

COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN:  
PROTECTION LAWS, INTERVENTIONS, AND  
SERVICES IN MERCED COUNTY

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By  
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CERTIFICATION OF APPROVAL

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## DEDICATION

I would like to dedicate the completion of this project to all the people in my life who have motivated and inspired me to challenge myself; to my patient, caring, ridiculously funny, and supportive husband, Don, and my beautiful and kind daughter, Elaine. They have always supported my personal, professional, and academic ambitions. To my mother Muey, for the strength she has modeled through her journey in the jungles and the refugee camps in Thailand for survival. Upon setting foot into the United States, she has always been my number one motivator. She has always encouraged me to strive for a successful and educated life, even when opportunities are *not* within reach. I also dedicate this work to all the children who have experienced child abuse, the missing, but not forgotten children, and survivors of sex trafficking. I hope they find peace and their perpetrators brought to justice.

## ACKNOWLEDGEMENTS

Thank you Dr. Kilolo Brodie for making the impossible possible; you reminded me that having goals is not easy, but the accomplishments following are far greater than the current challenges. Your optimism and dedication to ensuring I reached my goals is very much appreciated. In addition, I would like to thank my colleague, Grace Navarro, for her availability to answer questions and her emotional support through this project.

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## ABSTRACT

This exploratory, mixed-methods research study explored the effectiveness of protection laws and services for commercially sexually exploited (CSE) children in Merced County. In addition, the study examined the protocols and procedures, preventative approaches from a child welfare services (CWS) agency perspective, and the impact of the Commercial Sexual Exploitation of Children (CSEC) – California S.B. 855 / A.B. 2035. Thirty social workers voluntarily participated in the self-administered Likert scaling questionnaire, which consisted of 13 CSEC related statements and 1 open-ended question regarding desired services. Two social workers were interviewed by this researcher; the interview consisted of 9 open-ended questions regarding the CSEC. A quantitative analysis was conducted for questionnaire responses to statements 1-13. A qualitative analysis was conducted for the questionnaire's open-ended question and social worker interviews. Results indicated a lack of sufficient funding and services in the areas of counseling and shelters for CSE children in Merced County. More services between local community agencies to provide trauma-based counseling, inpatient substance abuse treatment, and immediate and appropriate shelters are needed. Social workers at this CWS agency feel more public awareness and preventative outreach services on the issue and deterrence of CSEC are needed. *Keywords:* commercial sexual exploitation of children, sex traffickers, sex trafficking of children, commercial sex trafficking, human trafficking, child prostitution, child sexual abuse.

## CHAPTER I

### INTRODUCTION

#### **Statement of the Problem**

A commercial sex act is “any sex act on account of which anything of value is given to or received by any person” (Trafficking Victims Protection Act of 2000: Definitions, § 7102.c.4.). Child sex trafficking does not necessarily involve transporting or moving the victim around, and it involves force, fraud, or coercion to perform a sex act in which the individual has not attained 18 years of age. A victim is an individual who is deceased or living and is still trapped in commercial sexual exploitation. Exploitation can be as simple as selling a child to another pimp and or using technology to distribute digital images of sexual abuse for profit (National Center for Missing and Exploited Children, 2010). Commercial sexual exploitation of children (CSEC) is a slavery-like labor of children; it involves “child pornography, child sex tourism, sexual abuse, and enticement of children for sexual acts and statutory rape” (California Health and Human Services California Child Welfare Council CSEC Work Group, n.d., p. 1). Commercial sexual exploitation can cause long-term physical, mental, and medical health issues for survivors. A survivor of commercial sexual exploitation is an individual who has escaped or has been rescued and is no longer exploited by their perpetrator(s).

Furthermore, CSEC is a global issue and “trafficking in persons is often aided by official corruption in countries of origin” (Trafficking Victims Protection Act of

2000, p. 1467). In countries like Thailand, Cambodia, and Austria corrupt officials benefit from the criminal act, which further influences the continuance of this underground market of sex trading children (Department of Justice Office of Public Affairs, 2014). Children as young as 12-years-old are victimized as sex puppets for men. Traffickers often buy children from poor, desperate, or broken families to sell them into prostitution or other forced labors (Trafficking Victims Protection Act of 2000). Men from the United States often travel to foreign countries to solicit sex from minors in brothels; child sex tourism is at a pandemic level in countries like Mexico, the Philippines, Brazil, Thailand, and Peru (Smith, 2016). Some men have access to children under 12-years-old, children they hold authoritative positions over, such as grade school English teachers (Department of Justice Office of Public Affairs, 2014). In most Asian countries like China and Japan, English is taught as a secondary language in grade schools (Jackson, 2013).

Sexual abuse and CSEC serve as commodities for profit; this is becoming more prevalent in the United States. Foster youth, runaways, underprivileged, and international children are at a higher risk of being exploited in America (California Health and Human Services California Child Welfare Council CSEC Work Group, n.d.; National Center for Missing and Exploited Children, 2010). In the United States, California cities with the highest rate of CSEC include San Francisco, Los Angeles, and San Diego. A perpetrator can “earn as much as \$650,000 in a year by exploiting as few as four children” (California Health and Human Services California Child Welfare Council CSEC Work Group, n.d., p. 1). CSEC thrives because of the

“profitability and seemingly never-ending supply of vulnerable children” (Primose, 2012, p. 312).

Sex trafficking has infiltrated Merced County, California. The misconception of sex trafficking and CSEC only occurring in metropolitan or larger cities has blindsided local officials and citizens. On Sixteenth and ‘V’ Street in Merced, California, some of the motels on this strip are utilized more often by “*johns* in their 40s and 50s,” drug addicts, and used as brothels to work CSEC victims (Giwargis, 2015). Many of the victims are from “different cities and states...some are brought to Merced as part of a sex trafficking ring” (Giwargis, 2015, p. 4). Sixteenth and ‘V’ Street lead to the north Highway 99 on-ramp, making it a very popular transit route to move CSEC victims coming from southern California in and out of town (Google Maps, 2016; Morse, 2014).

### **The Trafficking Victims Protection Act of 2000**

With the advancement of technology, perpetrators can easily distribute child pornography within their network to market these under aged children. Cyber sex trafficking and exploitation is a challenge to combat, the evidence is highly coveted, and more criminals are using technology to exploit their victims online and offline with electronic devices (California Department of Justice Office of Attorney General, 2011). Advances in criminal behavior call for modifications in existing laws to protect and serve CSEC victims.

It took decades before advances in technology became available to assist law enforcement in fighting, tracking, and communicating with other interstate and

international law enforcement agencies on interrelated human trafficking crimes. Modern technology allows law enforcement agencies, among global alliances, government agencies, and non-government agencies, to communicate and share data regarding the victims and perpetrators, to intervene, rescue victim(s), arrest, and punish the perpetrators as permissible by law (Department of Justice Office of Public Affairs, 2014). Criminal behavior is always ever evolving (just like technology); such acts include crimes involving human exploitation. The brutality of trafficking persons into the United States led to the creation of The Trafficking Victims Protection Act (TVPA) of 2000. Set forth by the United States, the purpose of this federal law was to establish an effort to protect human rights and combat human trafficking in the United States (Trafficking Victims Protection Act of 2000).

Investing in prevention and protection of human rights from abusive and heinous crimes such as CSEC contributes to the health of our society, and it deters acceptance of adults having sex with children. The TVPA (2000) led to California's 2014 passage of Senate Bill 855 / Assembly Bill 2035, the Commercial Sexual Exploitation of Children law, to prevent and combat sex trafficking of minors (California Health and Human Services Department of Social Services, 2014). Participation in the CSEC Program is optional for California county Child Welfare Services (CWS) agencies. Counties opting to participate are allocated "funds for expenditures related to the costs of implementing the program, prevention and intervention services, and training related to children who are victims and survivors of commercial sexual exploitation" (California Health and Human Services

Department of Social Services, 2014, p. 1). It is unsettling knowing CWS agencies have discretion in participating in the CSEC Program; it creates a rift in the consistency of fighting this transgression and providing justice for commercially sexually exploited victims, survivors, and society at large.

Child welfare services agencies are county-based child protective services (CPS) agencies; CPS social workers investigate different forms of child abuse which include physical, emotional, and sexual abuse. Child welfare services agencies sometimes detain children from families who abuse, neglect, and fail to provide adequate care for their children, at which point the children become dependents of the state. The children are then placed in foster care, pending the parents' or legal guardians' successful completion of Family Reunification services to reunify with the children. During the course of a CPS investigation, CWS agencies must abide by legal mandates and regulations set by the state.

In CPS, investigation referrals of sexual abuse and CSEC require integrated services between multi-agency service providers, such as mental health, law enforcement agencies (sheriffs and city police), and medical clinics (Family Violence Protocol, 2007). Child Protective Service referrals of sexual abuse are commonly reported by medical personnel, personnel in education settings, family members, and friends. These types of referrals typically warrant an *immediate response* (within 24 hours). Investigating social workers must respond with law enforcement, and make contact with the child(ren) and parents or legal guardians of the child(ren). If a child discloses sexual abuse, the social worker stops the investigation from a CPS stance

and law enforcement resumes the interview from a criminal investigation standpoint (Family Violence Protocol, 2007). The CPS referral at this point becomes a criminal investigation, and forensic evidence has to be collected by law enforcement. Sometimes the child(ren) may be detained and placed in foster care for their protection (Family Violence Protocol, 2007).

Investigation and intervention by child welfare agencies is often more difficult in CSEC cases than in other reported child abuse cases. Referrals for commercially sexually exploited children investigations differ because the victims and survivors are sometimes not a resident of the county, state, or country due to the explicit nature of trafficking by their perpetrators. Child victims of CSE may be kidnapped or lured by strangers; some children are prostituted by their family members and guardians. Also, children trafficked from out of county or state present a challenge for CWS agencies to locate relatives for family-relative foster placements.

