?³
- Are gender-responsive and culturally responsive services being offered? Have nontraditional/non-Western services and supports been considered?
- In what ways can the youth’s cultural background or connections support prevention, healing, and/or exit from CSE?

See the appendix for examples of this approach in action.



¹ This exploration into appropriate services is one of the key roles of the court process. Standard 540(e) also encourages judicial officers to support “[t]he development of community services and resources to assist homeless, truant, runaway, and incorrigible children.”

² See Preventing Sex Trafficking and Strengthening Families Act (Pub.L. No. 113-18, 128 Stat. 1919); SB 794 (Stats. 2015, ch. 425); see also California Dept. of Social Services, All County Information Notice No. I-83-16 (Nov. 23, 2016), www.cdss.ca.gov/lettersnotices/entres/getinfo/acin/2016/i-83_16.pdf; W&IC §§ 16501.35(a) & (b), 16524.7(d)(2)(A) & (B), 16524.8(b); SB 855 (Stats. 2014, ch. 29) (created an opt-in CSEC program for counties to receive state funding to support CSE-related services; currently 47 of 58 counties have elected to participate in the program).

³ See CSEC Action Team, *Using Data to Improve Outcomes for Children and Youth Impacted by Commercial Sexual Exploitation* (undated), youthlaw.org/sites/default/files/attachments/2022-02/Data-Workgroup-Recos-Final-5.7.20.pdf.

Whether to Order CSE-Specific Services

Determine with the youth whether the youth wants/needs CSE-specific services. For some, the services are stigmatizing, and for others, they provide connection around shared experience. When considering whether CSE-specific services or placements are appropriate, ask:

- Does the youth want CSE-specific services?
- Does the youth want to be connected to people with shared lived experience with CSE?
- If yes, what is available in your area that is specifically focused on serving youth impacted by CSE?
- If yes and none are available, are there virtual services that can be offered, or are they available elsewhere and can be ordered?

- If no, are there providers who offer general programming and are trained in CSE, or who could be supportive if trained on CSE? For example:
 - Street outreach worker and/or runaway worker
 - Survivor mentorship/advocacy
 - Specialized mental health care (e.g., Trauma-Focused Cognitive Behavioral Therapy for CSEC)
 - CSE prevention or intervention programs or groups
 - Youth empowerment programs focused on youth impacted by CSE
 - Parent/caregiver empowerment programs
 - Parent partner, coaching, or mentorship programs



Sample Questions

When determining appropriate goals and services, consider these sample questions. *As a reminder, do not ask about exploitation and other sensitive topics explicitly on the record.* Judicial officers and MDT partners can use these questions to explore the ways in which past and current trauma, including CSE, impacts behavior, needs, and progress, and prompt the MDT partners to act. The goal is not to pry or stigmatize the youth, but rather to understand, inform decisions, and reduce harm moving forward.



Safety

- How does the youth define safety for themselves and what makes the youth feel safe?
- What would make the youth feel safer right now? What risks are they currently facing?
- What immediate steps can the court/partners take to support the youth's safety?
- If the youth's perception of safety does not align with the court/partners' view, what can the court/partners do to understand and support the youth's priorities?



Mental and behavioral health

- Does the youth have any specific mental health needs?
- How is the youth's history of trauma manifesting in behavior?
- How might the youth's substance use relate to current or past trauma, including CSE (e.g., substance use used as a coping mechanism, forced to use substances during "dates," etc.)?
- Does the youth experience any barriers to accessing care?
- Would the youth benefit from alternatives to traditional therapy and/or non Western healing practices (e.g., a cultural group or a spiritual practice rather than talk therapy)? If this is not covered by Medi-Cal, can the court order that additional funding be provided by the child welfare or probation agency?



Health care

- Does the youth feel that their health needs are being met? Do they have a provider they feel comfortable with and can access easily?
- Is the youth receiving regular, preventative care, including annual physical exams, eye care, and dental?
- Does the youth have any noticeable injuries or ailments, including recurring or unhealed injuries?
- Does the youth experience any barriers to accessing care, including because of their CSE (e.g., exploiter in doctor's office during visit, history of abuse from doctors, no Medi-Cal card, etc.)?
- If CSE is connected to the youth's need for gender-affirming care (such as trading sex for hormones), how can this need be met another way?
- Does the youth have access to reproductive health information and care? What support does the youth need to access it? (*See additional questions on reproductive health below.*)
- Does the youth know how to access these services while away from home or care or while currently experiencing CSE?



Education/employment

- How can school and/or employment support the youth's healing and/or exit from CSE? (E.g., confidence-building; financial stability; community)
- Are there any barriers to the youth's progress in school/employment? (E.g., late to school because up all night; new placement/caregiver hasn't enrolled the youth; criminal record prevents the youth getting hired; insufficient living expenses; no safe transportation)
- What accommodations or supports are needed?



Reproductive care; expecting & parenting youth

- How can the youth be supported through the reproductive experience (fertility, prenatal, birth, postnatal care)?
- If the youth is expecting or parenting, does the youth have any additional needs based on past trauma, system involvement, or exploitation?
- How can the court/MDT partners support the youth to avoid system involvement for the youth's own child when the youth is a parent presently or in the future (i.e., prevent intergenerational system involvement)?
- If the exploiter/trafficker is impacting the youth's ability to access reproductive/prenatal/postnatal care, what supports can be provided to help the youth access care safely and in a comfortable way?
- What additional risks may the youth face or what needs may the youth have if the trafficker/exploiter is the parent of the youth's child?

For additional resources, see generally Reproductive Health Equity Project for Foster Youth, fosterreprohealth.org/.



Healthy relationships

- What relationships are important to the young person and why? What are they gaining from those relationships? What needs are being met that are not met elsewhere?
- How can the court support relationships with family members (whether through family finding, ensuring youth have visits with siblings, home passes)?
- How can the court/partners support continuity in positive relationships?
- If relationships are viewed as unhealthy by court/partners, how can potential risks be mitigated/balanced? How can the youth's needs currently being met in those relationships be met in other ways?





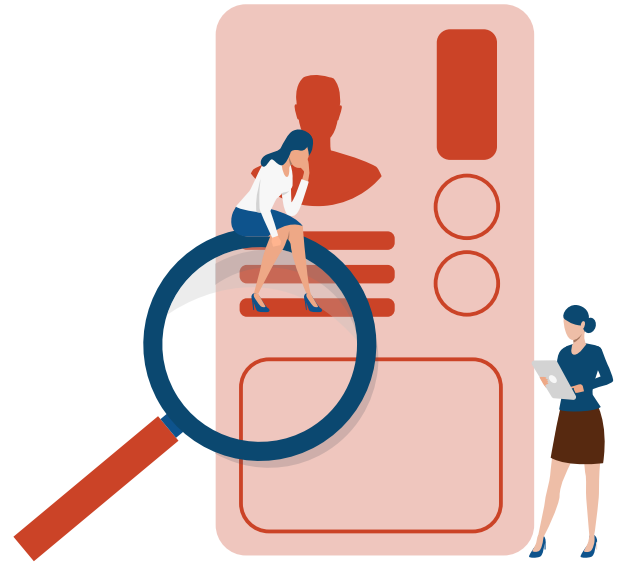
Independent living/life skills

- What skills does the youth have that will support them in transitioning to independent living?
- What additional skills does the youth want or need help with (e.g., financial literacy, maintaining household, cooking, systems navigation)?



Relationship with the trafficker/exploiter

- Is there a trafficker/exploiter? If so, what is the youth's relationship with that person (family member, friend, mentor, romantic partner, gang-related)? Has the youth had multiple traffickers/exploiters over time?
- How does the youth view the trafficker/exploiter?
- What is the family dynamic with respect to exploitation (family member facilitating trafficking; multigenerational exploitation)?
- How is trauma bonding impacting the youth's circumstances, decisions, and behavior?
- In what specific ways is the trafficker/exploiter inhibiting the youth's access to meeting needs or making progress toward goals?
- What needs (financial, emotional) are being met by the trafficker/exploiter that are not being met elsewhere? How can the court/partners support the youth to meet those needs in other ways?



Trauma bonding

"Trauma bonding" refers to the bond that can be formed between people experiencing trafficking (or other trauma) and the person causing the harm, similar to Stockholm syndrome. This dynamic is often created through a "powerful mix of loving care alternated with violence, threats, and dehumanizing behavior." Particularly for youth who have been abused or who faced other trauma prior to trafficking, they may feel that their trafficker is the only person who has loved or cared for them, even if the trafficker is also hurting or causing them harm. Kate Walker, California Child Welfare Council, *Ending the Commercial Sexual Exploitation of Children: A Call for Multi-System Collaboration in California* 23–24 (2013), youthlaw.org/sites/default/files/attachments/2022-03/Ending-CSEC-A-Call-for-Multi-System_Collaboration-in-CA.pdf.

For children and youth who have experienced CSE, safe and stable housing is often one of the most important factors leading to overall safety and stability. Supporting youth and encouraging them to safely remain with their families and communities and avoid removal and/or incarceration is a fundamental example of harm reduction because family removal/separation generally causes harm. In situations where youth cannot live at home because of familial trafficking, for example, harm reduction strategies, which may include unconventional housing or placement options, must be top of mind. This bench card assists judicial officers in making youth-centered, trauma-informed decisions about housing and placement.

Top Tips for Using Harm Reduction in Housing and Placement Decisions

- **Stay or go.** Seek to understand the youth's perspective when they are staying in an exploitative situation or advocating for a seemingly unsafe housing option, and the risks they would face if they left. Consider that they are likely making what they believe to be the best or only choice for themselves at the time.
- **Expect and plan for the youth leaving home/care.** Absences from home/care are very common. Focus on proactive planning to address triggers that result in the youth wanting/needing to leave, and a safety plan to reduce harm when they do leave.
- **Celebrate when the youth stays connected.** Welcome the youth home when they return and celebrate when they stay connected to trusted individuals while they are away. Show that you are there for them and want to help, wherever they lay their heads at night.

- **Increase the use of bed holds.** Encourage or order placements to keep beds open for longer periods of time to encourage consistency and avoid placement changes.
- **Use trial runs.** Test out new housing or placement options using extended visits and provide extra support and supervision.
- **Celebrate incremental progress.** Recognize small improvements over time, such as relationships developing, changes in how often/how long the youth remains at home/care without leaving, and increased engagement in services.
- **Avoid blackout periods.** Help the youth to stay connected to people they care about by eliminating blackout periods at new placements. Blackout periods are set durations of time when a young person starts a program or is placed in a new home and has restrictions placed on access to privileges like outings, contact with loved ones, etc. They are lengths of time when a youth can "earn" privileges if they avoid breaking rules. Connection to important people, access to mental health care, and cultural supports should not have to be earned, and should not be taken away as punishment.

The Court's Role

When considering housing and placement decisions, ask yourself, the youth, and encourage the MDT partners to explore the following:

- What are the youth's and family's perspectives on what they want or need?
- Which housing or placement option offers the best chance for increased safety and stability? What are the benefits and drawbacks of each option?
- What supports or services can be provided to increase safety and reduce the risk of harm of a possible home/placement?

Sample Questions

Below are examples of questions judicial officers can ask to support youth-centered decision-making about housing and placement using a harm reduction approach.

Supporting Family and Relative Caregivers

- What support or assistance would the youth's family or relatives want or need to become or to remain a viable housing option for a youth? (E.g., financial assistance to pay for an extra room; training on CSE, caregiver support group, etc.)
- If the youth cannot remain at home, are there relatives or family members the youth would like to live with? Is there anyone the youth treats as family who may not be related?

A Word on Liability

Families, relatives, and other caregivers may express concerns about liability if something happens to the youth or someone else is harmed while in their care, an exploiter shows up at their home, or if the youth leaves home or care and the caregiver is unable to stop it. These concerns, as well as what will happen in these circumstances, should be addressed directly and candidly. **Harm reduction focuses on reducing the harm of these scenarios, rather than placing blame on the youth or the families if and when they happen.** A relative should not be disqualified as a viable placement because of a high likelihood of the youth leaving the placement or other risky scenarios since youth also encounter these and other risks in foster and congregate care placements.

- If there is familial trafficking, is the trafficker in custody or otherwise separated from the youth? Is there a way to maintain family contact while protecting the youth from an exploitative family member?
- How can the court support relationships with siblings and other close family members, even if the youth cannot/is not living with siblings?
- What concerns do the family or relatives have about having the youth in their home?
- What support/education/training might the family and relatives benefit from regarding the court's/MDT partner's approach, including using harm reduction?
- What can the court/partners do to support or alleviate any concerns/barriers to the youth remaining home or with a relative (e.g., resource family approval; criminal record exemption)?¹

Familial Exploitation

- What is the family dynamic with respect to exploitation (family member facilitating trafficking, multigenerational exploitation)? What is their understanding of exploitation?
- Why is the family exploiting the youth? What circumstances or dynamics contribute to exploitation (e.g., poverty, substance abuse, returning from incarceration and unable to find employment)?
- What are the living arrangements of the family? Is there a way for the youth to remain with family while separating from the family members engaged in or facilitating exploitation?

¹ Placement with a relative is allowed "regardless of the status of any criminal record exemption or resource family approval, if the court has found that the placement does not pose a risk to the health and safety of the child." W&IC § 361.2; see SB 354 (Stats. 2021, ch. 687).

Out-of-Home Placement and CSE

- When considering whether CSE-specific placements are appropriate, ask:
 - Does the youth want a CSE-specific housing or placement option?
 - If yes, what is available in your area (e.g., specifically trained caregivers, specialized short-term residential therapeutic program (STRTP), intensive services foster care)?
 - If there is no CSE-specific placement, or the youth prefers a non-CSE-specific placement, are there options where staff has specialized training on CSE?
- If the youth's current or past trauma—including CSE experience or the CSEC label—is impacting the availability of placement options, what can the court/partners do to mitigate those consequences?
- If the youth's criminal/juvenile record is impacting housing/placement options, what can the court/partners do to mitigate these impacts (e.g., record sealing, specific findings, dismissing charges or probation conditions)?

Placement and Safety

- What are any safety concerns that the youth and family may have about the various options? What do they believe would make them safer? (E.g., is the potential placement close to the “track”—that is, an area known for exploitation, or close to an exploiter's or abuser's house, or does it require the youth to travel through a violent part of town?)
- What steps can the placement and/or caregiver take to address any safety concerns? What supports can be put in place to mitigate those risks (e.g., transportation stipend, security camera/alarm)?

Time Away From Home/Care

- From the youth's perspective, what are the reasons that the youth is leaving home/care, including push and pull factors (e.g., exploiter threatening or encouraging the youth to leave, missing family/friends and not receiving home passes, conflict at STRTP, desiring freedom from restrictions of parents or out-of-home care, basic needs not being met)?
- How can the court/partners help to reduce potential harm when the youth is away from care?
- From the youth's perspective, what would help them to remain and/or return to home/care more quickly? How can the court/partners address the push and pull factors before the youth feels they need/want to leave?

What are the caregivers/partners doing to encourage/welcome the youth to return to home/care?



Detention/Incarceration

- Detention in juvenile hall or other locked facility should not be used unless there is a risk to public safety and there is no less-restrictive option.
- If detention in a locked facility is being requested:
 - Is there a risk to public safety if the youth is not detained?
 - If there is a perception from the court, MDT partners, family, or others that the youth must be detained because it is the only way to keep them safe or stabilize them, what alternative options can be put in place to secure the youth's safety?
 - What is the youth's perspective on detention?

- If the youth is being detained because there is no viable housing or placement option, what other short-term options are available to avoid detention?
- If it is determined that detention is necessary for public safety, what services can be provided to the youth while in custody to minimize the incarceration and to plan for transition to a less-restrictive setting?

Harms of Incarceration/ Detention

Incarceration should never be used as a placement option, nor should placement be used as punishment. Incarceration should also be avoided as an attempt to keep youth safe. There is often a fear among court participants—judicial officers, social workers, law enforcement, attorneys, and others, even parents—that unless youth experiencing CSE are in locked settings where no one (such as traffickers) can reach them, and where they are prevented from leaving, their safety cannot be assured. This fear is understandable, but it is short-sighted.

Top Tip



Even if formal programming is not available in custody, the court/partners should consider having a reliable survivor advocate meet with the youth regularly to discuss safety and address the difficulties in making changes.

Arrest, handcuffing, and searching a young person can simulate many of the violent experiences young people face at the hands of their exploiters. Locking children and youth up provides only short-term protection from the dangers of trafficking,² and detention itself causes substantial harm. Incarceration causes disconnection from family and community,³ missed school and activities,⁴ harm through physical⁵ and sexual violence, impacts on physical and mental health,⁶ and a juvenile/criminal record that will follow them⁷ and have lasting consequences on employment.⁸

2 Human Rights Project for Girls, Georgetown Law Center on Poverty and Inequality & Ms. Foundation for Women, *The Sexual Abuse to Prison Pipeline: The Girls' Story* 12 (2015), genderjusticeandopportunity.georgetown.edu/wp-content/uploads/2020/06/The-Sexual-Abuse-to-Prison-Pipeline-The-Girls%E2%80%99-Story.pdf.

3 Richard A. Mendel, Annie E. Casey Foundation, *No Place for Kids: The Case for Reducing Juvenile Incarceration* 12 (2011), www.aecf.org/resources/no-place-for-kids-full-report/.

4 Justice Policy Institute, *Sticker Shock 2020: The Cost of Youth Incarceration* 109 (July 30, 2020), www.justicepolicy.org/uploads/justicepolicy/documents/Sticker_Shock_2020.pdf.

5 Elizabeth S. Barnert et al., "How Does Incarcerating Young People Affect Their Adult Health Outcomes?" *139 Pediatrics* 1, 7 (Feb. 2017), www.ncbi.nlm.nih.gov/pmc/articles/PMC5260153/pdf/PEDS_20162624.pdf.

6 Justice Policy Institute, *The Dangers of Detention: The Impact of Incarcerating Youth in Detention and Other Secure Facilities* 8–9 (Nov. 28, 2006), justicepolicy.org/research/the-dangers-of-detention-the-impact-of-incarcerating-youth-in-detention-and-other-secure-facilities/.

7 Julia Cass & Connie Curry, Children's Defense Fund, *America's Cradle to Prison Pipeline* 127 (Oct. 2007).

8 Richard J. Bonnie et al., National Research Council, *Reforming Juvenile Justice: A Developmental Approach* 179–180 (2013), www.nij.org/uploads/digital-library/Reforming_JuvJustice_NationalAcademySciences.pdf.

education,⁹ and housing.¹⁰ If detention is necessary because of concerns for public safety, the court/MDT partners must ensure that in-custody services are provided to meet the youth's needs, as well as transition planning and support for the youth when they return to the community.

Separating youth from their families through the child welfare system leads to similar long-term harms. In addition, youth in care are often targeted by exploiters/traffickers or exposed to high-risk situations they may not have been otherwise.¹¹



Considerations to Support Safety and Stability in Care/Placement

- Does the youth have access to a cellphone while in care/placement?
- For determinations about cellphone usage, see Common Orders, Card F.
- What activities is the youth interested in? Are they available in the youth's current home/placement?
- Does the youth have access to their own physical space and a safe place to keep their belongings?
- If a young person's belongings are discarded, they may find other ways to replace them. For instance, sometimes young people may shoplift to replace basic necessities, such as underwear and a toothbrush, because they aren't aware of any other options that are available to them at the time.
- Does the youth have access to personal items, like clothing, bedding, hair care products, and hygiene products that they like and got to choose?
- Does the youth have at least one person at home/placement whom they trust and can go to with questions, concerns, or to celebrate successes?

- If there are conflicts at home/placement (with peers, staff, siblings, caregivers), what supports are there or that can be put in place to resolve conflicts in a healthy manner?
- Is there an option for crisis support or respite for either the youth or caregiver if they need time apart (e.g., secondary caregiver, drop-in center, peer-to-peer coaching, etc.)?
- What supports might the youth want or need to help with the transition to out-of-home care?
- Who are the people most important to the youth and what places/activities are most important? How can connections to those be supported while the youth is in care and as they transition between housing and placements?
- What community-based programming is available to support the youth while in placement?
- Does the youth have access to safe transportation?

9 Anna Aizer & Joseph J. Doyle, Jr., "Juvenile Incarceration, Human Capital, and Future Crime: Evidence from Randomly Assigned Judges," 130 *Quarterly J. of Economics* 1, 2 (2015), www.nber.org/system/files/working_papers/w19102/w19102.pdf

10 Carly B. Dierkhising & Kate Walker Brown, *Commercially Sexually Exploited Girls and Young Women Involved in Child Welfare and Juvenile Justice in Los Angeles County: An Exploration and Evaluation of Placement Experiences and Services Received* 10 (2018), youthlaw.org/sites/default/files/attachments/2022-02/CSEC-Research-Report_Placement-Exp-Svcs-Recd__NCYL_Cal-State.pdf

11 *Id.*

Top Tips for Using Harm Reduction in Housing and Placement Decisions

- **Needs, not punishment.** Orders should focus on what the youth needs to be safe and thrive, and not be used as a form of punishment or control.
- **Be flexible.** Orders should be flexible, realistic, attainable, developmentally appropriate, strengths based, and culturally responsive.
- **Hold MDT partners accountable.** Orders should define other parties' (MDT partners such as social workers, mental health clinicians, advocates, probation officers, etc.) roles and responsibilities to hold them accountable in supporting the youth, rather than focusing exclusively on the youth's compliance with requirements placed on them.

Below are common orders that can be made for youth impacted by CSE, as well as questions and considerations for judicial officers when making orders.

Concrete Supports

Ordering concrete supports—such as funding for clothing, transportation, hygiene, and skin and hair care products—is an important harm reduction strategy. Recognize that concrete supports are not “extra” or for “fun” things, but are critical to the youth's success, normal adolescent development, and continued safety. Ensure orders requiring parties to provide a particular concrete support, service, or referral are complied with expeditiously (and set follow-up court dates, if needed). Consider the following:

- What concrete supports does the youth want or need? What needs are currently being met by exploitation?

- How quickly can the MDT partners secure the needed items?
- If funding is not available elsewhere, has the court made an order to the child welfare agency, the probation department, or another entity to use additional funding?

Cellphones

Systems, providers, and caregivers often place restrictions on youth impacted by CSE in an attempt to prevent contact with exploiters/traffickers. However, cellphones are important lifelines to safe, trusted adults and peers in times of need and to build relationships and are viewed as a cultural norm and mode of connection more generally. State guidance indicates that “[t]he court should consider an order that the youth cannot be prevented (e.g., by a placement) from keeping their cellphone as a means of connection to family, friends, and professional supports.”¹ Consider the following:

- Is the youth's access to a cellphone more restricted than for youth not identified as CSE? If so, why?
- Is the foster parent or caregiver placing restrictions on the cellphone usage? If so, are the restrictions reasonable? Age and developmentally appropriate? Time limited?
- Do restrictions effectively deny usage? If so, has that restriction been approved by the youth's probation officer or social worker?²
- Would the youth benefit from an order from the court preventing the caregiver from placing certain restrictions on cellphone usage?
- If there are concerns about safety related to cellphone usage, what less-restrictive methods could be used to address those concerns without limiting usage/access?

¹ For more information, see California Dept. of Social Services, All County Information Notice No. I-32-21 (Apr. 21, 2021), www.cdss.ca.gov/Portals/9/Additional-Resources/Letters-and-Notices/ACINs/2021/I-32-21.pdf?ver=2021-05-27-152155-897.

² Cal. Code Regs., tit. 22, §§ 89377, 89379(a)(10); California Dept. of Social Services, *Resource Family Approval Written Directives 94* (vers. 6.1, 2020).

- What other ways can the youth remain in contact with important people or seek help in emergencies if they don't have access to a cellphone?³

No-Contact Orders

If issuing a no-contact order, be mindful of the fact that the youth may have limited ability to prevent contact with prohibited persons, including exploiters/traffickers. Make inquiries and tailor orders narrowly to ensure that your restraining orders are realistic, enforceable, and focused on the aim of keeping the youth safe. No-contact orders that prevent a youth from seeing someone they want to see, such as family or friends, may cause them to disconnect, disengage, or fail to comply with other orders—or worse, may result in losing engagement with them entirely. Think through whether there are ways to maintain important relationships or meet the needs those relationships serve in safer ways.

Discharging/Recalling Warrants; Access to Court and Services When Away From Placement

Warrants are often used to secure the youth's location and ensure they are safe. However, requiring arrest or detention to clear the warrant can cause further harm, alienation, and criminalization and should be avoided.

The focus should be to (1) identify a trusted person (such as an attorney or advocate) to quickly locate and connect with the youth without requiring a court appearance or detention; (2) plan for future placements and service options with improved chances of meeting the youth's needs including medical, mental health, or legal support; and (3) maintain communication between MDT partners and the youth to facilitate the youth's safety. The

court can use orders to ensure that the parties are actively working to support the young person even while the youth is away.⁴

Vacatur

Welfare and Institutions Code sections 782 and 786 provide the juvenile court with options to dismiss underlying petitions and seal juvenile records when the case is terminated. These statutes can be used to vacate earlier findings or otherwise limit access to juvenile court records if a youth demonstrates to the court that such an order is in the interest of justice (§ 782), the youth does not need treatment or rehabilitation (§ 782), or the youth has satisfactorily complied with the terms of probation (§ 786(c)). Vacating adjudications and sealing records can reduce barriers in young people's personal and professional lives so that they can move on from the exploitation and trauma without being hindered by a criminal or juvenile court record.

