



**NATIONAL HUMAN TRAFFICKING
TRAINING AND TECHNICAL
ASSISTANCE CENTER**

Sex Trafficking of Children and Youth: A Summary of the Research and Recommendations for the Field

September 2018



ACKNOWLEDGMENTS

This publication was funded by the U.S. Department of Health and Human Services, Administration for Children and Families, Office on Trafficking in Persons (OTIP), contract number HHSP233201500071I/HHSP23337011T, and produced by the National Human Trafficking Training and Technical Assistance Center (NHTTAC), which is managed by ICF. The content of this document are those of the authors and do not necessarily represent the views of the U.S. Department of Health and Human Services.

Special acknowledgments are due to the primary author of this Literature Review:

Jackie Taylor
Senior Technical Specialist, ICF



TABLE OF CONTENTS

| | |
|--|----|
| Acknowledgments | 2 |
| Introduction..... | 4 |
| Organization of This Report | 4 |
| Study Limitations..... | 5 |
| Summary of the Study Approach | 5 |
| Human Trafficking: History and Background..... | 6 |
| Multidisciplinary Research and Promising, Evidence-based Models and Programs to Identify Children and Youth Who are Trafficked and Those at Risk for Trafficking | 7 |
| Screening Tools..... | 8 |
| Strategic Plans and Task Forces to Strengthen Cross-Agency Collaboration: Federal Level..... | 9 |
| Federal, State, and Local Initiatives to Identify Children and Youth Who are Trafficked and Those at Risk for Trafficking | 10 |
| Federal Initiatives | 10 |
| State Initiatives..... | 12 |
| Local Initiatives..... | 13 |
| Initiatives to Combat Human Trafficking in the Gaming, Hospitality, and Entertainment Industries | 14 |
| Other Business Industries | 15 |
| Multidisciplinary Strategies to Manage Cases and Improve Aftercare Services for Children and Youth | 16 |
| Child-Centered/Trauma-Informed Approach | 17 |
| Legal Advocacy..... | 18 |
| State and Local Courts | 18 |
| Case Management..... | 20 |
| Aftercare Services..... | 21 |
| Child Welfare Agencies' Role in Aftercare Services..... | 22 |
| Social Workers, Mental Health Providers, and Victim Services Providers..... | 22 |
| Schools and Educational Programs..... | 23 |
| Health Care System | 24 |
| Establishing Safe Residential Placement of Foster Children Who Have Experienced Sex Trafficking—Criteria and Guidelines | 25 |
| Training Guidelines for Caregivers | 27 |
| Conclusion | 30 |
| Appendix A. National Advisory Committee on the Sex Trafficking of Children and Youth in the United States..... | 32 |
| References..... | 33 |



INTRODUCTION

Sex trafficking of children and youth is an increasingly prevalent issue that recently gained more exposure with the passing of the Preventing Sex Trafficking and Strengthening Families Act of 2014 (P.L. 113–183). Within this Act, Congress established the National Advisory Committee on the Sex Trafficking of Children and Youth in the United States (the Committee) to advise on policies related to sex trafficking specific to children and youth. In addition, the Committee was established to provide states and territories with evidence-based training tools and guidance on best practices for identifying children and youth who may be experiencing sex trafficking, best practices in case management, and resources to states and local communities on best practices in cross-agency collaboration (Charter: National Advisory Committee on the Sex Trafficking of Children & Youth in the United States, 2017). This literature review provides the Committee with an overview of the literature on sex trafficking of children and youth in the United States that can be used to:

- Make recommendations for administrative or legislative changes necessary to use programs, properties, or other resources owned, operated, or funded by the federal government to provide safe housing for children and youth who have experienced of sex trafficking
- Share best practices and recommendations with state governors and child welfare agencies and others who work with children and youth who have experienced sex trafficking (P.L. 113-183)

This literature review may also help determine gaps in literature that can provide guidance for further research and development to support states in their efforts to combat sex trafficking of children and youth in the United States.

Federal Laws Pertaining to Sex Trafficking of Children and Youth in the United States

Victims of Trafficking and Violence Protection Act of 2000 (P.L. 106-386), reauthorized in 2003, 2005, 2008, and 2013

Preventing Sex Trafficking and Strengthening Families Act of 2014 (P.L. 113–183)

Justice for Victims of Trafficking Act of 2015 (P.L. 114–22)

Organization of This Report

This report is organized to include:

- An introduction and background of sex trafficking of children and youth in the United States, including federal laws passed, background and purpose of the Committee, and limitations of this study
- Multidisciplinary research and promising, evidence-based models and programs, including strategic plans and protocols, to identify children and youth who have been trafficked and those at risk for trafficking
- Multidisciplinary strategies to manage cases and improve services
- Criteria and guidelines for safe residential placement for foster children who have experienced sex trafficking
- Training guidelines for caregivers serving children and youth outside the home
- Conclusion



Each section includes a list of recommendations for the Committee to consider in providing recommendations and advising the Attorney General and the Secretary of Health and Human Services in further strengthening the services offered to help prevent sex trafficking of children and youth in the United States.

Study Limitations

This study confronted challenges and limitations, which should be considered when reviewing the findings and recommendations presented in this report, including the following:

Condensed timeline. This study provides a high-level overview of what may be useful to the Committee in its charge to meet the requirements of P.L. 113–183. The short timeline for this study (approximately 2 months) potentially affected the depth and breadth of the data collected and the data analyses for research and evidence in the sex trafficking of children and youth. Because of this short timeframe, information on promising practices and current initiatives are taken directly from the websites and has not been paraphrased. Hyperlinks and references are included for further study, at the discretion of Committee members.

Availability of evidence-based initiatives. There is a lack of research and studies on programs that work and on specific research on sex trafficking of children and youth in the United States. While many initiatives, trainings, and materials have been developed, very few have empirical evidence of working, nor do they align with any long-term outcomes of children and youth (Sapiro et al., 2016).

Limited search parameters. Due to the purpose of this literature review and its short timeframe, studies were limited to those focusing on programs and initiatives in the United States within the past 10 years.

Summary of the Study Approach

To start researching sex trafficking of children and youth in the United States, we started with human trafficking because very little research has been conducted specifically on children and youth (Fong & Cardoso, 2010; Sapiro et al., 2016). Searches included current websites and laws pertaining to human trafficking to see if any information was available specifically on children and youth. Then, using Google Scholar, searches were conducted using the following search topics as a minimum:

- Human trafficking of children and youth in the United States
- Best practices in human trafficking programs
- Training guidelines in human trafficking
- Residential placement of foster children
- Sex trafficking of children and youth

Studies and information found were then categorized in one of the four areas that addressed the following overarching research questions:

1. What multidisciplinary research and promising, evidence-based models and programs, including strategic plans and protocols, are available to identify children and youth who have been trafficked and those at risk for trafficking?
2. What multidisciplinary strategies are in use to manage cases and improve services?



3. What, if any, criteria and guidelines exist for the safe residential placement for foster children who have experienced sex trafficking?
4. Do any training guidelines or materials exist for caregivers serving children and youth outside the home?

HUMAN TRAFFICKING: HISTORY AND BACKGROUND

The intense focus on human trafficking is fairly new and did not get significant attention until the passing of the Victims of Trafficking and Violence Protection Act in 2000 (106th U.S. Congress, 2000; Institute of Medicine and National Research Council of the National Academies, 2013). However, human trafficking has a much longer history but very little research was conducted before 2000. In 2014, it is estimated that human traffickers earned as much as \$150 billion, making it the second largest crime financially, surpassed only by the sale of drugs. Also in 2014, there were an estimated 20.9 million victims of human trafficking worldwide—5.5 million of those were children (Sarkisian, 2015). The exact number of children who are experiencing sex trafficking in the United States is difficult to determine because very little accurate data is available (Finklea, Fernandes-Alcantara, & Siskin, 2015; Fong & Cardoso, 2010; Institute of Medicine and National Research Council of the National Academies, 2013).

All 50 U.S. states have now begun to address human trafficking at the state and local levels (Ferrell, 2013). With the passage of P.L. 113–183 (113th U.S. Congress, 2014) a specific focus on child welfare responses to sex trafficking of children and youth was established. Congress also introduced more than 20 bills in the 113th Congress related to children and youth trafficking (Gluck & Mathur, 2014). Very few studies and programs concentrate exclusively on children and youth (Fong & Cardoso, 2010). The following sections will look at promising practices at the federal, state, and local levels as well as identify what child welfare agencies; social service providers; health care and mental health providers; victim service providers; court systems; schools; the gaming, hospitality, and entertainment industries; and businesses are doing to prevent human trafficking. Any collaborative strategic plans that currently exist will also be discussed.

Federal Agencies Addressing Human Trafficking

[Administration of Children and Families Office on Trafficking in Persons](#)

[Department of State Office to Monitor and Combat Trafficking in Persons](#)

[Department of Defense Combating Trafficking in Persons](#)

[Department of Education](#)

[Department of Homeland Security](#)

[Department of Labor Bureau of International Affairs](#)

[Federal Bureau of Investigation](#)

[Department of Housing and Urban Development](#)

[Department of Justice](#)



MULTIDISCIPLINARY RESEARCH AND PROMISING, EVIDENCE-BASED MODELS AND PROGRAMS TO IDENTIFY CHILDREN AND YOUTH WHO ARE TRAFFICKED AND THOSE AT RISK FOR TRAFFICKING

Identifying vulnerable individuals of human trafficking, particularly children and youth, is one of the more challenging aspects of this unique crime. Because sex trafficking is a clandestine operation, identification can be difficult (U.S. Department of Justice, 2017; Clawson & Grace, 2007). Identification is difficult for several reasons, including lack of self-identification as a person who has been trafficked, lack of training and education about trafficking, and fear of negative retribution if their trafficker is reported to law enforcement (Moosy, 2009).

In many instances, both minors and adults who are trafficked have been kept in seclusion and often coached by their trafficker that police are bad, and they are often taught to avoid the police or they will be thrown in jail. Traffickers exploit these fears by threatening the individual with arrest, detention, or deportation if encountered by authorities. In some cases, the individual is attempting to escape other problems in his or her life that the trafficker exploits to ensure compliance, such as an abusive family, drug addiction, or extreme poverty (U.S. Department of Justice, 2017).

Additionally, because of the challenges of approaching children and youth who have been trafficked for sex, many local communities still see these youth who come through the juvenile justice system from a criminal perspective—not a child welfare perspective. Often, these youths do not see themselves as being trafficked for sex and refuse to get help (Clawson & Grace, 2007). Therefore, the challenges of identifying individuals who have been trafficked for sex requires a collaboration of agencies to work together and understand that these individuals need help, not incarceration. In one case

study, the single most effective best practice for identification acknowledged was the basic premise that if a person is involved in prostitution and he or she is under 18 years of age, then he or she is automatically considered a person who has been trafficked, not a criminal (Gresham, 2015).

Understanding and recognizing that several different factors lead to children being trafficked for sex and ending up in the child welfare system can inform policymakers on what resources service providers need to identify victims (Gluck & Mathur, 2014). Children and youth who are experiencing or have experienced sex trafficking often come into contact with several professionals who help

Risk Factors for Children and Youth Who are Trafficked for Sex

- Age (especially 12–16 years)
- Runaway and homeless
- History of sexual or physical abuse or neglect
- Dysfunctional families (substance use, criminality, violence)
- Interactions with CPS or juvenile justice system
- Lesbian, gay, bisexual, transgender, queer, or questioning (LGBTQ)
- Substance use or behavioral or mental health issues
- Learning disabilities
- Living in high-crime areas, poverty, transient male populations
- Living in countries with political or social unrest or corruption
- Living in societies with gender bias and discrimination or glorification of pimp culture

Source: Greenbaum, J., Crawford-Jakubiak, J. E., & Committee on Child Abuse and Neglect. (2015). Child sex trafficking and commercial sexual exploitation: Health care needs of victims. *Pediatrics*, 135:566–74.



them, yet often these professionals work in a vacuum with no knowledge of what other resources the youth has accessed. Often, they may not have the appropriate training in identifying individuals who have been trafficked. Because of this, a multidisciplinary approach is needed to improve identification of those who have been trafficked or are at risk of being trafficked and improve service delivery, build awareness, address legislative and regulatory gaps, conduct specialized training of first responders, and create funding streams to support multidisciplinary interagency task forces and specialized services to effectively address the unique needs of children and youth (Bounds, Julion, & Delaney, 2015).

