Research Summary: Enhancing Child Welfare Responses to Commercially Sexually Exploited Children (CSEC)

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I. Background

National statistics indicate that the commercial sexual exploitation of children remains a significant concern in the United States, with rising numbers of cases identified through multiple reporting mechanisms. In 2024, the National Center for Missing & Exploited Children (NCMEC) documented more than 27,800 cases of possible child sex trafficking, noting that among the 29,000 children reported missing to the organization, one in seven were likely victims of child sex trafficking. The average age of these victims was 15 years old (NCMEC, 2024a). Increases in reported cases may reflect both heightened awareness and policy changes, such as the 2024 REPORT Act (Revising Existing Procedures On Reporting via Technology Act), which expanded mandatory reporting of online exploitation as well as potential increases in exploitation itself. This data underscores that thousands of children in the U.S. continue to be impacted by commercial sexual exploitation (CSE) each year.

Children who experience human trafficking often have a history of abuse, neglect, and trauma (Administration for Children & Families, 2015). Although collaboration with other systems is essential, child welfare agencies are increasingly tasked with addressing commercially sexually exploited children (CSEC). The Preventing Sex Trafficking and Strengthening Families Act of 2014 (Public Law 113-183) authorized child welfare agencies to develop policies for identifying and protecting children at risk. Recognizing that children who run away from foster care face heightened vulnerability to CSE, this Act mandated state-level prevention efforts, screening, and reporting requirements. Specifically, states must include sex trafficking data in the Adoption and Foster Care Analysis and Reporting System (AFCARS) (Child Welfare Information Gateway, 2023b). The Act also directed the Administration for Children and Families (ACF) to establish the National Advisory Committee on the Sex Trafficking of Children and Youth in the United States (NAC), which operated from 2018 to 2022. The NAC advised the Attorney General and the Secretary of Health and Human Services on national responses to child and youth sex trafficking and released two reports to Congress with recommendations.

The Justice for Victims of Trafficking Act of 2015 further amended the federal definition of child abuse to explicitly include child sex trafficking, thereby enhancing the ability of child welfare systems to intervene on behalf

of exploited children. This Act also requires States to report, to the maximum extent practicable, the number of children who have experienced sex trafficking in the National Child Abuse and Neglect Data System (NCANDS) (Administration for Children & Families [ACF], 2015).

In response to the federal legislation, California's Senate Bill (SB) 855 amended the state's welfare codes to establish the state's Opt-In Commercially Sexually Exploited Child (CSEC) Program in June 2014, providing participating county child welfare agencies guidance and funding to prevent and respond on behalf of children who are or are at risk of experiencing CSE. Counties can use CSEC program funding to develop and implement interagency protocols, procedures, and specialized services to identify, document, address, and prevent the CSE of children. Since the inception of SB 855, more than 75 percent of counties in California that account for more than 97 percent of the state's child population have sought funding through the Opt-In CSEC Program. Nearly a decade later, 47 of California's 58 counties have opted into the program (Hammond et al., 2023).[1]

To better understand the effectiveness of SB 855, the California Department of Social Services (CDSS) contracted with the University of California, Berkeley, California Child Welfare Indicators Project (CCWIP) and its partner, the Urban Institute, to evaluate California's CSEC program in July 2023. The evaluation found that between July 1, 2015, and June 30, 2021, California's child protection system received 70,334 maltreatment reports alleging CSEC. In counties that opted into the program, nearly two-thirds of CSE reports were screened for investigation. Of those reports, one in five were deemed inconclusive, and nearly one in four were substantiated, meaning there was sufficient evidence to determine that CSE of a child likely occurred. Additional recommendations resulting from the evaluation of the CSEC Program established under SB 855 are detailed in the full report, *Evaluating California's Efforts to Address the Commercial Sexual Exploitation of Children* (2023), *CDSS All County Information Notice No. I-06-24* (2024), and an Alliance for Children's Rights Webinar: Evaluation and Improving

[1] Of California's 58 counties, 11 counties (Amador, Butte, Imperial, Inyo, Lassen, Mariposa, Mendocino, Modoc, Napa, Sierra, and Tehama) had not opted into the SB 855 CSEC Program as of the The Urban Institute's 2023 evaluation report. Based on review of CDSS All-County Letters/Information Notices, County Fiscal Letters, and publicly available county child welfare and Board of Supervisors materials, there does not appear to be evidence that any of these counties have opted in since the 2023 evaluation.

California's Response to the Commercial Sexual Exploitation of Children (2024).

Building on these findings, this research summary highlights that the CSE of children is rooted in complex and intersecting vulnerabilities that require equally comprehensive responses. Understanding the risk factors that heighten youth susceptibility and improving methods for screening and identification are essential first steps in prevention and early intervention. Equally important are the engagement strategies that guide how professionals build trust and support with exploited youth, along with the multi-system collaboration required to sustain coordinated, effective care. This report will also examine a summary of promising practices and key findings from the Urban Institute's evaluation of California's CSEC program. Finally, the report highlights CSE training modules implemented by child welfare agencies in California and beyond, illustrating strategies to enhance workforce capacity for a more effective response to CSEC.

