

Sex Trafficked Juveniles: Recommendations for Treatment of Victims

Approved by: *Dr. Cheryl Banachowski-Fuller*

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**Sex Trafficked Juveniles: Recommendations for Treatment of Victims**

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**Annie M. Conrad**

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### **Abstract**

This seminar research paper investigated the need for trauma-informed treatment protocols among law enforcement, victim advocates, and healthcare professionals to better ensure juvenile sex trafficking victims are not revictimized and help guarantee proper treatment for sustained recovery. During the research process of this paper, it was discovered that the lack of treatment programs currently operating and deemed effective was compelling and cause for concern. However, the various treatment programs examined in this paper significantly highlighted tremendous promise in fulfilling the necessary assistance for sex-trafficked juveniles and their trajectories of healing and recovery. Enhanced procedures and efforts must be encouraged to develop and forge innovative and bolstered programs and endeavors across the country and in all communities affected by juvenile sex trafficking crimes. Moreover, further criminological, psychological, and medical research must be cultivated for a better understanding of the crime of sex trafficking, the offenders, the impacts of tremendous trauma endured, and beneficial interventions and treatment choices for the victims and survivors of juvenile sex trafficking.

*Keywords:* juvenile sex trafficking, victims, trauma-informed, healing, treatment, research

**TABLE OF CONTENTS**

APPROVAL PAGE.....1

TITLE PAGE.....2

ACKNOWLEDGEMENTS.....3

ABSTRACT.....4

TABLE OF CONTENTS.....5

I. INTRODUCTION.....7

    A. Statement of the Problem.....7

        i. There is a need for trauma-informed treatment protocols among law enforcement, victim advocates and healthcare professionals to ensure juvenile sex trafficking victims are not being revictimized and to help guarantee proper treatment for sustained recovery.

    B. Purpose of the Study.....9

        i. To help generate ideal recommendations for trauma-informed interventions, techniques and treatment programs for sex trafficked juveniles that will provide beneficial, lasting, and sustainable healing.

    C. Significance of the Study.....9

        i. There are a limited number of programs which focus on human trafficked juveniles' trauma-informed interventions and treatment. This research will analyze the current counter-trafficking and treatment programs and argue for the most significant and ardent methods of treatment and advocacy solutions for the sustainability of juvenile human trafficking victims to generate the consummate and reliant paths to healing and recovery.

    D. Methods of Approach.....10

        i. This research will utilize scholarly secondary resources from various agencies, organizations, and relevant books. References collected from previous literature and current research pertaining to best recommendations for inventions and treatments in this field will be represented, with both qualitative and quantitative articles evaluated.

    E. Contributions to the Field.....10

        i. Victim advocates, healthcare professionals and law enforcement will be better equipped to intervene in offering practical and compelling treatment for sex trafficked juveniles while helping to obtain resilient and sustainable paths of healing and eliminating revictimization of the victims.

II. Literature Review.....11

    A. Correlation between Juvenile Sex Trafficking Myths, Victim Identification, and Provided Services.....12

    B. Physical and Psychological Impacts of Sex Trafficked Juveniles.....13

    C. Mental Health Issues in Victims of Sex Trafficking.....14

- D. Provider Challenges with Juvenile Justice Involved Re-Trafficking of Victims/Survivors.....15
- E. Conceptual Model: Behavioral Health Treatment Engagement.....16
- F. Commercial Sex Exploitation During Adolescence: A U.S. Based National Study–Juvenile to Adult Health Effects.....17
- G. Specialty Court for Youth Impacted by Commercial Sex Trafficking.....18
- H. Characteristics of Survivors of Juvenile Sex Trafficking.....20
- I. Typology of STJ Offenders.....22
- J. Contributing Factors that Assisted with Exiting Commercial Exploitation: Survivor Voices.....24
- K. Literature Review Conclusion
  - i. Therefore, there is a critical need for increased awareness and trauma-informed treatment techniques and research coordination that help identify, assess, and provide sustained services for the overall health and well-being of the sex trafficked juveniles seen by law enforcement, victim advocates and healthcare professionals.....26*
  
- III. Theoretical Framework.....27
  - A. Life Course Theory.....27
  - B. Age-Graded Theory of Informal Social Control.....29
  - C. Routine Activities Theory/Lifestyle Theory.....30
  
- IV. Program Evaluations: Current Examples of Counter-Trafficking and Treatment Programs.....32
  - A. “My Life My Choice” Program (Boston, MA) .....33
  - B. Love146 Program (State of CT) .....36
  - C. Mount Sinai Adolescent Health Center (MSAHC) .....41
  - D. Reclaim13’s -’Cherish House’ (State of IL) .....44
  - E. The Minnesota Runaway Intervention Program.....47
  - F. H.E.A.L.T.H. Clinic of Ottawa.....50
  - G. Behavioral Health Treatment “Buy-in” .....53
  - H. Relational-Cultural Theory in Mental Health Treatment.....54
  
- V. Recommendations.....55
  - A. Ideal Components for Program Overview for Treatment of Sex Trafficked Juveniles.....56
    - i. Identifying the Victims.....56
    - ii. Properly Assessing the Trauma.....57
    - iii. Providing Trauma-Informed and Appropriate Interventions and Treatment Techniques to Eliminate Revictimization and Resilient Paths to Healing.....58
    - iv. Law Enforcement/Victim Advocates/Healthcare Professionals: Awareness Education, Identification Practices, Trauma-Informed and Most Effective Techniques and Treatment Options to Help Pioneer Successful Lifetime Outcomes for Sex Trafficked Juvenile Victims.....60

B. Community Based: Awareness Suggestions .....68  
 i. Better Identification and Intervention of Sex Trafficked Juvenile  
 Victims.....68  
 C. The Trafficking Victims Protection Act of 2000 (TVPA) through the Justice for  
 Victims of Trafficking Act (JVTA) of 2015.....70  
 VI. Conclusion.....72  
 A. Summary.....72  
 B. Outcome.....74  
 C. Future Research.....75  
 VII. Reference List.....76

**Section I: Introduction**

**Statement of the Problem**

The tremendous challenges and prevalence of juvenile sex trafficking gravely impact numerous victims and have detrimental repercussions that affect every facet of life, including neighborhoods in the cities, the suburbs, and the pastoral countryside. No community is immune or safe from this quandary (Texas Department of Family and Protective Services, 2024). Human sex trafficking is a lucrative business for the traffickers, earning profits of over \$173 billion from those purchasing sex, leaving the victims exploited and as virtually disposable goods. The victims are often left financially broke and battling profound emotional and physically wounded bodies (Richmond, 2024).

Child sex trafficking is against federal law, 18 U.S.C. §1591, which is defined as thoughtfully engaging someone under the age of 18 in a commercial sex act. A commercial sex act is described as any sex act where anything of value is given to or accepted by that person. People often perceive that trafficking involves a person being transported across state lines or international parameters; however, the law demands no proof that anyone traversed boundaries (U.S. Department of Justice-Criminal Division, 2023). Unfortunately, there is no sole profile for

victims of juvenile sex trafficking, and many times, these victims live in seemingly ordinary surroundings without being suspected or discovered. There are estimated to be 24.9 million victims (about the population of Texas) worldwide of endangered adults and children of every age, nationality, and surroundings (U.S. Department of State, 2022). According to Wallace and Roberson (2015), around 80% of trafficking victims are female and 50% are children.

Human sex traffickers often target victims who live in socioeconomically disadvantaged neighborhoods. These vulnerable individuals often include children in foster care or who have been encircled by the juvenile justice system. The victims may be homeless, disabled, individuals of color, LGBTQ+, or people who are illegal immigrants. The traffickers' prey upon basic vulnerabilities: restricted English language mastery, lack of safe housing, and confined opportunities for economic and educational endeavors. Fake aspirations of love steadily lure these victims, along with a prosperous paying job and a dependable life (U.S. Department of Justice, 2023).

The never-ending demand for and the use of victims for sexual gratification has created a cycle of abuse and exploitation that is formidable to sever.

The need for treatment and trauma-informed practices among law enforcement, victim advocates, and healthcare professionals is essential in prompting recovery and eliminating revictimization of the victims of sex trafficking (U.S. Department of State, 2021). Trauma-informed interventions within the criminal justice system and victim advocacy during the rehabilitative process are critical to ensuring that sex trafficking victims are creating resilient paths to healing (Hargreaves-Cormany & Patterson, 2016).



**Purpose of the Study**

The purpose of this research is to emphasize the demand and necessity for appropriate and trauma-informed treatment for the immense volume of sex-trafficked juveniles coming into view in the societal landscape for law enforcement, victim advocates, and mental and healthcare professionals. This research will provide applicable options of care for those juvenile sex trafficking victims entering critical systems of assistance and offer them the most beneficial treatment recommendations available to help facilitate and form resilient paths of healing. The integral and foundational applications of treatment may be lacking in most treatment plans and protocols for this vulnerable population through the agencies attempting to assist them. The continuous challenges for those involved in helping sex-trafficked juveniles may be the delicate understanding and patience necessary in dealing with their situations and choosing the most beneficial treatment protocols while not exposing them to revictimization (U.S. Department of State, 2021).

**Significance of the Study**

The significance of this research paper is to provide recommendations for trauma-informed interventions and treatment for juvenile sex trafficking victims. The need for trauma-focused treatment and practices among law enforcement, victim advocacy, and the healthcare field is critical to help prevent revictimization of the victims of human sex trafficking (U.S. Department of State, 2021). This paper will analyze and argue the most significant and effective ways to provide treatment and trauma-informed advocacy to ensure sex trafficking victims can generate consummate and resilient paths to healing (Hargreaves-Cormany & Patterson, 2016).

**Methods of Approach**

This research will include timely data from multiple secondary resources, including scholarly, peer-reviewed, and scientific journals, governmental and non-profit agencies and organizations, and pertinent books. Information will also be acquired from preceding literature and current research on trauma-informed interventions and treatment recommendations for juvenile sex trafficking victims. The obtained data will be gleaned from qualitative and quantitative journal articles and studies furthering the crucial research in this erupting field. These collaborative resources will help discuss the prominent research question of how to find the best practices in the treatment and advocacy of sex-trafficked juveniles. After a thorough analysis of the current treatments, practices and programs of the data procured, an accurate evaluation for appropriate recommendations for the most effective treatment and trauma-informed advocacy and best practices in providing suitable recovery and lasting healing for juvenile sex trafficking victims.

**Contributions to the Field**

The goal of this research is to offer practical and compelling treatment methods and practices for law enforcement, victim advocates, and healthcare professionals in providing resilient paths of healing for juvenile sex trafficking victims. Seeking these essential recommendations and obtaining the best practices is a crucial duty to eliminate revictimization for juvenile sex trafficking victims. In supplying law enforcement, practitioners, and trafficking advocates with awareness and the best practices of treatment available in this field, this research will help to

further pioneer favorable and sustainable outcomes for the future of juvenile sex trafficking victims.

It is further anticipated that this research paper will serve as a resource guide for ideal recommendations of current and future programs that provide trauma-informed interventions and treatment for juvenile sex trafficking victims. It is also expected that the evidence found can help promote techniques to better identify victims, assess childhood trauma and abuse and to furnish sustainable paths to healing. Additionally, it is anticipated that this research paper will raise awareness regarding the tremendous challenges and prevalence of sex trafficked juveniles and the grave impacts on the victims and our society. Lastly, expressing the desired outcome of exploring and generating strategies that our communities can create effective solutions to finally eliminate the epidemic problem while offering support and sanctuary to juvenile sex trafficking victims.

## **Section II: Literature Review**

The following literature review will provide empirical support and examination of the general appreciation and understanding of sex-trafficked juveniles and the challenges they encounter. The first section correlates succinctly to juvenile sex trafficking myths, the identification of the victims, and the services provided to them upon revelation. The literature's second section presents some of the severe psychological and physical impacts that this vulnerable population often suffers. The third section precisely displays an in-depth examination that reveals the extreme mental health issues that trafficked juveniles often face. In the fourth section, the literature review assesses the challenges providers experience with juvenile justice involving the re-trafficking of the victims, and the fifth section evaluates the conceptual model in behavioral health treatment engagement. At the same time, the sixth section gives imperative data from a

U.S. national study of juveniles to adult health effects of partaking as adolescents in commercial sexual exploitation. The seventh section explains the implications of a specialty court for youth impacted by commercial sex trafficking. The eighth section describes in detail the characteristics of survivors of juvenile sex trafficking. The ninth section presents the typology of the offenders in sex trafficking juveniles (STJ). Additionally, section ten of the presented literature review gives contributing factors that assisted with the exiting of commercial sexual exploitation, explained by the survivors themselves. Lastly, section eleven of this thorough literature review of current research studies will show the critical need for increased awareness and trauma-informed techniques to help law enforcement, advocates, and healthcare professionals quell this epidemic of juvenile sex trafficking.

### **Correlation between Juvenile Sex Trafficking Myths, Victim Identification, and Provided Services**

The stigma and responsibility of successfully identifying sex trafficking victims presently rests on specialists in agencies and in the field that serve juveniles. The correct verification of domestic minor sex trafficking victims (DMST) and the ensuing allocation of appropriate services needed may be hindered by ordinary myths correlated to human trafficking (Gonzalez-Pons et al., 2020).

This study examined if the specialists serving domestic minor sex trafficking victims (DMST) fully understood the variances between myths and facts concerning basic sex trafficking concepts and if their misknowledge hinders the ensuing allocation of the services their agency provides to the DMST victims they serve (Gonzalez-Pons et al., 2020).

