Commercial Sexual Exploitation of Children (CSEC): Putting it into Perspective for the Behavioral Health Provider

Presented by:

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- Sonya Stamper, LCSW, CSEC Coordinator, Santa Clara County DFCS
OBJECTIVES

• Understand the issue of CSEC, as well as risk factors and warning signs

• Identify Santa Clara County's efforts to prevent and respond through a multidisciplinary approach, including the utility of data collection and treatment planning

• Develop a toolbox of resources and contacts for collaborative support in working with CSEC youth
OUTLINE

• What is CSEC?
• Prevalence of CSEC
• Identifying CSEC risk factors and warning signs
• County Protocol and Response to CSEC
• Resources
  – Advocates
  – Santa Clara County Department of Family & Children Services (DFCS)
  – Behavioral Health Services Department (BHSD)
  – Santa Clara County Juvenile Probation
  – Santa Clara County Public Health Department (PHD)
Human Trafficking

Labor Trafficking

Domestic Servitude

Sex Trafficking

Human trafficking: not in our neighbourhood!

STOP! Human Trafficking

You and I can...
A WORLD ISSUE

- There are 27 million people being trafficked in the world today. Free the Slaves. (2010).

- The International Labor Organization (ILO) estimates there are 2.4 million survivors of human trafficking at any moment. International Labour Organization. (2008)

- The United States government estimates anywhere between 800,000 to 900,000 people are trafficked across national borders. U.S. Department of State. (2010).

- Human trafficking is the fastest growing criminal enterprise in the world and it is currently the 2nd largest criminal industry behind drug dealing. Suveui, V. & Ukert, B. (2010).

- It is estimated to generate 32 billion dollars a year; with approximately $15 billion of that being earned in industrialized nations. Belser, P. (2005).
FEDERAL DEFINITION

- The Trafficking Victims Protection Reauthorization Act (TVPA) of 2014 defines “severe forms of trafficking in persons” in this two-tiered definition:
  
  - Sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such an act has not attained 18 years of age; or,
  
  - The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purposes of subjection to involuntary servitude, peonage, debt bondage, or slavery.
CALIFORNIA STATUTES

- California AB 22 - Passed in 2005
  - California adopted a Human Trafficking Law added to Section 236.1 to the California

- California SB 855 – Passed in 2014
  - CSEC may be served within the child welfare system under Subsection of WI 300(b)(2)
    - A child who is sexually trafficked or who receives food or shelter in exchange for, or who is paid to perform, sexual acts and whose parent or guardian failed to, or was unable to, protect the child falls within the 300 WI provision and is defined as CSEC.
  - Creates a CSEC program to serve and identify youth through an MDT approach
  - Provides funding to train staff, develop interagency protocols, and provide services

- California SB 1322 – Passed in 2016
  - Crimes of solicitation and loitering with intent to commit prostitution misdemeanors inapplicable to children younger than 18.
CSEC PENAL CODE

Penal Code section 11165.1(d) defines commercial sexual exploitation as either:

• The sexual trafficking of a child, as described in subdivision (c) of Section 236.1
  – (c) (1) Sexual Exploitation of a Child: Cause, induce, persuade, or attempt to cause, induce, or persuade a person who is a minor at the time of the commission of the offence to engage in a commercial sex act, with the intent to effect or maintain a violation of sexual acts enumerate in 236.1 (c) PC
  – (c) (2) Sexual Exploitation of a Child with Deprivation of Liberty-Through force, fear, fraud, deceit, coercion, violence, duress, menace, or threat of unlawful injury to the victim or another person.

OR

• The provision of food, shelter, or payment to a child in exchange for the performance of any sexual act described in this section or subdivision (c) of Section 236.1
EXAMPLES

• Includes:
  – Exploiting a minor through sex work;
  – Exploiting a minor through survival sex (exchanging sex/sexual acts for money, shelter, food, drugs);
  – Using a minor in pornography; and
  – Exploiting a minor by having her or him perform in sexual venues (e.g. peep shows or strip clubs).
PREVALENCE

Sex trafficking in America

80% female
50% under 18
300,000 kids trafficked a year

12 - 14 average age (DOJ)

41% of cases reported to Human Trafficking Resource Center Hotline, concerned U.S. citizens.