II. Risk Factors for CSEC and Identifying Youth at Risk

Understanding the risk factors that increase a young person's vulnerability to CSE is essential for improved prevention, early identification, and intervention. Research consistently shows that CSEC is not the result of a single factor, but rather a convergence of individual vulnerabilities, histories of trauma, systemic involvement, and environmental circumstances that traffickers are quick to exploit.[2]

- **Individual risk factors**- Many lesbian, gay, bisexual, transgender, queer, or questioning (LGBTQ) youth face significant challenges during adolescence and early adulthood, fighting discrimination, misconceptions, and abuse by peers, family members, and others in their communities. Youth who identify as LGBTQ+ may be at particular risk for sex trafficking (Polaris Project, 2019). Youth of color, particularly Black girls, are also disproportionately represented among youth who experience CSE relative to their share of the general population (Polaris Project, 2020; Davey, 2020). Additional risk factors include low self-esteem, developmental or physical disabilities, mental health challenges (such as depression, anxiety, or PTSD), and substance misuse (National Center for Missing & Exploited Children, 2024b).

[2] The list below is not exhaustive and many factors may be interconnected.

- **History of trauma and abuse**- Youth with prior experiences of sexual, physical, or emotional abuse, neglect, adverse childhood experiences, or relationship violence face heightened vulnerability to trafficking. Traffickers often target these unmet needs by presenting themselves as protectors or providers, offering safety, food, shelter, or emotional support as tools of control (Casey Family Programs, 2022). Family-level risk factors, including parental substance use, domestic violence, untreated mental health issues, housing instability or homelessness, intergenerational exploitation (e.g., sexual abuse), and rejection of a youth's sexual orientation, further increase susceptibility (National Center for Missing & Exploited Children, 2024b; Casey Family Programs, 2022). By assuming roles such as caregivers or romantic partners, traffickers exploit relational gaps, relying on manipulation and coercion to maintain power (Baird & Connolly, 2023; Twis, Gillespie, & Greenwood, 2022).
- **Involvement in child welfare or juvenile justice systems**- Youth in foster care, group homes, or the juvenile justice system face elevated risks, especially when placement disruptions occur. The absence of consistent adult support leaves them vulnerable to traffickers who exploit their search for stability (National Center for Missing & Exploited Children, 2024b). Survivors have described foster care as a "training ground" for trafficking, where they often felt reduced to financial incentives rather than valued as individuals (Geiger, Aranguren, & Dolan, 2022; Casey Family Programs, 2022). Data reinforces this concern (Casey Family Programs, 2022):
    - In Illinois, nearly two-thirds of children identified as trafficking victims had prior child maltreatment and child welfare involvement.
    - In Los Angeles County, 85% of identified child sex trafficking survivors had prior child welfare involvement.
    - In Connecticut, 28% of children identified as victims in 2018 were connected to the child welfare system.
    - In Hawaii, nearly one in five trafficking survivors reported being in foster care.
- **Runaway and homelessness**- A *Survey of Youth Transitioning from Foster Care* (SYTFC), conducted between May 2021 and January 2022, of youth in Florida and New York, found that nearly 34% of youth reported

that leaving (i.e., running away or being kicked out of) a parent or caregiver's home preceded their first sex trafficking experience. Youth who had trafficking allegations or who self-reported trafficking experiences more frequently reported that the place they slept most often when they left their parent or caregiver's home was on the street or some other place not designed for sleeping (Geiger, Aranguren, & Dolan, 2022). Traffickers often approach youth who leave home or foster care placements within days. Traffickers exploit survival needs, such as food, shelter, and safety, to manipulate and control youth (Child Welfare Information Gateway, 2023a).

- **Institutional and group placements**- Placement in group homes or institutional facilities is associated with higher vulnerability compared to family-based foster care. Traffickers are known to target group homes, shelters, and schools located near areas with high prostitution activity (Casey Family Programs, 2022). Cycles of running away and being returned to group placements further increase vulnerability, as youth often feel unsafe or unsupported in these environments. The Family First Prevention Services Act (2018) generally restricts Title IV-E reimbursements for group care placements beyond two weeks unless the facility meets certain exemptions. One such exemption applies to settings that provide high-quality residential care and supportive services to children and youth who have been, or are at risk of becoming, victims of sex trafficking. Federal guidance *ACYF-CB-PI-18-07* (2018) clarified that terms such as "high-quality residential care," "supportive services," or what it means to be "at risk of becoming" are not defined, giving Title IV-E agencies flexibility to set their own standards. States such as Ohio have responded by requiring all residential facilities to meet Qualified Residential Treatment Program (QRTP) standards, regardless of exemption status (Casey Family Programs, 2022).

In addition to these vulnerabilities, there are observable warning signs that can help identify important indicators of CSEC. These include sudden changes in a youth's behavior, possession of unexplained money or gifts, frequent absences from school, chronic runaway behavior, multiple cell phones, unexplained hotel stays, tattoos or branding suggesting ownership, and controlling relationships with older partners. Health-related red flags may include frequent injuries, burns, marks, bruises, or cuts, and repeated

sexually transmitted infections or pregnancies (National Center for Missing & Exploited Children, 2024b). Additional indicators may include sexually explicit online profiles on social networking sites, a lot of online activity with unknown contacts, and evasiveness about living arrangements or whereabouts, such as being secretive about where they are going (Seto, Roche, Nicholas, & Newton, 2024).

III. CSEC Screening Tools

Identifying youth who are victims of CSE is challenging, as many do not recognize themselves as victims and may be coached by traffickers to provide false information (Casey Family Programs, 2022). Strengthening screening for CSE can support prevention and early intervention, helping connect at-risk or affected youth to supportive services. The presence of risk factors alone does not necessarily indicate that exploitation has occurred. For this reason, best practices emphasize universal, trauma-informed screening paired with individualized support. Effective approaches are culturally responsive and person-centered, with victim-centered interviewing (using the youth's own language and respecting their perspective) shown to be most effective (Child Welfare Information Gateway, 2023a).