In a cross-sectional survey over two months, the authors found that very few specialists working with this population accepted DMST myths. However, some administrators did believe

ordinary myths correlating to DMST victims in that "force, fraud, or coercion" must be present in DMST. These specialists were mainly unable to give accurate numbers of the victims detected, while the agencies would be better supported by additional training. The specialists also indicated that they might lack the treatments and resources requested by DMST victims, making the process unsuccessful in their attempts to help (Gonzalez-Pons et al., 2020).

The conclusion this study highlights is that the ongoing and ordinary DMST myths most certainly hinder the identification of juvenile victims and the appropriate service and resource dispensation. Agency partnerships are required to help ensure that the juvenile victims are attained. Training that focuses explicitly on the legal definitions of domestic sex trafficking and proper identification of the victims involved is essential for the future. This ongoing and sustained training should involve DMST survivors to guarantee that trauma-informed techniques are achieved (Gonzalez-Pons et al., 2020).

### **Physical and Psychological Impacts of Sex Trafficked Juveniles**

It has been well documented that sex-trafficked juveniles tend to experience a cornucopia of detrimental physical and psychological issues that can be devastating and sometimes difficult to determine.

The physical impacts can involve traumatic damage from sexual and physical attacks, STIs, non-sexually transmitted ailments, such as tuberculosis, undiagnosed and ongoing medical conditions, undesired pregnancy, persistent pain, overdoses from substance abuse, undernourishment, and being exhausted (Albright et al., 2020). The victims may also be exposed to HIV and AIDS, pelvic discomfort, rectal injuries, and urinary problems, and they may have

experienced multiple abortions, particularly in young women, and infertility due to the recurring and continuous untreated sexually transmitted infections (St. John, 2023).

The psychological and mental health impacts can also produce depression, suicidal ideations and suicide attempts, suffering from anxiety, difficulty managing anger, dissociative disorders, post-traumatic stress disorder (PTSD), and numerous other comorbid disorders (Albright et al., 2020). Trafficked juveniles may experience emotional numbness and dissociative amnesia or memory loss due to severe trauma. Victims may also develop substance or alcohol abuse dependency and potential eating disorders. These impacts and results may be long-lasting, affecting the person's interpersonal relationships and possibly producing an intergenerational cycle of victimization (Chon, 2021).

### **Mental Health Issues in Victims of Sex Trafficking**

Many sex-trafficked juveniles have encountered significant and complicated trauma before they are ensnared in the life of sex trafficking, and it only intensifies with more abuse and violence while being further victimized. The mental health issues may be exacerbated further in the surroundings of deprivation and lack of educational fortitude. Victims with foundational mental illness or personality diseases may have substantially elevated dangers of being exploited by traffickers because of their damaged decision-making skills and recklessness. These essential characteristics may be aggravated by the use of illegal substances while being more common among juveniles with mental health diagnoses and trauma victims. Additionally, the prolonged struggles with trauma and mental health often make it more challenging for juveniles to abandon their traffickers and become involved in treatment plans, especially drug rehabilitation, counseling regimens, and even learning new job skills. Managing mental health issues and

historical trauma is an essential piece in trying to prevent trafficking from occurring initially and in the rehabilitation after leaving the trafficking scenario (Palines et al., 2020).

The authors proclaim there are a minimal number of studies in the recent literature conglomerations on mental health amid sex-trafficked juveniles. The necessity of further research concerning these desperate and vulnerable populations is essential to understanding the complex mental health struggles and trauma associated with juveniles being sex trafficked and the potential outcomes of those experiences (Palines et al., 2020).

### **Provider Challenges with Juvenile Justice Involved Re-Trafficking of Victims/Survivors**

In the underworld of domestic minor sex trafficking (DMST), victims are abundantly engrained in the juvenile justice system but often run away and encounter being re-trafficked. This study explores 35 comprehensive interviews with practitioners on the frontlines of DMST and their viewpoints in trying to help provide treatment and security under sometimes difficult and frustrating circumstances (Nichols et al., 2022).

This study brings a new perspective from practitioners who fully engage with DMST victims daily and try to get them treatment and resources for the issues they face. The practitioners explained that sometimes their capacity to give attention to the DMST victims is restricted due to their lack of authority within the juvenile justice system. The practitioners also shared that they often were unable to provide housing at residential treatment centers that give the appropriate therapeutic care and drug rehabilitation needed and with little authority to achieve punishment aimed at the parents from the Department of Family and Protective Services (DFPS). They further explained that with this lack of capacity to provide these necessary interventions, these victims would only find solace from re-trafficking scenarios if they were exposed to severe emotional

anguish or excessive violence, becoming pregnant or giving birth, or getting an STI (Nichols et al., 2022).

The conclusions of this monumental study of speaking with DMST practitioners include non-punitive ways to respond to the repetitive actions of running away and re-trafficking juveniles. These may involve putting the juveniles into foster homes that are specifically trained and qualified in the issues of sex trafficking, the realities of trauma, and continuous runaway demeanors. The responses may also include safety planning for the DMST victims while providing risk assessments and treatment resources for accessible safety centers and healthcare agencies, revamping the processes for hotlines of worried parents, and elevating the victim's accessibility to trauma-informed housing and care, counseling, and treatment for substance abuse, which is suggested to be done by extending proper healthcare participation through the Safe Harbor laws to help the DMST victims (Nichols et al., 2022).

### **Conceptual Model: Behavioral Health Treatment Engagement**

The current techniques employing the coordination of sex-trafficked juvenile girls is to attain engagement with behavioral health treatment. The victims need persistence in the care given in comfortable, adaptable, and open settings. Adaptable care is essential because commercial sexual exploitation (CSE) may command transitoriness and irregular agendas. Learning to promote and develop trust between the care providers and the victims lends to a unique understanding. The victims desire to learn treatment reasoning, especially with prescribed psychotropic medications. Explaining the treatment, counseling, and medication regimens will quickly discourage false illusions about their care. It will give them the power to be prepared and handle their own bodies, minds, and treatment, while providing them with choices (Barnert et al., 2020).



Nurturing survivor engagement during coordinated decision-making about their care may be an essential apparatus for constructing trust, which is critical in attaining cooperation between juvenile females with backgrounds in CSE. Suppose there is no awareness or understanding of the critical relationship that cultivates treatment engagement. In that case, the victims will appear in person but not fully buy into the processes put into place for them and will doubt the services dedicated to them. The relationships of trust between care providers and the CSE victims are an influential part of the healing process, as with domestic violence (DV) survivors. Ultimately, with the relationship taking place, the victims may soon feel they are capable and strong enough to leave the CSE situation (Barnert et al., 2020).

### **Commercial Sex Exploitation During Adolescence: A U.S. Based National Study - Juvenile to Adult Health Effects**

To better understand and evaluate the health of both male and female juveniles with exposure to commercial sexual exploitation (CSE), this study set out to compare health records of young people for progression from their adolescence through adulthood. This retrospective cohort study procures data from the National Longitudinal Study of Adolescent to Adult Health to portray connections among CSE experiences before or during adolescence and their subsequent health standard through adulthood. The study contained 10,918 male and female individuals aged 24-34 (Barnert et al., 2022).

Nearly four percent of participants shared being exposed to CSE before or during adolescence, with about five percent of males and three percent of females. Elements correlating to being exposed to CSE during adolescence involved race and ethnicity, the educational process of parental figures, history of abuse, same-sex relationships, running away in the past, and abusing

substances. Having experiences with CSE in adolescence was interrelated to detrimental general health, depression, and suicidal ideations for males and females. Incidentally, during adulthood, males exposed to CSE as juveniles were more apt to use the emergency department as their foundational resource for their healthcare (Barnert et al., 2022).

Understandably, this foundational study found that juveniles exposed to CSE during adolescence correlated with flawed and damaged juvenile and adult health results and scarce health care resources. Additionally, juveniles of both sexes who experienced CSE before or during adolescence achieved decreased educational success and an elevated chance of becoming incarcerated. At the same time, females noticed a decrease in social position. Lastly, this study spotlights the necessity of creating a more transparent comprehension of the lifestyle pathways of juveniles exposed to CSE and the essential cause for preventing these experiences of sexual exploitation. This task may be best accomplished by managing preceding elements correlated to exposure or experiencing CSE during childhood and adolescence (Barnert et al., 2022).

### **Specialty Court for Youth Impacted by Commercial Sex Trafficking**

Commercial sexual exploitation (CSE) of juveniles is a pandemic global and social consequence that negatively impacts countless adolescents living in the United States. Many victims of CSE in the U.S. are young women of color, and both girls and boys who are victims who identify as LGBTQ+ are often underreported to authorities. Juveniles who have backgrounds with CSE often have exposure to the child welfare and juvenile justice systems because of being susceptible and becoming a victim of CSE and then being an outcome of CSE and suffering revictimization. The outstanding danger elements for CSE often involve child abuse and neglect,

being a runaway, suffering poverty, mental health, and substance abuse struggles (Bath et al., 2020).

In years past, CSE juveniles were often arrested and charged with prostitution charges; however, more recently, the Safe Harbor legislation has helped decriminalize juvenile trafficking victims while veering to appropriate and needed services. Still, these victims are being entangled with the juvenile justice system because they are arrested for stealing, skipping school, being runaways, and providing the police with invalid IDs. Using and becoming addicted to illicit substances can also be a direct pipeline to the criminal justice system while trying to escape from the realities of CSE. Many studies have reported that punitive reactions to these behaviors may unintentionally be retraumatizing for these victims while producing adverse outcomes and elevated mental health issues (Bath et al., 2020).

The creation of specialty courts for these sex trafficking victims in the U.S. to help better address their needs has been game changing. The CSE specialty courts for juveniles have arisen in reaction to three main fundamental reasons, which include the need to raise the identification of juveniles that are victims of CSE, determine the significance of detouring and decriminalizing the impacts for the victims to lower their recidivism and dangerous actions further and lastly the critical demand to give trauma-informed care that a multidisciplinary team (MDT) supervises to mandate appropriate treatment and care (Bath et al., 2020).

These specialty courts, catering to juveniles severely impacted by CSE, are entrenched in looking at the bigger picture of the problems created by the encompassing issues of CSE for juveniles. These courts focus on the complicated psychosocial issues and multifaceted requirements of juveniles that have been encroached upon within the juvenile justice system and their families (Bath et al., 2020).

This study administered a comprehensive case review of the juveniles enrolled in the Succeeding Through Achievement and Resilience (STAR) Court for four years. This program encompassed multiple care methods with community-grounded agencies, furnishing an original foundation for other communities dealing with the demanding impacts and correlated requirements of juveniles exposed to CSE (Bath et al., 2020).

The results were overwhelmingly positive outcomes for the juveniles that participated in this specialty court, which showed an elevation in the validation of mental health and substance abuse demands and the ongoing integrations for those treatment benefits. It also demonstrated an elevated fixation as determined by lowered established child welfare indictments, fewer juveniles running from home, and alternative assignments and criminal exposures. While this concept of this specialty court assimilates a multidisciplinary team (MDT) of professionals, trauma-informed techniques give a nurturing and intervening example for fulfilling the extended treatment demands of juveniles distressingly affected by commercial sexual exploitation. These associations stayed constant and statistically meaningful for six and twelve months, along with the heightened testimony of mental health recognition for the juveniles (Bath et al., 2020).

### **Characteristics of Survivors of Juvenile Sex Trafficking**

Many characteristics make up the elements of being a survivor of juvenile sex trafficking. The casual conditions that begin in their childhood years start with various stressors and vulnerabilities, which may be an amalgamation of biological and environmental components that help to elevate their vulnerability of being enlisted by the sex trafficking of juveniles (STJ) offenders that often involve the following. These components may be a monetary strain, the dismantling of their family, the deficiency of emotional advocacy and the longing for love and

security, unhealthy family life, the lack of guardianship, troubled attachment, being a runaway, and a childhood filled with trauma, abuse or neglect (Hargreaves-Cormany & Patterson, 2016).

The authors describe secondly the "phenomenon" of the transition from being enlisted into sex trafficking and being encased in sex trafficking with the STJ offender. In this process, the vulnerable juveniles who desire degrees of emotional encouragement along with the lack of attachment to family are preyed upon by the STJ offender to be enlisted and eventually sex trafficked by the perpetrator. Many times, a trauma bond is formed between the victim and the STJ offender, while the offender functions as a perilous foundational support to the sex-trafficked juveniles. To further control their attainability to ordinary survival necessities, which produces the ultimate victimization by the STJ offender (Hargreaves-Cormany & Patterson, 2016).

While being sex trafficked, the victims are most likely living in neighborhoods that are riddled with crime and are socioeconomically disadvantaged. There may also be examples of prostitution that are witnessed among their family or friends.

The intervening elements experienced by the sex trafficked juveniles are the STJ offender and their charming, manipulative, and violent behaviors seen daily in the handling of the business. The chance to interact with law enforcement and possibly an advocate, and the friendship gradually established as a healthy and safe base camp. This step is critical in deciding to leave trafficking and start on their path to treatment and healing. The juvenile is situated in a secure housing location while being in extreme peril (or even forcibly kidnapped) to return to the life of being trafficked by the STJ offender, or they or their families' lives are threatened (Hargreaves-Cormany & Patterson, 2016).