Another problem identified in the literature is the failure to discuss the identification of children and youth who have experienced sex trafficking. Proactive efforts are needed for a more streamlined and research-based way to identify children and youth who have been sexually exploited (Muraya & Fry, 2016).

As more research emerges about children and youth who have experienced sex trafficking, more information is coming together about identifying this group and the risk factors that make children and youth targets for sex trafficking. However, very little research exists with no studies on evidence-based multidisciplinary strategies (Fong & Cardoso, 2010; Macy & Johns, 2011).

Screening Tools

Identifying individuals who may be trafficked for sex falls on the first responders in communities. Law enforcement, doctors, teachers, social workers, and juvenile justice providers all come into contact with potential sex trafficking cases (Okech, Morreau, & Benson, 2012). If a person is suspected of being trafficked for sex, screening and identification occurs by completion of an assessment screening tool.

While many agencies and programs have developed ways to screen for potential sex trafficking, very few, if any, are designed to be used exclusively for children and youth, and there are few validated screening tools for health care providers or other first responders to use when evaluating children and youth who have been trafficked and those at risk for trafficking (Tracy & Macias-Konstanto, 2017; Shandro, et al., 2016; Greenbaum, 2014; Macy & Johns, 2011; Dank, et al., 2017).

While training and awareness of human trafficking is helping increase identification, those who may come into contact with individuals who have been trafficked or at risk for trafficking—public health professionals, law enforcement, and others—still struggle to properly identify these individuals that walk through their doors. Several assessments for identifying human trafficking have been developed and tested, but these assessments are often intended for use in a criminal justice or research setting (or require a clinical or forensic interviewing background) and include invasive and in-depth questions about the recent traumatization.

Examples of Screening Tools in Use but Not Empirically Validated

[Human Trafficking Screening Tool \(HTST\)](#)

[Comprehensive Human Trafficking Assessment Tool—National Human Trafficking Resource Center](#)

[Commercial Sexual Exploitation Identification Tool—WestCoast Children's Clinic](#)

[Human Trafficking Screening Tool—Ohio Human Trafficking Task Force](#)



The [Urban Institute](#) recently released a report on a tool designed to be used with young people involved in the child welfare (CW) and runaway and homeless youth (RHY) systems. The Human Trafficking Screening Tool (HTST) was pretested with 617 RHY- and CW-involved youth. The 19-item HTST was embedded in a longer Life Experiences Survey, along with a 6-item short-form version, the HTST-SF. The full HTST took approximately 2 minutes to complete, while the HTST-SF took less than a minute. Based on the findings, the screening tool is accessible to youth and easy to administer, and both the full-length tool and the shorter version were effective in identifying youth who were trafficked in RHY and CW systems, though additional research with more youth is needed (Dank et al., 2017).

In 2014, WestCoast Children's Clinic developed the Commercial Sexual Exploitation–Identification Tool (CSE-IT) with the input of more than 100 survivors and service providers. In 2016, the tool was validated with data from a 15-month pilot to ensure it accurately identifies youth who have clear indicators of exploitation. The screening results showed that 635 youth, or 11.5 percent of the youth who were screened, have clear indicators of exploitation. Since 2015, the tool has been used collaboratively with 77 agencies in 3 states. As of June 2017, WestCoast has trained 4,000 service providers to recognize the signs of exploitation. These providers screened 12,500 youth and identified 1,500 youth with clear indicators of exploitation (Basson, 2017).

Several other screening tools exist, with many organizations and states developing their own screening tools. However, very few focus on children and youth and have empirical evidence of being able to identify children and youth who may be trafficked for sex. More research should be conducted to identify a screening tool that shows evidence of successfully identifying children and youth who may have been trafficked and that can be used across multiple disciplines.

Strategic Plans and Task Forces to Strengthen Cross-Agency Collaboration: Federal Level

The federal government addresses human trafficking across multiple agencies, but the efforts are sporadic and disjointed and face many challenges (Foot, 2016; Bounds, Julion, & Delaney, 2015). Combating human trafficking, and focusing on children and youth in particular, takes collaboration not only across federal, state, tribal, and local government agencies, but also at the local level with businesses, nonprofits, faith-based organizations, schools, and anyone coming into contact with children and youth (National Association of Attorneys General, 2012).

In an effort to strengthen cross-agency collaboration, the Federal Strategic Action Plan on Services for Victims of Human Trafficking in the United States 2013–2017—a collaborative effort involving more than 15 agencies across the federal government—was created in 2014 (President's Interagency Task Force to Monitor and Combat Trafficking in Persons, 2014). The plan outlines more than 250 action items for victim service improvements that can be achieved over a 5-year period. [The Federal Strategic Action Plan on Services for Victims of Human Trafficking in the United States: Fiscal Year 2016 Status Report](#) provides the most recent updates to all goals and objectives and could be very useful to the Committee in its work in identifying best practices in cross-agency collaboration.



The [President's Interagency Task Force \(PITF\) to Monitor and Combat Trafficking in Persons](#) consists of 15 departments and agencies across the federal government that are responsible for coordinating U.S. government-wide efforts to combat trafficking in persons. The PITF meets annually and is chaired by the Secretary of State. Many federal agencies list resources on their websites and fund community-based programs to address child sex trafficking.

The PROTECT Our Children Act of 2008 requires the Attorney General to develop and implement a [National Strategy for Child Exploitation Prevention and Interdiction](#) (National Strategy). The first National Strategy was published in 2010 and a second National Strategy, released in 2016, builds on that work. The National Strategy is a culmination of a year of discussions among members of an interagency working group convened by the National Coordinator for Child Exploitation Prevention and Interdiction at the U.S. Department of Justice (DOJ). The National Strategy first discusses the work of federal law enforcement agencies and prosecutors since 2010 as well as other agencies and offices that play important roles in this work by supporting victims; providing grants to state, local, and tribal governments and nonprofit partners; and educating the public about the dangers of child exploitation and the work of the nongovernmental organization (NGO) National Center for Missing & Exploited Children (NCMEC). Second, it provides a threat assessment that addresses the nature and scope of the problem and updates the assessment contained in the 2010 National Strategy. Third, it lays out plans for continuing the fight against child exploitation in four key areas: investigations and prosecutions, outreach and education, victim services, and policy initiatives. Fourth, the National Strategy has a section dedicated solely to child exploitation in Indian country, as the issues there are often unique. For example, in one study, it was found that American Indian and Alaska Native (AI/AN) children and youth are five times more likely than their peers to be trafficked for sex (Gluck & Mathur, 2014). Finally, a series of appendixes include statistics on federal prosecutions; detailed tables of information on the Internet Crimes Against Children Task Force Program funded by DOJ; research on child exploitation funded by DOJ; a summary of the survey on which the threat assessment is based; and the text of DOJ legislative proposals. Throughout the National Strategy, case studies are included as examples of child exploitation prosecutions brought by DOJ (U.S. Department of Justice, 2016).

Federal, State, and Local Initiatives to Identify Children and Youth Who are Trafficked and Those at Risk for Trafficking

Federal Initiatives

[Project Safe Childhood](#) (PSC) is a nationwide initiative to combat the growing epidemic of child sexual exploitation and abuse. Launched in May 2006 by DOJ and led by the Executive Office for U.S. Attorneys (EOUSA) and the Criminal Division's Child Exploitation and Obscenity Section (CEOS), PSC marshals federal, state, and local resources to better locate, apprehend, and prosecute individuals who exploit children via the Internet as well as identify and rescue them. With support from EOUSA and CEOS, each U.S. Attorney guides the law enforcement community in his or her district to work as a cooperative team to combat the sexual exploitation of children. Each USAO has a PSC coordinator, an experienced Assistant U.S. Attorney (AUSA) who provides a single point of contact for law enforcement agencies investigating any federal child sexual exploitation crime. (The PSC coordinator may or may not also be the human trafficking coordinator).



The National PSC coordinator at EOUSA supports the work of AUSAs who prosecute child exploitation offenses. PSC prosecutors communicate extensively with CEOS and each other through the PSC listserv and through trainings at the NAC, capitalizing on the collective expertise of the PSC network of individuals committed to fighting child exploitation. (U.S. Department of Justice, 2017). PSC provides a platform to continue to bring together federal, state, local, and tribal law enforcement in a comprehensive and unified response to the abuse and exploitation of minors.

In 2003, the FBI's Criminal Investigative Division, in partnership with the CEOS of DOJ and NCMEC, formed the [Innocence Lost National Initiative](#), which is designed to address the growing problem of children forced into prostitution. This program brings state and federal law enforcement agencies, prosecutors, and social service providers from around the country to NCMEC, where the groups are trained together. In addition, CEOS has reinforced the training by assigning prosecutors to help bring cases in those cities plagued by child prostitution. Since its inception, the initiative has led to the recovery of more than 3,400 children—some as young as 9 years old. The investigations and subsequent convictions have resulted in lengthy sentences, including multiple 25 years to life sentences, and the seizure of more than \$3 million dollars in assets. In October 2012, the Crimes Against Children program and the Innocent Lost National Initiative merged to form the Violent Crimes Against Children program in the Criminal Investigative Division. The program continues the efforts of both former iterations, providing centralized coordination and analysis of case information that is national and international in scope, requiring close cooperation not only among FBI field offices and legal attachés but also with state, local, and international governments.

[Operation Cross Country](#) is part of the FBI's Innocence Lost National Initiative, which began in 2003. Since its creation, the program has resulted in the identification and recovery of more than 6,500 children from child sex trafficking and the prosecution of countless traffickers, more than 30 of whom have received life sentences for their crimes. However, there is much criticism about this program, with some saying it targets adults more than children and that statistics are not accurate (Rosenberg, 2017; Brown, 2017).

[Child Exploitation Task Forces \(CETFs\)](#): Child sexual exploitation investigations—many of them undercover—are conducted in FBI field offices by CETFs, which combine the resources of the FBI with those of other federal, state, and local law enforcement agencies. Each of the FBI's 56 field offices has worked investigations developed by the Violent Crimes Against Children (VCAC) program, and several of the FBI legal attaché offices have coordinated with appropriate foreign law enforcement partners on international investigations. Many of these investigations are also worked in coordination with Internet Crimes Against Children (ICAC) task forces, which are funded by DOJ. Furthermore, training is provided to all law enforcement involved in these investigations, including federal, state, local, and foreign law enforcement agencies.

Out of the efforts to strengthen cross-agency collaboration, the [Blue Campaign](#) was started under the U.S. Department of Homeland Security's (DHS) efforts to combat human trafficking. Working in collaboration with law enforcement, government, NGOs, and private organizations, the Blue Campaign strives to protect the basic right of freedom and to bring those who exploit human lives to justice. Through the Blue Campaign, DHS raises public awareness about human trafficking, leveraging formal partnerships and making awareness-raising resources available to educate the public to recognize human trafficking and report suspected instances. The Blue Campaign also



offers training to law enforcement and others to increase detection and investigation of human trafficking and to protect those who have been trafficked and bring suspected traffickers to justice.