Out of county and interstate investigations require more effort, time, and coordination between CWS and law enforcement agencies. Establishing jurisdiction and locating family and relatives to offer (if appropriate) Family Reunification (FR) services is a challenge. Child welfare services may initiate a CPS investigation against the family of origin, to explore why the victim is not in the care of his or her parents or guardians, but instead is a victim of CSE. Commercially sexually exploited children who have been coerced to be under the influence of drugs may have substance dependency, and removing them from the CSE situation may lead to potential shock withdrawals. Furthermore, commercially sexually exploited children

may have been exposed to diseases during their detainment by their perpetrators, and may have existing untreated medical (physical and psychological) conditions.

### **Statement of Purpose**

There are many laws in place to protect human rights and children. Some laws are efficient, some could use ratifications, and some have yet to be developed. The purpose of this exploratory study is to examine the effectiveness of the S.B. 855 / A.B. 2035 CSEC law in Merced County. This research study will explore available services in Merced County, desirable services for commercially sexually exploited children, prevention approaches from a CWS agency perspective, and how Merced County's CWS Department investigates commercially sexually exploited children referrals. This study was guided by the following research questions: (1) How has the S.B. 855 / A.B. 2035 CSEC law impacted CWS policies and procedures in Merced County, (2) What are the experiences of CWS social workers investigating and working with commercially sexually exploited children?

The Trafficking Victims' Protection Act of 2000 laid the foundation for the United States to combat human trafficking, despite all its horrible disguises (i.e., labor, peonage, and sexual exploitation). By further exploring the CSEC Senate Bill 855, this researcher expects to gain in depth information on its development, purpose, funding allocations, implementation requirements, and exceptions for CWS counties opting to participate in the CSEC Program. Smaller counties like Merced are adversely impacted by global crimes such as CSEC. Further exploration of the causes and impacts of CSEC may provide valuable preventative and practical procedures for

similar CWS counties at risk of this type of affliction on its community and families. Commercially sexually exploited child victims and survivors are often living in fear to survive; they do not trust, nor do they want help to escape their perpetrators or overcome the trauma. It is critical that communities have readily available, accessible, and adequate services for this population (i.e., emergency protective shelter, not a foster home). Survivors of CSE require intensive services and foster home care providers are not trained clinicians, nor can they provide such services in their home to a child placed in their care by a CWS agency. In addition, survivors seeking help from authorities are seeking protection; these services are best rendered in a confidential shelter equipped for survivors of CSE.

This researcher expects that policies and procedures for Merced County's CWS have been developed to effectively investigate and respond to commercially sexually exploited children referrals. This researcher also anticipates that a multi-disciplinary team involving multiple county departments (i.e., law enforcement, mental health, and CWS) has been established to respond to commercially sexually exploited children referrals. Services for commercially sexually exploited children are anticipated to be available in the areas of counseling and non-foster home shelters. Lastly, expectations of community service efforts to educate the public and mandated reporters are being developed.

### **Significance of Study**

At-risk youth are vulnerable to commercial sexual exploitation (CSE) in America, and "as many as 325,000 children in the United States, Canada, and Mexico

are at risk each year for becoming victims of sexual exploitation” (National Center for Missing and Exploited Children, 2010, p. 1). The findings in this study could assist CWS and law enforcement agencies in developing specialized training for field investigators to recognize the signs of CSE, identify potential CSE victims, and become better equipped to interact with commercially sexually exploited children.

Literature suggests the intensity of trauma experienced by sexual exploitation is exponential, due to the mental manipulations by the perpetrator(s); thus, some victims may not see themselves as victims (National Center for Missing and Exploited Children, 2010). This often leads the victims to run away from services and back into the hands of new perpetrators. Furthermore, continued studies of commercially sexually exploited children may lead to new discoveries of more in depth causes in the rise and prevalence of CSEC in the United States.

This study is important to social work practice because social justice is not always sought by the victims. Laws were created to protect and serve victims who cannot and do not protect themselves – due to the intensity of trauma experienced by the sexual exploitation. Results from this study may assist our government in modifying laws. It may also influence other child welfare service agencies to create policies and procedures for investigating and working with commercially sexually exploited children, and influence international agencies to adopt anti-CSEC laws, especially in countries where the TVPA (2000) is not adopted.

## CHAPTER II

### LITERATURE REVIEW

#### **Key Terms**

Human trafficking is referred to as “modern-day slavery,” and is typically known to many Americans as existing only in “third world countries” or metropolitan areas (Hardy, Compton, & McPhatter, 2013, p. 8). It may involve sex and labor trafficking. Commercial sex trafficking does not necessarily require trafficking in persons from another country, it also “occurs within the borders of a country, including the United States” (Trafficking Victims Protection Reauthorization Act of 2005, p. 3558). A sex trafficker or pimp can be a female or a male, and is someone who kidnaps coerces, forces, and sells another individual or their service for monetary or personal gain (Hardy, et al., 2013). Profiting from the trafficking and forced labor of other persons is illegal. Trafficking is punishable by federal and state laws in the United States, and other countries under the United Nations anti-human trafficking laws.

#### **Historical Considerations**

The human trafficking industry is considered to be a very “lucrative” business for exploiters. It is “one of the most profitable illicit activities in the world,” with drugs and illegal gun sales being the top two (Rafferty, 2013, p. 559). Child sex trafficking is no longer just an international crime; it has become a domestic terrorist threat to our country’s future. Despite the current national efforts to address this issue,

the number of children being exploited is increasing—especially females. It is unfortunate that “approximately 50,000 women and children” are trafficked from other countries “into the United States each year,” to supply the demands of perpetrating consumers and traffickers (Trafficking Victims Protection Act of 2000, p. 1466).

The United States government estimates 80% of trafficked victims are women and girls (Trafficking Victims Protection Reauthorization Act of 2005). According to the International Labor Organization (ILO) and United Nations International Children’s Emergency Fund (UNICEF), boys make up about 2% of human trafficking victims, in sex and labor trafficking (Fong & Cardoso, 2010). Studies have shown that 70-90% of female victims of CSE were also victims of child sexual abuse prior to being trafficked (Hardy, et al., 2013). Internationally trafficked victims are predominately from Southeast Asia, Latin America, Eastern Europe and newly independent states (Fong & Cardoso, 2010). In 2004, the Federal Bureau of Investigation identified 14 cities with a prevalence of CSEC. These cities were Atlanta (GA), Chicago (IL), Dallas (TX), Detroit (MI), Las Vegas (CA), Los Angeles (CA), Miami (FL), Minneapolis (MN), New York (NY), San Diego (CA), San Francisco (CA), St. Louis (MO), Tampa (FL), and Washington, D.C. (Fong & Cardoso, 2010).

### **Psychological Impact**

The aversive effects of CSE can result in long-term mental health issues for survivors. Survivors are “28 times more likely to be arrested for prostitution” than

those who have not been commercially sexually exploited (California Health and Human Services California Child Welfare Council CSEC Work Group, n.d., p. 2). Trauma experienced by sexually trafficked children is exponential. The length of trauma a victim experiences can contribute to a negative conditioning that commercial sexual exploitation is a normal lifestyle, leaving them vulnerable to continued subjugation of CSE and abuse (National Center for Missing and Exploited Children, 2010). Commercially sexually exploited child victims and survivors often resort to self-injurious behaviors (i.e., drug use, prostitution, and self-mutilation), and the majority become transients of society.

A *trauma bond* can develop between the exploiter and victim; often times special intervention techniques and services are required to break this type of bond (National Center for Missing and Exploited Children, 2010). *Trauma bond* victims develop an “incredibly intense or important relationship” with their pimp; survivors of CSE may also develop complex post-traumatic stress disorder (PTSD) (National Center for Missing and Exploited Children, 2010, p. 2). If left untreated, survivors of CSE suffering from mental health issues may commit suicide. Survivors who have escaped their trafficker(s) may engage in *sex exchange* (trading sex to survive) for basic necessities. Others may become child predators themselves for another trafficker— contributing to a vicious cycle of sexual exploitation of children (Texeira, 2014). Survivors of CSEC - turned perpetrators are further abused psychologically by CSE when they assist their perpetrators in the recruitment of young boys and girls. The psychological impact of CSE is similar to children who have been sexually

abused by a stranger, family member, or family acquaintance. Furthermore, survivors of CSE develop other severe and complex mental health issues; such as depression, self-harming behavior, insomnia, and drug abuse or dependency (Hardy, et al., 2013).

### **Impact on Children**

According Fong and Cardoso (2008), children who reside near international borders are more at-risk of international sex trafficking than children who reside further in state (i.e., Wyoming or Tennessee). Children are typically lured or kidnapped by traffickers in public venues; such as schools, movie theaters, bus stops, and shopping malls (Fong & Cardoso, 2008; National Center for Missing and Exploited Children, 2010). Additionally, children who lack moral judgment may also lack coping mechanisms, which increases their risk of being trafficked for CSE. Children lacking coping mechanisms may manifest their problems into depression, anxiety, committing crime, and substance abuse instead of seeking treatment. Youth with lower social control, disadvantaged homes, poor neighborhoods, and racial inequality are all associated with higher levels of crime, violence, and prison sentences (Steiner, 2009). However, youth who are surrounded with caring relationships develop an increase in resiliency to stress, possess psycho-social competence, are more proactive in problematic situations, have the ability to be autonomous, have critical thinking skills, have the ability to delay gratification, and are more future oriented (McWhirter, McWhirter, McWhirter, & McWhirter, 2013).

