

Commercial Sexual Exploitation of Children (CSEC) Protocol

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INTRODUCTION

Overview

The commercial sexual exploitation of children (CSEC) is one of the fastest growing epidemics in our country as well as in the County of San Diego. The Trafficking Victims Protection Act, a federal law passed in 2000, states that any child/youth under the age of 18 years old who is used for the purpose of exploitation through sexual servitude (prostitution), regardless of the absence of economic leverage, manipulation, fraud, coercion, threats, force and violence is considered a commercially sexually exploited child/youth. Although anyone can become a victim of human trafficking, a review of school, mental health, child welfare, and probation documents found that 80-95% of trafficked youth in California were known to CWS. Therefore, we need to ensure that we are properly assessing, thoughtfully interviewing, and adequately tracking this unique population of children/youth who present with complex forms of trauma.

Historically, law enforcement has been the first agency to interact with and respond to victims of CSEC. Law enforcement would determine whether to release or arrest the minor. Once arrested, the case would be sent to Probation. Probation would then determine whether to provide the minor with diversion services or send the case to the District Attorney to initiate a case in the juvenile court. There has been an effort for law enforcement and CWS to work more closely together regarding CSEC youth in order to better serve these child/youth as victims.

The intention of the CSEC protocol is to foster collaboration and coordination among agencies to improve the capacity to identify CSEC victims and provide safety and services for them and their families/caregivers, as appropriate, as they work to end their exploitation, and hold their exploiters accountable. Those involved in this effort will use best practices to ensure that CSEC youth are successfully placed in a protective environment that offers trauma informed care, in order to stabilize them during a critical time. This will include a range of victim centered services across multiple agencies that will provide a continuum of care model to fully address the CSEC youth's needs. In addition, an interagency collaborative approach will be utilized to outreach to CSEC youth and at risk child/youth populations so they can better protect themselves from victimization and recognize risky situations.

Recent legislation (SB 855, Chapter 29, Statutes of 2014) amended the Welfare and Institutions Code (WIC) section 300 to clarify that under existing law, Commercially Sexually Exploited Children (CSEC) whose parents or guardians failed or were unable to protect them may fall within the description of 300(b) and be adjudged as dependents of the juvenile court.

**Overview
(con't)**

On September 29, 2014 the President signed Public Law 113-183 Preventing Sex Trafficking and Strengthening Families Act. This new federal law contains several provisions related to CSEC children and youth, including a requirement that agencies develop policies and procedures to identify, document, and determine appropriate services for serving children/youth who or at risk of being victims of sex trafficking.

Governance

Under WIC 16524.8 the following entities must work together to fulfill the goals of this protocol: Child Welfare Services (CWS), Juvenile Probation, Behavioral Health, Public Health and the Juvenile Court (including both dependency and delinquency). This team may also include representatives from education, law enforcement, prosecutors, Voices for Children, County Counsel, survivors of CSEC and any other providers as necessary.

This protocol seeks to facilitate the coordination of these key partners and insure each discipline understands each other's roles and responsibilities and facilitates team cooperation. All disciplines have overlapping responsibilities and must work together to divide tasks, share tasks, and share information gained for the benefit of all agencies as well as the protection of the child/youth and the community.

The crime of human trafficking requires a comprehensive and collaborative response between law enforcement, service providers and the community. This protocol sets out the mutual understanding of the principles underlying the relationship between the parties in matters concerning the planning and service delivery of law enforcement investigations, victim-centered services and promoting public awareness.

The Steering Committee is the entity in the county responsible for overseeing the development and implementation of the protocol. The steering committee is responsible for:

- Developing the interagency protocol
 - Defining the roles and responsibilities of each agency and partner
 - Providing input on how to use CSEC funding
 - Implementing the protocol and revising as needed
 - Collecting and analyzing aggregate data related to the protocol
 - Assessing CSEC resources in the county
 - Identifying training needs
 - Providing an annual report to the state on the number of children served, services received, and gaps in resources for CSEC
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Purpose of the protocol

The purpose of the protocol is to:

- Emphasize that children and youth who have been exploited are to be treated as victims, not criminals.
- Insure all CSEC youth receive victim centered services.
- Prioritize the safety of child/youth CSEC victims as a key concern. CSEC victims may have a perspective about their particular safety needs that differs from the views of those who serve them; the victim should be asked what safety means to them and the professionals involved should consider the child's/youth's point of view in developing a **safety plan**.
NOTE: It is important to remember that CSEC victims may not always identify as a victim and/or are fearful of retaliation.
- Treat CSEC victims with dignity and respect. They should be asked to share their views and be given choices whenever possible so long as their safety is not compromised. Allowing these children/youth to make decisions, consistent with safety, will empower and help them to build healthy independence.
- Involve the family/caregivers of child/youth victim's, as appropriate, in the service and planning efforts. Their unique needs and issues should be identified and addressed as part of the safety and case plan for each individual child/youth.
- Demonstrate effective cultural competence in dealing with CSEC victims. Cultural competence is the integration and transformation of knowledge about individuals and groups of people from different backgrounds into specific standards, policies, practices, and attitudes used in appropriate cultural settings to increase the quality of services and produce better outcomes.
- Make every effort to have local, regional, state, federal and international collaboration and coordination to effectively respond to CSEC victims.
- Collect data that will drive system improvements over time to ensure the best possible outcomes for CSEC victims.

Goals

The goals of the CSEC protocol are to make sure:

- Staff working with CSEC victims receive an appropriate level of training on the topic of the commercial sexual exploitation of children.
 - Those who work with CSEC victims will have training on trauma informed services and specific aspects of the CSEC experience.
 - Services are trauma informed and those who provide services demonstrate an appreciation of the particular vulnerabilities and triggers experienced by these traumatized children/youth.
 - All vulnerable youth will be screened for sexual exploitation upon entry into the child welfare system and those who are active to CWS will be assessed annually.
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Goals (con't)

- Immediately upon identification, CSEC victims are taken to a safe, comfortable location to carefully assess the child's/youth's needs and arrange for initial housing and services.
- Representatives from a multi-disciplinary team including staff from juvenile probation, behavioral health, and public health meet shortly after a CSEC victim is identified and continue to meet on an on-going basis to promote a coordinated response, share information and collaborate in the management of CSEC cases. The MDT's meeting times vary from region to region.
- All professionals who provide services will focus on how their demeanor, words and actions may feel to the CSEC victim, taking care to be patient and respecting the CSEC victim's personal dignity, while understanding they are working with a child/youth that may, in some circumstances, demonstrate outward behaviors of trauma.
- Professionals and others involved in the response to a CSEC case clearly communicate to the child/youth what they can and cannot offer; they maintain confidentiality to the extent allowed by law, including communicating with the child/youth in private, and clearly explaining to the child/youth mandatory reporting processes and requirements, and the child's/youth's privacy rights. Doing so will build trust and credibility with the child/youth.
- Educate community partners and agencies on what CSEC are, identification of CSEC children and youth and available services.

Work with the County of San Diego's CSEC task force, local, state and federal law enforcement and schools in identifying CSEC victims and coordinating efforts in bringing assistance to the CSEC youth.

Key Principles to serving CSEC

The key principles to serving CSEC children/youth:

- Safety planning
 - Collaboration across the agencies
 - Victim centered response that builds trust and relationships to foster consistency
 - Culturally responsive and appropriate service provision
 - Trauma-informed interventions
 - Strength based practice methods
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Importance of Language

Language plays a significant role in a SW's interactions and interventions in CSEC cases. Identifying these children/youth as victims/survivors and not prostitutes and criminals can help change how these children/youth are viewed in the community.

Identifying these children/youth as victims validates their trauma and exploitation. In order to understand CSEC children/youth and their daily functioning, SWs need to understand the terminology that is used by the child/youth and by the exploiters that have controlled their lives.

NOTE: See Appendix B for common terms.

Roles and Responsibilities

Role	Responsibilities
Law enforcement	<ul style="list-style-type: none">• Contact CWS upon identification of a CSEC youth• Cross report suspected or known CSEC victims to hotline• Coordinate response efforts with CWS to investigate CSEC allegations
CWS Social Worker	<ul style="list-style-type: none">• Respond to CSEC referrals and coordinate with law enforcement as necessary• Complete the West Coast Screening Tool on initial investigation, AWOL/running away and every six months• Assess the needs of CSEC children/youth and make referrals to ensure proper treatment
Child//Youth	<ul style="list-style-type: none">• Attend required meetings and provide input• Cooperate with the law enforcement investigation• Cooperate with the SW so the best support system and services can be provided
CSEC Lead at PCC	<ul style="list-style-type: none">• Respond to identified CSEC children/youth at PCC

Roles and Responsibilities (con't)