State Initiatives

Most states' efforts toward human trafficking are spread across several agencies, with some state governors addressing the issue. While many states have taken steps to address human trafficking in general, some specifically address sex trafficking of children and youth. One example of addressing human trafficking in general is South Carolina, which has developed a state plan to address human trafficking. The [South Carolina Human Trafficking Task Force](#) was legislatively mandated to discuss and evaluate the problem of human trafficking in South Carolina and to develop strategies to use in the fight against this growing problem. [The 2016 Annual Report](#) provides the most comprehensive look at the programs, data, and funding in South Carolina around human trafficking.

Several states have enacted legislation and initiatives to specifically address trafficking of children and youth. In 2015, Texas Governor Greg Abbott called for a statewide effort to help this population. The 84th legislature responded by passing HB 10 and HB 1446, which established the [Governor's Child Sex Trafficking Team](#) (CSTT). The legislature also appropriated \$5.67 million to support CSTT's work, the majority of which will be used to fund victim services (Office of the Texas Governor, 2017).

Since 2012, the Governor's [Ohio Human Trafficking Task Force](#) (Governor's Task Force) has worked to marshal the resources of state agencies to help identify individuals who have been trafficked. In response to addressing trafficking of children and youth, Ohio Department of Job and Family Services administers a human trafficking training for foster care parents and requires human trafficking training for all new caseworkers. HB 130, signed into law in 2014, allows termination of parental rights of a parent convicted of trafficking his or her own child and requires school personnel to receive human trafficking training. The Task Force also called for a coordinated effort to identify a statewide provider network to serve as the first response system for minors who have been trafficked.

As a result, the Ohio Department of Job and Family Services issued a 2-year grant to the Ohio Network of Children's Advocacy Centers (ONCAC) in July 2013 and again in 2015. Over the initial grant period, \$523,000 was provided to 26 children's advocacy centers to (1) train multidisciplinary teams, (2) provide direct services to minors who have experienced trafficking, (3) develop and identify important community resources, (4) provide community workshops on human trafficking, (5) partner with statewide actors to revise the human trafficking response protocol for minors, and (6) link each children's advocacy center with the regional Ohio Network of Anti-Human Trafficking Coalitions. Today, the state partnership with children's advocacy centers is a cornerstone of the Governor's Task Force priority to identify and serve exploited children and youth. Between July 2013 and September 2016, Ohio's children's advocacy centers have identified 251 children and young adults who had been trafficked and referred them for services. The coalition is made up of more than 150 social service organizations, law enforcement agencies, churches, advocacy groups, healthcare organizations, legal aid clinics, and community organizations working together to raise awareness about human trafficking and to rescue individuals from exploitation.



The driver for implementing best practices at the state level is adequate legislation that follows research and evidence and provides adequate funding. The [Protected Innocence Challenge](#) is based on the Protected Innocence Legislative Framework, which was informed by research, performed by Shared Hope International, and compiled in *The National Report on Domestic Minor Sex Trafficking*. Recognizing that most of the gaps in responding to domestic minor sex trafficking must be addressed at the state level, the Protected Innocence Legislative Framework sets out the basic policy principles required to create a safer environment for children. According to the report, the steps necessary to create this safer environment are (1) preventing domestic minor sex trafficking through reducing demand, (2) rescuing and restoring victims through improved training on identification, (3) establishing protocols and facilities for victim placement, (4) mandating appropriate services and shelter, and (5) incorporating trauma-reducing mechanisms into the justice system. Broken systems of criminal justice and child welfare responses to victims must also be fixed to ensure that commercially sexually exploited children are treated as victims and receive access to justice (Shared Hope International, 2016).

Local Initiatives

The direct work and impact on children and youth who have been sexually trafficked happens at the local level. However, due to the clandestine nature of sex trafficking of children and youth, first responders in local communities often face difficulties when attempting to identify youth who have been trafficked or sexually exploited. The biggest difficulty first responders have in identifying children and youth who have experienced sex trafficking is they often do not have the training or knowledge to know the signs and risk factors. Direct services, training of first responders and caregivers, and services such as housing, medical and mental health care take place in local communities. While many initiatives take place in local communities across the country, not much evidence-based research on best practices has been done to date (Fong & Cardoso, 2010; Stoklosa, Dawson, & Willia, 2017; Institute of Medicine and the National Research Council, 2013; Institute of Medicine and National Research Council of the National Academies, 2013).

Funding streams generally start at the federal level and then are allocated to the states, with local programs delivering much needed services. Additionally, many direct service providers are nonprofits and receive donations and grants. One successful example is the INTERVENE intake process, a pilot project jointly sponsored by Portland State University, the YWCA of Vancouver, WA, and Shared Hope International. During a 3-and-a-half-month pilot period, 535 youth were admitted to detention at the Clark County Juvenile Detention Center and were asked a series of questions to determine whether they might be DMST victims. Forty-seven youth were flagged and referred to receive additional levels of assessment, resulting in six being identified as youth who had been trafficked. These youth were then provided with targeted services and access to law enforcement, which resulted in the investigation and prosecution of two traffickers. The INTERVENE tool has since been adopted by other youth detention and residential crisis centers (Zillah, 2011).

Another example of collaborating at the local level is New York City. In 2012, the New York City's child welfare and juvenile justice agency, the Administration for Children's Services (ACS), released a [comprehensive policy regarding assessment and safety planning for commercially sexually exploited children](#). The policy provides guidance to staff on how to identify, engage, and support youth who have been trafficked and those at risk for trafficking. In particular, it provides information on identifying risk factors, sample screening questions, and guidance on safety and service planning.



In addition, ACS has utilized the specialized law enforcement expertise of more than 100 investigative consultants, led by a former Commanding Officer of the New York City Police Department's Special Victims Division. These retired law enforcement professionals assist ACS's child protection specialists with various investigative activities such as locating at-risk children and families, interviewing subjects, fact gathering, and coordinating a response with law enforcement. A case involving suspected sexual exploitation triggers an alert to the investigative consultants who utilize various databases, social media sites, and internet resources to assist workers in identifying and locating trafficked children.

Initiatives to Combat Human Trafficking in the Gaming, Hospitality, and Entertainment Industries

The gaming, hospitality, and entertainment industries have become a haven for sex trafficking. Hotels, bars, and casinos have been identified in law enforcement cases investigating sex trafficking of minors. In a study of police reports of 67 human trafficking-related cases prosecuted in King County (Seattle) between October 2008 and January 2012, about 63 percent of the reports cite hotels and/or motels as locations where the crimes took place; 72 percent of the victims named in these cases were children (BEST Alliance, 2013).

In 1998, [End Child Prostitution, Child Pornography, and Trafficking of Children for Sexual Purposes \(ECPAT\)](#) developed The Code of Conduct for the Protection of Children from Sexual Exploitation in Travel and Tourism (The Code), a series of guidelines and tools for the travel and tourism industry to combat child sex tourism. The Code is a multistakeholder initiative with the mission to provide awareness, tools, and support to the tourism industry to prevent the sexual exploitation of children. Within 10 years, 900 companies from 34 countries had signed on as members. A separate nonprofit organization formed in 2004, [The Code.Org](#), furthers this work. The organization's website hosts a public online database for consumers to research travel and tourism companies and their codes of conduct. This dual-pronged strategy makes consumers an active partner in this effort to reduce the risk of child sex trafficking (Shelley & Bain, 2015).

Many hotels have begun to adopt policies such as codes of conduct and staff training on trafficking and participate in these organizations in an effort to halt human trafficking. [Caesars Entertainment](#), which operates 47 casinos in 13 U.S. states and 5 countries, strongly supports eliminating human trafficking and has made a commitment to the [UN Guiding Principles on Business and Human Rights](#) and the [Protocol to Prevent, Suppress and Punish Trafficking in Persons](#). They maintain a focus on preventing modern slavery in all its forms and advancing policies and programs that support individuals who have been trafficked. They are founding partners of the [Businesses Ending Slavery and Trafficking \(BEST\) Employers Alliance](#), formed in 2015, and partners with the [American Gaming Association \(AGA\) CSR Committee](#), which includes a focus on addressing human trafficking in the gaming industry.

The [Association of Club Executives \(ACE\)](#) is a federally registered trade association for America's licensed adult nightclubs. ACE helps to protect and serve its member clubs and affiliate state club owner associations by providing and sharing relevant political and legal information, resources, and referrals. In 2010, ACE established [Club Operators Against Sex Trafficking \(COAST\)](#) in an effort to combat human trafficking by working with law enforcement agencies and through its education



campaign. This campaign teaches ACE members about the problem of human trafficking and action steps to take to recognize, report, and rescue individuals that have been trafficked. Since its inception, COAST has trained more than 300 members of the adult nightclub industry to go out into the world as vigilant “eyes and ears” against human trafficking.

Other Business Industries

Other business industries can play a crucial role in helping to prevent sex trafficking. Through their corporate mission, vision, and values, businesses that may come into contact with individuals who have been trafficked can bring an awareness of this issue and provide training and resources to employees on how to identify persons who may be experiencing sex trafficking. Business leaders can also play a role in their communities by becoming involved in local outreach and awareness raising coalitions to stay on top of the prevalence of sex trafficking that may impact or involve their businesses. In addition to the gaming and entertainment industries, other industries such as food service, shipping, travel, and retail industries can come into contact with individuals trafficked for sex and should be educated on the signs to look for and reporting requirements. More and more, businesses are looking at the role they play in anti-trafficking efforts through training, education, and leadership initiatives; codes of conduct; supply chain management; and financial analysis, and they are realizing that it takes both top down and grassroots efforts (Shelley & Bain, 2015).

[Truckers Against Trafficking](#) (TAT) is an organization made up of individuals and companies in the trucking industry to inform members and other travelers of the basic issues involved in human trafficking. As the eyes and ears of our nation's highways, truckers are in a unique position to make a difference and close loopholes to traffickers who seek to exploit the transportation system for their personal gain. Among their programs is an industry training program that trains hundreds of thousands of industry members about the realities of domestic sex trafficking and how the trucking industry can combat it. They also educate through speaking all over the country, utilizing a robust social media program and industry-specific materials. TAT partners with trucking schools, carriers, the truck stop industry, shippers, manufacturers, and state and national trucking associations to spread the word.

Businesses can play a crucial role in preventing sex trafficking and exploitation of children and adults. Therefore, it is important that the business sector voluntarily become more visibly engaged in this issue before they are pressured. “Those companies that are already doing much and are

BEST: Businesses Ending Slavery and Trafficking

In 2011, a Washington-based foundation hosted a series of meetings to examine how trafficking might be prevented in the state. A clear consensus emerged: Businesses were central to the prevention and reporting of human trafficking, yet they were almost entirely absent in statewide and nationwide efforts and protocols. [BEST: Businesses Ending Slavery and Trafficking](#) was launched in March 2012 to fill that gap. BEST works to build strategic partnerships—developing resources and training to benefit businesses and innovating new solutions. Through their efforts, BEST developed principles to provide guidance for small- and medium-sized businesses that want to help prevent human trafficking. Numerous small- and medium-sized businesses have now signed on to the BEST principles.



unrecognized for their actions must be encouraged to come forth through public-private partnerships” (Shelley & Bain, 2015).

With the above in mind, in 2013, the World Economic Forum (WEF) launched the [Global Agenda Council Network Wide Human Trafficking Task Force](#), a cross-council collaboration formed among 86 global agenda councils. The Global Agenda Council Network was formed in 2008 to address the world’s most pressing global concerns and now currently includes more than 1,500 thought experts (Network of Global Agenda Councils Task Force on Human Trafficking, 2014). Utilizing the platform of the WEF, the task force was created to compile the most promising practices in the business community in anti-trafficking strategies and solutions in the six key sectors of travel and tourism, construction, retail, manufacturing, seafood processing, and financial services. A toolkit publication is under development, constructed of submissions from a variety of corporations and partner organizations, and a future workshop will be held (Shelley & Bain, 2015).