Orders to Support Youth Testifying in Adult Criminal Proceedings

Keep track of whether a youth in your court may testify in criminal proceedings against their trafficker. It may be necessary to make provisional orders to ensure the safety or well-being of youth who are testifying. This may include asking the youth who they want to support them during the proceedings, securing safe transportation to and from court, ensuring security within the courthouse, ensuring the youth has food and clothing they feel comfortable with, and providing services (such as additional mental health care) to address potential re-traumatization or trauma reminders, or making a change in placement if there is a current safety threat. Make sure that the youth's attorney keeps you apprised of such proceedings.⁵

³ Cal. Code Regs., tit. 22, § 84072(d)(8)(C); W&IC § 16001.9(a)(11).

⁴ W&IC § 16501.35. For the requirements for expeditiously locating and responding to youth who are missing from care, see generally California Dept. of Social Services, All County Letter No. 16-15 (Apr. 28, 2016), cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2016/16-15.pdf.

⁵ For an example of a comprehensive approach to supporting youth through the testimony process, see National Center for Youth Law, *Los Angeles County Victim Witness Testimony Protocol* (forthcoming).

Appendix

Examples of Harm Reduction in the Courtroom

	Example	Non-harm reduction approach	Court's/MDT partner's role in using harm reduction approach	Example of incremental progress to celebrate
Placement	Youth is dual status, is living in a group home, and regularly leaves at night.	Issue 14-day notice, look for new placement, or detain in juvenile hall for running away	<ul style="list-style-type: none"> • First, ask the youth why they feel they need to leave and how you can help. • Note that exploiter is encouraging the youth to come out, the youth misses being able to go see their sibling, and there is regular conflict among youth at the home. • Do not require the youth to be detained to clear bench warrant. Celebrate the youth for returning home each day. Ask the social worker to facilitate conversation with group home about how to manage conflicts. Order that the home not remove the youth's belongings. Encourage the home to welcome the youth back when they return. Note: If the youth's belongings are removed, the youth may not know what resources are available to replace items they need and as a result may feel they have to shoplift. • Direct MDT partners to support the youth in developing a safety plan to identify trusting people to call when the youth is away from the home. Provide the youth with clinic information in case they need health care while away. Let the youth know they will not be in trouble when they return and that their spot will be waiting for them. Order that the youth be provided with home passes so they can visit their sibling. Provide the youth with bus pass and/or rideshare gift card so they have transportation to return when they are ready. 	<p>Length of time youth is away from care decreases from 5 days to 1 day.</p> <p>Frequency of incidents away from care decreases from every week to once per month.</p> <p>Youth contacts identified trusted adult while away.</p>
	No foster home is willing to take a youth identified as CSE because of stigma and family is not viewed as safe option.	Keep youth in juvenile hall or group home until adequate foster home is identified.	<ul style="list-style-type: none"> • Ask the youth where they feel the safest and where they want to be. • Recognize that because the youth has been labeled as "CSE" there may be no foster home willing to accept them, and the family home is not considered viable because they do not have a room for the youth and family members are afraid the youth will be a negative influence on younger siblings. • Ask youth to identify family members or community members with whom they have strong relationships. Ask MDT partners what they need to make the family home a safer option, such as financial assistance for an extra room or training about CSE. Prompt the social worker and case manager to assist the family in obtaining benefits. Share CSE-related information with potential caregivers only as needed and explore removing the CSE label from the young person's file once it is no longer a relevant concern. • Schedule a "trial run" with family member for 2-week period. Order referral to caregiver partner program for crisis support. Identify at least one person for youth to reach out to if they need help during the trial run. Set next court check-in for 2 weeks out so the youth and family can identify any additional needs or successes of the trial run and connect with their attorney. 	Youth and family member reach out for support during conflict during 2 week trial run and ask to continue placement after 2 weeks.

Appendix: Examples of Harm Reduction in the Courtroom

	Example	Non-harm reduction approach	Court's/MDT partner's role in using harm reduction approach	Example of incremental progress to celebrate
Placement	Youth refuses offered transitional housing program.	"Take it or leave it" approach	<ul style="list-style-type: none"> • Ask the youth their perspective on the apartment and what they are concerned about: The space? The neighborhood? The roommates? • Take the youth's concerns seriously. Trust that if they are unwilling to go, there is a reason. For example, it is common that transitional housing options are located in areas known for exploitation or other violence, which would put the youth's immediate safety at risk and be a trauma reminder. • Building on the strength of the youth's close relationship with a childhood friend, explore options for the youth to stay at the friend's apartment instead, including as a short-term transitional living setting.* • Make sure the youth's concrete needs are met (food, clothing) and encourage the youth's attorney and case worker to check-in frequently with the youth. Direct MDT partners to meet more frequently to ensure the youth's needs are met while in transition. <p><small>*For more information, see generally California Dept. of Social Services, All County Letter No. 21-95 (Aug. 16, 2021), cdss.ca.gov/Portals/9/Additional-Resources/Letters-and-Notices/ACLs/2021/21-95.pdf?ver=2021-08-18-163613-730.</small></p>	<p>Youth learns new resources for accessing food and clothing.</p> <p>MDT partners obtain funding to support friend's apartment as short-term transitional living setting.</p>
School	Youth loves school and does well but is late most days and is failing in first two classes.	Sanction youth for violating court requirements of school attendance.	<ul style="list-style-type: none"> • Ask the youth their perspective on why they are missing school and how the court can help. • Note that they are out late at night due to CSE and cannot wake up on time. • Celebrate the youth for attending and getting good grades in other classes. Recognize improvements if/when the youth is able to attend classes. • Direct the social worker to collaborate with the guidance counselor to amend the youth's schedule to avoid early morning classes. Modify court conditions requiring full attendance—set a goal with the youth of arriving on time 2x/week and increase as the youth makes progress. Explore alternative school options if the youth is interested. 	Youth arrives on time 3x/week, exceeding 2x/week goal.

Appendix: Examples of Harm Reduction in the Courtroom

	Example	Non-harm reduction approach	Court's/MDT partner's role in using harm reduction approach	Example of incremental progress to celebrate
Mental health	Youth is experiencing dissociation and depression, and skipping appointments with counselor.	Prioritize court-ordered activities and sanction youth for missing therapy.	<ul style="list-style-type: none"> • Ask the youth what they love to do and what help they need to do it. • Note that the youth has had 4 different therapists in a year due to unstable housing and placement changes and doesn't want to tell their story again. Also note that the youth does feel comfortable having a therapist of a different racial/ethnic background. • Acknowledge that the youth has attended boxing classes in the past, it makes their body feel strong and healthy, and they are close with the boxing teacher, who comes from the same neighborhood. • Sign order for restoration funds to pay for boxing classes. Drop requirement that the youth attend therapy as part of case plan. If parties still feel traditional therapy is necessary, revisit at next court hearing and order MDT partners to identify other therapeutic options that address the youth's concerns (such as reconnecting with former therapist they liked). 	Youth attends boxing classes. Youth takes walk in a local park with former therapist once per month.
Substance use	Youth is using marijuana regularly.	Issue probation violation for drug use and increase drug testing.	<ul style="list-style-type: none"> • Ask the youth about their experience with substance use, and how it might be helping or hurting them. • Note that it helps the youth to address trauma symptoms, such as nightmares and dissociation, and helps them focus on tasks. • Encourage the youth and MDT partners, using Motivational Interviewing, to identify additional coping/healing practices, such as connection to youth dance group or substance use services through local Native American Health Center or tribal wellness program. • As the youth builds other coping tools, work toward goal of reducing substance use and/or identifying safe times and places for smoking. 	Youth reduces marijuana use from every day to 3x/week, and smokes only at night after homework is finished. Youth connects with tribal wellness program and joins beading group.

Appendix: Examples of Harm Reduction in the Courtroom

	Example	Non-harm reduction approach	Court's/MDT partner's role in using harm reduction approach	Example of incremental progress to celebrate
Health care	Youth comes to court with multiple untreated injuries.	Ignore or force youth to go to clinic.	<ul style="list-style-type: none"> • Have a trusted adult check in with the youth and let the youth know that they've noticed they are injured and ask whether the youth wants to talk about it or needs any help. Help the youth to feel seen and respect their autonomy over their own body. • Note that the medical report indicates there was an older man in the exam room and the youth appeared nervous to speak freely about their injuries. Note that the youth says they do not trust doctors because they haven't helped family members in the past. • Affirm the youth's fear about attending the medical appointments and do not force them to attend if they don't feel comfortable. • Assign a community-based advocate to discuss the possibility of returning to the doctor with the youth or connect with a public health nurse for psychoeducation of the youth about medical rights and consent. Locate a clinic in an area that the youth feels safe and order social worker or advocate to transport the youth there if and when the youth is ready. 	<p>Youth begins to talk about their injuries with their advocate.</p> <p>Youth agrees to reach out to advocate next time they are injured and identifies a clinic in another neighborhood they would be open to visiting.</p>
Healthy relationships	Youth views exploiter as romantic partner and shows signs of trauma bonding.	Tell youth to stop seeing the exploiter and blame them for putting themselves in unsafe situations.	<ul style="list-style-type: none"> • Ask the youth what they get out of that relationship, what they like about it, and are there others in their lives who make them feel that way? • Note abuse/neglect history and history of domestic violence in family. Also note the youth is in pre-contemplation phase. • Celebrate that the youth is coming to court and seems open to talking to their specialized CSE advocate. Encourage advocate to invite the youth to empowerment events with survivor leaders/speakers, or connect the youth with role models in employment the youth is interested in. Invite the youth to participate in prevention curriculum about healthy relationships. • Continue to focus on building healthy relationships with the youth. Clarify that services are not contingent on the youth leaving exploiter. Share resources with the youth about how to access confidential reproductive health care and medical care and provide a crisis hotline number in case the youth is in trouble and wants to talk anonymously. 	<p>Youth attends group on healthy relationships.</p> <p>Youth reaches out to public health nurse and asks for condoms.</p>

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RESEARCH BRIEF: From Survivor to Thriver: Analyzing Challenges and Support in the Reintegration of Human Trafficking Survivors

by Arduizur Carli Richie-Zavaleta, DrPH, MASP, MAIPS & Tessa Balc

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ABOUT

This analysis synthesizes current U.S. literature, highlighting key models and frameworks for supporting survivors' reintegration and emphasizing the importance of survivor-centered, trauma-informed approaches.

FINDINGS

Reintegration is achieved through long-term support systems, including financial sustainability, healthy relationships, peer support, mentorship, community connections, and credit repair. Equally important is recognizing and fostering survivors' inner strength, resilience, and self-advocacy.

CONCLUSION

Multi-dimensional support is crucial for the long-term reintegration of trafficking survivors, emphasizing the need for addressing financial stability and survivor autonomy to prevent revictimization

Human trafficking is widely recognized as a violation of human rights and a public health concern. Over the past two decades, extensive research has been conducted on the risk factors and vulnerabilities associated with human trafficking. However, little is known about the reintegration process for survivors. Just as the risk factors, actual entrapment, and exploitation of survivors are not linear processes, neither is their reintegration.

Although more studies are needed to establish comprehensive theories about the processes, support, and challenges of reintegration, emerging research studies highlight approaches to support survivors during their recovery phase after exiting trafficking. This analysis aims to synthesize current literature on reintegration within the United States. It identifies fifteen peer-reviewed articles, a book chapter, one report, and some local examples of successful programs. Moreover, it underscores key models, guiding principles, and frameworks that can support practitioners, government and non-governmental programs, and policy development strategic

plans that are survivor-centered and trauma-informed.

It is important to note that these findings and recommendations are based on limited literature, with most studies being exploratory. Nonetheless, this emerging understanding of reintegration during the post-trafficking phase is essential to ensure best practices in supporting survivors as they work to become strong, healthy individuals and contributors to society. This research brief aims to highlight such findings as well as local case studies that demonstrate how trafficking survivors can progress toward becoming thrivers.

Lastly, the 4 P's framework of human trafficking and the Posttraumatic Growth theory are integrated into the following discussion to better explain and understand the phenomena of reintegration in the lives of survivors.

Reintegration of Survivors of Human Trafficking—A Nonlinear Process :

The post-trafficking phase toward reintegration is complex and nonlinear, with survivors

facing multifaceted risks of revictimization. Successful exiting from trafficking, along with physical, mental, and emotional healing, and appropriate support throughout the reintegration process, are essential to avoid recidivism (Bruhns et al., 2018; Mumey et al., 2021; Loomba, 2017; Rajaram & Tidball, 2018). Reintegration occurs after survivors have undergone initial physical, mental, emotional and spiritual healing following identification and recovery (Bruhns et al., 2018; Loomba, 2017; Okech, et al., 2018). At this stage, survivors have built sufficient inner strength to utilize the wrap-around support needed. This type of support forges a pathway to achieve their goals and dreams and transition from survivorship to thriverhood. In this transition, survivors have voiced their hope for the future emerging through survivor-centered support of long-term social and community support, peers, mentors, and inner strength and determination (Mumey et al., 2021; Loomba, 2017; Rajaram & Tidball, 2018). Emerging literature highlights key risk factors for trafficking vulnerability as survivors seek to heal, restore,



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and reintegrate into society. These risk factors overlap with those that initially led to trafficking victimization and span across different types of trafficking. Economic and housing instability, homelessness, unresolved harmful outcomes of poly-victimization and trauma, lack of job and life skills, inadequate community support, history of involvement with the justice system, and damaged credit among others continue to make survivors vulnerable, even to the point of re-victimization (Bruhns et al., 2018; Cecchet & Thoburn, 2014; Corbett, 2018; Evans, 2020; Helpingstine, Kenny, & Canfield, 2021; Hemmings et al., 2016; Mumey et al., 2021; Rajaram & Tidball, 2018). Nonetheless, exploratory literature suggests that survivors who receive survivor-centered, trauma-informed, compassionate care, and wrap-around services are more likely to successfully reduce recidivism, and at times avoid it altogether. The following sections will explore these ideas in more detail.

Challenges to Successful Reintegration

1. Mental Health:

Challenges to successful reintegration can be analyzed at multiple levels: intrapersonal, interpersonal, institutional, and systemic. As aforementioned, overlapping risk factors that led survivors to their trafficking victimization continue to hinder their full restoration and successful reintegration into society.

At the intrapersonal and interpersonal levels, the deleterious effects of poly-victimization during pre-trafficking and trafficking lead to a sense of shame and deep mistrust of those around them, including healthcare providers, service providers, and community

members (Evans, 2020; Loomba, 2017; Rajaram & Tidball, 2018). The negative outcomes of experienced violence, control, and abuse, especially when survivors are trafficked by family members, are not completely understood (Rajaram & Tidball, 2018). Additionally, exploratory studies have highlighted other intrapersonal struggles related to mental health. It is well-documented that survivors of trafficking experience a plethora of abuse from their former traffickers and sex buyers. These mistreatments include threats, physical and sexual abuse, such as beatings, rape, stabbings, and other forms of extreme violence, resulting in significant mental health struggles. These struggles often manifest as fear for life and safety, depression, depression-related symptoms such as crying, suicidal ideation, sleep challenges, numbness, flashbacks, and post-traumatic stress disorder (PTSD). Additionally, survivors are constantly haunted by their previous trauma and life experiences, contributing to ongoing anxiety (Cecchet & Thoburn, 2014; Mumey et al., 2021; Okech, et al., 2018). The complexity of survivors' intrapersonal and interpersonal struggles and needs are essential elements to consider when supporting them in their healing journey so they can be ready for the reintegration phase.

2. Economic Instability:

Economic instability can be observed across multiple levels of analysis, including intrapersonal, institutional, community, and systemic levels. To achieve a successful initial exit from trafficking and avoid re-entering such experiences, it is crucial to recognize the barriers that prevent survivors from reintegrating into society. Achieving financial stability and economic independence are fundamental components

for the reintegration of human trafficking survivors. Research has identified several barriers to economic independence and sustainability. These barriers include unemployment or underpaid employment, damaged legal records, overload and burnout, and a lack of long-term plans or economic options (Corbett, 2018; Helpingstine, C., Kenny, M.C. & Canfield, B., 2021; Hemmings et al., 2016; Mumey et al., 2021; Rajaram & Tidball, 2018). Economic instability upon exiting trafficking is common, hindering both initial exit and sustained recovery (Corbett, 2018; Mumey et al., 2021; Rajaram & Tidball, 2017). Underpaid jobs, lack of life skills, and job training heighten the vulnerability of re-entering trafficking (Helpingstine, Kenny & Canfield, 2021). Thus, the need to address multidimensional barriers to have successful reintegration.

The post-trafficking aftermath is challenging, especially when there are no systems in place to connect partners who can meet the multiple needs of survivors immediately. However, when resources are available, pathways of referral are established, and collaboration among social agencies is effective, local or national welfare systems can meet the immediate needs of this population (Hemmings et al., 2016). Achieving healing and reintegration requires long-term planning, commitment, and trauma-informed and survivor-centered services that support the reintegration process for many years to come. Applying a strength-based approach to support is also pivotal. This approach recognizes the talents and skills that survivors already possess and provides the suitable survivor-centered support to help them forge their path to reintegration (Hemmings et al., 2016; Rajaram & Tidball, 2018; Shyne's Interview, 2024).



3. Housing Instability, Homelessness Status and Other Needed Support:

Findings indicate that economic instability results in other factors that continue to place survivors in vulnerable situations. Economic instability leads to housing instability and often homelessness. Survivors have cited safe houses as an essential support for those seeking to exit trafficking. Specifically, in the initial aftermath, a space away from their trafficker is necessary to sustain their exit. Nonetheless, housing remains a challenge for many even after survivors enter the reintegration phase, especially when they have not achieved strong economic independence (Mumey et al., 2021; Rajaram & Tidball, 2017).

The difficulties in obtaining economic stability are exacerbated by a lack of social support systems and services that provide survivors a foundation. These services may include childcare, job training, higher education scholarships, and continuous mental, physical, and emotional support needed to build inner strength, resilience, and determination (Chambers, 2019; Corbett, 2018; Jain et al., 2022; Loomba, 2017; Rajaram & Tidball, 2017). In addition to the aforementioned social and healthcare services, there is an emphasis on building positive relationships as a means for survivors to find resilience after trafficking. These relationships can be fostered through mentors, peer-to-peer support, programs to improve family and community relationships, and

“The Post-Traumatic Growth theory emphasizes that despite experiencing complex trauma, individuals have demonstrated resilience and the capacity to bounce back and experience positive change and growth if they are offered the aftercare they need to heal.”

practitioners committed to long-term trauma-informed care (Bruhns et al., 2018; Evans, 2020; Knight et al., 2021; Rajaram & Tidball, 2017).

The Post-Traumatic Growth theory emphasizes that despite experiencing complex trauma, individuals have demonstrated resilience and the capacity to bounce back and experience positive change and growth if they are offered the aftercare they need to heal. Some analysis findings have demonstrated that those survivors with greater support and mentorship develop coping mechanisms and have decreased their PTSD that helps them to successfully reintegrate back into society. Nurturing the inner growth and strength are pivotal for reintegration and rebuilding a new identity (Bruhns et al., 2018; Loomba, 2017; Okech, et al., 2018). Other needed assistance and services include the need to clear credit damage and criminal records, and to teach them life skills such as

banking, long-term saving plans, lending, flexible spending grants, and such (Corbett, 2018; Mumey et al., 2021). Creating platforms, spaces, and partnerships with communities and agencies that allow survivors to become partners in leadership roles are also essential to their reintegration (Bruhns et al., 2018; Loomba, 2017). Lastly, understanding the specific needs of survivors are extremely important. No one approach alone will completely meet the needs of all survivors. Each person is unique and requires individualized support and care (Bruhns et al., 2018; Shyne Interview, 2024).

Support that Leads to Reintegration

1. Building Trust in Others through Trauma-Informed Approaches of Care:

Exploratory studies highlight survivors' voices in identifying the types of support that lead to successful reintegration. Suitable support for survivors of human trafficking operates across multiple levels, from intrapersonal to systemic.

At the intrapersonal and interpersonal levels, mistrusting others is a well-established negative outcome for those who have experienced complex trauma. Extreme violence can result in difficulty building bonds with others. Thus, building trust post-trafficking is essential for survivors to form healthy relationships. This is particularly important as they incorporate new experiences into their lives, such as obtaining vocational training, pursuing higher education, and starting their own businesses. Experiencing trusting relationships as positive support during the reintegration phase is a common theme in the literature of reintegration (Evans, 2020). These approaches must be trauma-informed care (Richie-Zavaleta, et al., 2022).

Rebuilding trust in others is a sign of healing and growth. Just as mistrust was built through toxic, abusive, and violent relationships, trust can be built through positive and nurturing ones. However, to reach this point, survivors need to experience relationships that offer encouragement and support. Failing to rebuild trust in others can be detrimental to their reintegration (Evans, 2020). Positive relationships build self-confidence and self-reliance among survivors of human



trafficking as they learn to enter new social settings (Loomba, 2017). This positive inner strength is essential to overcome destructive self-shame and feelings of worthlessness (Rajaram & Tidball, 2018).

2. Small Circle of Friends and Peer-to-Peer Support Systems:

Due to their mistrust, survivors often form a small circle of friends who can understand and support them. These circles most likely include other survivors who can empathize with one another. When small circles of friends do not exist, survivors can get discouraged and give up on their efforts to reintegrate. This camaraderie also offers a pathway and hope for the future. By seeing other survivors succeed in their endeavors, others can find encouragement, motivation and resiliency to overcome feelings of depression or hopelessness (Evans, 2020). Therefore, peer-to-peer support, mentors, and positive role models including faith-based community members are vitally important in the reintegration process and resiliency. For example “adopted mothers and fathers” can provide a framework of what healthy relationships may look like (Evans, 2020; Knights, et al., 2021; Loomba, 2017; Rajaram & Tidball, 2018).

Another positive aspect of building supportive relationships is that survivors begin to develop a different sense of identity that is not connected to their past victimization or experiences. As survivors feel comfortable engaging and building community, these interpersonal connections help them increase their social capital by finding the diverse support and resources they need for successful reintegration. These types of community ties could provide opportunities for recreation, affirmation, identity-building, and meeting practical needs. Since new

community ties do not discriminate against survivors based on their past (many times survivors do not share about their past during the post-trafficking phase), these experiences play a positive role in the reintegration process (Bruhns et al., 2018; Loomba, 2017; Rajaram & Tidball, 2018).

3. Opportunities for Growth:

Just like building positive relationships with peers, mentors, and community members, opportunities for personal growth are equally important. From meaningful job experiences to small personal achievements, these experiences continue to build inner strength, hope, and skills necessary for successful reintegration into society. For example, survivor networks can provide opportunities for leadership and personal growth. These opportunities allow survivors to reconnect with their strengths, ambitions, resourcefulness, and faith. These experiences can also provide a space to learn about their own talents and strengths (Bruhns et al., 2018; Evans, 2020; Helpingstine, Kenny, & Canfield, 2021; Loomba, 2017; Rajaram & Tidball, 2018).

Survivors have often voiced feeling “out-of-touch” with themselves. Therefore, growth opportunities, such as spaces and practices that enhance their internal drive, can be pivotal in their reintegration journey. Once developed, this inner drive can connect survivors with actionable plans and resources available in their community (Bruhns et al., 2018).

San Diegan Organization— Examples of Support for Reintegration:

This section highlights several local organizations in San Diego, California that provide support to survivors in their journey from

survivorship to thrivership. *Alabaster Jar Project* is a local nonprofit that began as a ministry supported by a church in North County San Diego. As it developed its programs, it eventually created *Grace House*, a long-term residential facility for survivors of sex trafficking (Alabaster Jar Project, 2023). This is an important support for housing instability, since homelessness is a risk factor for trafficking revictimization (Mumey et al., 2021; Rajaram & Tidball, 2018). Additionally, *Alabaster Jar Project* has created a peer-support group, which is another key component in the reintegration process (Rajaram & Tidball, 2018).

Another San Diegan organization that provides long-term support to survivors of sex trafficking is *GenerateHope* (GH). GH was founded in 2009 and established roots in San Diego in 2010. In 2018, GH established its transitional housing to support the reintegration of survivors. This organization recognizes that every individual is different and may require various types of resources and support; hence their approach is tailored to individual needs (GenerateHope, n.d.). Other organizations that support survivors in their reintegration journey include the *Bilateral Safety Corridor Coalition*, *LifeLine Community Services*, among others.

As aforementioned, financial stability, community connections, and building self-esteem and resilience are essential components in the emerging literature of reintegration of survivors of human trafficking. *Shyne* is a nonprofit organization that seeks to support survivors of trafficking to achieve financial sustainability through a survivor-centered approach by providing participants with the tools to entrepreneurship and business development (Shyne, 2024). More than half of the organizations’ staff



are thrivers-led and operated. Moreover, *Shyne* has developed a model for financial healing and sustainability that is worth highlighting. This model not only applies evidence-based approaches to the reintegration process but also introduces new components to the conversations about the type of support needed for someone to transition from survivorship to thrivership (Lundstrom, M., 2023). The following section is based on an interview with Cynthia Luvlee, *Shyne's* founder and CEO, and Jazmyn Gasparri, *Shyne's* executive assistant and lived experience expert.