The nature and process of recruiting children for CSE prevents law enforcement and CWS agencies from actually quantifying the exact number of

children affected by CSE. Traffickers invest a tremendous amount of effort into transporting and hiding the victims to secure their investment, their business for their livelihood (Giwargis, 2015). Interventions by law enforcement, CWS agencies, and the public are viewed as threats towards this investment. Furthermore, the virtual sexual exploitation of children is permanent and detrimental for the exploited child. When a child is sexually abused and exploited online, every time an image is redistributed the child is abused over and over again (Department of Justice Office of Public Affairs, 2014). It is a supply and demand economic system, especially when the demand of child pornography is increasing; it further instigates child sex trafficking (Hardy et al., 2013).

### **Anti-Commercial Trafficking Laws**

In 1995, the United States collaborated with the National Center for Missing and Exploited Children to create a task force to conduct research about CSEC (Fong & Cardoso, 2010). This later led to the development of the Victims of Trafficking and Violence Protection Act or Trafficking Victims Protection Act (TVPA) of 2000. Despite implementation of the TVPA of 2000, women and girls were primary targets for traffickers, especially those “disproportionately affected by poverty, the lack of access to education, chronic unemployment, discrimination, and the lack of economic opportunities in countries of origin” (Trafficking Victims Protection Act of 2000, p. 1466). More research, protection, and services were needed for this population.

During the United Nations’ (2000) *Convention against Transnational Organized Crime to States*, over 148 countries attended. At the end of the convention

121 countries signed the Palermo Protocol of 2000, an international agreement to combat organized crimes against human rights violation and trafficking, especially of women and children, and 80 plus countries signed supplementary protocols (Raymond, 2001). The United States adopted the *Protocol to Prevent, Suppress, and Punish Trafficking in Persons, Especially Women and Children*. The intent was to create “judicial cooperation and communication among countries,” and a transnational recognition that human rights should be recognized and protected (Raymond, 2001, p. 1). Unfortunately, the multilateral treaty was not adopted by all countries (Raymond, 2001; United Nations, 2000).

The TVPA of 2000 has been reauthorized several times since its implementation. Congress reauthorized the Act in 2003, to include the training of law enforcement and members of the judiciary court to address trafficking in persons-related crimes and victims’ service enhancements (Trafficking Victims Protection Reauthorization Act of 2003). Services added included the removal of legal obstacles for victims of human trafficking, access to services (i.e., admission to the United States), and approval of further research to better understand the causes and most effective strategies to combat trafficking (Trafficking Victims Protection Act of 2000: Interagency task force to monitor and combat trafficking; Trafficking Victims Protection Act of 2000: Protection and assistance for victims of trafficking). In 2003, the TVPA was renamed the *Prosecutorial Remedies and Other Tools to End the Exploitation of Children Today Act (PROTECT Act)*. Its reauthorization laid out improvements to expand communication pathways amongst government, public, and

law enforcement agencies to better combat human trafficking. Harsher penalties for trafficking perpetrators were included, such as sentencing enhancements for interstate travels to engage in sexual acts with a juvenile (Trafficking Victims Protection Reauthorization Act of 2000: Strengthening prosecution and punishment of traffickers). In 2005, the definition of *trafficking* was revised to include “trafficking of persons also occurs within the borders of a country,” including the United States (Trafficking Victims Protection Reauthorization Act of 2005, p. 3558).

Moreover, a need to protect and prevent “populations in post-conflict environments and during humanitarian emergencies from being trafficked into sexual or labor exploitation” was established (Trafficking Victims Protection Act of 2000: Prevention of trafficking, § 7104.h.). Most importantly, the United States expanded jurisdiction to prosecute traffickers to all “United States Government contractors and their employees or United States Government subcontractors” abroad (Trafficking Victims Protection Act of 2000: Interagency task force to monitor and combat trafficking, § 7103.n.1.). In 2008, the TVPA fiscal appropriations were approved to further combat trafficking persons. Lastly, in 2013 the law reauthorized the Violence Against Women Act of 1994 (William Wilberforce Trafficking Victims Protection Reauthorization of 2008).

### **Federal Laws**

In 2011, the U.S. Department of Health and Human Services developed the Polaris Project; this project produced a comprehensive assessment tool for agencies providing social services to evaluate and screen individuals for potential CSE (Hardy

et al., 2013). This tool encompassed open-ended questions regarding an individual's ability to leave their situation or job, if they are deprived of any basic human necessities (i.e., food, shelter, and water), and if any of their legal identifications have been taken and kept from them (Hardy et al., 2013). Inadequate services in child welfare services agencies across the nation prompted further research into CSE. As a result of research, new legislative laws have been created at the state levels to mitigate county services for CSEC.

### **State and County Laws**

In 2014, California S.B. 855 established the Commercial Sexual Exploitation of Children Program. The CSEC Program is to be administered by the State Department of Social Services, in order to adequately serve children who have been sexually exploited. The bill also clarified commercially sexually exploited children as dependents under the Child Welfare Dependency Code. California counties have been provided the option to partake in implementing the CSEC Program in their counties by submitting grant proposals. Participating counties are required to “track various data points and report to the California State Legislature with information on (1) the number of children who are sexually exploited; (2) the risk factors associated with the commercial sexual exploitation of children; (3) the types of services required by commercially sexually exploited children, and (4) the barriers to serving CSEC victims” (California Health and Human Services Department of Social Services, 2015, p. 1). Implementation of the CSEC program must include “certain prevention and intervention activities and services to children who are victims or at risk of

becoming victims of commercial sexual exploitation” (Commercial Sexual Exploitation of Children S. 855, 2014, p. 96).

The CWS agency must also develop an interagency protocol to include representatives from specified county agencies and the juvenile court to service commercially sexually exploited children (Commercial Sexual Exploitation of Children S. 855, 2014). Participating CWS county agencies are also required “to contract to provide training for county children’s services workers to identify, intervene, and provide case management services to children who are victims of commercial sexual exploitation, and the training of foster caregivers for the prevention and identification of potential victims, as specified” (Commercial Sexual Exploitation of Children S. 855, 2014, p. 96). Furthermore, the CWS Case Management System (CMS) will be updated for data collection capabilities, concerning children who are commercially sexually exploited. By April 2017, participating CWS agencies are required to report to the California State Legislature information regarding the implementation of the program.

Federal and state laws in essence provide foundational support for counties to implement protocols and procedures. Research results are best achieved at the micro and mezzo levels in communities, to progress towards generalizing services and changes in laws at the macro level. Considering the CSEC law in California was recently established in 2014, there is much research to be conducted in exploring the qualitative and quantitative effectiveness of its intent. This researcher explored the

current impacts and implementation of the CSEC Program at Merced County's Child Welfare Services agency, from a mezzo level research perspective.

CHAPTER III  
METHODOLOGY

**Research Design**

This is an exploratory study with a mixed-methods design. A qualitative analysis of protection laws, services for commercially sexually exploited children in Merced County, prevention approaches from a CWS perspective, and CSEC investigation protocols and procedures were conducted involving the use of triangulation. This researcher submitted a memorandum of understanding (see Appendix A) to the CWS agency social services branch deputy director to request approval for this researcher to conduct the study. Study participants were provided with a consent form (see Appendix B) prior to participating in the study. This exploratory study included in-person interviews (see Appendix C) and self-administered questionnaires (see Appendix D).

The qualitative design of this study permitted this researcher to modify the interview sessions contingent on the interview flow with each individual participant as needed. Interview questions were rephrased or asked out of order to follow participants' responses; the researcher maintained consistency in completing the interviews.

**Sampling Plan**

Purposive sampling of Merced County's CWS agency administrators and social workers working on CSEC related projects was conducted. This sampling

method was selected due to the nature of this exploratory study, convenience and access to the participants at the researcher's employment agency. Child welfare administrators and social workers are knowledgeable of child protective services, their expertise in child abuse investigations and working with commercially sexually exploited children contributes to the validity of this study.

### **Qualitative Interviews with Social Workers**

In-person interviews and distribution of the questionnaires were arranged by this researcher with the CWS agency. A total of five individual participant interviews with social services administrators (i.e., supervisors, program managers, and deputy directors), and administrator-identified CSEC workers were anticipated to be conducted by this researcher at the CWS agency in a reserved conference. The in-person interviews were to assess the perspectives of the experts on CSEC services, the impact of laws and CSEC on CWS responses, and what services these experts believed commercially sexually exploited children may benefit from, but were not available at this time.

### **Qualitative Self-Administered Questionnaires**

Interviews and questionnaires were completed concurrently during the data collection period. Questionnaires were available to participants at the CWS agency reception area, it was only accessible to staff. This researcher intended to collect 50 completed questionnaires from the CWS agency. The purpose of the questionnaire was to assess the sufficiency of current CSEC training for CWS staff, the adequacy of

services for commercially sexually exploited children, and response policies and procedures for the CSEC referrals.

## **Data Collection**

### **Strengths**

In-person interviews were conducted with CWS agency administrators and social workers. In-person interviews reduce the likelihood of respondents declining to participate. It also decreases response time and “don’t knows and no answers;” the interviewer’s presence also allows for questions to be clarified (Rubin & Babbie, 2014, p. 420). In-person interviews are not restricted to specific questions and can be guided or redirected by the researcher in real time. CWS program administrators are no longer *active* responders in the field, thus they do not make face-to-face contact with families involved in CWS or commercially sexually exploited children. The administrators, however, are the governing bodies at a CWS agency who facilitate new policies and procedures for investigating CPS and the CSEC referrals. Social workers make daily face-to-face or telephone contact with families; a social workers’ perspective on CSEC services and investigation protocols would be valid to the study.

In addition, self-administered questionnaires are very feasible and cost-effective. The questionnaire was comprised of 13 Likert scaling statements, and 1 open-ended personal response question. Participants were asked to select their answers from a scale of 0-10, 0 being “strongly disagree” and 10 being “strongly agree.” A questionnaire provides multiple variables to analyze simultaneously (Rubin

& Babbie, 2014). Questionnaires also permit researchers to use both descriptive and inferential statistics to analyze data as applicable.