CSEC Multi-Disciplinary Team	<ul style="list-style-type: none"> • Provide individual case-by-case collaboration with multiple child-serving agencies • Assess and address immediate and long-term needs • Coordinate, monitor, and adjust service plan to achieve desired outcomes for CSEC • Recommend appropriate placements • Conduct safety planning to proactively plan for triggering events
Community Service Providers	<ul style="list-style-type: none"> • Discuss various program options to fit the child/youth's needs. • Share information regarding the child/youth's program involvement, progress, challenges, and goals. • Attend multi-disciplinary meetings
Behavioral Health	<ul style="list-style-type: none"> • Provide feedback regarding treatment goals and progress, services provided, participation and recommendations • Attend CSEC MDT's
Public Health Nurse	<ul style="list-style-type: none"> • Review and assess health, medical and dental needs • Medication assessment and follow up • Review Medi-Cal options and services • Attend CSEC MDT's
Family/Caregiver	<ul style="list-style-type: none"> • Attend all required meetings (if not detrimental to the child/youth) • Advocate for the child/youth • Share information that can aid in making the best decision for the child/youth • Support child/youth participation in services • Support child/youth cooperation with law enforcement • Demonstrate actions of protection that will help create safety for the CSEC victim
Probation	<ul style="list-style-type: none"> • Make a cross report to CWS on identified CSEC children/youth • Attend MDT held by CWS when a probation CSEC youth is identified • Screen children/youth for CSEC using the West Coast Screening Tool

Roles and Responsibilities (con't)

CSEC Regional liaisons	<ul style="list-style-type: none"> • Each region will have a designated CSEC liaison. • Attend CSEC trainings and meetings • Provide training and consultation with workers in each region and program • Establish relationships with partners on CSEC cases • Have knowledge of resources to serve CSEC children/youth • Participate in CSEC MDT's
CSEC Steering Committee	<ul style="list-style-type: none"> • Provide ongoing oversight and support to identify and serve CSEC and child/youth at risk of being CSEC. • Provide input on how to utilize CSEC funding and assess resources • Collect and analyze data • Assess training needs • Ensure cross county disciplines are working together
Schools/Educators	<ul style="list-style-type: none"> • Can be invited to attend MDTs regarding a CSEC youth although we cannot require them to attend.

Identification of CSEC youth

SW's are to become familiar with the risk factors and possible indicators of CSEC so they can make accurate assessments. There needs to be a combination of factors because one risk factor or warning sign does not make the youth an identified CSEC youth.

Risk Factors and Warning Signs:

- History of child abuse and neglect/child welfare history/history of sexual abuse
- Multiple incidents of running away (from home or placement) or being kicked out
- Homelessness
- Poor school attendance and/or trancies
- Substance abuse
- Interpersonal violence
- Intimate Partner Violence
- Social Isolation
- Gang Involvement
- Lesbian, Gay, Bi-Sexual, Transgender, Questioning (LGBTQ)
- Mental health and/or developmental challenges

**Identification
of CSEC youth
(con't)**

- Being a pregnant or parenting teen
- Age/immaturity
- Entertainment and modeling profession (interest or participation)
- History of pregnancy
- Multiple terminated pregnancies
- Multiple Sexually Transmitted Diseases/Sexually Transmitted Infections
- Knows someone who has had sex for drugs, shelter, goods, or money.
- Lack of permanency – No adult or mentor they trust in their life.

Recruitment Tactics:

- Seduction (including fraud, internet chat rooms and profile sharing sites)
- Befriending/peer recruitment
- Family Obligations
- Glamour
- Coercion, threats, force, violence
- Fraud, deception
- Parents selling children
- Sextortion
- Promise of a committed, romantic relationship and affection

Possible Indicators:

- Multiple cell phones or pre-paid phones
 - History of multiple sexually transmitted infections or diseases
 - Visible signs of abuse
 - Unexplained and/or suspicious injuries
 - Appears exhausted
 - Appears malnourished
 - Uses language as described in appendix B
 - Loss of interest in previous activities
 - Blistered feet
 - Has an adult “boyfriend” whom she refers to as her “Daddy”
 - New clothing, hair, nails
 - Presence of an older girl/boyfriend
 - Tattoo’s that are hard to explain or associated with CSE
 - Unaccounted for time/frequent absences
 - Frequently travels to other cities, counties, states or countries
 - Pre-paid credit cards
 - Explicit social media postings
 - Hotel/motel room key cards
 - Excessive amounts of cash on hand
 - Social media accounts or frequents known social media or internet sites for escort or companion services
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Identification of CSEC youth (con't)

Common Stages of CSEC:

- Recruitment of vulnerable children
- Seduction through offers of gifts, support, friendship, love
- Isolation from others who may stop the exploitation
- Coercion into actions such as street prostitution and pornography
- Violence to retain control

NOTE: If a client presents with one of the above risk factors or indicators it is not a guarantee the client is CSEC. SW's must continue to assess and evaluate their client.

CSEC youth and exploiters

CSEC victims come from all gender identities, sexualities and expressions. They come from all socio-economic backgrounds and include all races and ages. They are forced, coerced, and/or tricked into sexual acts or sexual exploitation by another person. This definition makes it clear that these children/youth are not “out of control” or “compliant victims”.

While it is true these children/youth come from various backgrounds, some children/youth are at increased risk of becoming victimized:

- **Homeless, runaway child/youth:** Child/youth who do not have caregivers who provide care and supervision; child/ youth who leave family homes due to abuse or neglect; or child/youth who are a sexual minority and/or gender nonconforming child/youth with lack of familial support. These child/ youth may have been asked or told to leave their home by a parent or other household adult. Child/youth can be away from home and are prevented from returning home by a parent or caregiver, without adequate, alternative care.
- **Child/youth in the Foster care system:** Child/youth who run from placements or youth who have had multiple contacts with child welfare in their biological families.
- **Child/youth with histories of abuse:** Child/youth who have been previous victims of sexual abuse or other abuses.

Identifying a CSEC child/youth early in a child welfare case will impact the effectiveness of case interventions and assist SW's in developing relationships with these children/youth. Though SW's are more likely to identify girls as victims than boys, SW's must be aware that male victims are greatly underreported and under identified.

CSEC youth and exploiters

Exploiters:

Exploiters can be anyone: boyfriends, fathers, mothers, sisters, brothers,

(con't)

uncles, aunts, coaches, employers, teachers, or anyone exerting control over a minor, including a peer. There are various types of exploiters, including pimps, gangs, and street families, who all use power and control tactics to benefit (e.g., receive money or anything that has a monetary value, including drugs) from the commercial sexual exploitation of a minor.

Exploiters often befriend their victims. They initially treat them well but later coerce them into performing sexual acts. Other exploiters use violence (kidnapping, assault, rape) or the threat of removing love or affection to force their victims to perform sexual acts.

Power and Control over children/youth:

It is unreasonable to expect that these children/youth are able to leave their abusive situations. Exploiters use many forms of violence, coercion, threats, and emotional and physical control to keep their victims subdued and to prevent them from leaving. Understanding some of these methods will assist workers in understanding how to best meet these children's/youth's need for safety.

These children/youth fear the physical abuse that the exploiters will use if the child/youth try to escape. They are fearful of repercussions for their families or loved ones who are often the target of the exploiter's threats. Exploiters also maintain physical control of their victims by holding all of their money, frequently moving victims about from place to place, and sometimes literally confining or restraining children/youth. When the exploiter is a family member, the dynamic between exploiter and victim makes it even more difficult for the victim to escape.

Victims who do not follow their pimp's commands, including not meeting a quota established by the pimp, are often subjected to rape, physical assault, withheld food, being provided with drugs and alcohol and emotional abuse. Children/youth have to give their wages to the exploiters to please them, as well as ensure their protection and safety.

The power and control techniques used by exploiters is such that many of these children/youth are unable to identify themselves as "victims of crime" and often will blame themselves for what they have experienced. For some children/youth, using the term "victim" in interactions with them may actually inhibit a worker's ability to build rapport. See Appendix F.

SW's need to understand that these victims often cannot leave their situation because they are afraid. They are manipulated into believing that they cannot escape or that this is the life that they choose. Intervention needs to provide these children/youth with assistance to establish themselves outside the control of their exploiter. Usually these children/youth have no resources, connections, or abilities to escape. See Appendix C.

Mandated Reporting

All participating agencies must comply with mandatory reporting laws as set forth in the [Child Abuse and Neglect Reporting Act](#).

Mandatory reporters are required to report abuse or neglect when they have reasonable suspicion that abuse or neglect has occurred. Sexual exploitation is a form of sexual abuse and must be reported by mandated reporters.

Below is the definition of sexual abuse per California's Penal Code (PC 11165.1). This definition includes a description of sexual exploitation:

- (c) "Sexual exploitation" refers to any of the following:
- (1) Conduct involving matter depicting a minor engaged in obscene acts in violation of Section 311.2 (preparing, selling, or distributing obscene matter) or subdivision (a) of Section 311.4 (employment of minor to perform obscene acts).
 - (2) A person who knowingly promotes, aids, or assists, employs, uses, persuades, induces, or coerces a child, or a person responsible for a child's welfare, who knowingly permits or encourages a child to engage in, or assist others to engage in, prostitution or a live performance involving obscene sexual conduct, or to either pose or model alone or with others for purposes of preparing a film, photograph, negative, slide, drawing, painting, or other pictorial depiction, involving obscene sexual conduct. For the purpose of this section, "person responsible for a child's welfare" means a parent, guardian, foster parent, or a licensed administrator or employee of a public or private residential home, residential school, or other residential institution.
 - (3) A person who depicts a child in, or who knowingly develops, duplicates, prints, (downloads, streams accesses through any electronic or digital media) or exchanges, a film, photograph (video tape, video recording) negative, or slide in which a child is engaged in an act of obscene sexual conduct, except for those activities by law enforcement and prosecution agencies and other persons described in subdivisions (c) and (e) of Section 311.3.
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HOTLINE

Hotline Assessment

Reports of child/youth sexual exploitation come within the definition of WIC §300 (b)(2).