Some positive strategies help create robust characteristics after being a sex-trafficked juvenile. They achieve these elements by taking part in therapy sessions; they may help other survivors or

susceptible juveniles stay away from STJ offenders. They educate themselves with high school diplomas or get worthy, new job skills to help them start a new career. There are still some negative strategies from the trafficking behaviors that may be difficult to sever. These include negative survival traits that elevate the use of illicit drugs or alcohol and thoughts of suicide (Hargreaves-Cormany & Patterson, 2016).

The powerful outcomes produced from positive effects are a revived feeling of hope, using positive coping traits, feeling empowered, working on healing, and having resiliency in their everyday lives. Unfortunately, there may still be adverse outcomes that are just as powerful some days as the positive ones. They may be seeking out unhealthy relationships as they age, become pregnant, receive a sexually transmitted disease (STD), sustain physical injuries, endure psychological trauma that may intensify other mental health impacts, or stay addicted to illegal substances throughout their lives (Hargreaves-Cormany & Patterson, 2016).

This study highlights the immense importance that law enforcement or a victim advocate during a chance interaction may be the first kind and positive adult that is a secure and healthy base the juvenile has ever encountered. The critical building of trust that law enforcement, advocates, and healthcare professionals chose to build with the survivors was monumental in their assisting in the recovery and their ultimate choice to help bring their STJ offenders to justice (Hargreaves-Cormany & Patterson, 2016).

### **Typology of STJ Offenders**

Law enforcement, advocates, and healthcare professionals must be able to identify the offenders of sex trafficking of juveniles (STJ) and their victims and organize the psychopathy of

the offenders to create an encompassing theoretical framework that may help explain these behaviors.

In defining psychopathy in STJ offenders, it is a constant affliction, mainly in males, that starts with aggressive behaviors in the early years of development, recklessness, defiant to discipline, void of emotional affection, misleading traits in social relationships, and has elevated degrees of indiscriminate sexual conduct. Psychopathy in individuals is commonly known to have few truthful feelings, including being unempathetic to others (Hargreaves-Cormany et al., 2016).

This current research suggests that this study displays an elevated frequency of psychopathy in STJ offenders and that many pimps often exhibit psychopathological tendencies. Psychopaths also display increased crime ratios, specifically sexual and violent behaviors, and elevated degrees of violent harshness. These encompassing and heightened occurrences of inherent psychopathy in STJ offenders and the graveness of their crimes help further prompt awareness of the peril they present to our society (Hargreaves-Cormany et al., 2016).

The significant motivation for STJ offenders, encompassed within elevated psychopathy tendencies, seems to be more fundamental and aggressive in scope to garner financial rewards and sexual satisfaction (Hargreaves-Cormany et al., 2016).

To improve understanding of the STJ offender, it is imperative to have a foundational concept of the juvenile sex trafficking victims who are vulnerable to these criminals. These juveniles often experience disruption within their households; they may have chaotic family situations with fighting or suffer from monetary struggles. They may live in neighborhoods that endure high crime and decreased socioeconomic opportunities. The STJ offenders mainly prey on victims who are experiencing these misfortunes and are powerless. Within this unfortunate storm, all of these elements convene, the STJ offenders, while being acutely effective in their capacity to manipulate

these sensitivities, many juveniles are in jeopardy of being enlisted and victimized (Hargreaves-Cormany et al., 2016).

It is imperative to help further explain the STJ offender and victim relationship. The STJ offenders can be experts at giving phony feelings of caring with toxic attachments while giving the dream of a fictional life and targeting the victim's weaknesses. They may frequently concentrate on the weakness of being left alone and deserted. This entire method of manipulation and devastation by the STJ offender of the victim lays the foundation for being dominated and managed in every aspect of their being. This destructive strategy takes time and through numerous events, which are all facilitated in designing elevated segregation for the victim both physically and psychologically. This total manipulation by the STJ offender of the victim shows considerable and mindful awareness, which is encompassed in the deep craving for authority, domination, and avarice (Hargreaves-Cormany et al., 2016).

The results of this study prominently display that STJ offenders with charming and deceptive characteristics often have decreased years associated and entangled with the criminal justice system and present an expanded risk to communities due to their suspected intellect, their slick social habits, and their abilities in criminal complexities to avoid encounters with law enforcement. These STJ offenders may also use violence and persistent techniques with their victims and could potentially create the most severe dangers to society. With human trafficking in epidemic proportions and increased threats to victims worldwide, research is critically demanded for further studying STJ offenders within experienced interdisciplinary teams of specialists (Hargreaves-Cormany et al., 2016).

**Contributing Factors that Assisted with Exiting Commercial Sexual Exploitation:  
Survivor Voices**



The FBI considers the elevated cases in the United States of commercial sexual exploitation of children (CSEC), especially in Northern California San Francisco Bay communities. In this valuable research study, the primary query was to find out directly from sex trafficked women survivors how they found a way out of sex trafficking and how they feel about themselves today. The authors of this study conducted 13 semi-structured interviews, ages 21-26, and mainly women of color while being recruited, on average, at 13 years old. The survivors spoke about twenty various categories broken down into three elements that helped describe their lives and how they escaped. There are three groups: self-defined, describing life, and the exiting process. The survivors gave four solid recommendations: to exhibit active listening skills, always encourage, be non-judgmental of the individual, and never back down or leave when they push away the help (Corbett, 2018).

This study gave an extraordinary perspective, as that of the survivors of sexual exploitation, and transformed them into experts in this field while helping to expound what is already known about trying to exit this life. They emphasized the magnitude of listening to young people's stories as a tale of resiliency and the recovery journey while treasuring the intricacies of family relationships during the exciting course (Corbett, 2018).

The takeaway from the voices of the survivors of any crime is to listen carefully to the advice and expertise they must give. Always encourage law enforcement, advocates, and healthcare professionals to listen and pay close attention to the survivors who have experienced these atrocities while using their voices to engage in trauma-informed improvements to help all the victims who still desire help to exit the sex trafficking life successfully and safely (Corbett, 2018).

### **Literature Review Conclusion**

According to the information and studies in the literature review, the data reinforces that sex trafficked juveniles continue to be on the rise, is occurring in communities without prejudice, and is a tremendous challenge for law enforcement, victim advocates, and health care professionals. Therefore, there is a substantial need to shed more light on awareness, intervention, and trauma-informed treatment for the victims of sex trafficking.

In many studies analyzed in this extensive literature review, one issue that should be addressed for future research is a problem that faces many fields that need further research. The experts do not seem to agree with the terminology and methods used to study the same social challenge that needs solving. These research studies, which are all aiming for the exact solutions to help treat and heal sex-trafficked juveniles, would be advantageous to have specific definitions for sexual exploitation and evaluate solutions for these victims. In order to effectively evaluate programs and the methodologies used in the research of these programs, it is essential to use all the same definitions so that the techniques can be evaluated and examined across the lines for culpability, reliability, and effectiveness. The researchers studying these issues would benefit from targeting valuable associations with the leading-edge workers submerged in it daily with the victims and their struggles. It is essential to cater the research, interventions, and treatment to help sexually exploited juveniles instead of trying to solve all the problems with one solution (Moynihan et al., 2018).

This significant problem needs elevated focus with more research, healthcare professionals, and social service organizations specializing in helping vulnerable populations. The critical associations between the researchers, law enforcement, advocates, and health care specialists can demand that sexually exploited children and juveniles are provided with evidence-driven,

purposeful, and considerately driven techniques and treatment that are proven to acquire and fulfill the particular demands and create recovery for this vulnerable and worthwhile population of young people (Moynihan et al., 2018).

### **Section III: Theoretical Framework**

The following component of this paper examines three criminological theories that easily correlate these perspectives to the crimes and victimizations of sex-trafficked juveniles. The three criminological theories described are life course theory, age-graded theory of informal social control, and routine activities theory/lifestyle theory.

#### **Life Course Theory**

The development of the life course principle has given social dilemma research a more dynamic and full-spectrum foundation for delving into the robust procedures and intricacies of human advancements. Within life course theory (LCT), four logical components often impact human progression (Reid, 2012). The four life course theory components are *factual and geographic environment, socially engrained, timing, and personal regulation*. These four components are critical in comprehending the multiplicity of humans and how they acclimate through each proposed speculative cycle of time, childhood, teenage years, and maturity (Reid, 2012).

Initially, life course theory (LCT) explains the subjective outcomes that emerge when people are discovered and evolve in specific neighborhoods and through factual durations. Members of a biological cluster live amongst and are impacted by factual occurrences. Moreover, those

members who live in a particular geographic environment retain comparable inhibited chances in life (Reid, 2012).

Secondly, LCT describes the phases of life, not through calendar years, but as a foreseeable outcome dependent upon the reproductive progression, starting with children being born, across their life span development, and up through having their own offspring. This life progression founded on having children is the cornerstone in comprehending social connections and bonds between family generations that describe being socially engrained (Reid, 2012).

Thirdly, examining when life happenings transpire, whether during standard anticipations or unexpected or belated times, is fascinating because they can impact adjustment (Reid, 2012).

Finally, life course theory encompasses life mechanisms as the procedure by which people direct and choose their own beings within functions and statuses. People make selections through the limitations provided by the factual and geographic environment and the socially engrained situations. The intertwining of the limitations provided by social and life mechanisms and the procedures by which people choose their paths is a distinguishing feature of life course theory. It is anticipated that these four critical components of life course theory will blend concurrently to contour and form a person's life path for the future (Reid, 2012).

Life course theory has further shown to have an essential impact on being swayed by siblings and deviant friends, thus furthering the life trajectory into criminality. However, experiencing influential and positive features within an individual's life can change the pathway indefinitely. These are getting married, having a fulfilling job, and serving in the military (Tibbetts & Hemmens, 2019).

Examining life course theory (LCT) and correlating certain criminal behaviors gives a greater appreciation of the onset and continuation of harmful and destructive behaviors as juveniles and

the cessation of these actions. Associating victimization with sex trafficking does not directly connect certain criminal attitudes; however, using life course theory to help explain these caustic victimizations further links the continuous and long-term aspects involving the sexual exploitation of juvenile sex trafficking. Additionally, many experts proclaim that many criminological theories may be highly beneficial in illuminating the behaviors of victims of crime and the victimization that occurs. It is almost impossible to look at the dilemmas of criminality and victimization without recognizing their correlations and intersections (Reid, 2012).

### **Age-Graded Theory of Informal Social Control**

Following along the veins of life course theory, Sampson and Laub created a developmental theoretical ideal that concentrates mainly on consistency and fluctuation (Tibbetts & Hemmens, 2019). The age-graded social control theory initially blends life course and social control theories with three specific elements. The first element is the foundational features of a person's childhood, which may include being socioeconomically disadvantaged, having a chaotic family life, having a transient lifestyle, and having parents with divergent tendencies. Children from these beginnings are anticipated to have unconventional family and educational social control or adhesion, which often includes little supervision and disregarded by their parents, abuse, and low accomplishments at school, which accordingly has repercussions on childhood behaviors and juvenile deviancy (Reid, 2012). Secondly, detached social behaviors are speculated to be ongoing and will influence a person through maturity. Thirdly, social capital, or the shortage of this quality (Chohaney, 2016), describes the ability to hold a job and maintain a marriage. Social capital is speculated to apply leverage and often modify inclinations in criminal tendencies grounded in a person's experiences as a child and during young adulthood (Reid, 2012). Therefore, continuous

job security minimizes the appeal of stealing or crimes that have rewards of financial gains; while conversely, habitual job insecurity enhances the attraction of illegal activities (Chohaney, 2016).

The elements of risk that sex trafficking juveniles are dominated with throughout their childhood and adolescence often lay the destructive pathway for the theoretical foundation of both life course theory and age-graded social control theory. The traumatic family and community lifestyles that most sex-trafficked juveniles are rooted in, along with the swirling interrelated typical non-foundational or casual risk elements, are typically categorized. These typical activities may involve, spending time in detention, participation in survival sex, associates encompassed in the sex trade and being a runaway. Mental health issues and educational struggles are also crucial risk elements to consider when formulating key correlations between life course theory and age-graded informal social control theory and, additionally, fighting with their parents, living in poverty, premature substance abuse, and being deposited in the foster care system. (Chohaney, 2016).

### **Routine Activities Theory/Lifestyle Theory**

The routine activities theory, or lifestyle theory, fits well within the Classical School of criminology by giving the offender ownership of their crimes by believing the offender enacts rational judgments. Cohen and Felson created this theoretical structure that proposes three elements that must be present and diverge at the exact moment and location, prompting an elevated probability that a crime and victimization will happen. The three essential elements that must be attended are the motivated offender, the appropriate target, and the absence of guardianship. This theory speculates that crime happens through a person's day-to-day routine and

those who observe and prey on the vulnerable and alluring chances to execute a crime (Tibbetts & Hemmens, 2019).

The routine activities theory is sharply correlated to help evaluate aggressive and violent sexual offenses and to help law enforcement reduce crime. Researchers have derived that being susceptible to the motivated offender amongst locations with few competent guardians may have an elevated influence on a person becoming a victim than many typical day-to-day tasks (Kenyon & Schanz, 2014).

Routine activities theory proposes that ordinary routine activities are continuously replicated within a person's life and are found in someone's home, removed from the home, or at their job. These tasks may involve working, seeking social and entertainment outings, and being at home. The more activities that are away from home and do not have family connected to them, the higher the probability of victimization. Additionally, in the theory of routine activities, the shortage of competent guardians seems to be a crucial element since it frequently leads to predatory crime and an individual becoming a traumatized victim (Kenyon & Schanz, 2014).

