In FY 2014, Community Solutions received a one-year grant from the County of Santa Clara to launch the CSEC Service Response Team Pilot. The purpose of the pilot was to provide in-person response and comprehensive supportive services to identified CSEC youth. The framework for the pilot is based on a victim-centered, trauma-informed, and collaborative model. Following is the report of services provided, challenges encountered, and recommendations. Special thanks to the staff of the Office of Women’s Policy for their support and guidance during this pilot.

The views expressed herein have not been approved by the County of Santa Clara or its Board of Supervisors and, accordingly, should not be construed as representing the policy of the County of Santa Clara.
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CSEC FINAL REPORT

CSEC OVERVIEW

The Trafficking Victims Protection Act (TVPA) was passed in 2000. The TVPA was established to address severe forms of human trafficking, including labor and sexual exploitation, at a national level. In 2005, California enacted AB22; the state’s first anti-human trafficking law. Both the TVPA and AB22 focused largely on foreign-based adult victims of human trafficking. In recent years, federal, state and local governments have begun to focus on the epidemic of Commercially Sexually Exploited Children (CSEC) as an emerging dimension of the human trafficking crisis.

Just recently in June of 2014, California lawmakers passed Senate Bill 855 which allocated a potential funding stream to child welfare agencies that elect to opt into the program. Each county in the state of California can determine if they would like to elect into the funding source which will be provided during the 2015/2016 fiscal year. If the county chooses to do so, then they would be required to develop a collaborative interagency protocol, provide prevention and intervention case management services, and provide trainings. Senate Bill 855, also recognized any youth who was sexually exploited and whose parents or guardians failed to protect them as potential dependents of the court. “This bill would make a legislative finding that declares that a child is within the jurisdiction of the juvenile court and may become a dependent child of the court if the child is a victim of sexual trafficking, or receives food or shelter in exchange for, or is paid to perform, specified sexual acts, as a result of the failure or inability of his or her parent or guardian to protect the child, and would declare that this finding is declaratory of existing law.”

The issue of CSEC is not new, as society has always struggled with the occurrence and effects of child prostitution. However, the TVPA has now provided a framework within which these victims of sexual exploitation can be identified and addressed. According to The State of Human Trafficking in California Report 2012, “domestic traffickers focus on easy targets for exploitation. They often recruit vulnerable children and teens from junior high and high schools, courthouses, foster and group homes, bus and train stations, shopping malls, homeless shelters, halfway houses, bars, parks, and playgrounds.”

Research shows there are several factors that increase a youth’s vulnerability to sex trafficking: experience in running away or being homeless; being lesbian, gay, bisexual, or transgender; substance abuse; history of mental health; being system involved (either juvenile justice or social services); or a history of maltreatment such as physical abuse or sexual abuse. In fact, the recent meta-analysis study conducted by the Institute of Medicine and the National Research Council, found that child sexual abuse is strongly associated with commercial sexual exploitation (IOM, 2013). A study by Letot Juvenile Center in Texas found that 95% - 99% of the youth had experienced physical or sexual abuse (Smith, 2009).
The National Institute of Justice reported that in the United States, family members or friends are commonly exploiting their own children for monetary gain (Albanese, 2007). Parental drug use also places youth at a high risk, not only because of the neglect associated with drug use, but because of the likelihood some parents might sell their children to pay for their habit (Smith, 2009). Youth who are current wards of the court are at a higher risk because of their history and high propensity to run (WestCoast, 2012). Due to the trauma experienced by CSEC, a high number cope through substance abuse (WestCoast, 2012). One study showed that nearly 95% of CSEC were severely abusing substances (Smith, 2009).

Frequently “Johns,” who should be known as sex offenders, are not charged or cited for their offenses. Under California Penal Code 261.5, children under the age of 18 cannot consent to sex and are defined as victims of statutory rape. This crime is commonly referred to as "unlawful sex with a minor." Unfortunately, when money is exchanged, the underage victim is considered a “prostitute” and treated as a criminal. When CSEC are identified as victims, it becomes their burden to cooperate and participate in a lengthy, traumatizing, investigative process. Usually it takes several months, if not longer, before the exploiter is arrested; leaving the youth at extreme risk for retaliation or further trauma bonding if they return to the exploiter.

Identifying victims, prosecuting exploiters, reducing demand, and lack of appropriate and available CSEC shelters and services continue to pose significant challenges to service providers and systems ability to respond to this alarming issue (Smith, 2009). A study by West Coast for Children found fewer than half of the youth being exploited recognized their trafficker was not acting in their best interest; and nearly eleven percent actively protected their exploiter from investigations and prosecution (WestCoast, 2012). Research shows that CSEC will often return to their traffickers many times before they are ready and able to leave safely (similar to working with survivors of intimate partner abuse). Many existing placement options and service providers do not identify the many stages of exploitation the youth might be experiencing. Research has shown that when identifying proper placements, it is important to “ensure a continuum of care recommendations that include extending the amount of time youth can stay in emergency and transitional housing programs and implementing ‘no reject, no eject’ policies to ensure that when CSEC victims runaway or relapse they may return to the same caregiver or placement after an absence” (Hughes, 2014).
### Performance Measures

#### Safety Net Sub-Group

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>The Service Response Team will assist in the completion of a countywide MOU by June 2014.</td>
<td>Not completed, per the decision of the partners within the Safety Net committee</td>
</tr>
<tr>
<td>The Service Response Team will assist in the coordination of the Safety Net sub-group meeting by August 2014 and will meet monthly thereafter. The Service Response Team will work in coordination with the CSEC-SEM workgroups to develop trainings on trauma-informed services; identification and referral of youth at risk for CSE; and trainings on prevention specific to CSE youth.</td>
<td>Completed</td>
</tr>
</tbody>
</table>

The Safety Net meeting is an opportunity to discuss identified or at-risk CSE youth. The meeting is comprised of representatives from the Department of Family and Children Services, Probation Department, Community Solutions, EMQ, Bill Wilson Center, Seneca, LACY, the Nest, Victim Witness, District Attorney’s Office, and Law Enforcement (Sheriff, FBI, and San Jose Police Department). The group meets once a month and identifies a select number of youth to discuss. Partners bring information pertinent to the youth at the monthly meeting and discuss services the youth is connected with, safety concerns, challenges and successes with each youth, and offer recommendations for further services to connect the CSE youth.

In April, the Safety Net group decided that the District Attorney’s office would chair the Safety Net meeting acting as the coordinator of each meeting. In July, the Safety Net group developed a referral tool for community partners such as medical staff, probation officers, social workers, youth service workers, and others to refer at-risk or identified CSE youth. The District Attorney’s office became the keeper of the referrals and brought those new referrals to the meeting.

**MOUs**

The Safety Net group began meeting regularly prior to the beginning of this grant. In March, the Safety Net group decided that instead of creating a county-wide MOU, it would instead have members sign a confidentiality agreement that the Department of Family and Children Services utilizes for other multi-disciplinary meetings. The confidentiality agreement allowed the group to maintain privacy for CSE youth. However, law enforcement partners within the meeting could not sign the confidentiality agreement due to conflicts within their roles.

The Santa Clara County Safety Net meeting was modeled after the Alameda County Safety Net meeting. However, in the Alameda County meetings law enforcement and the District Attorney’s office are not part of the meeting to allow community partners to speak openly about their youth without compromising the youth’s privacy (potentially in any cases where there are identified CSEC and law enforcement or the DA would have to act on “tips” disclosed during the meeting, or in cases where information that could lead to criminal charges against the CSEC is disclosed during the meeting).

**Challenge Addressing Confidentiality**

An issue around sharing information at the Safety Net meeting is many of the service providers are mandated by HIPPA standards. Most service providers (including our Service Team), must obtain a signed release from our client prior to disclosing any of the client’s information. The release also specifies what information the client has allowed us to share at the Safety Net meeting. Our agency developed a Safety Net release (see Appendix A) that details exactly what information clients are comfortable with us sharing for this pilot. Frequently, our clients were
not comfortable with us sharing information with the Safety Net group. It was also an issue for out-of-county youth because we could not obtain a release to discuss their case at the Safety Net meetings.

Recently, an issue arose involving a conflict with the District Attorney’s role in chairing the Safety Net meeting. The District Attorney’s Office, as well as other members of the prosecutorial team, such as Victim Witness and law enforcement, must comply with *Brady v. Maryland* (which dictates that prosecutorial teams must disclose any information pertinent to the criminal case) (Kristiansson, 2013). (For more information on *Brady v. Maryland* see Appendix B.) During a Safety Net meeting a member of the group shared information that the District Attorney’s office potentially had to disclose. The group discussed this arising issue at our January Safety Net meeting. The group decided to divide the Safety Net meetings. The District Attorney’s office, Law Enforcement, and Victim Witness would attend the first half hour of the meeting, provide updates, and discuss any pertinent issues; they would not participate in the group discussion concerning specific CSE youth. Subsequently, the Safety Net group would meet and discuss specific youth. Probation or DFCS would maintain the referrals, depending on which system the youth was involved in. Any information germane to law enforcement or the district attorney’s office would be communicated to them.
PREFORMANCE MEASURES

DATA TRACKING

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>100% of CSE youth who received in-person response from an advocate will</td>
<td>Completed</td>
</tr>
<tr>
<td>complete a form collecting essential and reportable data such as: name, age,</td>
<td></td>
</tr>
<tr>
<td>gender, address, ethnicity, sexual orientation, contact number, any information</td>
<td></td>
</tr>
<tr>
<td>pertaining to the legal case (detective name, law enforcement agency, and case</td>
<td></td>
</tr>
<tr>
<td>number), system involvement, and services offered to and received by the youth.</td>
<td></td>
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</tbody>
</table>

For this pilot project, the CSEC Service Team provided services to 59 youth between February 2014 and March 2015. Below is a breakdown of the demographic makeup of the youth who were provided services by the CSEC Response Team.

The Service Response team worked with 59 youth who identified as female, including one youth who identified as transgender (male to female). The ages of the youth are: three youth were 13 years old; nine youth were 14 years old; nine youth were 15 years old; twelve youth were 16 years old; nineteen youth were 17 years old; four youth were 18 years old; and three youth’s ages were not collected. The Service Response team did not work with any youth who identified as Asian American, Hawaiian or Pacific Islander, or American Indian. The ethnicities of the youth who the Service Response team did work with are: fifteen White; twenty-one African American; nineteen Hispanic or Latino; two youth who identified as Other; and two youth who did not identify an ethnic background.
The Service Response team worked with youth from following counties: thirty-three from Santa Clara; five youth from Alameda; one from Solano County, three from Contra Costa; one from Fresno; one from Merced; four from San Joaquin; seven from Sacramento; and four youth from out-of-state (Colorado, Washington, Texas, and Florida). The Service Response team worked with youth from variety of system level involvement: twenty-eight youth were involved in the juvenile justice system; eleven youth in the dependency system; four youth is a dual status youth; and sixteen youth in neither system. (This statistic represents the youth’s system involvement at the time of referral.)

<table>
<thead>
<tr>
<th>Referral Source</th>
<th>Law Enforcement</th>
<th>Juvenile Hall</th>
<th>Medical</th>
<th>Group Homes</th>
<th>DFCS</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>February 2014 through June 2014</td>
<td>8</td>
<td>9</td>
<td>1</td>
<td>5</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>July 2014 through March 2015</td>
<td>3</td>
<td>21</td>
<td>3</td>
<td>6</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

In the first part of our grant, February 2014 through June 2014, we received 24 referrals for CSEC youth: eight from Law Enforcement (six from SJPD, one from MHPD, one from GPD); nine from Juvenile Probation; one from Medical Providers, five from group homes (two from the Bill Wilson Center and three from EMQ Group Home—with two EMQ referrals already open cases); and one self-referral. In the second part of the year, July 2014 through March 2015, we saw a drastic change in referrals from Law Enforcement. The referrals for the second half of the year were: two from Law Enforcement (two from SJPD and one from GPD); twenty-one from Juvenile Probation; three from Medical Providers; six from group homes (five from the Nest and one from EMQ Group Home); one from DFCS; and one from a Victim Attorney. Nearly half of the referrals the Service Team received came from the Probation Department. This could account for the higher representation of juvenile justice youth represented.
The Service Response Team also received referrals for youth who either self-identified or had an open case identifying them as a victim. Some of the youth referred to our Service Team were considered At-Risk for CSEC involvement. These youth had risk factors which concerned the reporting party such as: the youth had expressed high risk sexual behaviors, siblings of youth who were identified CSEC, or youth who were associating with known CSEC youth. However, these youth did not have any open cases identifying them as a victim nor did they self-identify as a CSE youth. For these youth, our advocates provided peer counseling and education around sexual exploitation. Some of the youth we were referred due to suspected exploitation and our advocates supported them through the disclosing process; while others accepted support and education around healthy relationships, but consistently denied any CSEC involvement.

<table>
<thead>
<tr>
<th>Type of Referral</th>
<th>Number of Youth</th>
</tr>
</thead>
<tbody>
<tr>
<td>Confirmed CSEC</td>
<td>38</td>
</tr>
<tr>
<td>At-Risk for CSEC</td>
<td>21</td>
</tr>
</tbody>
</table>
PREFORMANCE MEASURES

DIRECT SERVICE

Our Service Response team provides services in three phases: (1\textsuperscript{st}) crisis intervention, (2\textsuperscript{nd}) stabilization, and (3\textsuperscript{rd}) intermediate phase. During the crisis intervention phase (the first 24 hours from when the youth is identified), a sexual assault advocate responds to in-person response requests made by our partners.

