Research-to-Action: Sexually Exploited Minors Needs and Strengths

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Welcome

- Overview of SEM Research-to-Action Project
- Review of Research Findings
- Practice Implications
- Policy Recommendations
- Q & A
Project Background

Three core components of the SEM: Research-to Action Project:

- Standardized Measure: CANS-CSE
  - Certification training and technical assistance
- Collaborative Research Effort
- Advocacy and Policy Recommendations
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Age profile of Exploited Youth

- **Combined Clients**
  - Average Age: 16.9
  - Minimum Age: 10
  - Maximum Age: 20

- **WestCoast Clients**
  - Average Age: 16.5
  - Minimum Age: 10
  - Maximum Age: 20

- **Partner Clients**
  - Average Age: 18.4
  - Minimum Age: 16
  - Maximum Age: 24
Exposure to Trauma and History of Abuse

- Neglect: 56%
- Sexual Abuse: 53%
- Emotional Abuse: 53%
- Physical Abuse: 52%
- Family Violence: 39%
Prevalence of Known Family Disruptions

- Abandonment by parents or primary caregivers: 55%
- Lack of supervision by parents or caregivers: 50%
- Living in a transient household: 21%
- Out-of-home (foster care) placement disruptions: 48%
- Parent or caregiver substance use: 11%
- Contact with or involvement in parents' criminal activities: 23%
- Involvement with or exposure to parents' prostitution activity: 15%
Many of our SEM clients are involved in activities that threaten their health and safety.

- 84% have problems with judgment that place them at risk of significant physical harm.
- 79% are currently in unhealthy partner relationships.
- 35% have engaged in moderate to severe self-injuring behavior requiring medical assessment or intervention.
- 12% have had a suicidal gesture, attempt, or plan to commit suicide within 30 days of their assessment.
31% (35 youth) have a substance use disorder. Among these youth:

- 94% have been using severely.
- 94% are in peer groups that consistently engage in alcohol or drug use.
- 86% have been using for over one year.
- 86% deny the existence of problems or need for recovery, and are in environments that encourage substance use.
- 83% are in environments where they are exposed to alcohol or drug use.
- 49% have been with or used with their parents while their parents were using drugs or alcohol.
Risk Behaviors: Running Away

62% (70 youth) youth run away from home frequently. Among these youth:

- 89% engage in delinquent, dangerous activities (e.g. exploitation) while on the run.
- 87% run to unsafe environments that cannot meet their basic needs or where the likelihood of victimization is high.
- 76% run to different locations or to no planned destination.
- 74% have unrealistic or even delusional expectations about the implications of their running.
- 71% are involved with others who help them hide or encourage them to run.
- 66% make concerted efforts to hide and resist return if they are found.
- 63% run away often or at every opportunity.
Prevalence of Mental Health Needs

- Depression: 76%
- Anger Control: 58%
- Anxiety: 55%
- Attachment Disorder: 51%
- Oppositional Behavior: 46%
- Affect Regulation: 43%
- Attention Deficit/Impulse Control: 26%
Prevalence of Mental Health Needs

- Depression: 86% (Combined), 76% (WestCoast Clients), 39% (Partner Clients)
- Anxiety: 63% (Combined), 55% (WestCoast Clients), 32% (Partner Clients)
- Attachment Disorder: 70% (Combined), 51% (WestCoast Clients), 47% (Partner Clients)
Youth understands that currently being exploited

Youth has some understanding that currently exploited

Youth is unaware of his/her exploitation

Youth actively denies or rationalizes exploitation

Combined

WestCoast Clients

Partner Clients
Stockholm Syndrome

Youth recognizes pimp/exploiter is not operating in their best interest

Youth suspects pimp/exploiter is not operating in their best interest

Youth believes pimp/exploiter is operating in their best interest

Youth actively defends pimp/exploiter from accusation of exploitation
Status of Exploitation

- Is currently exploited: 18%
- Expressed wanting to leave exploitation: 32%
- Has plan to leave exploitation: 22%
- Attempted to leave exploitation: 35%
- Not involved in exploitation for at least 5 days: 50%
- Not involved in exploitation for at least 1 month: 49%
- Not involved in exploitation for 3 months or more: 38%
Life Domain: Health Needs

In terms of health needs:

- 12% experience chronic physical or medical problems.
- 10% are under- or over-weight to a degree resulting in serious or deadly health outcomes.
- 31% have problems with sleep and are generally sleep deprived.
- 14% are pregnant at any given time (and 56% of pregnant youth are using drugs or other substances known to cause harm).
- 25% are parenting a biological child and another 10% are parents but not participating in their child’s care (e.g. the child is in protective or non-protective custody).
Life Domain: Education Needs

In terms of educational needs:

- 50% are making no progress toward their educational goals or have no goals
- 21% of youth have problems with school attendance and have been out of school for one year or more
- When attending school 35% experienced limited or no successes at school, often due to shaming of their experience and harassment by their peers
However, after six months of therapy:

- 50% of youth with sleep problems see improvements in their ability to get a full night’s sleep or have only occasional sleep interruptions.
- 29% of those with medical impairments see improved ability to manage their medical problems.
- 51% see improvements in their school behavior.
- 30% see improvements in school attendance.
- 29% see improvement in school achievement.
Internal Strengths

- Involvement in Recovery: 67%
- Creativity: 66%
- Self Expression: 64%
- Peer Relations: 52%
- Leadership: 46%
- Spiritual Life Skills: 46%
- Life Skills: 42%
- Optimism: 29%
External Strengths

- Cultural Identity: 83%
- Natural Supports: 69%
- Resourcefulness: 50%
- Community Resources: 25%
- Family Strengths: 23%
Future research efforts to address the needs of youth who are exploited:

- Expand the collaboration to include additional agencies and cities
- Understand the onset of exploitation
- Understand the impact of pregnancy and parenting
- Collect longitudinal data
- Share therapeutic strategies that are successful
Practice Recommendations

- Need for Intensive Engagement and Treatment
- Training and Support for Service Providers
- Collaboration and Participation of Systems Involved in Care
- Prevention and Early Intervention
The intensity and complexity of the needs of SEM must inform the services and treatment provided.

A collaborative approach between all members of a treatment team is crucial.

Provide community-based services when possible.

Adopt a non-shaming, strength-based approach.
Intensive Engagement & Treatment

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- A collaborative approach between all members of a treatment team is crucial
- Provide community-based services when possible
- Adopt a non-shaming, strength-based approach
Training & Support

- Enhancing providers’ knowledge base on SEM specific issues
- Utilizing a harm reduction treatment model
- Process material that emerges in the treatment relationship
- Clinical supervision to support clinicians
System Collaboration

- Developing multidisciplinary treatment teams
- Caregivers and families as part of the treatment team
- Supporting caregivers
- Collaboration with schools
- Collaboration with Children and Family Services
Prevention & Early Intervention

- Stabilizing foster care placements
- Train faculty and school personnel
- Access to community resources
Policy Recommendations

- Identifying, Serving, and Protecting Victims
  - Child Welfare
  - Behavioral Healthcare
  - Juvenile Justice
  - Public Health
  - Primary Care
  - Education

- Decriminalization and Safe Harbor

- Addressing Demand
Policy Recommendations

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Q&A Session
Thank You!

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Feel free to contact us for additional copies of the Research to Action: Sexually Exploited Minors Needs and Strengths paper.