TRAFFICKERS
70% male

1 in 3 teens on the street will be lured into prostitution within 48 hours of leaving home (National Runaway Hotline)

The average pimp keeps 4 - 6 prostitutes (national center for missing and exploited youth)

MOST COMMON FORMS
1. Pimp-street prostitution
2. Commercial brothels
3. Escort services

$32 billion-dollar industry

a pimp can make up to $200,000 year per child prostitute (U.S. Dept. of Justice)

CA (4 biggest trafficking states) NY
NV TX
HUMAN TRAFFICKING DATA REPORT, COUNTY OF SANTA CLARA, 2015

These numbers reflect both adult and minor trafficking survivors:

<table>
<thead>
<tr>
<th>Dates</th>
<th>Agency</th>
<th>Types of Trafficking</th>
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<td>Sex</td>
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<td>Victim Witness Assistance Program</td>
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<td>District Attorney’s Office</td>
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Information from the County of Santa Clara’s Human Trafficking Commission’s Data Workgroup. For the full report visit: https://www.sccgov.org/sites/owp/Documents/Human%20Trafficking/Data%20Report%202015_FINAL.pdf
NUMBERS OF TAY YOUTH SERVED UNDER CSEC PROGRAM FY 2016-2017 IN SANTA CLARA COUNTY

Total Served: 93
64 under the age of 18
29 over the age of 18

Age
- 13 (4%)
- 14 (5%)
- 15 (12%)
- 16 (16%)
- NMD (10%)
- Unk (8%)
- 18+ non NMD (20%)

Gender Identity
- Male (2)
- Female (3)
- Other (2)
- Trans-gender (3)
- 85 (Unknown)
NUMBERS OF TAY YOUTH SERVED UNDER CSEC PROGRAM FY 2016-2017 IN SANTA CLARA COUNTY

Total Served: 93

- 64 under the age of 18
- 29 over the age of 18

Ethnicity:
- Caucasian: 8%
- Hispanic: 46%
- African American: 15%
- Asian: 3%
- Other: 3%
- Mixed: 17%
- Unknown: 8%

Youth:
- Known: 45
- At-Risk: 19

Adult:
- Known: 9
- At-Risk: 20
IDENTIFYING CSEC RISK FACTORS & WARNING SIGNS
Societal Risk Factors
- Lack of awareness of commercial sexual exploitation and sex trafficking
- Sexualization of children
- Lack of resources

Community Risk Factors
- Peer pressure
- Social norms
- Social isolation
- Gang involvement
- Underresourced schools, neighborhoods, and communities

Relationship Risk Factors
- Family conflict, disruption, or dysfunction

Individual Risk Factors
- History of child abuse, neglect, or maltreatment
- Homeless, runaway, or “thrown-away”
- LGBT
- History of being systems-involved (e.g., juvenile justice, criminal justice, foster care)
- Stigma and discrimination
IDENTIFYING CSEC: COMMON INDICATORS

- Under 18 and involved in the sex industry or has a prior record of arrest for solicitation or related offenses.
- Visible signs of abuse
- Fear, depression, submission, tension, nervousness
- Hyper vigilance
- Relationships with adults or older men
- Evidence of controlling or dominating relationships
- Unexplained shopping trips or possession of items they otherwise couldn't afford
- Not in control of their own money
- Use of slang language related to the “the life”
- Secrecy about whereabouts
- Unaccounted for whereabouts
- Truancy from school

Not all victims exhibit these. Presence of any of these is worthy of further inquiry and intervention.
CSE-IT TOOL INDICATORS

1. Instability in life functioning
   - Runaway/AWOL behavior
   - Multiple foster care placements
   - Periods of homelessness or living on the streets
   - Use social services or local resources to meet basic needs

2. Relationships
   - Peers or family members in the sex work
   - Parent or caregiver provide inadequate supervision
   - Unhealthy or inappropriate relationships with older adult

3. Finances and Belongings
   - Have access to large amounts of cash, gift cards, hotel keys
   - Access to technology they couldn’t afford

4. Trauma Exposure
   - Youth has a history of sexual assault
   - Youth has a history of physical violence
   - Youth has a history of emotional abuse

WestCoast Children's Clinic (2013). CSE-IT tool
CSE-IT TOOL INDICATORS

5. Trauma Signs and Symptoms
   – Youth have bruises, black eyes, or physical signs of trauma
   – Appears constantly on edge or wound up, hypervigilant
   – Difficulty detecting and/or responding to danger cues
   – Youth engage in self destructive behavior beyond her age

6. Coercion and Grooming
   – Youth stays with adults they don’t know well in exchange for gifts, money, stay
   – Youth travels to places she is not familiar with
   – Uses terminology or language to suggest involvement