In some reports it is easy to identify the CSEC concern as the caller is contacting the hotline to specifically report exploitation. Other reports are more difficult to identify CSEC because callers may suspect exploitation but they lack the language or knowledge about exploitation to clearly explain their concerns. Below are some suggestions for specific ways to gather these types of reports.

Community partners, family members, and neighbors often report they believe children/youth are being exploited based on the way the child/youth dresses, rumors from other children/youth at school, observation of something on a social networking site (e.g., InstaGram, Facebook, Craigslist, Backpage.com).

Many reports are more difficult to identify as CSEC concerns. Frequently callers have partial information about the child/youth: He or she exhibits “out of control behavior”; is a “chronic runaway”; promiscuous or the child/youth is reporting third-party sex abuse by multiple perpetrators. See Appendix D for possible questions to ask.

Selecting the Correct Allegations of Abuse

Allegation	Explanation
Sexual abuse	This allegation code will be selected on reports detailing concerns that children/youth are being commercially sexually exploited and the parent or caregiver is the person exploiting the child/youth.
Neglect	SW should attempt to gather information about the parents' response to their child's/youth's victimization and their ability to meet their child's/youth's exceptional needs. A neglect code is indicated when parents have knowledge of the victimization but do not intervene to protect their youth.
Physical abuse	Oftentimes these children/youth have been physically assaulted by the exploiter, and there is a current injury. Parents have also responded to their children's/youth's victimization with physical abuse. A physical abuse code may be included regarding historical physical abuse. Many of these children/youth become exploited due to abuse in the family home.
Emotional abuse	Aside from the physical abuse children/youth experience by their exploiters, they may also experience emotional abuse or abandonment by their parents. Parents may not have an understanding of the victimization their child/youth is experiencing. They may respond by blaming their child/youth or forcing the child/youth out of the home.

NOTE: The SW can enter as many allegations as are expected but the SW cannot specifically identify CSEC under the allegations.

CSEC INVESTIGATIONS

Referral Assignment

Each region will respond to CSEC referrals assigned by the hotline. CSEC referrals require a delicate approach with children/youth and their families.

In each region/program there is an identified CSEC liaison that can help support the investigating SW.

The most effective initial contact is a collaborative approach. Upon assignment the SW will coordinate the referral response with law enforcement and others, such as STARS and North County Lifeline for immediate assessment strategies, safety planning and placement options. Children/youth often do not want to be involved with those in a position of authority. It is crucial to develop a trusting relationship with the children/youth.

SW Responsibilities	STEP	ACTION
	1	Review allegations; contact reporting party, and interview collaterals. See investigation procedures for more information. Determine if information gathered requires a CSEC response.
	2	If enough indicators of CSEC are noted, then SW will submit cross-report to Law Enforcement if needed. SW will consult with PSS prior to interviewing the child/youth.
	3	If investigation reveals child/youth is identified as a CSEC victim then SW will do their best to obtain the child's/youth's approval to share their information and schedule a forensic interview whenever practicable. If the child/youth does not give their approval SW will continue to work to engage the child/youth and assess the situation for safety and risk. (See appendix D for interview questions) NOTE: The SW must continue and complete their investigation whether the youth gives their consent or not.
	4	Upon obtaining approval from the child/youth, the SW must schedule an immediate forensic interview and medical exam wherever practicable.
	5	Create a safety plan with child/youth and identify placement options.
	6	SW informs the child/youth that resources/services are available to him/her. (Appendix A)
	7	SW determines response for referral allegation.

NOTE: It can take awhile for the CSEC victim to feel comfortable in disclosing their abuse.

others

significant trauma may be extremely distrustful of others, including professionals. Developing a relationship children/youth know they can depend on will create further opportunities for them to escape the abuse. It is also important to recognize that opportunities to engage the child/youth are limited so the SW should take every opportunity that presents itself.

When the child/youth is being interviewed, be aware that the exploiter may be nearby and may have even brought the child/youth to the interview. To increase confidentiality and safety for the child/youth, be sure that the interview cannot be overheard by others. It is critical that steps be taken to protect the confidentiality of the child/youth, especially with respect to their contact with law enforcement and where they are living or receiving care.

The following are general rules for interacting with CSE children/youth:

- Be nonjudgmental, convey caring and compassion, have a friendly presence, make positive comments
- Address emergency and basic needs first
- Check your environment. Provide a private, neutral, comfortable setting.
- Allow for as much time as necessary
- Be flexible and allow the child/youth to guide the conversation
- Be upfront and clearly state your role and functions at the beginning
- Ask permission to take notes
- Use child/youth friendly language
- Have open body language. This indicates that you want to hear what the child/youth has to say
- Balance the amount of information shared with the child/youth about your personal experiences
- Limit interruptions, allow child/youth to speak
- Meet the child/youth where they are. Children/youth may not have an understanding of their victimization. Don't force a change in their thinking pattern; this takes time.
- Set boundaries with children/youth. For example: do not touch the child/youth without permission; respect his or her space.
- Make only promises that can be met; have realistic expectations of the child/youth
- Professionalism: Do not speak negatively about the child/youth or other members of the treatment team; keep a positive attitude and strength-based.

Interviewing

- Do not speak badly of child/youth's exploiter or others associated
-

CSEC youth and others (con't)

with “the life”; the youth may consider them their family and may feel a sense of loyalty to them.

- Be transparent. Trust has to be earned. Involve the child/youth in the process to more quickly gain trust.

Remember that your interview is not a forensic interview. Your role is to gather information related to the child’s/youth’s immediate and on-going safety. A forensic interview may occur at a later date. See Appendix D.

Identification and Screening Tool

CWS will use the West Coast Screening Tool to screen for commercial sexual exploitation on all children age 10 and above annually on cases and on every referral (even referrals not identified as CSEC.)

The West Coast Screening Tool will be used to identify CSE child/youth and to inform and improve service delivery. SW’s will complete the tool (not in the presence of the child/youth) to determine the level of risk the child/youth is at and to determine services in the community that will meet their needs or continue providing services for them.

NOTE: See Appendix G

Interviewing Parents/Guardians

Be aware that the parents are sometimes the exploiters. If you have any information that this may be the case, the interview should be done in coordination with law enforcement.

It is normal for parents to have incorrect assumptions about exploitation. Your intervention needs to focus on helping them become more educated about their child/youth as a victim and their role in keeping their child/youth safe, as well as maintaining safety of other children/youth in the home. Try to establish if the parents have responded in a non-protective way (e.g., kicked the child/youth out of the home, inflicted emotional abuse by name calling, or abused the child/youth physically).

Interviews should focus not only on the victimized youth but on general family functioning. It is also important to gather information from the parents about the threat of harm posed to their other children in the home.

NOTE: See Appendix D for example questions.

Interviewing non-custodial parent

It is crucial that the SW interview the non-custodial parent, because he or she may act as a valuable protective resource for the child/youth, and the

information provided can assist in case planning. See appendix D for example questions.

**Interviewing
siblings**

Siblings of the youth often have some awareness of their sibling's victimization, though they may not have the language or knowledge to express this. In some cases, siblings have been exposed to the exploitation and may be targeted by others to be exploited. Questions should focus on the siblings' time spent with the child/youth, the exploiter, and their potential victimization.

SWs must keep in mind that siblings may also be the exploiter.

NOTE: See appendix D for example questions.

**Interviewing
Alleged
Perpetrator**

When interviewing the exploiter providing the exploiter is the parent and/or guardian of the victim, there are serious safety considerations for the SW that require thoughtful planning. Interviewing the exploiter is also likely to increase the safety concerns for the child/youth. Given these concerns, any interview of an exploiter related or non-related to the youth must be done in consultation with your supervisor and law enforcement.

NOTE: An out of home perpetrator cannot be interviewed by the SW.

Forensic Interview

If the child/youth discloses CSE during the interview, or even if the child/youth does not disclose but concerns remain for the child/youth's safety and welfare, the child/youth should be referred to the local Child

Advocacy Center (Chadwick Center and Palomar Forensic Health) for a forensic interview.

Law enforcement typically authorizes such interviews, but if an interview is denied, then the SW will follow CWS policy and procedures for requesting internal authorization for the interview.

The purpose of the forensic interview, which is recorded and available to involved parties with appropriate court orders, is to assist law enforcement and CWS with obtaining complete and accurate information that will support accurate and fair decision making in criminal justice and child welfare settings. The interview is to be conducted in a developmentally and culturally sensitive manner, utilizing objective, neutral and legally defensible interviewing strategies.

Although, most children and youth only require one forensic interview, it is up to the investigative agencies, or team, as to whether or not additional forensic interviews of the child may be warranted to assist in making case decisions. The forensic interviewer will provide a copy of the interview and written report to CWS and law enforcement.

Medical Evaluation

A medical assessment may be necessary when there:

- Could be physical evidence including potential DNA evidence to establish identity of perpetrator.
- Was penetration
- Could be a physical injury such as bruising or bleeding
- Treatment of a sexually transmitted disease
- Youth/child suspects she's pregnant

Prior to a [medical evaluation](#) consent is needed from the child/youth if they are **12 years old and older**. **If they are younger than 12 years, a signed consent from the parents/caregiver is required.** If parents refuse consent then the SW might have to consider seeking judicial relief.