Interview Highlights on Reintegration

The interview reveals two main themes within the organization's approach to reintegration: financial healing and the implementation of a strength-based approach. Additionally, the interviewees provide recommendations for fostering and increasing suitable support for survivors attempting to reintegrate into society at multiple levels. The interview highlights and affirms aspects of the literature on reintegration concerning economic vulnerabilities and the necessary supports, as well as the interpersonal and intrapersonal supports contributing to relational healing. *Shyne's* non-judgmental, strength-based approach to care exemplifies these supports. Cynthia Luvlee states,

"The theory is that the vulnerability of being exploited can be alleviated when an individual has financial security and the ability to earn a living through purpose-driven activities. So a lot of what we focus on is equity, strength-based assessments, skills alignment, and just that inherent potential and purpose

that an individual has, who's had the experience of trafficking and exploitation and also has the wisdom of trafficking and exploitation as part of their story."

1. Financial Healing

An overarching theme revealed in the conversation was the aspect of **financial healing**, which *Shyne* focuses on as an integral part of a survivor's journey to heal and reintegrate. A key component of this financial healing is finding economic stability through *cash healing*, a term coined and described by interviewee Jazmyn Gasparri. *Cash healing* refers to the healing of a survivor's relationship with the concept of cash and its physical nature. This process helps reframe a survivor's view of cash versus money and its connection to their physical body, which was shaped during their trafficking experience and exploitation. Gasparri describes,

"Learning how money can move in different ways other than just, my body is going to provide me cash and then that cash has to be physically moved by my body again and controlled. So it was like a mind shift from cash to money because I couldn't see money outside of cash for a while. Learning the system of money and the energy of money versus cash was like a big 'aha' moment. Even just the small things we learned, you know, like these tiny little steps, like taking your wallet and shuffling your various cards around. Just the physical act of doing that, of moving money physically, which is what we were doing before. So tiny things like that, I know it does sound a little out there, but those small gestures kind of rewire our thinking around money."

Gasparri highlights this as she cited her economic situation upon exiting trafficking as a difficulty in finding

stability outside of *The Life*. Gasparri focuses on specifically the aspect of credit repair, highlighting her credit score as a significant barrier in her journey to **economic recovery**. She comments,

"...one of my biggest barriers, I would say, would be the credit because that just blocks housing, transportation, and all kinds of things. So I would say the credit repair has been such a crucial piece to moving forward."

Echoing this sentiment Luvlee states,

"That is going to be the biggest component, is removing from their credit history anything that happened during their trafficking experience so that they can access student loans, business loans, grants, housing, and all of the things that are attached to our credit [To learn more about credit repair, visit this website: [Debt Bondage Repair Act](#)]."

As *Shyne* works to offer support for survivors **learning how to engage with the financial systems**. It is an effort which goes beyond base repairs and works to offer the tools to cultivate an effective understanding of monetary systems, which may open doors to financial independence. Gasparri describes financial literacy needs. She shares,

"Before *Shyne*, I'd never had my own personal bank account. I didn't grow up seeing that a lot as an immigrant daughter... I just never had experience with banks and checks... So it was just a foreign concept to me."

Another aspect explored in the efforts to assist survivors in reaching **sustainable financial stability** was the identification of a survivor's passions to translate that into a viable career, which not only provides a fulfillment of purpose but



also a secure income. In recounting her life initially upon exit, before *Shyne*, Gasparri comments,

“I was pregnant at the time. I was working at Sprint, and I was like, ‘This is not cutting it,’ because you know, you’re used to having such a huge amount of cash flow and all of my basic needs being met. So coming out it [trafficking victimization] just felt like, how do I move forward if I’m financially trapped? I have all the skills to do the things, but like where?”

Financial instability left Gasparri vulnerable. She felt a *pull* to return to *The Life*. Moreover, she also felt like her work at *Sprint* left her passions and complete capabilities unexplored. This became more clear to her as she entered into partnership with *Shyne*, as Gasparri states,

“I don’t have to like doing a service-based business where I’m getting paid right there. I can create the structure of the business, and I can hire. I can hire people, I would have never thought I had the skills to do that. But Cynthia was really good at explaining like I was already managing people, like I could already delegate.”

Supporting the skill sets survivors bring is crucial for their successful entrepreneurship and business development. This model not only guides their business plans but also ignites motivation and excitement in their post-trafficking phase. Luvlee states,

“I think purpose-driven career training is important, not just placing people in jobs, but that it is something that aligns with them, that they’re excited about and want to show up for.”

Additionally, *Shyne* works to provide participants with the opportunity

to join an **extensive network** of resources. Through this membership, survivors enter into partnerships with additional organizations, small business owners, pro bono professionals, and are able to tap into a wide range of support that translates into tangible assistance and opportunities they would not have otherwise. Luvlee shares,

“A great partner that we have is *Empowered Network*, formerly *Empower Her Network*. Where in partnership they have allocated resources to, in fact, purchase the equipment for somebody to start a business, to provide rental assistance, to do some of those things that help create stability while they’re in *Shyne*’s training programs, and while they are figuring out their career path and their education plans, and they get an *Empower plan*.”

Through extensive inter-organizational networks combined with survivors’ passions, *Shyne* walks with survivors in building a sustainable career and achieving lasting financial healing with an informed and healthy understanding of monetary systems.

2. Strength-Based Approach

A strength-based approach is the second theme of the interview. *Shyne* applies this approach throughout their daily practices. Luvlee comments,

“[*Shyne*] began within that core principle of being grassroots and focusing on asset-based community development. We were doing skills assessments, looking at the community assets, figuring out what the community of survivors were interested in attaining for themselves. And then, we developed and piloted the created programs around the feedback that [survivors] were providing on gaps and services [needed].”

In the effort of reintegration, a strength-based approach encourages an environment in which perspectives can be shifted in multi-faceted ways, survivors are entering into a partnership with *Shyne* by **focusing on the assets and not the deficits**. Luvlee comments,

“When we focus on problems and deficits that a community has, and these gaps, and having to fix something, they [survivors] can feel very disempowered and they can feel very dependent. And so when we look at systems, you know of oppression, and what is at the forefront of what society is speaking to. I think that we have a grand opportunity with this particular group of individuals to bring to light some new solutions again because they’re touching on all of the social systems. And so they have this broader knowledge and understanding of how these systems work because they have been a part of them, maybe from birth. Whether it’s foster-care, incarceration, all of these things. So when we implement the assets-based community development model, what *Shyne* speaks to is survivor ownership. The ownership and the ability to, through self-determination, make the decisions for what’s best in their lives provides leadership and autonomy. We believe they honestly know what is best for their immediate needs, and we walk alongside them in support of their goals.”

A strength-based approach also manifests itself through partnerships. The outcome of this collaboration is that survivors are able to receive a **continuum of care**. For example, partnering with Rebecca Bender Initiative, an online resource that offers educational tools to foster professional development, strengthens *Shyne*’s efforts in their business development plans. Luvlee states,

"I'm not gonna go recreate Rebecca's work because she's absolutely the best at what she does. So we work together so that we have more resources.... And the only way to do that is to have those partnerships and MOU's."

Gasparri affirms this positive outcome of partnerships and collaborations from a strength-based approach. She comments,

"I think healing is not linear. Sometimes something will happen [post-trafficking]. It just comes back in a weird way, and you'll need a different type of service at a different time. So that's where the organizations being connected, kind of how I got through to *Shyne*, is really important. So that, it's this long-term process of like there's support, different types of support [to be available when needed]. It's not just, 'Here's the program, do it, and you'll be fine,' because that doesn't work for everybody, and everybody's definition of success is different. Like three years ago, [for example,] I would have been like, 'I just want to sit down at a desk and work and be fine.' But now I'm like, 'Let's take down all these oppressing systems, and let's do public speaking.' So it changes, and my personal definition of success changes."

Moreover, a positive association is found with survivors building confidence when they have **mentorship and encounter supportive communities** that allow space for healing relational trauma endured within trafficking says Gasparri,

"And having support, having the mentorship to go to, that was really healing, because [during trafficking victimization, your relationship with] traffickers, there's a lot of very intense relational dynamic. ...you're getting a lot of feedback [by traffickers]. ... So [now] having this mentorship...

I'm receiving positive feedback, and I know it's not going to be shame-based, and it's not manipulative [like it was with former trafficker(s)]. [Therefore] it's very safe and healing."

Peer-to-peer support continues to demonstrate positive outcomes in the post-trafficking phase. *Shyne* makes an effort to provide a space for survivors to be in community with each other. Gasparri describes how in a peer community she is able to feel seen and heal without judgment. She shares,

"So it's really nice to be in a network of other thrivers who, I can say, you know, a joke,... [and] they'll understand. But if I just say that to somebody else, they'll be looking at me like, 'That's crazy.' So that piece helps that [inside negative] voice kind of goes away, you're around other people who get it. And there's no consequence or punishment for not showing up to a class or not doing something."

Part of this non-judgemental approach allows survivors to take their own road, reclaiming their own **agency** in their healing process, leaning into their own judgment as an inner-strength. This aspect of personal autonomy in a survivor's decision of when and how to heal has been underscored within the literature (Godoy et al., 2020). Gasparri recounts how understanding her own healing process has allowed her to take small steps that would lead to large life changes and support her complete exit,

"...specifically, when I was more conscious about trying to heal and being ready to heal, and being ready to have steps or kind of goals that increased my confidence in my abilities to do something or to accomplish something. It's just kind of like those different smaller goals

stacked up to be like, okay, I did that, now I can do this."

Through having a continuum of care, timely support needed through partnerships, and a strength-based, survivor-centered approach, Luvlee has witnessed another outcome, **self-confidence**. She comments,

"It takes that consistency and steadfastness of continually showing up in an unbiased non-judgemental way, offering support, and really asking the individual, 'What do you need? How can I support you?' And then providing that support, not thinking that I have the answer for that for them, and that probably is what builds [the survivors'] self-confidence."

Gasparri shares,

"So being able to know that I don't have to be system-dependent forever, 'cause it used to feel that way, has increased my confidence and resilience. That like, hey I know there's a way to do this. I have to navigate it and figure it out, but I have the support to do that, and I've done all of these smaller things that just do a little bit of like, I call it like a kiss of confidence. And just like, okay, keep going, keep going. So yeah, that's how I built that, showing up and doing the everyday smaller things."

At the core of *Shyne* is the belief that survivors possess immense capabilities and potential. Allowing them to tap into these strengths, fosters healing in numerous ways and builds a recognition of their own resilience, creating an environment that contrasts with traditional nonadaptive resource systems. Luvlee comments,

"Jazmyn and I say, 'She shows up in the midst of a storm,' and most of our members do. And I'm not sure



why, it could be that connection building, that trust building, that relational healing, which is also sort of that underlying thing that we don't talk much about. Because a lot of people have come to *Shyne* and mentioned their distrust in the system, the re-exploitations that they have experienced, the feeling disempowered, not listened to, not included in decision making."

Within *Shyne's* efforts to highlight a survivor's existing assets and strengths as well as continued support without a timeline, survivors are able to build up intrapersonal strength and interpersonal trust with others. Thus, networks can provide healing that is lasting throughout the unforeseeable circumstances of life. Gasparri attests to as she comments,

"You're talking about long-term care and support. I've been able to navigate those things that would have before sent me right back into the cycle [trafficking re-victimization], and I now have the internal resilience and the support network to like, I don't have to do that, there are other options and other ways."

Through the demonstrated elements of a strength-based approach, and ultimately focusing on and utilizing the assets of survivors, *Shyne* is able to walk alongside survivors in their journey to reintegration. *Shyne's* long-term approach to care through a continuum of services and highlighting the agency of survivors in deciding the steps in their journey to healing provide healing in a relational sense in addition to the financial healing that their program strives to partner with survivors in achieving [Visit *Shyne's* Research and Publications [website](#) to watch highlights from this interview].

Recommendations

This analysis highlights crucial components of post-trafficking care that help prevent re-victimization. Key elements include long-term support such as housing, legal aid, credit restoration, access to higher education or vocational training, life-skills training, and peer-to-peer support (Bruhns et al., 2018; Jain et al., 2022; Loomba, 2017; Rajaram & Tidball, 2018). Additionally, the literature underscores other essential approaches and components in the restoration process for survivors of human trafficking during their post-trafficking care and support. The following section outlines these recommendations.

1. Services Providers:

Although terms like "trauma-informed" and "survivor-centered" have become familiar to those working to support survivors of human trafficking, how these concepts translate into everyday practices may not be as clear. In the context of reintegration, these approaches include several key components synthesized from the literature.

First, understanding mistrust in service providers and other stakeholders is crucial. This mistrust results from the severe complex trauma of trafficking (Okech et al., 2018; Chambers, 2019; Evans, 2020; Mumey et al., 2021; Rajaram & Tidball, 2018). Given the severity of poly-victimization and inhumane treatment experienced during trafficking, healing is a long-term, non-linear process (Mumey et al., 2021). At times, survivors may reject the assistance provided to them. Service providers must understand these processes and not give up on their clients (Corbett, 2018). A foundational principle of trauma-

informed care is understanding trauma itself and how it has impacted an individual's life, so service and healthcare providers or anyone engaging with this population can interact without re-traumatization (Chambers, 2019).

Second, it is essential for service and healthcare providers to recognize that survivors, despite their extreme experiences of violence and abuse, are capable of developing resilience, self-advocacy, and agency. These capacities are described by the post-trauma growth theory, which states that survivors of extreme violence and complex trauma can grow and develop resilience and coping mechanisms during post-trauma care (Loomba, 2017). When survivors are denied agency in their post-trafficking care, they are likely to opt out of these services altogether (Godoy et al., 2020). Therefore, post-trafficking care programs must adopt a survivor-centered and trauma-informed approach, recognizing the unique challenges in each survivor's journey to recovery and reintegration.

Moreover, approaches to support reintegration must be survivor-centered to be successful (Bruhns et al., 2018; Godoy et al., 2020). An example is the Medical Safe Haven, which assesses individuals' needs and collaborates with community services to provide survivor-centered post-trafficking care. This approach fosters a sense of agency by understanding complex trauma and recognizing survivors' resilience and capacity for growth during the healing and reintegration process (Chambers, 2019; Knight et al., 2021). Since human trafficking strips survivors of their agency, healthcare systems and service providers must affirm and support survivors' perceived needs and agency over their bodies and future choices. Encouraging personal autonomy and agency in recovery



is a common recommendation from survivors (Godoy et al., 2020; Bruhns et al., 2018). Part of empowering a survivor's agency involves not pushing them to change before they are ready, requiring patience and understanding that healing is not linear (Bruhns et al., 2018; Mumey et al., 2021).

Lastly, a compassionate-care approach includes a non-judgmental attitude towards clients. Literature shows that survivors of human trafficking often feel judged by their healthcare and service providers. Without eliminating this judgment, survivors are unlikely to build the trust and rapport necessary for effective reintegration (Loomba, 2017; Mumey et al., 2021; Knight et al., 2021; Okech et al., 2018; Rajaram & Tidball, 2018).

2. Multi-disciplinary collaboration/partnerships:

Community partnerships are essential to providing the support services that survivors of human trafficking need in their journey to reintegration. These services can include social services, law enforcement, legal representation, credit repair services, peer-to-peer support groups, and basic resources such as food, housing, transportation, child care, counseling, and career or vocational opportunities. Additionally, partnerships should involve researchers, evaluators, community stakeholders/agencies, and survivor-consultants who can provide feedback on program progress (Chambers, 2019; Loomba, 2017; Richie-Zavaleta, Bekmuratova, Sailors, Pray, 2022).

3. Data and Robust Design Evaluations:

It is currently unknown how many survivors of human trafficking successfully reach the post-

trafficking phase due to a lack of data and systems that methodologically identify this process. This challenge requires local and national attention to develop systems that collect the necessary data to understand the prevalence of trafficking and all its phases. Additionally, evaluating service providers using complex research designs that include longitudinal data collection is crucial to understand the evolution and essential components of survivor support, aiding in reintegration and the avoidance of re-entering trafficking (Krieger, Gibbs, & Cutbush, 2020; Richie-Zavaleta et al., 2022).

Conclusion

This brief highlights the multi-dimensional elements required to support a survivor in their long-term journey of successful reintegration. If the needed support is not available, survivors' vulnerabilities continue to threaten revictimization during post-trafficking. In San Diego, California, some local organizations are examples of how long-term support can lead to successful reintegration. This analysis includes an interview with some local leaders from *Shyne*. *Shyne* is a local organization that seeks to support its participants in their financial healing and building economic sustainability. In examining the concept of financial healing *Shyne* highlights the organizational networks available to provide care as well as the importance of the conjunction of passions and long-term stability. While describing *Shyne's* strength-based approach to care, the interview reveals how survivor agency is integral to one's journey from healing to reintegration. The interview consistently highlights the urgency of addressing survivors' financial situations to create sustainable economic practices. It also emphasizes the inherent assets

survivors bring to their own recovery and the need for organizations to adopt practices that support survivors' autonomy and ability to forge their own path to healing. Decreasing the vulnerabilities that lead to revictimization during the post-trafficking phase are crucial for the reintegration of survivors of trafficking. The above recommendations of this analysis can continue to inform organizations, leaders, stakeholders, and committed citizens in providing evidence-based support and resources for the successful reintegration of survivors during their post-trafficking phase. ■

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RESEARCH BRIEF: Dismantling Vulnerabilities - Exploring LGBTQ+ Populations Risks, Challenges, Abuses and Barriers to Identification, Intervention, and the Exiting of Trafficking

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ABOUT

This research brief synthesizes the existing literature on the vulnerabilities, polyvictimization and barriers faced by LGBTQ+ populations in accessing needed services to exit human trafficking.

FINDINGS

The research findings illuminate the unique vulnerabilities and systemic barriers confronting LGBTQ+ communities in the United States, emphasizing the urgent need for comprehensive, diverse, and inclusive interventions and policy reforms to mitigate risks and enhance support mechanisms.

CONCLUSION

This brief underscores the importance of targeted prevention and interventions, inclusive policies and practices, and increased awareness to effectively support LGBTQ+ individuals who are experiencing or exiting human trafficking.

In the United States (U.S.), the LGBTQ+ community faces a plethora of abuses. Some of these traumatic experiences seem to become risk factors for human trafficking (HT) victimization. While studies have explored the connectivity between some LGBTQ+ challenges and trafficking, there is a significant disparity within this literature. Moreover, the diversity within the gender nonconforming community varies greatly; yet, it is seldom recognized in research studies. Although there is no uniformed approach to measuring prevalence of human trafficking among this population, there is some evidence about how their abuse and social challenges increases their vulnerability to victimization. This research brief highlights key findings of the limited literature on the LGBTQ+ community and their risks, experiences, and challenges to be identified and supported in order to prevent, intervene, and exit human trafficking victimization. Thus, this synthesis of literature aims to establish the intrapersonal, interpersonal, and institutional experiences and traumas that heighten this population's risk for trafficking, and the barriers that prevent their identification to best support their exiting, healing, and inclusion. The SocioEcological framework guiding this

research brief analysis was based on 25 peer-reviewed publications from 2015 to 2024. Additionally, it included 2 data reports¹

RISK FACTORS & VULNERABILITIES

Negative Health Outcomes

Due to the limited availability of research considering the diversity found within the LGBTQ+ populations in the context of human trafficking, these subgroups are generally collapsed under a monolithic experience. Despite limitations resulting from the homogenization of this population, there is literature available which considers their overlapping and shared experiences (Georges, 2023; Boswell et al., 2019; Greeson et al., 2019; Dank et al., 2015; Schwarz & Britton, 2015). LGBTQ+ individuals disproportionately experience several types of abuse when compared to their heterosexual and cisgender counterparts. Evidence points to the fact that the multiplicity of abuses lead to their vulnerability for human trafficking victimization (Alessi et al., 2020; Boswell et al., 2019; Barron & Frost, 2018). Demographics of LGBTQ+ youth demonstrate a higher percentile of negative health outcomes including

sexually transmitted infections, cancers, cardiovascular diseases, and obesity (Dank et al., 2015, 2016; Hafeez et al., 2017; Arrington-Sanders et al., 2022). Moreover, in the context of interpersonal relationships, LGBTQ+ individuals, when compared to gender-conforming individuals, experience greater social rejection played out through harassment, bullying, familial rejection and societal isolation (Alessi et al. 2020; Atteberry-Ash et al., 2019; Boswell et al., 2019; Choi et al., 2015; Musicaro et al., 2017; Nichols, 2018). These negative social encounters lead to negative mental health outcomes such as substance dependency, anxiety, chronic depression, borderline personality disorder, post-traumatic stress disorder, suicidal thoughts, and suicide (Dank et al., 2015; Hafeez et al., 2017; Langer, Paul & Belkind, 2020; Atteberry-Ash et al., 2019). Due to this wide range of adverse experiences within the LGBTQ+ communities, their susceptibility to trafficking is greater when compared to their non-LGBTQ+ counterpart groups. Their adverse childhood experiences create higher risks that lead to a runaway status, housing and economic instability. Such social statuses have been well established as risk factors for trafficking

1. A glossary, sourced from the Human Rights Campaign Foundation, is included at the end of the document to clarify terminology encountered in the literature on this topic.



(Boswell et al. 2019; Polaris, 2019; Choi et al., 2015; Nichols, 2018).

Familial & Societal Rejection Impact on Homelessness

LGBTQ+ populations experience negative interpersonal relationships with caretakers and others who they interact with due to their non-conforming-gender-identity, gender expression, or their sexual orientation (Langer, Paul, & Belkind, 2020; Nichols, 2018). These negative interactions are characterized by rejection, isolation, and abuse including emotional, physical, and sexual violence and abuse. As individuals face marginalization throughout their lifetime, this polyvictimization results in LGBTQ+ youths' heightened susceptibility to later revictimizations throughout their lifetimes (Boswell et al. 2019; Musicaro et al., 2017). A 2014 survey of 138 homelessness human service agency providers found that among LGBTQ+ youth, the most prevalent reason for homelessness was being forced out of home or running away as a result of their sexual orientation or gender identity/expression (Choi et al. 2015). These interpersonal dynamics are characterized by biases and discriminatory practices that emanate from cultural values that disapprove of those whose expression or gender identities, which are seen as non-conforming and against societal norms (Nichols, 2018).

Unfortunately, another result of these negative interpersonal experiences of rejection, isolation and discrimination result in housing and financial instability as youth find themselves without the social support systems needed to succeed in society (Hogan & Roe-Sepowitz, 2020). Homelessness has been cited as a prevalent issue among LGBTQ+ individuals (Choi et al., 2015;

Dank et al., 2015; Nichols, 2018). Polaris' Report (2019) identified homelessness as a top risk for trafficking victimization. Although there is a limited literature available, it clearly highlights the association of trafficking victimization vulnerability that homelessness creates for LGBTQ+ youth. Additionally, they are overrepresented among diverse homeless populations (Barron & Frost, 2018; Boswell et al. 2019; Hogan & Roe-Sepowitz, 2020; Greeson et al., 2019; Morton & Samuels, 2018). Due to the lack of shelter, LGBTQ+ youth are then more likely to be physically or sexually victimized (Schwarz & Britton, 2015), and forced to meet basic needs through exchanging sex, known as *survival sex* (Dank et al., 2015). These risk factors such as interpersonal conflict, rejection, lack of social support result in financial and housing instability that many times lead youth to alternative ways of survival.

Survival Sex-Pathway or Outcome?

Studies demonstrate that survival sex is at the intersection of housing and financial instability among LGBTQ+ youth (Dank et al., 2015; Greeson et al., 2019; Nichols, 2018). Yet, it is unclear whether this activity directly leads to trafficking victimization or whether it is an outcome that results after exiting trafficking victimization due to a lack of supporting systems needed to successfully reintegrate back into society (Fehrenbacher et al., 2020). The U.S. federal law has codified any commercial sexual exploitation of a minor through the means of fraud, force or coercion as federal crime under human trafficking law as sex trafficking (TVPA, 2000). Given the lack of direct fraud, force, or coercion involved in survival sex, this activity is many times not considered as part of trafficking victimization. Yet,

survival sex when analyzed in the context of risks for abuse among LGBTQ+ youth, raises questions on the unequal social and power dynamics that are at the center of such exchanges between youth and sex buyers. Although more studies are needed to determine these associations, one study demonstrated sex buyers' perpetration of violence to those who exchange sex for goods; especially when dealing with victims of human trafficking. Sex buyers' violence included physical abuse to individuals exchanging sex and refusal of condom use (Richie-Zavaleta, et al., 2023). Thus, some researchers have suggested including *survival sex* into the definition of commercial sexual exploitation (Georges, 2023; Xian, Chock & Dwiggins, 2017; Fehrenbacher et al., 2020). The limits on defining *survival sex* as human trafficking only in the context of youth engagement further constrain the scope of available literature. Whether *survival sex* is a pathway to trafficking or a result of not having enough support when survivors attempt to exit such victimization, addressing the lack of research in this area is greatly needed (Dank et al., 2015; Fehrenbacher et al., 2020). Further investigation can lead to increasing the understanding of the complexities of such activity and its potential association or causation to trafficking victimization.