Despite the heightened vulnerability of youth in the child welfare and runaway and homeless youth (RHY) systems, no single screening tool is universally endorsed or adopted across these populations. Certain tools have been validated only for specific populations or particular implementation settings. This lack of standardization has resulted in considerable variation across agencies and jurisdictions, with some relying on locally developed protocols and others adopting tools designed for broader contexts. Research indicates that agencies should select validated screening tools that best fit the implementation context, considering factors such as integration into agency systems, screener length, and ease of use (Charm, Latzman, Gilot, & Dolan, 2022c). Several screening tools for CSE have been highlighted in the literature as particularly useful for practitioners. The most commonly cited tools (as identified by the U.S. Department of Health and Human Services, Administration for Children and Families, 2024, and RTI International, 2024) include:

- **Commercial Sexual Exploitation–Identification Tool (CSE-IT)**- The CSE-IT is a validated, open-domain instrument designed for use across child- and youth-serving systems. It provides a structured approach for

identifying youth who may be at risk of or experiencing CSE. Implementation, however, requires a three-hour user training session, and ongoing use and access to data involve additional fees. The tool is copyrighted by WestCoast Children's Clinic and is the most widely recognized and validated tool in child welfare contexts (Hammond et al., 2023).

- **Human Trafficking Screening Tool (HTST)**- Originally developed by the Urban Institute (2017), the HTST includes both long and short forms. It was pretested with 617 RHY and child welfare-involved youth, demonstrating that it is both youth-accessible and feasible to administer. Findings suggest that both versions of the tool were effective in identifying trafficking experiences. However, the authors emphasize the need for further validation with larger and more diverse samples of youth, as HTST validation remains limited beyond the pilot.
- **Trafficking Victim Identification Tool (TVIT)**- Developed by the Vera Institute of Justice, the TVIT is a structured instrument widely used across social service and justice system settings. It offers practitioners a standardized framework for assessing trafficking indicators, though, like the CSE-IT and HTST, its validation specifically with child welfare and RHY youth remains limited.
- **Sexual Exploitation among Youth (SEY) Risk Assessment**- This framework has been applied in child welfare contexts to distinguish between higher- and lower-risk youth for CSE and to estimate prevalence within child welfare populations. A 2022 study evaluated and validated a 26-item screener guided by this framework, finding strong classification accuracy in identifying CSE risk among children and adolescents involved with CW (Panlilio, Dierkhising, Richardson, & Runner, 2022). This framework is less widely implemented in practice compared to CSE-IT, but it is an important inclusion given its empirical base.
- **Short Screen for Child Sex Trafficking (SSCST)**- The SSCST is a rapid screen designed for healthcare settings that consists of six questions regarding risk factors for CSE. The tool has been evaluated with adolescents ages 11-17 years, primarily those born or residing in the U.S., in emergency departments, teen clinics, and child advocacy centers. Although developed for healthcare providers, this tool is increasingly referenced in child welfare crossover contexts because of its brevity and

adaptability. Caseworkers and child advocacy centers sometimes use it as a quick pre-screen before a more comprehensive assessment.

- **Human Trafficking Interview and Assessment Measure (HTIAM-14)**- Designed for runaway and homeless youth but often cited as applicable to child welfare populations. Provides structured domains that align with CSE risk factors (housing instability, coercion, control). Some agencies use it in conjunction with broader risk assessments.
- **Quick Youth Indicators for Trafficking (QYIT)**- Although developed for youth experiencing homelessness, it has been piloted in crossover youth populations and can serve as a rapid screener in child welfare intake or emergency response settings.

Federal Overview of CSEC Screening Tools Being Used by States

The U.S. Department of Health & Human Services' Administration for Children and Families, Office of Planning, Research, & Evaluation (OPRE), published *Screening for Human Trafficking in Child Welfare Settings: Tools in Use* (Charm, Latzman, Gilot, & Dolan, 2022a). This report, based on interviews with child welfare leaders from 25 states, conducted between March 2021 and February 2022, examines how agencies identify and serve youth who may be at risk of or experiencing trafficking.

According to the report, validated instruments such as the Human Trafficking Screening Tool (HTST), the Trafficking Victim Identification Tool (TVIT), and the Commercial Sexual Exploitation– Identification Tool (CSE-IT) were in use. At the same time, many agencies reported relying on locally developed or adapted tools, resulting in significant variation across jurisdictions.

OPRE also published *Identifying and Addressing Human Trafficking in Child Welfare Agencies: Compilation of Screening Tools* (Charm, Latzman, Gilot, & Dolan, 2022b) which provides access to state-approved screening tools for public distribution. The *Screening for Human Trafficking in Child Welfare Settings: Tools in Use* report also highlights a need for more inclusive screening instruments, particularly those addressing labor trafficking, familial trafficking, younger children (under age 13) and male-identifying youth (Charm, Latzman, Gilot, & Dolan, 2022a).

State Overview of CSEC Screening Tools Being Used by California Counties

The 2023 report, *Evaluating California's Efforts to Address the Commercial Sexual Exploitation of Children* found that 46 of California's 58 counties that opted in to the CSEC program[3] reported which screening tools they used to identify CSE youth. The *Commercial Sexual Exploitation–Identification Tool (CSE-IT)*, developed by WestCoast Children's Clinic, is the only evidence-based CSE screening tool and the most widely used, with approximately two-thirds (67%) of California counties using it.