During the stabilization phase (from 24 hours to 21 days from time the youth is identified), the CSEC advocate/case manager (who is also a certified intimate partner abuse and sexual assault advocate), completes a written safety plan, provides peer counseling, medical, legal and court accompaniment, refers the client to Victim Witness (if applicable), connects with the pilot team therapist (if applicable), and/or provides linkage to out of county resources. Our CSEC advocate provides support to legal guardians through peer counseling and resources as needed. The CSEC advocate also participates in any Multi-Disciplinary Team (MDT) meetings related to the youth.

During the intermediate phase (beyond 21 days from time the youth is identified), the CSEC advocate continues to provide peer counseling, works with the youth to develop SMART (Specific, Measurable, Attainable, Relevant, Time limits) goals, identifies and connects youth to necessary resources to accomplish said goals, provides legal and court accompaniment, and other supportive services as needed. Lastly, the CSEC advocate continues to work collaboratively with our partner agencies through MDT meetings and through the Safety Net process.

For Out-of-County youth, our CSEC advocate continues to provide follow-up. The CSEC advocate provides follow up and continues safety planning over the telephone. The CSEC advocate helps to identify local resources and connect the youth through a referral processes (if applicable). When applicable, the CSEC advocate continues to provide legal advocacy and information related to any legal cases from Santa Clara County.

Crisis Intervention

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Completed</th>
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</thead>
<tbody>
<tr>
<td>70% of the youth that meet with an advocate will engage in a one hour peer</td>
<td>Completed. 78% of the youth who were connected with an advocate engaged in at least a one hour peer counselling session.</td>
</tr>
<tr>
<td>counseling session. During this meeting the CSE Advocate will provide peer</td>
<td></td>
</tr>
<tr>
<td>counselling, verbal safety planning, discuss youth’s feelings and concerns,</td>
<td></td>
</tr>
<tr>
<td>and provide any necessary resources.</td>
<td></td>
</tr>
<tr>
<td>100% of out-of-county CSE youth will be provided with transportation support when requested.</td>
<td>Completed. Only one of the out-of-county youth needed transportation.</td>
</tr>
</tbody>
</table>

Our Service Response team provided crisis intervention services to 59 youth; 46 of the 59 (78%) met with an advocate for over one hour. Of those, 44 out of the 46 (95%) participated in verbal safety planning. During the initial peer counseling session, advocates talked with youth about resources available, conducted verbal safety planning, discussed and educated the youth on sexual exploitation, and discussed feelings associated with their exploitation. For out-of-county youth, we specifically identified resources in their community they could potentially receive services from. We asked youth who already had services in place to sign a release allowing us to contact their service provider and inform them that they would be returning to their county of origin. We followed up with many of the out-of-county youth to ensure they were connected to services within their own counties. A possible reason for the high representation of out-of-county youth may be the referral source. Many of the CSE youth that are placed at juvenile hall are out-of-county youth. While this county has traditionally not incarcerated youth for solicitation related charges, the connection to advocacy services remains low. It is highly encouraged that law enforcement and DFCS partner with CSEC advocates upon identification of sexual exploitation. This includes in the field emergency response and linkage meetings between youth and the advocate.
During crisis intervention, some of the youth requested not to receive follow up services by an advocate. Two examples of why a youth did not want further services: one youth stated they were already being supported by another program and felt that support was sufficient; another youth stated she did not feel she was at-risk for exploitation, however she did take an advocate business card.

Only one of the out-of-county youth we provided crisis response to needed assistance in traveling back to her County. Her mother did not drive nor did she have enough money to pay for someone else to drive her to San Jose. The mother was able to find a friend to drive her to San Jose and we provided gas cards to the mother to help assist with the financial burden. Advocates also provided clothing and other basic necessities. Specifically, youth who were in need of clothing were provided clothing by our responding advocates. Lastly, we also provided a copy of *Runaway Girl* by Carissa Phelps to many youth we responded to. *Runaway Girl* is a survivor’s story depicting her experience and how she overcame sexual exploitation. Many of the youth found this extremely helpful and it allowed for dialogue between the youth and advocate in the following peer counselling session(s).

**Stabilization Phase**

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Completed</th>
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</thead>
<tbody>
<tr>
<td>50% of the CSE youth from Santa Clara County that met with an Advocate during the crisis intervention phase will meet with an Advocate at least three times. The CSE Advocate will provide support through peer counselling, development of goals, and linkage to resources.</td>
<td>45% of CSE youth from Santa Clara County met with an advocate at least three times.</td>
</tr>
<tr>
<td>30% of the CSE youth from Santa Clara County that met with an advocate during the crisis intervention phase will complete a written safety plan with the CSE advocate.</td>
<td>39% of CSE youth from Santa Clara County completed a written safety plan.</td>
</tr>
</tbody>
</table>

Our Service Response team provided crisis intervention services to 33 youth from Santa Clara County. Of the 33 youth, our advocate met with fifteen at least three more times. During the stabilization stage our Service Response Team provided 72 peer counselling sessions. Four of the youth we connected with during the crisis intervention stage moved out of the county during the stabilization phase to live with family members or to a group home. Thirteen of the fifteen youth we provided three or more peer counseling sessions to during the stabilization phase completed a written safety plan. The safety plan model is based on Jill Davies, Eleanor Lyon and Diane Monit-Catania’s book *Safety Planning with Battered Women, Complex Lives/Difficult Choices*. Victim-defined advocacy is a pragmatic approach to working with individuals that acknowledges and builds on their perspectives and their response to their partner’s/exploiter’s power and control. Safety planning is a symmetrical process wherein youth work in partnership with the advocate to identify challenges and risk factors within their social circles, families, placements, and relationships. The youth and the advocate then work collaboratively to identify steps the youth could utilize during potentially dangerous situations. For example, if a youth identified they may run from their placement, the plan could be that prior to doing so, the youth will contact the advocate, call the crisis line, talk with the placement staff, write out their goals, or exercise.

The Nest provided many referrals to us of youth that came into their group home. Some of these youth were from other counties, but technically counted as in-county since they were within Santa Clara County at the time services were provided. For example, we worked with a youth referred by the Nest for almost a month before she ran from the group home. In that time, we were able to provide her with back to school clothes and supplies. She was attending a school with a strict dress code policy, so obtaining clothes that meet the schools stringent requirements was very important.

Sometimes youth who engaged with the advocate during the stabilization phase moved out the area, which led to discontinuing further services. We provided services to one youth who fell into this category within less than two months. Also, we were able to refer her to LACY to address educational issues. Lastly, we worked with her to complete a written safety plan and a goal plan. She identified that one of her biggest goals was to get a job.
As part of that, she knew she needed her California Identification. We provided accompaniment and support so she could obtain her California Identification.

**Intermediate Phase**

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Completed</th>
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<tbody>
<tr>
<td>50% of the CSE youth from Santa Clara County that continue to meet with an Advocate during the stabilization phase will meet with an Advocate at six or more times. The CSE Advocate will provide support through peer counselling, development of goals, and linkage to resources.</td>
<td>60% of CSE youth that continued to meet with an advocate during the stabilization phase met with an advocate at least six times.</td>
</tr>
<tr>
<td>30% of the CSE youth from Santa Clara County will develop SMART goals in collaboration with the CSE Advocate.</td>
<td>89% of the youth created SMART goals.</td>
</tr>
</tbody>
</table>

During the intermediate phase, our team successful continued to work with nine of the fifteen youth. During the intermediate phase our Service Response Team provided 248 peer counselling sessions. Eight of the nine youth completed SMART goals and showed great improvement. Below are several success stories.

#1: We were first connected to this youth in April of 2013 through probation. She has been through multiple placements during our involvement. She has said to us how helpful it is to have a familiar face to talk to, to have somebody just know her. While she continues to work through her own trauma, she has learned to discern who is healthy in her life. She also has learned to reach out to those healthy individuals when needed.

#2: We were originally referred to this youth through our sexual assault program prior to the start of this grant. This youth displayed many high-risk behaviors for CSEC. Our service team worked closely with her to develop a written safety plan and a goal plan. She has not displayed any running behaviors for over a year (which was one of her goals), and she is set to graduate from high school soon. She began working and held steady employment for several months. We connected her with a Full Service Partnership mental health program which she is continuing to engage in.

#3: Our team was connected to this youth in June of 2014 by her group home. This youth found it extremely helpful to just have time away from the group home and a safe person to talk to that was not connected to the group home. We provided advocacy to the group home around her feelings of safety as well as educating her on alternative methods of asserting her rights. One of her goals was to stop cutting completely by a set date, and she has been consistently working towards that goal by using different coping techniques. We also provided back to school clothes and new school supplies to her.

#4: Our team was connected with this youth in July of 2014 by her group home. Our team worked with her to develop goals. She identified she wanted support in completing community service hours. We were able to find an appropriate agency and do the community service hours with her. We provided accompaniment support during her disposition of a separate sexual assault case as well. We also provided her with back to school clothes and new school supplies.

#5: Our team was connected with this youth in August of 2014 by a victim attorney on the South Bay Coalition to End Human Trafficking. This youth needed to testify at a preliminary hearing against her traffickers and she was extremely nervous and scared. At the time, she was staying at a group home in our county. We worked to create a safety plan and identified positive coping strategies to help her during this time. One of the strategies was to reconnect with her family who could not travel to see her due to financial reasons. We provided financial support to her mother to drive out and see her at her group home on two separate visits prior to court to help provide her support. We helped provide clothing and other necessities as well. We provided her with support during the court process and connected her with an online tool to keep informed of the traffickers potential release dates to help
relieve some of her anxieties. At court, her perpetrators plead guilty and she did not have to testify. We worked
with her to write her victim impact statement and continued to work on building healthy coping strategies and self-
estem. We worked on filling out job applications and completing a resume. She is awaiting transfer to an out of
county placement. We worked on connecting her with a survivor in her new service area as a positive support
system to help in her transition.

#6: We were originally referred this youth in November of 2013 and connected with her father as she was a
runaway and at-risk for exploitation at the time. She was later identified in Oakland and detained for solicitation
related charges. She was transferred back to Santa Clara County. We connected with her in February of 2014. At
which time, she was still exhibiting high risk behaviors such as running away for days at a time and using drugs
and alcohol. We worked consistently with her for several months spending an average of three to five hours a
week. We were able to establish a rapport with her. Consequently, the times she left the house, we were able to
locate her and bring her home. As we worked with her, she began to runaway less and display less at-risk
behaviors. She began to engage in community service and continued to work on developing positive coping
strategies. During our time with her she changed WRAP and service teams four times. In October, she and her
family relocated to another county; prior to that she had a great success of completing the electronic monitoring
program.

#7: Our team was referred to this youth in May of 2013. She had been exploited in Santa Clara County. We
began to provide service to her weekly. During our weekly sessions, we provided on-going peer counseling and
safety planning. We continued to provide support to this youth over the past two years. At one point she left her
placement and the state. We were able to stay connected with this youth and assisted in her decision to turn
herself in. We then flew to pick her up and return her to placement. She developed goals, one of which was to
obtain her driver’s license. We were able to pay for driving lessons and her driver license fees. In September she
obtained her driver’s license. She is currently in a healthy relationship and employed.

#8: Our team was recently connected with this youth in January 2015. Our team provided several peer
counselling sessions and worked with her to develop a written safety plan before she was transferred to a group
home out of county. When the youth was originally referred, she was not willing to discuss or talk with law
enforcement about her exploitation. However, after a couple of peer counselling sessions she felt confident and
empowered and was able to report not only the exploitation, but a separate domestic violence incident to law
enforcement. We are still providing support to this youth over the phone. We are currently working on identifying
goals that can be accomplished with our limited communication.

#9: Our team was originally connected to this youth through an in-person response to Morgan Hill Police
Department. This youth was arrested with a trafficker in a motel in Morgan Hill. The trafficker was arrested for
several charges including human trafficking. However, the youth did not want to speak with law enforcement
about the trafficking. The youth was taken to Juvenile Hall for a separate matter. During this time our service team
worked with her and provided peer counselling specific to the Power and Control Wheel, which illustrates tactics
used within sex trafficking and abusive intimate partner relationships. She continued to refuse to talk with law
enforcement. We worked on developing goals and positive coping mechanisms. She was released in April and
shortly after left her home. In July, we were connected back with the youth again. She informed us, and it was
confirmed, that shortly after she ran she filed domestic violence charges against her trafficker and obtained an
emergency protective order. She had not returned to him while she was still on run. She agreed to talk with law
enforcement about the trafficking and provided supporting evidence. Her trafficker recently plead guilty to
trafficking and was sentenced to five years in prison. While at her placement, she decided to run. Our service
team reached out and asked if she would be willing to return and work on completing her placement. She agreed
and allowed our advocate to pick her up and return to placement. We completed SMART goals with her as well,
one of which was to obtain her California Identification. We are still working with this youth to achieve her other
goals.
Therapy

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>70% of CSE youth that participate in at least five individual therapy sessions will develop a treatment plan in partnership with the therapist. The treatment plan will focus on reducing symptoms of trauma, increasing understanding of the dynamics of abuse through psycho-educational discussions, developing healthy coping mechanisms and improving self-care.</td>
<td>Not applicable. The therapist did not meet with any CSE youth more than five sessions.</td>
</tr>
</tbody>
</table>

Many of the youth our service team was connected with already had identified therapists they were using. Some youth were required to utilize a specific therapist while in placements or as part of their probation program. Our service team met with one youth. The session went really well. At the beginning of the session, the youth was a little hesitant, as she didn’t know what to expect. After the therapist provided an overview of the services, shared her approach to therapy, and gave the youth an opportunity to ask any questions she had; the youth fully engaged and openly shared her experience. She willingly scheduled a follow up appointment. Unfortunately, the youth later opted not to continue therapy services.