7. Exploitation
   – Prior history of sexual exploitation
   – Known desire to exchange sex for money or materials items (food, shelter, etc)

WestCoast Children’s Clinic (2013). CSE-IT tool
PAST CHILDHOOD TRAUMA

• Prevalence of Known Family Disruptions among CSEC Clients
  – Abandonment by parents or primary caregivers --55%
  – Lack of supervision by parents or caregivers --50%
  – Living in transient household --21%
  – Out-of-home (foster care) placement disruptions --48%
  – Parent or caregiver substance use --11%
  – Contact with or involvement in parents’ criminal activities --23%
  – Involvement with or exposure to parents’ prostitution activity --15%

WestCoast Children's Clinic (2012). *Research to action: Sexually Exploited Minors (SEM) needs and strengths.* WestCoast Children’s Clinic.: Oakland, CA.
CORRELATION WITH ABUSE

• Multiple studies found that 70 to 90 percent of sexually exploited children have a history of child sexual abuse.

• Letot Juvenile Center in Texas found that 95-99 percent had experienced physical or sexual abuse.
VIDEO: THE MAKING OF A GIRL
Continuum of Sexual Abuse, SEC, & CSEC

- Linking of "love", sex, and abuse
- Violation of boundaries
- Guilt & shame
- View self as sexual object
- Low self esteem
- Run away/homeless
- Poverty & need
- Unequal power dynamics of adult/child relationship
- Media influence
- Billion dollar sex industry
- Approached by recruiters, pimps, traffickers


©Girls Educational and Mentoring Services (GEMS)
EXAMPLES OF RECRUITMENT

• Was approached downtown after running from group home
• Was exploited after first being approached to be in a romantic relationship
• Was exploited by a male who first approached her as a friend offering help
PIMP/TRAFFICKERS

• Definition
  – Some one who promotes and/or profits from the sale and/or abuse of another persons’ body or sexuality for sexual purposes, or the production of sale images of that person.
  – Can be: pornographers, brothel madams, traffickers, call themselves “agents” or “talent directors,” Or they can be boyfriends, relatives, or family members.

• Similarities with Domestic Violence
  – CSEC youth are often controlled, intimidated, socially isolated, and economically dependent on their pimp.
  – Tactics of power and control are used to gain compliance.
  – Uses physical and verbal abuse
  – Often will beat up on youth in front of others to ensure the other women recognize the pimps dominance and power
  – Pimps view the youth as their property and feel entitled to sex with them or beat them.
IDENTIFICATION

• Rosie is a 15 year old systems involved youth. She is a survivor of child sexual abuse by a family member. She has a history of running from group homes. Social worker believes when she is on the run she uses illegal drugs and is known to hang out with youth who are already identified as CSEC in our county.

– What are some red flags that come up for you?

• Runaway behavior
• Prior sexual assault
• Drug use
• Peers in the life
• Possible survival sex?
Identification

What are some questions you can ask Rosie to determine if she is at-risk for or currently experiencing sexual exploitation?

– Where did you stay while you were “on the run”?
– Were you able to leave or go/call home if you chose?
– How did you provide for yourself?
– Did anyone ask you to do something you weren’t comfortable with?
– Did anyone ask you to do something in exchange for food, clothing, basic needs, etc.?
HOW DO YOU HAVE THAT INITIAL CONVERSATION?

• “It is tough to be out there on your own. How are you surviving?”

• “Has anyone ever asked you to, or made you feel like you had to have sex in exchange for money, clothes, or food?”

• “How does that make you feel?”

• “Tell me a little more about your boyfriend, it sounds like you really like him?”

• “What has that been like for you?”
Together Everyone Achieves More

SANTA CLARA COUNTY’S MULTIDISCIPLINARY TEAM (MDT) APPROACH
DFCS CSEC TEAM: ROLES & RESPONSIBILITIES

- **SWCII, Sonya Stamper**: Administer the daily operations of the CSEC program, including leading and facilitating MDTs, committee meetings, and consulting & training.

- **SWIII, Ronni Smith**: Administer in-depth assessments, support SWCII, participate in MDTs, and consultation & training.
CANC REPORTS

• A mandated reporter who has identified red flags that point to CSEC, should call in a report to the CANC Center (408) 299-2071.

• CANC: when receiving a CSEC or other report in which red flags have been identified will determine risk and response type (IR/10-Day).