The medical provider doing the medical examination will provide a written report to Law Enforcement and CWS.

Assessing Safety

It is critical to select an accurate safety threat that does not blame the victim. The safety threat needs to address the inability of the family to protect and meet the needs of the child/youth. Remember that in some

cases the family may be doing everything they can and yet still be unable to provide safety. In other cases, the family may be actively involved in exploiting their child/youth. Some common safety threats to consider :

- Caregiver is unable OR unwilling to protect the child from serious harm or threatened harm by others. This may include physical abuse, sexual abuse, or neglect.
- Child sexual abuse is suspected, AND circumstances suggest that the child/youth's safety may be of immediate concern.
- Caregiver describes the child/youth in predominantly negative terms or acts toward the child/youth in negative ways that result in the child/youth being a danger to self or others, acting out aggressively, or being severely withdrawn and/or suicidal.

Sometimes it is assumed that when child/youth are older, they are less vulnerable. However this is not accurate, especially with these child/youth. Child/youth who have been victims of CSEC are exceedingly vulnerable. It is difficult for a child/youth to leave the situation because of their perceived relationship with the exploiter, lack of resources to leave, are threatened with harm to themselves and families if they leave, or are held against their will. Because of these difficulties in escaping these child/youth are vulnerable to continued physical, emotional, psychological, and sexual abuse.

While parents may be well intentioned in protecting their child/youth, it is very difficult for them to do so. Because child/youth are unable to leave their exploiters, parents are often unable to protect their children/youth. Assisting these child/youth in escaping the situation requires a community response.

Be alert to recognizing that the parent may also be the exploiter. Also, describe how parents may be aware of the exploitation but do not or are unable to intervene to protect the child/youth.

To conduct a thorough safety assessment, workers must identify if a safety threat exists; whether the child/youth is vulnerable to the threat; and whether there is a parent/caregiver willing and able to protect the youth.

Voluntary cases can be considered when the parents/caregivers are available, willing and trying to care for their child/youth but seek additional support. Voluntary cases should be opened with caution. The SW must be confident that the parents/caregivers are capable of meeting their child/youth's needs with additional supports.

Assessing Safety (con't)

CSEC cases should always be opened when a parent has abandoned the youth, blamed the youth for the victimization, unable to meet the needs of the youth or is promoting the continued victimization of the youth. CWS

must become involved when these youth do not have parents/caregivers who are willing and able to care for them.

Concluding Allegations

After the referral is thoroughly investigated, the SW may determine that the allegations are **substantiated, inconclusive, or unfounded**. Determine if the information described, disclosed, corroborated or found as evidence is applicable to a specific category of child abuse as defined in the California Penal Code.

The Structured Decision Making (SDM) Safety Assessment is completed after initial contact with the child/youth to determine if the child/youth can safely remain in their home. Once referral allegations are concluded the SDM Risk Assessment is completed to determine if a case should be opened for ongoing services. Reference to the applicable **penal code** sections should be noted in CWS/CMS to conclude an allegation.

Assessing county of origin

When CSEC victims are taken into protective custody:

- CWS will determine the county of origin. If the county of origin is San Diego, the SW will assess the youth for placement needs and ongoing services.
- And if the youth is from another county and that county has jurisdiction, then the SW will follow the Policy Manual [ICT procedures](#) for returning the child/youth to their county of residence.

If a referral is received then the SW will follow the policy for [Cross County Referrals](#)

Closing referrals without intervention

If...	Then the SW will...
The referral is being closed and the child/ youth accepts services	<ul style="list-style-type: none">• Inform the child/youth that resources/services are available.• Provide the child/youth with

	<p>identified resources</p> <p>NOTE: See resources in appendix A under “Community Resources.”</p>
<p>The referral is being closed and the child/youth refuses services</p>	<ul style="list-style-type: none"> • Inform the child/youth that resources/services are available to them. • Inform child/youth that when they are ready to leave “the life” they can call the SW for support. • Identify someone close to the child/youth, possibly a mentor to work with the child/youth on identifying the safety hazards of remaining in the life. • Provide the child/youth with resources in case the child/youth would like to contact the resources on their own. • Assess for filing a petition.
<p>The referral is being closed and the child/youth has parents/caregivers able to provide support</p>	<ul style="list-style-type: none"> • Inform the parents/caregivers about resources available to them

Polinsky Children’s Center (PCC)

**Additional roles
particular to PCC**

STEP	WHO	ACTION
1	Intake worker	<ul style="list-style-type: none">• Screen for CSEC at Intake – use existing PCC intake protocol and complete or update the screening tool• If CSEC is noted as “suspected” or “confirmed” enter information in the CWS/CMS narratives and select the Special Projects Code• Email PCC CSEC Lead with details of issues/concerns
2	PCC CSEC Lead	<ul style="list-style-type: none">• Make in-person contact to greet child/youth, follow-up, ensure basic needs are met, and conduct assessment of needs: medical, mental health counseling and prepare youth for potential interventions• Update CWS/CMS

CASE MANAGEMENT

Safety planning

In CSEC cases, on-going safety plans are difficult to develop and implement. Plans require the child/youth's engagement and participation. It may be difficult to protect the child/youth with a plan if the child/youth cannot safely admit he or she is in danger and is unwilling to participate in a safety plan. Additionally, the perpetrators are often third party abusers, and while the parents may be amenable to protecting their child/youth, they may be unable to enforce a safety plan that requires no contact with the perpetrator.

The following are some considerations for safety planning:

Child/Youth that remain in the home	The family agrees to notify law enforcement if the child/youth runs away. The family agrees to allow community resources in the home and to take their child/youth to specialized services. The family understands the signs of exploitation and is supportive of the child/youth.
Relative/NREFM placements	Relative/NREFM resources may be able to provide safety for these children/youth. Child/Youth can be successful in a setting where their exploiter does not have immediate access to them. However, it is also important to consider if the new environment presents more risks if the child/youth runs away.
PCC placement	When all other alternative placements have been exhausted, placement in PCC may be necessary until a more permanent placement can be arranged but will be at the discretion of PCC staff. Notify the CSEC lead at PCC if child/youth are placed. NOTE: 602 youth cannot be placed at PCC.
San Pasqual Academy	Child/youth identified as CSEC may be placed at San Pasqual Academy. These child/youth should be closely monitored and their contacts supervised. It will be necessary to involve the child/youth in the safety planning process and ensure that school staff and house parents are aware of the child/youth's CSEC identification.

In CSEC cases on-going safety plans often change on a regular basis. It is important to document the most recent safety plan because other SW's and after hours staff may need to access these. Encourage limited cell phone or computer access to limit likelihood of exploiter contacting the youth.

Multidisciplinary Team Meetings (MDT) for CSEC

Provide a MDT to each identified CSEC victim to more appropriately and effectively address his/her needs and the needs of his/her family/caregiver(s) while building on strengths in a coordinated manner. MDTs should be convened at initial identification of

cases

all CSEC cases to meet immediate needs and then on an ongoing/as-needed basis.

MDT meetings for CSEC cases must include the following:

- Child Welfare assigned SW
- Probation (only if the youth/child is active to probation)
- Behavioral Health
- Public Health
- CSEC Liaison

Optional attendees can include:

- Education Liaison
- Local CSEC Provider Agencies
- Survivors/mentors/victim advocates
- Law enforcement
- County Counsel
- CASA
- Service providers

The MDTs should reconvene when a triggering event occurs such as the first time the child/youth runs away or contact with law enforcement occurs.

- Provide individual case-by-case collaboration with multiple child-serving agencies
- Engage with child/youth and family/caregiver(s)
- Ensure basic needs (food, shelter, clothing) are met
- Assess and address immediate and long-term needs
- Conduct individual case planning
- Coordinate, monitor, and adjust service plan to achieve desired outcomes for CSEC
- Decide on appropriate placement
- Conduct safety planning to proactively plan for triggering events
- Meaningfully involve child/ youth in planning and decision-making

Assessment

CWS will assess the CSEC youth's treatment and services and update the case plan at a minimum under the following circumstances:

- Every six months to monitor progress and/or
 - Upon a change in placement
-

AWOL

Available research shows a strong correlation between running away children/youth homelessness and engaging in sexual activity for money, shelter, or goods. Runaways are

at a greater risk of being, or are more likely to have been commercially sexually exploited. For children/youth who have run away multiple times in one year and are suspected CSEC victims the following plan is in place:

For child/ youth who are at [AWOL](#) risk:

- Develop Safety Plan

For child/youth who return from [AWOL](#):

- If at-risk/suspected/confirmed CSEC upon return from AWOL, develop safety plan and assess the child/youth's needs for intervention and support services. If this is their first time running away schedule an MDT.

Family Team Meetings

Family Team Meetings in CSEC cases may address placement and safety planning issues such as:

- The safest place (emotionally and physically) for the CSEC youth to live
- Caregiver's ability to protect the youth emotionally and physically
- Who can provide emotional support to the youth and family (Safety Network)
- Harm, danger and complicating factors associated with the case
- The living and sleeping arrangements of all individuals in the home
- AWOL considerations
- Safety Plan for the family if the exploiter or associates should make contact
- Caregiver's level of commitment to keeping the youth safe, supporting them emotionally, meeting their needs, complying with case plan, etc.
- Law enforcement investigation and involvement
- Interventions and resources to assist the child/youth and family
- Caregiver awareness of CSEC signs such as cell phone and computer usage

NOTE: It will be crucial to invite the CSEC youth to participate in all family centered meetings to gain their support of the placement and understanding of the situation. Their voice and agreement to the decisions made will be necessary for the success of the placement. Assessment will need to be made if the child/youth's voice is significant to the meeting or if the topic being discussed would be detrimental to them.