Our therapeutic approach with CSEC clients is trauma-informed, strength-based, and client-centered. This approach: (1) Incorporates an understanding of the physical, social and emotional impact of trauma on individuals; (2) Acknowledges the symptoms of trauma and the role it plays in CSEC’s lives, including an understanding that the youth’s negative behavioral and emotional responses may be an adaptation to the trauma they’ve experienced; (3) Recognizes the interrelation between trauma and symptoms of trauma such as depression, anxiety, eating disorders and substance abuse; (4) Promotes a healing environment by minimizing triggers, developing emotional and physical safety, trust, respect, information and transparency, collaboration, empowerment, and hope towards healing; (5) Highlights and acknowledges youth’s strengths, skills and resiliency and; (6) Recognizes the importance of working collaboratively with survivors, family and friends, and other services agencies in a manner that will empower youth survivors.

Goal development is done collaboratively with the youth. The therapist ensures the process is transparent by asking clients what they would like to work on or change. We find this individualized approach works very well with youth because it gives them control and choice to openly express what they want to work on and/or change.

BASIC SUPPORT

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>100% of the CSE clients that requested basic support such as clothing, toiletries, or food will receive it.</td>
<td>Completed.</td>
</tr>
</tbody>
</table>

As part of our crisis response and intervention, advocates provided clothing and toiletries to four youth. Since many of the referrals the service team received were specifically from the Juvenile Hall, most of the youth were already connected with clothing and basic needs. Many of the Santa Clara County youth that we provided continued support to were in need of clothing to help them transition back to school or their placements. Several youth did not have the financial means to purchase items for school; most of the clothing they previously owned would be deemed inappropriate at their schools. We utilized project funds to purchase back to school clothing and school supplies. The new clothing and supplies helped youth feel more confident when returning to school and staying in their placements.
BEST PRACTICES
Our team encountered several successes working with CSE youth. Some of the elements below highlight some best practices that led to those successes.

Trauma-Informed Approach
Our Service Response team provided trauma-informed and empowerment-based services to strengthen and support survivors. Our services build symmetrical partnerships between advocates and survivors. Our team created a safe place for communication and was active and empathetic listeners. Our advocates established rapport and trust, identified precipitating problems, helped the person identify, cope with, and express feelings, helped survivor’s explore their options and repercussions of options, protected survivor’s confidentiality at all times, provided affirmation and moral support, and supported the survivor’s decisions.

Research shows when working with CSEC survivors it is important to provide “…trauma-informed care as ‘a strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological, and emotional safety for both providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment” (IOM, 2013).

Early Access to an Advocate
For several of the youth, we were connected early on in the investigative stage. Law enforcement or our local community-based partners contacted an advocate to provide support to the identified youth. This connection allowed the youth and advocate to establish a rapport and trusting relationship as the advocate provided accompaniment and trauma-informed support during law enforcement interview. This also allowed the advocate and law enforcement to communicate prior to the initial interview with the CSE youth. This allowed for better safety planning and engagement with the youth. It also allowed for collaboration and problem-solving around appropriate placements for the youth.

Consistency
Many of the youth our Service Team has seen success with have been receiving services for long periods of time while their criminal cases are pending prosecution. Our consistency was able to provide stable support to youth as they transitioned to new placements or phases in their lives. “Many victims may not trust the provider and may not understand or believe the provider is willing to help. This relationship-building requires consistency over time, coupled with a nonjudgmental approach and significant perseverance on the part of providers. Considerable time and repeated contacts may be necessary before a relationship has been built sufficiently for a girl to accept services” (IOM, 2013).

Several of the youth who received services had secondary teams in place; for instance, youth within the dependency system are placed at a group home with WRAP around services. For a lot of these youth, they experienced transitions with their teams or placements several times during the course of our case management with them. For example, in eight months one youth we worked with changed WRAP or supportive teams four times. Each time the youth was detained in juvenile hall her WRAP team needed to close. When she was released, her original WRAP team was no longer be available and therefore, she changed teams. This led to four team changes. However, our Service Team was able to provide services to the youth throughout this time. We were able to see the youth within juvenile hall and again in her home environment. This led to a higher amount of trust and rapport with this youth.

Emerging Models
In the past two years, new models have emerged on not only how to work with CSE youth, but also prevention strategies.
GEMS in New York connected the Stages of Change theory with advocacy-based counseling for CSE youth. This adaptation allows advocates and providers to identify and recognize which stage a youth might be exhibiting. It provides quotes from survivors of CSEC, as well as, quotes from advocates to utilize to help youth move into the next stage. The Stages of Change model identifies five stages: pre-contemplation, contemplation, preparation, action and maintenance, and relapse prevention. It is important to work from where they youth is. (See Appendix E for a copy of the adapted Stages of Change model by GEMS.)

The Harm Reduction Model is an avenue to educate and increase strategies for youth to reduce health risk and increase safety in situations where they might return to their exploiter. Several studies show that CSEC youth often return to their exploiters several times before they are able to leave for good. Therefore, this model allows for service providers to build upon a youth’s strength and knowledge to create safe decision making if they return. “Some of the most compelling voices raised in support of the Harm Reduction Model are CSE victims themselves. Exploited girls advocating for implementation of HRM argue that it ‘would allow them to care for each other safely and empower them to make safe choices’ (Hughes, 2014).

The Public Health Model is an emerging strategy to prevent, engage stakeholders, tackle public perception, and address societal and roots causes of CSEC. “Proponents of the PHM argue that the law enforcement-centric approach of the past decade has made little progress toward the goal of eliminating human trafficking, and that the PHM may be more effective” (Hughes, 2014).
RECOMMENDATIONS

Serving Transitional Age Youth

The pilot precludes us from serving any youth over the age of 18. However, sexual exploitation continues to be an issue for youth beyond their 18\textsuperscript{th} birthday. Many CSE survivors identified within our county are between the ages of 18 and 25; also known as Transitional Age Youth (TAY). A literature review conducted by the Southern Area Consortium of Human Services in 2014, found that “researchers and providers collectively stress that youth must be provided with a continuum of care to ensure victims access the services needed throughout their recovery and eventual reintegration. CSEC survivor needs do not stop at the age of 18 years old” (Hughes, 2014). TAY present unique challenges and needs and may require more support during this time; particularly youth from the foster care and probation systems. Future funding should allow for service provision to TAY. Many surrounding counties such as San Mateo, San Francisco, and Alameda include TAY in CSEC service delivery. We recommend the County develop a policy that clearly allows the inclusion of transitional age youth in CSEC services so that providers can provide continued support to youth throughout their transition into adulthood.

Out of State Youth

The first challenge is CSE youth are often transported across city, county, and state lines. This tactic is used by traffickers to ensure the youth cannot leave the situation, as well as, to avoid detection by law enforcement. This year we had several cases involving out of state youth. Out of state youth are particular vulnerable because in addition to being displaced from their home and legal residence, they also encounter an immense amount of trauma due to their displacement. For this particular youth, the goal is to minimize this risk of re-traumatization by providing victim-centered placement options.

For example, one youth from our county chose to relocate out of state due to safety reasons. Several questions arose as a result of her testimony against her traffickers, including: (1) Who would supervise this youth if a legal guardian was not able to accompany her?; and (2) If she did fly out with a legal guardian, should an advocate fly out to escort her due to the nature of the case and the anxiety that testifying typically provokes? We collaborated with the District Attorney’s Office and law enforcement to coordinate a safety plan and travel arrangements so the youth and her guardian to fly out and testify. The District Attorney’s Office paid for flights and hotel accommodations for the family. Our Service Team provided transportation and accompaniment for the youth and her family from the airport to their hotel. While the family remained in our area, we provided all food and necessities. We also provided gas cards to help pay for the costs of travel to the airport from their home. In the end, this case proved to be a successful collaboration between all of the partners. The family felt completely safe during the entire process. This is a great example of how a strong collaborative relationship between service providers, law enforcement, and the district attorney’s office can result in a trauma-informed response and a plan that addresses and provides quality care for this youth and her needs; while also ensuring traffickers are held accountable during the prosecutorial process. We recommend that the County continue to look at how minor children will be best served if they need to fly in from out of state to testify and victim-centered placement options.

Another situation our county has come across at least twice, is when a youth from our county is detained or identified in another state, or an out of state youth is identified or detained in our county. Juveniles who are from out of state trigger Juvenile Interstate Compact Rules. Each state operates differently, and each state has a representative to work with the other state. We recommend that the County examine this issue more in depth by convening meetings between Probation, DFCS, Law Enforcement, and attorneys (both Public Defenders and District Attorneys) to discuss this issue and develop a policy that would provide clarification for this situation.

To access a full copy of Juvenile Interstate Compact Rules, visit: http://www.juvenilecompact.org/Portals/5/library/rules/ICJ%20Rules_Final.pdf
Out of County Youth

In the past year, the Service Response Team provided services to fifty-nine youth; twenty-six (44%) of those youth were from other counties or out of state. As mentioned above, the issue of transportation requires further exploration. For out of county youth, another issue that arises pertains to follow up services. Our team works with the youth to identify services in their counties that can best serve their needs. Unfortunately, it is not feasible for our team to provide those youth with services, given our financial and geographic limitations. We can provide over the phone follow up. However, many of the youth have their phones removed by law enforcement for evidence collection. Consequently, our advocates are not able to connect with the youth when they return to their home counties. Trying to provide comprehensive service over the phone is also a challenge. We are not able to connect with the youth in a meaningful way (such as seeing their family or their response during the conversation). This is an issue for all service providers across the state. Best practices and recommendations are being developed on more efficient and productive referral sources for youth. One way we tried to address this is to have youth sign consent forms allowing us to call service providers in their area and share the youth’s information.

Another issue for out of county youth is placement and/or transportation to their home county. Some of the out of county youth we came in contact with were already on probation. Therefore, they were taken to juvenile hall by law enforcement to await transfer to their county of origin. In April, our team was called out to the San Jose Police Department to provide support to a CSEC youth from Sacramento. The youth was not known to either system and her mother could not drive out; nor could she afford to take the train. We offered to provide the mother money for gas if she could locate a friend to bring her to San Jose to pick up her daughter. It was already late at night and the soonest she could arrive would be the next day. The mother gave consent for the youth to stay at the Bill Wilson Center. We contacted the Bill Wilson Center and let them know we would be bringing a CSEC youth. They informed their staff and prepared a single room. Our team safety planned with the youth who committed to staying at the Bill Wilson Center until her mother came. Our advocate returned to the Bill Wilson Center the next morning and provided more clothing and talked more with the youth. The youth stayed at the Bill Wilson Center until her mother arrived. Upon her arrival, the mother was provided with gas cards. By leveraging our partnerships, we are able to enhance the breadth and depth of services for this youth. The collaborative process also helped to ensure a trauma-informed response for this particular youth. The collaboration also prevented this particular youth from being incarcerated, or even worse re-victimized.

Limitations Pertaining to Providing Financial Support to CSEC

Some CSEC are particularly vulnerable given their financial situation. For this reason, we designated a significant amount of funds for direct client assistance. Direct client assistance includes food, shelter, toiletries, clothes, rental assistance, medical care, etc. The short term goal is to use client assistance funds to provide for youth’s basic needs. The long goal is to eliminate monetary barriers preventing the youth from moving forward. Our agency policy prevents us from supplying clients (adults or minors) with cash or checks made out in the client’s name. Instead, we write checks to vendors (i.e. landlord, PG&E, cell phone provider, etc.), or provide gift cards for basic needs (food, clothes, toiletries, gas, etc.). Furthermore, most of the youth we work with do not have an individual checking or savings account. After incurring close to $3,000 in gift card expenses, we were informed that the county disallows gift cards. As a long time vendor of the County that provides services to vulnerable populations, we have never been presented with such a policy. We recommend that the County develop clear policies that address the use of gift cards by contractors serving high-risk, vulnerable populations.
TRAINING
During the initial phase of the CSEC Service Team Pilot, our focus was on raising awareness of services offered by this project. We conducted outreach and educated our partners on services available under this contract. Additionally, we created and placed outreach materials in restaurant bathrooms in areas of San Jose where human trafficking is known to occur (such as the area near Alma and Monterey Street). We also placed information regarding advocacy services in Sacred Heart, the HUB, the Receiving Center, and several other locations. (See Appendix C)

Our efforts to raise awareness and provide education on CSEC and the services we offer, our Service Team conducted presentations to partners within Santa Clara County. Below is a list of the presentations we conducted:

<table>
<thead>
<tr>
<th>Presentation Date</th>
<th>To Who</th>
<th>Type of Presentation and Partners Presented with (if any)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4/8/2014</td>
<td>Probation Officers</td>
<td>Overview of Services</td>
</tr>
<tr>
<td>4/22/2014</td>
<td>Probation officers</td>
<td>Overview of Services</td>
</tr>
<tr>
<td>4/25/14</td>
<td>Juvenile Public Defender’s office</td>
<td>Overview of Services</td>
</tr>
<tr>
<td>5/9/2014</td>
<td>DFCS probation -RCST</td>
<td>Overview of Service</td>
</tr>
<tr>
<td>6/19/14</td>
<td>At-risk youth at BWC</td>
<td>CSEC Prevention Curriculum</td>
</tr>
<tr>
<td>6/26/14</td>
<td>State Commission on the Status Against Women</td>
<td>Training on CSEC and Overview of Services; Elisa Carias, Probation, SBCTEHT &amp; CSEC Survivor</td>
</tr>
<tr>
<td>7/9/14</td>
<td>Interagency Collaboration Committee of the Child Abuse Council of SCC</td>
<td>Training on CSEC, presented with Kyle Oki, SJPD</td>
</tr>
<tr>
<td>7/25/14</td>
<td>Adolescent Pregnancy Prevention Network</td>
<td>Training on CSEC and Overview of Services</td>
</tr>
<tr>
<td>9/12/14</td>
<td>Probation, Parole State Meeting</td>
<td>Training on CSEC; presented with Elisa Carias, Probation, District Attorney Paola Estanislao &amp; CSEC Survivor</td>
</tr>
<tr>
<td>9/18/14</td>
<td>DFCS, RAIC</td>
<td>Training on CSEC and an Overview of Services</td>
</tr>
<tr>
<td>10/3/14</td>
<td>DFCS, The HUB</td>
<td>Training on CSEC and an Overview of Services; presented with Karie Lew, LACY and District Attorney Paola Estanislao</td>
</tr>
<tr>
<td>10/30/14</td>
<td>Overfelt High School</td>
<td>Overview of Services</td>
</tr>
<tr>
<td>2/19/15</td>
<td>Corbett Group Home Youth</td>
<td>CSEC Prevention Curriculum; presented with Shared Hope</td>
</tr>
</tbody>
</table>

As part of our grant, our Service Team was expected to develop a training specific to providing trauma-informed services to CSE youth. Some of our partners in the CSEC workgroup attended a training provided by Trauma Center at Justice Resource Institute and Project REACH and discussed how great their training was. One of the elements they liked best about the training was the fact it was presented through the lens of the different parties involved when working with CSE youth. The CSEC workgroup were developing ways to bring Project REACH to Santa Clara County to provide this training. We thought that combining efforts we would be able to provide a training that many of our partners already found useful; and help our partners identify ways they could incorporate and ensure they were providing a trauma-informed approach when working with CSE youth. In January, we offered three webinars on Trafficking and Psychological Trauma: Identifying Best Practices provided by the Trauma Center at Justice Resource Institute and Project REACH. (A copy of the training can be found in Appendix D).
PREVENTION REPORT

In February 2014, Community Solutions was awarded a grant to specifically provide services to commercially sexually exploited youth. As part of that grant, it was requested that a report be created on current prevention programs against sexual exploitation. Our service team researched potential CSEC prevention curriculum available across the United States. Staff identified if training was available for each of the programs, as well as, reached out to all of the different creators of the program to gain more information specific to their programs.