Other tools reported included the *Child and Adolescent Needs and Strengths Assessment (CANS)* (n=5; 11% of counties) and Structured Decision Making (SDM) (n=4; 9% of counties) in addition to the CSE-IT to identify CSE. Approximately 17% of counties (n=8) used other screening tools not including CSE-IT, CANS, or SDM, many of which were locally developed by the counties themselves. Four counties reported using multiple tools. Staff noted that when CSEC-specific screening tools were added to standard assessments like SDM or CANS, the additional screening tool was burdensome (Hammond et al., 2023).

IV. Engagement Strategies for CSEC

Once a youth is identified as at risk or exploited, engagement should be trauma-informed, youth-centered, and focused on building trust, safety, and empowerment (Chisolm-Straker & Stoklosa, 2017; Saving Innocence, Inc., & Dallas CASA, 2019; Child Welfare Information Gateway, 2023a). Effective engagement combines strong relationships, clear communication, recognition of youth strengths, and the involvement of supportive adults and community resources. Key approaches include:

- **Building trust and rapport**- A core principle is to "meet the youth where they are." Practitioners should use respectful, age-appropriate language and avoid judgmental or language that feels inauthentic. Experts emphasize that workers should not dispute or shame the youth's story but instead listen actively and allow the youth to set the

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pace of the conversation (Chisolm-Straker & Stoklosa, 2017; Williamson & Prior, 2022). For example, if a youth appears quiet or defensive, a skilled worker slows down and provides space rather than pressing for details. Trust-building also requires consistency and reliability. Having one consistent and caring adult, such as an advocate or mentor, offers continuity of care that helps youth feel valued and supported (National Center for Youth Law, 2018; Child Welfare Information Gateway, 2023a; Saving Innocence, Inc., & Dallas CASA, 2019). Transparency is equally crucial. Social workers should clearly explain the limits of confidentiality to avoid unexpected disclosures that could undermine trust (Child Welfare Information Gateway, 2023a).

- **Applying trauma-informed communication**- Practitioners should acknowledge the youth's trauma without re-traumatizing. Validating and non-blaming statements (e.g., "That sounds really scary") and normalizing reactions ("It makes sense you feel angry after that") show empathy and understanding. Maintaining a calm tone, consistent eye contact, and avoiding accusatory or interrogative language are best practices (Child Welfare Information Gateway, 2023a). Instead of quizzing for details, asking open-ended, exploratory questions such as "Tell me about a time you felt safe" or "Tell me about a time you ran away" and reflective listening can help youth feel safer to share (California Courts Judicial Branch of California, 2024; Chisolm-Straker & Stoklosa, 2017; Saving Innocence, Inc., & Dallas CASA, 2019). In recent years, trauma-informed programming (emphasizing safety planning, cultural responsiveness, and survivor involvement) has been widely recognized as essential for successful engagement (Williamson & Prior, 2022; Child Welfare Information Gateway, 2023a).
- **Fostering Safety, Choice, and Self-Efficacy**- A safe physical and emotional environment is also foundational. Practitioners should clearly explain the available options, such as medical care, shelter, or counseling, and involve the youth in the decision-making process. A harm-reduction approach is recommended, emphasizing the "least harmful" next step rather than demanding immediate disengagement from exploiters (Chisolm-Straker & Stoklosa, 2017). For example, if a youth insists on contacting a trafficker, a practitioner might help them create a safety plan, such as using a code word, rather than forbidding communication outright. This also means avoiding a "rescue" approach,

empowering youth, prioritizing their choices, and promoting their self-efficacy by helping them set their own goals, even just small steps toward safety and long-term recovery (Saving Innocence, Inc., & Dallas CASA, 2019).

- **Empowering youth through strengths-based practices**- Many exploited youth demonstrate resilience and strong survival skills. Recognizing these strengths rather than focusing solely on deficits helps counteract shame or stigma. Involving survivors of CSE as mentors or peer-support workers is also highly effective. Survivor mentorship programs, where youth are paired with advocates who have lived experience, provide additional relatability and support, which can increase trust and hope (Polaris Project, 2022). In addition, connecting youth with holistic services such as education, health, or vocational programs reinforces that support extends beyond their exploitation experience.
- **Mobilizing community and support networks**- Engagement is strengthened when family members and community supports are included. For example, Texas CASA (2020) recommends forming "strategic partnerships" among all adults invested in the youth, such as caseworkers, relatives, CASA volunteers, therapists, and school staff. If the youth is hesitant to trust professionals, practitioners may involve a community advocate or faith leader whom the youth already trusts. Importantly, collaboration should always honor the youth's preferences by allowing them to choose which supportive adults to engage with.

V. Multi-System Collaboration to Support CSEC

Research demonstrates that youth who experience CSE have service needs that differ significantly from those of children typically served within the child welfare system. These needs often span, but are not limited to, behavioral, social, legal, educational, housing, and employment domains (Hickle & Roe-Sepowitz, 2018; Le et al., 2018; Rafferty, 2018). Effectively addressing such diverse needs requires coordinated collaboration between child welfare agencies and multiple service systems (Hammond et al., 2023; MacLean et al., 2025; Charm, Latzman, Gilot, & Dolan, 2022c).