Placement

CWS will establish safe and secure emergency transitional placements for CSEC youth. Based on the situation, emergency placement may include the hospital, parents/guardians, substitute care provider, or group home.

Placement options must take into account the different stages of exploitation a child/youth may experience, which may impact the CSEC victim's chance for stable housing. The continuum of care that a CSEC victim will experience has been conceptualized into three phases: (1) crisis intervention (2) comprehensive assessment and case management and (3) social reintegration. To ensure a continuum of care it is recommended that the amount of time a child/youth can stay in emergency or transitional housing programs be extended and that housing programs implement a no reject or no eject policies to ensure that when CSEC victims runaway or relapse they may return to the same parent/caregiver or placement after absence. An exception to this could include a youth/child who is recruiting for the exploiter e.g. the youth runs away and takes other residents with him/her. Boundaries for CSEC victims while in placement:

- Maintain the confidentiality of placement
- Safety plan if exploiter contacts victim
- Structured environment with set rules
- Safety plan for school
- Supervised transportation
- Identified support system
- 24 hour service information
- Caregiver should limit physical contact with exploiter but court order is needed

Keeping the CSEC victim safe from the exploiter:

- Location is kept confidential
- Security cameras and alarm systems in place
- Guard dog
- Gated or fenced property
- Screen calls

Services for parents/caregivers:

- Identification of a support group for caregivers of CSEC victims
- Training on CSEC and the symptoms of Trauma
- Foster Parent Mentor
- Respite services available
- Participation in family therapy
- Accessibility to medical services
- 24 hour service information

Some CSEC cases may be appropriate for the [Crossover Youth Practice model](#).

Court reports

When the SW is writing the detention report, the SW will include:

- As much detail as possible regarding the CSEC victimization
 - Quotes
-

-
- Articulation of the danger to the youth
 - The risk to the victim if they remain in the home or in their current placement
 - Child/youth's protective capacities
 - Caregiver's protective capacities
 - Safety planning
 - The danger to the victim's siblings and other children in the home/facility

The SW will address the following factors in the detention, J/D and Status Review report:

- Any factor influencing child/youth's vulnerability, including age, special needs, emotional/mental health
 - All identified safety threats and risk factors
 - Recommended interventions
-

Interventions

Since CSEC victims have significant histories of trauma that are often the root causes and/or results of their exploitation, mental health providers play a necessary role in providing essential counseling, treatment and recovery services for traumatized children/youth.

All child/youth identified as CSEC should be screened for mental health services and support through the CWS Pathways to Well-Being Care Coordinators. Child/Youth should receive the most effective therapy available to treat their specific symptoms. The therapist should be trained in evidence based or evidence informed treatment and be knowledgeable about the issues unique to CSEC victims.

The Stages of Change Model was designed to help clinicians facilitate change in clients with addictions. This model accounts for a client's readiness to make change, appreciating barriers to change and helping clients anticipate relapse. The Stages of Change Model is divided into five stages: pre-contemplation, contemplation, preparation, action and relapse prevention. This model has been adapted to address the behaviors associated with CSEC using advocacy based counseling methods.

Recommendations for individual therapy can include:

- Prolonged Exposure Therapy for Adolescents with PTSD
 - Trauma-Focused Cognitive Behavioral Therapy
 - Cognitive Behavioral Therapy
 - Multisystemic Therapy (MST)
 - Art Therapy or other non-verbal modalities
 - Family Focused Therapy
-

Interventions (con't)

Support from parents and/or caregivers is the most important predictor of the child/youth's ability to make a successful recovery. Services to the parents/caregivers should be arranged and coordinated so they are best able to support and protect the child/youth.

The trauma of CSEC requires a spectrum of appropriate services and thus requires a multidisciplinary approach. CSEC victims require specialized recovery programs that offer shelter, nutrition, and appropriate medical treatment, as well as psychological evaluation, counseling, alcohol and drug treatment programs, education programs and skills training. In general all programming should be strengths based and assist victims with accessing the inherent skills, abilities, and qualities they possess but may not recognize.

The following list generally outlines various types of services CSEC cases regularly involve:

- Assistance in accessing government benefits
- Childcare services (for any dependents)
- Clothing and food
- Court and daily accompaniment
- Crisis intervention
- Drug/Alcohol treatment
- Emergency, transitional, and long term housing
- Emotional support and counseling
- Education advocacy
- Employment assistance
- Financial management
- Independent living skills
- Interpreter/Translation services
- Literacy education
- Legal services
- Medical, dental, and mental health services
- Peer Support
- Protection/safety planning
- Social service advocacy
- Transportation
- Victim advocacy

When CSEC victims are first identified they typically have no knowledge of how to begin rebuilding their lives, what their rights are and what benefits and resources are available to them. Intensive case management (to help focus the victim, provide advocacy, coordinate the multiple systems/agencies serving the victim, and to monitor progress) as well as medical, mental health and social services are important for responding to the complex needs of these child/ youth and in helping them achieve self sufficiency.

infant must be completed before a petition may be screened. The risk must be documented and the petition based on the risk to the child.

If the SW is considering opening a Voluntary Services case for a minor parent and infant, the minor parent must consult with his/ her attorney before the SW can open the case for services.

Training

CWS will provide training for all social work staff and foster parents providing care for CSEC victims in child welfare services. CWS SWs will train and provide information to child/youth who are dependents or are part of a family in which CWS receives a referral. The training will bring awareness to help identify sexually exploited and at-risk children/youth, provide service and supports for CSEC victims, as well as educate on the use of culturally competent and trauma-informed practices.

References

The following resources were used for the development of this protocol:

- Bilateral Safety Corridor Coalition (BSCC)
<http://www.bsccoalition.org>
 - Coalition to Abolish Slavery and Trafficking (CAST) Resources and Training
<http://www.castla.org/reports-issue-papers>
 - Girls Educational & Mentoring Services (GEMS)- Training, Technical Assistance & More
<http://www.gems-girls.org/get-trained>
 - Polaris Project
www.polarisproject.org/human-trafficking/
 - Polaris Project –State of California Local Organizations and Referrals for Victims of Human Trafficking
<http://www.polarisproject.org/state-map/california>
 - The SAGE Project Training and Technical Assistant/Capacity Building Resources
<http://sagesf.org/training-and-technical-assistance-capacity-building-resources>
 - Shared Hope International
<http://sharedhope.org/resources/>
-

For questions or comments, contact [Corey Kissel](#).

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Community Resources
Appendix A

<p>Bilateral Safety Corridor Coalition (BSCC):</p>	<p>An alliance of over 60 government and nonprofit agencies in the United States and Latin America that is convened along the U.S.-Mexico Border Region to combat slavery and human trafficking. BSCC is committed to bilaterally preventing and intervening in the commercial and sexual exploitation of women and children while advocating for all exploited persons. BSCC is the only bilateral bi-national project that provides services in Tijuana, Mexico and San Diego, CA.</p>	<p>619-336-0770 or visit www.bsccoalition.org.</p>
<p>Change in Action</p>	<p>Program provides access to tattoo removal, scar revision through laser therapy or plastic surgery, as well as cosmetic dentistry to survivors of sexual exploitation, domestic violence, and sexual assault. Referrals are received from law enforcement, government and nongovernmental agencies for victims who could not afford these services on their own.</p>	<p>To receive a referral form and an authorization to share information with our doctors, please contact (619) 850-7264.</p>
<p>Children of the Night</p>	<p>A private 24- bed home, located in Los Angeles, California. Children of the Night provides refuge, food, clothing, an on-site school, counseling, and emotional support for victims of commercial sexual exploitation and human trafficking from all over the United States.</p>	<p>Children of the Night 24-hour Hotline 1-800-551-1300 or visit www.childrenofthenight.org.</p>
<p>Counseling Cove:</p>	<p>A program through San Diego Youth Services provides intensive, outpatient behavioral health services and case management services for Seriously Emotionally Disturbed (SED) homeless and runaway youth ages (12-21 years old) utilizing a comprehensive approach that is community based, client and family driven and culturally competent. Services include street outreach, individual and family counseling, case management services, and medication evaluation & treatment. Counseling Cove will provide services to CSEC victims that have experienced homelessness, are currently homeless, in temporary housing or have a history of running away.</p>	<p>(619) 525-9903</p>
<p>Department of</p>	<p>IHSI investigates immigration crime, human</p>	<p>(619)744-4600</p>