The association between routine activities theory and sex trafficked are numerous and convincing. The *motivated offender* is easily relatable to the sex trafficker by having an attraction to financial gains and providing the impetus and affinity to perform a crime. Sex traffickers also seek domination and restraint over their victims while delivering violence to women. Sex traffickers tend to engage their potential victims by psychologically and physically seducing women to make them complacent to their demands (Kenyon & Schanz, 2014).

The appearance of an *appropriate target* will be someone that a sex trafficker finds to possess potential value, laziness, prominence, and the availability to obtain accessibility. Sex traffickers often see the specific characteristics that are in demand and that will attract the highest returns.

The women targeted and sex trafficked may have specific characteristics that describe their age, certain physical attributes, or body types (Kenyon & Schanz, 2014).

Lastly, the *absence of guardianship* is a valuable element that enhances the occurrence and probability of the routine activities' theory. The guardian may be present, or a perceived notion of a protector being there could ultimately make the difference in a crime. Many traffickers have continual control over their victims and will not take any risks of letting the victims go only to reveal their sex trafficking business. The researchers also highlight law enforcement acting as the potential guardians for these victims because traffickers readily shift their locations of business when police become visible. By the traffickers seeking out victims who desire a better life, have a chaotic family situation, and have minimal support and friends, the traffickers are effortlessly able to exploit them into the life of juvenile sex trafficking and use them as they wish (Kenyon & Schanz, 2014).

Within these practical and applicable criminological theories, risk factors of the victims and traumatic outcomes are imperative to analyze and consider among law enforcement, victim advocates, and health care professionals. Considering childhood trauma, family dynamics, and pertinent evidence of victimization can help posit future interventions and treatment techniques for resilient paths to healing and recovery.

#### **Section IV: Program Evaluation: Current Examples of Counter-Trafficking and Treatment Programs**

Commercial sexual exploitation (CSE) is a pervasive epidemic that is deeply concerning and cause for alarm in all communities throughout the United States and globally. However, little



research, prevention initiatives, and treatment programs have been or are currently being developed and evaluated to help ease these circumstances.

There are extensive challenges to interrupting, identifying, treating, and helping victims exit sex trafficking once they are immersed in that life. Multiple barriers exist to connecting and developing trust with sex-trafficked juveniles who have had little to no stability, genuine caring, or feelings of safety in their entire young lives. Overall, these victims do not trust law enforcement, social workers, advocates, or health care professionals who try to help them until they feel a secure connection with them and stay in one place long enough for them to find a reprieve from their circumstances. Like DV victims, it often takes repeated attempts for that trust to be preserved within the trafficking victims to heed the offered resources and find the courage to exit trafficking altogether.

### **"My Life My Choice" Program**

The My Life, My Choice (MLMC) program originated in Boston, MA, in 2002. It was created by the Justice Resource Institute, a nonprofit organization focusing on battling CSE by empowering survivors, providing education and advocacy, and promoting prevention results. This program's main goal is to help prevent juveniles thought to be at distinctive risk from being lured into CSE and ultimately abused. This prevention approach aims at certain people at elevated danger for a CSE outcome instead of the entire population and is a secondary prevention. The creators of MLMC developed classes built on ten sessions called a group that helps educate female juveniles identified as a distinctive risk of CSE on strategies to understand and avert the enlistment strategies of traffickers. The authors of the MLMC course are a CSE survivor and a social worker, which they pulled from the Health Belief Model, along with the voices of other

CSE survivors about their sensed susceptibilities, their routes leading into and out of CSE, and the factors that helped them finally exit the sex trafficking life (Rothman et al., 2021).

The victims who partake in the MLMC groups get valuable findings intended to modify their wisdom about the sex trafficking life and recognize the perpetrators who abuse them, adjust their stances about this underworld operation, concede hurdles to achieving modifications in their actions and security highlighted shifts, such as finding different friends. The participants are made mindful of the ways using substances, and various risky elements are correlated to CSE while encouraged to acquire media educational proficiency and experience in training created to establish self-esteem and individual empowerment, construct paths to resilience, and evaluate themselves and their exposures for being exploited. Survivors are inspired to grow as peer mentors and share their own experiences with others who are at distinctive risk of being lured into sex trafficking. Besides the classes and experiences, the victims continue writing in journals, where they write their thoughts about their own lives and their ongoing learning process of CSE. The journal is shared with their leader and given aimed guidance while embodying the lessons learned and motivates an individual pathway for honest communication expressing any potential safety dangers or detrimental actions (Rothman et al., 2021).

An observable element of the MLMC program is that educated survivors who have experienced CSE are encapsulated into assisting the groups. It has been demonstrated that education with relevant peers and mentors within these distinctive risk groups, especially those needing favorable adult role figures, often navigates to approving outcomes, encompassing good social, educational, and health-focused actions. These enhanced elements also include elevated mental health, an awareness of cultural connectedness, fewer behavioral issues, and lowered social concerns. The MLMC program tightly regulates that all educated survivors who help with

mentorship and act as role models must be free from trafficking for at least five years. This is because a precarious facilitator and mentor, or one whom the juveniles befriend and then goes back to a dangerous life, may leave the youth enduring grief, feeling backstabbed and disenchanted. MLMC has enabled and educated facilitators in over thirty states and parts of Canada to help deliver MLMC prevention groups, and groups have also launched in residential group homes, youth detention centers, community nonprofits, CPS, and local schools (Rothman et al., 2021).

The evaluation and research study on MLMC was created to thoroughly examine longitudinal fluctuations in awareness, stances, and actions that might be correlated to the juveniles' involvement in the MLMC prevention group activities and experiences (Rothman et al., 2021).

The juveniles that partook in the MLMC prevention groups substantiated fluctuations in their awareness, stances, and actions from the beginning of the program through the three-month course. Additionally, these fluctuations remained constant for more than three months after the groups stopped. The most monumental outcome was that self-described sexually definitive occurrences were decreased by half over a durational time, and abuse during dating also decreased. The participants gained more trust in law enforcement throughout the prevention program and remained bolstered. They also felt encouraged to share with friends the helping resources they acquired throughout the program and felt emboldened to ultimately help a friend in CSE. The juveniles gained a feeling of management of the situations in their lives, which was enhanced with an elevated positivity. Unfortunately, most substance usage issues were not increased or decreased throughout the program, even with the educational awareness of these pitfalls (Rothman et al., 2021).

The MLMC prevention program is promising because it is implemented without costly technology or curriculum and is straightforward enough to be established in various situations. At the same time, the staff can be gathered and taught to accelerate the MLMC groups from diverse backgrounds. This program is one of the few multiple meetings specific to females, led by CSE survivors, and engaged in secondary prevention currently operating in the United States. Furthermore, one of the most fundamentally significant elements of this program is that it is facilitated partly by a survivor of child sexual exploitation. This particular element had a meaningful impact on the program participants because they felt they were taught by an individual who truly comprehended their concerns, the issues endured, and the consequences of the tough choices they were forced to make in becoming or finding safety. Additionally, encompassing the voices of survivors from a variety of racial and ethnic backgrounds denotes that this program is not written and designed for a culturally parallel group but can be utilized in a broad set of circumstances of youth of many colors, gender-identified and sexually oriented without needing adaptation (Rothman et al., 2021).

Lastly, research indicates that therapists with personal experiences in CSE who share with the participants enrich their relationships. Within the MLMC program study, it was discovered and maintained that the juveniles felt their teachers and mentors were adaptable, truthful, gracious, kind, and worthy of their trust because of their shared experiences. These gateway attributions facilitate thriving therapy and instructional collaboration (Rothman et al., 2021).

### **Love146 Program**

In 2002, Love 146, a worldwide organization that fights for human rights, was operating to stop sex trafficking and sexual exploitation of children in the United States and overseas.

Love146 devised an extensive Survivor Care Program (SCP) in 2014 to help benefit domestic

minor sex trafficking (DMST) survivors within Connecticut state. The DMST term describes those victims who are US citizens or lawful residents who are trafficked and under 18 years old. The SCP gives survivors various resources encompassing psychoeducation, foster case handling, help with life skills, criminal justice assistance and advocacy, transport services, and crisis direction and encouragement. The resources are characterized in three ways: rapid response services, long-term services, and support services (Williamson et al., 2020).

Most referrals to Love146's SCP are garnered from the Department of Children and Families (DCF) in Connecticut. At the same time, the other juveniles come from outpatient mental health facilities, hospitals, juvenile courts, or an adolescent justice institute, while a few victims are led from child advocacy centers and the police. More than 400 juveniles have obtained vital resource services through Love146 SCP since December 2018 (Williamson et al., 2020).

Love146 SCP provides characterized resources and services in three ways: rapid response, long-term, and support services.

The first of those resources and services is the rapid response services, a single-use, hour-long intervention organized for every juvenile referred to the program. They give the adolescent basic information, safety measures, and pertinent and immediate resources. Every juvenile gets a backpack loaded with items that experts have deemed significant for this vulnerable group. These items are hygiene articles, a writing journal, an activity book, condoms, a stuffed animal, a phone that can only call 911, and an extensive list of hotline numbers. Love146 can also help establish safety planning for the victims and their families (Williamson et al., 2020).

The results of these rapid response services show that 95% of the juveniles learned unknown information from this resource and can explain what that was. Nearly 87% say they will take particular actions that they learned to help better their security. After the rapid response services,

the youth fulfill a Rapid Response Summary Form that outlines what was spoken of, any required disclosures to be made to the DCF, and guidance for desired follow-up privileges (Williamson et al., 2020).

The second characteristic of resources and services is the long-term services, which may be requested after the rapid response service intervention. This rapid response can be given to a maximum of 30 youths at a time, which significantly limits the ability of Love146 to provide much-needed services for those requesting it. Due to the overwhelming need, the advocates have to prioritize demand by longevity, harshness, how victimization has occurred, the other providers assisting the victim, and how committed they were during the rapid response services process. These long-term services are delivered by licensed social workers with master's degrees and are organized by specific care designs. These care designs distinguish definable goals and ambitions centered on safety, mental health, well-being, asset progression, and motivations for maximum involvement (Williamson et al., 2020).

The long-term services consist of 3-4 hours weekly for the survivors and their families that Love146 social workers provide. Additionally, the Love146 social workers coordinate MDT meetings to help distinguish support and integrate the services needed for each survivor. The long-term services include individual advocacy, assistance with mental health and bodily security, therapy, criminal justice support, help with school, job and life proficiency, and transportation assistance. These extensive services may be provided for six months and up to two years (Williamson et al., 2020).

The third characteristic of the resources that Love146 provides is support services, which are given every two weeks for about six months while the survivors are relocated to sustained care. These survivors can seek care when needed without regularly incorporated services. Nearly 40%

of survivors who welcomed long-term services and transitioned to sustained care have sought out the resources from the long-term services. Love146 put them into contact with short-term service providers, conditional on their immediate needs (Williamson et al., 2020).

The strengths of Love146 are the ability to provide immediate and necessary medical services within a whole group of needs, especially for youth being sex trafficked. These youth are taken to a pediatric emergency children's department and fully assessed and treated. Love146 also handles non-emergency medical needs and finds trained providers who can work effectively with survivors of DMST, which can often be demanding (Williamson et al., 2020).

Love146 is compassionately aware of the brutality, trauma, and hostility that sex trafficking survivors endure. It is paramount to find and pair these survivors with trauma-informed counselors who have specific experience with DMST and its impacts. Regrettably, the number of counselors trained explicitly in juvenile sex trafficking is sparse and more so in outpatient circumstances. Therefore, if no readily appropriate counselors can be found, Love146 directs the survivors to partner with therapists that are trauma-informed, with evidence-based practices that include Trauma-Focused Cognitive Behavior Therapy ([TF]CBT), Integrated Treatment for Complex Trauma (ITCT), and eye movement desensitization (EMDR). Speaking counseling is not always mandated for everyone, so Love146 finds therapists specializing in nontraditional techniques, such as therapies using art, horses, and music (Williamson et al., 2020).

Lastly, the continuity of care is one of the essential elements of the Love146 program. It requires that the social worker stays with the survivors no matter where they may move within the state. This continuity of care helps to improve contact and fluctuations between the provider and survivor. The social workers also limit revictimization to the survivors by relating pertinent information to any new providers they may encounter (Williamson et al., 2020).

Some challenges that the Love146 program endures are being able to discover appropriate medical and mental health care that is familiar and able to treat survivors of DMST. The providers may not recognize and diagnose their distinctive medical needs if they are unfamiliar with this vulnerable population. Being transient is another challenge that Love146 encounters with survivors of DMST. They may be runaways, move from foster homes, or be held in a secure center for an extended time. Transience may be specifically challenging when dealing with mental health issues, as not showing up for appointments may deem them as not complying with recommended procedures and deny them the help and medicine that they desperately need. Finally, the challenge of race in working with this sex trafficking population. Most survivors are females of color, nearly 75% of them, while most service providers are white. It is paramount that persons of color are carefully sought out to further mirror the very population that they are helping. This issue can also be analyzed and confirmed when speaking of sexual minorities and non-conforming adolescents, who are at elevated risk for exploitation (Williamson et al., 2020).