Identification Barriers Among LGBTQ+ Communities

The identification and interruption of LGBTQ+ populations' trafficking victimization is an urgent social issue that requires immediate attention. Yet, achieving these goals requires understanding and addressing the overabundance of barriers that currently exist. These barriers range from intrapersonal, interpersonal, and institutional to policy challenges. Lack of self-awareness of victimization status, lack of training and identification protocols among social and medical service providers, and cultural biases lead to discriminatory practices. Monolithic approaches, and the lack of supportive systems translate into obstacles for the

"Whether survival sex is a pathway to trafficking or a result of not having enough support when survivors attempt to exit such victimization, addressing the lack of research in this area is greatly needed."



prevention, intervention, protection, and reintegration of the LGBTQ+ individuals trapped in trafficking (Boswell, 2019; Barron & Frost, 2018; Fehrenbacher, et al., 2020; Forringer-Beal, 2022; Gerassi & Pederson, 2022; Georges, 2023; Hogan & Roe-Sepowitz, 2020; Schwarz & Britton, 2015).

Intrapersonal Barriers–Lack of Self-Identification

The identification of victims of human trafficking becomes further complicated when the paradigm of victimhood narrows this lens excluding LGBTQ+ populations and the recognition of their diversity (Boukli & Renz, 2018; Forringer-Beal, 2022; Schwarz & Britton, 2015). Due to this limited definition and inclusion of LGBTQ+ populations, it leads, on an individual level, to not consider themselves as individuals trapped in trafficking (Fehrenbacher et al., 2020; Boukli & Renz, 2018; Alessi et al., 2020). Additionally, LGBTQ+ populations who have become victims of trafficking may reject the label of victim when imposed upon them. The rejection of this label comes with varying reasons, most of which centered around not fitting the ideal victim paradigm (Fehrenbacher et al., 2020; Gerassi & Skinkis, 2020). Consequently, the LGBTQ+ populations are burdened to advocate for their own victimhood, which limits accessing the needed support to exit victimization (Forringer-Beal, 2022; Fehrenbacher, et al., 2020; Boukli & Renz, 2018). Lastly, like other groups trapped in trafficking victimization, the lack of trust of service providers limits their accessibility to the seldom available services that can support their identification, intervention and reintegration (Gerassi & Pederson, 2022). These negative impacts result in barriers that go beyond the intrapersonal level. Therefore, understanding them is an important step towards creating evidence based approaches to reach these populations.

Interpersonal & Institutional Barriers–Lack of Suitable Trainings, Protocols, Understanding of Victimization, and Services for the LGBTQ+ Populations

On the interpersonal level, social and healthcare service providers and other frontline professionals have an opportunity to intervene through identifying victims, but as the literature widely points out, there is disconnect when it comes to providers having the training to do so (Kenny, Helpingstine, Abreu, & Duberli, 2019; Nichols, 2018). Studies have demonstrated that social service providers who work with homeless youth-serving agencies are likely to come into contact with exploited or sexually trafficked LGBTQ+ populations. Yet, these professionals may operate based on wrong assumptions about characteristics of LGBTQ+ populations, creating a stereotype of trafficking victims that only include a primarily white, cisgender, young woman. This *ideal victim* paradigm also creates hierarchy on who deserves services and who does not (Boswell et al., 2019; Boukli & Renz, 2018; Forringer-Beal, 2022; Nichols, 2018). Research has also shown that the ideal victim paradigm leads to biased daily practices and marginalization of clients and seeing survivors of trafficking as individuals who are devoid of agency (Nichols, 2018).

Similarly to the false victim paradigm is the adoption of a linear approach to services of the LGBTQ+ populations by service providers, which results in missing the identification of such victims (Schwarz & Britton, 2015). As a result, this false paradigm extends beyond who is awarded victimhood under the law, impacting how providers, and law enforcement agents in particular, identify victims and connect them to needed services (Fehrenbacher, et al., 2020). This points toward the general lack of training and knowledge on the LGBTQ+ populations, their needs, and lack of training protocols to identify and suitably support such populations.

These deficiencies only exacerbate the marginalization and the continuation of their victimization (Boswell et al. 2019; Kenny et al., 2019; Schwarz & Britton, 2015; Hogan & Roe-Sepowitz, 2020).

Furthermore, institutional level barriers hinder the identification of LGBTQ+ victims of human trafficking within healthcare and social services. These barriers include a lack of resources to implement effective programs, protocols that lack inclusivity in the services provided, and insufficient partnerships and collaborations needed to provide suitable services and resources (Schwarz & Britton, 2015; Hogan & Roe-Sepowitz, 2020; Dank et al., 2015; Gerassi & Skinkis, 2020; Nichols, 2018). As anti-trafficking measures become increasingly focused toward carceral efforts, survivor-centered services that promote eventual social inclusion receive less funding (Schwarz & Britton, 2015; Fehrenbacher, 2020; Boukli & Renz, 2018). The disparity of social service organizations that are trafficking-specific was highlighted in a content analysis of organizations that encounter trafficked individuals, such as those providing services related to housing, mental health, substance use, legal, healthcare, and employment (Gerassi & Skinkis, 2020). There is an apparent lack of adopted protocols, which can be inclusive to best serve the LGBTQ+ communities (Dank et al., 2015; Gerassi & Skinkis, 2020; Gerassi & Pederson, 2022; Nichols, 2018; Schwarz & Britton, 2015).

Yet, another challenging barrier exists in the context of legal institutions that prosecute criminal behavior. Unfortunately, law enforcement can exacerbate the barriers to identifying victims through the criminalization of LGBTQ+ youth and the arrests of victims (Nichols, 2018; Fehrenbacher et al., 2020; Eyges, 2016). Scholars have highlighted the significant harassment young transgender women receive from police officers, and the reports of harassment by police officers from LGBTQ+ youth; especially of those who identified themselves as



transgender (Fehrenbacher et al., 2020). Additionally, various accounts detail instances of police requiring transwomen to display their genitalia (Eyges, 2016; Fehrenbacher et al., 2020). Such practices create a distrust of authority figures and police, serving as another barrier to identifying these victims and for them to seek help (Dank et al., 2015; Nichols, 2018). Scholars cite how trans women, specifically, are seen as less exploitable by law enforcement, reflecting part of the underlying assumption of LGBTQ+ individuals' agency and willingness to engage in exchanging sex for goods (Fehrenbacher et al., 2020; Eyges, 2016). In the practice of anti-trafficking interventions involving law enforcement, there is a lack of transparency of how connecting services to potential victims is determined following an arrest of someone who exchanges sex for goods (Fehrenbacher et al., 2020; Eyges, 2016; Boswell et al., 2019). Understanding the multiplicity of barriers that currently exist throughout different levels of interconnection can assist in identifying the current gaps and addressing the pressing issues in order to better identify, serve and support LGBTQ+ individuals found in trafficking victimization.

RECOMMENDATIONS TO ADDRESS CURRENT GAPS AMONG THE PREVENTION & IDENTIFICATION OF LGBTQ+ POPULATIONS:

The following recommendations were mainly identified through this

literature review synthesis. These recommendations are presented based on the different levels of analysis provided by the SocioEcological Model (See Figure 1).

Intrapersonal Level-Increasing Awareness, Development of Inclusive Curriculum for Prevention of Human Trafficking

A recommendation that can impact the individual level is to implement human trafficking prevention and education curricula throughout schools; especially those that have a higher number of students who identify as part of the LGBTQ+ populations. Curriculum development for prevention of human trafficking should include education on trafficking risks and vulnerabilities, self-advocacy, resources and typologies of human trafficking victimization that is inclusive of the LGBTQ+ populations (Gerassi & Howard, 2019). This preventive approach could lead to individuals identifying their own victimization. Additionally, when organizations that serve these populations, they can utilize gender-affirming, incorporate inclusive symbols and imagery in advertising and in direct practice and protocols. Additionally, resilience and self-advocacy among the LGBTQ+ populations are essential to empower their decision making process and be able to exit their victimization successfully with the right support (Whaling et al., 2020; Greenfield et al., 2021; Gerassi & Skinkis, 2020; Gerassi & Pederson, 2022; Boswell et al. 2019).

Interpersonal & Institutional Level-Increase Scope of Services that Meet the Multiplicity of Needs of the LGBTQ+ Populations

Adopting protocols aimed at increasing identification and intervention at service junctions is crucial. This includes providing comprehensive educational training, which should not only prioritize inclusivity but also empower medical and service providers to develop self-efficacy in their interactions with potential victims of human trafficking within LGBTQ+ communities (Boswell et al., 2019; Gerassi & Pederson, 2022). Diverse providers must also be attuned to asking specific questions that will help detect victims of trafficking (Kenny et al., 2019; Langer, Paul & Belkind, 2020). Additionally, established institutions that come into contact with potential victims of HT should develop more extensive organizational networks that allow for referrals to community organizations with necessary services. More over, these organizations should specifically advertise the inclusivity and scope of their services (Barron & Frost, 2018; Gerassi & Skinkis, 2020). Also, services need to be centered around gender-affirming guidelines and protocols (Whaling et al., 2020; Greenfield 2021; Gerassi & Skinkis, 2020; Gerassi & Pederson, 2022; Boswell et al. 2019). Lastly, at the institutional level, frameworks that include survivor-centered, trauma-informed, and public health approaches to care, should be utilized as evidence shows success in reaching these diverse populations with



Figure 1. Recommendations for Addressing Current Gaps in the Identification, Intervention, Reintegration and Support of LGBTQ+ Individuals Trapped in Trafficking.



the LGBTQ+ communities (Schwarz & Britton, 2015; Franco, 2022; Whaling et al., 2020).

Research & Policy Gaps—Studies that Aim to Understand the Diversity of the LGBTQ+ Populations and Policies that Increase and Support Changes Across All Levels

In terms of narrowing the current research gaps some recommendations are to differentiate between subgroups of the LGBTQ+ communities, specifically understanding the different experiences between sexual and gender minorities when delving into deeper studies in order to highlight their unique experiences (Georges, 2023). Consistently, the literature available highlights deficits in the knowledge of LGBTQ+ human trafficking and encourages the facilitating of further research; which we recommend includes the intersections and divergences of HT and survival sex and empirically differentiates between the experiences of sexual and gender minorities (Boswell et al. 2019; Gerassi & Pederson, 2022; Fehrenbacher et al. 2020; Greeson et al., 2019; Nichols, 2018; Georges, 2023; Alessi et al., 2020; Morton et al., 2018; Franco, Sunkel & Sherman, 2022).

Additionally, policy development focuses on the multiplicity of needs and inclusiveness of LGBTQ+ individuals are imperative, specifically, a re-evaluation of the ideal victim paradigm within anti-human trafficking policies. Policies that can lead to practices that would not only benefit in the identification but also in addressing the vast needs of LGBTQ+ individuals and other victims of HT that do not fit into this adopted paradigm. Moreover, structurally, anti-poverty measures such as job training, affordable housing, livable wages could be implemented to address macro-level inequalities that currently exist (Hogan & Roe-Sepowitz, 2020; Greeson et al., 2019).

CONCLUSION:

Through synthesizing the limited available literature on LGBTQ+ victimization in the context of human trafficking, this research brief analyzes the heightened vulnerabilities of this population and the barriers to the identification, intervention, reintegration, and support of these individuals. The increased likelihood of the HT victimization of this population was demonstrated through compounding vulnerabilities such as familial and social rejection, negative mental health outcomes, polyvictimization, housing and financial instabilities, and structural biases that do not support such populations. In lieu of the multiple vulnerabilities that are reflected within the LGBTQ+ communities, the literature revealed a significant institutional deficit in resources, such as, gender-affirming care, education, shelter, diversion services, and organizational networks. These deficiencies demonstrate the need for anti-human trafficking efforts and policy to reform its notions of victimhood to better identify and protect LGBTQ+ victims of HT. Consistently, this brief has expressed an urgent need for further scholarship on the prevalence of HT in the LGBTQ+ communities and to address the educational gap for service providers and healthcare professionals to identify the exploitation of this population. These efforts can also prevent further HT victimization among youth if the right support and assistance is provided in due time. ■

GLOSSARY:

Sourced from Human Rights Campaign Foundation

Asexual: Refers to an individual's complete or partial lack of sexual attraction or lack of interest in sexual activity with others.

Bisexual: An individual who is either emotionally, romantically, and/or sexually attracted to more than one gender, although this attraction is not necessarily simultaneous, in the same way, or to the same degree. This term

is sometimes used interchangeably with pansexual.

Cisgender: Refers to an individual whose gender identity aligns with their biological sex assigned sex at birth

Gender Nonconforming: Refers to the behavior or presentation, whether by nature or by choice, does not align with masculine or feminine gender norms.

LGBTQ+: An acronym for "lesbian, gay, bisexual, transgender and queer" with a "+" sign to recognize the limitless sexual orientations and gender identities used by members of the LGBTQ+ communities.

Non-binary: Refers to an individual who does not identify exclusively as male or female. A non-binary person may identify as falling completely outside these categories, somewhere in between, or as both male and female; while some may identify as transgender it is important to note not all non-binary people do.

Heterosexual: Refers to an individual who is primarily emotionally, physically, and/or sexually attracted to the opposite sex.

SGM: Sexual and Gender Minority is an acronym used as a shorthand or umbrella term referring to all those who have a non-normative gender or sexual identity.

Socio-Ecological Model: A multilevel conceptualization of health that considers the various dynamics between personal and environmental factors that put people at risk (Barner, Okech & Camp, 2017).

Survival Sex: also known as transactional sex, is defined as the exchange of sex for money or any material goods (food, shelter, medicine, clothing, and the like) under the own terms of the person exchanging sex (Dank et al. 2015).



Polyvictimization: Prolonged or multiple forms of traumatic victimizations (Musicaro, et al., 2017).

Queer: An umbrella term used to express a continuum of identities and orientations, including those who do not identify as exclusively straight and those who have gender-expansive identities.

Transgender: Someone whose gender identity is different from the sex assigned at birth.

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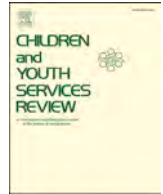


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Improving services for youth survivors of commercial sexual exploitation: Insights from interventions with other high-risk youth

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ABSTRACT

Background: There have been initiatives to develop innovative services for commercially sexually exploited children (CSEC), but there are currently no intervention strategies that have been rigorously evaluated. However, a range of evidence-based interventions have been identified for other problems that frequently co-occur with CSEC. As intervention programs for victims of CSEC develop, it is important to critically examine the research on interventions for these associated problems to ensure that what is borrowed, adapted, or prioritized is informed by research, and likely to best address the needs of victims.

Objective: The current review examines evidence-based interventions from related social problem fields that may have useful content for victims of CSEC. Existing systematic reviews were primarily used for this review; however, rigorous and large-scale randomized controlled trials were also included. In total, 33 articles were included. Articles were identified via search engine (e.g., PsychInfo) and reference mining.

Review: Interventions for adolescent substance use, delinquency, trauma, school dropout, and running away are reviewed for their content and evidence base. Opportunities for integration of CSEC content are discussed using current extant literature.

Discussion: The most promising practices from related fields include mentorship, multisystemic treatment (MST), family programming/therapy, and kinship foster care. Skill-based interventions (e.g., CBT) have been found to be a particularly effective mental health intervention for youth with similar sequelae to victims of CSEC. Importantly, outcomes improve when interventions are paired with relationship-building strategies such as mentorship or group therapy. Implications for CSEC practice and research are discussed.

1. Introduction

The commercial sexual exploitation of children (CSEC) is the exchange of sexual acts for goods, services, drugs, or money by an individual under the age of 18 (Trafficking Victims Protection Act [P.L. 106-386]). When CSEC occurs within a child's country of origin, it is often referred to as domestic minor sex trafficking (DMST). Importantly, CSEC and DMST may be used interchangeably in the U.S. to refer to the same crime. While adult survivors of sex trafficking must have experienced force, fraud, and/or coercion for their experience to legally qualify as sex trafficking, individuals under the age of 18 in the U.S. are not legally able to consent to commercial sex. Thus, any commercial sex by an individual under the age of 18 is considered coercive, and therefore exploitative under U.S. law (Trafficking Victims Protection Act [P.L. 106-386]).

When considering the best options for helping victims of CSEC, it is helpful to keep in mind that commercial sexual exploitation is a serious type of victimization that typically falls within a broader "web" of violence, adversity, deprivation, and marginalization faced by vulnerable children and youth (Twis, 2020; Williamson & Flood, 2021). Often, victims of CSEC are reticent to disclose their victimization due to shame, fear, or a lack of understanding that they are even being exploited (Lutnik, 2016; Williamson & Flood, 2021). Accordingly, these victims often go unidentified, can be criminalized for behaviors inherent to their victimization (e.g., prostitution), and/or mandated to engage in programs that do not acknowledge their status as victims (Gerassi, Klein, & Rosales, 2021; Lutnik, 2016). In many communities, services designed to address CSEC are being newly developed and have limited evaluation evidence. Thus, service providers have to figure out how to either adapt or utilize existing services for other co-occurring social problems

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affecting high-risk children and adolescents so that they are optimally useful to victims of CSEC in terms of both ameliorating mental/physical health symptoms, and reducing the risk of re-victimization.

Fortunately, many interventions developed for high-risk youth have well-established, research-based programming. Therefore, it is incumbent upon researchers and advocates to conduct a thorough review of interventions for high-risk youth that may aid in informing services for CSEC so that they can draw from the best available research on effective program components. In addition to guiding new efforts in intervention development, such research would also help service providers direct referrals and training to community services that have demonstrated effectiveness with similar and over-lapping problem areas. The current paper reviews the research across a number of areas of services to high-risk youth with well-established research and evaluation bases, drawing lessons on what can be learned as services addressing CSEC are developed.

1.1. What is CSEC?

Although definitions of CSEC vary across professional disciplines and contexts, at the most fundamental level CSEC is about sexual activity involving a child provided in exchange for something of value. A variety of terms have been used to refer to CSEC including: "child" or "domestic minor" sex trafficking, child prostitution, bonded and forced sex, child pornography, familial prostitution, and survival sex. For this paper, we have chosen to use the term "commercial sexual exploitation of children" to emphasize that we are discussing all forms of CSEC (as opposed to exclusively sexual intercourse for money, sexual images of children, etc.). Furthermore, we believe the term "trafficking" can conjure an image of movement, force, and the involvement of third parties (pimps), none of which are necessary for CSEC to occur.

Emerging research suggests CSEC can involve a variety of dynamics. Survivors of CSEC may be exploited by a third party including an intimate partner, parent, relative, peer, acquaintance, or stranger (Cole & Sprang, 2015; Franchino-Olsen, 2019; Smith, Vardaman, & Snow, 2009). In some cases, victims of CSEC act independently, brokering deals and exchanges with partners of varying age (Marcus, Horning, Curtis, Sanson, & Thompson, 2014). Items of value that are traded for sexual activities vary, but may include goods, services, drugs, or money (Mitchell, Jones, Finkelhor, & Wolak, 2013). Although there is widespread acknowledgment among researchers and practitioners that CSEC is an important social problem, reliable and rigorous prevalence data do not exist (Franchino-Olsen et al., 2020; Stransky & Finkelhor, 2008). This is due, in part, to the criminal and stigmatizing nature of the crime (Lutnik, 2016; Merry, 2021).

1.2. CSEC programming

Policy makers and advocates have urged the development of interventions and programs that can provide victims of CSEC with needed services that ameliorate their suffering and reduce the likelihood of re-victimization (Clawson & Goldblatt Grace, 2007; ECPAT, 2017). Efforts have been mobilized nationally to identify and provide services and treatment to victims of CSEC (Clawson & Goldblatt Grace, 2007; Clawson, Dutch, Solomon, & Goldblatt Grace, 2009). Components of specialized treatment approaches that are available in some communities include survivor mentorship (e.g., GEMS; Lloyd, 2011), therapeutic groups (e.g., Deblinger, Pollio, & Dorsey, 2016; Hickie & Roe-Sepowitz, 2014; Kenny, Helpingstine, Harrington, & McEachern, 2018), intensive case management (e.g., Williamson, O'Brien, Jones, Mitchell, & Dunford, 2020), vocational training (e.g., Clawson & Goldblatt Grace, 2007), and connections to area health care providers familiar with the health needs of survivors (e.g., Ertl et al., 2020). Rural areas have notably few options, often resorting to juvenile detention or foster homes as temporary holding facilities for survivors of CSEC (Lutnik, 2016; Musto, 2016). Regardless of rurality, multiple studies

have concluded that there is a deficit in comprehensive aftercare for both victims and survivors of CSEC (Clawson et al., 2009; Friedman, 2005; Gragg, Petta, Bernstein, Eisen, & Quinn, 2007).

Despite a push for CSEC-specific interventions, very few (e.g., Rothman et al., 2020) treatments or interventions have been evaluated for survivors of CSEC. Rothman and colleagues have, perhaps, one of the most rigorous evaluation studies of a mentorship-based program for survivors of CSEC; however, the study is limited by its lack of a control group. Furthermore, Salami, Gordon, Coverdale, and Nguyen (2018) looked at a variety of therapies for the treatment of the psychological sequelae of trauma in human trafficking victims and found that cognitive behavioral therapy (CBT) was effective. Unfortunately, this study's sample was not specific to youth and may have limited generalizability to the population. By contrast, there are a number of rigorously evaluated interventions for other problems youth experience that frequently co-occur with CSEC, or are effective with populations of youth who-similar to many victims of CSEC- have complex histories of adversity and trauma. Identifying common approaches across these interventions may prove helpful in both informing CSEC-specific services so that they are drawing from a strong evaluation base, as well as assisting the development of referral protocols in areas where CSEC specific programming is not available. Specifically, these interventions could inform services for victims of CSEC by helping service providers make appropriate referrals to community services that have demonstrated effectiveness with problems often associated with CSEC. Social problems associated with CSEC encompass a variety of conditions or experiences, including those that may set children up for CSEC vulnerability, co-occur with CSEC victimization, occur as a result of CSEC victimization, or a mix thereof. Some of these problems may be more readily identified as problematic by victims and survivors of CSEC. For example, a youth who is homeless and has exchanged sexual acts for food or shelter may identify their primary problem as homelessness rather than sexual exploitation.

1.3. Co-Occurring social problems during childhood and adolescence

While the research on CSEC remains in its nascent stages, a differential amount of the extant research has focused on the risk factors and patterns associated with CSEC victimization. Importantly, risk factors and patterns associated with CSEC victimization do not equate to CSEC victimization, as not all at-risk children and youth will become victimized. Longitudinal data on trafficking generally- and on sexually exploited children and youth in particular- is difficult to collect (Merry, 2021). Consequently, the nature of these associations (i.e., whether they are conditions that increase CSEC vulnerability, or are caused by or exacerbated by CSEC victimization) is still developing.

Substance use has been found to frequently co-occur with CSEC victimization (50–70% of CSEC victims; Curtis et al., 2017; Reid & Piquero, 2014; Varma et al., 2015), though the nature of the relationship between substance use and CSEC is hotly debated (Clayton et al., 2013). **Running away from home and homelessness** is frequently cited as both a risk factor for and outcome of CSEC victimization, and does appear to strongly correlate with the age youth are initially exploited (75% of all known exploited youth; Biehal & Wade, 2000; 17% of all homeless youth; The Field Center, 2017). **Difficulty in school, including truancy and drop out**, is also noted in the literature as frequently co-occurring with CSEC victimization (Chohaney, 2016; Rafferty, 2008). **Delinquency**, including crimes committed prior to CSEC victimization, has been noted as both a risk factor for- and co-occurring condition to- sexual exploitation (85%; Child Welfare Information Gateway, 2017; Reid & Piquero, 2014; Wilson & Widom, 2010). Finally, several studies have found a link between **mental/physical health issues** and commercial sexual exploitation such that poor mental and physical health may increase the risk of initial victimization (Cole & Sprang, 2015), and trafficking experiences result in poor mental and physical health outcomes for most exploited youth (90–95%; Le, Ryan, Rosenstock, & Goldmann, 2018; Zimmerman et al., 2006).

Importantly, children and youth who have experienced the adversities listed above are also more likely to have experienced a variety of related risk factors. Accordingly, children and youth who have experienced CSEC victimization are also most likely to have experienced: **sexual abuse** (87% of known victims; Friedman, 2005; Gragg et al., 2007; McIntyre, 2005; Tyler, Hoyt, & Whitbeck, 2000) as well as **physical abuse and neglect** (85%; Basson et al., 2016; Countryman-Roswurm & Bolin, 2014; Hargitt, 2011; Smith et al., 2009). It is therefore not surprising that the vast majority of known victims of CSEC have had some **contact with the child welfare system** (90% of known victims; Gibbs, Henninger, Tueller, & Kluckman, 2018; Gragg et al., 2007; Smith et al., 2009; Willis & Levy, 2002).

The current review was conducted to identify evidence-based interventions for social problems that are likely to overlap with CSEC victimization. The primary research question guiding this review was: “*What are current, evidence-based interventions that victims of CSEC are likely to encounter?*” Within this broad question, we also sought to answer the ancillary question: (1) *What are current, evidence-based interventions that have useful content for victims of CSEC?* and (2) *What engagement strategies have extant, evidence-based interventions used that may be useful in ensuring victims of CSEC are engaged in their treatment/intervention programming?*

2. Methods

To identify relevant documents for review, the research team used three search strategies. First, authors met to identify keywords and literature databases appropriate to our aim and research questions. We identified three electronic databases: PsycINFO, Pubmed, CINAL. No restrictions on publication dates were imposed on the searches, and therefore, our search included all articles published through the Spring 2019. Once articles were identified, we also conducted a backward search of the references of those articles to find additional literature not identified via the keyword search.