### **Limitations**

In-person interviews can consume considerable time. In addition, limitations to this study included a restricted generalization to the larger population due to the measurements this researcher utilized; it may not be replicable by independent researchers (Rubin & Babbie, 2014). This research study itself is heavily dependent on the researcher's skills and availability, the study participants, and the volume of collected data makes analysis and interpretation time consuming. The researcher's presence and connection to the CWS agency where the study was conducted affected the participants' willingness to participate in the study. The sample population (social workers and CWS administrators) had limited availability in their schedules to participate; social workers have very busy and unpredictable work schedules due to the nature of their jobs.

### **Instrumentation**

Questions for the interview and self-administered questionnaire were developed by this researcher based on the intent of the research study. This was the first usage of these interview questions, therefore no previous reliability or validity was established for this study. The research questions were appropriate, relevant to, and address the purpose of the study. The questions were divided into the following categories; the impact of the CSEC protection laws in Merced County, services for

commercially sexually exploited children, and how CSEC has affected CWS policies, procedures, and CPS staff.

**Interviews.** In-person interviews at the CWS agency was completed with interview guides, to ensure consistency. Structured interview guides included questions pertaining to multi-agency integrated services for commercially sexually exploited children, the policy and procedures to investigate the CSEC referrals, and mandated reporter and community trainings on CSEC prevention and awareness efforts. The in-person interviews consisted of 9 open-ended questions. In-person interviews took no longer than 1 hour each, and were recorded by this researcher with an Apple iPhone 5s iOS version 9.3.1, utilizing the voice memo application.

**Self-administered questionnaires.** The following was available in the CWS social services reception area: self-administered questionnaires, pre-signed consent forms by the researcher, and a repository box to collect completed questionnaires. Self-administered questionnaires took participants no longer than 15 minutes to complete. Once the questionnaires and consent forms were completed, CWS staff retained the consent form for their records, and submitted their completed questionnaires into the repository box. The repository box was a 13.39 x 8.46 x 7.76 inch wooden chest with lock applicable functions; it was purchased from Hobby Lobby.

This researcher sent an e-mail to all potential participants informing them of the purpose of the study, the participation period, and the instructions for completing the self-administered questionnaires and consent forms. This researcher placed a

reminder on the repository box regarding the questionnaire instructions and participation period. In addition, an e-mail reminder encouraging participation was sent the day before the repository box is collected.

## **Data Analysis**

### **Coding**

Interview responses were analyzed using nominal measurements through coding. Agencies or organizations (i.e., law enforcement or mental health) collaborating with Merced County's CWS agency in response to CSEC are categorized under *Response Agencies*. The collaboration would be an indicator of an existing policy or procedure set forth to provide services to CSEC victims and survivors during or after an investigation. Any knowledge or references of federal, state, and local laws or policies referencing protection or service to children of sex crimes and exploitation by study participants are categorized under *Laws*.

The following services were categorized as *Available Services*, if unavailable it was categorized as *Desirable Services*: (a) counseling (i.e., counseling-1 = diagnosed or undiagnosed mental and emotional disorder; counseling-2 = alcohol and other drugs or substance abuse; counseling-3 = trauma focused therapy), (b) shelter (protective or sex trafficking related shelter), (c) clothing, (d) transportation, (e) medical (i.e., dental and preventative treatments), (f) case management (i.e., U.S. documented and undocumented children), and (g) other services as specified by respondents. Child welfare services staff training related to child sexual abuse and

efforts to educate the community and mandated reporters regarding the CSEC were coded under *Training and Prevention*.

Descriptive statistics analysis was utilized for self-administered questionnaire responses, to analyze the relationship and thematic patterns occurring in participants' responses for each question. The *median response* for questions 1-13 was 5; with a scaling of *strongly disagree* being "0" and *strongly agree* being "10." Participants' *frequency response* for each question was analyzed manually by the researcher. The open-ended question was coded with a "10" if service responses were provided, or a "0" if no services were suggested. The code "10" did not represent a value in terms of service quantity for commercially sexually exploited children; it merely indicated service responses were provided for this question. Service responses (i.e., service type and quality) were further explored in the results and findings section of this study.

## CHAPTER IV

### RESULTS

The purpose of this exploratory study was to examine the effectiveness of current laws combating CSEC, desirable services for commercially sexually exploited children, prevention approaches from a CWS perspective, and how Merced County's CWS Department investigates CSEC referrals. This study was also guided by the following research questions: (1) How has the CSEC law impacted CWS policies and procedures in Merced County; (2) What are the experiences of CWS social workers investigating and working with commercially sexually exploited children?

This chapter explores participants' response frequencies and themes in desired services. The first section addresses responses to the self-administered questionnaire. This includes the following sub-sections: outliers, the most common scaling responses among participants, and the open-ended personal question. The second section of this chapter addresses the child welfare services social worker interviews. These interviews include the following sub-sections: impact of S.B. 855 / A.B. 2035, response and investigation protocols, services (i.e., available services and desired services), and training and prevention efforts.

#### **Self-Administered Questionnaires**

There were a total of 30 participants, but only 26 participants' responses were utilized for the quantitative analysis section of this study (statements 1-13). There were four participants who deviated from the questionnaire response options, so their

responses were not included in the quantitative analysis of the questionnaire results. However, all 30 participants' responses for the open-ended question were utilized for the qualitative analysis section of the questionnaire. Data for self-administered questionnaires were analyzed manually by this researcher, utilizing a Microsoft Excel 2010 program. Participant (P) responses were organized numerically (i.e., P1-P30). The following data were studied: frequency responses for questionnaire statements 1-13, the percentage of participants agreeing or disagreeing with the statements, and the sum of participants providing a response for the open-ended question. Participant responses were converted to percentages, first by analyzing the frequency responses ( $F$ ) for each statement, then analyzing the subtotal of participants ( $n$ ) who provided a response towards the frequency response, and dividing by the total number of participants ( $N$ ) in the study.

### **Outliers**

Four participants' questionnaire responses for statements no. 1-13 were omitted from the quantitative analysis section due to incomplete or invalid responses. The invalid responses included *don't know*, *?*, and one incomplete questionnaire. However, all 30 participants' responses for the open-ended question were included in the qualitative analysis section of the questionnaire.

### **Response Frequencies**

Self-administered questionnaire participants were child welfare social workers, staff from partner agencies stationed at Merced County's CWS agency, CWS college interns, social worker aides, and clerical staff. Participants were

anonymous, over the age of 18, and may have been from all CWS unit (i.e., courts, emergency response, family maintenance, family reunification, voluntary family maintenance, permanency planning, adoptions, and the administrative team). In addition, participants had been employed or stationed at the agency between 5 months to 30 years. Information on gender was not collected.

Seventy-three percent of participants ( $n = 19$ ) agreed they knew the difference between prostitution and CSEC. Fifty percent of participants ( $n = 13$ ) agreed children from impoverished families are more vulnerable and at-risk of commercial sexual exploitation than children who are from middle or upper class families. Only 23% of participants ( $n = 6$ ) agreed the public and mandated reporters are aware and well educated on CSEC prevention in the community. Thirty-four percent of participants disagreed with the statement that, “CSEC is not much of an issue in Merced County” ( $n = 9$ ). Only 26% of participants ( $n = 7$ ) agreed current federal and state laws provide sufficient protection and service to CSEC victims and survivors. Unsurprisingly, only 19% of participants ( $n = 5$ ) agreed CSEC referrals or cases had not impacted their work. Only 23% of participants ( $n = 6$ ) agreed alcohol and substance abuse counseling are available, accessible, and sufficient for commercially sexually exploited children. Of the participants, 23% ( $n = 6$ ) agreed policies and procedures are in place for CWS staff to respond and investigate CSEC referrals. Relative to statement 8 (policies and procedures), 23% of participants ( $n = 6$ ) felt confident they have sufficient training to investigate a CSEC referral, if they had to.

Furthermore, 42% of participants ( $n = 11$ ) disagreed with statement 10, which stated “the majority of commercially sexually exploited children currently receiving services from this agency sought help on their own.” Twenty-three percent of participants ( $n = 6$ ) disagreed with the sufficiency level of the partnership this CWS agency has with law enforcement in investigating CSEC referrals. Of the participants, 26% ( $n = 7$ ) disagreed with the sufficiency level this CWS agency has with Merced County’s Department of Mental Health in providing service to commercially sexually exploited children. Of the participants, 38% ( $n = 10$ ) indicated there is a lack of appropriate shelters for commercially sexually exploited children once they have escaped their perpetrators. Table 1 summarizes these results (see Table 1).

Table 1.

*Self-Administered Questionnaire Responses to the Impact of Commercial Sexual Exploitation of Children in Merced County*

Questionnaire statements	Response frequency	Subtotal of participants agreeing with statements ( $n$ )	Percentage of participants agreeing
1. There is a difference between prostitution and CSEC.	10	19	73
2. Children from impoverished families are more vulnerable and at-risk of CSE.	10	13	50
3. The public and mandated reporters are aware and well educated on CSEC prevention in the community.	5	6	23
4. CSEC is not much of an issue in Merced County.	0	9	34*
5. Current federal and state laws provide sufficient protection and service to CSEC victims and survivors.	2	7	26*
6. CSEC referrals or cases have not	2	5	19*

impacted my work.			
7. Alcohol and substance abuse counseling are available, accessible, and sufficient for CSEC victims.	3	6	23*
8. Policies and procedures are in place for CWS staff to respond to CSEC referrals.	8	6	23
9. I have sufficient training and feel confident if I have to respond to or investigate a CSEC referral.	5	6	23
10. The majority of CSEC currently receiving services from this agency sought help on their own.	0	11	42*
11. The majority of CSEC currently receiving services from this agency sought help on their own.	3	6	23*
12. The partnership with Merced County's Department of Mental Health in providing service to CSEC is sufficient.	2	7	26*
13. There are appropriate and sufficient shelters for CSEC once they've escaped their perpetrators.	0	10	38*
14. Please list below other services you believe Commercially Sexually Exploited Children may benefit from or need that are not available at this time, and explain. If none, put "NONE".	10	11	42

*Note. \* = reverse implication - responses indicated a significant "disagreement" with statement*

**Other desirable services.** In addition, 11 participants responded to the open-ended question, and noted some type of desirable services for commercially sexually exploited children in Merced County. Participants were asked if there were services that are not available at this time that commercially sexually exploited children may benefit from or need. Suggestions of desirable services included inpatient

rehabilitation and detoxification centers for youth, immediate respite shelters for children who have been identified as survivors of CSE, and available and trained clinicians for trauma-bond therapy (see Table 2).