• CANC emails the report with CSEC allegations to Transformation (CSEC) team (Sonya, Ronni, Minerva)
DFCS CSEC PROTOCOL

• The importance of having a Guided Approach when serving CSEC
  – Victim-Centered
  – Trauma-Informed

• There are three (3) ways to respond:
  – Immediate Crisis
  – Initial
  – Ongoing
IMMEDIATE CRISIS RESPONSE MDT

• Immediate/Crisis Response (ICR) MDT involves a rapid response within two (2) hours of the referral.

• Is followed up by ongoing support through the first 72 hours after identification.

• Triggered by CANC or ER Social Workers.

• CANC ensures Law Enforcement contacted CSEC Advocate.

• Typically, responded to by ER, as well as After Hours Social Workers.
INITIAL MDT

- Initial MDT convenes within 10 days of the referral or when Social Worker has identified CSEC
- Purpose is to address the youth's safety and basic needs
- Social Worker will contact Transformation (CSEC) team to schedule by email
- Facilitated by Transformation SWCII (Sonya Stamper)
INITIAL MDT

• Who attends:
  – Youth and parent/caregivers
  – Case carrying social workers

• Others who might attend:
  – service providers
  – Public Health
  – Probation Officer (if JPD is involved)
  – Placement
  – Substance Abuse Practitioner
  – Advocate
  – Legal Advocate
ONGOING MDT

• Ongoing MDT will follow the Initial MDT within 30, 60 or 90 days (determined by the youth).

• Includes ongoing case planning and coordination of safety and basic needs.

• Case carrying Social Worker will contact Transformation team to schedule by email.

• Facilitated by Transformation SWCII (Sonya Stamper).

• Youth and parent/caregivers will attend.

• Case carrying, Dependency Intake, Voluntary Services or Continuing Social Workers will attend. (ER might be involved on occasion, if needed)

• Others who might attend: service providers, Public Health, Probation Officer (if JPD is involved), Placement, Substance Abuse Practitioner, Advocate, Legal Advocate.
Working Together To Protect Exploited Children
FIRST POINT OF ENTRY:
IMMEDIATE CRISIS RESPONSE MDT/INITIAL MDT

ICR MDT/Initial MDT

Existing Probation Officer

Existing BHSD Provider

BHSD Call Center

BHSD CSEC Clinicians

Existing Social Worker

Existing BHSD provider

Katie A Coordinator

BHSD CSEC clinicians

New CSEC

Katie A Coordinators

BHSD CSEC Clinicians
REFERRAL PATHWAY AND THE BHSD CALL CENTER

Community Referrals
- Pediatricians/Medical/PHN
- Self
- Law Enforcement/Probation
- RAIC
- KidConnections
- Education

BHSD CSEC Services
- Developmental, Mental Health, Substance Use Assessment
- CANS: CSE
- Intensive Therapeutic Services: TF-CBT or other trauma informed practice/EBP
- Linkage to support services

03/07/2018

SANTA CLARA COUNTY SOCIAL SERVICES AGENCY

Community Solutions

Behavioral Health Services
BSHD CALL CENTER: COORDINATION OF SERVICES

CSEC/CANCenter
408-299-2071

CSEC Coordinator

BHSD CSEC Clinicians

Assessment/CANS: CSE Module

Treatment

Linkage and Support

Coordination and Continuity of Care

CSEC Level 1 Referral

03/07/2018
BHSD FAMILY & CHILDREN’S DIVISION
COORDINATED CONTINUUM OF CARE

Least Intensive

Prevention
Early Intervention
• SLS Family Engagement
• PEI Behavioral Health
• SLS Behavioral Health
• Nurse Family Partnership (NFP)
• TAY REACH

Outpatient
• General (CBO and County Clinics)
• Ethnic Specific
• KidConnections Network (Birth-Five)
• Integrated
• SOS
• TAY
• LGBTQ
• Juvenile Justice
• Differential Response
• YATT

Intensive Outpatient (IOP)

Katie A Services*

Full Service Partnership Child/TAY

Wraparound *

Therapeutic Foster Care (TFC) *

Most Intensive

Short-Term Residential Therapeutic Program (STRTP)*

TBS Therapeutic Behavioral Services
Includes Intellectual Disability

*Referrals are not processed through the call center.
Other Points of Entry:
Juvenile Hall

- Probation Officer
- Medical Clinic
- County Office of Education

JH Referral Source

- JH BSHD Clinic
  - Screened within 72 hours
  - Identifies CSEC
  - Report to CANCenter
  - 1408-299-2071