Homeland Security – Homeland Security Investigations	rights violations and human smuggling, smuggling of narcotics, weapons and other types of contraband, financial crimes, cybercrime and export enforcement issues. ICE special agents conduct investigations aimed at protecting critical infrastructure industries that are vulnerable to sabotage, attack or exploitation.	or (619)699-5681
Freedom From Exploitation	A peer-driven recovery group for victims of the commercial sex industry.	(619) 459-4877.
Generate Hope	GenerateHope, an IRS recognized I01(c)(3) not-for-profit organization, provides dedicated housing and a comprehensive recovery program for women, ages eighteen to thirty, who have been sexually exploited and/or trafficked. Since recovery from sexual exploitation is a long-term process, GenerateHope allows for up to seven years of support to work through past trauma. This provides women the ability to live independently and become a positive influence on their communities and future generations.	619-818-4026 or visit www.generatehope.org
Home Start’s Maternity Shelter Program (MSP)	Provides safe, secure, and supportive housing with intensive case management services for pregnant and parenting young women who are between 18 and 24 years old, and their dependent children. These women are homeless or at risk of becoming homeless	619-906-4401
La Maestra Community Health Centers	Services for international victims of trafficking (labor and sex)	619-564-7010
National Human Trafficking Hotline	A toll free hotline, available to answer calls and texts from anywhere in the country, 24 hours a day, 7 days a week, every day of the year.	888-373-7888 or text BeFree (233733)
National Center for Missing & Exploited Children (NCMEC)		1-800-THE-LOST (1-800-843-5678)
Project L.I.F.E/North County Lifeline	This program provides emergency services, residential coordination, case management, mental health services and victim outreach to those impacted by CSEC and human trafficking in the North County region.	760-726-4900 x6330 or 6376
San Diego Human Trafficking Task Force (SDHTTF)	Specialized officers trained to work with victims of CSEC and trafficking cases. This task force includes CSEC but wanted to be inclusive of labor trafficking along with sex trafficking and did not want to assume	(619) 531-2563

	physical violence as a requirement as emotional control is sufficient for human trafficking.	
STARS (Surviving Together, Achieving and Reaching for Success)	A program with San Diego Youth Services designed for teen girls between the ages of 13 and 18 who have experienced CSEC and/or human trafficking. The goal is to empower young women to escape commercial sexual exploitation by developing their inner strengths, building a sense of community and supporting their reintegration into mainstream society. The group meets weekly for a minimum of 12 weeks and provides Independent Living Skills, Group Counseling, Recreational Activities, Case Management and referrals to mental health services, school, health services, etc	(619) 521-2250 x3804 or (619) 993-8050
Survivors Network (Kathi Hardy)	Advocates for peer-led services and programs, Survivor-Informed policies at all levels of government, and provide best practices consultation to governments, non-profits and institutions.	http://www.survivors4solutions.com/

Common CSEC Terms
APPENDIX B

Term	Definition
Automatic	A person who continues to work for their pimp while the pimp is incarcerated
Branded	A tattoo on a victim indicating ownership by a trafficker/pimp.
Bottom/Bottom bitch/Head Bitch In Charge (HIBC)	A pimp who has multiple girls under his control will appoint one of them as the “bottom bitch” to supervise the others, report violations, and often help inflict punishment on them.
Circuit/Track/Blade/Bully	A set area known for prostitution activity. This can be an area around a group of strip clubs and pornography stores or a particular stretch of street. Within a country, it can be a series of cities among which prostituted people are moved.
Chosing up	The process by which a different pimp takes “ownership” of a victim. Victims are instructed to keep their eyes on the ground at all times. According to traditional pimping rules, when a victim makes eye contact with another pimp (accidentally or on purpose), she is choosing him to be her pimp. If the original pimp wants the victim back, he must pay a fee to the new pimp. When this occurs, he will force the victim to work harder to replace the money lost in the transaction.
Commercially sexually exploited children (CSEC)	Are forced and coerced into performing sexual acts for the purpose of sexual exploitation. Methods of force and coercion include multiple forms of physical, sexual and emotional abuse.
Daddy	What pimps require their victims to call them.
Date/Lick/Elbow	Describes the exchange when prostitution takes place or the activity of prostitution.
Exit Fee	Money a pimp will demand from a victim who is thinking about trying to leave. It will be an exorbitant sum, to discourage her from leaving. Most pimps never let their victims leave freely.
Family or folks	A group of victims under the control of a trafficker/pimp; the trafficker/pimp is attempting to recreate the family environment.
Finesse Pimp	A pimp who controls his victims without using violence.
The Game	The subculture of prostitution. “The Game” functions as a subculture, complete with established rules, hierarchy and language. People who do not actively participate in “the Game” are viewed as not understanding how it works nor understanding the people involved.
Gorilla Pimp	A pimp who controls his victims almost entirely through violence.
Human Trafficking	The recruitment, harboring, transporting, obtaining, or maintaining of a person by means of force, fraud or coercion, for purposes of involuntary servitude, debt, bondage, slavery, or participation in sex trade.
Lot Lizard	A derogatory term for a victim being prostituted at truck stops.
Out of Pocket	The phrase describing when a victim is not under control of a pimp but working on a pimp-controlled track, leaving her vulnerable to threats, harassment, and violence in order to make her “choose” a pimp. This may also refer to a victim who is disobeying the pimp’s rules.
Posting	Posting ads on the internet and social media sites
Quota	Amount of money prostituted victim must turn over to the pimp every night.
Rackin’/Dough	Making money, specifically \$1000

Roll	Commit robbery on a date/trick/john
Seasoning/Breaking	Combination of psychological manipulation, intimidation, gang rape, sodomy, beatings, deprivation of food and sleep, isolation from family, friends, and other sources of support, and threatening or holding victims children or other family members. The purpose is to totally break down the victim's resistance and ensure that she will do anything she is told.
Sister Wife/Wife in Law/Wifey	What victim's in a pimp's stable call each other.
Renegade	A person involved in prostitution without a pimp
Squad	A collaborative effort among a group of people to make money either through prostitution or other criminal activity
Squaring Up	Attempting to escape or exit prostitution
Stable	A group of victims under the control of a single pimp.
Telly	Hotel or motel
Trap House	A physical place where prostitution and other sexual activities occur
Trafficker/Pimp	Person who buys, trades, and or sells women and children for sexual exploitation.
Trappin	Working or other activities in the life
Trick	Describes both the act of prostitution and the person buying it. Usage: "turning a trick" or "with a trick".
Turn Out	Used both to describe being forced into prostitution and a person newly involved in prostitution.

NOTE: Terms have been provided in order for the SW to understand the CSEC victim's language. Terms should not to be used by the SW unless they have had training in using them with their CSEC clients.

CSEC Trauma Experienced by Victim Appendix C

This experience is known as trauma bonding or the Stockholm syndrome; some indicators include the following on the part of the victim:

- Displays hyper vigilance to exploiters needs
- Seeks to keep exploiter happy to decrease violence
- Tries to “get inside” exploiter’s/trafficker’s/customer’s needs
- Sees world from exploiters perspective; may or may not have his or her own perspective
- Experiences sense of self through exploiter’s/trafficker’s/customer’s eyes
- Denies violence when violence and threats of violence are actually occurring
- Considers outside authorities and people trying to win the victim’s release or escape the “bad guys”
- Has been trained to distrust law enforcement and social service providers
- Views the exploiter as the “good guy” and protector; has been brain washed into loving the exploiter
- Is thankful and grateful exploiter’s/trafficker’s/customer’s has not killed them
- Has been told that they are all alone and if they leave no one will take care of them
- Has been taught there is no safe place to go

Questions to Ask Appendix D

Law enforcement and community agencies frequently report concerns about Child/youth who they suspect are being exploited. The following is useful information to gather for these types of reports:

- Do the parents have a role in the exploitation? Are they aware? Are they the exploiters?
- Do these agencies have history with this child/youth?
- Do these agencies know who the perpetrators are (exploiter, gang, and/or john)?
- Was there a sex act within the past 72 hours? Are there concerns about the child/youth being assaulted? Does the child/youth need medical attention?
- Does the child/youth have a safe place to go? Has he or she contacted the parents? If so, what was their response?
- Were other child/youth involved?
- Did the child/youth appear under the influence?
- Where was the child/youth located? Who was the child/youth with? What did the child/youth have on him or her (condoms, cell phones, drugs, money, phone numbers)?
- If the report indicates the child/ youth was “advertised” on the Internet, craigslist, Facebook, Instagram, or other site. If possible, the screener should go to site and print the ad because it will likely be erased by the time the caseworker is assigned.
- Has the child/youth been trafficked in other locations? State? Country? Do those locations have a record of the child/youth?

Screeners should attempt to gather the following information in their reports:

- What information do you have that leads you to believe this child/youth has been sexually abused or “prostituted”?
- Has the child/youth disclosed having been raped, having an older boyfriend, or that he or she is being trafficked?
- What did you see on the Internet? Is it still there? What site?
- Do other people who have similar concerns? Are the Child/youth’s parents aware of this concern? What is their response?
- Describe what “out of control” is (e.g., drug use, running away)? When the child/youth runs away, where does he or she stay? Who takes care of the child/youth? Is there mention of staying in hotels, people “putting them up” in a hotel?
- Do you have concerns that this child/youth is being trafficked (or use the word “prostituted,” if that helps them understand the question)? Has the child/youth admitted to “prostituting”?
- Have the police been involved? Are there any other agencies involved?
- Are there any of the following signs indicative of exploitation?
 - Unexplained injuries (includes tattoo branding)
 - Sexually transmitted disease
 - Pregnancy
 - Unexplained money (new clothes or changed appearance such as hair and nails)
 - Unusual cell phone activity
 - Reports that they are “having sex” with multiple partners (especially adult men)
 - A controlling or violent boyfriend
 - Trips out of town
 - Truancy from school

- Gang involvement
- Street family
- Mention of someone providing “free” drugs

Questions for the child/youth

Living situation

- Where are you from? Is this where you live now?
- Do you currently live with your parents? If not, where do you live and with whom?
- What is your relationship like with your parents/guardians and siblings?
- Do you go to school? What subjects do you like/dislike?
- Are you involved in any activities at school? (Yes: Which? No: Do you wish you were?)
- Have you ever left home without parent/guardian knowledge?”
- How many times have you run away? Where do you like to go when you run away?”
- What were some of the ways you took care of yourself while you were away from home?
- Did you do any traveling while you were gone? Where did you go? Can you describe what you saw? Who did you go with? How did you get from one place to the next?
- While you were away from home, did anything keep you from going back? Did you experience anything that made you uncomfortable or scared?
- Do you feel safe now?”
- Do you have a best friend? Who is that?