Recommendations on Identifying Children and Youth Who Are Trafficked and Those at Risk for Trafficking

- Identifying children and youth who have experienced sex trafficking needs important measures for increasing identification to include using consistent terminology, increasing public awareness, and developing uniform assessment tools that can be used with uniformity across programs that come into contact with potential trafficked youth that are age appropriate (Bounds, Julion, & Delaney, 2015).
- Identifying children and youth who are experiencing sex trafficking requires dramatic improvement in the United States (Center for the Human Rights of Children, 2011). Conduct a comprehensive analysis of states’ efforts to track and combat sex trafficking of children and youth. Analyze data collected and any initiatives supported by evidence.
- Include business industries when developing strategies for identification at the state and local levels.

MULTIDISCIPLINARY STRATEGIES TO MANAGE CASES AND IMPROVE AFTERCARE SERVICES FOR CHILDREN AND YOUTH

Once a child or youth has been identified as experiencing sex trafficking, comprehensive case management and aftercare services must be started. The case manager can be a source of continuity and emotional support for the child. Additionally, the case manager leads the case management team, which is a small group of professionals involved in meeting the psychological, legal, physical health, social welfare, educational, and economic needs of the survivor. It is a multidisciplinary team, with representatives from within the shelter/care organization and partner agencies (Muraya & Fry, 2016).

Although a growing body of research documents the far-reaching negative consequences of sex trafficking on

The [Trafficking Information Management System](#) is designed to assist Office for Victims of Crime trafficking service grantees in gathering, recording, analyzing, and reporting data. This tool serves as a central repository of information related to all activities under the OVC human trafficking grant initiative and enables OVC grantees to organize, standardize, and centralize data collection efforts on a wide variety of core performance measures.



children and youth, very little research documents the provision of aftercare services. Macy and Johns (2011) identified a need for more comprehensive guidelines based on a systematic review of aftercare services for who have been trafficked in United States. While their research yielded results that have helped fill the gap in the literature they identified, there is a need for further similar studies specifically for children. One study highlighted that aftercare services are offered in three stages, beginning with rescue then recovery and ending in successful reintegration of the children. These services need to be trauma informed and children's rights centered. Furthermore, to ensure the survivor benefits fully from the services, aftercare services need to have comprehensive case management systems as well as multidisciplinary, multiagency, and, where necessary, multinational coordination of efforts (Muraya & Fry, 2016). The evidence thus far clearly supports a child-centered, trauma-informed, collaborative, and continuously improving system of care (Center for Substance Abuse Treatment, 2014).

Child-Centered/Trauma-Informed Approach

Trauma-informed care is becoming more common when working with children and youth who have experienced sex trafficking. Trauma-informed care is an approach that (1) recognizes the impact of the trauma; (2) identifies recovery as a primary goal; (3) employs an empowerment model maximizing choice, control, and collaboration; (4) provides a respectful and safe atmosphere; (5) is culturally competent; and (6) involves the client in service feedback and evaluation (Heffernan & Viggiani, 2015). As more research is conducted, more communities and jurisdictions are using child-centered, trauma-informed approaches to help children and youth who experienced sex trafficking (Liles et al., 2016). It would be beneficial to have more empirical research studies on the impact of these types of approaches on the long-term outcome of children who have been trafficked for sex.

Understanding the unique needs of children and youth who have been trafficked for sex requires a process built on relationships and empathy and an understanding from their perspective (Hodge, 2014). "The child-centered approach seeks to minimize retraumatization associated with the criminal justice process by providing the support of victim advocates and service providers, empowering survivors as engaged participants in the process, and providing survivors an opportunity to play a role in seeing their traffickers brought to justice" (U.S. Department of State Office to Monitor and Combat Trafficking in Persons, 2017). In this manner, the victim-centered approach plays a critical role in supporting an individual's rights, dignity, autonomy, and self-determination, while simultaneously advancing the government's and society's interest in prosecuting traffickers to condemn and deter this reprehensible crime.

A trauma-informed approach includes an understanding of the physical, social, and emotional impact of trauma on the individual as well as on the professionals who help them. A trauma-informed approach includes victim-centered practices as it is implemented with trauma-impacted populations (Children's Bureau, 2015). A trauma-informed program, organization, or system realizes the widespread impact of trauma and understands potential paths for healing; recognizes the signs and symptoms of trauma in staff, clients, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, practices, and settings. Like a victim-centered approach, the priority is on the individual's safety and security and on safeguarding against policies and practices that may inadvertently cause retraumatization. (President's Interagency Task Force to Monitor and Combat Trafficking in Persons, 2014; Muraya & Fry, 2016).



A [webinar](#) delivered on September 19, 2017 recommended a number of key factors to successful therapy using a trauma-informed approach:

- Emphasize building self-esteem and empowerment
- Engage victim in the decision making process
- Provide leadership opportunities
- Help them develop valued social roles
- Offer alternative therapies that do not force verbalization of trauma experience initially such as music, art, equine-assisted therapy, drama, or yoga

HHS's Assistant Secretary for Planning and Evaluation produced an issue brief, [Treating the Hidden Wounds: Trauma Treatment and Mental Health Recovery for Victims of Human Trafficking](#) (Clawson, Salomon, & Grace, 2008), that addresses the trauma experienced by most individuals who have been trafficked, its impact on health and well-being, some of the challenges to meeting trauma-related needs of these individuals, and promising approaches to treatment and recovery.

In addition, the Federal Partners Committee on Women and Trauma released [Trauma-informed Approaches: Federal Activities and Initiatives](#) (Federal Partners Committee on Women and Trauma, 2013), a report that addresses the growing national interest in trauma-informed care, the work of the Federal Partners Committee, and the specific progress that participating agencies have made over 3 years (2010–2013). Developed with support from SAMHSA's National Center for Trauma-Informed Care, it clearly demonstrates the application of trauma-informed approaches across a wide range of settings and systems and encourages other governmental and nongovernmental agencies to implement a cross-sector, interagency, and intersystems' realization, recognition, and response to trauma.

An understanding of a victim-centered approach in the United States developed over time to respond to the needs of crime victims and continues to evolve as we learn new lessons and establish promising practices (National Human Trafficking Hotline, 2012; Sapiro et al., 2016).

Legal Advocacy

State and Local Courts

Youth who have experienced sex trafficking often end up in the juvenile justice system. In one study, California leads the nation in juvenile prostitution arrests, making up 50 percent of all U.S. juvenile prostitution arrests (Schneider, 2009). One example of providing a multidisciplinary strategy is California's development of specialized court systems to navigate the intersection of legal, mental health, and social service systems. These systems take a more therapeutic approach rather than a



punitive approach to helping these young victims. To be effective, the specialized court process involves a significant amount of cross-system collaboration. Collaborators include Juvenile Court, Office of the Public Defender, Office of the District Attorney, Probation, Child Welfare, children's representation (for dependents), mental health providers, Office of Education, and other local advocacy centers (Liles et al., 2016).

Although programs differ in structure and procedures, they tend to utilize similar principles, such as forming cohesive multidisciplinary teams. Additionally, they all employ these strategies: (1) training and capacity building, (2) a multisystem approach and cross-system coordination, (3) screening and assessment, (4) trauma-informed programming, (5) meaningful engagement and relationship development, and (6) creation of specialized services and treatment options). Currently, there is limited data describing the effectiveness of the specialized court and no data to indicate that these efforts help youth in disconnecting from sexually exploitive environments/relationships and promote a healthier lifestyle (Liles et al., 2016). However, this model of cross system collaboration shows promise for the legal system in advocating for children and youth who have been trafficked.

Safe Harbor Legislation

Children and youth who have experienced sex trafficking often become involved with the legal system at some point. Many states now are implementing safe harbor laws to help these young victims through the child welfare system rather than the juvenile justice system (Coalition to Abolish Slavery & Trafficking, 2013; Polaris, 2015). These laws help ensure that the child will be protected and not categorized in the juvenile justice system as having committed a crime; rather, they are provided services through the child welfare system, such as a safe place to stay, that help them overcome their victimization (Center for the Human Rights of Children, 2011). As of 2015, a total of 34 states have enacted some form of safe harbor laws, but each state varies on how they implement these laws and what services are provided (Polaris, 2015; Coalition to Abolish Slavery & Trafficking, 2013). Such laws alone were considered insufficient without adequate funding for necessary services. As a result, many well-meaning providers were going around the safe harbor laws by continuing to incarcerate commercially sexually exploited youth in the juvenile justice system regardless of safe harbor laws in place. While safe harbor laws passed in several states

County of Sacramento Specialized CSEC Court

In response to statewide encouragement to appropriately identify and serve CSEC youth, a Sacramento County juvenile court judge created a dedicated docket and specialized processes for the County. The courts function under the principles of "therapeutic jurisprudence," which promotes a nonadversarial, treatment-oriented approach while still upholding due process rights of the offender. The formation of the specialized court included countywide training and capacity building, use of a multisystem approach and cross-system coordination across multiple agencies, and a screening process for participation in the specialized court model (Liles et al., 2016).

Safe Harbor Legislation

Safe harbor laws were developed by states to address inconsistencies in how children who are exploited for commercial sex are treated. Under federal law, a child under age 18 who is induced into providing commercial sex is a victim of trafficking and must be treated as such. State laws criminalize adults who have sex with children under statutory rape laws; however, these laws were not consistently applied in cases where the adult purchased sex. This resulted in children—who are recognized under both state and federal law as victims of a crime—being arrested and convicted of prostitution. Safe harbor laws are intended to address the inconsistent treatment of children and ensure that these victims are provided with services under the child welfare system and not prosecuted under the juvenile justice system (Polaris, 2015).



are an improvement, all safe harbor laws should include the following eight components (currently, no state has all eight components):

- Children must never be arrested for prostitution, but rather, placed into protective custody.
- If a child is under 18 years of age, they should be immune from prosecution for commercial sex acts due to their developmental inability to consent. This component would put states on par with federal legislation and policy concerning sex trafficking.
- If an arrested child is charged, it should only be as a juvenile status offender.
- Status offenses and dependency laws should be amended, regardless of whether or not parents were complicit.
- Suspicions of human trafficking should require a mandate report to child protection services and a prompt investigation.
- Public child welfare must have a clear legal mandate to provide services, but only using specialized units.
- A mandate and funding should be specified for short-term secure safe houses, long-term residential facilities, and programs that police or child protection services can access.
- Children involved in human trafficking should be considered victims and listed as such in any legal records (Center for the Human Rights of Children, 2011).

While these strategies and initiatives may provide a framework for an effective system of protecting children and youth who have experienced sex trafficking, no comprehensive studies of safe harbor law implementation exist (Barnert, et al., 2016), and there have been no documented efforts of the development of a strategic plan focused specifically on children and youth. Additionally, very few studies look at the impact of these laws or initiatives. There may be efforts at the local levels; however, none were found during the research for this literature review. Consequently, more research and studies need to look at the impact of safe harbor laws nationwide.

The Justice for Victims of Trafficking Act (JVTA), signed into law on May 29, 2015, expands the Trafficking Victims Protection Act (TVPA) in four broad areas: (1) victims' services and benefits, (2) criminal justice, (3) domestic sex trafficking of children, and (4) inter-agency coordination and training. Specific to children and youth, the JVTA expanded the definition of "child abuse" under the Victims of Child Abuse Act of 1990 to include "human trafficking" and the production of child pornography. It also amends the Child Abuse Prevention and Treatment Act (CAPTA) to require states to include a child who is a trafficking victim under the state definition of "child abuse and neglect" and "sexual abuse" for CAPTA purposes. (U.S. Department of Justice, 2017).

Case Management

A key finding from the literature is that comprehensive case management is a crucial component in the provision of aftercare services to children and youth who have experienced sex trafficking (Muraya & Fry, 2016).