Love146 has learned some valuable lessons along the way in helping to provide recovery and healing to survivors of sex trafficking. They have discovered that continuity, patience, and non-judgmental confirmation to the survivors are essential. The leaders of Love146 have also learned that the confirmation of DMST victimization must not be a requisite for entering benefits. They have also learned that secondary trauma exists when treating sex-trafficked juveniles. Giving support to staff and devising self-care plans is critical, and they consistently observe all indications of burnout and utilize compelling methods to alleviate them (Williamson et al., 2020).

Finally, Love146 has been engaged and striving to provide a colony reaction and helps to provide services and resources to DMST victims, survivors, and their families. They have created evaluated techniques that negotiate the considerable physical and mental health challenges of



DMST survivors. Love146 has established that the most triumphant reactions are delivering a survivor-concentrated strategy that reacts to the adolescents void of opinion, admiration for their persistence and resilience, and recognition of their traumatic backgrounds (Williamson et al., 2020).

### **Mount Sinai Adolescent Health Center (MSAHC)**

The Mount Sinai Adolescent Health Center (MSAHC), founded in 1968 in New York City, is an extensive healthcare network encompassing biopsychosocial principles, embraces all cultures and religions, and caters to juvenile methodologies. The network benefits adolescents 10-24 years old and their children. MSAHC provided care to over 12,000 juveniles, entailing 186 identified victims of sex trafficking. The population cared for is predominantly African American, with significantly smaller numbers of White, Asian, and Native American. While some are migrants, a majority are severely socioeconomically challenged (98%), most lack insurance (70%), and seventy percent of the population treated describe a past filled with childhood trauma (Diaz et al., 2020).

The MSAHC feels an obligation to help disrupt the profitable and social obstacles to receiving health attention and wholeness for young persons by giving excellent, thorough, private, and no-cost benefits. A primary objective is ensuring community youth stay well, avoid negative consequences, and rebound from harmful ailments. The MSAHC can accomplish those goals by giving care laser-focused on positive adolescent and victim treatment that is excellent, trauma-informed, and incorporating advantages that are cost-free to this population seeking healing. For example, these cost-free resources ensure laboratory work, prescriptions, provisions, and MetroCards for necessary transportation—these valuable resources are provided by governmental insurance plans, subsidies, and community donations (Diaz et al., 2020).

The MSAHC program provides medical benefits and all-encompassing resources and services, such as reproductive health, dental and eye care, health literacy, behavior and mental health, and legal assistance. The clients have extensive access to birth control, pregnancy exams, and resultant pregnancy advocacy. MSAHC offers individualized resources for LGBTQ+ and transgender juveniles, young persons who suffer from eating ailments, are HIV positive, abusers of illegal substances, currently pregnant or have children, and victims of intimate partner violence (IPV) that incorporates human sex trafficking. The program also gives courses on exercise, dance, relaxation, literacy tutoring, and SAT and ACT preparation to help college-bound youth. Even though MSAHC is not explicitly aimed at sex trafficking survivors, it fits perfectly for those juveniles who frequently lack insurance and funds to purchase any health benefits. At the same time, they may not have the privilege of time and adaptability to visit clinics randomly due to their circumstances (Diaz et al., 2020).

At the MSAHC, screening every patient for human trafficking is consistently done during the initial visit, with the providers being fully aware and trained in the elements that put juveniles in greater danger for all types of trafficking. They comprehend the comorbidities that victims encounter and are prepared to manage them immediately. These elevated dangers and comorbidities may involve being homeless, using illegal substances, past sexual abuse, being LGBTQ+, having unfulfilled mental health and substance treatment needs, or producing suicidal ideations (Diaz et al., 2020).

A dominant care mental health modality of treatment is perfect for victims of sex trafficking survivors who are often hesitant to pledge to steady medical meetings with mental health counselors but would visit for a simple medical appointment, which may further lead to a mental health care therapist for a single meeting. Survivors can meet, during a regular medical visit, with

a crisis counselor, have psychotherapy, and receive a psychiatric evaluation when deemed an essential part of their treatment (Diaz et al., 2020).

The MSAHC program evaluation shows that the outcomes of these medical benefits for juveniles are worthwhile, productive, and fully sustainable. The valuable medical program has consistently elevated juveniles' everyday immunizations, sexually transmitted infections (STIs) testing and treatment, and given a same-day approach of beginning contraception when necessary (Diaz et al., 2020).

One of the outstanding capabilities of the MSAHC program is being favorable to juveniles and their needs, with the primary focus on comprehensive healing for the young person facing adversity and trauma. The program has especially excluded obstacles for sex trafficked juvenile victims, especially the necessity for privacy and being independent of being judged, therefore limiting the revictimization of those sex trafficking survivors. The program readily meets adolescents in the position they are in in their lives and tries to involve and retain them to seek and continue all the treatment that is necessary for their healing (Diaz et al., 2020).

An ongoing challenge for the MSAHC program is the financial liability of the young individuals for whom it provides free services. It also tries to maintain no wait lists for the mental health services that are consistently requested. Lastly, the MSAHC gives encompassing resources to every client at each visit; this helps maintain care and limits those chances to help facilitate treatment. This explicitly benefits sex trafficking survivors who exhibit intricate problems, which entail past childhoods of complicated persistent trauma that may never been detected or treated (Diaz et al., 2020).

Valuable teachings that surfaced through the MSAHC program confirm that young people may come to the doctor with urgent medical concerns that may not be their most critical care.

Caregivers and advocates can navigate them through delicate places to gently find out issues and concerns with their mental health, sexuality, and gender. Numerous adolescents share a past filled with family violence, including neglect, bodily and sexual abuse, and being trafficked. Often, young adults feel uncomfortable revealing their ordeals until they are in safe and secure surroundings and with advocates who show compassion and offer no opinions. Their treatment must be trauma-informed, reactive to trauma, and explicit to the trauma examined in an all-encompassing enterprise. Moreover, the necessity of appraising the other concerning elements that these adolescents are encountering, such as lack of food and housing, troubles with law enforcement, and childhood trauma, such as being bullied, abused, and human trafficking, to provide the appropriate assistance and resources. As advocates, it is essential to recognize when working with sex trafficked juveniles to listen to what sort of help they may need and the sort of help they are willing to take. They may warrant support in gaining secure housing, job training, and procurement to sustain successful pathways. Ultimately, there may be numerous attempts to escape a detrimental trafficking relationship, and continuing encouragement is demanded (Diaz et al., 2020).

### **Reclaim13's - 'Cherish House'**

It is well-researched and documented that past childhood experiences that contain sexual abuse are connected to ongoing sexual exploitation, specifically sex trafficking, which produces cyclic means of sexual victimization. The Reclaim13's Cherish House program, developed in the state of Illinois, has made it their sole purpose to finalize the cyclic means of sexual violence and victimization. They produce approaches that give (1) instruction to juveniles about sex trafficking and how they are being lured to it, (2) advocacy and assistance to juveniles that may be in danger

with a Mentor program that connects susceptible adolescents to trauma-informed counselors, and (3) residential treatment for female juveniles that have been sex trafficked (Ma, 2020).

The community residential project, Reclaim13's Cherish House, provides females, 10-17 years old, who have suffered from sexual exploitation and trafficking. Many of the females are sent by law enforcement and medical centers, with the girls usually living at Cherish House for about nine months. The research shows that most of the victims of sexual exploitation and sex trafficking suffer from adverse childhood experiences (ACEs) while rarely receiving identifying care or counseling in their young lives. These experiences frequently indicate that they are coping with childhood trauma while also enduring sexual trafficking and victimization. Their developmental stages during their childhoods were jeopardized within their essential social aspects, feelings, and cognitive operations, and numerous female victims are absent the qualities to thrive in their communities. Therefore, Reclaim13's Cherish House highlights the victim's ongoing learning opportunities and primary life expertise to help reinforce promising progression. The issues of socioeconomic imbalance and being homeless tremendously raise an adolescent's susceptibility to being sexually exploited and trafficked (Ma, 2020).

The Reclaim13's Cherish House is mainly paid for with private funding but also receives stability from the Illinois Department of Children and Family Services. This organization is the primary treatment housing in Illinois that provides explicitly healthy and curative attentiveness to adolescents who are victims of sexual exploitation and trafficking. The foundation of Reclaim13 Cherish House feels that the progression of recovery from being a victim of sexual exploitation and trafficking demands a trauma-informed and victim-focused methodology that accelerates psychological security, belief, and persistence (Ma, 2020).

Reclaim13's Cherish House utilizes a trauma-perceptive and structured approach, which entails the counselor's awareness and significant elements where trauma affects the actions, growth, postures, and opinions while encompassing this wisdom within every phase of the methodology. Comprehending the influence of trauma demands counselors weigh access standards that help provide security for the females while recognizing the essential purpose of supporting the victims in locating an exit route of sex trafficking. The program has learned that when law enforcement rescues juveniles, it is essential that they have a safe housing alternative and further gain insight for the prosecution of their traffickers. Reclaim13's Cherish House encourages a partnership with law enforcement to provide a secure facility for juvenile victims who have been recently rescued at any time, day or night (Ma, 2020).

The program gives counseling for each victim or in groups, proficiency and school classes, and offers a pairing of mentorship. The entirety of the Reclaim13 Cherish House program is laser-focused on the juvenile's rehabilitation and recovery but additionally desires to lower the trauma effects, enhance survivor capabilities, and elevate overall health while incorporating a foundational, sustaining, and empathetic methodology of care. Cherish House employs a multi-disciplinary team (MDT) and is fully prepared to supervise any mental or medical health concern within their Cherish House facility. The MDT creates a comprehensive plan for each female admitted to Cherish House, which lays the pathway for bodily and mental healing, necessary training and education, adapting helpful attitudes, and appropriate advocacy. The counselors are readily trained and provide evidence-based therapeutics to enlist recovery of detrimental happenings of sex trafficking and childhood trauma and devotional injuries that generate susceptibility to becoming revictimized. Within the realm of sex trafficking juveniles and sexual exploitation, it is paramount for counselors, care providers, and advocates to furnish a

comfortable and safe atmosphere for the victims during their treatment; however, this endeavor continues to be difficult (Ma, 2020).

Reclaim13's Cherish House has discovered and is striving to sustain two essential considerations in helping sexually exploited juveniles: collaborative connections and community care. Collaborative connections give the victim a venue to tell their story, and they are only asked to tell it once, limiting the revictimization of sharing it multiple times with many people. Cherish House has a unique intake procedure that permits the disclosure of personal, frightening, and painful details only once. This procedure makes it much easier for the girls brought in to find comfort and peace by having to give those sensitive details of their lives only once. Community care speaks to the ongoing guardianship and care of the Cherish House staff and the survivors who need ongoing support and guidance throughout their everyday lives. A strong and caring community helps proclaim healing. It creates recovery for sustained pathways for these survivors who desire to know they are worthy and loved and can change the trajectory of their lives and those that come after them for the better (Ma, 2020).

### **The Minnesota Runaway Intervention Program**

The Minnesota Runaway Intervention Program (RIP) was created as a 12-month program directed by nurses and concentrates care on the health and well-being of juveniles who have run away from home and have endured sexual exploitation in all its forms. The program started to help Hmong adolescents suffering in 2006; however, now the program gives services and resources to all the Minneapolis and St. Paul areas for juveniles in need. All juveniles aged 12-17 who have been runaways, have experienced sexual violence, and are given their parent's permission to be involved, qualify for the program. All adolescents accepted into the RIP must speak English (Gerwitz O'Brien et al., 2020).

More than 830 juveniles have gone through the RIP between 2006-2018, and starting in 2014, have provided services to primarily females, with an average age of almost 15 years old and varied racial backgrounds. These adolescents experienced elevated ratios of being sexually exploited, sexual violence, IPV, and abuse within their families. Of the juveniles enlisted in RIP, nearly 26% experienced some form of sexual exploitation, leading to heightened mental, bodily, and sexual health requirements that demand extensive care (Gerwitz O'Brien et al., 2020).

The nurse practitioners (NP) preside over the RIP, provide MDTs that give medical care, promote foundational family connections, encourage educational and neighborhood fostering, and help integrate the juveniles with essential resources. RIP has incorporated the methodology of trauma-informed, resilience-focused, and positive youth development viewpoints. The highest goals of RIP are to elevate critical defensive elements within the victims' surroundings, lower the detrimental repercussions of sexual violence, enhance overall health, and cultivate thriving preparatory pathways for juvenile runaways who have endured sexual violence and exploitation (Gerwitz O'Brien et al., 2020).

RIP is a panoramic and encompassing process solely run by NPs, giving individualized care to enrolled juveniles. The RIP program is ingrained within the Midwest Children's Resource Center (MCRC), a child advocacy regimen that gives technical medical assessments and recognizes and provides specialized treatment to those adolescents who have suffered from child abuse. The names of the juveniles of RIP are provided by schools, doctors, police, the courts, CPS, and parents. In the intake process, all adolescents are given an extensive medical screening that involves a physical examination, an investigative forensic interview (FI), a childhood history chronicle, and a risk and security appraisal (Gerwitz O'Brien et al., 2020).