Next, to identify the articles with the greatest relevance to the current study, we sought to differentially focus on articles that were either systematic reviews of interventions for social problems that often co-occur with CSEC, meta analyses, and/or that were randomized controlled trials that purport to have nationally representative findings. Finally, the primary focus of this review was on psychosocial interventions, or those interventions aimed at improving youth's well-being using cognitive, behavioral, or supportive methods, (Zimmermann et al., 2008). Accordingly, only articles that reported on interventions with psychosocial outcomes were included in our review. Ultimately, the keywords used for our initial literature search included interventions for the co-occurring social problems outlined in the previous section of this manuscript (e.g., “Delinquency + Intervention”), children, youth, [meta] analysis and/or systematic review and/or randomized controlled trial.

Articles were assessed for study relevance using the following inclusion criteria: (a) the article referred to a social problem that frequently co-occurs with CSEC; (b) the study focused on evaluating a psychosocial intervention that was either being developed, had been developed, or was adapted for high-risk youth; (c) individuals under the age of 18 were the focal sample; and (d) psychological or behavioral outcomes were the main focus of the research.

These criteria were applied to the title and abstract of the initial pool of articles for the current review. Each article was then discussed within the research team for its contribution to the current review. Each member of the research team has unique expertise in the area of high-risk youth. Specifically, the first author has a decade of experience as a clinician, and the second and third authors are nationally recognized experts in evidence-based intervention for high-risk youth. Accordingly, discussions focused on evidence-base, intervention content, youth engagement, and opportunities for intervention for victims and/or survivors of CSEC. Ultimately, 33 articles were included in the current

review. Articles were grouped into the following broad areas of intervention including drugs and alcohol abuse, delinquency, school drop out, runaway, and services for abused and neglected youth. A summary of exemplary findings regarding interventions for co-occurring social problems may be found in Table 1.

3. Interventions, evidence-base, and opportunities

3.1. Interventions for youth drug and alcohol abuse

Drug and alcohol abuse and addiction are significant problems for many victims of CSEC (Moore, Houck, Hirway, Barron, & Goldberg, 2017; Reid & Piquero, 2014). Drug use is common in anywhere from 50 to 70% of victims of CSEC (Curtis et al., 2017; Varma et al., 2015). Traffickers may use substances as a method of control over their victims, or survivors of trafficking might turn to substance use as a means of coping with their victimization (Clawson et al., 2009; Franchino-Olsen, 2021). Consequently, even after survivors have been freed from their traffickers, many continue to use substances because of the physical and mental aftermath of their ordeals. In addition, drug abuse can directly increase youth exposure to commercial sexual exploitation when addiction results in an urgent need for additional drugs or money to buy them. Interventions designed to eliminate or reduce drug use and addiction among youth and young adults would seem a promising priority to make available or adapt for survivors of CSEC. Fortunately, drug treatment services have gone through cycles of development and testing for decades, so a range of evidence-based options are available.

3.1.1. Inpatient/Community-based drug treatment interventions for youth

Inpatient and outpatient interventions for drug use among adolescents can be successfully delivered via individual or group treatment. Specific treatment modalities with an evidence-base for children and youth include cognitive-behavioral therapy (CBT), family therapy, and acceptance and commitment therapy (ACT). All of these treatment modalities have been found to outperform control groups in large meta-analyses (e.g., Becker & Curry, 2008; Lee, An, Levin, & Twohig, 2015). Similar to interventions related to delinquency more generally, integrating family and community supports seems to be extremely effective for youth suffering from substance use disorders (Barrett, Slesnick, Brody, Turner, & Peterson, 2001). Specifically, multidimensional family therapy (MDFT), which integrates both familial and community supports, has particularly promising results for sustained treatment effects (Liddle, Dakof, Turner, Henderson, & Greenbaum, 2008). The availability of substance use treatment facilities with programming that caters specifically to adolescents and/or young adults may vary by community; however, 26–29% of treatment facilities nationwide report specialized programming for these young age groups (SAMHSA, 2017).

Drug use treatments, including the modalities described above, focus on large-scale goals including: increasing motivation to change, disconnection from drug-using peers, being able to identify relapse indicators, and the development of alternative (positive) coping strategies (Gerstein & Lewin, 1990; Xiang, 2013). Similar to individuals entering substance use treatment, survivors of CSEC often enter services under duress, unsure or uninterested in making changes to their behaviors or lifestyle (Lutnick, 2016). In addition to the fact that substance use often co-occurs with CSEC (Reid & Paquero, 2014; Moore et al., 2017), the skills emphasized in substance use treatment are similar to those that may help youth extricate from sexual exploitation, and avoid re-victimization.

3.2. Delinquency interventions

Researchers have found considerable overlap between CSEC and non-sexual delinquency (Musto, 2016; Raymond & Hughes, 2001). This likely is due to shared risk-factors that underlie both CSEC and delinquency (e.g., child maltreatment and other adverse childhood

Table 1
Summary of exemplary findings regarding interventions for co-occurring social problems.

Social Problem	Evidence- based Intervention	Selected General Findings	Selective Specific Findings with Relevance for CSEC
Drug and Alcohol Use	Inpatient/Community-Based Drug Treatment Interventions <ul style="list-style-type: none"> Cognitive Behavioral Therapy (CBT) Family Therapy Acceptance and Commitment Therapy (ACT) Multi-dimensional Family therapy (MDFT) 	<ul style="list-style-type: none"> Integrating family and community supports increases effectiveness^{1,2,3} Promising sustained treatment effects⁴ 	<ul style="list-style-type: none"> Interventions increase motivation to change which in turn improves outcomes (e.g., drug desistance)^{5, 6} Disconnection from peers engaging in problem behaviors (e.g., drug use) aids in long-term abstinence^{5, 6} Identifying triggers for use reduces the likelihood for relapse^{5, 6} Development of positive coping skills improves short-term and long-term outcomes related to drug use^{5, 6}
Delinquency Interventions	Mentoring <ul style="list-style-type: none"> One-to-one mentorship Group Mentorship Positive Reinforcement and therapeutic relationship <ul style="list-style-type: none"> Consistent and intermittent positive reinforcement Supportive Therapeutic relationships (with trained professional) Family Based Treatment <ul style="list-style-type: none"> Multi-systemic Treatment (MST) Residential Treatment 	<ul style="list-style-type: none"> Modest positive effect on delinquency and academic functioning⁷ Reduction in recidivism^{8,9} Improvement in self-reported mental health^{8, 9} Group therapy can positively reinforce the wrong behaviors, and therefore have adverse effects¹⁰ Positive effects in reducing delinquency¹¹ Reductions in recidivism¹² 	<ul style="list-style-type: none"> Age/race match and similarity of experience between mentor and mentee is related to a reduction in delinquent behaviors⁷ 6–8 session mentorship seems to work best⁷ Positive interpersonal relationships with individual providers may serve as a template for future positive relationships^{8, 9} Biological or chosen family may be included in treatment and makes no difference in outcome¹³ The Ecological model inclusive of family, school, and community helps with sustained effects^{11,14} Longer stays (over 11 months) in residential care are related to reduced rates of recidivism¹² Development of pro-social behaviors via peer pressure or fostered interpersonal relationships (with peers, family, or professional staff) reduce rates of recidivism.^{11,12}
School Dropout Interventions	Family-focused Interventions <ul style="list-style-type: none"> Involvement of family (or caregiver) in academic success 	<ul style="list-style-type: none"> Improvements in academic skills, achievement, attendance, relationships, and attitude toward school- including classes, teachers, and peers¹⁵ Sustained effects on rates of school drop out such that rates are reduced¹⁵⁻¹⁷ 	<ul style="list-style-type: none"> Interventions tend to focus on one problem behavior (e.g., attendance) as opposed to multiple issues¹⁷ Interventions emphasize the relevance of education for students as well as their families thereby increasing the familial unit's motivation for school attendance¹⁵⁻¹⁷
Runaway Interventions	Youth Centers <ul style="list-style-type: none"> Shelter services Drop-In Centers 	<ul style="list-style-type: none"> Fewer number of days on the run¹⁸ Fewer school and employment problems at follow up^{18,19} Reduced behavioral and emotional problems^{18,19} Reduced substance use¹⁸ 	<ul style="list-style-type: none"> Focus on safety and harm reduction increases engagement of youth engaging in risky behaviors such as unsafe sex or drug use¹⁸ Promotion of sexual health and reductions (rather than elimination) of substance use^{18,19} Case management services are often available and help connect the youth to needed services related to physical and psychological well-being.^{19,20} Provision of emergency materials such as food, blankets, showers, and hygiene products allow youth safe access to materials necessary for survival²⁰
Services for Abused and Neglected Youth	Trauma Intervention <ul style="list-style-type: none"> Cognitive Behavioral Therapy (CBT) Trauma Focused Cognitive Behavioral Therapy (TF-CBT) Abuse Focused Cognitive Behavioral Therapy (AF-CBT) Kinship Care Living with biological family (e.g., Aunt, Grandparent) rather than non-biological foster family 	<ul style="list-style-type: none"> Significant reductions in PTSD symptoms for traumatized youth²¹⁻²³ Reductions in the incidence of physical abuse²² Fewer behavioral problems, fewer mental health disorders, better physical wellbeing²⁴ Fewer incidents of running away and increased permanency^{24, 25} 	<ul style="list-style-type: none"> Behavioral interventions have the strongest evidence based for reducing the negative psychological consequences associated with child abuse/neglect^{26, 27} Length of treatment is flexible (8–30 sessions)²⁸ Placement with extended family increases both caregiver and child commitment to permanency, which subsequently has positive effects on children's psychological and physical well-being^{24, 25}

¹Barrett et al., 2001; ²Becker & Curry, 2008; ³Lee et al., 2015; ⁴Liddle et al., 2008; ⁵Gerstein & Lewin, 1990; ⁶Xiang, 2013; ⁷Tolan et al., 2013; ⁸Lipsey, 2009; ⁹Lipsey et al., 2010; ¹⁰Dishion et al., 1999; ¹¹Farrington & Welsh, 2003; ¹²McMackin et al., 2004; ¹³Cunningham & Henggeler, 1999; ¹⁴Frensch & Cameron, 2002; ¹⁵Evans et al., 2017; ¹⁶Maynard et al., 2013; ¹⁷Olson, 2010; ¹⁸Slesnick et al., 2009; ¹⁹Rotheram-Borus et al., 2003; ²⁰Joniak, 2005; ²¹Cohen et al., 2016; ²²Kolko et al., 2011; ²³Weiner et al., 2009; ²⁴Winokur et al., 2014; ²⁵Courtney & Zinn, 2009; ²⁶Weisz et al., 2017; ²⁷Wethington et al., 2008; ²⁸Cohen et al., 2012.

experiences, Gibbs et al., 2018; Reid & Piquero, 2014), as well as other issues such as overlapping peer groups, norm violating behaviors, and risk taking (Lipsey et al., 2010; Lutnik, 2016; Marcus et al., 2014). Extant research suggests that over 85% of known victims of CSEC have had some contact with law enforcement (Child Welfare Information Gateway, 2017).

As with drug treatment programs, numerous delinquency

interventions for youth have been developed and tested over several decades, with insights that have potential to inform interventions for victims of CSEC. In general, the goals targeted by delinquency programs are consistent with the goals that advocates have for victims of CSEC: building prosocial bonds, breaking links with delinquent peer groups, resolving family conflicts, increasing education and employment opportunities, and increasing positive coping, communication, and help-

seeking behaviors (see [Lipsey, 2009](#) for a more detailed description of program components). Below we review a few of the more successful delinquency interventions that could have some relevance for victims of CSEC.

3.2.1. Mentoring

Mentoring interventions involve one-to-one and/or group mentorship of youth by youth and/or young adults who have successfully modified their behavior. Mentoring programs do not necessitate behavioral control (e.g., locked residential placement); however, many programs offering mentorship programs do take place in facilities where behavioral control is occurring. Results of one systematic review and meta-analysis indicated that mentoring for high-risk youth has a modest positive effect on delinquency and academic functioning, with trends suggesting similar benefits on aggression and drug use ([Tolan et al., 2013](#)). Specific components of mentoring that have been found to be particularly useful include: race/age match between mentor and mentee; similarity of experience (e.g., drug of choice, similar delinquent activities); and duration of mentorship (e.g., 6–8 sessions or more).

3.2.2. Positive reinforcement and therapeutic relationship

A number of systematic reviews and meta-analyses have highlighted the importance of positive reinforcement and therapeutic relationships in preventing delinquency and reducing recidivism (e.g., [Evans-Chase, Kim, & Zhou, 2013](#); [Lipsey, 2009](#)). Specifically, researchers have found that positive reinforcement and supportive therapeutic relationships are more effective at ensuring positive future behaviors, reducing recidivism, and improving self-reported mental health outcomes than deterrence methods based on the threat of punishment ([Lipsey, 2009](#); [Lipsey, Howell, Kelly, Chapman, & Carver, 2010](#)). Importantly, group treatment models for delinquency can positively reinforce the wrong behaviors, particularly if youth glorify (rather than process) their delinquent activities ([Dishion, McCord, & Poulin, 1999](#)). By contrast, individual treatment may act as a template for future healthy interpersonal relationships. Research on therapeutic rapport among survivors of CSEC is scant, though there is a bevy of research suggesting that positive interpersonal relationships are not only important but integral to CSEC survivorship and recovery ([O'Brien, 2018](#); [Reed, Kennedy, Decker, & Cimino, 2019](#)). Specifically, researchers suggest that positive interpersonal relationships are effective at both reducing negative psychological symptomology among survivors of CSEC ([Kenny et al., 2018](#); [O'Brien, 2018](#)), as well as reducing revictimization ([O'Brien, 2018](#)).

3.2.3. Family-based treatments

Family-based intervention programming has also been found to be extremely effective with delinquent youth. Multi-systemic treatment (MST) is a multiple component treatment program conducted in families, schools, and communities (depending on the particular needs of the youth). The treatment may include individual, family, peer, school and community interventions, including parent training and skill training ([Henggeler, Pickrel, & Brondino, 1999](#)). Results from a meta-analysis of 40 evaluations suggest that MST has positive effects in reducing delinquency ($ES = 0.32$), with those effects persisting in long-term evaluation studies ([Farrington & Welsh, 2003](#)). Importantly, many survivors of CSEC may not have close contact with their families of origin; dysfunctional family systems are significant risk factors for victimization ([Lutnik, 2016](#)). However, MST does not require primary caregiver involvement. Members of a survivor's identified family- biological or not- are welcome to take part in strengthening the youth's overall social ecology ([Cunningham & Henggeler, 1999](#)).

3.2.4. Residential treatment

Residential treatment facilities are generally locked facilities wherein a child or youth live and receive intensive mental health and behavioral interventions away from his or her family for some length of time ([Frensch & Cameron, 2002](#)). Although placement in residential

treatment facilities is common among delinquent youth, outcomes research on residential treatment has lagged behind that of child therapies ([Zimmerman, Shapiro, Welker, & Pierce, 2000](#)). That said, research suggests that residential treatment results in modest, though clinically significant, positive outcomes in both internalizing and externalizing behaviors (e.g., [Zimmerman et al., 2000](#)); but that these effects may be diluted over time (e.g., [Frensch & Cameron, 2002](#)). Similarly, [Frensch and Cameron \(2002\)](#) conducted a review of residential mental health placements for children and youth and found that while residential treatment works well for some children, it appears that their residential stability post discharge had the greatest effect on lasting outcomes.

Specific to delinquency, [McMackin, Tansi, and LaFratta \(2004\)](#) conducted a robust analysis of recidivism using data for juvenile offenders discharged from a residential treatment facility in Massachusetts between 1976 and 1995. The study, which used data to look at re-offending trends over 20 years, found that youth who had completed a residential stay of over 11 months were significantly less likely to reoffend than those who had stayed less than 11 months ($p = .026$). Such data suggests that longer residential facility stays, despite being disruptive to children's familial and social supports, may have the most substantial impact on reducing delinquency and reoffence.

Overall, delinquency interventions overwhelmingly focus on the development of pro-social behaviors. Methods for learning and practicing pro-social behaviors vary, but the most efficacious rely on positive peer pressure and interpersonal relationships, fostered either with peers or family. The power of interpersonal relationship in the recovery of victims of CSEC has been documented ([O'Brien, 2018](#)), and therefore may be a promising method of intervention for CSEC.

3.3. School dropout interventions

School dropout is common among victims of CSEC, and has been identified as a red flag for CSEC (National Center for Missing and Exploited Children, 2020). It is unclear whether the relationship between CSEC and school dropout is unidirectional such that involvement in trafficking is a precursor to school dropout, or bi-directional such that school dropout may be an indicator for greater risk of initial or ongoing exploitation. School dropout interventions have some similarity to delinquency interventions, but are more narrowly aimed at the specific goal of school retention and academic achievement. While there are not many comprehensive prevention programs shown to be effective in reducing school dropout, research has identified a number of effective strategies. The best strategies tend to focus on one problem behavior (e.g., school attendance; [Olson, 2010](#)), or one distinct population of youth (e.g., foster youth; [Evans, Brown, Rees, & Smith, 2017](#)). Keeping this in mind, studies have consistently found that family-focused interventions work best, and have the most sustained effects on school dropout ([Evans et al., 2017](#); [Maynard, McCrea, Pigott, & Kelly, 2013](#); [Olson, 2010](#)). [Evans et al. \(2017\)](#) conducted a systematic review of educational interventions for children and youth with child welfare involvement, and found fifteen studies reporting on 12 distinct interventions. Of those, researchers found that nine interventions demonstrated tentative impacts on predetermined outcomes including: academic skills; academic achievement and grade completion; special education status; homework completion; school attendance, suspension, and dropout; number of school placements; teacher-student relationships; school behavior; and academic attitude ([Evans et al., 2017](#)). Effects remain consistent among youth who have experienced familial dysfunction (e.g., child welfare-involved families). Interventions for youth who have already experienced long periods of school absence focus on emphasizing the relevance of education and learning for students, as well as their families ([Christenson & Thurlow, 2004](#)).

Among commercially sexually exploited youth, the time order occurrence of school drop-out is unclear. For example, it may be that a trafficker prohibits a victim from attending school, or it may be that a

youth who does not attend school is more susceptible to exploitation. The identification of truancy as a “red flag” (e.g., National Center for Missing and Exploited Children, 2020) indicates that interventions for school drop out may be a “first stop” for youth in their journey of high-risk behaviors. Thus, these interventions may have a unique opportunity to foster CSEC awareness among youth, bolster family support of academic completion, and ultimately introduce career opportunities that may otherwise seem unattainable or unknown to victims of CSEC.

3.4. Runaway interventions

Victims of CSEC often have a history of repeated runaway behavior. Recent data suggests 86% of known victims of CSEC have runaway from caregivers (National Center for Missing and Exploited Children, 2011), and consistent runaway behavior has been associated with a higher likelihood of CSEC victimization (Gibbs et al., 2018; O'Brien, White, & Rizo, 2017). Interventions for runaway youth are particularly relevant for survivors of CSEC as running away may lead to CSEC victimization and they both may entail problems of drug and alcohol abuse, delinquency, child welfare system involvement and problematic family circumstances, including abuse and neglect. Programs for runaway youth focus on youth safety and harm reduction, including reducing substance use, and promoting sexual health. Youth drop-in centers and runaway shelters often provide case management, as well as the provision of emergency materials such as food, blankets, showers, and hygiene products (Joniak, 2005). A recent systematic review suggests that adolescents who received shelter services reported reduced days on the run (as measured by the percentage of total school days), fewer school and employment problems at follow up (as measured by the percentage of total school days), reduced behavioral and emotional problems (including delinquency, depression, and anxiety symptoms), and reduced substance use (as measured by self-reported marijuana, alcohol, and “other drug” use) (Slesnick, Dashora, Letcher, Erdem, & Serovich, 2009).

Furthermore, sexual health interventions delivered at youth drop in centers and runaway shelters have been shown to decrease unprotected sexual behavior. In a study by Rotheram-Borus et al. (2003), female youth who received the HIV prevention program “Street Smart” had fewer unprotected sexual acts when tested two years later compared to those who had received the control intervention. Unprotected sexual acts were measured using self-reported condom use and high-risk sexual behavior scale (Rotheram-Borus et al., 2003). Unfortunately, it is unclear if outcomes such as these persist over time (Slesnick et al., 2009), as many studies are fairly time limited (e.g., 24-months; Rotheram-Borus et al., 2003). Intervention recommendations for CSEC survivors include those aimed at sexual health (McClain & Garrity, 2011). Currently, it's unclear how sexual health interventions are being delivered to survivors of CSEC, as well as their effectiveness. It may be that the creation of more runaway services is a priority or anchor for CSEC programming as a fundamental addition to CSEC intervention programming.

3.5. Services for abused and neglected youth

A history of abuse and neglect is one of the most consistent risk factors underlying all of the problems noted above, including CSEC (Franchino-Olsen, 2019). Indeed, researchers have suggested approximately 90% of victims of CSEC have had some involvement in the child welfare system (Gragg et al., 2007). Any intervention for victims of CSEC requires addressing the likelihood of an unstable family life and complications from traumatic stress. It is therefore helpful for advocates and professionals working with survivors of CSEC to consider some of the progress made in these areas. There are increasing numbers of interventions aimed at supporting both the child and their family with the goal of promoting emotional and physical well-being. Below, we highlight a few of these interventions.

3.5.1. Trauma interventions

Though a myriad of interventions may be used to treat traumatic stress (e.g., pharmacologic therapy, psychodynamic therapy, and psychological debriefing; Wethington et al., 2008), behavioral interventions have the strongest evidence base for ameliorating the negative psychological consequences associated with maltreatment (Weisz et al., 2017; Wethington et al., 2008). Specifically, both group and individual cognitive behavioral therapy (CBT)- an evidence-based treatment that has been tested in a variety of settings and populations- has been shown to decrease negative psychological symptoms (Cary & McMillen, 2012) including anxiety (James, Reardon, Soler, James, & Creswell, 2015), depression (Weisz et al., 2017), and posttraumatic stress (Kowalik, Weller, Venter, & Drachman, 2011). Behavioral effects, including externalizing behaviors and poor conduct are also reduced by CBT in meta-analyses ($ES = 0.46$, Weisz et al., 2017).

Variations of CBT, including trauma-focused CBT (TF-CBT) and Alternatives for Families CBT (AF-CBT) have similarly positive outcomes in reducing symptoms of PTSD. TF-CBT was developed specifically for children and youth under the age of 18 who have experienced early trauma (Cohen, Mannarino, Kliethermes, & Murray, 2012). Initially, TF-CBT was meant to be a trauma-focused and developmentally appropriate modification of CBT for youth who had experienced sexual abuse. However, over time, the focal population for TF-CBT has expanded to include young survivors of all types of severe trauma and abuse. Clinicians recognize TF-CBT as a structured therapeutic modality that can be delivered over a relatively short (8-sessions) or longer (28–30-session) period of time (Cohen et al., 2012). Outcomes for youth who have completed TF-CBT are overwhelmingly positive (de Arellano et al., 2014), with significant reductions in PTSD symptoms for youth in foster care (Weiner, Schneider, & Lyons, 2009) as well as adjudicated youth living in residential treatment (Cohen et al., 2016). AF-CBT was designed to intervene with families experiencing conflict and abuse, and treatment includes both the child and his/her caregiver. A popular modality for child-welfare involved families (Child Welfare Information Gateway, 2013), AF-CBT has been found to improve children's behaviors (e.g., Kolko, Campo, Kilbourne, & Kelleher, 2012) as well as reduce incidences of physical abuse (e.g., Kolko, Iselin, Gully, 2011) for child-welfare referred families.

3.5.2. Kinship care

For youth who are unable to return to their families of origin, kinship care has been extended as a promising alternative to traditional foster care or residential treatment. In kinship care, children who are unable to live with their families of origin are placed with extended family members. Children in kinship care experience fewer behavioral problems, fewer mental health disorders, better well-being, and less placement disruption than foster children in non-kinship foster care (Winokur, Holtan, & Batchelder, 2014). These results hold despite the fact that children in non-kinship care were more likely to utilize mental health services. Importantly, children in kinship care and traditional foster care experience the same rates of familial reunification (Winokur et al., 2014). For children at high risk of running away (e.g., survivors of CSEC; Gibbs et al., 2018), kinship care significantly reduces the risk of both initial and subsequent runaway behaviors. In a study done by Courtney and Zinn (2009), risk of both initial and subsequent runaway behaviors among child welfare involved youth were assessed using Illinois state's child welfare management information system and Medicaid paid claims data. Over a ten year period (1993–2003), Courtney and Zinn (2009) focused on the 14,282 youth who had run away from care at least once. Results indicate that children who were placed in kinship care were at significantly less risk of both initial and subsequent incidences of running away. This risk was reduced further when children were placed in kinship care along with a sibling. Keeping these results in mind, there may be ways in which extended family members can be mobilized in a kinship care model to reduce the risk of entry or return to exploitation.