A comprehensive and coordinated case management framework identified by Muraya & Fry (2016) includes services and supports for safety; physical and emotional well-being; connections to services, peers, family, and community; and resources for self-sufficiency. This framework demonstrates what services are needed to ensure that young people are not only removed from



trafficking situations but given the resources for long-term positive outcomes. Measures of progress toward these goals represent possible outcome areas to be defined within future programming and evaluation (Gibbs et al., 2015; Maura & Fry, 2016).

One example of comprehensive case management is the United States Conference of Catholic Bishops (USCCB), which works with Lutheran Immigrant and Refugee Services (LIRS) to provide services to foreign national survivors of trafficking in the United States and its territories. USCCB/LIRS administers the program through partnerships with local social service organizations across the country by subcontracting with them to provide comprehensive case management services to survivors. They provide coordination, training, per capita funding, and monitoring to subcontractors and partner with experts in the field to provide specialized assistance (Center for the Human Rights of Children, 2011).

The needs for specialized services for survivors of sex trafficking should be specific to the needs of that child. Before other long-term needs could be addressed, young people who were still engaged with traffickers needed safety planning and crisis management, and runaway youth needed emergency shelter services and access to financial resources. Case management services by programs attuned to the complexity of trafficking engagement can ensure that young people are connected to acceptable services that are appropriate to their needs. While more evidence-based research is needed, there is general consensus that a multidisciplinary, trauma-informed approach embedded within a system of care model is needed (Ijadi-Maghssoodi, Cook, Barnert, Gaboian, & Bath, 2016).

Aftercare Services

Many initiatives have been started at all levels of government and through local and state agencies to provide aftercare services to children and youth who have been trafficked. However, due to limited funding and the recent (within the last 5 years) focus on sex trafficking of children and youth, evidence-based practices—those practices that have available scientific evidence to consistently improve measurable client outcomes for the treatment of human trafficking—have not been established (Fong & Cardoso, 2010; Sapiro et al., 2016).

Some research shows services provided to children and youth who have experienced sex trafficking should include mental health services to deal with the trauma endured, legal advocacy, meeting basic health and safety needs, and reintegration back into a healthy lifestyle (Bounds, Julion, & Delaney, 2015; Fong & Cardoso, 2010). Those in the child welfare system, including social workers and victim advocates, can play a crucial role in aftercare services to children and youth who have been trafficked.

[*Human Trafficking and Child Welfare: A Guide for Child Welfare Agencies \(2017\)*](#) is a bulletin intended for child welfare agency leadership and explores how child welfare agencies can support children who have been victimized as well as children who are at greater risk for future victimization. It provides background information about the issue, including its scope and relevant legislation and initiatives, and strategies that agencies can implement to address the trafficking of children. State and local policy and program examples are also provided.



Child Welfare Agencies' Role in Aftercare Services

Child welfare agencies consist of all services designed to ensure children are safe and that parents have the support they need to keep their children safe. They are responsible for ensuring children who are abused or neglected are supported with materials and resources to keep them safe so they can thrive (Child Welfare Information Gateway, 2012). Within the scope of child welfare agencies are a myriad of different services—from mental health to residential placement to child protection—often overlapping each other.

Child protective services (CPS) and the foster care system are part of the child welfare system and are on the front lines of assisting children and youth who are survivors of sex trafficking. Often, youth who have been trafficked come into contact with some aspect of the child welfare system. For example, a study by the Department of Children and Families in Connecticut found that out of the 88 children identified as victims of sex trafficking, 86 had been involved with child welfare services prior to being trafficked. The Los Angeles Probation Department also found that sex trafficking disproportionately affects children and youth in foster care, with nearly 60 percent of minors arrested on prostitution-related charges coming from the foster care system (Gluck & Mathur, 2014). Unfortunately, the need for these services often outweighs the availability. Child welfare services for all children are often severely underfunded in most local areas and states (Gluck & Mathur, 2014; Harrington, 2016). Consequently, there are gaps in services, and CPS staff are often not considering child trafficking when investigating child abuse cases (Center for the Human Rights of Children, 2011).

In fiscal year 2014, the Children's Bureau awarded funding to nine demonstration grants to help child welfare agencies respond to human trafficking through infrastructure building and multisystem approaches with local law enforcement, juvenile justice, courts systems, runaway and homeless youth programs, Children's Justice Act grantees, child advocacy centers, and other necessary service providers. The goal of these grants is to build greater awareness and a better response to child trafficking within the child welfare population.

Child welfare agencies are trained by law to address the needs of sex trafficking survivors. As such, it is important that those who work on the front lines such as child protective investigators and social workers receive support for their personal needs in order to prevent compassion fatigue (Casey Family Programs, 2014). In addition, minors who are sexually exploited should not be brought up on criminal charges because they are not of legal age to consent to sexual behavior and should be provided with services through the child welfare system instead of faced with criminal prosecution and detention (Gluck & Mathur, 2014).

Again, more evidence-based research and supporting data are needed to determine exactly what services are working in child welfare agencies to effectively address the needs of children and youth who have experienced sex trafficking (Gluck & Mathur, 2014; Casey Family Programs, 2014; Macy & Johns, 2011).

Social Workers, Mental Health Providers, and Victim Services Providers

Social workers, mental health providers, and victim services providers can be considered as part of the welfare system and play a crucial role in the aftercare services provided to children and youth who have experienced sex trafficking. The needs of children and youth who are survivors of sex



trafficking often go beyond the physical needs of safe placement and involve psychological care to deal with the trauma they endured. Addiction, suicidal tendencies, and unhealthy relationship issues can result from being sexually exploited (Hargreaves-Cormany & Patterson, 2016). Therefore, a coordinated approach to services is crucial to helping the child heal from sexual exploitation. Unfortunately, there are gaps in offering these services (Gluck & Mathur, 2014; Bounds, Julion, & Delaney, 2015), and the research and evidence-based studies are few since this is a fairly new field of study (Muraya & Fry, 2016; Casey Family Programs, 2014).

The National Sexual Violence Resource Center has created [Assisting Trafficking Victims: A Guide for Victim Advocates](#) (2012) specifically for Victim Advocates. This technical assistance guide provides information about the prevalence of sexual violence throughout various forms of human trafficking. The content of this guide is intended to support community-based advocates working in their outreach and service provision to individuals who have been trafficked. This guide includes information from the research on trafficking, a discussion of the role of advocates, and possible advocacy and collaborative strategies.

Research does point to a trauma-informed, child-centered approach that collaborates across agencies (Gluck & Mathur, 2014). More specific research and evidence-based practices need to be conducted to determine the specific roles these professionals play in helping to heal children and youth who have experienced sex trafficking and to try and resume a healthy life.

Schools and Educational Programs

Schools are recognized as valuable settings for prevention/intervention programs (Walsh & Murphy, 2003). The local school is the one institution in contact with virtually every family with children (Kruger et al., 2016). Schools should be seen as safe havens for children who have experienced sex trafficking, and teachers and school administrators should be educated on the identification, care, and reporting of children who have experienced sex trafficking.

Over the past five years, [Love146](#) has trained more than 3,000 professionals, giving them tools to prevent the trafficking of children and identify and support children who have been trafficked. Because Love146's U.S. Prevention Education efforts support a whole-system response, teachers and those who work with children and youth are trained to support children who may be at risk or experiencing exploitation. In addition, Love 146 also has a curriculum for youth, [Not a #Number](#), which is a five-module prevention curriculum designed to teach youth how to protect themselves from human trafficking and exploitation through information, critical thinking, and skill development. Not a #Number uses a holistic approach focusing on respect, empathy, individual strengths, and the relationship between personal and societal pressures that create or increase vulnerabilities.

[National Center for Homeless Education](#) developed a brief that provides educators with an overview of minor sex trafficking and suggests specific steps that schools can take to respond to signs of trafficking among its students. It also offers suggestions for how state coordinators for homeless education and local homeless education liaisons can help guide their states' and school districts' efforts to address trafficking within schools.



The U.S. Department of Education participated in the development of the Federal Strategic Action Plan on Services for Victims of Human Trafficking in the United States 2013–2017 (President's Interagency Task Force to Monitor and Combat Trafficking in Persons, 2014) and calls for training and awareness of those who work with this population. To answer this call, the Department of Education created *Human Trafficking in America's Schools*—a guide for educators to understand, identify, and work with children and youth who have experienced sex trafficking (Littrell, 2015).

While several states, for example, [Florida](#), [Texas](#) and [Maryland](#), have developed educational materials for teachers in an effort to help them identify children who are at risk of, or may be experiencing sex trafficking, these materials are not research or evidence based on what strategies are most effective in identifying children and youth who may be at risk of experiencing sex trafficking. While not within the scope and timeline for this review, a comprehensive analysis of each state's efforts would inform the Committee of state and local efforts to inform educators and ensure evidence-based best practices are being utilized.

Health Care System

One of the primary points of entry for children and youth who are involved in sex trafficking is the health care system. A 2011 study among 12 survivors of labor and sex trafficking revealed that half of them had seen a physician during their captivity (Baldwin et al., 2011). In a more recent study, of those who reported accessing health care services, 63 percent were seen in an emergency department, 29.6 percent went to Planned Parenthood clinics, and 19.4 percent presented to a women's health clinic (Lederer & Wetzel, 2014).

However, knowledge of human trafficking across the health care system appears to be lacking and there are no validated screening questions for human trafficking to ask in the health care setting (Gibbons & Stoklosa, 2016). In a study that involved 4 health care institutions in a major U.S. city, more than 97 percent of health care providers reported they had received no training in recognizing trafficking patients, and almost as many (87 percent) lacked confidence or were hesitant in their ability to recognize trafficking cases. In addition, 90.7 percent of physicians had never suspected that a patient of theirs was trafficked (Titchen et al., 2015).

Health, Education, Advocacy and Linkage (HEAL) is a united group of multidisciplinary professionals dedicated to ending human trafficking and supporting its survivors from a public health perspective. The [HEAL Trafficking and Hope for Justice's Protocol Toolkit](#) was designed to help professionals working in health care settings, such as emergency departments, hospitals, clinics, private offices, or school-based health centers, develop a protocol to respond to potential cases of human trafficking. The toolkit presents an ambitious, comprehensive approach to protocol development, portions of which may be adopted for particular contexts based on capacity. The document is based on existing guidelines and recommendations from experts in this field. While not designed exclusively for children and youth, it can be adapted to be used in an age appropriate manner.

Recommendations on Multidisciplinary Strategies to Manage Cases and Improve Aftercare Services for Children and Youth

- Collaborative and coordinated efforts need to continue, and more research is needed to determine evidence-based practices that can show the benefits of these programs in the long term. Clear contacts should be dedicated within agencies to answer questions about what



services are available to children and youth who have been trafficked and those at risk for trafficking. In addition, Memoranda of Understanding between agencies should be created so there is clear accountability of which agency handles a specific service (Gluck & Mathur, 2014). Ensure a comprehensive strategy that includes not only state and local child welfare experts but also law enforcement, businesses, and juvenile justice professionals.

ESTABLISHING SAFE RESIDENTIAL PLACEMENT OF FOSTER CHILDREN WHO HAVE EXPERIENCED SEX TRAFFICKING—CRITERIA AND GUIDELINES

Foster children are especially susceptible to sex trafficking. In one report, it was estimated that 60 percent of children—some as young as age 4—rescued from an FBI nationwide raid conducted across 70 cities were children from foster care or group homes (DeGarmo, 2017). The Los Angeles Probation Department also found that sex trafficking disproportionately affects children and youth in foster care, with nearly 60 percent of minors arrested on prostitution-related charges coming from the foster care system. In northern California, Alameda County reported that 41 percent of 267 victims identified were at one time part of the foster care system (Gluck & Mathur, 2014). While foster care was designed to be a temporary placement, many children linger in foster homes for years.

