



CHILD SEX TRAFFICKING PART I

A basic introduction to the violence and tragedy our children face

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The SDG targets pinpoint ending abuse, exploitation, trafficking, torture and all forms of violence against children by 2030.

Currently U.S. scores 73.7



ZERO VIOLENCE AGAINST CHILDREN BY 2030

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NATIONAL SNAPSHOT

- Sex trafficking is reported in all 50 states
- An estimated 100,000 children/youth sexually are exploited in the United States every year
- 1.3 million children go missing every year; only 797,500 of those are reported to law enforcement
- In 2018, 1 out of every 7 runaways reported to the National Center for Missing & Exploited Children (NCMEC) was likely a child sex trafficking victim
- 1 in 3 runaway teens will be approached by a pimp or bottom girl within 48 hours of being on run/the street.

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CHILD SEX TRAFFICKING

The Department of Children and Families define Sex Trafficking of Minors as a range of crimes committed against children and adolescents, including but not limited to:

- sexually exploiting a minor
- recruiting, enticing, harboring, transporting, providing, or obtaining minors by any means for the purpose of sexual exploitation

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Where does sex trafficking occur?

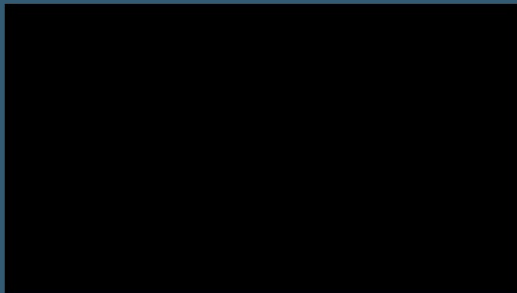
- Street trafficking in the community
- Truck stops, bus stops, parks, bars
- Schools
- Within families and their homes
- Group homes, residential programs, shelters
- Phone sex lines / webcams
- Strip clubs, massage parlors, brothels
- Public events, sporting events
- Hotels or motels
- Online, via social media



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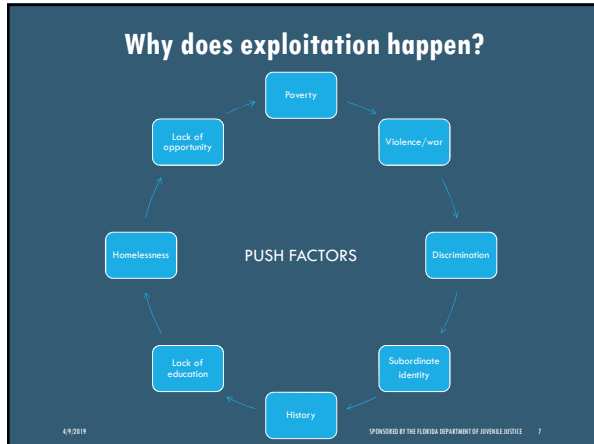
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A survivor's story



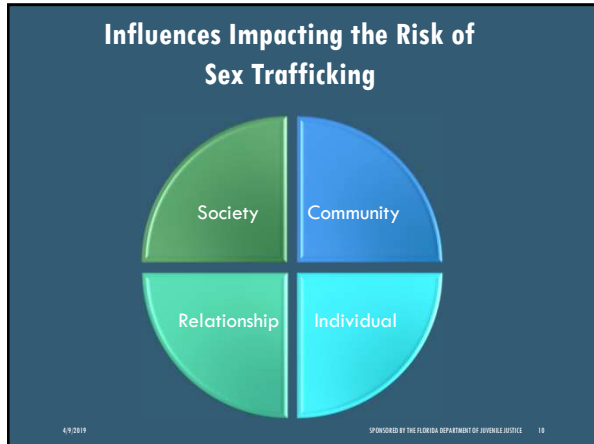
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Characteristics of Child/Youth Victims

- Often form emotional bonds with trafficker
- Stockholm syndrome
- Often express love and loyalty to the abuser/trafficker
- May feel compelled to return to abuser/trafficker