4. Discussion

Youth impacted by CSEC victimization often are impacted by other challenges such as child maltreatment, foster care involvement, runaway behaviors, school failure, substance abuse, and delinquency. Research on treatment for victims and survivors of CSEC is rapidly growing but remains sparse in comparison to the research base on these other areas of youth victimization and adversity. For example, the literature on the prevention and treatment of delinquency is one of the most extensive in all of social science, encompassing hundreds of empirically evaluated programs, multiple meta-analyses and well-established findings about the best strategies for working with high-risk youth. The literatures on drug treatment and school drop out are also copious. Unfortunately, due to the changing social and legal definitions of commercial sexual exploitation and the difficulty engaging the target population, such an expansive and rich literature around CSEC victimization and treatment is neither developed, nor likely will be in the next several years. Accordingly, it is important for researchers, advocates, and social service providers to become familiar with some of the key research outcomes on what has worked well for these overlapping social challenges, and therefore, what may work well for youth experiencing (or at risk for) CSEC victimization.

Our review discovered that some of the key conclusions of these fields include the importance of holistic models of treatment that address not only the youth individually but their overall environment including their family, friends, community, and school. The most promising practices from related fields include mentorship, multi-systemic treatment (MST), family programming/therapy, and kinship foster care. Each of these interventions contextualizes the youth's experience within their environment, thereby creating a safety net for the child where one previously had not been developed. Individual skill-based interventions (e.g., CBT) have also been found to be effective; however, outcomes improve when such interventions are paired with other relationship-building interventions such as mentorship or group therapy. Interpersonal connections prove a powerful motivator for youth, including those who have experienced commercial sexual exploitation (O'Brien, 2018). Those working with victims of CSEC can draw from these common features to build CSEC-specific services that have an initial foundation for evidence support, while the field waits for more specific outcome evaluation. Advocates and service providers may also use this research base to review whether their communities already have evidence-based services that might support victims' needs. Many developing CSEC advocacy services center on connecting youth with needed community services.

Of course, similar known etiologies alone are not enough to equate these differing populations of youth. There remain a number of important questions that need to be considered further in order to provide an optimal response to victims of CSEC, and better understand the degree to which the programs developed in these related fields are relevant and successful for youth victims of CSEC. Below we review some of these questions.

Do CSEC population have problems engaging in intervention programming due to the influence of pimps, peers, or monetary gain? One particular concern that has been raised by service providers and CSEC providers is the difficulty engaging victims in interventions due to the influence of pimps, peers, or monetary gain (Dank, Khan, Downey, Kotonias, Mayer, Owens, & Yu, 2014). Pimps and peers may use the glamorization of commercial sex in the media, threats towards friends and family, and isolation from positive interpersonal influences to keep victims emotionally isolated and fearful of exit. Similarly, much research into CSEC has revealed that a need for money is often a driving factor in initial CSEC victimization, and the desire for money can keep youth from leaving "the life." These are potentially serious challenges to connecting victims of CSEC to services, particularly when some services require that youth stop all CSEC-related activities (e.g., trading sex, seeing their exploiter). However, not all services necessarily require youth to stop all

CSEC-related activity, and many similar barriers to engagement are also present for other high-risk youth populations. For example, many youth involved in gangs, remunerative delinquency, or the drug culture have likely experienced threats toward friends and family, isolation from positive influences, and emotional isolation. Furthermore, financial instability and a need for money is often cited in the literature as a driver for delinquent behavior(s). The current review suggests that despite these challenges, many of these youth are still able to engage in intervention programming with documented benefit to their long- and short-term outcomes including mental health, physical health, and risk of recidivism.

Are the families of CSEC-involved youth less available and uniquely difficult to engage? Familial engagement is another possible challenge for victims and survivors of CSEC. Research suggests that commercially sexually exploited youth often come from dysfunctional family environments with exposure to child abuse and neglect, drug use, and financial strain. Such families may have limited capacity for engagement in interventions for their children. Further, familial awareness of CSEC victimization varies widely across families and can range from no awareness, awareness but a perceived inability to help the youth, and direct involvement in their child's exploitation. Such varied experiences may make universal engagement strategies difficult and ineffective.

Many of the most successful youth interventions reviewed here include a family component. However, like youth who have experienced CSEC victimization, many youth experiencing drug misuse and delinquency come from dysfunctional family environments. Similarly, youth in the child welfare systems often have families of origin that are dysfunctional to the point of being unsafe. The challenge of engaging families and the need to work in the absence of family cooperation is a key reality of all services being provided to high-risk youth. Importantly, the interventions reviewed above reveal creative and alternative ways of creating functional and positive interpersonal networks of support including kinship care, residential treatment, and mentorship. While these do not necessarily replace familial support, they have demonstrated efficacy among populations where familial dysfunction is common. Programs for victims and survivors of CSEC might be well-served by starting with models from related fields that have proven successful and been empirically evaluated and refined. An example of such a model is peer mentorship. There are several CSEC specialized programs already incorporating mentorship in their treatment models, such as the Girls Empowerment and Mentorship program (GEMs; Lloyd, 2011), and MyLifeMyChoice (Choice, 2019). The valuable insights provided by successful extant programming provide a template for future evidence-based interventions, as well as important implications on how to connect victims to much-needed services.

Do existing evidence-based community interventions have the capacity to effectively respond to some of the unique needs and backgrounds of victims of CSEC? A final question is whether the interventions reviewed here are appropriate for victims of CSEC. Certainly, the differentiation between victim and criminal offender is key- particularly in a crime such as CSEC in which engagement in criminal activity is inherent to victimization. A core tenet of CSEC mobilization and advocacy has been to emphasize that survivors of CSEC are victims and not delinquents (ECPAT, 2017). The adaptation or expansion of intervention programs, particularly those designed to combat delinquency, may pose some risk of blurring this issue, such that the message to survivors of CSEC might be one that de-emphasizes their victimization experiences thereby increasing the potential of negative stigma. It is also possible that the stigma connected with CSEC could potentially interfere in treatment approaches delivered by providers unused to working with this population. However, as with the questions discussed above, problems such as drug misuse and criminal involvement also have high levels of stigma, yet treatment strategies are successful. And even for crime-involved youth, current intervention approaches increasingly reframe offending with a trauma-informed perspective, such that services minimize the likelihood of punitive

orientation (ECPAT, 2017).

4.1. Limitations

It is important to consider the results of the current review in light of their potential limitations. Namely, this was not a PRISMA systematic review. Thus, it is possible that some important studies with alternative and important findings were not included. We guarded against this limitation through extensive reference mining and expert review, however, these measures may not have found each and every potentially relevant article. Furthermore, the goal of this article was not to offer an exhaustive review, but to offer practical suggestions and next steps for CSEC programming given the existing research in programming for social and behavioral problems that are often found to co-occur with CSEC. In addition, this review did not integrate gender-based interventions or examine the potential contributions of a gender-based programming. This was done intentionally, as the literature is split regarding the true incidence of CSEC among male versus female-identified youth. Nonetheless, CSEC victimization had been found to disproportionately affect sexual and gender minority youth (Williamson & Flood, 2021). Accordingly, a full review of gender-based programming inclusive of the many systematic and structural implications of sexism and heterosexism in such programming may be useful in the development of future programming and intervention development.

5. Conclusions

The current paper sought to review the research across a number of areas of services to high-risk youth with well-established research and evaluation bases, drawing lessons on what can be learned as CSEC services develop. In doing this, there were a number of important implications for both practice and research. Perhaps the most pressing implication was the need for new and ongoing evaluations of developing programming for CSEC-involved youth. As noted previously, the prevalence and incidence of CSEC are unknown (Franchino-Olsen et al., 2020; Lutnik, 2016; Stransky & Finkelhor, 2008), and therefore the percentage of sexually exploited youth who have experienced each of the co-occurring risks are based on sample populations that cannot yet be extrapolated to larger populations of youth. That said, what is clear is that CSEC victimization does not occur in a vacuum, and that it may be that victims of CSEC experience their exchange of sex/sexual acts for something of value as a symptom of a larger, more pressing issue (e.g., homelessness). If this is true, it may be that interventions for issues identified by youth as "most pressing" are a better fit, and will promote better engagement and, ultimately, better outcomes. The likelihood that the interventions outlined herein are already serving youth who have been sexually exploited is high. However, none of these interventions have been evaluated for victims of CSEC. Until recently, there were no psychometrically validated screening tools for CSEC victimization; however, this is no longer the case (e.g., Greenbaum, Dodd, & McCracken, 2018). Accordingly, an excellent first step would be to determine if data are available from previous evaluations that would allow a comparison of program outcomes between those youth who do, and those who do not have a history of CSEC. Such an evaluation would highlight successes, failures, and gaps in current programming, thereby providing clues on what CSEC-specific programming must offer.

In addition, fresh evaluations being conducted in these fields should be encouraged to collect data on CSEC involvement among the participants in these programs to test the differential effects going forward. Longitudinal studies such as these are key in discovering iatrogenic effects, as well as programmatic impact on revictimization. Finally, studies should be conducted comparing populations being treated in CSEC-specific programs with populations in treatment programs in some of the related areas like drug abuse, delinquency and foster care disruptions (e.g., running away, increased numbers of placements). Ultimately, randomized, controlled clinical studies are needed. The

development of a clinical assessment tool for the CSEC population that might predict their likely success in a non-CSEC specific intervention would be a valuable addition. Thus, some CSEC youth might be better suited than others to programs focused on drug treatment, trauma treatment, and various delinquency approaches.

Finally, given the complex and multifaceted needs of most survivors of CSEC it is likely that treatment for CSEC requires a multidisciplinary approach. The current review strengthens this assertion, given the findings regarding the utility of holistic models of treatment. Establishing collaborative relationships between the many service providers reviewed here may be achieved through the creation of a multidisciplinary team (MDT), wherein service providers may discuss cases they encounter and establish systems of referral. Multidisciplinary teams have been widely adopted in the United States as a best practice to respond to social problems such as child sexual abuse (National Children's Advocacy Center, 2021). Multidisciplinary teams can include professionals from varied fields including law enforcement, child welfare, medicine, education, mental health, victim services, the district attorney's office, and child advocacy (National Children's Advocacy Center, 2021). Accordingly, it may be that commercial sexual exploitation could be added into the catchment of an existing MDT addressing child sexual abuse broadly or - if case levels are high - the creation of a new MDT devoted to CSEC.

Credit authorship contribution statement

Jennifer O'Brien: Conceptualization, Writing – original draft. **David Finkelhor:** Conceptualization, Draft Revisions and edits. **Lisa Jones:** Conceptualization, Draft Revisions and edits.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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Top Ten Resources for Understanding Child Trafficking In Youth Residential Treatment Facilities

1. Casey Family Programs, [*How Can Child Protection Agencies Identify and Support Youth Involved in or at Risk of Commercial Child Sexual Exploitation?*](#) (2022).

This article provides an updated strategy for child protection agencies on identifying and supporting youth involved in or at risk of commercial sexual exploitation (CSEC). It highlights the key role of multi-agency collaboration—between child welfare, law enforcement, healthcare, and education systems—to combat CSEC. The document also discusses risk factors such as child welfare involvement, running away, and prior sexual abuse, emphasizing trauma-informed, victim-centered screening and intervention. It stresses the need for prevention programs, proper placement strategies, and evidence-based services to support CSEC victims, particularly within foster care systems and institutional settings.

2. Judicial Council of California, [*Human Trafficking in California: Toolkit for Judicial Officers*](#), (2017).

The “Human Trafficking Toolkit for Judicial Officers” by the Judicial Council of California provides a novel, comprehensive resource to help judicial officers understand human trafficking, particularly focusing on sex trafficking. It addresses the complexities of human trafficking cases, emphasizing the need for judicial officers to recognize the nuances of trafficking victims who often appear in court as both victims and offenders. The toolkit provides legal frameworks, ethical considerations, and practical resources such as bench cards and screening tools, offering a tailored approach for judges and attorneys handling trafficking cases. It highlights victim-centered approaches and collaborative practices to ensure proper victim support while prosecuting traffickers.

3. Theresa Bohannon et al., [*Voices from the Bench: Judicial Perspectives on Handling Child Sex Trafficking Cases*](#), Nat’l Council of Juv. & Fam. Ct. Judges (2019).

National Conference of Juvenile and Family Court Judges (NCJFCJ) provides extensive research and resources to support the judiciary in addressing child trafficking in juvenile courts. This resource offers concrete guidance to the judiciary, emphasizing trauma-informed and victim-centered approaches to Domestic Child Sex Trafficking (DCST) cases. Through interviews with experienced judges, it presents strategies for building rapport with victims, identifying trafficking indicators, and establishing multidisciplinary teams. It stresses the importance of judicial leadership in fostering community collaboration, advocating for specialized training, and ensuring access to trauma-informed services. The resource provides practical tools like screening instruments, program evaluation techniques, and court-based reforms, helping judges navigate the complexities of DCST cases.

4. Veena Subramanian, [*Beyond Detention-as-Protection for Child Sex Trafficking Victims*](#), 35 Berkeley J. Gender L. & Just. 137 (2020).

This law review article critiques the reliance on detention and residential facilities as protective measures for youth at risk of or involved in sex trafficking. It argues that detention often exacerbates trauma, erodes trust in the justice system, and fails to address the root causes of

trafficking. Judges and prosecutors sometimes resort to detention due to a lack of alternative services, but this approach can re-traumatize victims and increase their vulnerability. Instead, the article advocates for community-based, trauma-informed interventions that focus on prevention and long-term support, rather than punitive measures

5. Heather J. Clawson & Lisa Goldblatt Grace, [*Finding a Path to Recovery: Residential Facilities for Minor Victims of Domestic Sex Trafficking*](#), U.S. Dep't of Health & Hum. Servs. (2007).

The document “Finding a Path to Recovery: Residential Facilities for Minor Victims of Domestic Sex Trafficking” highlights significant risks and challenges associated with placing trafficking victims in residential facilities. It underscores that many shelters are not equipped to address the complex trauma of trafficking victims, often resulting in inadequate care. These facilities can unintentionally expose victims to further risks, including recruitment by traffickers. Moreover, victims often face stigmatization and emotional isolation within such facilities. The document advocates for smaller, trauma-informed, and population-specific residential programs that offer long-term support and safety.

6. Farrell, Amy & Lockwood, Sarah & Goggin, Kelly & Hogan, Shannon. [*Specialized Residential Placements for Child Trafficking Victims*](#), (2019).

The report on “Specialized Residential Placements for Child Trafficking Victims” examines the need for targeted residential care for children affected by trafficking. It highlights that traditional child welfare placements, such as foster care or general group homes, often fail to meet the complex needs of these victims. The report outlines the benefits of specialized programs, which focus on trauma-informed care, security, and long-term support to address the specific psychological and physical traumas faced by trafficked youth. It emphasizes the importance of individualized treatment plans, small group settings, and multidisciplinary support teams to reduce re-traumatization and improve outcomes

7. Polaris Project, [*LGBTQ Youth and Sex Trafficking*](#) (2019).

The report emphasizes the heightened vulnerability of LGBTQ youth to sex trafficking due to factors such as family rejection, homelessness, and discrimination. LGBTQ youth are disproportionately represented in the homeless population, with up to 40% identifying as LGBTQ, and they are more likely to experience sexual violence and engage in survival sex to meet basic needs. The report stresses the importance of protecting LGBTQ rights by ensuring access to LGBTQ-friendly services and culturally competent anti-trafficking efforts. Legal protections like safe harbor laws and community support are essential to helping LGBTQ youth avoid and escape trafficking

LGBTQ youth face significantly increased risks of trafficking, largely due to family rejection, homelessness, and lack of social support. LGBTQ youth, especially transgender and gender nonconforming individuals, often struggle to access shelters due to binary gender restrictions, making them more vulnerable to exploitation. Traffickers exploit these vulnerabilities by offering basic needs, such as shelter or hormone treatments, creating a false sense of security. These youth also face higher rates of sexual violence and discrimination, which can prevent them from seeking help, further entrenching them in trafficking situations

8. Office of Juvenile Justice and Delinquency Prevention, [*Child Labor Trafficking: Literature Review*](#) (2016).

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) provides a number of very helpful resources as part of the Model Programs Guides. The report explains that labor trafficking frequently occurs in informal sectors like domestic work, agriculture, and peddling, where children are isolated and more easily controlled. Vulnerable groups, such as homeless youth, runaways, LGBTQ youth, and those in foster care, are at higher risk. The covert nature of trafficking, lack of adequate data, and insufficient law enforcement training hinder the identification of victims. The report stresses the need for better training, public awareness, and trauma-informed care for victims


9. Nat'l Conf. of State Legislatures, [*Youth and Trafficking: Information and Strategies for Preventing Child Trafficking on the Federal and State Level*](#) (2023).

The National Conference of State Legislatures (NCSL) produced this report to provide a comprehensive overview of youth trafficking and legislative strategies to combat it. It highlights the disproportionate impact of sex trafficking on young women and girls, particularly those in marginalized groups like Black and LGBTQ youth. The report emphasizes the need for coordinated federal and state policies, including safe harbor laws, that treat trafficked youth as victims rather than criminals. It also addresses gaps in service provision, such as housing and mental health support, and underscores the importance of data collection and interagency collaboration to improve outcomes for trafficked youth.

10. California Child Welfare Council, [*Ending the Commercial Sexual Exploitation of Children: A Call for Multi-System Collaboration in California*](#) (2013).

While this report is over ten years old, it still provides an exceptional overview of the need for multi-system collaboration to combat child trafficking and the commercial sexual exploitation of children. It highlights that judges, law enforcement, and attorneys play critical roles in identifying and providing services for sexually exploited children. The report calls for cross-system collaboration, including training for all legal professionals in trauma-informed practices and culturally competent care. Specialized courts and judicial oversight are recommended to ensure that trafficked children are treated as victims, not criminals, and receive the necessary support

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CDL/CMV
Disqualification
BENCHCARD



DISQUALIFICATION OF DRIVERS

*These are federal regulations.
Check your state laws for your jurisdiction modifications.*

Table 1 to § 383.51 DISQUALIFICATIONS FOR MAJOR OFFENSES

Table 1 to §383.51 contains a list of the offenses and periods for which a person who is required to have a CLP or CDL is disqualified, depending upon the type of vehicle the driver is operating at the time of the violation, as follows:

If a driver operates any motor vehicle and is convicted of:

For a first conviction or refusal to be tested *while operating a CMV*, a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...

For a first conviction or refusal to be tested *while operating a non-CMV*, a CLP or CDL holder must be disqualified from operating a CMV for...

For a first conviction or refusal to be tested *while operating a CMV transporting hazardous materials* required to be placarded under the Hazardous Materials Regulations (49 CFR part 172, subpart F), a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...

For a second conviction or refusal to be tested in a *separate incident of any combination of offenses in this Table while operating a CMV*, a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...

For a second conviction or refusal to be tested in a *separate incident of any combination of offenses in this Table* while operating a non-CMV, a CLP or CDL holder must be disqualified from operating a CMV for...

(1) Being under the influence of alcohol as prescribed by State law

1 year

1 year

3 years

Life

Life

(2) Being under the influence of a controlled substance

1 year

1 year

3 years

Life

Life

(3) Having an alcohol concentration of 0.04 or greater while operating a CMV

1 year

Not applicable

3 years

Life

Not applicable

(4) Refusing to take an alcohol test as required by a State or jurisdiction under its implied consent laws or regulations as defined in §383.72 of this part

1 year

1 year

3 years

Life

Life

(5) Leaving the scene of an accident

1 year

1 year

3 years

Life

Life

(6) Using the vehicle to commit a felony, other than a felony described in paragraph (b)(9) of this table

1 year

1 year

3 years

Life

Life

(7) Driving a CMV when, as a result of prior violations committed operating a CMV, the driver's CDL is revoked, suspended, or canceled, or the driver is disqualified from operating a CMV

1 year

Not applicable

3 years

Life

Not applicable

(8) Causing a fatality through the negligent operation of a CMV, including but not limited to the crimes of motor vehicle manslaughter, homicide by motor vehicle and negligent homicide

1 year

Not applicable

3 years

Life

Not applicable

(9) Using the vehicle in the commission of a felony involving manufacturing, distributing, or dispensing a controlled substance

Life-not eligible for 10-year reinstatement

Life-not eligible for 10-year reinstatement

Life-not eligible for 10-year reinstatement

Life-not eligible for 10-year reinstatement

Life-not eligible for 10-year reinstatement

(10) Using a CMV in the commission of a felony involving an act or practice of severe forms of trafficking in persons, as defined and described in 22 U.S.C. 7102(11)

Life-not eligible for 10-year reinstatement

Not applicable

Life-not eligible for 10-year reinstatement

Not applicable

Life-not eligible for 10-year reinstatement

Table 2 to § 383.51 DISQUALIFICATIONS FOR SERIOUS TRAFFIC VIOLATIONS

Table 2 to §383.51 contains a list of the offenses and the periods for which a person who is required to have a CLP or CDL is disqualified, depending upon the type of vehicle the driver is operating at the time of the violation, as follows:

If a driver operates any motor vehicle and is convicted of:

For a second conviction of any combination of offenses in this Table in a *separate incident within a 3-year period while operating a CMV*, a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...

For a second conviction of any combination of offenses in this Table *in a separate incident within a 3-year period while operating a non-CMV, a CLP or CDL holder* must be disqualified from operating a CMV, if the conviction results in the revocation, cancellation, or suspension of the CLP or CDL holder's license or non-CMV driving privileges, for...

For a third or subsequent conviction of any combination of offenses in this Table *in a separate incident within a 3-year period while operating a CMV*, a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...

For a third or subsequent conviction of any combination of offenses in this Table *in a separate incident within a 3-year period while operating a non-CMV*, a CLP or CDL holder must be disqualified from operating a CMV, if the conviction results in the revocation, cancellation, or suspension of the CLP or CDL holder's license or non-CMV driving privileges, for...

(1) Speeding excessively, involving any speed of 24.1 kmph (15 mph) or more above the posted speed limit

60 days

60 days

120 days

120 days

(2) Driving recklessly, as defined by State or local law or regulation, including but, not limited to, offenses of driving a motor vehicle in willful or wanton disregard for the safety of persons or property

60 days

60 days

120 days

120 days

(3) Making improper or erratic traffic lane changes

60 days

60 days

120 days

120 days

(4) Following the vehicle ahead too closely

60 days

60 days

120 days

120 days

(5) Violating State or local law relating to motor vehicle traffic control (other than a parking violation) arising in connection with a fatal accident

60 days

60 days

120 days

120 days

(6) Driving a CMV without obtaining a CDL¹

60 days

Not applicable

120 days

Not applicable

(7) Driving a CMV without a CDL in the driver's possession

60 days

Not applicable

120 days

Not applicable

(8) Driving a CMV without the proper class of CDL and/or endorsements for the specific vehicle group being operated or for the passengers or type of cargo being transported

60 days

Not applicable

120 days

Not applicable

(9) Violating a State or local law or ordinance on motor vehicle traffic control prohibiting texting while driving.²

60 days

Not applicable

120 days

Not applicable

(10) Violating a State or local law or ordinance on motor vehicle traffic control restricting or prohibiting the use of a hand-held mobile telephone while driving a CMV.²

60 days

Not applicable

120 days

Not applicable

¹ Any individual who provides proof to the enforcement authority that issued the citation, by the date the individual must appear in court or pay any fine for such a violation, that the individual held a valid CDL on the date the citation was issued, shall not be guilty of this offense.

² Driving, for the purpose of this disqualification, means operating a commercial motor vehicle on a highway, including while temporarily stationary because of traffic, a traffic control device, or other momentary delays. Driving does not include operating a commercial motor vehicle when the driver has moved the vehicle to the side of, or off, a highway and has halted in a location where the vehicle can safely remain stationary.