However, the research on safe residential placement of foster children who have been trafficked for sex is limited, and the number of placements that meet the unique needs of these individuals is very few (Office of Program Policy Analysis and Government Accountability, 2016; Casey Family Programs, 2014; Clawson & Grace, 2007; Liles et al., 2016; U.S. Department of Justice, 2016; Gluck & Mathur, 2014). In one study evaluation of a specialized court model, approximately 70 percent of the respondents mentioned that they would like to see more safe, stable, and positive placement options for youth who have been trafficked (Liles et al., 2016).

Children and youth who have been experienced sex trafficking have special needs and therefore should be provided residential placements that are developmentally appropriate and specific to their needs (Macy & Johns, 2011). Standards and criteria should include specially trained trauma-informed group homes and/or foster homes. “There needs to be a comprehensive systems response to treat these youth as victims and place them in the least restrictive placement that promotes safety, health, and well-being that isn’t detention” (Liles et al., 2016).

[Girls Educational & Mentoring Services \(GEMS\)](#) and [The SAGE Project \(Standing Against Global Exploitation\)](#) have adopted a peer support model that focuses on building the trust of the girls and ensuring that staff are sensitive and well-trained in aspects of sex-trafficking. These organizations often prioritize hiring former victims of trafficking as staff members (Gluck & Mathur, 2014).

Residential placements for children and youth who have experienced sex trafficking should help the child heal and recover from the trauma they have experienced. Some of these unique needs should include providing children space to play, places to display their artwork or other creations, and private space for those who need alone time (Armstrong, 2008). Programs that take a child-centered approach and are built on relationships and collaboration among a team also has shown to benefit the child (Liles et al., 2016).



There are no standardized federal guidelines or criteria to establish safe residential placement for foster children who have experienced sex trafficking; instead, it has been left up to states to set their own standards (Department of Health and Human Services, Office of Inspector General, 2000; Beltran & Epstein, 2012). According to a report from the Office of Inspector General, the model licensing standards are 17 years old and “the 15-year-old Model Licensing Law does not set out specific licensing standards and is not widely known. Further, although most States address most standards, there is some variability. Of the 34 key standards that we identified, only eight are addressed by all nine sample States.” (Department of Health and Human Services, Office of Inspector General, 2000). Existing research on residential placement of children and youth who have experienced sex trafficking highly recommends that minimum standards are set based on local, state, national, and/or international laws and regulations (Muraya & Fry, 2016; Beltran & Epstein, 2012).

One promising practice is [Youth for Tomorrow](#) (YFT) Girls Program just outside Washington, DC. YFT is the only facility in Virginia and in the mid-Atlantic region that works to offer safe and secure residential and specialized recovery service for girls ages 12 to 19 who have been sexually exploited/experienced sex trafficking. YFT professionals help girls who are victims of sexual abuse and trafficking to regain their lives through individual service plans that set weekly priorities and goals for each girl in their education, residence, counseling/therapy, supervision and safety, self-reliance, and relationships. More than 150 residential, therapeutic, and education staff provide professional services to the 100+ children, including residential treatment and supervision, case management, clinical services, nursing services, and education in the state and regionally accredited secondary school. A third of YFT staff are bilingual in Spanish and English.

Several states, especially those who have enacted safe harbor laws, issue annual reports on the progress of meeting the needs of foster children, including housing situations (Office of Program Policy Analysis and Government Accountability, 2016; Wasch et al., 2016). While New York was the first state to enact safe harbor legislation in 2010, one report noted that Minnesota and Illinois had the most comprehensive laws (Wasch et al., 2016).

In 2011, Minnesota passed Safe Harbor for Sexually Exploited Youth legislation that decriminalized prostitution offenses for youth under age 18. In 2013, Minnesota authorized funds to house sexually exploited youth (Minnesota Department of Human Services, 2014). These housing options include short-term emergency housing, screening for sex trafficking in foster and group homes and emergency shelters, residential homes, and safe harbor shelter as a temporary option for out-of-home care.

Recommendations on Safe Residential Placement of Foster Children Who Have Experienced Sex Trafficking

- Conduct a thorough review of safe harbor laws in each state to determine if they provide legislation and minimum standards for residential placement facilities for the safe placement of foster children who have been trafficked for sex.
- Conduct a literature review specifically looking at what criteria and guidelines should be considered when placing foster children who have experienced sex trafficking into the foster care system.



- Create national minimum standards for residential placement homes for foster children that includes an inspection component to ensure quality of care is provided. Include a training and technical assistance component to ensure the quality of care is maintained (Department of Health and Human Services, Office of Inspector General, 2000).

TRAINING GUIDELINES FOR CAREGIVERS

Children and youth who have experienced sex trafficking often come into contact with many professionals outside the home. Some of these professionals, such as medical professionals, child welfare professionals, and law enforcement professionals, may have limited contact while others have more permanency within the child's life. Teachers, residential home staff, foster care providers, and child care professionals are responsible for caring for children who have experienced sex trafficking for longer periods of time and can play a significant role in their well-being and healing from the trauma of sex trafficking. These caregivers can have a significant impact on these children and can provide much needed responsive care and guidance to help these children begin to heal from their victimization.

As of 2016, only 13 states have enacted laws that address education about human trafficking for practicing physicians and other professionals (Atkinson, Curnin, & Hanson, 2016). However, for many of these professionals, training guidelines and actual training have not been developed, standardized, or evaluated (McMahon-Howard & Reimers, 2013; Collins, Amodeo, & Clay, 2007; Beck et al., 2015; Titchen et al., 2015). As such, training guidelines should be established for these professionals, and a systematic series of training is needed to ensure they understand the unique needs of these children and youth who have experienced sex trafficking (Bounds, Julion, & Delaney, 2015).

In an assessment of safe harbor laws, only four of the nine states assessed establish training programs for responders to commercially sexually exploited children (Barnert et al., 2016). In another study, while most physicians and medical trainees place importance on knowing about human trafficking, they lack knowledge about trafficking and are not familiar with existing resources. A need remains for formal physician-specific human sex trafficking education in U.S. medical schools, residency programs, and hospital-based practices (Titchen et al., 2015). Additionally, health service workers, police officers, social workers, and other service providers in constant contact with children need awareness and training on children and youth who have experienced sex trafficking. One study revealed that a lot of these services providers are unaware of how to spot the symptoms of

SOAR to Health and Wellness—A Training for Health Care and Social Service Providers

Many individuals who have experienced trafficking come into contact with health care and social service professionals during and after their exploitation, but still remain unidentified. The [SOAR training](#) equips professionals with skills to identify, treat, and respond appropriately to human trafficking.

By applying a public health approach, SOAR seeks to build the capacity of communities to identify and respond to the complex needs of individuals who have experienced trafficking and understand the root causes that make individuals, families, and communities vulnerable to trafficking.



trafficking; as a result, some feel they have failed to identify potential individuals who have been trafficked (Muraya & Fry, 2016).

In response to the recommendation to raise awareness, in 2014, the Office of Juvenile Justice and Delinquency Prevention (OJJDP) funded the release of a series of guides targeted at different sectors of professionals to inform them about child sex trafficking and to identify solutions to address the problem. Each guide discusses the problem and barriers to victim and survivor identification within that sector, how professionals in the sector can help, and recommended response strategies specific to that sector. The guides are available to the health care, legal, and victim support services providers. The guides generally address training and identification and include toolkits (U.S. Department of Justice, 2016).

One of the challenges in training caregivers who may serve children and youth who have experienced sex trafficking is the high turnover rate among these professionals. For child welfare workers, such as CPS workers, the turnover rate has been documented as high as 60 percent (Auerbach, Schudrich, & Lawrence, 2013). Many factors contribute to high turnover, including low pay, high stress, and lack of training (Whitebook & Sakai, 2003; Kim & Kao, 2014). Consequentially, high turnover impacts children and youth who desperately need continuity of care among those who are closely working and caring for them (Collins, Amodeo, & Clay, 2007; Hargreaves-Cormany & Patterson, 2016). Training and re-training staff costs can also be very expensive for agencies often operating on small budgets. CPS caseworkers have been the subject of many training interventions, some with limited evaluative study (Butrymowicz & Mader, 2016; Collins, Amodeo, & Clay, 2007).

Health care professionals are often the first persons who may come into contact with children and youth who have experienced sex trafficking. While educational resources are available for this profession, very few studies exist to evaluate the effectiveness of these educational materials, and much more is needed to address the gaps in knowledge (Ahn et al., 2013; Cosgrove, 2016). According to one study, pediatricians and pediatric specialists such as adolescent medicine physicians have a unique opportunity to identify these patients. Most people who have experienced sex trafficking are women and girls, and many report gynecologic infection, pregnancy, and abortion. However, training programs are scarce and lack consistency among them, so it is likely that most respondents had no training (Titchen et al., 2015).

Law enforcement are also on the front lines of contact with children and youth who have experienced sex trafficking. One study reveals that most law enforcement officers in the study do not think human trafficking occurs in their jurisdictions, and few are prepared to identify and investigate such cases (Renzetti et al., 2015). No evidence was found that supported requiring law enforcement to have specific training on sex trafficking.

The Texas 83rd (2013) Texas Legislature passed [House Bill 1272](#), which requires the Texas Human Trafficking Prevention Task Force to work with the Texas Education Agency to train school personnel to identify and assist victims of human trafficking. The training, [Introduction to Human Trafficking for Education Professionals: Texas RISE to the Challenge](#), asks Texas education professionals to rise to the challenge in addressing human trafficking. However, no data is collected to assess the effectiveness of the training or how many persons were provided training.



Interdisciplinary training is an emerging model that allows for teams of professionals to receive the same training, thus understanding each of their roles in an effort to avoid duplicating services but also understanding the role each of them plays in helping children and youth. Several models have been evaluated and show promising results (Collins, Amodeo, & Clay, 2007).

An example of interdisciplinary training is the comprehensive approach in Pennsylvania. An integrated system of education and training is designed to promote best practices in child welfare coupled with the development of the statewide competency-based system that works to integrate university education with formal in-service training (Collins, Amodeo, & Clay, 2007).

One study recommended that health care providers develop a Quality Improvement Collaborative (QIC), a network of groups that conduct training and coordinate an evidence-based standards of training on human trafficking. The development of QICs could allow for a gathering of invested individuals to learn, reflect, and share strategies on how best to work with individuals who have been trafficked and those at risk for trafficking (Powell, Dickins, & Stoklosa, 2017).

Recommendations for Training Guidelines for Caregivers

- A thorough and comprehensive literature review should be conducted on what trainings are available to which groups of professionals who touch the lives of children and youth who have experienced sex trafficking. This review should also look at which trainings, if any, are research based and/or evidence based. Overall, more training is needed for first responders on not only identifying individuals who have been trafficked or at risk of trafficking, but also providing aftercare services (Center for the Human Rights of Children, 2011).
- An analysis is needed of the various professions (law enforcement, child welfare professionals, child care professionals, teachers, etc.) to determine if minimum standards or guidelines exist on what specific training is required for each profession. For example, most states have minimum standards of professional development for child care professionals, which often include training on child abuse and neglect. Do they require any specific training—either standalone or within another topic area such as child abuse—that teaches about sex trafficking of children and youth?
- The Committee should develop a comprehensive catalog of training available at the federal, state, and local levels. The [National Human Trafficking Training and Technical Assistance Center](#) provides a platform to house this catalog for an easy search for professionals seeking training.
- More training programs need to be evaluated to provide evidence of their effectiveness. Very few rigorous evaluations of training programs exist due to the cost and time needed to conduct a thorough evaluation (Collins, Amodeo, & Clay, 2007). Funding should be allocated to conduct comprehensive assessments and evaluations.
- Trainings and reporting of trafficking should be incentivized. Federal and state governments can give grants to ensure that providers and agencies are disseminating best practices for working with survivors of sex trafficking. In addition, incentives can be given to create better systems that effectively track a child's placement history so more data-driven research can be used to allocate resources (Gluck & Mathur, 2014).
- The Institute of Medicine (IOM) recommended raising public awareness and understanding of the problem through additional training for professionals who routinely interact with children (Institute of Medicine and the National Research Council, 2013).