Extensive information was provided by the My Life, My Choice (MLMC) coordinator regarding their Fiscal Year 2013-14 data, sample activities, quotes from participants, and list of states where the curriculum is being implemented. An in-person one-day training is available for the MLMC, however the agency is stationed in Boston. A presenter for the Shared Hope International curriculum, Chosen, met with the service team and provided a copy of their curriculum for our viewing. Our staff completed an online training for the Shared Hope Chosen program. The Love Don’t Hurt curriculum was developed in Alameda County. Our staff attended two-day training in Hayward on their curriculum.

Below is a summary of our findings.

<table>
<thead>
<tr>
<th>Curriculums</th>
<th>My Life, My Choice</th>
<th>Love Don’t Hurt</th>
<th>Chosen</th>
<th>Young Men To End Exploitation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer Reviewed</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Developed</td>
<td>2003</td>
<td>2012</td>
<td>2013</td>
<td>2011/2012</td>
</tr>
<tr>
<td>Population</td>
<td>Girls ages 12-18</td>
<td>Youth 6th-9th grade</td>
<td>All youth</td>
<td>Boys ages 14-18</td>
</tr>
<tr>
<td># of Sessions</td>
<td>10 weeks</td>
<td>6 sessions (3 parts)</td>
<td>1 session</td>
<td>4 sessions</td>
</tr>
</tbody>
</table>

**My Life, My Choice**

*My Life My Choice* (MLMC) is a 10 week program for girls ages 12-18 who are at risk for or are victims/survivors of commercial sexual exploitation. The *My Life, My Choice* was created in 2003. It is usually facilitated by trained staff, typically a survivor of exploitation and a licensed clinician, and can be delivered in a variety of settings (e.g.: group homes and residential facilities, juvenile justice facilities, middle and high schools, community based organizations) (IOM, 2013). It focuses on using a public health model of altering behavior through a shift in the participants’ attitudes, knowledge and skills (*My Life, My Choice*. 2012). Over the 10 weeks, the program combines interactive activities and journaling with survivor testimony in an effort to challenge the girls’ perceptions of the commercial sex industry, identify common recruitment tactics, and build self-esteem and personal empowerment.

Pre- and post- surveys are administered to evaluate any change in the participants’ attitudes and knowledge of commercial sexual exploitation. Results from these assessments show differences in the girls’ understanding of exploitation. One example from the MLMC informational flyer states: “in one group, only 30% of girls were able to identify a pimp in a sample anecdote; at the end of the group, 90% of the same girls correctly identified the pimp” (*My Life, My Choice*. 2012). Surveys also indicated a noticeable difference in the familiarity and comfort level of
participants seeking resources, including law enforcement and social workers. The program also tracks attendance and records excerpts journal entries to show girls’ progress. Quotes from actual participants spoke to the group giving them hope and a voice when before they felt as if they did not have one (A. Corbett, 2014).

Currently, this curriculum has not been peer reviewed, though they have been awarded a grant to focus on the evaluation of the data that is collected (A. Corbett, 2014). MLMC is working closely with the state of New Jersey where the curriculum is being evaluated for its use in the health and human services system. Over the next 3 years, MLMC hopes to share more data and peer reviewed articles for support of the effectiveness of the curriculum.

**Love Don’t Hurt**

The Love Don’t Hurt curriculum focuses on youth grades 6th-9th and seeks to raise awareness on issues of physical, emotional, and sexual abuse. The Love Don’t Hurt curriculum was created in 2012. By educating the youth on these issues, they hope to raise the students’ understanding around the conditions that may make them vulnerable for exploitation.

It is a 3 stage program that has been reviewed and approved by the California Department of Education (Love Don’t Hurt PSA, 2014). The first stage is called the Orientation. It is a one-time 60-90 minute introduction to abuse that incorporates “drama, eye-catching imagery, and age/grade appropriate personal testimony” from an abuse victim/survivor (Love Never Fails, 2012). The youth will complete a survey at the end of the orientation. Based on the results from the survey, it may be recommended that the school implement stage 2, The Academy.

The Academy is 6 separate modules that focus specifically in an hour long session on a single type of abuse covered in the Orientation. There are accompanying discussions and activities around how an exploiter might use this abuse against a victim/survivor of exploitation. Each module has accompanying pre/post- tests to gauge the effectiveness of the curriculum.

After the completion of the Academy, the third stage involves a continued presence of 12 months the Love Don’t Hurt staff at the school. The staff was have office hours (lunch, after school) where youth could drop in if they wanted to talk to staff or just hang out. In this way, the youth continue to have a central resource for support.

At this time, there are no peer reviewed articles evaluating this curriculum.

**Chosen**

Shared Hope International created the curriculum Chosen in 2013. It seeks to raise awareness in both youth and adults regarding the tactics that recruiters use against the youth. In this way, youth have a better understanding of the grooming process and have tools to better prevent any future exploitation. The curriculum can be implemented in a single session of 30-45 minutes. It consists of an introduction about exploitation followed by a 21 minute video and guided discussion. There are two versions of the video: one depicts various grooming methods that are applicable to any youth, the second is focused to show how exploitation may work within the gang environment. The hosting party would need to decide which version would be most relevant to the participants. There is an evaluation tool that can be utilized after the session.

This curriculum has already been implemented in some south Santa Clara County schools and is supported by the South County Youth Task Force. The youth have been receptive to the information and now are aware of an important issue that impacts their peers (B. Edmonds, 2013).

At this time, there are no peer reviewed articles evaluating this curriculum.
Young Men to End Exploitation

The Chicago Alliance Against Sexual Exploitation (CAASE) has taken a different approach in its prevention efforts by creating their curriculum, Young Men to End Sexual Exploitation. The Young Men to End Exploitation was developed in 2011 and developed in 2012. It focuses on preventing sexual exploitation through the education of young adolescent males on this issue. They engage high school age young men in four 45 minute sessions to discuss healthy relationships, violence prevention and both social and personal responsibility (IOM, 2013). By the program conclusion, the participants should be able to “explain sexual exploitation as a form of gender-based violence, discuss social perceptions of masculinity as described by peers and media, and act as allies against sexual exploitation by identifying practical ways to end gender based violence” (Chicago Alliance Against Sexual Exploitation. 2011). The program is only used in schools and meets a number of the Illinois State Board of Education learning standards.

Another unique aspect to this program is that while CAASE engages young men, they also partner with rape victim advocates to provide a similar program for young women. The only difference is in one activity where the young men act out a role play made up of quotes from purchasers; while the young women take a relationship quiz that focuses on recruitment tactics.

At this time, there are no peer reviewed articles evaluating this curriculum.

Recommendations

While each curriculum has its strengths and works towards the same goal, it seems that the My Life My Choice (MLMC) curriculum would integrate well into Santa Clara County for the following reasons. It can be used in a number of varied institutions (juvenile justice facilities, group homes and residential facilities, middle and high schools) and its effectiveness has been the most researched. Los Angeles County has implemented the program within their juvenile justice system. It may be prudent to consider how successful their use of the curriculum has been.
REFERENCES

A. Corbett, personal communication, November 11, 2014.


Love Don’t Hurt PSA. [video file]. Retrieved from https://www.youtube.com/watch?v=yfOR2ZHKPgQ.


## COMMUNITY SOLUTIONS' SOLUTIONS TO VIOLENCE
### CONSENT / AUTHORIZATION TO RELEASE CONFIDENTIAL HEALTH INFORMATION

<table>
<thead>
<tr>
<th>Client's Name:</th>
<th>DOB:</th>
</tr>
</thead>
<tbody>
<tr>
<td>I, (Name of Client)</td>
<td>and/or</td>
</tr>
<tr>
<td>(Parent/Legal Guardian/Conservator)</td>
<td>authorize</td>
</tr>
</tbody>
</table>

authorize (Releasing Party) Community Solutions’ Commercial Sexual Exploitation of Children program

to disclose to the following recipients:

<table>
<thead>
<tr>
<th>#</th>
<th>Organization</th>
<th>City, State</th>
<th>Phone #</th>
<th>Other Identifiable Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>District Attorney</td>
<td>Santa Clara County</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Law Enforcement</td>
<td>Santa Clara County Sheriffs, San Jose Police Department, FBI</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>DFCS</td>
<td>Santa Clara County</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>LACY</td>
<td>Santa Clara County</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Probation</td>
<td>Santa Clara County</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Community-Based Organizations</td>
<td>Bill Wilson Center, EMQ Families First, Seneca, Freedom House, The Rise</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

the following information with the knowledge such release discloses the fact that the named person has received mental health services.

The disclosure shall be limited to the following specific information *(Nature and amount of information to be disclosed; as limited as possible to accomplish the stated purpose or intended use):*

**Safety Net Group Meetings:**
Ensuring each meeting participant is connected with services and able to discuss safety concerns

I understand that:

1) My mental health records are protected under the California Welfare and Institutions Code (WIC) and the Federal Health Insurance Portability and Accountability Act (HIPAA) of 1996, and cannot be disclosed without my written consent unless otherwise provided by the regulations. The exceptions are set forth in the Notice of Privacy Practices

2) I may revoke my consent by providing a written notice withdrawing my consent

3) If the program has already disclosed information in reliance on my consent, the program is not required to try to retrieve that information

If not earlier revoked, this consent shall automatically terminate and expire on or as follows *(specify the date, event or condition, upon which this consent expires):*

Client’s Signature: ___________________________ Date: ___________________________

Parent/Legal Guardian/Conservator’s Signature: ___________________________ Date: ___________________________

I certify that I have reviewed with the client or with his/her representative this Consent to Release Confidential Health Information:

☐ I find that the client has the capacity to give informed consent or the client’s representative has the legal authority to act for the client. I hereby authorize the release of requested information.

☐ I find that the client does not have the capacity to give informed consent or the client’s representative does not have or it is not clear if he/she has the legal authority to act for the client. I hereby do not authorize the release of the requested information.

Signature of Authorized Staff: ___________________________ Date: ___________________________

*(Original to chart / Copy to client)*
Walking A Tightrope: Balancing Victim Privacy and Offender Accountability in Domestic Violence and Sexual Assault Prosecutions

Part I. An Overview of the Importance of Confidentiality and Privilege Laws

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INTRODUCTION

Domestic violence and sexual assault crimes are among the most sensitive and challenging cases to investigate and prosecute. They involve extremely personal information, which the prosecution needs and the defense may demand, that victims are understandably reluctant to share. Victims often feel embarrassed and ashamed when asked to reveal details of the physical, emotional, and sexual violence they have survived. These feelings, along with the confusion, frustration, and pain many victims have experienced, may cause them to be concerned about sharing and safeguarding their personal information. In addition to privacy concerns, victims may feel a very real and overwhelming fear for their safety. Victim safety may be jeopardized if sensitive information is published or otherwise made available to the offender and the public. These concerns exist for every professional with whom victims come into contact as they navigate their way through the medical, advocacy, therapeutic, and criminal justice systems. Following an assault, victims may come into contact with nurses and doctors, police officers and detectives, clergy, therapists, victim advocates, prosecutors, victims’ rights attorneys, and a myriad of support staff, all of whom may ask them to disclose their histories multiple times.

Understanding the limitations of permissible information sharing that applies to allied criminal justice professionals can be challenging. The purpose of this article is to help professionals in the criminal justice system understand what information a victim considers to be private and be able to explain to the victim as well as to other professionals within the system what information is private under the law. Having this discussion with victims up front will prepare them for what to expect, help encourage their cooperation throughout the
process, and prevent them from feeling that the system misled or betrayed them. This knowledge may also empower victims to take control of their circumstances and make informed decisions, voluntary assertions, or waivers. It will also help the professionals with whom victims come into contact protect their safety and privacy to the best of their ability.