Table 2.

*Desirable Services for Commercially Sexually Exploited Children in Merced County*

Participant 2	Trained service providers in both sex trafficking and exploitation, as well as trauma-informed service providers need to be sensitive to this population and understand the layers of trauma. There needs to be more collaboration among service providers and the community to address this issue and make progress in these victims' lives.
Participant 3	Better placement (shelters) that don't end up being another means of exploitation. More Trauma-Focused Therapy and complex case management. DoWith and WeCan needs to get on board.
Participant 4	In regards to services, a CSEC minor in our system is difficult to place because of the issues and experiences. If a CSEC minor is detained we need to have a place that we can immediately take them, instead of struggling to find a place for them.
Participant 9	Need additional sources such as placements, mental health clinicians, [and] general support.
Participant 13	Services for housing and counseling are needed.
Participant 14	Prevention, outreach services, help centers, and awareness.
Participant 18	There should be [a] safe house where victims can go [for] help, [and] services brought to them during initial few days, prior to long term placement [being] found.
Participant 22	We need shelters, and foster homes willing to work with CSEC minors.
Participant 28	Fast tracked health services and [sexually transmitted infection] (STI) screenings, [and] adequate shelters devoted to CSEC

survivors.

Participant 29	Peer mentors and success models.
Participant 30	There are services available, but it's difficult to find in-patient AOD services for teens—especially CSEC victims; few local placement options, [and] few services that really meet youth where they are.

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### Social Worker Interviews

Interview responses were played back, transcribed, categorized, and analyzed manually by this researcher. Participant responses were categorized under five sections: *Response Agencies*, *Laws*, *Available Services*, *Desirable Services* and *Training and Prevention*. This researcher initially hoped to interview 5 CWS social workers. However, this researcher only interviewed 2 CWS social workers (P1 and P2). During the research study period, CWS social workers' availability conflicted with the researcher's schedule, and potential participants were offsite and out of town in training. Both participants who were interviewed for this part of the study were female social workers, and they had been employed with Merced County Human Services Agency for over 22 months. Both volunteered to participate in this study. Both participants were trained to assist with CSEC referral investigations as needed.

According to P1, with the guidance of a CSEC advocate and expert in Fresno, CA, Merced County submitted a proposal to the State of California for CSEC funding around 2012. The CSEC funding is to be utilized in developing preventative training and services for foster care providers and CWS staff. This participant stated S.B. 855 / A.B. 2035 "has had a significant impact on her workload." The impact is not

necessarily an increase in CSEC referrals or cases, but a challenge in providing appropriate services for CSEC survivors in this county in addition to her existing cases as a child welfare social worker. This participant also stated “services are also available to youth (ages 18-21) who have experienced CSE, due to A.B. 12 legislation.” Participant 2 stated CSEC “is an issue in Merced County.” Participant 2 was aware of the CSEC issue “from word of mouth, from other social workers” who had worked CSEC cases, and from CWS “supervisors.” Participant 2 did not mention any legislations or laws that would affect CWS in regards to CSEC.

### **Response and Investigation Protocols**

Participants were asked the following questions in regards to investigating CSEC referrals: (1) How have federal laws and California S.B. 855 / A.B. 2035 CSEC legislation impacted this agency’s policy and procedures to investigate CSEC in this community (i.e., training and staffing)?, (2) Does your agency have a CSEC response team? If so, please describe who is involved in this team (i.e., social workers, mental health clinicians, law enforcement) and what a CSEC investigation consists of?, and (3) How are the commercially sexually exploited children investigation referrals handled differently from *regular* child protective services allegations of sexual abuse?

Participant 1 stated this agency has “6-7 trained forensic interviewers” for “regular CPS sex abuse referrals;” these interviews are usually conducted at a Multi-Disciplinary Interview Center (MDIC) in Fresno, CA with law enforcement. Participant 1 also stated that the CWS agency “collaborated with local county

agencies to form a CSEC committee in late 2012 to early 2013.” This committee is comprised of administrators from the following departments; probation, mental health, Valley Crisis Center, public health, district attorney’s office, the district attorney’s Victim's Witness program staff, Juvenile Court Judges, and law enforcement from probation and the sheriff’s department. Once the agency received CSEC funding, P1 stated the agency also employed “2 part-time CSEC” staff. The two employees are “survivors” of CSE, and were hired based on their knowledge of the CSEC world and their expertise in how victims are trafficked. However, within the last year the employees left the agency to pursue other professional endeavors.

According to P1, a CSEC investigation screening tool was created, and it is “only utilized by social workers who are not [stationed] at the emergency response (ER) phones.” The ER phones are considered the *hotline* unit; staff stationed in this unit take all incoming CPS referral calls and assign the referrals to an investigating social worker in the Emergency Response unit to investigate allegations of child abuse. Participant 1 stated the differences between CSEC and *regular* CPS sexual abuse is that *regular* CPS sexual abuse “is and are always—well almost always—occurs with someone in the home, and the children are detained from the guardians (caregivers) or parents.”

Participant 2 stated sexual abuse perpetrators are usually “someone the child knows.” In addition, P2 stated there are cases where the parents may or may not be aware of the sexual abuse, and sometimes “the parents *are* the pimps.” Participant 2

described *regular* CPS sexual abuse referrals as usually having “one perpetrator and CSEC [has] more than one perpetrator exploiting the child.”

In addition, Participant 2 indicated that regardless of whether children are trafficked in from another county; a disposition hearing in Merced County is held once a child is detained, and during this hearing the county can request to keep the case to continue the investigation. If a child was trafficked into Merced, the agency will “try to connect with other counties for shelter [services].” This is to protect the survivor from his or her traffickers finding him or her, and to secure his or her safety. During a “regular CPS sexual abuse investigation, if a child is identified as CSEC the CSEC social worker goes out to investigate with the ER social worker, law enforcement, and a Victim’s Witness staff.” If a child is “arrested and identified by law enforcement” as a commercially sexually exploited individual, law enforcement will request a social worker to connect the youth to services.

In cases where the child is trafficked by their family, the child will be detained and placed in foster care. Participant 2 stated the agency has a “specific CSEC social worker” who handles all the CSEC referrals and cases. This participant stated if she was out investigating a sexual abuse referral and she suspects the child may be a victim of CSE this participant will notify her supervisor, especially if she is not comfortable with interviewing the child. In situations like this, the CSEC social worker or a CPS forensics interviewer (i.e., MDIC social worker) will be called out to join the investigation. Participant 2 stated her CPS referrals “usually [lead her to] focus on [*regular* CPS] sexual abuse referrals, not CSEC.” In either case, a joint

response is required between law enforcement and the CWS agency for any referral associated with sexual abuse.

### **Available Services**

The following available services were identified for commercially sexually exploited children in Merced County: counseling-1 (diagnosed or undiagnosed mental health and emotional disorder), counseling-2 (alcohol and other drugs or substance abuse), shelter (foster care or group homes), clothing, transportation (public transit vouchers or social worker driven), medical (dental and physical treatments), case management-1 (U.S. documented children), and other services (i.e., personal care and hygiene kits). Participant 1 stated community partner agencies like DoWith<sup>1</sup> and WeCan<sup>2</sup> would offer appropriate counseling services for children who have experienced CSE. The CWS agency currently contracts with Merced County Department of Mental Health for counseling services. Participant 2 stated she was not sure if there are current mental health clinicians who are specifically trained to provide counseling for commercially sexually exploited children.

In regards to clothing and transportation services, both participants stated the CWS agency has a clothes closet for emergency clothing needs, and bus passes can be issued, or social workers can drive the children to emergency medical exams (i.e.,

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<sup>1</sup> DoWITH (Do Whatever It Takes at Home) is a wraparound program through ASPIRAnet for children ages 12-14 in high level out-of-home placements, to help them return home safely, be self-sufficient to adapt to societal norms, and build appropriate life skills. A child must be referred through the Merced County Placement Council for consideration (Network of Care, 2016).

<sup>2</sup> WeCan is an outpatient Intensive Home Base Service (IHBS) program through ASPIRAnet, services are for youth 0-18 years of age, which includes in-home and counseling services for children and their families. The purpose of IHBS is to enable children with Serious Emotional Disturbance (SED) to live successfully in the least restrictive, more normative environment (Network of Care, 2016).

forensic exams in CPS sexual abuse referrals). In addition, if a child is placed in foster care, the care providers are eligible for stipends and reimbursements for necessary personal items that are purchased for the child. Moreover, children who are detained by CPS are usually eligible for the Medi-Cal Program; this service would cover all medical costs and treatments, including counseling while the child is a dependent of the CWS agency.

In cases involving children who have been trafficked into Merced County, social workers would most likely utilize the "family tree program" to locate relatives. Participant 1 described this as the due diligence in locating the child's relatives in an attempt to reunify the child with his or her family if it is safe and appropriate. Social workers would also utilize the C-IV System [a case management system for the California Work Opportunity Responsibility to Kids (CalWORKs)] recipients to search for the next of kin, and also to make contact with local agencies (i.e., California Department of Child Support) for other relatives (i.e., biological father). If appropriate, and if the family members are legally eligible (i.e., clear a background check without convictions of child abuse or endangerment), the relatives will receive a letter with an opportunity to foster and potentially reunify with the child.