JH BSHD Clinic

- Services
  - Assessment
  - Treatment
  - PO completes URF to BHRC for referral to Katie A for assignment to CSEC clinicians

CSEC Clinical Services

- CANS: CSE
  - Treatment
  - Linkage and Support
  - Coordination and Continuity of Care
Other Points of Entry: RAIC

RAIC Referral Source
- Intake Social Worker
- Spark Clinic
- DFCS Social Worker
- RAIC Behavioral Health

RAIC BSHD Clinic
- Screened by clinician
- Identifies CSEC
- Reports to CANCenter
- Immediate link to YWCA or Community Solutions for Advocate
- Refer to Katie A Screener for referral to BHSD CSEC clinicians

BHSD CSEC Services
- Assessment/CANS: CSE
- Treatment
- Linkage and Support
- Coordinated Care
- Collaborate with existing YWCA or Community Solutions
CSEC TRAINING AND CANS: CSE IMPLEMENTATION

- BHSD Learning Partnership to develop core trainings on CSEC for BHSD providers
- CSEC Orientation: CSEC response protocols
- CSEC 101 and CSEC 102
- CSEC Panel
- CANS: Comprehensive 5+ and CSE Module training in FY18
BEHAVIORAL HEALTH RESOURCES: FOR MORE INFORMATION

- Maretta Juarez, LCSW
  Division Director, F&C Services
  725 E. Santa Clara Street, Ste 301
  San Jose, CA 95112
  Tel: 408-794-0768
  Maretta.Juarez@hhs.sccgov.org

- Margaret Ledesma, LCSW
  Senior Mental Health Program Manager
  725 E. Santa Clara Street, Ste 301
  San Jose, CA 95112
  Tel: 408-794-0676
  Margaret.Ledesma@hhs.sccgov.org

- For CANS Information:
  Amanda Vierra, MA, LAADC
  Clinical Standards Program Manager
  725 E. Santa Clara Street, Ste 301
  San Jose, CA 95112
  Tel: 408-794-0678
  Amanda.Vierra@hhs.sccgov.org
CSEC ADVOCATES
Community Solutions is a non-profit, multi-cultural agency that has provided comprehensive human services to South Santa Clara County and the surrounding areas for over forty years.

Community Solutions’ Solutions to Violence (STV) Division is dedicated to providing proactive and progressive services in response to intimate partner abuse, sexual assault, CSEC, and human trafficking.

The extensive needs of commercially sexually exploited children (CSEC) call for a collaborative and victim-centered approach. The STV Department is committed to working in alliance with key partners to provide high quality services to CSEC and adult survivors of sexual exploitation.
WHAT AN ADVOCATE IS

• Our STV programs provide victim-centered and empowerment-based services to strengthen and support survivors of intimate partner abuse, sexual assault, and human trafficking crimes.

• Our services build symmetrical partnerships between advocates and survivors. Ultimately we believe in allowing each survivor to define the advocacy and help they need. We expect our advocates to create safe place for communication and to be an active and empathetic listener.

• All of our Solutions to Violence advocates meet the state’s criteria for confidentiality as outlined through California evidence codes:
  – Human trafficking: California Evidence Code Section 1038.2
  – Sexual assault: California Evidence Code Section 1035-1036.2
  – Domestic violence: California Evidence Code Section 1037-1037.8

• Confidentiality pertains to shared communication between service workers (such as lawyers, doctors, social workers, case managers) and their clients.
WHAT AN ADVOCATE IS

• Our advocates:
  – Create a safe space for communication
  – Establish rapport & trust
  – Identify precipitating problems
  – Respect differences and avoid assumptions
  – Protect survivor’s confidentiality at all times
  – Provide affirmation & moral support
  – Support the survivor’s decisions
  – Help the person identify, cope with, and express feelings
  – Help survivor’s explore their options & repercussions of options
WHAT AN ADVOCATE DOES:

• The STV division provides a comprehensive array of services to victims and survivors of sexual exploitation. These services include:
  – 24-hour crisis line and intervention services
  – Peer counseling
  – Safety planning
  – Legal advocacy and accompaniment
  – Medical accompaniment through the medical evidentiary exam implemented with the support of the Sexual Assault Response Team (SART)
  – Provide resources and referrals
## CRISIS RESPONSE

### Identified
- Law Enforcement or youth serving agencies can call our crisis line 24-hours a day for an in-person response request. An advocate from Community Solutions will respond to police stations, medical facilities, juvenile hall, group homes, schools or the assessment center within one hour of notification.