This Strategies article is Part I of a two-part series addressing two types of victim privacy laws – confidentiality and privilege. Part I provides an overview of confidentiality laws in order to assist prosecutors in effectively balancing offender accountability with the safety needs and expectations of victims during criminal investigations and prosecutions. Part II of the series provides a discussion of common privileges and the scenarios in which conflicts with these privileges may arise. Part II also provides prosecutors with strategies to protect privileges when the privacy interests of victims might outweigh the need to disclose privileged information.

**THE IMPORTANCE OF VICTIM PRIVACY LAWS: VICTIM SAFETY AND AUTONOMY**

The “right of privacy” is “[t]he right of a person ... to be free from unwarranted public scrutiny or exposure.”2 Victims who have sought help from advocates, clergy, law enforcement, or health professionals may hold deeply rooted beliefs about their right to privacy and will need to have the scope of privacy rights, as they relate to various affiliated criminal justice professionals, explained.3 If their privacy is breached or invaded, not only will victims feel that their statements and lives have been unjustly exploited, but their legal rights may also have been violated.

Information that individuals deem private often involves the people and procedures that matter most in life and that affect persons greatly. It can be the source of joy but, more often, the cause of great embarrassment, or information that the individual simply wishes to keep secret. Indeed, “belonging to an individual,” as well as “secret,” are both included in the definition of the word “private.”4 The facts and history associated with domestic violence and sexual assault crimes are often secrets that have been harbored by victims for years – sometimes the entire span of their lives. Victims can feel so strongly that their history is a secret that they often have great difficulty sharing facts with anyone. This difficulty is one of the many reasons that a victim’s right to privacy must be fully explained to the victim and protected when possible.

**UNDERSTANDING CONFIDENTIALITY LAWS**

The privacy umbrella includes information that is confidential under the law. Confidentiality is both an ethical and legal duty that a professional owes to a victim, client, or patient to keep certain communications and information safe. Confidentiality is defined as “[a] communication made within a certain protected relationship – such as husband-wife, attorney-client, or priest-penitent – and is legally protected from forced disclosure.”5 At its most basic level, confidentiality allows victims to fully disclose the details of the violence they have endured so that they can receive services without fear that their personal information will be exposed. The level at which the confidential information is legally protected is inextricably linked to the professional and organizational status of the professional who receives this information from the victim.

Confidentiality laws encourage open, honest, and safe communication between victims and the professionals they rely on to support their healing and pursuit of justice in cases involving intimate partner violence and sexual assault. These services, provided in a compassionate and secure setting, may be necessary to meet sexual or domestic violence victims’ legal, medical, mental health, counseling, housing, and financial needs. Confidentiality is the foundation upon which victims rebuild their trust, empowerment, and autonomy after they have been greatly diminished or destroyed following acts of violence.6

Confidentiality laws encourage victims to disclose their victimization in the context of therapeutic and other professional relationships. This enhances professionals’ overall ability to protect victims from future intimidation and harm by their abusers, while protecting the information against a disclosure that the victim may not wish to make at law enforcement.

**CONFIDENTIALITY VERSUS PRIVILEGE**

Confidentiality is a duty, while a privilege is a legal right. Confidentiality is the broad application of privacy laws used to create a duty to protect a victim’s information and safety. A privilege is a legal right that gives both the sharer and the holder of information special protection
**Confidentiality: Requirements for Advocates, Medical Professionals, and Law Enforcement**

*Advocates*

Victims can receive the support of advocates from two main sources: local non-governmental agencies, including domestic violence or rape crisis centers, and prosecutor’s offices’ victim-witness assistance programs. The distinction is an important one, and because the victim will likely be unaware of differences in the advocates’ roles, the applicable confidentiality rules should be explained to the victim.

Generally, a community advocate affiliated with a local community program will have a strict duty of confidentiality to maintain pursuant to state law and – if the program receives federal funding – grant guidelines. A victim–witness assistant employed by the prosecutor’s office, however, will mostly likely be regarded as part of the prosecution team and thus may or may not be able to protect sensitive victim information. In both of these scenarios, confidentiality laws govern the release of a victim’s personal information and an external actor’s ability to obtain that information. Depending on the type of information the victim-witness assistant receives, the assistant might be legally required to disclose private information pursuant to the rules of discovery and relevant case law.

In fact, some jurisdictions legislate a prosecutorial affirmative duty “to review the notes of [victim-witness] advocates and inquire about their conversations with victims, which responsibility stems from the … [state’s] obligation to produce exculpatory evidence and, on request, material and relevant ‘statements’ of persons.” Part of the rationalization for the victim-witness assistant being considered a member of the prosecution team – and even for the prosecutor’s affirmative duty to review the victim-witness assistant’s notes – is that the victim-witness assistant’s duties traditionally had fallen to the prosecutors themselves. Victim-witness assistants now help victims and witnesses “cope with the realities of the criminal justice system and the disruption of personal affairs attending a criminal prosecution during a time of personal trauma.” Thus, in some jurisdictions, due to the functions that the victim-witness assistants perform as part of the prosecution team, their work is subject to the same legal discovery obligations and their notes are subject to the same discovery rules as prosecutors.
are primarily responsible for reviewing the victim-witness assistant’s notes and disclosing any exculpatory evidence therein, advocates have a duty to relay to prosecutors any information they believe is exculpatory.

Some funding sources, including grants received under the Violence Against Women Act (VAWA) or Family Violence Protection Services Act (FVPSA), contain confidentiality requirements that apply to the domestic violence and sexual assault program grantees. Grantee programs and their staff are prohibited from sharing the confidential information of victims receiving services from their agencies, except in limited circumstances, unless the victim expressly consents to the disclosure of information. These confidentiality restrictions protect victim information including a victim’s name, contact information, date of birth, social security number, race, religion, or any combination of the above that would personally identify a victim. These restrictions are subject to compelled disclosure, as discussed above, but professionals should still argue against disclosure or propose limited or redacted disclosure and should take precautions to “protect the privacy and safety of the persons affected by the release of information.”

Prosecutors and law enforcement who are trying to locate a victim may not be able to obtain such information from the advocacy agency, as information concerning the victim’s location is a confidential communication protected by law, and employees of the advocate agency must absolutely honor this confidentiality. Even if the staff at the local domestic violence agency is aware of the victim’s whereabouts, they may not provide the prosecutor with this information if there is advocate/client confidentiality in their jurisdiction. If a victim confides in a community advocate that she is planning to secretly move to a residence in another jurisdiction to flee from her abuser, this information cannot be shared with anyone, including the prosecutor, without the victim’s express consent. In cases where a prosecutor is trying to locate the victim for trial, the prosecutor may wish to work with community advocates to maintain the confidentiality of the victim’s location by asking advocates to relay messages to victims, including a request that the victim call the prosecutor directly.

Prosecutors may also consider obtaining information from alternative, non-confidential sources, such as family, friends, or coworkers of the victim. If a prosecutor does obtain contact information for a victim from a non-confidential source, however, the prosecutor should consider whether directly contacting the victim would further jeopardize her safety. It is also important for prosecutors to recognize that by contacting the victim, whether to urge compliance with a court subpoena or to encourage the victim to participate in a criminal prosecution, the prosecutor will have effectively removed the protective shield that the victim was trying to create. Removal of the protection may have both practical and psychological implications: a victim may feel violated by the disclosure of information, even if it was obtained from a legal, non-confidential source, and the victim may decline to participate in the prosecution and remain concerned about her safety.

The disclosure of personal information to a prosecutor’s office can affect the immediate safety of the victim as well as the confidential trust that was built between the victim and those confidantes who were helping the victim remain safe. Since the overriding concern must always be victim safety, all advocates should be diligent about keeping private information in that category in order not to jeopardize the victim’s welfare. Additionally, if the victim believes that a trusted confidant told the prosecutor her whereabouts, she may no longer trust that source or any support person, and may doubt whether information within the protected confines of other agencies is being held safely. Consequently, the victim may be cautious about reaching out to helpful sources if she is in need of assistance in the future. Most urgently, the victim may feel unsafe in her new location and may feel the need to move again. While prosecutors have a duty to hold offenders accountable, they must simultaneously balance the important safety and autonomy needs of victims. When possible, prosecutors should try to reassure victims in these situations by explaining that they were located using information from only non-confidential sources.

In order to ensure victim safety, confidentiality laws dictate that private information shared between the advocate and the victim be kept confidential. So how can a prosecutor balance the victim’s privacy concerns and still hold the offender accountable? Confidentiality restrictions may result in requiring prosecutors to think more strategically and creatively about how to honor victims’ privacy concerns without jeopardizing the prosecution of dangerous offenders. If a prosecutor wants to proceed to trial without the victim, the prosecutor must be prepared to prove an
evidence-based case. For example, the prosecutor may need to utilize 911 calls, photographs, excited utterances, police and other witness' testimony, and medical records, rather than rely on the victim's participation in the case.

**PRACTICE TIP**

Where victims are or may become unavailable to the prosecution at trial, analyze and prepare for objections under Crawford v. Washington and its progeny, and consider filing a forfeiture by wrongdoing motion. The doctrine of forfeiture by wrongdoing permits the admissibility of a victim or witness' previously made statement(s) where he/she is unavailable due to the defendant's wrongdoing. For more information see, The Prosecutors' Resource on Crawford and The Prosecutors' Resource on Forfeiture by Wrongdoing.

Medical Professionals

Communications between health care providers and their adult patients are generally confidential, which means that health care providers have a duty to not disclose patient information inside and outside of the courtroom without the patient’s consent. Confidentiality may extend as far as confirming or denying whether an individual is even a patient of a health care professional or facility. The source of this principle is found in state and federal law and professional ethics.

Exceptions to confidentiality exist in the form of mandatory reporting laws, which vary by jurisdiction. Various states, for example, require that health care professionals report information to police about any person who presents with a serious bodily injury, an injury that was inflicted by a deadly weapon, or an injury received as a result of the commission of any crime. Four states — California, Colorado, Kentucky, and Louisiana — have statutes requiring that medical professionals report when they have treated an adult victim of domestic violence. Seven states have reporting laws that mandate a report to police whenever non-accidental or intentional injuries occur. As it is difficult to contemplate a situation in which injuries that are caused by domestic violence or sexual assault would not be non-accidental or intentional, those states’ statutes have the same impact as statutes that require incidents of domestic violence to be reported. The majority of states require medical personnel to report injuries caused by criminal conduct, most certainly including domestic violence and sexual assault. These laws have a direct impact on confidential communications between physicians and patients, as the physician-patient privilege regarding injuries and the cause of those injuries might not apply in a judicial proceeding resulting from a report to police by a health care professional.

In sexual assault and domestic violence cases, prosecutors routinely obtain the medical records of a victim via her signed medical release waiver or a subpoena deuces tecum. State statutes dictate the extent to which medical records remain private and how the government in an investigation and prosecution can access them. There are many instances where a victim's statements to a health care professional will be potentially exculpatory or relevant in a domestic or sexual violence case.

In addition to medical records, the results of criminalistic and DNA testing following a sexual assault forensic examination can also be accessed by the prosecution. This evidence is routinely obtained by the prosecution in furtherance of the case investigation and is not viewed as a confidential or privileged communication between a doctor or nurse examiner and patient. The results of the sexual assault forensic examination kit must be provided to the defense since they are material and potentially inculpatory or exculpatory to the offender. However, statements regarding a victim's prior sexual history made during the examination that are not related to this incident may be redacted prior to trial under state rape shield laws and applicable case law. The defense maintains the burden of filing any pretrial motions to pierce rape shield and release information regarding a victim's prior sexual history. Prosecutors can and should also file the relevant rape shield motions to ensure that this information is not disclosed during the trial.

Law Enforcement

It is crucial that law enforcement respect and uphold confidentiality statutes during an investigation. Various state laws require that law enforcement documents replace a victim’s name with her initials or a pseudonym in order to protect her privacy. Particularly in sexual assault and domestic violence cases, state statutes and policies have recognized that confidentiality laws not only encourage the reporting of crimes, but they prevent re-victimization by
PRACTICE TIP
Generally, prosecutors should file motions to prevent irrelevant and prejudicial information from being introduced at trial. Evidence offered to prove that a victim engaged in other sexual conduct, has a certain sexual predisposition, or opinion evidence regarding the victim’s character is generally inadmissible pursuant to rape shield laws and evidentiary rules.

Arguments to exclude such evidence include:
- The information is irrelevant;
- The evidence has no probative value;
- The evidence has no bearing on the victim’s credibility or on any other material issue;
- The evidence is unduly inflammatory;
- The danger of harm or prejudice to the victim or other witnesses outweighs the evidence’s probative value;
- The exclusion of the evidence does not violate the defendant’s due process right to a fair trial; and
- The evidence is inadmissible under state or federal constitution or statute.

Determining when to file motions to exclude such evidence depends on consideration of many factors, including pertinent statutes and rules and strategies that seek to exclude inadmissible evidence without prematurely divulging prosecution strategies or suggesting additional legal tactics that the defense had not considered.

Defining the Prosecutor’s Role with Confidential Information
Prosecutor’s offices and other government entities have an ethical and legal duty to disclose any potentially material or exculpatory information in a criminal case to the defense pursuant to Brady v. Maryland, state discovery, and state professional conduct rules. Prosecutors, and the victim assistants and advocates who work in prosecutor’s offices, should clearly explain to victims, especially those receiving services from other community agencies, that a prosecutor’s office employees cannot necessarily protect the same information with the same confidentiality standards as other allied agencies.