Table 3 to § 383.51 DISQUALIFICATION FOR RAILROAD-HIGHWAY GRADE CROSSING OFFENSES

If the driver is convicted of operating a CMV in violation of a Federal, State or local law because:	For a first conviction a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...	For a second conviction of any combination of offenses in this Table in a separate incident within a 3-year period, a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...	For a third or subsequent conviction of any combination of offenses in this Table in a separate incident within a 3-year period, a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...
(1) The driver is not required to always stop, but fails to slow down and check that tracks are clear of an approaching train	No less than 60 days	No less than 120 days	No less than 1 year
(2) The driver is not required to always stop, but fails to stop before reaching the crossing, if the tracks are not clear	No less than 60 days	No less than 120 days	No less than 1 year
(3) The driver is always required to stop, but fails to stop before driving onto the crossing	No less than 60 days	No less than 120 days	No less than 1 year
(4) The driver fails to have sufficient space to drive completely through the crossing without stopping	No less than 60 days	No less than 120 days	No less than 1 year
(5) The driver fails to obey a traffic control device or the directions of an enforcement official at the crossing	No less than 60 days	No less than 120 days	No less than 1 year
(6) The driver fails to negotiate a crossing because of insufficient undercarriage clearance	No less than 60 days	No less than 120 days	No less than 1 year

Table 4 to § 383.51 DISQUALIFICATION FOR VIOLATING OUT-OF-SERVICE ORDERS

Disqualification for violating out-of-service orders. Table 4 to §383.51 contains a list of the offenses and periods for which a person who is required to have a CLP or CDL is disqualified when the driver is operating a CMV at the time of the violation, as follows:

If the driver operates a CMV and is convicted of...	For a first conviction while operating a CMV, a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...	For a second conviction in a separate incident within a 10-year period while operating a CMV, a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...	For a third or subsequent conviction in a separate incident within a 10-year period while operating a CMV, a person required to have a CLP or CDL and a CLP or CDL holder must be disqualified from operating a CMV for...
(1) (1) Violating a driver or vehicle out-of-service order while transporting nonhazardous materials	No less than 180 days or more than 1 year	No less than 2 years or more than 5 years	No less than 3 years or more than 5 years
(2) (2) Violating a driver or vehicle out-of-service order while transporting hazardous materials required to be placarded under part 172, subpart F of this title, or while operating a vehicle designed to transport 16 or more passengers, including the driver	No less than 180 days or more than 2 years	No less than 3 years or more than 5 years	No less than 3 years or more than 5 years

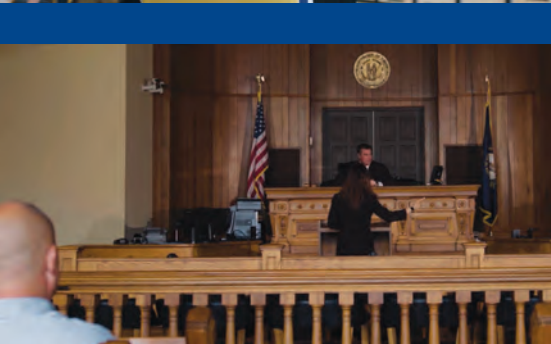
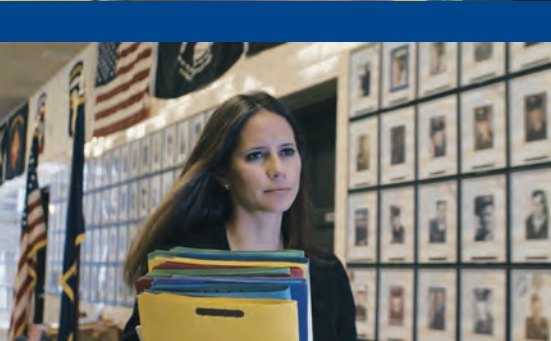
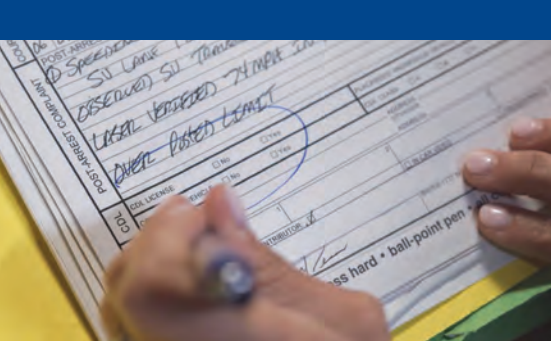


49 CFR §383.51

1. A person required to have a CLP or CDL who is disqualified must not drive a CMV.
2. An employer must not knowingly allow, require, permit, or authorize a driver who is disqualified to drive a CMV.
3. A holder of a CLP or CDL is subject to disqualification sanctions designated in paragraphs (b) and (c) of this section, if the holder drives a CMV or non-CMV and is convicted of the violations listed in those paragraphs.
4. Determining first and subsequent violations. For purposes of determining first and subsequent violations of the offenses specified in this subpart, each conviction for any offense listed in Tables 1 through 4 to this section resulting from a separate incident, whether committed in a CMV or non-CMV, must be counted.
5. The disqualification period must be in addition to any other previous periods of disqualification.
6. Reinstatement after lifetime disqualification. A State may reinstate any driver disqualified for life for offenses described in paragraphs (b)(1) through (8) of this section (Table 1 to §383.51) after 10 years, if that person has voluntarily entered and successfully completed an appropriate rehabilitation program approved by the State. Any person who has been reinstated in accordance with this provision and who is subsequently convicted of a disqualifying offense described in paragraphs (b)(1) through (8) of this section (Table 1 to §383.51) must not be reinstated.



Created by The National Judicial College with funding and content provided by the Federal Motor Carrier Safety Administration.



Resource Guide

January 2024

NTLC Resources

The National Traffic Law Center (NTLC) is a resource designed to benefit prosecutors, judges, law enforcement officers and others in the justice system. The mission of NTLC is to improve the quality of justice in traffic safety adjudications by increasing the awareness of highway safety issues through the compilation, creation and dissemination of legal and technical information, and by providing training and reference services.

The NTLC resources listed in this guide are offered to all prosecutors and traffic safety professionals free of charge and may be viewed from the NTLC website; many may be downloaded as well. Just click on the hyperlinks throughout this guide or visit ndaa.org/resource/ntlc-resources/ (QR code at right).

For more information about NTLC’s resources, or for assistance with any other traffic safety-related issues, please contact Senior Attorneys M. Kimberly Brown at MKBrown@ndaajustice.org or Jim Camp at JCamp@ndaajustice.org.



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NTLC Funding Sources



**United States Department of Transportation,
National Highway Traffic Safety Administration**

➤ [nhtsa.gov](https://www.nhtsa.gov)



**United States Department of Transportation,
Federal Motor Carrier Safety Administration**

➤ [fmcsa.dot.gov](https://www.fmcsa.dot.gov)



**The Foundation for Advancing Alcohol
Responsibility**

➤ [responsibility.org](https://www.responsibility.org)



Lyft, Inc.

➤ www.lyft.com/business/contact-us



**National Association of State Boating Law
Administrators**

➤ [nasbla.org](https://www.nasbla.org)

Topical Information



Between the Lines Newsletter

The National Traffic Law Center (NTLC) publishes a monthly newsletter called *Between the Lines*. These newsletters include case studies, summaries about U.S. Supreme Court decisions, trending traffic safety issues, and more. Once per quarter, the newsletter is dedicated to a CDL-related topic.

Prosecutors and other traffic safety professionals may subscribe to newsletter by completing a [registration form](#).

Additionally, guest authors are always welcome to submit proposed articles to be included in the newsletter. Contact [NTLC staff](#) to further discuss topics and the submission procedures.

CDL Listserv

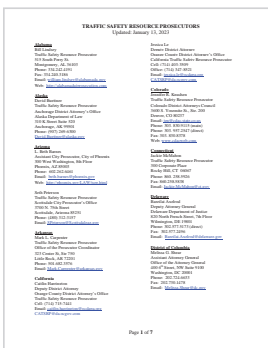
In 2016, the National Traffic Law Center created a listserv for attendees of the NTLC's Basic CDL Course. Since that time, membership to the listserv has grown with the addition of other CDL-related course attendees and other people interested in topics devoted to commercial driver's license holders and commercial motor vehicles. Currently, NTLC staff post CDL-related articles, commentary, and points of interest related to the prosecution of CDL holders and enforcement of CDL regulations. Prosecutors, judges, law enforcement, court clerks, and other traffic safety professionals may subscribe to this CDL listserv by completing a [registration form](#).

Join the CDL Listserv

Email Address

First Name

Last Name



Traffic Safety Resource Prosecutors

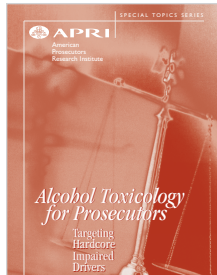
Traffic Safety Resource Prosecutors (TSRPs) facilitate a coordinated, multidisciplinary approach to the prosecution of impaired driving and other traffic crimes.

A TSRP is typically a current or former prosecutor who serves as a subject matter expert and provides training, education, and technical support to prosecutors and law enforcement throughout his or her State.

The NTLC works closely with the country's network of TSRPs. A current list of TSRPs is available [here](#) or by visiting the NTLC website.

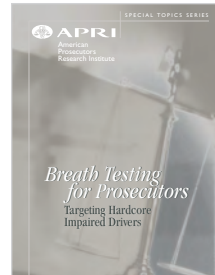
Monographs

ALCOHOL TOXICOLOGY & CHEMICAL TESTING



Alcohol Toxicology for Prosecutors

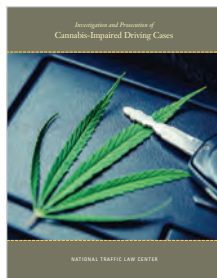
A guide to the basic principles of toxicology and the role of experts in this science.



Breath Testing for Prosecutors

Designed to educate prosecutors about the basics of breath testing theories and procedures.

CANNABIS



Investigation and Prosecution of Cannabis-Impaired Driving Cases

Intended to provide a general overview of the investigation and prosecution of cannabis-impaired driving cases.



Cannabis Impairment Detection Workshop Handbook

Designed to assist law enforcement agencies in identifying, understanding, and overcoming issues pertaining to the development and implementation of these training labs thereby making these trainings more available to all law enforcement officers.

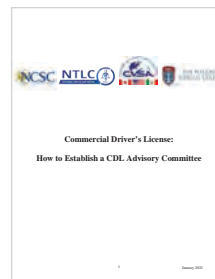
See also **Drugged Driving**; and **Drugged Driving** Educational Videos.

COMMERCIAL DRIVER'S LICENSE



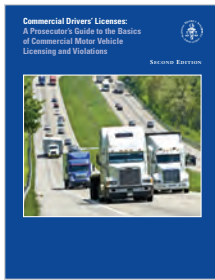
CDL Quick Reference Guide

One-page (front and back) laminated reference for most issues related to commercial driver's licenses and commercial motor vehicles.



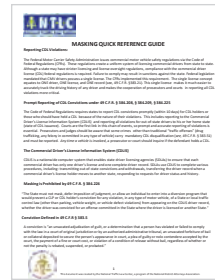
Commercial Driver's License: How to Establish a CDL Advisory Committee

Step-by-step guide explains how to establish a multi-agency working group focused on CDL licensing, enforcement, adjudication, and recording issues to save lives on America's roadways.



Commercial Drivers' Licenses: A Prosecutor's Guide to the Basics of Commercial Motor Vehicle Licensing and Violations, Second Edition

Explains the history and basics of CDL and CMV law.



Masking Quick Reference Guide

An easy-to-use step-by-step guide which explains what Masking is, how Masking is reported, the statutory authority prohibiting Masking, and offers examples of what constitutes Masking by state actors.

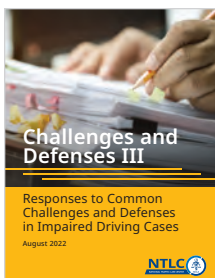


NJCDL/CMV Disqualification Benchcard

Developed by the National Judicial College, this BenchCard strictly conforms with 49 CFR 383.51, consolidating the disqualification statute and corresponding tables into a convenient BenchCard for ease of use and reference.

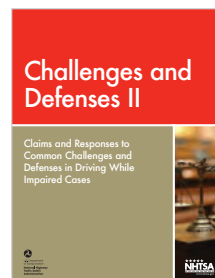
See also **Crash Reconstruction** and **Distracted Driving; Mastering Masking** and **Human Trafficking** Online Courses; and **From Roadside to Record** Educational Videos.

COMMON IMPAIRED DRIVING DEFENSES



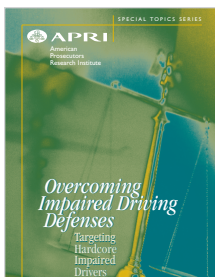
Challenges and Defenses III: Responses to Common Challenges and Defenses in Impaired Driving Cases

Written to help prosecutors address the challenges and defenses largely related to drug-impaired driving cases.



Challenges and Defenses II: Claims and Responses to Common Challenges and Defenses in Driving While Impaired Cases

Designed to assist prosecutors and law enforcement in understanding the nature of defense challenges.



Overcoming Impaired Driving Defenses

A guide to the most common defenses in impaired driving cases. See also *Challenges and Defenses II* and *III* (above) for additional information to combat impaired driving defenses.

CONSTITUTIONAL LAW



Constitutional Law Issues in Impaired Driving Cases

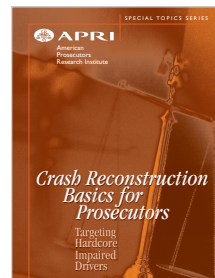
Provides an overview of some of the many constitutional issues impacting traffic cases from the law enforcement officer's observations of a vehicle in motion through a defendant's trial.

CRASH RECONSTRUCTION



Large Truck Crash Reconstruction for Prosecutors

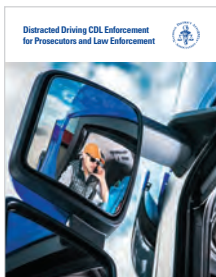
Designed to help prosecutors understand the factors that cause fatal large truck crashes.



Crash Reconstruction Basics for Prosecutors

Serves as a primer for prosecutors on basic science, investigative techniques and what questions to ask when faced with a case involving a collision.

DISTRACTED DRIVING



Distacted Driving CDL Enforcement for Prosecutors and Law Enforcement

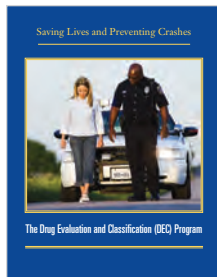
Serves as a primer for prosecutors and law enforcement on the investigation and prosecution of distracted driving cases involving commercial driver's license holders in large commercial vehicles and non-commercial motor vehicles.



Investigation and Prosecution of Distracted Driving Cases

Intended to provide a general overview of the investigation and prosecution of distracted driving cases.

DRUGGED DRIVING



Saving Lives and Preventing Crashes— The Drug Evaluation and Classification (DEC) Program

Designed to provide prosecutors with a basic understanding of the Drug Evaluation and Classification Program and the process used by drug recognition experts.

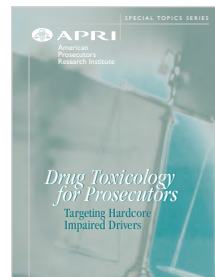
See also **Drug Toxicology** and **Cannabis; Prosecution of Drug-Impaired Driving** Online Course; and **Drugged Driving** Educational Videos.

DRUG TOXICOLOGY



Drug Toxicology for Prosecutors, 2023 Edition

This new edition presents updates on important issues including emerging drug threats and prevalence, pharmacology, analytical testing, and presentation of forensic toxicology evidence in court.

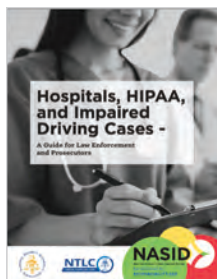


Drug Toxicology for Prosecutors

Designed to provide prosecutors with a basic understanding of drug pharmacology and testing.

See also **Drugged Driving; Prosecution of Drug-Impaired Driving** Online Course; and **Drugged Driving** Educational Videos.

HOSPITALS AND HIPAA



Hospitals, HIPAA, and Impaired Driving Cases—A Guide for Law Enforcement and Prosecutors

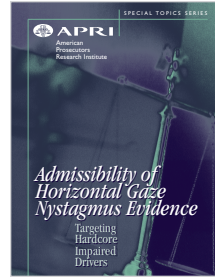
This guide provides the basic, general legal principles behind HIPAA, as well as the specific provisions relating to criminal law, and the exceptions it provides for law enforcement and prosecutors conducting investigations into criminal matters such as impaired driving cases. This guide also provides helpful suggestions for law enforcement and prosecutors to develop cooperative relationships with hospital personnel to positively impact investigations while minimizing the need for hospital personnel to testify in court, including ideas on how to address out-of-state search warrants for hospitals and how to sidestep a hospital blood draw with a law enforcement phlebotomy program.

HORIZONTAL GAZE NYSTAGMUS



Horizontal Gaze Nystagmus—The Science and the Law: A Resource Guide for Judges, Prosecutors and Law Enforcement

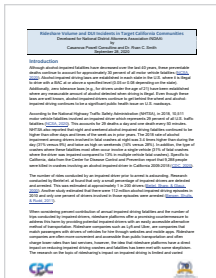
Designed specially to assist judges, prosecutors and law enforcement personnel in gaining a basic understanding of HGN, its correlation to alcohol and certain other drugs, other types of nystagmus, the HGN test's scientific validity and reliability, its admissibility in other jurisdictions, and the purposes for which it may be introduced.



Admissibility of Horizontal Gaze Nystagmus Evidence

A guide to HGN admissibility with articles from a variety of experts in the area, most notably, leading HGN researchers and authors Dr. Marcelline Burns, PhD and Dr. Karl Citek, OD, PhD, FAAO.

IMPAIRED DRIVING CORRELATION STUDIES: LYFT (RIDESHARE)



Lyft Correlation Study: California

Report examining the correlation between rideshare volume and impaired driving incidents covers three cities in California (Los Angeles, San Diego, and San Francisco).



Lyft Correlation Study: Atlanta, Chicago, Fort Worth

Report examining the correlation between rideshare volume and impaired driving incidents covers Atlanta, Georgia; Chicago, Illinois; and Fort Worth, Texas.



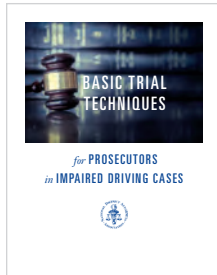
Lyft Correlation Study: Massachusetts

Report examining the correlation between rideshare volume and impaired driving incidents covers three cities in Massachusetts (Boston, Worcester, and Northampton).

TOXICOLOGY

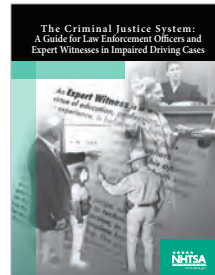
See **Alcohol Toxicology** and **Drug Toxicology**.

TRIAL AND SENTENCING ISSUES



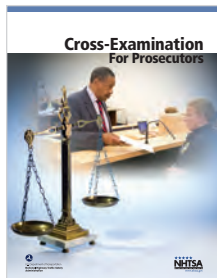
Basic Trial Techniques for Prosecutors in Impaired Driving Cases

Strategies and examples for new prosecutors handling cases involving impaired driving.



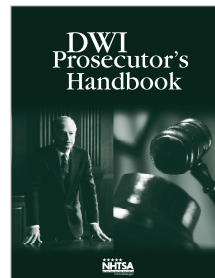
The Criminal Justice System: A Guide for Law Enforcement Officers and Expert Witnesses in Impaired Driving Cases

This publication provides an overview of the criminal justice system for people who will likely encounter it through their roles as expert witnesses.



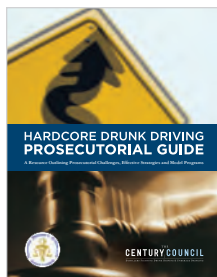
Cross-Examination for Prosecutors

Developed to assist prosecutors in understanding the basic goals, methods, and forms of cross-examination when dealing with all witnesses.



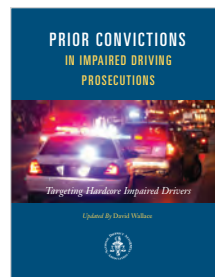
DWI Prosecutor's Handbook

Designed to provide a comprehensive guide for prosecutors about the fundamentals of a DWI prosecution.



Hardcore Drunk Driving Prosecutorial Guide: A Resource Outlining Prosecutorial Challenges, Effective Strategies and Model Programs

Combines proven experience with research in the field of hardcore drunk driving, highlights effective strategies, tactics and programs that can and have been implemented to reduce the problem of hardcore drunk driving.



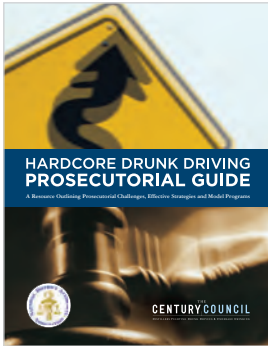
Prior Convictions in Impaired Driving Prosecutions

A guide focused on targeting hardcore impaired drivers by locating, obtaining, and using the prior convictions of impaired driving defendants.

See also **Common Impaired Driving Defenses** and **Constitutional Law; Hardcore Drunk Drivers, Prosecuting DUI Cases**, and **Prosecution of Drug-Impaired Driving** Online Courses; and **Drugged Driving** Educational Videos.

Training

ONLINE COURSES/ON-DEMAND WEBINARS



Hardcore Drunk Drivers

Hardcore drunk drivers, those who drive at high blood alcohol concentrations (0.15% or higher) or do so repeatedly as demonstrated by having more than one drunk driving arrest, are highly resistant to changing their behavior despite previous sanctions, treatment or education. They account for a disproportionate share of alcohol-related traffic fatalities each year.

Impaired driving cases are some of the most technically challenging and complex cases a prosecutor may face. These challenges only become more difficult when dealing with a hardcore drunk driver. These three video presentations explore the issues facing prosecutors and others within the criminal justice system when dealing with these offenders:

Part One: Overview of the Hardcore Drunk Driver

Part Two: Prosecutorial Considerations

Part Three: Effective Sanctions

See also [*Hardcore Drunk Driving Prosecutorial Guide*](#).

Human Trafficking and the Impact on Commercial Driver's Licenses

This on demand training module is designed to educate about the Federal "No Human Trafficking on Our Roads Act" (NHTRA) which was signed into law on January 1, 2018 by President Donald J. Trump. As a result of NHTRA, the Federal Motor Carrier Safety Administration (FMCSA) announced a final rule that imposes a lifetime ban on drivers who are convicted of a severe form of human trafficking in a commercial motor vehicle (CMV) from operating a CMV. This rule was signed into law on July 23, 2019. Under this rule, states have until September 23, 2022 to comply with this mandate. FMCSA allowed a three-year period to permit states sufficient time to seek legislation, update their regulations, and make the appropriate information technology changes to apply the lifetime ban.

Training Course topics include:

- Trafficking and CDL Holders
- Trafficking Victims Protection Act (TVPA)
- Trafficking Victims Protection Reauthorization Act (TVPRA)
- Types of trafficking defined
- License ramifications
- State adoptions of 49 U.S.C. 31310 (d)(2)
- Victim Identification



- Investigation
- Law Enforcement
- Trafficking Indicators
- Prosecuting the Case
- Victim and Witness Preparation
- Evidence Presentation
- Discussion Points
- Resources



Impaired Driving by CDL Holders

Explore the serious implications of DUI offenses for commercial drivers, including the potential licensing consequences and the complex issue of masking charges. Delve into the legal, professional, and ethical aspects surrounding this critical topic, raising awareness, and promoting responsible driving practices in the commercial sector. All traffic safety professionals, from roadside to record, need to work together to ensure that all convictions, especially impaired driving convictions, are not masked and are recorded on the defendant's driving record, ensuring that this record is complete and accurate, and thus adhering to federal and state law. For additional information about this on demand webinar training, please contact Senior Attorney [Jim Camp](#) or Staff Attorney [Bella Truong](#).



Investigation and Prosecution of Drug-Impaired Driving Cases

Impaired driving is illegal, extremely dangerous, and has life altering consequences. Impairment is impairment, regardless of the substance causing the impairment. It does not matter what type of drug a person has taken: licit, illicit, or even if that drug is properly prescribed or purchased over-the-counter; the risk of death or serious injury is the same.

The detection and prosecution of drug-impaired driving cases requires specialized knowledge and skill to combat the unique challenges and defenses presented. An officer or a prosecutor willing to take on this difficult task can keep drug-impaired drivers off of the roadways, thereby preventing unnecessary deaths and injuries and positively impacting public safety.

This Course is designed to assist prosecutors in honing the skills required to properly prosecute a drug-impaired driving case. A prosecutor participating in this Drug-Impaired Driving online training will learn the following:

- What a drug is and what kinds of drugs can cause impairment. Although the definition of "drug" may vary by State statute, participants will learn about over-the-counter drugs, prescription drugs, illicit drugs, and what polydrug-use is.
- How to decipher a toxicology report and the kind of information about which a toxicologist may testify and about which he/she cannot.
- How a law enforcement officer fully and properly investigates a drug-impaired driving case, what the Drug Evaluation and Classification (DEC) Program is, and how a Drug Recognition Expert (DRE) may be utilized during a drug-impaired driving investigation.

- Some of the unique challenges and defenses posed to a drug-impaired driving prosecutor and how to best handle those challenges and defenses.
- Suggestions on how to select jurors for a drug-impaired driving case.



Mastering Masking

Federal and most state law prohibits the “Masking” of violations of traffic control laws. Misconceptions continue to persist surrounding this statute’s mandate requiring the reporting of CDL/CMV violations and convictions and prosecutors’ discretion to negotiate these cases.

This online training course, developed by national experts in cooperation with the Federal Motor Carrier Safety Administration, the National District Attorneys Association’s National Traffic Law Center, and the National Center for State Courts, is for new and practicing prosecutors, as well as other traffic safety professionals who desire to learn more about the legal and ethical consequences of plea negotiations involving commercial driver’s license (CDL) cases.

This training course is designed to equip prosecutors with the knowledge, information, and confidence necessary to effectively prosecute CDL and/or large commercial motor vehicle (CMV) cases. The course walks the learner through a first-person simulation of prosecuting the fictional traffic case of a CDL holder. The training uses a case file, interactive exercises, document mock-ups, and avatar voiceovers to bring the course content to life.

Course module topics include:

- Convictions
- Masking and Ethics
- Disqualification

For additional information about this on demand training, please contact Senior Attorney [Jim Camp](#) or Staff Attorney [Bella Truong](#).