Federal Recommendations for Cross-System Collaboration

The *National Advisory Committee on the Sex Trafficking of Children and Youth in the United States: Best Practices and Recommendations for States* (2020) emphasizes that:

> Combating the sex trafficking of children and youth requires a collaborative response to meet the complex needs of children and youth who have experienced sex trafficking while holding perpetrators accountable. To address the sex trafficking of children and youth effectively, victim and support service providers, health and mental health care providers, legislators, law enforcement, prosecutors, public defenders, educators, and the commercial sector must coordinate continually. An effective multidisciplinary system of care uses all available resources and facilitates coordination between service providers and partners while being community-based, family-driven (when safe), youth-guided, survivor-informed, and culturally and linguistically competent. An effective system will achieve outcomes at three levels, with an observable causality between outcomes at all three levels: 1) state, tribal, or territorial systems; 2) local systems; and 3) service delivery. (P. 11)

Key recommendations from the National Advisory Committee on the Sex Trafficking of Children and Youth in the United States for facilitating a multi-disciplinary system of care for CSEC (2020):

- **Training**
  - Youth who experience CSE often interact with multiple professionals during their exploitation.
  - Evidence-informed training is essential to increase the likelihood that youth who have experienced or are at risk of experiencing CSE are identified and receive effective responses and services from professionals who have a shared understanding of protocols and victim resources.
  - Increased requirements for professionals typically involved in multidisciplinary teams (MDTs) should include clear, trauma-informed response protocols that enable those working with youth who have experienced CSE to go beyond the identification of trafficking concerns to connect survivors to needed services.

    - States should consider utilizing remote and online training formats to facilitate the widespread dissemination and accessibility of training on CSEC.

- **Policies and procedures**
    - States must establish clear, multidisciplinary policies and procedures to ensure appropriate, consistent, and well-planned responses for CSEC.
    - Policies and procedures should also allow for individual, organizational, and regional flexibility, enabling first responders and providers to meet the specific needs of each victim.
    - Policies should be supported by memoranda of understanding (MOUs) that outline shared principles, team roles and responsibilities, membership terms, and confidentiality protocols.
- **Implementation**
    - Multidisciplinary Teams (MDTs) should include broad representation from a wide range of disciplines, including, but not limited to, representatives from child welfare, medical and behavioral health sectors; victim and social services agencies, including organizations that serve runaway homeless youth; survivor-led organizations; schools; state, federal, and tribal juvenile and criminal justice systems; and culturally specific groups.
    - States should have MDTs that review individual cases to address individual needs, as well as MDTs that focus on the macro and systemic issues that may arise when addressing the CSE of youth.
    - States may want to consider establishing MDTs specific to sex trafficking to address complexities that differ from other types of child abuse and to meet the particular needs of youth who have experienced CSE, regardless of custody or involvement in the child welfare system.

California's SB 855 and Lessons Learned

Recent findings from the Urban Institute's *Evaluating California's Efforts to Address the Commercial Sexual Exploitation of Children* (Hammond et al., 2023) highlight both progress and ongoing challenges in implementing SB 855, California's legislation designed to strengthen child welfare responses to CSEC. The report underscores that while the law has

fostered interagency collaboration, effective multi-system responses continue to depend on consistent communication, shared protocols, and alignment across local and regional systems.

- **Strengthened collaboration**
  - Implementation of SB 855 has fostered stronger interagency collaboration and communication. Many California counties reported progress in breaking down silos, building positive relationships across agencies, and expanding participation beyond child welfare in screening youth at risk of or experiencing CSE.
    - However, despite these advances, collaboration remains uneven as about one-third of counties reported a lack of consensus on the effectiveness of joint efforts, with a similar proportion expressing dissatisfaction with interagency communication.
- **Challenges for child welfare agencies**
  - SB 855 designates child welfare agencies as the lead system responsible for serving youth who have experienced CSE. Yet, staff frequently report lacking the necessary tools, resources, and alignment with partner agencies to fulfill this mandate most effectively. They also highlighted that responsibilities for child safety and care can conflict with the mandates of other stakeholders.
    - For example, some counties operate as dual-status counties, allowing a youth to fall under the jurisdiction of both child welfare and probation, while other counties require one agency to assume primary responsibility for the youth. While dual-status arrangements can foster collaboration, they also can create confusion and conflict when agencies lack a shared agenda. Without clear alignment, these overlaps may undermine interagency coordination and the overall effectiveness of care for CSEC-impacted youth.
- **Inconsistent MDT approaches**
  - Counties vary in how they define and implement Multi-disciplinary Teaming (MDT) processes. In some instances, MDTs are treated as equivalent to child and family team meetings,

while in others, they are used interchangeably with steering committee meetings.
    - Despite these inconsistencies, staff generally report that convening collaborators to coordinate resources and make decisions strengthens communication and improves coordination for CSEC, regardless of the specific structure or format.

- **Intercounty collaboration gaps**
    - While SB 855 requires collaboration among specific in-county agencies, some counties (particularly smaller ones) collaborate across county lines when local services are unavailable or when youth move frequently between jurisdictions.
        - However, some counties reported that critical information is often lost during the transfer of cases between jurisdictions. Enhanced state-level support for both in-county and inter-county collaboration could help ensure that youth experiencing CSE, especially those with complex needs or out-of-county placements, receive consistent and coordinated services.

Overall, SB 855 has improved interagency collaboration in California, but research underscores that sustaining effective multi-system responses requires consistent communication, shared agendas/protocols, and broader coordination across local and regional systems. Long-term success depends on building a flexible, survivor-informed, system-wide framework that ensures youth impacted by CSE receive comprehensive and coordinated care.

VI. Summary of Promising Practices and Key Findings from Urban Institute's Evaluation of California's CSEC Program

In addition to the multi-system collaboration recommendations discussed in Section V., The Urban Institute's *Evaluating California's Efforts to Address the Commercial Sexual Exploitation of Children* identified several key challenges and promising practices for serving CSEC in California. (Hammond et al., 2023; California Department of Social Services, 2024).