One of the very first conversations that a prosecutor should have with a victim should focus on the distinction between a civil and criminal case. The prosecutor should explain to the victim that criminal prosecution is not a civil lawsuit; there is no plaintiff. Rather, the state has filed criminal charges against the defendant. Thus, unlike in a civil suit when a lawyer represents one party in the suit, the prosecutor represents the state, and is tasked with seeking justice and a conviction in order to protect the community as well as the victim. Additionally, the defendant has certain rights under the U.S. Constitution throughout the criminal case that are not present in a civil case. Prosecutors should explain that sensitive
information shared with the prosecutor, or in the case file, may not remain confidential in a criminal case. The prosecutor may be required by law to provide known information to the defense. In short, the case will not be presented as victim versus defendant, but instead as the state versus defendant.

Prosecutors should explain that, because they are not the victim’s lawyer, the attorney/client privilege does not apply to the prosecutor-victim/witness relationship. It is important to make this clear from the beginning because a prosecutor may be required to disclose information that a victim told prosecutors, perhaps under the mistaken belief that it would be kept confidential. A victim should also be told that information disclosed to an advocate at a local agency may be protected in that context, but if the victim disclosed similar information to the prosecutor and/or an advocate within the prosecutor’s office, any potentially exculpatory information would be required to be turned over to the defense under Brady.

Although exculpatory evidence must be turned over to the defense pursuant to Brady, not all information received by the prosecutor is subject to disclosure; there are situations in which the prosecutor can take steps to honor a victim’s privacy and protect her safety. For example, assume the victim writes down her new confidential address and phone number and gives it to the advocate with the understanding that it be given only to the prosecutor because the victim is scared the defendant will cause her further harm. During discovery, defense counsel asks for the victim’s current location so he can interview her before trial. In the name of victim safety, the prosecutor can file a pretrial motion for a protective order to prevent disclosure of the victim’s address and explain to the court why turning over this confidential information would be potentially harmful to the victim. This motion may need to detail the offender’s history of violence and threats, any current civil or criminal orders of protection, as well as any documented violations of those protective orders and/or no-contact conditions.

The prosecutor can also argue to a court that the victim is under no obligation to speak to any attorneys prior to trial. Rather than litigate a motion that might result in the court ordering disclosure of a victim’s address, the prosecutor may ask the court instead to provide the defense with an opportunity to speak to the victim over the phone, in the courthouse, or another safe location if she is willing to be interviewed. To reduce these situations, prosecutors should inform victims at the outset that any information they give to the prosecutor’s office may be subject to discovery. Victims who want to move or take shelter in a confidential location can call the prosecutor or have their community advocate check in with the prosecutor on a regular basis so that they don’t fall out of communication.

The law does not expressly permit prosecutors to protect confidential information that victims provide to their offices because of the nature of their status as government actors. In the case of a victim’s confidential location, however, prosecutors can argue that the communication should be protected, but this argument is grounded in public policy (the desire to protect victim safety) and perhaps state law, and there may not necessarily be a legal right against disclosure. On the other hand, a prosecutor should generally argue to protect privileged communications between a victim and a professional that are made within the context of a privileged relationship as a matter of protecting an important legal right of victims. It is important for prosecutors to appreciate the distinction between privileged communications and confidential information so that they have a firm grasp on what information may be protected even when it is the subject of a subpoena.

CONCLUSION

Prosecutors should develop an understanding of privacy laws, particularly those regarding confidentiality and privilege, not only in terms of protecting victims and supporting them throughout their participation in the criminal justice process, but also so prosecutors can properly apply these rules throughout their professional duties, including during communications, interviews, investigations, and trial preparation. Part II of this series examines common privileges within the context of intimate partner and family violence prosecutions, and provides strategies for prosecutors to ensure that privileged communications are not revealed during criminal prosecutions.

ENDNOTES

1 Viktoria Kristiansson is an Attorney Advisor with AEquitas. The author wishes to acknowledge Tolsi Meisner, JD; Tovah Kasdin, principal of the Domestic Violence Consulting Group; Charlene Whitman, Associate Attorney Advisor, AEquitas; Terry Fromson, Managing Attorney, Women’s Law Project; Meg Garvin, Executive Director and Clinical Professor of Law, National Crime Victim Law Institute, Lewis & Clark Law School; and Jennifer G. Long, Director, AEquitas for their significant contributions to this article.

3 Prosecutors should explain privilege and confidentiality laws whenever possible but should also inform victims of their ability to have independent counsel who can advocate specifically for their privacy rights. For more information on victim’s rights attorneys and referrals for pro bono representation, contact the National Crime Victims Law Institute, http://law.lclark.edu/centers/national_crime_victim_law_institute/.


5 Black’s Law Dictionary 296 (8th ed. 2004) ("confidential communication").


9 See, e.g., Colorado Constitution Article II, Sec. 16a; see also California Constitution that addresses victim’s rights with respect to discovery requests directed. Civil attorneys interested in discussing these rights in detail should contact NCVLI for technical assistance. Nat’l CRIM VICTIM LAW INSTITUTE, CALIFORNIA VICTIMS’ RIGHTS LAW, http://law.lclark.edu/live/files/4920-california (last visited March 23, 2013).

10 See, e.g., Neb. Rev. Stat. Ann. § 29-4303 (2012) (party seeking disclosure of confidential information must enumerate why it is seeking disclosure, that it is necessary, and attach an affidavit explaining how the confidential communication is relevant and material to the case).

11 Ky. R. Evid. 506 ("Counselor-Client Privilege,") overcoming privilege only where judge finds substance of communication is relevant to an essential issue; there are no alternative means to obtain a substantial equivalent of the communication, and the need for the information outweighs the interest protected by the privilege. Victims may also wish to secure the independent counsel of a victims’ rights attorneys, supra note 3.

12 In this article, the term “victim-witness assistant” will refer to advocates who are employed by a prosecutor’s office. There term “community advocate” will refer to advocates employed by domestic or sexual violence programs or other community service organizations.


14 See, e.g., Commonwealth v. Bing Sial Liang, 747 N.E.2d 112 (2001), in which the court, after a defendant “moved for production of notes of victim-witness advocate who spoke with complaining witnesses,” held that the notes were protected as prosecution work product. But see Mass. Gen. Laws Ann. Ch 258B, §§ 1, 3, “Work of victim-witness advocates was subject to same legal discovery obligations as that of prosecutors, and victim-witness advocates’ notes were subject to same discovery rules.”

15 See, e.g., Mass. R. Crim. P. Rule 14(a)(2, 5). “Unless victim-witness advocates’ notes contain exculpatory evidence or “statements” of witnesses, their notes are protected as work product; however, accompanying this protection is an affirmative duty on the prosecutor to review the notes of advocates and inquire about their conversations with victims, which responsibility stems from the Commonwealth’s obligation to produce exculpatory evidence and, on request, material and relevant “statements” of persons. (Cited in Commonwealth v. Bing Sial Liang, 747 N.E.2d 112 (2001)). See also, The Laws in Your State, RAPE, ABUSE, & INCESS NATIONAL NETWORK (RAINN), http://rainn.org/public-policy/laws-in-your-state (last visited March 23, 2013). See also Loretta Frederick, Confidentiality and Information Sharing Concerns for Advocates, available at http://www.mcbw.org/files/u1/confidentiality.pdf.


18 Bing Sial Liang, 747 N.E.2d at 116.


22 VIOLENCE AGAINST WOMEN ACT, 42 U.S.C.A. §13925. The Confidentiality Provisions in VAWA apply to programs funded by the Violence Against Women Act (VAWA) or the Family Violence Prevention and Services Act (FVPSA). Government entities such as the court, police, and law enforcement offices, and their employees, including prosecutors, victim advocates, and victim assistants, operate under different confidentiality rules than other VAWA or FVPSA funded grantees, so prosecutors should check the laws of the particular jurisdiction before releasing victim sensitive information in cases of violence against women. Information sharing protocols such as those within Family Justice Centers can become complex when different offices are operating in a coordinated community response capacity with memorandum of understanding among different agencies, and so it is important that each office knows how its set of confidentiality laws works as a unit and with another office that may have different rules. Prosecutors should take particular caution in conferring with victims of domestic violence before releasing any information that may breach confidentiality conditions. Prosecutors can file appropriate motions as permitted in their jurisdictions, (e.g., protective orders to shield personally identifying information from their abusers) in these cases.


25 Id.

26 When obtaining information from alternative sources, prosecutors should also refer to victim’s rights laws.


28 Prosecutors must consider evidence-based prosecution strategies at all points during the investigation and prosecution of crimes of intimate partner violence, as a victim’s willingness to participate may suddenly change due to safety concerns or intimidation by the offender or someone acting on his behalf. In situations of ongoing intimidation, prosecutors must respond with charges addressing the intimidation behavior and/or file and argue forfeiture by wrongdoing motions in order to effectively keep victims safe and hold offenders accountable. Please contact AEquitas: ‘The Prosecutors’ Resource on Violence Against Women for additional information pertaining to evidence-based prosecutions and/or forfeiture by wrongdoing motions.
29 The discussion in this two-part series often raises discrete collateral issues relevant to investigation, trial preparation, filing and litigation of motions, and use of evidence that have been pulled out and identified as “Practice Tips” to benefit the reader.


35 See, e.g., Alaska: ALASKA STAT. § 08.64.369 (2011). See also Failure to report injuries by firearm or criminal act, 18 Pa. CONS. STAT. ANN. § 5106 (2004). Notably, § 5106 contains an exception to the requirement that crimes be reported if the injuries were caused by an intimate partner.


37 Id.

38 Id.


40 “A subpoena ordering the witness to appear and to bring specified documents or records.” BLACK’S LAW DICTIONARY 1440 (8th ed. 2004) (“subpoena duc Writer’s processing.

41 See, e.g., Delaware: Del. R. Evid. 503 (2011); Louisiana: LA. EVID. ANN. ART 1:3734 (2011). For civil attorneys looking for guidance on drafting medical release waivers, please contact NCVLI.


43 See, e.g., supra note 33.

44 “The careful editing of a document, esp. to remove confidential references or offensive material.” BLACK’S LAW DICTIONARY 1303 (8th ed. 2004).


46 People v. Santos, 211 Ill. 2d 395, 813 N.E.2d 159 (Ill 2004); People v. Melillo, 25 P.3d 769 (Colo. 2001).

47 Prosecutors can also file motions to control the defense’s access to photographs (i.e., motioning to allow defense to only view photographs in police station). Victims or victims’ counsel can and should also file or respond to rape shield motions where appropriate.


49 Family Justice Centers are established to provide comprehensive domestic violence victim services and support in a more efficient and effective manner by bringing all of the professionals who provide the array of assistance under one roof. Professionals represented within a Family Justice Center may include advocates from non-profit groups, victim service organizations, law enforcement officers, probation officers, governmental victim assistants, forensic medical professionals, attorneys, chaplains, and representatives from community-based organizations. For more information on the establishment of Family Justice Centers, please see the Family Justice Center Initiative at the U.S. DOJ, OVW, at http://www.ovw.usdoj.gov/pfjci.htm.

50 The Safety Net Project of the National Network to End Domestic Violence, http://nnedv.org/resources/for-ovw-grantees/technology-a-confidentiality.html. (The Safety Net Project of the National Network to End Domestic Violence, along with adaptations from Julie Field, Director of the Confidentiality Institute, has created a Template Memorandum of Understanding. Visit NNEDV’s website to obtain an electronic copy of the template).


53 Brady v. Maryland, 373 U.S. 83 (1963) (Brady material is evidence, which the prosecution must turn over, that is essential to the defense of a criminal charge and that is both favorable and material to guilt or punishment).
APPENDIX C
What is Commercial Sexual Exploitation of Children (CSEC)?

CSEC is sexual activity involving a youth in exchange for something of value, or promise thereof, to the youth or another person or persons. The youth is treated as a commercial and sexual object.

Each year over 300,000 youth are at risk for sexual exploitation in the United States. One in three runaway youth will be approached by a trafficker within 48 hours.

Some questions to ask yourself:

- How did you meet this person/boyfriend/friend?
- Has this person ever pressured you into something you weren't comfortable doing?
- Who do you depend on since you have been away from home or on the streets?
- Have you ever exchanged sex for food, a place to stay, or something else that you need?

Sexual Exploitation is a violent crime. It violates a persons' right to have control over their body and their right to be safe. It is never the survivor's fault.

The mission of Community Solutions is to create opportunities for positive change by promoting and supporting the full potential of individuals, the strengths of families, and the well being of our community.
APPENDIX D
 Trafficking and Psychological Trauma: Identifying Best Practices

Sujata Regina Swaroop, Psy D., Project REACH, The Trauma Center

Systems Impacted By Trauma

- Relational:
  - Immediate: Shifts in ability to engage (disconnection, over-dependence, impaired trust)
  - Long-Term: Impacting ability to form and maintain safe relationships

- Biology/Physiology:
  - Immediate: Acute stress response; hyperarousal, hypervigilance
  - Long-Term: Chronic inability to regulate physiological response

- Neurology/Neuropsychology:
  - Immediate: Activation of key survival systems; de-activation of peripheral systems
  - Long-Term: Sensitization of survival pathways and abnormal brain structures and function

- Affective:
  - Immediate: Blunted or labile affect; overwhelming strong emotions
  - Long-Term: Impairment in managing, identifying, and expressing emotions; reliance on strategies such as numbing or behavioral adaptation

- Information Processing and Meaning Making:
  - Immediate: Impaired ability to process information; biased interpretation of stimuli; self-blame/self-blame/guilt/hunger
  - Long-Term: Impaired identity and sense of self, loss of future orientation, altered worldview

Trafficking and Psychological Trauma

- Overview of Systems Affected by Trauma
  - Attachment & Relationships
    - Regulation – Physiological and Neurobiological Context
    - Cultural Considerations & Self-Identity

- Recognizing & Responding to Trauma
  - Polyvictimization Exposure in Survivors of CSEC Trafficking
  - Complex Trauma Reactance and Best Practices within and across systems

Case Example – “Rosa”

- Age 3-8:
  - Early exposure to sexual, physical, verbal, and emotional abuse in her caregiver's environment

- Age 8-13:
  - Additional physical, emotional, verbal, and sexual abuse as well as physical neglect by childhood caregivers

- Age 13-15:
  - Exposure to bullying in the school and therapeutic setting, and additional rape

- Age 17:
  - Physical and emotional abuse in ‘adolescent relationship
  - Targeted by first trafficker

- Age 18:
  - Targeted by second trafficker

- Age 19:
  - Targeted by third trafficker

What is “Trauma”?