The three fundamental principles of RIP are (1) home and neighborhood NP visitations, (2) specific patient supervision, and (3) a restorative delegation assemblage. The first fundamental principle provides nurse practitioner (NP) visitations that give the victims stability-centered methods that aim to foster health, enhance family connections, join with their schools, establish goals, create self-esteem, and build life proficiency. The NPs begin with weekly visitations for the first three months while gently reducing those visitations to every month during the final six months of RIP. A considerable benefit of RIP and the NP-run program is that the juveniles can receive swift healthcare that does not rely on outside medical providers. The second fundamental principle of RIP concerns the NP's correlating care with families, educational, and juvenile court systems to provide appropriate care and services to the youth in RIP. The highest number of requests from the victims in care at RIP are for specialists in mental health and gender. The third foundational principle is a chosen, restorative delegation assembly managed by a mental health counselor (Gerwitz O'Brien et al., 2020).

RIP was created and is operated by nurses and a highly dedicated and trained MDT. The NP is the pulse of the entire group. The mental health professionals who work with RIP are specially educated in trauma and led by the Minnesota Safe Harbor Network (Gerwitz O'Brien et al., 2020).

RIP assesses the juvenile's body and mind results who enrolled in the program throughout the 12 months with self-procured surveys founded partly on the Minnesota Student Survey. This survey involves demonstrated standards of health actions, relationships with family members and educational systems, and their self-esteem. These outcomes are followed within the completed visitations and include biological assessments and the application of birth control methods. (Gerwitz O'Brien et al., 2020).

Research studies of RIP juvenile outcomes indicate it is a productive medical paragon. The participating adolescents describe lowered pain of their emotions and impacts of trauma, lowered drug and alcohol abuse, and elevated relationships with their families and educational resources during the 12-month endeavor. They have also demonstrated enhanced use of birth control and condoms, shown a remarkable lowering of cases of STIs, and lowered accounts of sexual violence. Collectively, RIP indicates much assurance in reviving healthy progression in the pathways of this incredibly susceptible juvenile group that includes runaways and sexually trafficked and exploited young people (Gerwitz O'Brien et al., 2020).

RIP provides runaways, sexually exploited, and trafficked youth with the necessary resources to help them with their impacts from trauma, nurture recovery, and encourage positive foundational pathways for the future. The program highlights four imperative considerations for the RIP to ensure its sustainable and successful outcomes. First, it is run by nurse practitioners who can readily provide trauma-informed healthcare to the juveniles on site. Second, the RIP endures for over 12 months, giving the adolescents a solid period to receive appropriate treatment and forming confirming bonds with the RIP team. The third important highlight is that RIP utilizes surveys to evaluate their success in the techniques employed and readily observe those pertinent results. Lastly, the positive collaborations between the valuable resource partners in keeping track of the applicable effects of RIP and the growth of the participants have proven invaluable for the program's maintainable success (Gerwitz O'Brien et al., 2020).

### **H.E.A.L.T.H. Clinic of Ottawa**

Providing care and healing for sex trafficking survivors and those in elevated danger of being trafficked is highly challenging because there is a lack of research that reinforces effectual methods of treatment for this vulnerable population. Indeed, techniques have been proven

effective with similar susceptible groups that give a proper launching place. In Ottawa, Canada, in 2017, the initial medical facility that aims to treat those who have experienced human trafficking is explicitly called the Health Care, Education, Advocacy, Linkage for Trauma-Informed Healing (HEALTH) Clinic. H.E.A.L.T.H. is a trauma-informed medical clinic that is mainly intended for adolescents who are presently being trafficked, have endured trafficking, or are in possible danger of sexual abuse, intimidation, or human trafficking. This clinic was created with the voices of survivors, who illustrated averting connection with the medical field because of many worries, which were being revictimized, feeling judged, and ashamed. The facility's methodology portrays a tremendous movement in an approach that medical treatment is offered and administered to crime victims. The current approach in Canada only offered an immediate and emergent reaction to those being trafficked instead of a lengthy, encompassing, and precautionary methodology. On the contrary, the H.E.A.L.T.H. clinic can give substantial and extensive general and precautionary attention to individuals in danger of being, and those who have endured all types of human trafficking (Leach, 2020).

H.E.A.L.T.H. provides comprehensive care to adolescents 13 years old and above. The Ontario Strategy to End Human Trafficking, part of the Ontario Ministry of Children, Community, and Social Services, fully funds it (Leach, 2020).

The H.E.A.L.T.H. program provides many resources and services to adolescent participants. They supply medical examinations and vaccines, evaluate and treat for STIs and Hepatitis C, give general and emergency birth control, and provide hormone regimens for transitioning surgery. For victims that are approved by Ontario's Victim Quick Response Program (VQRP) for specialized requirements, that may include lengthy trauma therapy, removing tattoos, and in-patient drug rehab treatments (Leach, 2020).

The intake approach for participants is regulated by not revictimizing them and repeating the questioning numerous times. Every question during the intake process is explained, and the questions are given specific reasons for them, which gives better understanding and receptivity while also providing a partnership with the advocates. The intake process is extensive and offers plenty of time to have all questions and concerns answered, along with advised permission for treatment. When other caregivers are required, the participants are personally introduced to them to make them more comfortable. Additionally, no insurance is ever needed by the clients because all services are free (Leach, 2020).

H.E.A.L.T.H. gives a healthy, encompassing level of attention that helps defeat any medical care obstacles. This approach is specifically adapted to each participant's phase of trafficking, phase of fluctuation, status, feelings of security, and level of relationship with the trafficker. The unique methodology of H.E.A.L.T.H. treatment plans is the flexibility and fluidity to help retain and encounter the fluctuating demands of survivors. The program is organized to provide survivor-motivated ambitions; thereby, H.E.A.L.T.H. encircles a surrounding of possibly repeating negative behaviors and often predicts the prospect of being re-trafficked as a part of the rehabilitation and healing journey (Leach, 2020).

The H.E.A.L.T.H. clinic is led by nurse practitioners (NPs) who help encourage an all-inclusive approach to medical care for the participants while providing avoidance of harm, therapy, education, and testing. They are aimed at healing the individual and enhancing healthy results.

An individualistic element of the H.E.A.L.T.H. clinic is that trafficking survivors serve as fused partners of the medical crew within a paid peer advocate position. A peer advocate attends

every appointment to help encourage the participants and support them in knowing that the clinic is readily available (Leach, 2020).

The H.E.A.L.T.H. clinic allows for clients to be accepted by observing specific standards, which include victims who are in danger, who are 13 years old and up, and who have endured swapping sex for somewhere to sleep, something to eat, or drugs. The clinic takes victims who are at elevated danger, juveniles with a past of sexual abuse, drug abuse, and mental health issues. They will also help LGBTQ+ and trans adolescents with care. Additionally, juveniles 13 years old and up from any background who have been characterized as trafficking victims or who have experienced the life of being trafficked will be supported by H.E.A.L.T.H. (Leach, 2020).

The H.E.A.L.T.H. clinic has not had a formal evaluation, but the participant observations have been favorable. The clinic has witnessed an elevated number of clients returning for follow-up visits and a sparse number of clients who do not appear for appointments. The H.E.A.L.T.H. clinic has readily had numerous juveniles spreading the word about the facilities and the resources and treatment they acquired (Leach, 2020).

### **Behavioral Health Treatment "Buy-in"**

Juvenile females with extensive backgrounds of commercial sexual exploitation (CSE) often exhibit elevated mental health and substance abuse issues that require assessment and treatment. A study by Barnert et al. (2020) examined twenty-one adolescent girls with backgrounds of CSE and conducted qualitative interviews that inquired into their feelings about behavioral medicine and actions. The adolescents had favorable and unfavorable ideas about their own mental healthcare needs. They utilized substances as a way to deal with their histories of traumas and victimization. The described entrusted connections with medical professionals that enhanced

independence were essential to fostering "buy-in" and, therefore, employing actionable mental health procedures.

Finally, the study proclaimed that ultimately, the dispensing of trauma-informed and trauma-concentrated behavioral healthcare focused on victim and medical professional bonding with collaborative determinations being made that inspire victim empowerment should most definitely be classified and made imperative for treatment (Barnert et al., 2020).

### **Relational-Cultural Theory in Mental Health Treatment**

A fundamental element in the correlation of human sex trafficking is found in the usage of Relational-Cultural Theory (RCT). Relational-cultural theory emphasizes the extremely contra-relational alignments of this basic atrocity to human privilege. It perceives all relationships involved with sex trafficking: the trafficker, victim, and the person paying for sex, and with the world onlookers. This crime is an incredibly brutal and oppressive inequity of our lifetime. Additionally, it is the incarnation of inspectional marginalization that utilizes sexism, the socioeconomic underprivileged, and unrestrained exploitation. Sex trafficking of human beings is paramount to a contra-relationship (Hershberger, 2021).

Contrary to the brutality and exploited nature of sex trafficking, Relational-Cultural Theory proposes that people develop amidst and regarding genuine connections throughout their lifetimes. RCT suggests that genuine connections are the accurate benchmark of evolution and development. The RCT viewpoint gives an understanding of the elements that potentially compel the victims into sex trafficking and the very elements that are potentially impactful in helping survivors heal. More precisely, RCT directs what the genuine connection means, specifically, five fostering impacts. These are an elevated spirit, wisdom, innovativeness, a feeling of value, and a demand for more partnership. RCT exposes how genuine, collaborative kindness and facilitation

can be the characteristics of evolution in nurturing connections for the survivors of sex trafficking and can be a conduit for recovery. Lastly, RCT perceptions of association and disassociation and similar manifestations expose past traumas that could potentially recreate a treacherous part of victimization and the element that describes sex trafficking (Hershberger, 2021).

Law enforcement, advocacy agencies, and mental health care professionals must continue with their due diligence, research, and evaluation of these known and proven programs to help further the strides of rescuing sex-trafficked juveniles from their peril and provide sustainable healing and recovery.

## **Section V: Recommendations**

### **Ideal Components for Program Overview for Treatment of Sex Trafficked Juveniles**

#### ***Identifying the Victims, Properly Assessing the Trauma, and Providing Trauma-Informed and Appropriate Intervention Techniques to Eliminate Revictimization and Resilient Paths to Healing***

The never-ending demand for and the use of victims for sexual gratification has created a cycle of abuse and exploitation that is impossible to overcome. The need for treatment and trauma-informed practices among law enforcement, victim advocates, and healthcare professionals is essential in prompting recovery and eliminating revictimization of the juvenile victims of sex trafficking (U.S. Department of State, 2021). Trauma-informed interventions throughout the criminal justice system and victim advocacy during the rehabilitative process are critical to ensuring that sex trafficking victims are generating resilient paths to healing (Hargreaves-Cormany & Patterson, 2016).

In an ideal world where sufficient funding, staffing, and logistics are of little concern, and after reading about the challenges and successes of some of the current programs out there, taking bits

and pieces from each program that benefits the sex-trafficked juveniles the most seems highly sensible. The recommendations that come from the review of these anticipated and successful programs seem to be the most beneficial and effective ways to help provide treatment and trauma-informed advocacy that ensures juvenile sex trafficking victims can produce maximum and resilient trajectories to recovery (Hargreaves-Cormany & Patterson, 2016).

### *Identifying the Victims*

The stigma and responsibility of successfully identifying juvenile sex trafficking victims presently rests on the shoulders of law enforcement, healthcare officials, and victim advocates who serve these adolescents. The correct confirmation of domestic minor sex trafficking victims (DMST) and the subsequent allocation of appropriate resources and services required may be hindered by ordinary myths and a genuine understanding of the correct facts correlated to human sex trafficking. Therefore, this failure highlights the importance of being accurate in properly asking the victims critical questions and assessing the situation to ensure the juveniles are handled congruously (Gonzalez-Pons et al., 2020).

To be able to identify sex-trafficked juveniles correctly, it is imperative to dispel myths that are circulating and to learn through appropriate training all that encompasses this extraordinary challenge. Necessary training that focuses explicitly on the correct legal definitions of domestic sex trafficking and distinctive identification of the victims involved is essential in providing the resources and services demanded by the victims for a full recovery. Eliminating the barriers of misidentifying sex trafficking victims will help capture more victims from their ongoing trauma and this detrimental lifestyle. The continuing training for law enforcement, healthcare professionals, and family advocates should also enfold DMST survivors to help guarantee that



trauma-informed techniques are consistently achieved, and authentic healing ideology is attained (Gonzalez-Pons et al., 2020).

### *Properly Assessing the Trauma*

It has been well documented that sex-trafficked juveniles tend to experience a cornucopia of detrimental psychological and physical impacts that can prove to be devastating and sometimes challenging to determine.

Physical impacts may cause extreme traumatic damage from sexual and physical attacks that often lead to ongoing medical conditions (Albright et al., 2020).

The psychological exploits that sex-trafficked juveniles endure are many and often involve coercion, dangers aimed at family members, falsehoods, various extortion schemes, being secluded, and mandated reliance (Interiano-Shiverdecker et al., 2024).

The psychological and mental health impacts can also produce depression, suicidal ideations, and suicide attempts, suffering from anxiety, difficulty managing anger, dissociative disorders, PTSD, and numerous other comorbid disorders associated with experiencing severe trauma (Albright et al., 2020). These youth may develop substance abuse issues and alcohol dependency along with eating disorders due to their bondage. Ultimately, these traumatic experiences of exploitation have long-lasting impacts that continue affecting the victim's interpersonal relationships and possibly producing an intergenerational cycle of victimization (Chon, 2021).