Key Challenges:

- **Workforce and placement shortages**- High staff turnover undermined trust with youth and families, disrupted training continuity, and eroded institutional knowledge on CSE. Counties also reported significant shortages of suitable placements, and a substantial number of CSEC being placed with relative caregivers.
- **Lack of CSEC-informed behavioral health services**- Some counties reported limited availability of trauma- and CSEC-informed behavioral health interventions.
- **Service gaps for non–child welfare youth**- Many counties lack clear processes or defined roles for serving youth experiencing CSE who do not have an open child welfare case.
- **Limited overlap with child welfare placements**- Among confirmed CSE cases, only a minority of youth were in child welfare placements at the time of identification. Four percent had placement histories but were not currently in care; over one in nine were in placement; and nearly 3% were absent from placement.
- **Data-sharing barriers**- In some counties, different agencies used different screening tools, which sometimes led to data duplication or inconsistent data collection, depending on the questions included in each tool. In some cases, counties also mentioned that they identified youth coming from a neighboring county, but could not see previous screening results because they did not have data-sharing agreements with the origin county.
- **Training needs**- Counties emphasized the need for more specialized training, particularly for parents, relative caregivers, and foster parents.
- **Early age of concern**- The average age at which CSE concerns were first identified was 12 years old.

Promising Practices:

1. Workforce Capacity and Case Management

- **Specialized staffing**– Employing on-staff clinicians with a specialization in working with youth who have experienced CSE, and staff dedicated to recovering missing youth.
- **Dedicated case assignment**– Assigning and consolidating CSE cases to specific frontline workers rather than distributing them throughout the workforce.

- **Adjusted caseloads**– Weighting CSE cases more heavily when calculating caseloads to reflect their intensity and reduce burnout.
- **Secondary trauma support**– Improve access to targeted secondary trauma support for county staff working with CSEC cases.

2. Response Models and Service Delivery

- **24/7 dual response**– Deploying child welfare and CSE advocates together during investigations.
- **Specialized courts**– Establishing trauma-informed courts designated for CSE cases.
- **Prevention practices**– Expanding strategies to prevent vulnerable youth from becoming victims.
- **Training and technical assistance**– Enhancing training and support for counties and multidisciplinary partners, including community organizations, with a focus on harm reduction.

3. Collaboration and Inclusion

- **Engaging Tribes**– Involving Tribes in CSEC program design and implementation, as well as in understanding the impacts of CSE on the AI/AN community.
- **Community partnerships**– Collaborating with outside organizations to reach vulnerable youth not engaged with child welfare.
- **Lived experience expertise**– Incorporating survivor voice into the design, delivery, and evaluation of services for CSEC. Counties are encouraged to improve access to and integration of lived experience expertise to ensure that child welfare agencies and their partners develop programs that are responsive to the realities of youth impacted by CSE.

VII. Training Modules Used in Other Child Welfare Agencies

California CSEC Training Program Under SB 855[4]

- **Child welfare agencies**- Under SB 855, California counties are required to offer CSE training to county child welfare workers and foster caregivers. The Urban Institute's *Evaluating California's Efforts to*

[4] Hammond, I., Wiegmann, W., Magruder, J., & Webster, D., with Lery, B., Benatar, S., Chambers, J., Packard Tucker, L., Brewsaugh, K., Loveless, A., & Norwitt, J. (2023, July). *Evaluating California's efforts to address the commercial sexual exploitation of children*. University of California, Berkeley, California Child Welfare Indicators Project & Urban Institute.

Address the Commercial Sexual Exploitation of Children found that among respondents (n=46 of the 47 participating counties that opted into California's CSEC Program), the majority met these requirements: 40 counties (87%) required frontline workers and supervisors to complete at least one CSE training, and 39 counties (85%) offered CSE training to foster caregivers. While not mandated, 29 counties (6%) required managers to complete CSE training, and 42 counties (91%) offered voluntary training to staff during 2021 (Hammond et al., 2023). California counties offer a wide range of training, with some standardized across multiple counties and others tailored to specific counties. The most common trainings were *CSEC 101, CSEC 102*, and *Commercial Sexual Exploitation–Identification Tool (CSE-IT)*, which are SB 855–funded and publicly available. Trainings on harm reduction, CSEC intervention, and survivor perspectives were offered in most counties but were less standardized. Fifteen counties mentioned additional specialized trainings covering topics such as youth empowerment; supporting LGBTQ+ youth; "runaway" youth training; the intersection of domestic violence, sexual assault, and human trafficking; CSEC in tribal communities; and behavioral skills training (Hammond et al., 2023).

- **Trainings for other professionals and community partners**- Counties sometimes used SB 855 funds to educate stakeholders beyond child welfare staff, typically including law enforcement, probation, and community partners. Survey responses, county plans, and site interviews indicated that non–child welfare professionals often had less knowledge of CSEC, which impeded collaboration. Trainings for these groups largely mirrored those for child welfare staff, including *CSEC 101*, *CSEC 102*, and *CSE-IT*. Some counties also offered training for court system staff and other relevant professionals (Hammond et al., 2023).
- **Trainings for youth**- Almost all counties provided training for youth, though topics and formats varied. Common topics included social media safety, raising awareness of CSE, healthy relationships, and general education on human trafficking. Trainings usually took place in a middle school, a high school, community events, or through contracted programs such as *Ending the Game*, *Word on the Street*, or *Traps of a Trafficker*. Some counties offered tailored training for youth in foster care experiencing or at risk of CSE, focusing on behavioral

wellness, empowerment, or harm reduction. Some counties used a prevention training curriculum, titled the *Cool Aunt Series* (Hammond et al., 2023).