“Overwhelming demands placed upon the physiological system that result in a profound felt sense of vulnerability and/or loss of control.”

R.D. Macy

The Relational System

Attachment & Organizing Relationships
The Importance of Attachment

- Our early attachments & significant relationships are the place we learn about ourselves, our emotions, and our relationships with other people.
- What happens when these relationships are disturbed?

Focus on Trauma Bonding

Complex Dimensions of Attachment Relationships

- Safety
- Predictability
- Responsiveness
- Warmth / Nurturance / Caring
- Accuracy / Sensitivity
- Boundaries
- Limits / Structure / Organization
- Level and type of demand / expectation

Transnational versus Domestic

- Need Contingent
  - Prospect of a Better Place
- Relationship Contingent
  - Prospect of a Safe Person/Home

Some Lessons Learned from these Complex Dimensions

- Fear vs. comfort (in the body, in the environment, with others vs. alone)
- Problem-solving and logic
- Self-soothing, tolerance for arousal
- Reliability / Dependability (of self, of other, of the world)
- General model of other: benevolent, dismissive, unavailable, frightened
- Worthiness
- Boundaries
- Capacity to read social cues
- Capacity to communicate effectively
- Appropriateness, safety of emotional & behavioral expression
- Values and rule orientation

Domestic, Who is the Trafficker?
Someone who Befriends

- "Boyfriend"
- Female Friend (typically a peer or older helpful woman)
- Fraudulent Front (modeling agency)
- Abusive/Exploitative Caregiver
Who are the Trafficker’s Domestic Victims?

- Being in Foster Care (previous sexual and/or physical trauma)
- Family Dysfunction (impaired caregivers)
- Family Member/Peer in Sex Work
- Domestic/Family Violence
- Drug Use
- Poor School Performance
- Desire for Love and Belonging
- Need for Acceptance
- Desire for a Better Life
- Ambition

Relationships

What might come up:

- Impaired trust
- Difficulty with boundaries (radar broken)
- Reenactments
- Revictimization
- Linking love, sex, and abuse
- Need for love, affection (link to neglect)
- Difficult relationships with professionals

Physiological & Neurobiological Underpinnings

- Bottom-up Development of the Brain
- Role of Experience in Neural Development
- Trauma Exposure & Development
- Threat Response & Self-Regulation
- Impact on Higher Order Brain Functioning & Coping

Exiting Trafficking: An Integrated Model

The Brain

Graham, 1994

Sakai, Dalsi, Williamson, 2012
Sequential Development of Brain-related Capabilities

Sequential brain capacity:
- Ex. - Infants crawl before they walk, and babble before talking
- The development of the brain follows bottom-up structure
  - Regulatory regions develop first, followed by adjacent, higher, more complex regions
  - Sequential development is guided by experience.

The Development of Neural Pathways:

Experience as critical:
- The brain develops by forming connections.
- Experiences determine the growth and pattern of brain development.
- "Internal representation" of the experience is created corresponding to the neural activation.
- The more an experience is repeated, the stronger the connections become.

Experience and Development

- Optimal Experiences
  - Brain develops healthy, flexible, and diverse capabilities.
- Traumatic Experience
  - Impacted neurodevelopment and function with fear-related activation.
  - Adaptive changes in emotional, behavioral, and cognitive functioning to promote survival.

Keeping it Simple:
The Danger Response System’s Impact on Executive Functioning

Brain Plasticity: Implications for Trauma and Resilience

Brain process under typical conditions
What Can 'Coping' look like? - Key Issues

- Frequently running away from services
- Frequently returning to a perpetrator
- Aggressive behavior, getting into fights
- Emotionally "all over the place"
- Upset with service providers
- Withdrawn, staying away from other people
- Difficulty focusing during interviews
- Use of substances - drunk or high
- Chronic headaches, stomachaches that interfere with engagement
- Self injury and self harm

Self Identity & Culture

- Experience and Expression of Distress

Trauma and Identity

- Internalization of negative experience
- Fragmentation of experience; state-dependent self-concept
- Lack of exploration
  - Impact on self; Foreclosure of experience, lack of possibility
  - Impact on understanding of world; agency, self-then relationships, impulse control, etc.
...What gets affected?

- Who am I?
- How do I make meaning of the world around me?
- How do I understand my experiences?
- How do I employ my cognitive processes so that I can act on the world in an effective manner?

Internal reflection and meaning-making, and external reflection and goal-directed behavior

Complex Trauma Lens

REMAINS THE SAME REGARDLESS OF CULTURAL CONTEXT

DIFFERS ACCORDING TO CULTURAL FRAME

Context & Interplay of Culture

- Those disaffected by trauma often espouse cultural frameworks that vary widely from Western nosologies.
- Western professionals continue to conceptualize posttraumatic adjustment in other cultures based on diagnoses rooted in a biomedical model, e.g., PTSD, depression, anxiety.
- The Risk: prioritizing psychiatric syndromes which Western practitioners are familiar with, when other idioms of distress are in fact more relevant for the given culture (e.g. Understanding dissociation).
Affect & Impulses

- Initial Encounter:
  - Victim likely to be in shock.
  - Immediate interviews can lead to increased trauma response later.
  - Initial focus: safe environment/meet immediate needs

- Impact of this phase on victim's emotions?

- Perspective of survivor: How do you figure out how to get your needs met when the assumption is the world is unsafe??

Attention or Consciousness

- Prosecution Preparation:
  - Risk of re-traumatization through the legal process.
  - Think about how dysregulation may be perceived.
  - Watch for withdrawal, hypo- or hyper-arousal states, generalized worry.
  - Help build safety: concrete tools, opportunities to give power/choice.
  - Support regulation through this process!
**Systems of Meaning**

- **Post-trial**
  - Victim Impact Statement as empowering rather than re-victimizing.
  - Interdisciplinary network of coordinated care: Connecting survivor with a range of appropriate supports, now if not sooner.

- What is it like for a "victim-witness" after trial? What supports do they need?

- What about LE and other professionals—what is the emotional impact once their role is "over"?

---

**Perception of Self**

- **Trial Phase**
  - Assist a survivor in being as present as possible.
  - Prepare a survivor of stress reactions that may arise in trial: feeling prepared, that their reactions are normal, that they are in control.
  - Prepare a survivor for long-term effects of the trial (ex. guilt/ not guilty verdict).

- Core issue: Relationship between self-narrative and self-identity.

---

**Recommendations for Multidisciplinary Response**

Define a Coordinated Community Response

---

**Finding the resources trafficking survivors need involves effective networking**

- Who will take the lead in finding resources?

- Will they work collaboratively?

- What role do you play in making a collaboration work?
Multi-Agency Response

Social Service Providers
- Intervene
- Case Manager
- Shelter
- Medical
- Dental
- Volunteers
- State and federal
  post-traumatic
  services

Legal Service Providers
- Immigration
- litigation
- Personal Injury
- Civil Rights

Federal Law Enforcement
- DFB
- ABA
- PCT
- TDC
- BCI
- CBL/SBO
- RIS

Local Law Enforcement
- Local Enforcement
- Traffic/Law
- Crime/Investigation
- Family
- Detectives
- Retail/Investigation
- Hotline

Project REACH

- Sujata Regina Swaroop, Psy.D.
  - Program Coordinator, Project REACH
  - Licensed Psychologist/Postdoctoral Fellow, Trauma Center
  - (617) 232-1303 X237
  - sswaroop@iri.org
- Visit our website:
  - www.traumacenter.org/projectreach
## Utilizing Trauma-Informed Approaches to Trafficking-related Work

<table>
<thead>
<tr>
<th>Core Impact Areas</th>
<th>What does this mean?</th>
<th>What you might see</th>
<th>Tips, or Things to Keep in Mind</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alteration in Regulation of Affect and Impulses</td>
<td>Core challenges managing emotions, behaviors, and physiology (i.e., arousal or energy level)</td>
<td>• Frozen, shut down, “spacy”&lt;br&gt;• Quickly changing mood or expressions&lt;br&gt;• Hard time sitting still; jumpy&lt;br&gt;• Angry, hostile behavior&lt;br&gt;• Weepy, depressed&lt;br&gt;• Reactive to other people’s statements; mis-reading / responding strongly&lt;br&gt;• Appearing “surly”, uncooperative, or disinterested (i.e., during meetings, while testifying, etc.)</td>
<td>• Don’t take strong reactions personally; be very aware of managing your own emotional responses.&lt;br&gt;• Provide frequent breaks, particularly with tasks that may induce strong emotions.&lt;br&gt;• Be aware if the victim / client / survivor appears shut down or disconnected; this may be a sign that the person is overwhelmed.&lt;br&gt;• Provide concrete supports and resources (i.e., links to counselors, advocates, etc.).&lt;br&gt;• Have materials available which may support regulation during meetings, conversation, or testimony. For instance, soothing scents or sensory objects a person can hold (i.e., silly putty, a stress ball), soft materials, soft lighting, calm environment.</td>
</tr>
</tbody>
</table>

**Brief case example:** Lina is sitting with the lead prosecutor on her case. In reviewing the content of her affidavit, she appears disengaged, as if she’s not paying attention, then suddenly jumps up, says, “You’re not listening to me!” and bursts into tears. When the prosecutor tries to speak with her, Lina appears frozen and shut down, and fails to respond.
### Alterations in Attention or Consciousness

- Person appears disconnected, frozen, shut down
- Memory gaps
- Slight changes in verbal narrative (“the story”) from meeting to meeting; not remembering previously remembered or described details
- Presentation that changes from meeting to meeting (i.e., seems connected and calm one day, then very different on another)
- Emotional presentation that does not match the content of the narrative

**Brief case example:** Nicole is having her third meeting with a police investigator who is gathering evidence related to her case. She has described her experience twice, but this time when asked to give further detail states repeatedly that she does not remember, and is unable to confirm detail that she previously reported. Her sentences are disjointed and brief, and she looks spacy, with minimal eye contact.

- Check in to make sure victim / client / survivor is hearing and understanding your statements / information. Written information may be particularly helpful for clients who struggle to process information verbally.
- Be aware that changes in memory do not necessarily indicate falsehood or storytelling, but may be evidence of a trauma response.
- Try to hold interviews or other key conversations at a time when victim / client / survivor feels most regulated / safe, or in an environment in which they feel comfortable / supported, to minimize dysregulation leading to disconnection. Offer the individual access to self-soothing materials, breaks, etc. to support his/her capacity to remain present and connected.

<table>
<thead>
<tr>
<th>Alterations in Attention or Consciousness</th>
<th>Difficulty integrating experience into a coherent whole; disconnecting from experience (“dissociating”) as a way to manage overwhelming feelings, thoughts, and events; disconnecting aspects of experience from each other (i.e., feelings from memories)</th>
<th>Person appears disconnected, frozen, shut down</th>
<th>Memory gaps</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Slight changes in verbal narrative (“the story”) from meeting to meeting; not remembering previously remembered or described details</td>
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<tr>
<td></td>
<td></td>
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</tbody>
</table>
| Alterations in Self-Perception | Ways experience affect how a person views him- or herself; may include our sense of capability, guilt / responsibility, power, control, and worth | Professing responsibility for something in which the reporter appears to have been the victim  
- Strong feelings of guilt or shame about experiences; may color or influence how the story is told (i.e., statements of what the person “should” have done to stop or change the experience)  
- Helplessness; feeling overwhelmed by even small tasks. For instance, not following through on requested or suggested tasks  
- Minimizing experiences, or describing even minor experiences as overwhelming.  

**Brief case example:** Michael, a victim of labor trafficking (cross-border drug smuggling) recently came to the attention of authorities after a fellow victim sought support. On interview, he breaks down and states, “I’m no good, man, this is all my fault. I thought I was helping my Mom, my family-- that if I just did what they said, they would let my brother go. Now, now I’m just a no-good criminal like them. I should have been able to get away.” | Don’t assume that a statement of felt responsibility is the equivalent of an admission of guilt.  
- Support victim / client / survivors in accurate attribution of responsibility; reiterate known facts about trafficking and its influence on victims’ perception of responsibility.  
- Help victim / client / survivors break down tasks concretely; assume that even small tasks may feel overwhelming. Support them in accessing help with task completion (i.e., someone who will help them complete forms or make phone calls).  
- Focus on the facts of experiences, rather than getting caught up in the individual’s emotion (or lack thereof) or perception of event salience in making determinations about criminality. |
| Alterations in Relations With Others | Ways that experiences impact the individuals’ ability to form safe, trusting relationships with other people | Ways that experiences impact the individuals’ ability to form safe, trusting relationships with other people |

- Vulnerability to ongoing victimization in relationship; for instance, returning to a previously identified trafficker or other abusive situation
- Not trusting others. May show up as suspiciousness of the intentions of providers or law enforcement; challenging statements or information from those who are attempting to offer help.
- Pulling back from offered supports; not attending meetings, support groups, or accessing other resources.
- Refusing to testify.

*Brief case example:* Tamika is a 16-year-old girl who has been living with a single foster mother since she was identified as a victim of sex trafficking. The foster mother contacts police after Tamika has been missing for several days, stating that she has found e-mail messages suggesting that Tamika returned to her pimp / trafficker.