CONCLUSION

Sex trafficking is an increasingly growing issue in the United States (Sabella, 2011). Sex trafficking of children and youth is also a growing problem. According to one study, 83 percent of confirmed U.S. sex trafficking incidents were U.S. citizens, and 40 percent were children and youth cases (Banks & Kyckelhahn, 2011). The FBI estimates that 100,000 children are sold for sex each year (Liles et al., 2016). Very little research has been conducted that examines specifically race or ethnicity. However, poverty is a risk factor for sex trafficking, which disproportionately impacts minorities (Butler, 2015; Bell, 2010). In 2009, approximately 32 percent of AI/AN children and youth lived in poverty. As a result, this group is particularly susceptible to trafficking (Gluck & Mathur, 2014). However, there are no real estimates of the exact number of children and youth who are experiencing sex trafficking.

Based on this literature review, trainings on sex trafficking of children and youth are being developed at the local and state level to meet the needs of different professionals. However, no set standards or guidelines exist for what should be included in training on sex trafficking, nor do many professionals who routinely come into contact with individuals who have been trafficked or at risk for trafficking have any requirements to be trained on this subject (Department of Health and Human Services, Office of Inspector General, 2000). Additionally, there are no evidence-informed research studies on what training is effective at helping those who come into contact individuals who have been trafficked for sex. Consequently, many professionals are ill-equipped to respond to the needs of commercially sexually exploited children and youth. As awareness of the commercial sexual exploitation of children and child sex trafficking grows, professionals who come into contact with these children—such as health professionals, lawmakers, child welfare providers, and law enforcement personnel—need more evidence-based research to face the challenge of adequately responding to these youth to facilitate their healing (Barnert et al., 2016; Institute of Medicine and the National Research Council, 2013).

Research clearly shows that a comprehensive, coordinated approach across many agencies is needed to effectively address the unique needs of children and youth who have experienced sex trafficking (Fong & Cardoso, 2010; U.S. Department of Justice, 2016). This is also evidenced in the strategic plan and the work of federal, state, and local task forces (106th U.S. Congress, 2000; U.S. Department of Justice, 2017; President's Interagency Task Force to Monitor and Combat Trafficking in Persons, 2014). Yet, the multiple systems of care involved in addressing the needs of children and youth who have experienced sex trafficking face several challenges. As noted in a recent report on the current system's approach, "the challenge of incorporating modern anti-trafficking concepts into these existing institutions has resulted in misidentification and referrals to juvenile justice. . . rather than protective services" (Bounds, Julion, & Delaney, 2015). Moreover, the child welfare, juvenile justice, and mental health systems often overlap, which means youth who have been trafficked or at risk for trafficking may be involved with these systems simultaneously or at discrete periods in time, thereby duplicating services or sending mixed messages. In one study, high-risk youth involved in all three systems of care stated that the lack of collaboration among the multiple disciplines and agencies involved needed much improvement (Bounds, Julion, & Delaney, 2015).

A multidisciplinary approach is needed to improve identification and service delivery of children and youth who have experienced sex trafficking, build awareness, address legislative and regulatory



gaps, conduct specialized training of first responders, and create funding streams to support multidisciplinary interagency task forces and specialized services (Bounds, Julion, & Delaney, 2015). This literature review provides the Committee with a starting point to create an action plan to further research best practices and implement the identification and care for child and youth victims of sex trafficking that provides guidance to the field on what works to help these children regain some sense of normalcy in their lives.

Based on this literature review, strategies to identify individuals who have been trafficked or at risk of trafficking, manage cases, and improve services needs continued coordination to implement the types of programs that can effectively identify sex trafficking, provide these children and youth with the specialized services they desperately need, and prosecute the criminals involved in human trafficking to the full extent of the law (Gluck & Mathur, 2014). More empirical research is needed on best practices and what is working to help this population. The IOM and National Research Council in their report offer recommendations concerning strategies for responding to commercial sexual exploitation and sex trafficking of minors in the United States, new legislative approaches, and a research agenda. The report concludes that efforts to prevent, identify, and respond to commercial sexual exploitation and sex trafficking of minors in the United States require better collaborative approaches. These efforts need to confront demand and the individuals who commit and benefit from these crimes. The recommendations in the report have the potential to advance and strengthen the nation's emerging efforts to prevent, identify, and respond to commercial sexual exploitation and sex trafficking of minors (Institute of Medicine and the National Research Council, 2013).



APPENDIX A. NATIONAL ADVISORY COMMITTEE ON THE SEX TRAFFICKING OF CHILDREN AND YOUTH IN THE UNITED STATES

The National Advisory Committee on the Sex Trafficking of Children and Youth in the United States (the Committee) was established as part of the Preventing Sex Trafficking and Strengthening Families Act of 2014, H.R. 4980 (P.L. 113–183). The Committee was created in consultation with the Department of Justice and the National Governor’s Association to advise the Attorney General and the Secretary of Health and Human Services on the nation’s response to trafficking.

The Committee shall:

- Advise on the development and implementation of successful interventions with children and youth who are exposed to conditions that make them vulnerable to, or victims of, sex trafficking
- Make recommendations for administrative or legislative changes necessary to use programs, properties, or other resources owned, operated, or funded by the federal government to provide safe housing for children and youth who are sex trafficking victims
- Develop two tiers of recommended best practices for states to follow in combating the sex trafficking of children and youth based on multidisciplinary research and promising, evidence-based models and programs, including sample training materials, protocols, and screening tools to identify victims of trafficking and those at risk for trafficking; multidisciplinary strategies to identify victims, manage cases, and improve services; sample protocols and recommendations for cross-system collaborations; criteria and guidelines for safe residential placement for foster children who have experienced sex trafficking; and training guidelines for caregivers serving children and youth outside the home
- Share best practices and recommendations with state governors and child welfare agencies

Within 2 years after the establishment, the Committee shall:

Develop two tiers of recommended best practices for states to follow in combating the sex trafficking of children and youth:

- Tier I shall provide states that have not yet substantively addressed the sex trafficking of children and youth with an idea of where to begin and what steps to take
- Tier II shall provide states already working to address the sex trafficking of children and youth with examples of policies already being used effectively by other states to address sex trafficking (U.S. Government Printing Office, 2014)

Within Tier II of best practices, the Committee will be charged with providing:

- Sample protocols and recommendations for cross-system collaborations
- Criteria and guidelines for safe residential placement for foster children who have experienced sex trafficking
- Training guidelines for caregivers serving children and youth outside the home
- Multidisciplinary strategies to identify victims, manage cases, and improve services



REFERENCES

- 106th U.S. Congress. (2000). H.R.3244--Victims of Trafficking and Violence Protection Act. Retrieved from Congress.gov: <https://www.congress.gov/bill/106th-congress/house-bill/3244>
- 113th U.S. Congress. (2014). H.R.4980--Preventing Sex Trafficking and Strengthening Families Act. Retrieved September 19, 2017, from Congress.gov: <https://www.congress.gov/bill/113th-congress/house-bill/4980>
- Ahn, R., Alpert, E. J., Purcell, G., Konstantopoulos, W. M., McGahan, A., Cafferty, E., . . . Burke, T. F. (2013). Human trafficking: Review of educational resources for health professionals. *American Journal of Preventive Medicine, 44*(3), 283–289. doi: 10.1016/j.amepre.2012.10.025.
- Armstrong, H. C. (2008). *Rebuilding lives: Promising practices in the rehabilitation of freed slaves*. Retrieved from <http://www.freetheslaves.net/>: <https://www.freetheslaves.net/wp-content/uploads/2015/03/RebuildingLives2008.pdf>
- Atkinson, H. G., Curnin, K. J., & Hanson, N. C. (2016). U.S. state laws addressing human trafficking: Education of and mandatory reporting by health care providers and other professionals. *Journal of Human Trafficking, 2*(2), 111–138. Retrieved from <http://www.tandfonline.com/doi/full/10.1080/23322705.2016.1175885>
- Auerbach, C., Schudrich, W. Z., & Lawrence, C. K. (2013). Predicting turnover: Validating the intent to leave child welfare scale. *Research on Social Work Practice, 349–355*. Retrieved from <http://journals.sagepub.com/doi/abs/10.1177/1049731513494021#articleCitationDownloadContainer>
- Baldwin, S. B., Eisenman, D. P., Sayles, J. N., Ryan, G., & Chuang, K. S. (2011). Identification of human trafficking victims in health care settings. *Health and Human Rights, 13*(1), 36–49.
- Banks, D., & Kyckelhahn, T. (2011). *Characteristics of suspected human trafficking incidents 2008–2010 (Special Report NCJ 233732)*. Retrieved from U.S. Department of Justice, Office of Justice Programs Bureau of Justics Statistics: <http://www.bjs.gov/content/pub/pdf/>
- Barnert, E. S., Abrams, S., Azzib, V. F., Ryand, G., Brook, R., & Chunga,, P. J. (2016). Identifying best practices for “safe harbor” legislation to protect child sex trafficking victims: Decriminalization alone is not sufficient. *Child Abuse & Neglect, 51*, 249–262.
- Basson, D. (2017). *Validation of the Commercial Sexual Exploitation-Identification Tool (CSE-IT). Technical report*. Oakland: WestCoast Children’s Clinic. Retrieved from <http://www.westcoastcc.org/wp-content/uploads/2015/04/WCC-CSE-IT-PilotReport-FINAL.pdf>
- Beck, M. E., Lineer, M. M., Nugent, M., Simpson, P., Melzer-Lange, M., & Rabbitt, A. (2015, April). Medical providers’ understanding of sex trafficking and their experience with at-risk patients. *Pediatrics, 135*(4).
- Bell, J. (2010). Race and human trafficking in the U.S.: Unclear but undeniable. [Huffington Post]. Retrieved from: https://www.huffingtonpost.com/jamaal-bell/race-and-human-traffickin_b_569795.html
- Beltran, A., & Epstein, H. R. (2012). *Improving foster care licensing standards around the United States: Using research findings to effect change*. Generations United and the American Bar Association Center on Children and the Law .
- BEST Alliance. (2013). 100 hotel owners and managers trained to prevent trafficking. *BEST Newsletter October 2013*.