### Call
- Contact Community Solutions' Crisis Line at **877-363-7238** and inform them you have a potential CSEC.
- Provide the youth's name, age, city of origin, current location of the youth, contact name at location, and phone number of location.

### Response
- An advocate will respond out within one hour to the location agreed upon.
- Upon arrival, the advocate will have clothing, food, and informational resource packet. During the crisis intervention meeting, the advocate will work with the CSEC to provide verbal safety planning, peer counseling, and identification of needs and resources. We will coordinate with other local partners to ensure youth is connected with a medical exam, if desired.

### Follow up
- If the youth would like to receive follow up services and case management, the CSEC advocate from Community Solutions will provide follow up services.
RESOURCE TOOL BOX
When change comes from yourself it is stronger.
MOTIVATIONAL INTERVIEWING

• Motivational Interviewing strategies
  – Taking an empathic, non-judgmental stance and listening reflectively
  – Developing discrepancy between the client’s goals and their current behaviors
  – Rolling with the client’s resistance and avoiding argumentation
  – Supporting/building self-efficacy

Source: Miller & Rollnick, 2002
Good things about change

- I will gain more self-esteem.
- I will feel more in control over my life.
- I will be able to go to school
- It will improve my relationship with my family.

Not-so-good things about changing

- I feel guilty or ashamed.
- I don’t know if I can make change stick.
- I won’t be able to interact with people.
- I will be more anxious.
Harm Reduction Focusses on:

(1) the prevention of harms associated with a particular behavior rather than prevention of that behavior and

(2) the individuals who continue to engage in the problematic behavior despite the harms.

What is harm reduction?

Refers to an approach designed to reduce the harmful consequences associated with high risk activities.

We do not try to ‘save’ or ‘rescue’ anyone, we support them wherever they are without judgement or assumption.
THERAPEUTIC INTERVENTIONS:

• Trauma-Focused-CBT (TF-CBT)
• Adolescent Community Reinforcement Approach (A-CRA)

DO YOU OR SOMEONE YOU KNOW NEED AN ADVOCATE, HELP OR RESOURCES?

- BWC Drop-In Center
  693 S. 2nd Street, San Jose, CA 95112
  408.998.2117

- Community Solutions Hotline (SA, DV & CSEC)
  1.877.END.SADV (1.877.363.7238)

- Child Abuse and Neglect Hotline (CANC)
  408.299.2071

- Detective M. Valdivia
  408.501.5356

- HUB
  591 N. King Road, Suite #1, San Jose, CA 95133
  408.792.1750

- Legal Advocates for Children & Youth (LACY)
  408.280.2416

- RAIC
  2300 Enborg Lane, San Jose, CA 95128
  408.792.1860

- The National Runaway Switchboard
  1.800.786.2989
YOU

You are enough.
You have influence.
You are a genius.
You have a contribution to make.
You have a gift that others need.
You are the change.
Your actions define your impact.
You matter.

MATTER

From Angela Maiers’ *You Matter Manifesto*
COMMENTS & QUESTIONS
CONTACT INFORMATION

Commerci1ally Sexually Exploited Children's Program – Transformation Team
County of Santa Clara, Department of Family and Children's Services
591 N. King Road, Suite 3
San Jose, CA 95133

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  CSEC Social Worker III
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  (408) 793-8925

Community Solutions - Sexual Assault, Sexually Exploited Minors, and Prevention

- Erica Elliot, MSW
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- Kim Gutierrez
  Human Trafficking Services Program Mng
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  (408) 776-6205

Behavioral Health Services Dept., Santa Clara County, Family & Children Services Administration
725 E. Santa Clara Street, Ste. 301
San Jose, CA 95112

- Maretta Juarez, LCSW
  Division Director, F&C Services
  Maretta.Juarez@hhs.sccgov.org
  (408) 794-0768
ADDITONAL CONTACTS

Juvenile Probation
• Jennifer Anguiano
  Deputy Probation Officer III
  JPD CSEC Coordinator
  Jennifer.Anguiano@pro.sccgov.org
  (408) 278-5967

• Elisa Carias
  Supervising Probation Officer
  Elisa.Carias@pro.sccgov.org

Public Health
• Michaela Taylor
  CSEC Public Health Nurse
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• Tammy Vo
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