- Be aware of the often confusing nature of victims’ relationships with victimizers; be conscious of not making assumptions about the victim’s perception.
- Don’t take it personally if a victim / client / survivor appears distrustful. Don’t expect someone who has been victimized to feel safe with or trust new people. The goal is to provide a “safe enough” environment to support both the individual’s needs and the needs of the law enforcement community.
- Reach out to victims, rather than waiting for them to reach out for supports.
- Provide opportunities for control and empowerment (i.e., offering choice about meeting times, about where to sit in a room, about pacing of the interview process whenever possible, etc.).
- Be aware of safety features in meeting rooms/environments in which a victim will be present: Is the area well lighted? Is there ready access to an exit? Does the victim have the choice of sitting with his/her back to a wall vs. a door (depending on preference)? Physical environment can support or detract from felt sense of safety.
<table>
<thead>
<tr>
<th>Somatization</th>
<th>Physical symptoms which develop in response to psychological / emotional stressors.</th>
</tr>
</thead>
</table>
|              | • May present as a range of physical complaints – for instance, headaches, stomach aches, digestive issues, unexplained neurological issues, unexplained sexual symptoms.  
  *Brief case example:* Following 4 years of labor trafficking, Mei complains of chronic headaches and neck pain. She also reports chronic digestive issues. Mei identifies that her symptoms worsen when she feels anxious or depressed. Results from her physical fail to explain Mei’s report of symptoms. Mei’s providers question the veracity of her report. In response, Mei shuts down. |
|              | • Don’t dismiss frequent or unexplained physical complaints as “in the victim’s head.” Somatic symptoms are a real, very distressing manifestation of extreme emotional stress, and often have their basis in physiological changes in the body resulting from that stress.  
  • Be aware of the importance of physical as well as emotional supports for victim / client / survivors. For instance, access to routine medical care; access to physical self-care and/or activity engagement resources such as trauma-sensitive yoga classes, support with relaxation and stress management strategies, etc. |
| Alterations in Systems of Meaning | Ways that a person’s belief system about the world around them is influenced by their experience; for instance, believing in justice, safety, hopefulness, or positive outcomes; impacts on spiritual or religious beliefs. | • Dismissing the utility of following through on criminal prosecution; not believing that anyone can make a difference or keep him/her safe.  

• Extreme religiosity or denial of previously held beliefs.  

*Brief case example:* Olga, a victim of sex trafficking and a survivor of chronic trauma describes chronic feelings of hopelessness and helplessness. She is unable to follow through with recommendations and strategies suggested by her providers due to her belief that “nothing will ever change.” She also describes having felt disconnected from her religious community since her relocation to the United States. She notes that even small efforts feel “impossible” on her own. Her providers begin to feel frustrated with Olga as she is not able to comply with the majority of their recommendations. Her providers begin to feel that they are putting more effort into the case than Olga is able to match. | • Hold the belief in positive outcomes for the victim / client / survivor while also reflecting understanding of their described viewpoint; meet the client/victim/survivor where they are at while acknowledging possibilities for alternate outcomes. If they dismiss the utility, don’t feel like this is about their belief in you, versus their belief in the possibility of justice for themselves.  

• If spirituality or religiosity is a source of support for the victim / client / survivor, work with a trauma-informed religious community that matches the belief system of the victim / client / survivor; look to connect with resources across spiritual and religious backgrounds. |
APPENDIX E
# Stages of Change in CSEC Counseling

<table>
<thead>
<tr>
<th>Stage of Change</th>
<th>Pre-Contemplation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Denies being sexually exploited</td>
</tr>
<tr>
<td></td>
<td>Discloses involvement in the life, but does not present it as a problem</td>
</tr>
<tr>
<td></td>
<td>Is defensive</td>
</tr>
<tr>
<td></td>
<td>Does not want your help, wants you to “stay out of their business”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What This Looks Like with CSEC Victims</th>
<th>Counselor’s Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not ready to talk about abuse</td>
<td>“I can understand why you feel that way.”</td>
</tr>
<tr>
<td>Will defend or protect abuser</td>
<td>“Is there anything about your relationship with him that you don’t like?”</td>
</tr>
<tr>
<td>Does not want help or intervention</td>
<td>“How do you feel when..?”</td>
</tr>
<tr>
<td></td>
<td>“I’m proud of you. You’re taking big steps right now. Be proud of yourself!”</td>
</tr>
<tr>
<td></td>
<td>“I love my daddy. He takes care of me.”</td>
</tr>
<tr>
<td></td>
<td>“I’m happy making money.”</td>
</tr>
<tr>
<td></td>
<td>“I’m good with the way things are.”</td>
</tr>
<tr>
<td></td>
<td>“I make money doing what other people give away for free”</td>
</tr>
<tr>
<td></td>
<td>“Validate experience/lack of readiness”</td>
</tr>
<tr>
<td></td>
<td>“Encourage re-evaluation of current behavior”</td>
</tr>
<tr>
<td></td>
<td>“Encourage self-exploration, not action”</td>
</tr>
<tr>
<td></td>
<td>“Explain and personalize risk”</td>
</tr>
<tr>
<td></td>
<td>“Get legal identification documents”</td>
</tr>
<tr>
<td></td>
<td>“Set up appointments for healthcare &amp; mental health”</td>
</tr>
</tbody>
</table>
## Contemplation
- Acknowledges that being in the life is painful and probably not what they want for themselves
- Not yet ready to leave but processing the abuse and the effects of the abuse
- Ambivalent about actually leaving
- Open to self-reflection, weighing consequences, and talking about feelings

## What This Looks Like with CSEC Victims
- Often an external event, or “reality”, has confronted the pre-contemplative stage.
- Incidents can include violence, rape, assault, getting pregnant, diagnosis with an STD, new girls in the house, getting arrested, not getting bailed out.
- Fear of the consequences of leaving: violence, retribution, threats to self and family, being homeless, having no money
- Thinking of leaving but feeling isolated from the “square” world
- “I didn’t think it was going to turn out this way.”
- “I feel like I don’t deserve this.”
- “I don’t want this for my daughter.”
- “I’m afraid that if I try to leave he’ll just track me down and find me. There’s no point.”
- “This is what I’m good at. I’m not good at anything else.”

## Counselor’s Goals
- Listen!!!!
- Encourage client to list out the pros and cons
- Reflect change talk
- Affirm processing of problems
- Validate ability for client to make changes
- Identify and assist in problem solving/obstacles
- Help identify sources of support
- “When are the times you feel really good? When are the times you feel really bad?” (make lists)
- “What do you feel is holding you back the most?”
- “I think you should be proud of yourself for…”
- “I’m proud of you. You’re taking big steps right now. Be proud of yourself!”
<table>
<thead>
<tr>
<th>Stage of Change</th>
<th>Preparation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>- Has made a commitment to leave</td>
</tr>
<tr>
<td></td>
<td>- Has thought a lot about leaving, now begins to “test the waters”</td>
</tr>
<tr>
<td></td>
<td>- Exhibits signs of independence by taking small steps to be able to leave</td>
</tr>
<tr>
<td></td>
<td>- Researches and is open to resources available</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What This Looks Like with CSEC Victims</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Regularly attends events/groups/counseling at agency</td>
</tr>
<tr>
<td>- Stashes money</td>
</tr>
<tr>
<td>- Brings clothes or belongings to the agency</td>
</tr>
<tr>
<td>- Doesn’t answer cell phone every time exploiter calls</td>
</tr>
<tr>
<td>- Starts GED classes</td>
</tr>
<tr>
<td>- Thinking about a part-time job</td>
</tr>
<tr>
<td>- Exploring housing/shelter options</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Counselor’s Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Create a safety plan</td>
</tr>
<tr>
<td>- Case management: find housing, education, employment, regular therapy</td>
</tr>
<tr>
<td>- Encourage small initial steps</td>
</tr>
<tr>
<td>- Validate fear of change</td>
</tr>
<tr>
<td>- Introduce client to new experiences where he/she can gain new skills and increase self-esteem</td>
</tr>
<tr>
<td>- Affirm underlying skills for independence</td>
</tr>
</tbody>
</table>

- “I would really like to finish school.”
- “I still love home and want to be with him, just not with all the other stuff.”
- “I want to leave, I just want to save some money first.”

- “You should be really proud of yourself for doing _____, you are doing something healthy for yourself.”
- “It’s normal to be nervous about the changes you’re making.”
- “What kinds of things are you interested in? What are your dreams for the future?”
- “I’m proud of you. You’re taking big steps right now. Be proud of yourself!”
<table>
<thead>
<tr>
<th>Stage of Change</th>
<th>Action</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Leaving the life</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>What This Looks Like with CSEC Victims</th>
<th>Counselor’s Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>- There are often stages of exiting (may feel the need to rely on a few regular “johns” until financial situation is stable)</td>
<td>- Support and validate the effort it takes to leave</td>
</tr>
<tr>
<td>- Goes through intake at a youth shelter</td>
<td>- Address safety concerns</td>
</tr>
<tr>
<td>- Placement at a residential treatment center</td>
<td>- Focus on restructuring environment and social support</td>
</tr>
<tr>
<td>- Staying with relatives</td>
<td>- Discuss self-care</td>
</tr>
<tr>
<td>- Starts part-time job</td>
<td>- Create system with youth for short-term rewards he/she can give to him/herself</td>
</tr>
<tr>
<td>- Cuts off contact with pimps/johns</td>
<td>- Process feelings of anxiety and loss</td>
</tr>
<tr>
<td>- Moves from area of exploitation</td>
<td>- Reiterate long term benefits of change</td>
</tr>
</tbody>
</table>

- “It’s so hard and it’s taking so long to get everything together.”
- “I’m so glad I left. I hate him…but I miss him.”
- “I can see myself going to college and getting a good job.”
- “It’s so weird being in the ‘square’ world. I feel different from everyone else.”
- “It’s going to take a while to get things in your life in order. Try to be patient and not do everything at once.”
- “It’s completely normal to love and hate your ex at the same time. Let’s talk about your feelings before you act on them.”
- “I’m proud of you. You’re taking big steps right now. Be proud of yourself!”
### Stage of Change

**Maintenance**
- Remains out of CSEC
- Develops new skills for a new life
- Successfully avoids temptations and responding to triggers

### What This Looks Like with CSEC Victims

- May maintain job/school
- Living in stable environment
- Develops new relationships (intimate and social), often struggles with this
- Develops network of support
- Begins to address trauma of experiences

- “I can’t believe I wasted so many years. It’s like I never had a childhood.”
- “I could never go back to the track/club.”
- “I feel bad for other girls/boys who are still in it.”
- “Sometimes I’m bored and kinda miss the drama.”
- “It’s hard starting relationships because they only want one thing.”

### Counselor’s Goals

- Plan for follow-up support
- Reinforce internal rewards and self care
- Discuss coping with relapse
- Discuss triggers and temptations, creating coping strategies
- Continue to help look for opportunities to develop new skills and invest in supportive communities
- Recognize progress and validate strengths
- Be patient and realistic

- “Can you tell me the times you most feel like going back? What do you miss the most?”
- “How can you find ‘excitement’ and ‘attention’ in other ways?”
- “What kinds of people are you attracted to? Why do you think that is?”
- “I’m proud of you. You’re taking big steps right now. Be proud of yourself!”
<table>
<thead>
<tr>
<th>Stage of Change</th>
<th>Relapse</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Returns back to the life</td>
</tr>
<tr>
<td>What This Looks</td>
<td>Runs away from program</td>
</tr>
<tr>
<td>Like with CSEC</td>
<td>• Re-establishes contact with exploiter</td>
</tr>
<tr>
<td>Victims</td>
<td>(exploiter gets out of jail, runs into exploiter or</td>
</tr>
<tr>
<td></td>
<td>someone from the life on the street, seeks</td>
</tr>
<tr>
<td></td>
<td>exploiter out to reconnect)</td>
</tr>
<tr>
<td></td>
<td>• Returns to strip club or escort agency</td>
</tr>
<tr>
<td></td>
<td>• Begins to see “johns” regularly</td>
</tr>
<tr>
<td>Counselor’s Goals</td>
<td>• “He really loves me.”</td>
</tr>
<tr>
<td></td>
<td>• “I’m always going to be like this. This is who I</td>
</tr>
<tr>
<td></td>
<td>am.”</td>
</tr>
<tr>
<td></td>
<td>• “I’m so ashamed. I don’t want to come back.”</td>
</tr>
<tr>
<td></td>
<td>• “You don’t understand. I missed him and besides,</td>
</tr>
<tr>
<td></td>
<td>it’s different now.”</td>
</tr>
<tr>
<td></td>
<td>• “It was too hard. I just couldn’t do it.”</td>
</tr>
<tr>
<td></td>
<td>• Address feelings of failure</td>
</tr>
<tr>
<td></td>
<td>• Reassure that most people experience relapse</td>
</tr>
<tr>
<td></td>
<td>• Revisit subsequent stages of change</td>
</tr>
<tr>
<td></td>
<td>(hopefully preparation or action, but</td>
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<td></td>
<td>sometimes contemplation)</td>
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<td></td>
<td>• Evaluate the triggers that resulted in relapse</td>
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<td>• Reassess motivation to leave again and barriers</td>
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<td></td>
<td>• Plan stronger coping strategies</td>
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<tr>
<td></td>
<td>• “It’s ok. It’s normal to struggle with making really</td>
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<td></td>
<td>big changes. You’re still welcome here.”</td>
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<td></td>
<td>• “What did you feel like you needed that you</td>
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<td></td>
<td>weren’t getting?”</td>
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<td></td>
<td>• “Perhaps we can talk about why it was so hard.”</td>
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<td></td>
<td>• “Are things better this time? Why do you think</td>
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<td></td>
<td>that? What changed?”</td>
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<td>• “I still support you and believe in you.”</td>
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