- Bounds, D., Julion, W. A., & Delaney, K. R. (2015). Commercial sexual exploitation of children. *Policy, Politics, & Nursing Practice*, 16(1–2), 17–26.
- Brown, E. N. (2017, October 18). *Feds 'rescue' women from freedom and money in 11th 'Operation Cross Country'*. Reason.com. Retrieved from <http://reason.com/blog/2017/10/18/fbi-operation-cross-country-xi>
- Butler, C. N. (2015). *The racial roots of human trafficking*. UCLA Law Review.
- Butrymowicz, S., & Mader, J. (2016). High turnover and low pay for employees may undermine state's child care system. *The Hechinger Report*.
- Casey Family Programs. (2014). *Addressing child sex trafficking from a child welfare perspective*.
- Center for Substance Abuse Treatment (US). (2014). Building a trauma-informed workforce. In *Trauma-informed care in behavioral health services*. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK207194/>
- Center for the Human Rights of Children. (2011). *Human trafficking and exploitation of children in the United States: Outcome document*. Loyola University Chicago.
- Charter: National Advisory Committee on the Sex Trafficking of Children & Youth in the United States. (2017). Administration for Children and Families, Office on Trafficking in Persons. Retrieved from <https://www.acf.hhs.gov/otip/resource/naccharter>
- Child Welfare Information Gateway. (2012). *What is child welfare? A guide for educators*. Factsheet. The U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth, and Families, Children's Bureau. Retrieved from https://www.childwelfare.gov/pubPDFs/cw_educators.pdf
- Children's Bureau. (2015). *Developing a trauma-informed child welfare system*. The U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth, and Families, Children's Bureau. Retrieved from https://www.childwelfare.gov/pubPDFs/trauma_informed.pdf
- Clawson, H. J., & Grace, L. G. (2007). Finding a path to recovery: Residential facilities for minor victims of domestic sex trafficking. *Human Trafficking: Data and Documents*, 10. Washington, DC: U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation.
- Clawson, H. J., Salomon, A., & Grace, L. G. (2008). *Treating the hidden wounds: Trauma treatment and mental health recovery for victims of human trafficking*. Washington, DC: U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation.
- Coalition to Abolish Slavery & Trafficking. (2013). *An analysis of state safe harbor laws and recommendations for states considering future safe harbor legislation*. Retrieved from http://www.castla.org/assets/files/an_analysis_of_state_safe_harbor_laws_and_recommendations_for_states_considering_future_safe_harbor_legislation.pdf
- Collins, M. E., Amodeo, M., & Clay, C. (2007). *Review of the literature on child welfare training: Theory, practice, and research*. Boston, MA: Boston University School of Social Work.
- Cosgrove, C. (2016). Increasing awareness about human trafficking: Education for frontline healthcare providers. Master of Public Health Thesis and Capstone Presentations. Presentation 198. Thomas Jefferson University. Retrieved September 21, 2017, from http://jdc.jefferson.edu/mphcapstone_presentation/198/



- Dank, M., Yahner, J., Yu, L., Vasquez-Noriega, C., Gelatt, J., & Pergamit, M. (2017). *Pretesting a human trafficking screening tool in the child welfare and runaway and homeless youth systems*. Urban Institute.
- DeGarmo, J. (2017). *How children in foster care fall victim to child sex trafficking*. The Good Men Project. Retrieved from <https://goodmenproject.com/social-justice-2/how-children-in-foster-care-fall-victim-to-child-sex-trafficking-bbab/>
- Department of Health and Human Services, Office of Inspector General. (2000). *State oversight of residential facilities for children*. Retrieved from <https://oig.hhs.gov/oei/reports/oei-02-98-00570.pdf>
- Federal Partners Committee on Women and Trauma. (2013). *Trauma-informed approaches: Federal activities and initiatives*. Retrieved from <https://www.nasmhpd.org/sites/default/files/2013FederalPartnersReportFinal.pdf>
- Ferrell, A. (2013). Environmental and institutional influences on police agency responses to human trafficking. *Police Quarterly*, 17(1). Retrieved September 21, 2017, from <http://journals.sagepub.com/doi/abs/10.1177/1098611113495050>
- Finklea, K., Fernandes-Alcantara, A. L., & Siskin, A. (2015). *Sex trafficking of children in the United States: Overview and issues for Congress*. Congressional Research Service.
- Fong, R., & Cardoso, J. B. (2010). Child human trafficking victims: Challenges for the child welfare system. *Evaluation and Program Planning*, 33(3), 311–316. Retrieved September 20, 2017, from <http://www.sciencedirect.com/science/article/pii/S0149718909000640#!>
- Foot, K. (2016). *Collaborating against human trafficking: Cross-sector challenges and practices*. Lanham, MD: Rowman and Littlefield.
- Gibbons, P., & Stoklosa, H. (2016). Identification and treatment of human trafficking victims in the emergency department: A case report. *The Journal of Emergency Medicine*, 50(5), 715–719.
- Gibbs, D. A., Hardison Walters, J. L., Lutnick, A., Miller, S., & Kluckman, M. (2015). Services to domestic minor victims of sex trafficking: Opportunities for engagement and support. *Children and Youth Services Review*, 1–7.
- Gluck, E., & Mathur, R. (2014). *Child sex trafficking and the child welfare system*. First Focus. Retrieved September 19, 2017, from <https://firstfocus.org/resources/report/sex-trafficking-child-welfare-system>
- Greenbaum, V. J. (2014, October). Commercial sexual exploitation and sex trafficking of children in the United States. *Current Problems in Pediatric and Adolescent Health Care*, 44(9), 245–269.
- Gresham, A. (2015). *Identifying and mitigating domestic minor sex trafficking in an urban community*. Retrieved November 24, 2017, from <http://scholarworks.waldenu.edu/cgi/viewcontent.cgi?article=1279&context=dissertations>
- Hargreaves-Cormany, H. A., & Patterson, T. D. (2016). Characteristics of survivors of juvenile sex trafficking: Implications for treatment and intervention initiatives. *Aggression and Violent Behavior*, 32–39.
- Harrington, N. (2016). *Commercial sexual exploitation of children: Protection laws, interventions, and services in Merced County*. Retrieved from <http://scholarworks.csustan.edu/handle/011235813/1003>
- Heffernan, K., & Viggiani, P. (2015). Going beyond trauma-informed care (TIC) training for child welfare supervisors and frontline workers: The need for system wide changes implementing TIC practices in all child welfare agencies. *The Advanced Generalist: Social Work Research Journal*, 37–58.



- Hodge, D. (2014). Assisting victims of human trafficking: Strategies to facilitate identification, exit from trafficking, and the restoration of wellness. *Social Work, 59*(2), 111–118.
- Hyatt, S., Spuur, K., & Sciupac, M. (2012). *Sexual exploitation and homeless youth in California: What policymakers need to know*. California Homeless Youth Project. Retrieved from <http://cahomelessyouth.library.ca.gov/docs/pdf/SexualExploitedHomelessYouthIssueBrief.pdf>
- Ijadi-Maghsoodi, R., Cook, M., Barnert, E. S., Gaboian, S., & Bath, E. (2016). Understanding and responding to the needs of commercially sexually exploited youth: Recommendations for the mental health provider. *Child and Adolescent Psychiatric Clinics of North America, 107*–122.
- Institute of Medicine and National Research Council of the National Academies. (2013). *Confronting commercial sexual exploitation and sex trafficking of minors in the United States*. Washington, DC: The National Academies Press.
- Institute of Medicine and the National Research Council. (2013). *Confronting commercial sexual exploitation and sex trafficking of minors in the United States*. Washington, DC: The National Academies Press.
- Kim, H., & Kao, D. (2014, December). A meta-analysis of turnover intention predictors among U.S. child welfare workers. *Children and Youth Services Review, 47*(3), 214–223.
- Kruger, A. C., Harper, E., Zabek, F., Collins, S., Perkins, C., & Meyers, J. (2016). Facilitating a school-based prevention of commercial sexual exploitation of children. *Health Promotion Practice, 530*–536.
- Lederer, L. J., & Wetzel, C. A. (2014). The health consequences of sex trafficking and their implications for identifying victims in healthcare facilities. *Annals of Health Law, 61*–91.
- Liles, B. D., Blacker, D. M., Landini, J. L., & Urquiza, A. J. (2016). A California multidisciplinary juvenile court: Serving sexually exploited and at-risk youth. *Behavioral Sciences and the Law, 234*–245.
- Littrell, J. (2015). *Human trafficking in America's schools*. U.S. Department of Education Office of Safe and Healthy Students.
- Macy, R. J., & Johns, N. (2011). Aftercare services for international sex trafficking survivors: Informing U.S. service and program development in an emerging practice area. *Trauma, Violence & Abuse, 87*–98.
- McMahon-Howard, J., & Reimers, B. (2013). An evaluation of a child welfare training program on the commercial sexual exploitation of children (CSEC). *Evaluation and Program Planning, 1*–9.
- Minnesota Department of Human Services. (2014). *Safe harbor: Protecting Minnesota's youth from sexual exploitation bulletin #14-68-11*. Minnesota Department of Human Services.
- Moosy, R. (2009). Sex trafficking: Identifying cases and victims. *National Institute of Justice Journal*. Retrieved from <https://www.nij.gov/journals/262/pages/sex-trafficking.aspx>
- Muraya, D. N., & Fry, D. (2016). Aftercare services for child victims of sex trafficking: A systematic review of policy and practice. *Trauma, Violence, & Abuse, 204*–220.
- National Advisory Committee on the Sex Trafficking of Children and Youth in the United States. (2017, January 19). Administration for Children and Families Office of Trafficking of Persons. Retrieved from <https://www.acf.hhs.gov/otip/partnerships/the-national-advisory-committee>
- National Association of Attorneys General. (2012, December). Best practices in human trafficking law. *NAA Gazette*. Retrieved from <http://www.naag.org/best-practices-in-human-trafficking-law.php>
- Network of Global Agenda Councils Task Force on Human Trafficking. (2014). *Human trafficking: Insights from the private sector*. World Economic Forum.



- Office of the Texas Governor. (2017, September 30). *Office of the Texas governor*. Retrieved from https://gov.texas.gov/organization/cjd/topic_trafficking
- Okech, D., Morreau, W., & Benson, K. (2012). Human trafficking: Improving victim identification and service provision. *International Social Work, 55*(4), 488–503.
- Phenicie, C. (2017, September 24). Monument Academy in D.C. tries a new model to help kids in foster care. *T74 Newsletter*.
- Polaris. (2015). *Human trafficking issue brief: Safe harbor*. Retrieved from <https://polarisproject.org/sites/default/files/2015%20Safe%20Harbor%20Issue%20Brief.pdf>
- Powell, C., Dickins, K., & Stoklosa, H. (2017). Training U.S. health care professionals on human trafficking: Where do we go from here? *Medical Education Online 22*(1). Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/28178913>
- President's Interagency Task Force to Monitor and Combat Trafficking in Persons. (2014). *Federal strategic action plan on services for victims of human trafficking in the United States: 2013–2017*. Office of Victims of Crime. Washington, DC: White House. Retrieved September 21, 2017, from <https://ovc.ncjrs.gov/humantrafficking/plan.html>
- Renzetti, C. M., Bush, A., Castellanos, M., & Hunt, G. (2015). Does training make a difference? An evaluation of a specialized human trafficking training module for law enforcement officers. *Journal of Crime and Justice, 38*(3). Retrieved from <http://www.tandfonline.com/doi/abs/10.1080/0735648X.2014.997913>
- Rescue & Restore Victims of Human Trafficking Regional Program. (2012). *Creating and sustaining a local response to human trafficking: Compendium of promising practices, 2008–2011*. Retrieved from <https://humantraffickinghotline.org/resources/creating-and-sustaining-local-response-human-trafficking-compendium-promising-practices>
- Rosenberg, E. (2017, October 19). Infant and her 5-year-old sister, allegedly on sale for \$600, rescued in FBI sex trafficking sweep. *The Washington Post*.
- Sabella, D. (2011). The role of the nurse in combating human trafficking. *American Journal of Nursing, 111*(2), 28–37.
- Sapiro, B., Johnson, L., Postmus, J. L., & Simmel, C. (2016). Supporting youth involved in domestic minor sex trafficking: Divergent perspectives on youth agency. *Child Abuse & Neglect, 99*–110.
- Sarkisian, M. (2015). *Adopting the code: Human trafficking and the hospitality industry*. Cornell Hospitality Report.
- Shandro, J., Chisolm-Straker, M., Duber, H. C., Findlay, S. L., Munoz, J., Schmitz, G., . . . Wingkun, N. (2016, October). Human trafficking: A guide to identification and approach for the emergency physician. *Annals of Emergency Medicine, 68*(4).
- Shared Hope International. (2016). *The protected innocence challenge toolkit*. Retrieved from <https://sharedhope.org/what-we-do/bring-justice/reportcards/>
- Shelley, L., & Bain, C. (2015). Human trafficking: Fighting the illicit economy with the legitimate economy. *Social Inclusion, 3*(1), 140–144. doi: 10.17645/si.v3i1.215
- Stoklosa, H., Dawson, M. B., & Willia, F. (2017). A review of U.S. health care institution protocols for the identification and treatment of victims of human trafficking. *Journal of Human Trafficking, 3*(2).