According to both interview participants, available shelters for commercially sexually exploited children at this time are group homes or non-CSEC foster care homes. Once a commercially sexually exploited child is a dependent of the CWS agency, the social worker immediately works on securing placement for the child. In challenging situations, social workers from this CWS agency will contact Fresno

County for available respite homes to temporarily shelter the child until a more permanent placement is secured in Merced County.

### **Desired Services**

Participant 1 stated shelter for commercially sexually exploited children is much needed in Merced County. The available placement options are not appropriate, and each child's maturity level, stage of change, and length and severity of trauma is different. Participant 1 stated "placement homes will be informed if a child is a survivor of CSE, so the care providers can keep a closer eye on the child." It is also very common for foster care providers to fear "recruitment" of their own children or other foster care children in the home when a commercially sexually exploited child is placed. According to Participant 1, "some group homes cater to CSEC recruitment," due to the change process [contemplation stage] of the survivors; "other group homes don't accept CSEC survivors due to fear of recruitment."

Participant 1 stated that "detention in juvenile hall" would be helpful for children who have been arrested for prostitution while the social worker works on securing placement. It would also be a means of protection from their traffickers, and would allow the survivor to "detoxify" safely. Merced County needs inpatient alcohol and other drugs (AOD) and substance abuse rehabilitation clinics for youth; the county currently has centers for adults only. It is common for victims of CSE to be coerced or forced by their traffickers to be under the influence of drugs to *work* the streets, thus leading to a substance abuse addiction.

In addition, medical clinics are often not cooperative in providing medical “detoxification treatment,” according to P1. Shelter for these children is often not immediate, mainly due to various agencies’ and their protocols to screen the child(ren) prior to admitting for services. There have also been situations in which social workers have had to utilize the CWS agency’s Family Visitation Center as a temporary shelter to keep the CSE survivor overnight until a placement was secured. Social workers have had to go as far as renting “out a hotel room for [the child] to shower.” In Fresno, CA, “Molly’s House” (a CSEC specific shelter) allows a child to stay up to “7 days.” This has been utilized by this CWS agency as well. Participant 2 stated she felt the group homes and foster home placements in Merced County “are sufficient” at this time.

Another desired service is complex *trauma bond* therapy, focusing on CSE. Both participants stated CSE children were vulnerable to CSE because they were runaways, foster youth, or victims of early childhood sexual abuse prior to being trafficked. Other factors, such as the length of torture and imprisonment among CSE survivors, qualify these survivors to a “more complex therapy treatment.” Additionally, both participants did not have much experience with undocumented child victims or survivors of CSE. Participant 2 stated she was “not aware of any cases” since her employment at the agency. Last of all, participant 1 expressed some frustration in regards to the challenges she has experienced in attempting to get “everyone” (i.e., law enforcement, mental health, the medical field, and placement providers) to streamline services for CSE children in Merced County.

## **Training and Prevention**

With the assistance and collaboration of “Runaway Girl” in Fresno, CA, this CWS agency provided basic CSEC training for Merced County mandated reporters (i.e., law enforcement, public health, mental health, and some administrators from the educational system), and all of Merced County’s Human Services Agency staff a year and a half ago. Other community agencies, organizations, this CWS agency’s partners (i.e., Court Appointed Special Advocates (CASA), Medical Assisting Regional Occupational Program students, Sorority Clubs, and some local elementary or high school administrators) requested and received basic CSEC training. This CWS agency also had a more advanced training, in which “25 social workers” attended. The training focused on “recognizing the signs and vulnerabilities of youth” susceptible to CSE.

Both interviewed participants were not aware of any community prevention trainings for the public at this time. However, both participants felt some foster care providers and parents just "don't know how to help their kids;" some parents do not “know how to keep them protected from older men, boyfriends, or strangers.” The issues in the home often go even further, in that parents cannot “keep [the youths] home or from running;" parents often mistake their children as being “promiscuous, [or that they] like the gang life." Overall, both participants feel it is important that “mandated reporters or anyone who comes into contact with children” have knowledge and training on how to approach a potential victim of CSE, in order to assist them.

## CHAPTER V

### FINDINGS

Participants in this study were cognizant of the difference between prostitution and commercial sexual exploitation of children. According to CWS social workers, children from impoverished environments are more vulnerable and at-risk of CSE, compared to children from middle and upper class neighborhoods. Results from this study indicate there is a need for more community outreach to provide awareness about CSE, and to educate parents, mandated reporters, and professionals who have contact with children on a daily basis. It also appears that participants believed that existing federal, state, and county laws were not providing sufficient services and protection for commercially sexually exploited children and undocumented children.

The Trafficking Victims' Protection Act (2000) was initially intended to protect against human trafficking, but after its ratifications in 2013 it now protects women and children from sexual exploitation. There is still little protection and service for undocumented children in the United States. In the fall of 2013, the U.S. Department of Health and Human Services placed into care approximately 90,000 undocumented children with alleged relatives and family members in the U.S. while the children were going through "immigration proceedings" (Huetteman, 2016, p. 2). However, the department failed to conduct thorough background checks on the placement homes, and did not provide sufficient monthly home visits to ensure the safety of these children (Huetteman, 2016). In CWS, children are expected to be

visited at least monthly by their assigned social workers. The unfortunate lapse in government care resulted in at least 14 children under the ages of 14 being placed in the care of human traffickers, and additionally 15 other cases showed signs of trafficking (Huetteman, 2016).

Despite enhancements and improvements in laws to combat the CSEC, the State of California does not mandate or qualify all CWS counties to participate in the implementation of a CSEC Program. Merced County applied and qualified for funding to implement the CSEC services. However, even with funding there is a lack of CSEC shelters, trained clinicians, AOD and substance abuse treatment centers for youth, and insufficient non-relative extended family member (NREFM) placement homes for CPS in Merced County. Foster care placement homes are in high demand. CWS agencies are challenged with acquiring appropriate and qualified NREFMs for non-commercially sexually exploited children.

There is a need for more funding in this county to develop and provide appropriate CSEC specific shelters, more trained clinicians in trauma-bond focused therapy for CSE, and in-patient AOD and substance abuse treatment centers for youth. Participants in this study stated they have had to utilize surrounding counties for shelters to temporarily house survivors of CSE. Moreover, social workers have had to stay overnight at the CWS Family Visitation Center with children detained for CPS. Commercially sexually exploited children are a hard to serve population, and group homes fear potential in-house recruitment if a commercially sexually exploited child is placed in the group home.

## **Implications**

Children who have experienced severe trauma do not have the capacity to make moral judgments, to consent in exploiting their bodies. Poverty, domestic violence, and childhood sexual abuses have a propensity to hinder moral judgment in children (Steiner, 2009; McWhirter et al., 2013). These precipitating trials adversely impact the quality of life for children growing up in these environments.

Retrospectively, children who are surrounded with caring relationships develop an increased resiliency to stress (McWhirter et al., 2013). They also possess psycho-social competence, are proactive in problematic situations, have the ability to be autonomous, have critical thinking skills, have the ability to delay gratification, and are future oriented (McWhirter et al., 2013).

The issue and prevalence of CSEC in Merced County is a growing concern, especially to CWS social workers. The need for more CWS social workers to work VFM, FM, and FR programs is ongoing. With the commercial exploitation of children on the rise, additional social workers are needed to investigate referrals of child abuse, CSEC, and the delivery of quality service to children in CPS and foster care providers. Social workers do not have the luxury of conducting research about services for children of CSE in their county; they barely have time to contribute to developing protocols or investigative procedures. Child welfare agencies need a CSEC investigative specific team, but all CWS staff should be trained to confidently respond to a CSEC referral if needed.

Survivors of CSE have different layers of trauma (i.e., childhood sexual abuse, CPS involvement, and CSE torture and imprisonment by their traffickers). Survivors of CSE may relapse to unhealthy behaviors to suppress the underlying issues that led them to victimization, and some may even return to their traffickers. So, in order to successfully treat the CSE trauma, underlying traumas must be treated as well.

### **Social Work Practice and Theory**

Services between community partners should be streamlined as to not prevent or delay the safety, placement into a shelter, and medical treatment for survivors of CSE. Victims and survivors of any trauma require assessment and screening for service eligibility. However, protocols and procedures should be developed in which a survivor is not further traumatized by eligibility processes, especially if multiple agencies are involved to provide service (i.e., law enforcement, CWS, mental health, and medical staff). Insufficiencies or a lack of services in one CWS county should not hinder the ultimate goal of CPS: protecting the safety of children and minimizing the risk of abuse. Collaboration among CWS counties should supersede jurisdictional investigation responsibilities to eliminate delays in investigating CSEC referrals and rescuing the victim(s).

Counseling and immediate housing are essential services. In regards to counseling services, children of CSE would also benefit from treatment similar to patients being treated for PTSD. It is important to keep in mind the survivors' readiness to address their underlying issues during each phase of treatment. Other

appropriate intervention and treatment models include Cognitive Restructuring and Rational-Emotive Behavior Therapy. Cognitive Restructuring and Rational-Emotive Behavior Therapy both focuses on “changing maladaptive beliefs or cognitive patterns” and “faulty thinking [and] correct irrational beliefs to lead healthier, happier, lives” (McWhirter et al., 2013, p. 324-325). Treatment models should apply a socio-ecological framework as well as trauma-based therapeutic approaches. Survivors of CSE struggle with trust and relationship building, especially since their victimization involves psychological manipulations, power and control, and forced sex labor by their traffickers. Treatment would be most effective if applied within a safe and natural environment for the youth, and taking into consideration differences in cultural backgrounds during relationship building exercises (Fong & Cardoso, 2008). This is essential for survivors of CSE, considering their vulnerability for victimization is higher than other children and they have negative worldviews.