- **Trainings for caregivers**- Caregivers play a critical role in recognizing and responding to signs of CSE. Trainings for foster care caregivers specifically was most common in urban counties. County plans indicated that 41% of rural, 50% of suburban, and 86% of urban counties offered training for foster care caregivers, focusing on CSEC awareness and harm reduction. Trainings for other caregivers (who may come from the community or be a parent involved in child welfare) occurred in 24% of rural, 64% of suburban, and 71% of urban counties, covering topics such as social media safety, trauma-informed care, supporting LGBTQ+ youth, and general CSEC awareness. Trainings were often part of broader community education efforts on CSE, paired with youth trainings, or specifically provided to parents or caregivers of youth at risk of or experiencing CSE (Hammond et al., 2023).
- **Delivery by community organizations**- Many trainings were delivered by community organizations, which in some cases prepared child welfare staff to to conduct ongoing "train-the-trainer" sessions. These partnerships often helped counties centralize preventive training efforts and expand access to CSEC-focused education for professionals and youth. For example, some counties have centralized preventive trainings through local trafficking prevention collectives (e.g., San Diego County Trafficking Prevention Collective, while others have developed annual CSEC empowerment events for youth (e.g., Los Angeles County CSEC Empowerment Event for youth) (Hammond et al., 2023).
- **Emerging training needs**- Some counties expressed the need for updated and additional training to address current CSE trends. Topics of interest included cyber recruitment strategies (e.g., commonly used websites, methods for preventing and addressing this type of recruitment) and visual indicators of CSE, such as tattoos, to enhance early identification and intervention (Hammond et al., 2023).

Other Examples of CSEC Training Programs Relevant to Child Welfare Agencies

California-Based Programs

- The Preventing and Addressing Child Trafficking Program (PACT) initiative, a program of the Child and Family Policy Institute of California (CFPIC) and contracted through the California Department of Social Services (CDSS), provides on-demand, virtual, and recorded training opportunities for child welfare agencies, professionals, and community members. Their training modules cover topics such as:
    - *Understanding and identifying child trafficking*
    - *Developing trauma-informed responses*
    - *Collaborating with multi-disciplinary teams*

  These resources are designed to enhance the capacity of professionals to prevent and respond effectively to child trafficking.
- The Los Angeles County Department of Mental Health (LACDMH) provides a range of CSEC-related training for child welfare staff, as part of the county's efforts to support transition-age youth affected by CSE. Recent training topics include:
    - *Introduction to Human Trafficking of Children and Youth 101*
    - *Exploring the Neurobiology of Trauma and Human Trafficking*
    - *Trauma-Informed Healthcare for Youth Impacted by CSEC*
    - *Factors of Resiliency for Male Survivors*

  These trainings build staff knowledge and skills in trauma-informed approaches, enhancing the county's capacity to engage and support youth affected by CSEC.
- The WestCoast Children's Clinic (headquartered in Oakland, California) offers structured, CSEC-specific training for child welfare and allied providers. Offerings include the *CSEC 102* and *Advanced Caregiver Training* courses, which total 16 hours over four days, as well as ongoing Learning Communities for providers that provide continued support and professional development for all staff serving youth impacted by CSE.
- The Swan Within (based in Playa Vista, California) offers 3-hour (3 CEUs for MFTs and LCSWs) courses to equip participants with an understanding of the psychological and social dynamics, life events, and contributing factors that can lead to CSEC. Trainings include:

    - *CSEC 101: Basic Awareness: Knowledge to Impact*
    - *CSEC 102: From Victim to Survivor to Leader: Youth Development & Empowerment*
    - *Challenges of Identifying & Treating Male CSEC Youth*
    - *LGBTQ Youth and Child Trafficking*
    - *Therapeutic Arts & Enrichment for Healing*

- Saving Innocence (a nonprofit organization operating in Los Angeles County) offers an online in-depth CSEC Advocacy Training for professionals and volunteers to understand the unique needs of CSEC, identify warning signs, learn advocacy, and service provision. Includes videos, a workbook, and expert panels.

Massachusetts Programs

- Supported by a five-year federal grant from the Administration for Children and Families (U.S. Department of Health & Human Services) that began in 2014, the State of Massachusetts developed a two-phase training initiative to establish a comprehensive statewide response system for human trafficking.
    - Phase one, delivered by My Life My Choice (MLMC), was tailored to the needs of individual counties and aimed to equip child welfare and juvenile justice professionals with knowledge of where sex trafficking can occur, associated risk factors, and the challenges victims face during recovery.
        - MLMC remains active today continuing to provide survivor-led mentoring and professional training professional training on topics such as:
            - *CSEC 101: Understanding and Responding to Victims*
            - *CSEC 102: Skills and Strategies for Providing Effective, Trauma-Informed Services to CSE Youth*
            - *Preventing the CSE of Adolescent Girls: Facilitating the My Life My Choice Curriculum*
            - *The Advanced Residential Institute on Serving Trafficked and High-Risk Adolescent Girls*
            - *Survivor-Centered Approaches to Treating Complex Trauma: A Training for Mental Health Care Providers*
            - *From App to Exploitation: CSE in the Digital Space*
            - *Engaging Sexually Exploited Youth in Conversations About Sexual Health*

    - Phase two, delivered by the Support to End Exploitation Now (SEEN) program, focused on fostering a multi-disciplinary approach to implementing a child trafficking response protocol.
        - The SEEN program continues to operate as a multi-disciplinary response to child trafficking and CSEC across Suffolk County, Massachusetts. SEEN provides 24/7 referrals and ongoing case coordination for high-risk and exploited youth in the region

Illinois Program

- The Illinois Department of Children and Family Services (DCFS) Child Protection Training Academy (CPTA) Simulation Lab at Illinois State University provides immersive, hands-on training for child welfare front-line staff. Through simulated environments, such as mock residential settings, medical offices, and courtrooms. These labs provide frontline workers with opportunities to practice interviewing, safety awareness, and testifying in simulated court settings. While the primary focus is on child protection investigations, the realistic scenarios can encompass cases involving CSEC, allowing trainees to engage with complex cases that may include CSE elements.