Many sex-trafficked juveniles have encountered significant and complicated trauma before they are ensnared in the life of sex trafficking, and it only intensifies with more abuse and violence while being further victimized. The prolonged struggles that victims face with trauma and mental health problems often create more barriers for juveniles to abandon their traffickers and exit the lifestyle of sex trafficking. It becomes even more difficult for them to become

involved in appropriate treatment plans, especially drug rehabilitation, counseling regimens, and even learning new job skills. The research study experts are still questioning the field's proper understanding of the extent of the complex mental struggles and trauma associated with juveniles being sex trafficked and the long-term potential outcomes of those experiences (Palines et al., 2020).

Essential programs that can readily identify and adequately assess the sex trafficked juvenile's traumatic childhood and abuse are better able to calculate the resource plans appropriate and most effective for their recovery.

***Providing Trauma-Informed and Appropriate Interventions and Treatment Techniques to Eliminate Revictimization and Resilient Paths to Healing***

The counselors who aim to assist sex trafficking victims are required to recognize and assess the various impacts of trauma. These victims may also necessitate recognizing the indicators of sex trafficking, these endangered groups, and the techniques that sex trafficker offenders utilize to capture them into the life of sex trafficking (Interiano-Shiverdecker et al., 2024).

Expansive research has repeatedly insisted that counseling for sex-trafficked juveniles can assist in a modification that often extends to more fulfilling and wholesome lives. Counseling concentrated on shifting unadjusted neural ways that evolved from childhood trauma and innate entrenchment can accompany positive results with numerous sex-trafficked juvenile victims. The promising studies also promote an integrative model embodying demonstrable approved regimens, including Trauma-Focused Cognitive Behavioral Therapy ([TF]-CBT). The experts endorse implementing teaching life skills, partaking in counseling groups, addressing goals that concentrate on elements of attachment, and techniques that focus on adapting healthy actions and partnerships that will boost survivors healing progress (Hargreaves-Cormany & Patterson, 2016).

The conceptual model, using the behavioral treatment engagement approach, is a current and effective technique that employs the coordination of sex-trafficked juvenile girls to attain engagement and connection with behavioral health treatment adequately. These victims must have persistence in the care given within comfortable, adaptable, and open settings. Adaptable care is essential because CSE may command transitoriness and incorporate irregular agendas. The capability to promote and develop trust and "buy-in" is critical for care providers to achieve and lends to a unique understanding and cooperation. Properly explaining care plans and treatment options is crucial for the victims, which ultimately gives them empowerment to handle their bodies and decisions while providing them with choices to make up their minds and have control over their lives. The relationships of trust between care providers and the CSE victims are an influential part of the healing process while ultimately providing them the capability to feel strong enough to finally leave the CSE situation (Barnert et al., 2020).

Studies have proven that therapists who work with sex-trafficked juveniles should fully recognize the progression of healing, manage the phases of fluctuation, and create a secure and entrusting partnership for recovery possibilities. The awareness of sex trafficking victims' lack of believing in others was fundamental in helping them to process that ability. Additionally, experts foundationally understand the magnitude of trauma-informed strategies to help lower experiences of revictimizing the survivors. It is also imperative that therapists continue to grow in their abilities to help assess security and safety plans, help victims progress through their traumatic experiences, and facilitate the survivors to recreate their individuality and self-identity (Interiano-Shiverdecker et al., 2024).

It is entirely crucial when helping sex trafficking juveniles to provide essential needs and obligations, such as a secure housing situation, nourishment, and clothing. It is almost impossible

for a victim not equipped with these fundamental items to flourish in counseling, treatment, and emotional management (Interiano-Shiverdecker et al., 2024).

Many intervening elements that sex trafficked juveniles experience may be thwarted by encountering law enforcement or possibly a family advocate, in which a friendship may gradually be established as a healthy and safe base camp away from the sex trafficking life. This step is critical in the victims deciding to finally leave trafficking and start on their healing path to recovery. Studies have shown the immense importance of law enforcement or a victim advocate during a chance interaction. They may be the first kind and positive adult with a secure and healthy base that a juvenile has ever encountered. This proves the critical building of trust that police, advocates, and healthcare professionals chose to build with victims/survivors was monumental in assisting in the recovery and their ultimate choice to exit the situation and to bring their sex trafficked juvenile offenders to justice (Hargreaves-Cormany & Patterson, 2016).

Lastly, counselors are essential in providing a secure environment, entrusting and compassionate partnership with the victims to help facilitate the revelation of their dangers and ultimately manage their traumatic experiences. Additionally, they must give complete supportive respect, genuineness, and kindness with whatever treatment regimen is selected (Interiano-Shiverdecker et al., 2024).

**Law Enforcement/Victims' Advocates/Healthcare Professionals: *Awareness Education, Identification Practices, Trauma-Informed and Most Effective Techniques, and Treatment Options to Help Pioneer Successful Lifetime Outcomes for Sex Trafficked Juvenile Victims***

*Specialty Courts:* Law enforcement may consider the use of specialty courts for youth impacted by commercial sex trafficking, which has been an effective and successful way to provide treatment, services, and resources to this vulnerable population. Numerous juvenile victims of CSE in the child welfare and criminal justice system are young women of color, boys,

and girls who identify as LGBTQ+ who have been susceptible and endangered of becoming victims of CSE because of their backgrounds and then being revictimized through sex trafficking after being encompassed into the lifestyle. These vulnerable elements for CSE often involve child abuse and neglect, being a runaway, suffering poverty, mental health issues, and substance abuse struggles (Bath et al., 2020).

Due to these fundamental impacts that the juveniles find themselves in, they are arrested and charged with prostitution. However, the Safe Harbor legislation has helped to decriminalize juvenile sex trafficking victims while veering them to appropriate and much-needed services. Still, these victims become entangled within the criminal justice system through drugs, not having valid IDs, stealing, skipping school, and being runaways. Numerous studies show that punitive reactions to these behaviors may unintentionally be retraumatizing these victims while producing adverse outcomes and more elevated mental health issues (Bath et al., 2020).

Creating and utilizing special courts for this vulnerable and traditional population in the U.S. has been a game-changer, and they can better address their needs. The specialty courts have proven to help identify juveniles who are victims of CSE, determining the significance of detouring and decriminalizing the impacts for the victims that help to lower their recidivism, and critical demand to give trauma-informed care that an MDT supervises to mandate appropriate treatment and care for the victims (Bath et al., 2020).

The positive and sustaining results of participation in the specialty courts for sex-trafficked juveniles have been overwhelming. The outcomes have demonstrated an elevated validation of mental health and substance abuse demands and ongoing beneficial treatments. It has lowered child welfare indictments, fewer youth runaways, and criminal exposures to the justice system. The specialty court assimilates an MDT with trauma-informed techniques that give nurturing and

intervening examples for fulfilling the extended treatment demands of juveniles distressingly affected by CSE. These results were shown to be constant for six and twelve-month durations, along with heightened awareness of pertinent mental health issues of the juveniles (Bath et al., 2020).

Multiple barriers exist to connecting and developing trust with sex-trafficked juveniles who have had little to no stability, genuine caring, or feelings of safety in their entire young lives. The following practical and fundamental elements of these quality programs described below have been taken from this paper's research in Section III, Program Evaluation: Current Examples of Counter-Trafficking and Treatment Programs. The most beneficial and successful components are characterized by showcasing various compelling ways from these captivating programs to ensure successful and effective treatment and techniques for sex-trafficked juveniles.

The *"My Life My Choice" Prevention Program* gives promising intervention capabilities to juveniles thought to be at distinctive risk of being lured into CSE and being victimized. The ten classes given to this specialized group give practical strategies to understand and avert the enlistment of traffickers. The adolescents who partake in the MLMC groups get valuable wisdom to help them better recognize the offenders, adjust their stances about sex trafficking, and ultimately find new associates. They are made mindful of substance usage and the risky elements that are connected to CSE while encouraging self-empowerment, constructing paths of resilience, and evaluating their exposures to exploitation. An observable element of the MLMC groups is that educated survivors who have experienced CSE are encapsulated into assisting the groups. It has been demonstrated that education with relevant peers and mentors within these distinctive risk groups often improves social, educational, and health-focused outcomes. They also help with

mental health, awareness of cultural connectedness, and fewer behavioral issues (Rothman et al., 2021).

MLMC helped produce an intervention program that gave elevated fluctuations in the juvenile's awareness, stances, and actions from the beginning of the program through the three-month course and another three months beyond. The CSE occurrences decreased over halfway, and abuse during dating also decreased. There was more trust in law enforcement, and the participants were encouraged to share their knowledge with their friends. Lastly, this prevention program is promising because it is implemented without costly technology or curriculum and is straightforward enough to be readily established in numerous situations. Overall, the program classes were given to distinctive risk juveniles who were given multiple benefits, and this program would be considered a successful accomplishment meant to be replicated (Rothman et al., 2021).

The *Love146 Program* provides youth under the age of 18 who have experienced domestic minor sex trafficking (DMST). The Survivor Care Program (SCP) gives victims various resources encompassing psychoeducation, foster case handling, help with life skills, criminal justice assistance and advocacy, transport services, and crisis direction and encouragement. The services are characterized in three primary ways, rapid response, long-term, and support services (Williamson et al., 2020).

These services are essential and single use under the rapid response intervention to long-term and sustaining resources in long-term services to intermittent services provided every two weeks, for support services, depending on the juvenile's needs and level of care and treatment demanded (Williamson et al., 2020).

A strength of Love146 is the ability to provide immediate and necessary medical services within a whole group of needs, especially for youth being sex trafficked. They are taken to pediatric emergency departments (EDs) and are fully assessed and treated. They relate to providers specifically willing and able to work with DMST victims, which can often be demanding (Williamson et al., 2020).

Love146 provides continuity of care, an essential element of their program. The social worker must stay with the survivor no matter where they move within the state. This recurrent contact improves connection and fluctuation between healthcare providers and survivors while limiting revictimization to the survivors by relating pertinent information to any new providers they may have to encounter (Williamson et al., 2020).

Finally, Love146 has created evaluated techniques that negotiate the considerable physical and mental challenges of DMST survivors. The most beneficial and triumphant reactions to Love146 are delivering a survivor-concentrated strategy that reacts to the adolescents void of opinion, admiration for their persistence and resilience, and recognition of their traumatic backgrounds (Williamson et al., 2020).

The *Mount Sinai Adolescent Health Center (MSAHC)* is an extensive healthcare network encompassing biopsychosocial principles. It caters to juvenile methodologies and benefits adolescents 10-24 years old who are severely socioeconomically challenged, lack health insurance, and have a past filled with childhood trauma (Diaz et al., 2020).

The primary objective of MSAHC is to ensure community youth stays well, avoids negative consequences, and rebound from harmful ailments. They can accomplish these goals by giving care focused on positive adolescent and victim treatment that is excellently trauma-informed and incorporating advantages that are cost-free to this population seeking healing (Diaz et al., 2020).



At the MSAHC, screening every patient for human sex trafficking is consistently done during the initial patient visit, with the providers being fully aware and trained in the elements that put juveniles in more significant danger of being trafficked. They comprehend the comorbidities that victims encounter and are prepared to manage them immediately, which involve being homeless, using illegal substances, past sexual abuse, being LGBTQ+, having unfulfilled mental health and substance treatment needs, and producing suicidal ideations (Diaz et al., 2020).

A dominant care mental health modality of treatment is perfect for victims of sex trafficking survivors who are often hesitant to pledge to steady medical meetings with mental health counselors but would visit for a simple medical appointment, which may further lead to a mental health care therapist for a single meeting. Another outstanding focus is on the young person facing adversity and trauma. The MSAHC has especially excluded obstacles for sex trafficked juvenile victims, especially the necessity for privacy and being independent of being judged, therefore limiting the revictimization of those sex trafficking survivors. The program readily meets adolescents in the position they are in their lives and tries to involve and retain them to seek and continue with all the treatment that is necessary for their healing (Diaz et al., 2020).

*Reclaim13's - Cherish House* is an instrumental and well-researched facility that benefits adolescents who have past childhood experiences that contain sexual abuse connected to sexual exploitation, specifically sex trafficking, which often produces cyclic means of sexual victimization. The approach they use is to give (1) instruction to juveniles about sex trafficking and how they are being lured to it, (2) advocacy and assistance to juveniles that may be in danger with a Mentor program that connects susceptible adolescents to a trauma-informed counselor, and (3) residential treatment for female juveniles that have been sex trafficked. The adolescent girls

served by Reclaim13's - Cherish House are between 10-17 years old and have suffered from sexual exploitation and trafficking (Ma, 2020).

The research shows that most of the victims of sex trafficking suffer from adverse childhood experiences (ACEs) while rarely receiving identifying care or counseling in their young lives to help heal. Their developmental stages during their childhoods, because being sexually victimized, were jeopardized within their essential social aspects, feelings, and cognitive operations, and numerous females are absent qualities to thrive in their communities. Therefore, Cherish House highlights the victims' ongoing learning opportunities and primary life expertise to help reinforce promising progression (Ma, 2020).

Reclaim13 Cherish House utilized a trauma-perceptive and structural approach, which entails the counselor's awareness and significant elements where trauma affects the actions, growth, postures, and opinions while encompassing this wisdom within every phase of the treatment methodology. It is essential that when law enforcement rescues the youth, they have a safe housing alternative and further gain insight for the prosecution of their traffickers (Ma, 2020).

As other programs have proclaimed, Reclaim13 - Cherish House also follows the crucial protocol of having victims only tell their stories once during their unique intake process, thus limiting the revictimization of sharing disclosure of personal, frightening, and painful details only once, while ensuring the girls comfort and security (Ma, 2020).