Not Just Traffic—Felony Convictions and the Impact on a Commercial Driver's License

Commercial Driver License holders have the privilege of operating 80,000 pound vehicles, and with that privilege comes greater training, licensing expectations, and responsibility. This training will focus on the consequences of a conviction, specifically a felony conviction, on a CDL holder’s driving record and how a complete driving record fulfills the “One Driver, One License, One Record” concept.

It’s important to realize that if the defendant is charged with a felony and holds a CDL, there may be important consequences to his or her CDL, including disqualification of the license. The training will also explain the role of law enforcement, prosecutors, judges, clerks and State Driver License Agencies in adjudicating a felony case with a CDL holder as a defendant, and the importance of ensuring the defendant’s CDL status and other pertinent vehicle information are documented at every stage of the case.

All traffic safety professionals, from roadside to record, need to work together to ensure that all convictions, including felony convictions, are recorded on the defendant's driving record, ensuring that this record is complete and accurate, and thus adhering to federal and state law.



Prosecuting DUI Cases

This online training course, developed by national experts in cooperation with the Foundation for Advancing Alcohol Responsibility, the National District Attorneys Association's National Traffic Law Center, and the National Center for State Courts, is for new and practicing prosecutors. This training course is designed to equip prosecutors with the knowledge, information, and confidence necessary to effectively prosecute DUI cases. The course walks the learner through a first-person simulation of preparing for the prosecution of a fictional DUI case. The training uses a compelling storyline, interactive exercises, document mock-ups, and avatar voiceovers to bring the course content to life.

Course module topics include:

- Importance of DUI prosecution
- Preliminary case review and evaluation
- Trial preparation
- Alcohol toxicology 101
- Common defenses and trial tactics

Technology, Tools, and Resources to Combat Impaired Driving Cases

Crashes caused by impaired driving and distracted driving are among the most dangerous offenses handled by prosecutors and law enforcement. A consistent and effective approach when investigating and prosecuting these cases leads to more successful prosecutions and, in turn, safer roads. This webinar covers the most recent technology, tools, and resources helping combat impaired and distracted driving cases and how those tools are impacting prosecution. It also previews what is yet to come in traffic safety technology and highlight what these changes may mean for traffic safety practitioners. Other points included in the webinar are:

- Learning how modern technology has improved traffic crash and DUI investigations.
- Gaining a deeper understanding of how to anticipate and overcome challenges related to presenting this evidence in court.
- Previewing technology yet to come and discussing what it may mean for the future of the criminal justice system.

To access this on demand webinar training, click [here](#).



EDUCATIONAL VIDEOS



Drugged Driving

Driving under the influence of drugs other than alcohol, or drugs in combination with alcohol, is now nearly as prevalent as driving under the influence of alcohol. The numbers of alcohol-related fatalities continue on a slight downward trend while the number involving other drugs has been increasing rapidly.

To assist prosecutors and law enforcement officers the AAA foundation funded a grant that permitted the National Traffic Law Center to create a series of short videos. These videos are intended to introduce a less experienced prosecutor to some of the concepts and language used in the prosecution of drugged driving cases and to help develop a basic understanding of the challenges he or she may face in court. Each video is 5-10 minutes in length and can be viewed as time permits.

The Work of the NTLC

Tom Kimball, Former Director NTLC

Admissibility of Expert Testimony

Sarah Garner, North Carolina TSRP

Qualifying the Expert Witness

Sarah Garner, North Carolina TSRP

The Toxicologist

Joey Jones, Forensic Toxicologist, J.O. Jones Consulting, LLC

Understanding Drug Tolerance

Joey Jones, Forensic Toxicologist, J.O. Jones Consulting, LLC

Common DUI Defenses, Generally

Jeff Sifers, Former Oklahoma TSRP

The Drug Recognition Expert (DRE) and Defenses Related to the DRE

Jeff Sifers, Former Oklahoma TSRP

Field Sobriety Testing in Drugged Driving Cases

Ashley Schluck, Wyoming TSRP

Missing Signs or Symptoms in DRE Cases

Ashley Schluck, Wyoming TSRP

Refusal to Test and Implied Consent (Birchfield)

Sarah Garner, North Carolina TSRP

Video Comparison of Alcohol Impairment HGN vs. Cannabis Impairment Abnormal Eye Movement (Not HGN)

From Roadside to Record

NTLC's video series, *From Roadside to Record*, using professional videography and state of the art animation produced with funding from the Federal Motor Carrier Safety Administration, is perfect for use in CDL related training. They focus on enforcing, prosecuting and adjudicating CDL traffic stops in accordance with federal and state regulations.



Part One: The Roadside—CMV, follows the stop of a tractor trailer for speeding and continues from personal contact with the CDL holder driver, through proper completion of the citation.



Part Two: The Roadside—CDL & Personal Vehicle, follows the stop of a CDL holder for speeding while driving a personal vehicle.



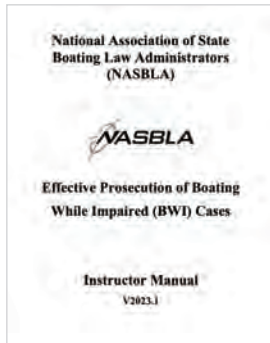
Part Three: The Courtroom, involves a courtroom scene of a prosecutor and several defense attorneys engaged in realistic pretrial negotiations relative to CDL holders and the presentations of the cases to the court. Discussions include Masking, disqualification, and the prevention of Masking.



Part Four: The Clerk, follows the journey taken by the Commercial Driver's License (CDL) holder's conviction from the court clerk's desk to the state driver license agency (SDLA), to the Commercial Driver License Information Service (CDLIS) and back to the CDL holder's record in the state of issuance. This professionally produced video explains the transmittal and recording requirements of the above agencies relative to a CDL holder's conviction thereby ensuring one-driver, one-license, one-record.

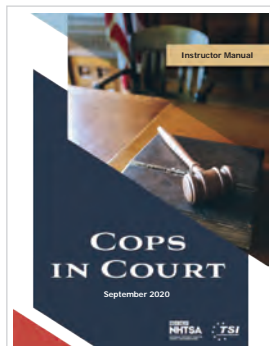
NTLC TRAINING COURSE MATERIALS

The NTLC maintains a library of training course materials. To obtain any of the below materials, or to discuss how to conduct one of the below training exercises, [email](#) NTLC staff.



Boating Under the Influence Courses: *Courtroom Testimony in BUI Cases and Effective Prosecution of Boating While Impaired (BWI) Cases*

Courtroom Testimony in BUI Cases is designed to assist law enforcement officers in preparing for and giving testimony in BUI cases. *Effective Prosecution of Boating While Impaired (BWI) Cases* enhances courtroom preparation and presentation for prosecutors of boating under the influence (BUI) cases. Both curricula are available upon request; contact NTLC Staff Attorney [Erin Inman](#) for access to the materials.



Cops in Court Trial Testimony Skills Course

Designed for law enforcement officers with a wide variety of trial testimony experience, this course includes discussion and instruction on all aspects of trial preparation and courtroom testimony in an impaired driving case. Experts in the fields of law enforcement and prosecution present the curriculum to law enforcement officers, allowing the participants to learn firsthand the challenges and difficulties in impaired driving cases. This course is designed to be taught in one day and includes a mock trial presentation, with optional direct and cross-examination exercises. However, additional potential topic areas are discussed throughout the Instructor Manual and may be implemented in the training course to expand the curriculum if so desired. Segments of this training include:

- Understanding the Importance of Courtroom Testimony
- Report Writing
- Courtroom Preparation
- Direct Examination
- Cross-Examination
- Mock Trial



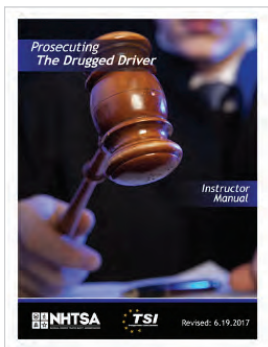
Lethal Weapon: DUI Homicide Advanced Trial Advocacy Course

Vehicular fatality cases are complex, requiring prosecutors to have a working knowledge of crash reconstruction and toxicology, as well as skills to work with expert witnesses and victims. The Lethal Weapon course is focused on assisting prosecutors to develop their knowledge and skills in trying these cases. A substantial portion of this four-and-a-half-day course involves presentations on crash reconstruction, technical investigation at the scene, and toxicology. The course also provides an advanced trial advocacy component in which participants receive a case file and participate in mock trial sessions where each of them conducts every stage of the trial. A unique feature of Lethal Weapon is the opportunity for prosecutors to conduct direct and cross-examinations of actual reconstructionists and toxicologists. Specifically, this course teaches prosecutors to:

- Learn how a crash reconstructionist determines speed from skid marks and vehicle damage
- Determine how vehicle and occupant kinematics assist in cases involving driving identification
- Understand the prosecutor's role at the scene of a traffic fatality
- Calculate BAC by learning alcohol "burn-out" rates and the Widmark formula
- Improve trial advocacy skills, particularly conducting direct and cross-examination of expert witnesses

Who Should Attend

- Prosecutors with a preferred experience level of two-three years trying impaired driving cases.
- Prosecutors who currently handle vehicular fatality cases.
- Experienced prosecutors who want to increase their understanding of the technical evidence required to prove guilt in cases involving vehicular fatalities, and at the same time improve their trial advocacy skills.

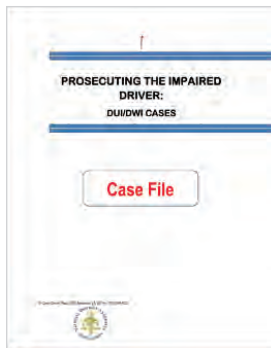


Prosecuting the Drugged Driver Trial Advocacy Course

This course is designed to create a team building approach between prosecutors and law enforcement officers to aid in the detection, apprehension, and prosecution of impaired drivers. Prosecutors and law enforcement officers will participate in interactive training classes taught by a multidisciplinary faculty.

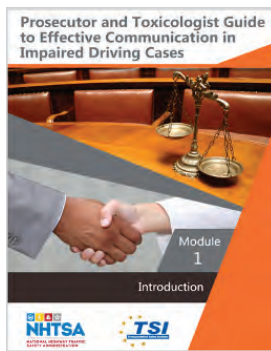
The course begins with an overview of the drug-impaired driving problem in the United States and the substantive areas of training that police officers receive to be certified as a Drug Recognition Expert (DRE). Learning about drug categories, signs and symptoms of drug influence, the role of the DRE in establishing impairment, and the role of toxicology in these cases will assist the prosecutor in developing methods for effectively and persuasively presenting this information in court. The course also addresses how to qualify the DRE as an expert witness in court and how to respond to common defense challenges.

Each participant will have the opportunity to prosecute a "case" including the opportunity to conduct a direct examination of a DRE and a toxicologist. Each phase of the trial is videotaped. Participants receive critiques of the "live" and videotaped presentations from experienced faculty. Throughout every stage of the course, participants receive direct feedback on their courtroom skills with assistance in how to compose more persuasive arguments and deliver more dynamic presentations.



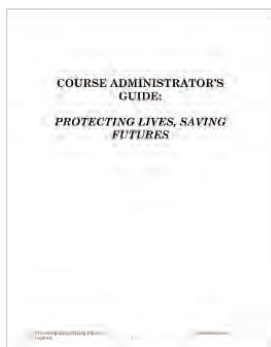
Prosecuting the Impaired Driver: DUI/DWI Cases Trial Advocacy Course

This course is designed to create a team building approach between prosecutors and law enforcement officers to aid in the detection, apprehension, and prosecution of impaired drivers. Prosecutors and law enforcement officers participate in interactive training classes taught by a multidisciplinary faculty focusing on building skills in trying an alcohol related impaired driving case. Includes a discussion of the role of the prosecutor in both alcohol-impaired driving cases and community safety and covers standardized field sobriety tests, the pharmacology of alcohol and chemical testing. Each participant prosecutes a “case,” is critiqued on his/her live performance and given an opportunity to view him/herself on videotape. Throughout every stage of the course, participants receive direct feedback on their courtroom skills with assistance in how to compose more persuasive arguments and deliver more dynamic presentations.



Prosecutor and Toxicologist Guide to Effective Communication in Impaired Driving Cases Course

This course is designed to enable prosecutors and toxicologists to prepare together to effectively communicate and introduce toxicology evidence in impaired driving cases. Prosecutor and toxicologist participants will together learn the lifecycle of a toxicology sample, including lab testing procedures, types of testing, and issues of quality control and assurance. The roles of the prosecutor, law enforcement, and toxicologist will be reviewed as well as the language used by each, the language pitfalls, and how to best translate technical language into layman's terms. Together the prosecutor and toxicologist learn how to prepare for the case trial presentation, including the documents used, pretrial motions, proper courtroom procedure, common defense tactics, and what the expert toxicologist may expect to encounter. By experiencing this training together, the prosecutor and toxicologist will be able to more effectively present the toxicology evidence in an impaired driving prosecution.



Protecting Lives/Saving Futures Interactive Participant-Centered Course

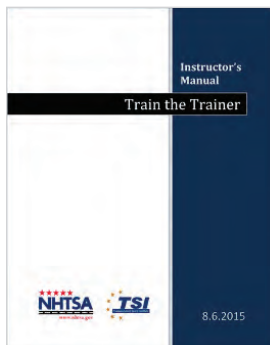
This model curriculum is designed to jointly train police and prosecutors in the detection, apprehension and prosecution of alcohol and drug impaired drivers. This training is unique in two ways: (1) Experts in the fields of toxicology, optometry, prosecution and law enforcement designed and developed the curriculum; (2) Law enforcement officers and prosecutors are trained together by the experts in their respective disciplines. The training is the first of its kind to be developed nationally and is adaptable to all local jurisdictions.

The joint-training approach allows all the involved disciplines to learn from each other inside a classroom rather than outside a courtroom five minutes before trial. Each profession learns firsthand the challenges and difficulties the others face in impaired driving cases. This allows for greater understanding on the part of police officers as to what evidence prosecutors must have in an impaired driving case. Conversely, this training gives prosecutors the opportunity to learn to ask better questions in

pretrial preparation, as well as in the courtroom. Both prosecutors and law enforcement officers learn firsthand from toxicologists about breath, blood and urine tests. A nationally recognized optometrist instructs police and prosecutors about the effects of alcohol and other drugs on an individual's eyes, specifically, Horizontal Gaze Nystagmus (HGN). In turn, optometrists and toxicologists gain a greater appreciation for the challenges officers face at the scene in gathering forensic evidence and the legal requirements prosecutors must meet in presenting evidence in court. This exchange of information is beneficial to all involved.

Prosecutors and police officers participate in interactive training classes regarding:

- Initial detection and apprehension of an impaired driver
- Standardized Field Sobriety Tests (SFSTs) and the effective documentation of observations of suspects
- The medical background of the Horizontal Gaze Nystagmus (HGN) test, including the correlation of HGN to alcohol and other drugs
- The scientific background of the breath/blood/urine alcohol and drug tests, and advantages and limitations of forensic testing
- Identification of impairment due to alcohol as well as other drugs
- The effective presentation of evidence in court through trial preparation exercises



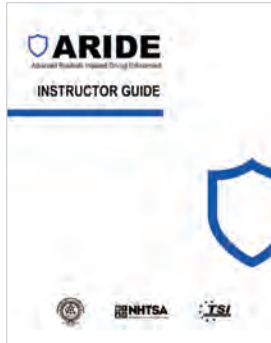
***Train the Trainer* Faculty Development Course**

This course is designed to train adults to effectively teach and critique other adults. The curriculum is designed to be participant centered and instructor led. Each participant will be actively involved in the training process. The program will provide all participants with a foundation in presentation styles, adult learning principles, the art of critiquing, and communication skills. The course teaches participants how to incorporate creative training techniques to deliver interactive presentations using visual aids that reinforce learning.

To provide the opportunity for participants to apply training techniques taught and demonstrated during the course, each participant is required to make a presentation on an element of DUI trial advocacy or related topic. The presentations are videotaped and both the 'live' and videotaped presentation will be critiqued by faculty. Strong emphasis is placed on assisting individual participants to expand and improve their presentation skills, regardless of their level of experience.

This course also will focus on improving the fundamentals of critiquing. Incorporated into the course is the opportunity for local volunteer prosecutors to deliver an opening statement, closing argument, a direct and a cross, which are then critiqued by course participants to give them an opportunity to practice the critiquing skills taught in the course.

LAW ENFORCEMENT TRAINING COURSE MATERIALS



Advanced Roadside Impaired Driving Enforcement (ARIDE) Training Curriculum

Advanced Roadside Impaired Driving Enforcement (ARIDE) is a 16-hour course which offers additional information to law enforcement officers on detecting impairment caused by more than just alcohol. Oftentimes law enforcement officers who have not received advanced or in-service training regarding drug impairment tend to not be able to identify these characteristics; therefore, they will release an impaired driver. Once an officer completes the training, he/she will be more proficient with the Horizontal Gaze Nystagmus (HGN), Walk and Turn (WAT), and One Leg Stand (OLS) tests and gain a broader knowledge of drug impairment indicators. The law enforcement officer will also be more familiar with the Drug Evaluation and Classification (DEC) Program and its function. This will facilitate better communication and transfer of critical roadside indicators of impairment to the evaluating Drug Recognition Expert (DRE) for a more complete and accurate assessment of the impairment.

This course is a 16-hour classroom course which includes instruction on:

- SFST Review
- The Seven Major Drug Categories
- Signs and Symptomology
- Physiology of Drugs
- Drug Combinations
- Courtroom Testimony
- Report Writing



Drug Recognition Expert Course

The DEC Program trains law enforcement officers and other approved public safety officials as DREs through a three-phase training process:

- DRE Pre-School (16 hours)
- DRE School (56 hours)
- DRE Field Certification (Approximately 40–60 hours)

The training relies heavily on Standardized Field Sobriety Tests (SFSTs), which provide the foundation for the DEC Program. Once trained and certified, DREs become highly effective officers skilled in the detection and identification of persons impaired by alcohol and/or drugs. DREs are trained to conduct a systematic and standardized 12-step evaluation consisting of physical, mental and medical components.

Because of the complexity and technical aspects of the DRE training, not all law enforcement officers may be suited for the training. Experience has shown that training a well-defined group of officers proficient in impaired driving enforcement works well and can be very effective.

The DRE classroom training is designed to assist the student achieve three broad goals and eight specific learning objectives.

Goals:

- Determine if an individual is under the influence of a drug or drugs other than alcohol, the combined influence of alcohol and other drugs, or suffering from an injury or illness that produces similar signs to alcohol/drug impairment;
- Identify the broad category or categories of drugs that would induce the observable signs and symptoms of impairment; and
- Progress to the Field Certification Phase of the training.

Objectives:

- Be able to describe the involvement of drugs in impaired driving incidents;
- Name the seven drug categories and recognize their effects;
- Describe and properly administer the psychophysical and physiological evaluations used in the DRE procedures;
- Prepare a narrative drug influence evaluation report; and
- Discuss appropriate procedures for testifying in typical DRE cases.



DWI Detection and Standardized Field Sobriety Testing (SFST) Training Curriculum

The DWI Detection and Standardized Field Sobriety Testing (SFST) training curriculum prepares law enforcement officers and other qualified persons to conduct the SFSTs during impaired driving (DWI) investigations. This training, developed under the auspices and direction of the NHTSA and the IACP, has experienced remarkable success since its inception in the early 1980s.

The procedures outlined in this course describe how the SFSTs are to be administered under ideal conditions. The SFSTs may not always be administered under ideal conditions in the field because such conditions do not always exist. Even when administered under less than ideal conditions, they will generally serve as valid and useful indicators of impairment. Slight variations from the ideal, *i.e.*, the inability to find a perfectly smooth surface at roadside, may have some effect on the evidentiary weight given to the results; however, this does not necessarily make the SFSTs invalid.

ABOUT US

The bilateral Safety Corridor Coalition (BSCC) is an alliance of over 60 governments and nonprofit agencies in the United States and Latin America that is convened in and along the U.S.—Mexico Border region to combat slavery and human trafficking.

Incorporated in 2002 as a 501(c)3, its purpose is to bilaterally prevent and intervene in the commercial and sexual exploitation of women and children while advocating for all exploited persons.

Through the collaborative efforts of coalition members, BSCC administers a variety of projects and services for victims, law enforcement, and the community.

The Bilateral Safety Corridor Coalition plays a crucial role in the fight against human trafficking in the San Diego-Tijuana region, where the proximity to the international border can create vulnerabilities for trafficking victims.

By providing support, raising awareness, and advocating for policy changes, BSCC strives to combat this criminal activity and protect the rights and dignity of trafficking survivors.

24—Hour Emergency Trafficking
Hotline
(619) 666—2757

Who Can Call the Trafficking Hotline?

- ◆ Trafficking victims.
- ◆ Community Clinics and Doctors.
- ◆ Social Services Agencies.
- ◆ Concerned Citizens.
- ◆ Law Enforcement Personal.



Make your Donation Through



venmo

121 E 31st Street, Suite A
National City, CA. 91950
Phone: (619) 336-0770
Fax: (619) 336 0791

E-Mail: info@bsccinfo.org

Website: www.bsccoalition.org

Office hours: Monday-Friday 9:00 am-5:00 pm

Find us on

Facebook



Combating Human Trafficking in the Americas



Forced
Marriage



www.bsccoalition.org

WHAT YOU CAN DO

- 1. Educate Yourself:** Start by learning about the issue of forced labor and forced marriage its causes, and its prevalence in different industries and regions. Understanding the problem is the first step in addressing it.
- 2. Raise Awareness:** Share information about forced labor and forced marriage with your friends, family, and social networks. Use social media, blogs, or public speaking opportunities to raise awareness about the issue.
- 3. Advocate for Change:** Engage with businesses, local governments, and policymakers. Write letters, sign petitions, and attend town hall meetings to advocate for stronger anti-forced labor and anti-forced marriage measures and legislation.
- 4. Support NGOs and Charities:** Contribute to organizations that are actively working to combat forced labor, provide support to survivors, and raise awareness about the issue. Your donations can make a difference.
- 5. Report Suspected Cases:** If you suspect or come across instances of forced labor, forced marriage or human trafficking, report them to the appropriate authorities or law enforcement agencies. Be cautious about your safety when doing so and use hotlines or online platforms if available.
- 6. Volunteer:** Consider volunteering your time and skills with organizations that work directly with survivors of forced labor, forced marriage or human trafficking. Your support can provide much-needed assistance and resources.
- 7. Educate Others:** Organize educational events, workshops, or seminars in your community to raise awareness about forced labor, forced marriage and human trafficking. Invite experts or survivors to share their experiences and insights.
- 8. Stay Informed:** Stay up-to-date on the latest developments, reports, and initiatives related to forced labor and forced marriage. Being informed allows you to be a more effective advocate for change.

DEFINITIONS

Forced labour

Is defined, for purposes of measurement, as work that is undertaken both under the threat of any penalty and is involuntary. The threat of any penalty refers to the means of coercion used to impose work on someone against that person's will. Workers can be directly subjected to coercion, or subjected to verbal threats relating to specific elements of coercion, or can be witness to coercion imposed on other co-workers in relation to involuntary work.

Forced labour of children

Is defined, for purposes of measurement, as work performed by a child during a specified reference period falling under one of the following categories: (i) work performed for a third party, under threat or menace of any penalty applied by a third party (other than the child's own parents) either on the child directly or the child's parents; or (ii) work performed with or for the child's parents, under threat or menace of any penalty applied by a third party (other than the child's parents) either on the child directly or the child's parents; or (iii) work performed with or for the child's parents where one or both parents are themselves in a situation of forced labour; or (iv) work performed in any one of the following worst forms of child labour: (a) all forms of slavery or practices similar to slavery, such as the sale and trafficking of children, debt bondage, and serfdom, [as well as forced or compulsory labour], including forced or compulsory recruitment of children for use in armed conflict; (b) the use, procuring, or offering of a child for prostitution, for the production of pornography, or for pornographic performances; (c) the use, procuring, or offering of a child for illicit activities, in particular for the production and trafficking of drugs as defined in relevant international treaties.

Forced marriage

Forced marriage refers to situations where a person has been forced to marry without giving their consent. A forced marriage might occur under physical, emotional, or financial duress as a result of deception by family members, the spouse, or others, or by the use of force or threats or severe pressure. These marriages are prohibited by several international conventions,¹⁴ including those that prohibit slavery and slavery-like practices, including servile marriage. Other forms of exploitation can also occur within the context of a forced marriage, such as human trafficking and forced labour.

- 49.6 million people were living in modern slavery in 2021, of which 27.6 million were in forced labour and 22 million in forced marriage.
- Of the 27.6 million people in forced labour, 17.3 million are exploited in the private sector; 6.3 million in forced commercial sexual exploitation, and 3.9 million in forced labour imposed by state.
- Women and girls account for 4.9 million of those in forced commercial sexual exploitation, and for 6 million of those in forced labour in other economic sectors.
- 12% of all those in forced labour are children. More than half of these children are in commercial sexual exploitation.
- The Asia and the Pacific region has the highest number of people in forced labour (15.1 million) and the Arab States the highest prevalence (5.3 per thousand people).
- Addressing decent work deficits in the informal economy, as part of broader efforts towards economic formalization, is a priority for progress against forced labour.

Source: [Global Estimates of Modern Slavery: Forced Labour and Forced Marriage](#), Geneva, September 2022.