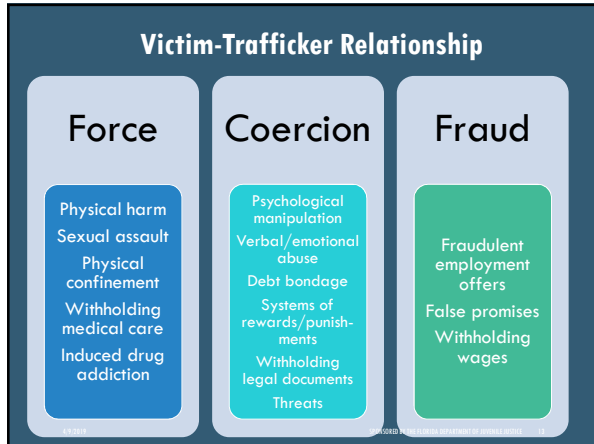


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What is STOCKHOLM SYNDROME?

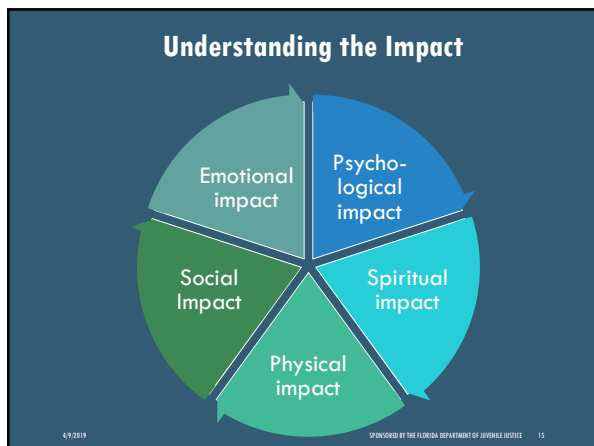
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Preventing Sex Trafficking and Strengthening Families Act

- Section 101: Identifying, Documenting, and Determining Services
- Section 102: Reporting Instances of Sex Trafficking
- Section 103: Sex Trafficking Data in the Adoption and Foster Care Analysis and Reporting System (AFCARS)
- Section 104: Locating and Responding to Runaway Foster Youth
- Section 113: Involving Foster Youth in Case Planning

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Physical consequences of child sex trafficking

- Lack of rest, proper nourishment and health care
- Teenage pregnancy and abortion
- Infectious diseases like tuberculosis, recurrent urinary tract infections and sexually transmitted diseases (STD) such as syphilis, herpes or HIV/AIDS
- Difficulty in walking or sitting due to bruises, lacerations and wounds at the genital, anal or mouth area
- Frequent headaches, abdominal & pelvic pain, back pain, shoulder pain, nausea and other symptoms associated with post-traumatic stress disorder.



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A case study:

Carrie and Amy's mother was from Scotland; she married a U.S. citizen and came to Hawaii. Their parents divorced when they were 10 and 11 years old. Their mother started drinking heavily after the divorce, became homeless and lived on the streets. Carrie and Amy were sent to a group home at ages 13 and 14 but would run away on the weekends to be with their mother. Carrie started working at Wendy's when she was 16. A pimp would come to the restaurant and flirt with her. Eventually the pimp found their mother and asked if he could have her daughters. In exchange he would give the mother food and shelter. She accepted. The pimp trafficked the girls between San Francisco and Hawaii. By the time Carrie was 19 she had had 6 abortions and one child. Both she and Amy, age 18, were alcoholics. Today the sisters are in their early 20's. Carrie has two kids. Amy has had 5 abortions and Pelvic Inflammatory Disease (PID). Both are drug addicts and homeless (Estes & Weiner, 2001, pp. 53-54).


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Psychological and behavioral effects of child sex trafficking

- Fear of sailing, flying or of enclosed places (claustrophobia) and other irrational fears
- Panic attacks and sleeping disorders
- Sexually inappropriate or offensive behaviors such as obsession to sex or complete aversion to it
- Questioning of sexuality or gender
- Non-observance of physical boundaries
- Drug and alcohol abuse, addictions and eating disorders
- Distrust of others and of themselves, shame, guilt, low self-esteem and self-hatred




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When the child turns into an adult, there may also be a need for family members to undergo counseling to process the experience of having a victim of sexual abuse for a parent or spouse.