National CSEC Training Programs

- The Office on Trafficking in Persons' (OTIP) National Human Trafficking Training and Technical Assistance Center (NHTTAC) provides free training and technical assistance (T/TA) to professionals in healthcare, social services, and other key sectors to prevent, identify, and respond to human trafficking. Through the SOAR National Training Program and other initiatives, NHTTAC offers both on-demand and customized T/TA, leveraging a diverse network of subject matter experts, including individuals with lived experience of human trafficking. By collaborating closely with these expert consultants, NHTTAC ensures that its training and technical assistance are grounded in real-world perspectives, informed by evidence-based approaches, and highly relevant and impactful for professionals, organizations, and communities.
- The Polaris Project through the National Human Trafficking Hotline, provides online webinars, trainings, and technical assistance to service providers, educators, and community organizations. These offerings highlight best practices for identifying and responding to youth at risk

of sexual exploitation, emphasizing trauma-informed approaches and survivor engagement to enhance professional capacity across sectors.

- The National Center for Missing & Exploited Children (NCMEC) offers free online courses, webinars, and resources for law enforcement and child-serving professionals. Training modules focus on identifying, preventing, and responding to CSEC, integrating evidence-based practices and survivor-informed guidance to improve professional effectiveness in protecting vulnerable youth.
- The National Children's Advocacy Center (NCAC) offers online and hybrid training programs for child protection staff and multidisciplinary teams. These trainings focus on forensic interviewing, prevention strategies, and coordinated responses to CSEC, emphasizing trauma-informed practice and collaborative approaches that enhance the capacity of agencies and professionals serving exploited youth.
- The National Children's Alliance (NCA) provides a range of online training opportunities specifically focused on CSEC. These trainings are designed for professionals working with children, including child welfare staff, law enforcement, medical providers, mental health professionals, and advocates. NCA's offerings cover multiple key areas including CSEC awareness and identification, trauma-informed interventions, Accreditation and Chapter Standards for children's advocacy centers (including standards for serving victims of CSEC), ChildVictimWeb access (a secure online system designed for tracking, documenting, and sharing information about child victims, which supports coordinated responses across agencies) and multi-disciplinary collaboration.
- The National Center on Child Trafficking (NCCT) was established in 2021 at Georgia State University's School of Public Health and provides professional development opportunities to individuals serving youth who have experienced trafficking and CSE. These opportunities include webinars, clinical discussion groups, and advanced TF-CBT training sessions, each designed to strengthen workforce capacity in supporting this population. (Note: Although these trainings are primarily designed for mental health and substance use clinicians, the topics addressed are also highly relevant to child welfare professionals.)
    - *Webinar Series:* This eight-part Mental Health Treatment Guidelines for Youth Who Have Experienced Trafficking and/or

CSE webinar series based on *The Consensus Guidelines for Mental Health Treatment with Youth Who Have Experienced Trafficking/CSE*. Developed by a panel of experts with both service delivery and lived experience, the guidelines aim to improve engagement with youth and families while tailoring interventions to their specific needs (see webinar topics below).

- *Voices of Lived Experience: The Importance of Trauma-Informed Mental Health Care for Youth Who Have Experienced Trafficking or Commercial Sexual Exploitation*
- *Treatment Foundations: Engagement and the Therapeutic Relationship with Youth Impacted by Trafficking*
- *Building Safety: The Growth of Regulatory Capacities with Youth Impacted by Trafficking*
- *Connection is Key: The Importance of Caregiving and Supportive Adults for Youth Impacted by Trafficking*
- *Knowledge is Power: Psychoeducation with Youth and Caregivers Impacted by Trafficking*
- *Relationships with Self and Other: Supporting Healthy Relationships and Self-Concept with Youth Impacted by Trafficking*
- *The Heart of Healing: Trauma Processing and Meaning Making Among Youth Impacted by Trafficking*
- *Voices of Lived Experience: Perspectives on Youth Resilience and Growth*

- Discussion Group: The NCCT Clinical Discussion Group is a free resource for clinicians seeking to strengthen their therapeutic approaches with youth and families impacted by trafficking or CSE (T/CSE). These free, one-hour virtual sessions, facilitated by NCCT staff, provide a collaborative learning space with case presentations, guest speakers, and strategies to strengthen therapeutic approaches.
- *TF-CBT for Youth who have Experienced Trafficking and CSE (TF-CBT for T/CSE):* Designed for clinicians seeking to strengthen their ability to deliver high-quality, trauma-informed care to youth impacted by trafficking and CSE. This program builds upon

participants' existing expertise, and foundational knowledge of TF-CBT while incorporating new learning and experiential activities to deepen the clinical skills essential for delivering evidence-based interventions with fidelity.

Note: While these trainings are primarily designed for mental health and substance use clinicians, the topics addressed are also highly relevant to child welfare professionals.

- Justice U offers the CSEC Essential Knowledge Series (created by AFRJ® and Powered by Altus Solutions), a three-part online training program with role-based tracks designed for educators, social workers, healthcare providers, probation officers, and other professionals. The curriculum is grounded in trauma-informed pedagogy and integrates elements of self-care and emotional support, reflecting the same principles of safety, trust, and empowerment that guide direct practice with youth.

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