Arrest history

- Have you ever been arrested? For what? What happened when you were arrested?
- Was there a person you could count on to help you through the experience? How did you know you could rely on them?

Dating status/ sex related

- Do you have a boyfriend or girlfriend? How did you meet? What do you two do for fun? Where do you go?
- Every couple has problems. What are some things about your relationship that you don’t like?
- What are some of the things that person does to show he or she cares for you?
- How old is he/she?
- Are you sexually active? Do you use contraception? What kind?
- How frequently do you have sex?
- Have you ever had a sexually transmitted disease? What type?
- Have you ever been pregnant? Have you ever had an abortion?
- Are any of your friends sexually active?

Visible tattoo

- What does your tattoo mean? When did you get it? Was someone there while you got it? Who?

Non-visible tattoo

- Do you have a tattoo? Do you have someone’s name tattooed on you? What does it mean?

Substance abuse related

- Do the people you hang out with use drugs? If yes, what types of drugs?
- Do members of your family use drugs? If yes, what types of drugs?
- Do you or have you used drugs? If yes, what type of drugs and when do you use them?

- How do you get and/or pay for these drugs?

Exploitation/ abuse-related

- Have you ever felt pressured or forced to have sex? Who has pressured you?
- What happens if you don't have sex?
- What type of sex acts do you have to do? Do you get anything for these sex acts?
- What happens after you are forced to have sex?
- Have you ever told anyone? Who?
- When was the last time you had to 'perform' sex acts for someone?
- How often are you forced to have sex?
- Do you know anyone else who is forced to have sex? Friends involved?
- Have you ever had sex in exchange for money, food, somewhere to stay, or anything else?
- Are you fearful to stop? Why? What would happen?
- Are any of your siblings in the same situation?"

Mental health status

- Do you currently have any thoughts about suicide or hurting yourself?
- Have you ever tried to hurt yourself on purpose?
- Would you ever kill yourself?
- Have any of your friends ever committed suicide or attempted suicide?"

Interviewing parents and guardians

- Are you aware of your child/youth's victimization? How did you become aware?
- What attempts have you made to try and protect your youth? Did you seek community resource assistance? Medical treatment? Therapy?
- What are the child/youth's responsibilities in the home? Does he or she babysit siblings? How frequently? Does the child/youth spend time with siblings in the community? Go to the mall? Park? Participate in community activities?
- What have the other children/siblings said about spending time with the child/youth? Are there certain people they spend time with? What do they do? Where do they go? Is it possible that the other children are exposed to the exploiter?
- What are the rules for the children in the home when the adults are away? Are other children or youth allowed to come over? Is there a curfew? Are they allowed to leave if adults are not present? Are you concerned for your other children's safety or concerned that they are also at risk for becoming sexually exploited?

Non-custodial parents

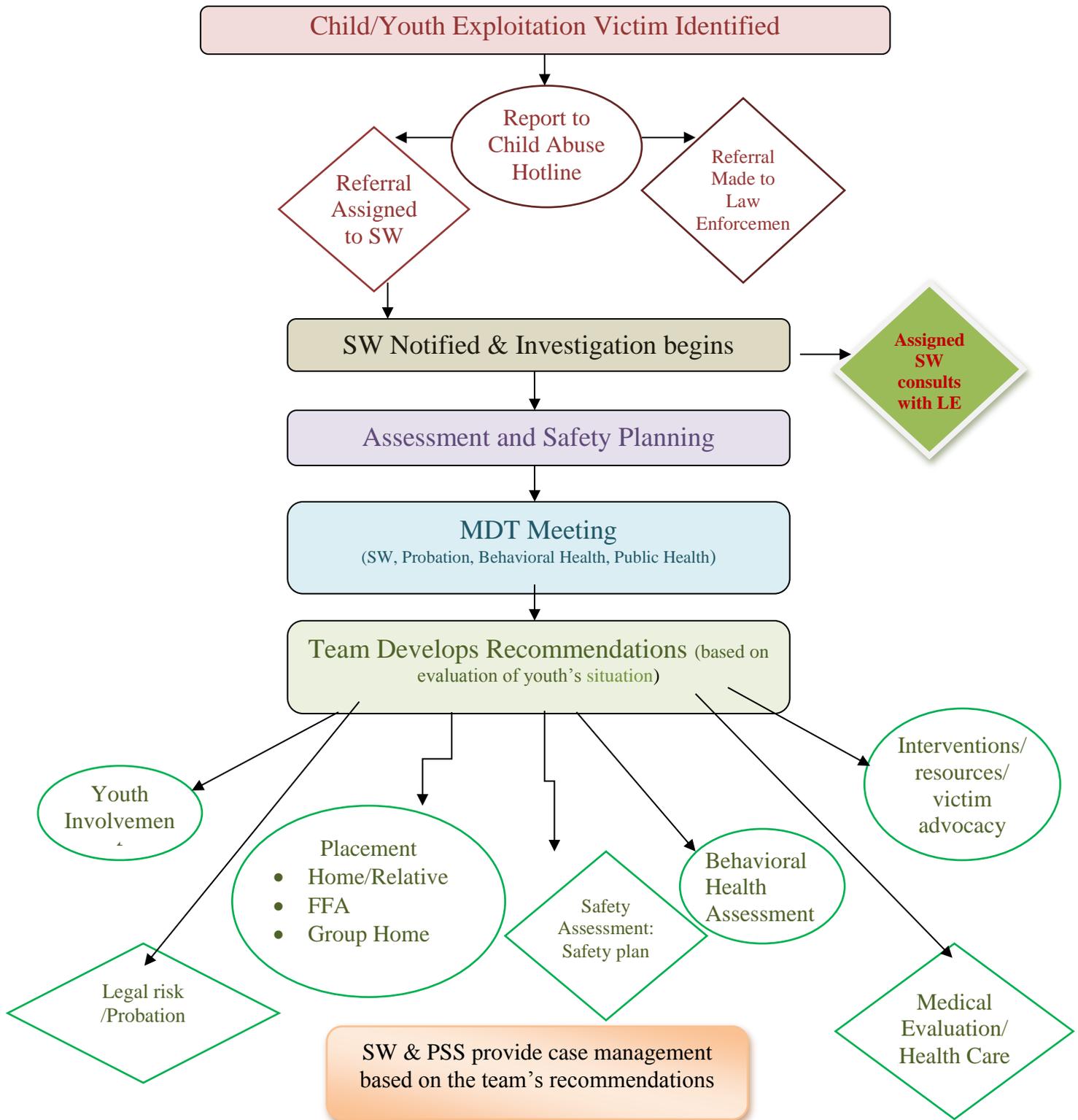
- Are you aware of your child/youth's victimization? If so, how?
- Have you had concerns for your child/youth? What are they? What have you noticed? What changes have you seen? What have you done about their concerns?
- What is your belief about the custodial parent's ability to recognize risk and protect your daughter/son? Do you have concerns for your other children?

Siblings

- Does your sister/brother babysit you? How frequently? What do you do with your sister/brother?
- Do you spend time with your sister/brother outside of the home? Where do you go? Do you go to the mall? Park? Participate in community activities?

- Have you met your sister/brother's friends? What are they like? How does your sister/brother act around them? What do they do together?
- Do you ever spend time with your sister/brother's friends? What do you do?
- What are the rules for the children in the home when the adults are away? Does your sister/brother follow the rules? Is there a curfew? Does your sister/brother get in trouble?
- Does your sister/brother tell you any secrets? Have you ever been worried about your sister/brother? Has your sister/brother ever been hurt?
- Have your sister/brother's friends ever bought you anything? Told you that you are pretty? Taken you out?
- Does your sister/brother have a Facebook/Instagram page or any other pages? Have you seen what's on those pages? (Be sure to ask questions around pornography use or exposure).