Children who have experienced child abuse or foster care placement may blame themselves for what happened, and CSE survivors may feel guilty—even disgusted—with themselves because of what they were forced to do when they were trafficked. Life skills education would be beneficial for commercially sexually exploited children as well. Due to the trauma and length of their captivity by traffickers, survivors of CSE may have been deprived of basic social and living skills; skills they would have otherwise learned in healthy environments. The following services in transitional housing or shelters would assist survivors of CSE to assimilate with societal cultural norms: budgeting, money management, appropriate dress attire,

acceptable social behaviors, and independent living skills (i.e., starting a rental lease, starting a utilities account, cooking, etc.).

Child welfare service agencies need to partner with other county and private agencies providing successful treatment programs for commercially sexually exploited children. It would be ideal to have respite and transitional shelters with beds and sanitary facilities for children detained in CPS; this would allow social workers to find appropriate foster care placements rather than just placing the children with any NREFM placement. Survivors of CSE should not be paraded back into a motel or hotel to shower once they have entered the care of CPS; this is all too common of the trafficking lifestyle they have had to endure.

Temporary placements in NREFM homes are *quick fixes* from a placement perspective; it also has a negative impact on the placement care providers. This may lead to placement care provider burn-outs. Foster care homes share their experiences with their families and friends in the community; if burn-out experiences are the only shared experiences potential NREFM families are less apt to voluntarily open their home for foster care placements. Foster care providers should not have to experience distress due to foster children filtering in and out of their home. In addition, social workers should have investigation partners, like investigative detectives in law enforcement. Social workers should not have to *babysit* children while having to secure appropriate placement and write their court reports. Having a partner would allow the social worker to conduct a more appropriate placement search, provide

quality service, file their court reports, and catch their breath—especially for on-call social workers.

### **Methodological Limitations**

#### **Self-Administered Questionnaires**

There are some limitations in this research study. The questionnaires were available for all CWS staff at Merced County's Social Services Branch in Merced, but not available to out-stationed CWS staff (i.e., Livingston, Los Banos, Merced Main Street office, and other staff stationed at partner agencies). Moreover, participants in the study may have been clerical staff, non-investigating social workers such as partner agencies' staff placed at the CWS agency (i.e., clinical nurses, interns, and Valley Crisis Center staff), social workers who have no direct contact with children (i.e., adult protective services), and recently hired CWS social workers. The self-administered questionnaire did not have a "Don't Know" answer option, thus participants who lack knowledge of CWS services couldn't provide an accurate answer. This reduced the total number of participants in the study. This researcher omitted four participants' questionnaire responses as mentioned earlier in the results section. The participation period was limited to a week, which warranted a small sample size.

#### **Social Worker Interviews**

There were only 2 participants in this section of the study, and both were female social workers. The participants had been employed at the CWS agency for less than 2 years; thus limiting their experience with Merced County's protocols and

procedures, knowledge of community partner agencies, and community services appropriate for children of CPS or CSE. It would have been appropriate to interview at least one administrator and one partner agency service provider, and to extend the participation period to 3 week period. Lastly, several seasoned social workers were out of the office in training, and the CWS agency recently hired new social workers.

### **Future Research**

Commercial sexual exploitation of children is a domestic threat to children across the nation, in any and every neighborhood. Traffickers do not discriminate when there are available and vulnerable children out on the streets or for sale by their families. The most targeted children are those who have suffered some ordeal in their childhood. Further research of survivors' lives prior to their victimization of CSE would provide valuable insight on which aversive childhood experiences are most universal in victims of CSE. Findings from this kind of research would be vital in how and what services are rendered through mental health. In addition, assessing the community's understanding of the CSEC may reveal information that can be "applied to constructing awareness-raising and educational projects to contribute towards prevention of child trafficking in the future" (McIntyre, 2014, p. 46).

Current studies in the United States show that "30-40% of female children and 13% of male children experience sexual abuse," and domestic rates are higher than international rates of sexual abuse (Fong & Cardoso, 2010, p. 313). More information is needed to examine the correlation between poverty and sexual abuse in the United States. Children in impoverished countries, neighborhoods, and families are more

susceptible to child abuse in general, but there is insufficient quantitative data comparing the types of child abuse (i.e., physical, emotional, and sexual) to the increased risk and vulnerability of CSE. Information derived from a study like this would help to improve CWS and CPS protocols, services, child protection laws against child sex trafficking, and enhance punishment laws for perpetrators.

A lack of appropriate shelters and quality NREFM homes for commercially sexually exploited children is cumbersome for CWS agencies and the social workers working the cases. Future studies should focus on exploring what shelters are suitable, and what services survivors of CSEC would benefit from once they are housed. Overall, commercial sexual exploitation of a *child* is a horrendous crime against the inherent freedom of a human being, a desecration of a child's innocence and quality of life, and trafficking has a negative impact on domestic commerce.

In summary, the CSEC law has impacted CWS policies and procedures in Merced County. A CSEC committee was formed to develop screening tools and investigative response protocols, employ new CSEC program support staff and social workers for CSEC responses, and manage allocated funding from the state. Services for youth affected or at-risk of CSE and their perspective care providers are expected to be rendered by this CWS agency, per the CSEC law S.B. 855 / A.B. 2035. In the near future the CWS Case Management System will be updated to collect data pertaining to CSEC. Program implementation results will be reported by the CWS agency to the state by April 2017.

All CWS social workers and other local mandated reporters have received some CSEC response training. Social workers investigating and working with commercially sexually exploited children have faced some challenges with providing adequate and appropriate services, such as lack of shelter placements and counseling. Social workers feel survivors of CSE are in need of more trauma focused therapy, however social workers in CWS are hopeful more services will be developed for commercially sexually exploited children of Merced County.

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## APPENDICES

## APPENDIX A

## MEMORANDUM OF UNDERSTANDING

**CSU, STANISLAUS MSW RESEARCH STUDY  
*MEMORANDUM OF UNDERSTANDING AGREEMENT*****PURPOSE:**

This document will define the agreement between the researcher and Merced County Human Services Agency – located at 2115 W. Wardrobe Ave., Merced, CA 95341. The purpose of this Memorandum of Understanding is to serve as a tool that will guide the research to be conducted by Nai Harrington. Mrs. Harrington is a MSW student at CSU, Stanislaus. Mrs. Harrington’s research will be monitored by her MSW chairperson. Additionally, supervision of this proposed study will be approved by the Institutional Review Board at CSU, Stanislaus.

**SCOPE OF STUDY:**

Commercial Sexual Exploitation of Children (CSEC) is a global and local crime against vulnerable and at-risk children. Traffickers often kidnap, lure, and coerce children into sexual exploitation; perpetrators also buy children from impoverished, desperate, and broken families to sell them into prostitution or other forced labors. Efforts to combat, eliminate, and prevent this horrendous crime against children is progressing with the collaborative efforts of multi-agency integrated services (e.g. law enforcement, mental health, and child welfare services). There are protection laws in place for human rights and children, such as the Trafficking Victims’ Protection Act of 2000 and California’s CSEC S.B. 855 / A.B. 2035. These laws have prompted trainings for a majority of human services workers, social workers, and some government agency workers to be better equipped to identify, approach, prevent, and service commercially sexually exploited children in our community.

The prevalence of commercial sexual exploitation in Merced County prompted the researcher’s interest to study CSEC. This research study will explore available services in Merced County, desirable services for commercially sexually exploited children, prevention approaches from a child welfare services (CWS) agency perspective, and how CWS Department investigates CSEC referrals. This study was guided by the following research questions: 1) How has CSEC impacted CWS policies and procedures in Merced County? 2) What are the experiences of CWS social workers working with commercially sexually exploited children?

**THE AGENCY (MERCED COUNTY HSA) AGREES TO:**

- Allow specified CSU, Stanislaus Master of Social Work student permission to complete interviews of participants (e.g. Social Services Branch supervisors,

program administrators, and social workers): all participants will adhere to this MOU and the CSU, Stanislaus protocol for research and informed consent

- Send correspondence regarding the study to participants, encourage potential participants to participate, and provide the researcher's contact information
- Make provisions for on-site space to conduct interviews as needed
- Allow for questionnaires to be placed in Social Services reception area, and researcher's repository box for participants to submit completed questionnaires
- Make staff aware of the forthcoming research (i.e., announce in meetings, emails, or a memo). The researcher is interested in conducting in-person interviews during the weeks of May 2, 2016 – May 6, 2016. Questionnaires will also be available to participants during that time frame; completion of the interviews and questionnaires is anticipated to be no later than May 6, 2016.
- Add the agency's perspective of the study in the discussion section of the larger written document, if deemed necessary by the agency

**THE RESEARCHER (*Nai Harrington*) AGREES TO:**

- Inform the participants of their role in this study as well as the purpose of the study.
- Present the participants with an informed consent form and obtain their signature before conducting interview (see Attachment A – Consent Form).
- Conduct this research on a voluntary basis with no expectation of payment from Merced County Human Services Agency.
- Safeguard the information received from the research participants and maintain confidential record keeping.
- Provide copies of the research questions and questionnaires to the agency for review prior to commencement of interviews and questionnaires (see Attachments B - Interviews & Attachment C - Questionnaire)
- Submit a copy of the thesis to Merced County Human Services Agency upon completion of the Master's Degree requirements (approval by the Graduate School and committee).
- Offer the agency the option of requesting the researcher to omit *Merced County* from the study and replace the name with *a Central Valley CWS Agency* when the thesis is published
- Ensure no client or CWS staff identifying information will be included in the study and published thesis

**AGREEMENT TO BE SIGNED & DATED BY:**

- Merced County Human Services Agency, Social Services Deputy Director
- Nai Harrington – CSU Stanislaus, MSW Student
- Kilolo Brodie – Thesis Chair

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Nai Harrington, MSW Student

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Kilolo Brodie, CSU Stanislaus Thesis Chair – MSW, Ph.D / Associated Professor

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Laura De Cocker, SSB Deputy Director of Merced County HSA

## APPENDIX B

### INFORMED CONSENT

#### Informed Consent - Attachment A

Dear Participant:

You are being asked to participate in a research project that is being done to fulfill requirements for a Master's Degree in Social Work at CSU, Stanislaus. We hope to learn about the available and desirable services for commercially sexually exploited children in Merced County, prevention approaches from a child welfare services (CWS) agency perspective, and how CWS investigates CSEC referrals. This study was guided by the following research questions: 1) How has CSEC impacted CWS policies and procedures in Merced County? 2) What are the experiences of CWS social workers working with commercially sexually exploited children?