*The Minnesota Runaway Intervention Program (RIP)* helps adolescents 12-17 years old who have run away from home and have endured sexual exploitation in all its forms during a twelve-month curriculum directed by nurses that concentrates on their well-being and health. The goals of the RIP have incorporated the methodology of trauma-informed, resilience-focused, and positive youth development viewpoints. They aim to elevate critical defensive elements within the

victim's surroundings, lower the detrimental repercussions of sexual violence, and enhance overall health while cultivating thriving preparatory pathways for juvenile runaways who have endured sexual violence and exploitation (Gerwitz O'Brien et al., 2020).

Research studies of RIP juvenile outcomes indicate it is a productive medical paragon. The participating adolescents describe lowered pain of their emotions and impacts of trauma, reduced drug and alcohol abuse, and elevated relationships with their families and educational resources during the 12-month endeavor. They have also shown enhanced use of birth control, lowered cases of STIs, and accounts of sexual violence (Gerwitz O'Brien et al., 2020).

The *H.E.A.L.T.H. Clinic of Ottawa* is a program that has been used with other vulnerable groups and has been effectively adapted to juvenile victims of sex trafficking. The program is designed to treat those who have experienced human trafficking, are experiencing, or are in possible danger of sexual abuse and exploitation. The H.E.A.L.T.H. Clinic is an acronym for Health Care, Education, Advocacy, and Linkage for Trauma-Informed Healing Clinic. The clinic was created with the voices of survivors, with the methodology of the facility portraying a tremendous movement in an approach that medical treatment is offered and administered to crime victims (Leach, 2020).

H.E.A.L.T.H. gives a healthy, encompassing level of attention that helps defeat any medical obstacle, and the approach is specifically adapted to each participant's phase of trafficking, phase of fluctuation, status, feelings of security, and level of relationship with their trafficker. It gives the program the flexibility and fluidity to help retain and encounter the fluctuating demands of the survivors. The program is organized to provide survivor-motivated ambitions; thereby, HEALTH encircles a surrounding of possibly repeating negative behaviors and often predicts the prospect of being re-trafficked as a part of the rehabilitation and healing journey (Leach, 2020).

### **Community-Based: Awareness Suggestions**

#### ***Better Identification and Interventions of Sex Trafficked Juvenile Victims***

Due to the frequency of juvenile sex trafficking, the everyday impacts that happen from those outcomes, and the varied counselors in practice throughout neighborhood agencies and, healthcare facilities, educational endeavors, such as universities and elementary through high schools, they must be ready to help sex trafficking victims find appropriate resources. The more training provided to the counselors and all who encounter adolescents, the more awareness they should possess (Interiano-Shiverdecker et al., 2024).

Numerous fundamental elements may occur within the lives of juveniles that can make them susceptible to being trafficked. The characteristics of being a juvenile sex trafficking victim heavily depend on their childhoods, which contain various stressors and vulnerabilities, which may be an amalgamation of biological and environmental components that help to elevate their susceptibility to being enlisted by the traffickers. These components are often monetary strain, the dismantling of their family, the deficiency of emotional advocacy, and the longing for love and security. It may also involve unhealthy family lives, the lack of guardianship attachment, being a runaway, and a childhood filled with trauma, abuse, and neglect (Hargreaves-Cormany & Patterson, 2016).

Research has documented that these juvenile victims of sex trafficking desire degrees of emotional encouragement along which they lack the attachment in their own families and receive from the traffickers. The traffickers' prey upon these victims, and a twisted bond is formed, known as a trauma bond, that gives the victim perilous foundational support that is never received anywhere else in their lives (Hargreaves-Cormany & Patterson, 2016).

To offer interventions to these victims, it is crucial to provide support in families, schools, neighborhoods, and social agencies to counteract these pulls from socially disadvantaged circumstances and furnish stable relationships with adults and positive role models for them. The life course theory incorporates four components: factual and geographic environment, socially engrained, timing, and personal regulation. These components help guide individuals in the acclimation process throughout their lifetime of learning, within their childhood, teenage years, and maturity (Reid, 2012).

Life course theory further highlights the more significant impacts of being swayed by siblings and deviant friends, which pushes a juvenile's life trajectory into criminality. However, experiencing influential features and positive role models can alter a juvenile's life pathway. These may be getting married, maintaining a fulfilling job or profession, and serving in the military (Tibbetts & Hemmens, 2019).

The age-graded theory also follows along these veins, giving three aspects that may lead children to criminality and victimization. The three aspects are for children lacking foundational features, such as giving them stability and providing guardianship. Their family life often lacks school guidance, unconventional families, and little parental supervision. Social capital applies leverage and importance, often modifying criminal inclinations throughout a young person's life, altering the pathway to criminal actions (Reid, 2012).

Giving adolescents the ability to experience nurturing, optimistic, and secure pathways within every aspect of their lives is essential to leading and guiding them away from the life of sex trafficking and becoming victims over and over in their lifetimes. Making neighborhoods safe, prosperous, and law-abiding further helps keep vulnerable juveniles safe. It should become the

critical and fundamental mission of families, neighbors, law enforcement, social agencies, schools, and medical professionals that serve these populations.

Giving young people the tools of education and job skills provides job security that minimizes the appeal of stealing or crimes with financial rewards, and the promise of job security dramatically lowers the attraction of illegal activities in their communities (Chohaney, 2016). Providing young people with the necessary elements both emotionally and physically is also drastically crucial due to the trafficker's ability to seduce and demand adolescents in order to lure them into sex trafficking. According to the routine activities' theory, the three elements- the motivated offender, the appropriate target, and the absence of guardianship- make up the dilemma. When the motivated offenders, or the traffickers, set their sights on domination and restraint over their victims, it is imperative to give young people the understanding and empowerment to overcome those demands. For the appropriate target, juveniles need to realize and know their value while issuing them a moral compass and having them not be susceptible to the temptation of a "better life" or riches. It is also vital to be able to give more guardianship where there is little. While a strong family, siblings, grandparents, and law enforcement can help maneuver the draw away from the victims who should have guidance in their lives, they frequently do not have that security mechanism (Kenyon & Schanz, 2014).

**The Trafficking Victims Protection Act of 2000 (TVPA) through the  
Justice for Victims of Trafficking Act (JVTA) of 2015**

In 2000, Congress passed the Trafficking Victims Protection Act in the initial attack on human trafficking, which created the foundation of the "3 P's" for the government, which include protection, prevention, and prosecution of these inhumane crimes (U.S. Department of Justice, 2023).

Throughout the years, legislation has periodically granted more benefits and provisions to government agencies, protected victims' eligibility, implemented prevention programs, and enforced prosecution. These include the Trafficking Victims Protection Reauthorization Act of 2003, 2005, the Williams Wilberforce Trafficking Victims Protection Reauthorization Act of 2008, 2013, 2015, 2017, the Trafficking Victims Protection Reauthorization Act of 2017, and the Frederick Douglass Trafficking Victims Prevention Act, and most recently, the Protection Reauthorization Act of 2018 (U.S. Department of Justice, 2023).

However, the Justice for Victims of Trafficking Act (JVTA) of 2015 was explicitly implemented and facilitated to enhance the investigations of juvenile sex trafficking and appoint a more significant responsibility on sex trafficking offenders with elevated repercussions. Those include fines that are put into a directed account purposely for sex trafficking victims and survivors that deliver reparations. This account will also give integral victim resources and services while further allowing more effective essential training for those advocates that support sex trafficked juvenile (STJ) victims and bring the offenders to judgment. This law also gave research opportunities that were focused on improving comprehension of the sex-trafficked juveniles and enhancing the techniques that law enforcement utilizes while engaging with STJ survivors and their perpetrators. It also helped evolve and create intensified treatment and deterrence programs that have been examined in this paper for endangered adolescents and sex-trafficked juvenile survivors that have most certainly reduced and averted some harm to susceptible youth (Hargreaves-Cormany & Patterson, 2016).

## **Section VI: Conclusion**

### **Summary**

The tremendous challenges and prevalence of juvenile sex trafficking gravely impact numerous victims and our entire society. There are estimated to be nearly 25 million victims (about the population of Texas) worldwide of endangered adults and children spanning every age, nationality, and surroundings (U. S. Department of State, 2022). There is an urgent request for intervention, trauma-informed practices, and treatment for juvenile sex trafficking victims among law enforcement, victim advocates, and healthcare professionals to prompt recovery and eliminate revictimizing the victims (U.S. Department of State, 2021). Essential awareness, utilizing trauma-concentrated and victim-focused approaches within the criminal justice system and through advocacy during the exiting and rehabilitation process, is critical to ensuring sex-trafficked juvenile victims are creating resilient paths to healing (Hargreaves-Cormany & Patterson, 2016).

The extensive literature review of this paper highlights various correlations between juvenile sex trafficking myths, the challenges of identifying the victims, and the difficulty with delivering services to this endangered population (Gonzalez-Pons et al., 2020). The paper furnishes the cornucopia of detrimental physical and psychological issues of sex-trafficked juveniles that can be devastating and sometimes difficult for caregivers to determine while outlining destructive mental issues that plague these victims. The paper describes various provider challenges with juvenile-justice-involved re-trafficking of the victims and survivors face along their recovery journey (Nichols et al., 2022). It continues to describe the conceptual model that incorporates behavioral health treatment engagement, which is found to be an essential technique for attaining engagement between sex-trafficked juveniles and their behavioral health treatment partners (Barnert et al., 2020). This paper explains the effects of commercial sex exploitation during



adolescence according to a U.S.-based national study of juvenile to adult health effects that are often overwhelming to victims (Barnert et al., 2022). The paper intricately illustrates the immense benefits that specialty courts have demonstrated for youth impacted by commercial sex trafficking and sexual exploitation and intertwined within the criminal justice system (Bath et al., 2020). It also helps explain the numerous characteristics that make up the elements and the impacts of a juvenile sex trafficking survivor (Hargreaves-Cormany & Patterson, 2016) while further describing a typology of offenders that sex trafficked juveniles for monetary gain (Hargreaves-Cormany et al., 2016). Additionally, the paper provides contributing factors that assisted victims in exiting commercial sexual exploitation while hearing directly from the voices of trafficking survivors (Corbett, 2018).

The criminological theoretical framework of this research paper thoroughly describes and correlates the theories of life course theory, age-graded theory of informal social control, and routine activities theory, from the criminal element to endangering sex trafficked juveniles.

The program evaluation of this paper exhibits and portrays multiple beneficial and successful currently operating intervention initiatives, treatment programs, and theories that often help exemplify the lives of sex-trafficked juvenile victims and survivors.

The recommendations portion of this seminar paper explains six current, effective, and sustainable program evaluations that provide excellent examples of counter-trafficking and treatment programs. These include the My Life My Choice program, the Love146 program, the Mount Sinai Adolescent Health Center (MSAHC), Reclaim13's Cherish House, the Minnesota Runaway Intervention Program, and the H.E.A.L.T.H. Clinic of Ottawa. The guidance recommendations additionally provide valuable information about the concept of behavioral

health "buy-in" for beneficial counseling victims and relational-cultural theory as it correlates to the mental health treatment of sex trafficking victims.

Lastly, the research paper's concluding section supplies the recommendations for the ideal components of trauma-informed program overviews with the most effective treatment methodologies and programs available to help provide ardent solutions and beneficial advocacy progressions for the sustainability of juvenile trafficking victims to help generate the consummate and reliant paths to healing and recovery.

### **Outcome**

The ongoing and prominent challenges of human sex trafficking and sexual exploitation have been elevated to pandemic proportions with little reprieve in sight for relieving the impacts and repercussions of these brutal crimes to innocent victims worldwide. The necessity is critical for trauma-informed, patient-focused treatment protocols among law enforcement, victim advocates, and healthcare professionals to accurately identify and correctly assess their basic needs and trauma and provide them with appropriate intervention techniques to eliminate revictimization and administer resilient paths to healing (Hargreaves-Cormany & Patterson, 2016).

Researchers, experts operating in the field, and the voices of the survivors must continue to strive for significant and ardent treatment methods, sustainable programs, and better advocacy solutions. These methods and techniques must commit to unceasing awareness, prevention, intervention, and treatment that are contributing to the most beneficial outcomes for the victims and survivors of juvenile sex trafficking. By ensuring the appropriate attention and trauma-focused care is given, the victimized sex trafficking juveniles may regain the lives that have essentially been taken from them. If law enforcement, victim advocates, and healthcare

professionals are trailblazing for the challenges and demands of sex-trafficked juveniles in our communities, there is significant hope for tomorrow.

### **Future Research**

The consistently elevated numbers of sex trafficking victims in the United States and worldwide have mandated the requirement for further and more diverse research of effective treatments, approaches, and programs. Such sustainable and adaptable methodologies are vital to improving the recovery and healthy lifestyles that are imperative for the victims and survivors of sex trafficking and sexual exploitation. Future research is required to expand the panoramic comprehension of the underlying crime of sex trafficking and better ways to battle the causes and excuses for such deviancy. The current research framework is growing; however, many successful existing programs are often unavailable or are not operating in every city and community where necessitated. The development and pioneering of these urgent preventives, intervening, and treatment programs in communities often demand the keen awareness and comprehension of the issues and impacts of sex trafficking by law enforcement, advocates, medical professionals, politicians, and community members for them to be fully developed and encompassed (Hargreaves-Cormany & Patterson, 2016).

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