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Mental health professionals working with sexually exploited women and girls emphasize that trauma recovery is critical to a victim's ability to repair and regain her life. Building long-term, trusting relationships is at the heart of this therapeutic work, which requires time and flexible models of engagement and treatment, including group therapy with peers. In addition to group and individual trauma-specific counseling, a range of alternative therapies offer promise in helping victims build self-esteem, empowerment, and re-connection with themselves and society.


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Victims' Needs

- Safety
- Basic needs (housing, food, clothing, etc.)
- Medical care and mental health support
- Trauma-informed response
- Strength-based approach
- Gender-responsive care
- Culturally responsive care
- Thoughtful timing before law enforcement investigation




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A trauma-informed approach begins with understanding the physical, social, and emotional impact of trauma on the individual, as well as on the professionals who help them. This includes victim-centered practices. It incorporates three elements:

1. Realizing the prevalence of trauma.
2. Recognizing how trauma affects all individuals involved with the program, organization, or system, including its own workforce.
3. Responding by putting this knowledge into practice.

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Elimination of human trafficking of child and adolescent victims requires the involvement of professionals from health care, social services, law-enforcement, juvenile justice and schools.

Advocates such as the National Center for Missing and Exploited Children, Polaris Project, Stop Trafficking Now and Thor are just a few of the organizations dedicated to calling attention to this domestic and international problem.

Awareness of the child and youth trafficking issue is the important first step to its elimination.

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Survivor of Juvenile Sex Trafficking Shares Her Story



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A leading voice for the next generation


Dallas Jessup (27), author and founder of the worldwide nonprofit Just Yell Fire. At 14 she produced 1 of 10 most downloaded production length films worldwide, at 15 she launched a nonprofit that has grown into 65 countries, at 17 her book *Young Revolutionaries* and at 20 she produced *Just Yell Fire: Campus Life*, a film focused on empowering college girls to know their rights and stay safe.



This Web site is targeted for young girls (ages 11 to 19) and college age women to provide them with resources and information as a means to empower them to prevent dating abuse, date rape and trafficking.

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Margeaux Gray was a victim of human trafficking when she was a young girl. She was sexually abused by a close and trusted adult man, and at age 5, Margeaux was sold for profit into child sex trafficking. Trafficked by a trusted adult who used physical, sexual, and psychological abuse to maintain control over Margeaux, she found it nearly impossible to seek help.



Today, Margeaux is a survivor of human trafficking who shares her story of healing and how she copes with the lingering effects of her experience. She also explains how others can support human trafficking victims.

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Let's be a VOICE for the voiceless

"We are failing because we have not identified human trafficking as the public health issue it is.

You see, trafficking is not a short-term affliction—it affects a survivor's whole life, families and even entire communities."

MARGEUX GRAY, TRAFFICKING SURVIVOR

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Serving Children and Reaching Families

Human Trafficking
Building Collaboration with Other Community Agencies

Presenter



Mary Farfan, CBHCM

Mary Farfan has 12 years of experience working in the human services field including voluntary work in the Hurricane Katrina Crisis Team, Florida Center for Survivors of Torture, TECHO Peru (building homes for low-income families), Safe Home Peru (human trafficking program) and SKIP Peru (Supporting Kids in Peru).

A graduate of Trinity College of Florida Bachelors in Counseling program. Mary is a Certified Behavioral Mental Health Case Manager from the Florida Certified Board. She is currently serving as a MH-TCM for SCARF (Serving Children and Reaching Families Program) working with ESM (Enhance Safety Management) risk cases alongside DCF and other community programs as a collateral work to help families. Prior to that, she has worked as a Refugee Youth and Family Specialist for Gulf Coast Community Care for 5 years. She served refugees, human trafficking, torture and genocide survivors from 43 countries in the process of re-adjustment, counseling, social-recreational activities, learning English and recovery.

She believes that recovery is possible when given the right mental health, medical and social services for anyone who seeks a better life.

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