If you decide to volunteer, you will be asked to participate in an individual in-person interview with the researcher or complete a questionnaire. The interview questions will consist of open-ended questions relating to Commercial Sexual Exploitation of Children, and the questionnaire is comprised of Likert scaling questions relating to CSEC as well. In-person interviews will be conducted at your agency between the hours of 7:30 AM and 5:30 PM for your convenience, not to exceed 45 minutes of your time; it is a one-time interview, no monetary compensations will be provided, and the interview will be recorded by the researcher using a hand held voice recorder.

The questionnaires and reply envelopes will be made available at your department's reception area in Merced only. Participants can submit the completed questionnaires by utilizing the blank envelopes and dropping it into the repository box located next to the questionnaires. This researcher will collect the repository box on the close of business day for the agency **on May 6, 2016**. This study hopes to interview 5 social workers and obtain 50 completed questionnaires during the week of **May 2, 2016 – May 6, 2016**. There are no known risks to you for your participation in this study.

It is possible that you will not benefit directly by participating in this study. The information collected will be protected from all inappropriate disclosure under the law. All data will be kept in a secure location. Interview participants will not need to disclose their name, only their job title/classification, and participants completing the questionnaires will omit their names from the questionnaire and envelope before dropping it into the repository box. No one else will have access to the data collection except this researcher.

Your participation is voluntary. Refusal to participate in this study will involve no penalty or loss of benefits. You may withdraw at any time without penalty.

If you agree to participate, please indicate this decision by signing below. If you have any questions about this research project please contact me, **Nai Harrington**, at **(209) 385.3000 ext. 5368** or my faculty sponsor, **Kilolo Brodie, CSU Stanislaus Thesis Chair – MSW, Ph.D / Associated Professor** at **(209) 667-3126** or **kbrodie1@csustan.edu**. If you have any questions regarding your rights and participation as a research subject, please contact the IRB Administrator by phone (209) 667-3493 or email [IRBAdmin@csustan.edu](mailto:IRBAdmin@csustan.edu).

Sincerely,  
**Nai Harrington**  
 Masters of Social Work Student

I have read and understand the information provided above. All of my questions, if any, have been answered to my satisfaction. I consent to take part in this study. I have been given a copy of this form.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (printed) \_\_\_\_\_

Signature of person obtaining consent \_\_\_\_\_ Date \_\_\_\_\_

Printed name of person obtaining consent \_\_\_\_\_

In addition to agreeing to participate, I also consent to having the interview audiotape-recorded.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Name (printed) \_\_\_\_\_

## APPENDIX C

## COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN INTERVIEW

## CSEC Interview - Attachment B

- 1) Has CSEC in Merced County impacted your work? If so, please describe.
- 2) How have federal laws and California S.B. 855 / A.B. 2035 CSEC legislation impacted this agency's policy and procedures to investigate CSEC in this community (e.g., training and staffing)?
- 3) Does your agency have a CSEC Response Team? If so, please describe who is involved in this team (e.g., social workers, mental health clinicians, law enforcement) and what a CSEC investigation consists of?
- 4) How are the commercially sexually exploited children investigation referrals handled differently from *regular* child protective services allegations of sexual abuse?
- 5) What services are available to CSEC, and how are they rendered (e.g., counseling, shelter, legal)?
- 6) Has your agency encountered commercially sexually exploited undocumented children? If so, how are these cases handled (e.g., what services are provided)?
- 7) What types of trainings are available to educate the public and mandated reporters on CSEC awareness and prevention?
- 8) Why did this county opt to participate in the CSEC Program?
- 9) What other services would be beneficial for victims or survivors of commercial sexual exploitation that are not available at this time?

## APPENDIX D

COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN  
QUESTIONNAIRE

## CSEC Self-Administered Questionnaire - Attachment C

**Instructions:** Please select one answer only for each question below.

- 1) There is a difference between prostitution and commercial sexual exploitation of children.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10

- 2) Children from impoverished families are more vulnerable and at-risk of commercial sexual exploitation.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10

- 3) The public and mandated reporters are aware and well educated on CSEC prevention in the community.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10

- 4) CSEC is not much of an issue in Merced County.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10

- 5) Current federal and state laws provide sufficient protection and service to CSEC victims and survivors.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10

- 6) Commercial Sexual Exploitation of Children referrals or cases have not impacted my work.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10

- 7) Alcohol and substance abuse counseling are available, accessible, and sufficient for CSEC victims.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10
1	9
2	8
3	7
4	6
5	5
6	4
7	3
8	2
9	1

- 8) Policies and procedures are in place for Child Welfare Services staff to respond to CSEC referrals.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10
1	9
2	8
3	7
4	6
5	5
6	4
7	3
8	2
9	1

- 9) I have sufficient training and feel confident if I have to respond to or investigate a CSEC referral.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10
1	9
2	8
3	7
4	6
5	5
6	4
7	3
8	2
9	1

- 10) The majority of CSEC currently receiving services from this agency sought help on their own.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10
1	9
2	8
3	7
4	6
5	5
6	4
7	3
8	2
9	1

- 11) The partnership with law enforcement to investigate CSEC referrals is sufficient.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10
1	9
2	8
3	7
4	6
5	5
6	4
7	3
8	2
9	1

- 12) The partnership with Merced County's Department of Mental Health in providing service to CSEC is sufficient.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10
1	9
2	8
3	7
4	6
5	5
6	4
7	3
8	2
9	1

- 13) There are appropriate and sufficient shelters for CSEC once they've escaped their perpetrators.

<u>Strongly Disagree</u>	<u>Strongly Agree</u>
0	10
1	9
2	8
3	7
4	6
5	5
6	4
7	3
8	2
9	1

**Instructions: Please list below other services you believe Commercially Sexually Exploited Children may benefit from or need that are not available at this time, and explain. If none, put "NONE".**

## APPENDIX E

TABLE 1

Table 1.

*Self-Administered Questionnaire Responses to the Impact of Commercial Sexual Exploitation of Children in Merced County*

Questionnaire statements	Response frequency	Subtotal of participants agreeing with statements ( <i>n</i> )	Percentage of participants agreeing
1. There is a difference between prostitution and CSEC.	10	19	73
2. Children from impoverished families are more vulnerable and at-risk of CSE.	10	13	50
3. The public and mandated reporters are aware and well educated on CSEC prevention in the community.	5	6	23
4. CSEC is not much of an issue in Merced County.	0	9	34*
5. Current federal and state laws provide sufficient protection and service to CSEC victims and survivors.	2	7	26*
6. CSEC referrals or cases have not impacted my work.	2	5	19*
7. Alcohol and substance abuse counseling are available, accessible, and sufficient for CSEC victims.	3	6	23*
8. Policies and procedures are in place for CWS staff to respond to CSEC referrals.	8	6	23
9. I have sufficient training and feel confident if I have to respond to or investigate a CSEC referral.	5	6	23
10. The majority of CSEC currently receiving services from this agency sought help on their own.	0	11	42*
11. The majority of CSEC currently receiving services from this agency sought help on their own.	3	6	23*
12. The partnership with Merced County's Department of Mental Health in providing service to CSEC is sufficient.	2	7	26*
13. There are appropriate and sufficient shelters for CSEC once they've escaped their perpetrators.	0	10	38*
14. Please list below other services you believe Commercially Sexually Exploited Children may benefit from or need that are not available at this time, and explain. If none, put "NONE".	10	11	42

*Note.* \* = reverse implication - responses indicated a significant "disagreement" with statement

## APPENDIX F

TABLE 2

Table 2.

*Desirable Services for Commercially Sexually Exploited Children in Merced County*


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Participant 2	Trained service providers in both sex trafficking and exploitation, as well as trauma-informed service providers need to be sensitive to this population and understand the layers of trauma. There needs to be more collaboration among service providers and the community to address this issue and make progress in these victims' lives.
Participant 3	Better placement (shelters) that don't end up being another means of exploitation. More Trauma-Focused Therapy and complex case management. DoWith and WeCan needs to get on board.
Participant 4	In regards to services, a CSEC minor in our system is difficult to place because of the issues and experiences. If a CSEC minor is detained we need to have a place that we can immediately take them, instead of struggling to find a place for them.
Participant 9	Need additional sources such as placements, mental health clinicians, [and] general support.
Participant 13	Services for housing and counseling are needed.
Participant 14	Prevention, outreach services, help centers, and awareness.
Participant 18	There should be [a] safe house where victims can go [for] help, [and] services brought to them during initial few days, prior to long term placement [being] found.
Participant 22	We need shelters, and foster homes willing to work with CSEC minors.
Participant 28	Fast tracked health services and [sexually transmitted infection] (STI) screenings, [and] adequate shelters devoted to CSEC survivors.
Participant 29	Peer mentors and success models.
Participant 30	There are services available, but it's difficult to find in-patient AOD services for teens—especially CSEC victims; few local placement options, [and] few services that really meet youth where they are.

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