COMMERCIALY SEXUALLY EXPLOITED CHILDREN (CSEC) RESPONSE FLOW CHART



Human Trafficking Power and Control Wheel
Appendix F



This wheel was adapted from the Domestic Abuse Intervention Project's Duluth Model Power and Control Wheel, available at www.theduluthmodel.org

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West Coast Screening Tool
Appendix G

WestCoast Children's Clinic
Commercial Sexual Exploitation Identification Tool (CSE-IT)

1. Instability in Life Functioning. The youth lacks access to basic needs, including stable shelter and is unable to engage in activities expected of her/his age (e.g., school).	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 4 indicate Possible Concern. Item ratings ≥ 6 indicate Clear Concern.			
a. Does the youth have a history of running away from home, AWOL, being thrown out of the home?	0	1	2
b. Does the youth experience unstable housing, including multiple foster care placements?	0	1	2
c. Does the youth experience periods of homelessness, including living on the street or couch surfing?	0	1	2
d. Does the youth access social services or community resources to meet basic needs (e.g., hygiene, shelter, food, medical care)?	0	1	2
e. Does the youth miss a lot of school?	0	1	2
f. Has the youth had involvement (currently or in the past) with law enforcement, juvenile justice, or child welfare?	0	1	2
2. Relationships. The youth's relationships are concerning, placing him/her at risk or in danger.	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 2 indicate Possible Concern. Item ratings ≥ 4 indicate Clear Concern.			
a. Does the youth spend time with people (including family members or peers) known to be involved in the sex trade?	0	1	2
b. Is the youth's parent/caregiver unable to provide adequate supervision?	0	1	2
c. Does the youth have unhealthy or inappropriate relationships (including inappropriate boundaries) with someone much older/an adult?	0	1	2
d. Is the youth in a romantic relationship with someone much older/an adult?	0	1	2
3. Finances and Belongings. The youth has money or materials goods that are incongruent with his/her life circumstances.	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 1 indicate Possible Concern. Item ratings ≥ 2 indicate Clear Concern.			
a. Does the youth receive or have access to large amounts of cash, credit cards, pre-paid cash cards, hotel keys, gifts, cars?	0	1	2
b. Is the youth's dress or appearance atypical of his/her age or peer group?	0	1	2
c. Is the youth's dress or appearance inconsistent with the weather or situation?	0	1	2
4. Use of Technology. The youth's use of internet, cell phone, or social media involves social or sexual behavior that is atypical for his/her age.	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 3 indicate Possible Concern. Item ratings ≥ 5 indicate Clear Concern			
a. Does the youth use online sites or apps to find sex partners?	0	1	2
b. Does the youth describe meeting his/her long-term, adult boy/girlfriend on the internet?	0	1	2
c. Does the youth describe meeting in person with a contact developed over the internet?	0	1	2
d. Are there explicit photos of the youth posted on the internet?	0	1	2
e. Does the youth have explicit photos of him/herself on his/her phone?	0	1	2

WestCoast Children's Clinic Commercial Sexual Exploitation- Identification Tool Pilot

5. Physical Health. The youth has significant health problems related to sexual activity and lack of access to basic needs	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 3 indicate Possible Concern. Item ratings ≥ 5 indicate Clear Concern.			
a. Has the youth had repeated testing for pregnancy and/or STIs?	0	1	2
b. Has the youth been treated repeatedly for STIs?	0	1	2
c. Does the youth describe health problems or complaints that are related to sleep problems or not getting enough sleep (e.g., sleep deprived, unable to get a full night's sleep, sleep is often disrupted)?	0	1	2
d. Does the youth describe health problems or complaints related to poor nutrition or not having access to regular meals?	0	1	2
e. Does the youth have scarring, bruises, burns, etc. that indicate physical trauma?	0	1	2
6. Risk Behaviors. The youth engages in dangerous or risky behaviors.	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 1 indicate Possible Concern. Item ratings ≥ 3 indicate Clear Concern.			
a. Does the youth engage in a dangerous level of risky sexual behaviors, or with partners who are abusive or otherwise physically dangerous?	0	1	2
b. Does the youth spend time where exploitation is known to occur?	0	1	2
c. Does the youth have a history of running away from home, staying away at least overnight?	0	1	2
d. Does the youth's use of substances interfere with his/her ability to function in any area of life?	0	1	2
7. Trauma Exposure. The youth has been exposed to traumatic experiences.	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 1 indicate Possible Concern. Item ratings ≥ 2 indicate Clear Concern and require a mandated report.			
a. Has the youth been sexually abused/assaulted?	0	1	2
b. Has the youth been physically abused/assaulted?	0	1	2
c. Has the youth been emotionally abused?	0	1	2
8. Trauma Signs and Symptoms. The youth exhibits physical signs and emotional symptoms that can result from his/her exposure to trauma.	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 1 indicate Possible Concern. Item ratings ≥ 3 indicate Clear Concern.			
a. Does the youth have bruises, black eyes, cigarette burns, broken bones, or other signs of physical trauma?	0	1	2
b. Does the youth appear <u>constantly</u> on edge and/or wound up, easily startled, or hypervigilant?	0	1	2
c. Does the youth have difficulty detecting and/or responding to danger cues?	0	1	2
d. Does the youth engage in self-destructive or reckless behaviors, beyond what is expected from youth his/her age?	0	1	2

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9. Coercion and Grooming. The youth exhibits behaviors or otherwise indicates that she/he is being controlled or coerced by another person.	No Concern 0	Possible Concern 1	Clear Concern 2
Note: Item ratings ≥ 1 indicate Possible Concern. Item ratings ≥ 7 indicate Clear Concern.			
a. Does an adult the youth doesn't know well offer the youth housing, a place to stay, gifts, money, cell phones, transportation, alcohol or drugs?	0	1	2
b. Do adults (not caregiver) take the youth on travels or places she/he is not familiar with?	0	1	2
c. Does the youth use language, terminology or statements that suggest involvement in exploitation?	0	1	2
d. Is the youth's communication/contact with family or friends controlled by someone else to the point of social isolation?	0	1	2
e. Does the youth have to earn a quota and/or is forced to give the money they earn to another person?	0	1	2
f. Is the youth coerced (by someone other than caregiver) to get pregnant, have an abortion, or use contraception?	0	1	2
g. Does the youth have tattoos or scarring that suggest they are someone's property; <u>or</u> is the tattoo/scar common among other youth known to be sexually exploited?	0	1	2
h. Is someone not allowing the youth to sleep or to sleep in a safe place, to go to school, to eat, and/or meet other basic needs?	0	1	2
i. Does the youth report receiving threats to him/herself or to friends, family, or other acquaintances?	0	1	2
j. Is the youth asked to lie about his/her age, whereabouts, residence, or relationships?	0	1	2
10. Exploitation. The youth has been exposed to sexual exploitation or victimization.	No Concern 0	Possible Concern 1	Clear Concern 2
This includes any situation, context or relationship where the youth receives something (e.g., food, accommodation, drugs and alcohol, cigarettes, affection, gifts, money, etc.) as a result of performing, and/or others performing sexual activities on them. If there is an individual who is selling/profiting from or coercing the youth's exchange, this should be rated <i>Clear Concern (2)</i> .			
Note: Item ratings ≥ 1 indicate Possible Concern. Item ratings ≥ 2 indicate Clear Concern and require a mandated report.			
a. Does the youth have a prior history of sexual exploitation?	0	1	2
b. Has the youth been watched, filmed or photographed in sexually explicit activities?	0	1	2
c. Has the youth or someone beside the youth stated that he/she is considering or currently exchanging sex for money and/or material items including food, shelter and care for his/her family?	0	1	2

WestCoast Children's Clinic Commercial Sexual Exploitation- Identification Tool Pilot

Rating
Summary

- 1. Stability in Residential Status and Life Functioning _____
- 2. Relationships _____
- 3. Finances and Belongings _____
- 4. Use of Technology _____
- 5. Physical Health _____
- 6. Risk Behaviors _____
- 7. Trauma Exposures _____
- 8. Trauma Signs and Symptoms _____
- 9. Coercion and Grooming _____
- 10. Exploitation* _____

**If this item is Clear Concern, then total is automatically 20 points.*

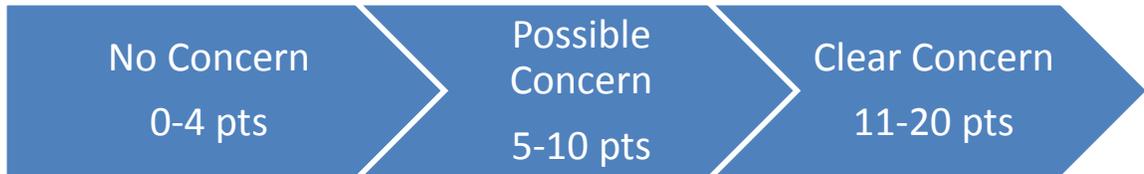
**If this item is Possible Concern and no other item has a rating, then total is automatically 10 points.*

**If this item is Possible Concern and other items are rated, add the rating ('1') to other rated items for a total score.*

Total Score _____

Other Considerations:

Appraisal of Youth's Risk for Exploitation
(draw a line indicating level of risk)



WestCoast Children's Clinic Commercial Sexual Exploitation- Identification Tool Pilot

Possible Actions	Action Taken	Rationale
1. Mandated report to authorities/CPS	<input type="checkbox"/>	
2. Develop safety plan with youth	<input type="checkbox"/>	
3. Continue monitoring risk factors	<input type="checkbox"/>	
4. Notify/consult with supervisor	<input type="checkbox"/>	
5. Notify caregiver/support person (as appropriate)	<input type="checkbox"/>	
6. Recommend/refer to case management	<input type="checkbox"/>	(Note referral here):
7. Recommend/refer to mental health services	<input type="checkbox"/>	(Note referral here):
8. Recommend/refer to other services	<input type="checkbox"/>	(Note services referrals here):
9. Recommend/refer for further assessment	<input type="checkbox"/>	(Note assessment referral here):
10. Follow agency/organization CSEC protocol	<input type="checkbox"/>	

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