WestCoast Children's Clinic
Commercial Sexual Exploitation Identification Tool (CSE-IT) – version 2.0

1. HOUSING AND CAREGIVING. The youth experiences housing or caregiving instability for any reason.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth runs away or frequently leaves their residence for extended periods of time (overnight, days, weeks).	0	0	1	2
b. Youth experiences unstable housing, including multiple foster/group home placements.	0	0	1	2
c. Youth experiences periods of homelessness, e.g. living on the street or couch surfing.	0	0	1	2
d. Youth relies on emergency or temporary resources to meet basic needs, e.g. hygiene, shelter, food, medical care.	0	0	1	2
e. Parent/caregiver is unable to provide adequate supervision.	0	0	1	2
f. Youth has highly irregular school attendance, including frequent or prolonged tardiness or absences.	0	0	1	2
g. Youth has current or past involvement with the child welfare system. ∞	0	0	1	2
Indicator 1 Score: A subtotal of 0 to 3 = *No Concern*. A subtotal of 4 or 5 = *Possible Concern*. A subtotal from 6 to 14 = *Clear Concern*. **Circle score here →**	**0**	No Concern 0	Possible Concern 1	Clear Concern 2
2. PRIOR ABUSE OR TRAUMA. The youth has experienced trauma (not including exploitation).	No Information	No Concern	Possible Concern	Clear Concern
a. Youth has been sexually abused. ∞	0	0	1	2
b. Youth has been physically abused. ∞	0	0	1	2
c. Youth has been emotionally abused. ∞	0	0	1	2
d. Youth has witnessed domestic violence. ∞	0	0	1	2
Indicator 2 Score: A subtotal of 0 or 1 = *No Concern*. A subtotal of 2 = *Possible Concern*. A subtotal from 3 to 8 = *Clear Concern*. **Circle score here→**	**0**	No Concern 0	Possible Concern 1	Clear Concern 2
3. PHYSICAL HEALTH AND APPEARANCE. The youth experiences notable changes in health and appearance.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth presents a significant change in appearance, e.g. dress, hygiene, weight.	0	0	1	2
b. Youth shows signs of physical trauma, such as bruises, black eyes, cigarette burns, or broken bones.	0	0	1	2
c. Youth has tattoos, scarring or branding, indicating being treated as someone's property.	0	0	1	2
d. Youth has repeated or concerning testing or treatment for pregnancy or STIs.	0	0	1	2
e. Youth is sleep deprived or sleep is inconsistent.	0	0	1	2
f. Youth has health problems or complaints related to poor nutrition or irregular access to meals.	0	0	1	2
g. Youth's substance use impacts their health or interferes with their ability to function.	0	0	1	2
h. Youth experiences significant change or escalation in their substance use.	0	0	1	2
Indicator 3 Score: A subtotal of 0 or 1 = *No Concern*. A subtotal of 2 or 3 = *Possible Concern*. A subtotal from 4 to 16 = *Clear Concern*. **Circle score here →**	**0**	No Concern 0	Possible Concern 1	Clear Concern 2
4. ENVIRONMENT AND EXPOSURE. The youth's environment or activities place them at risk of exploitation.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth engages in sexual activities that cause harm or place them at risk of victimization.	0	0	1	2
b. Youth spends time where exploitation is known to occur.	0	0	1	2
c. Youth uses language that suggests involvement in exploitation.	0	0	1	2
d. Youth is connected to people who are exploited, or who buy or sell sex.	0	0	1	2
e. Youth is bullied or targeted about exploitation.	0	0	1	2
f. Youth has current or past involvement with law enforcement or juvenile justice.∞	0	0	1	2
g. Youth has gang affiliation/contact that involves unsafe sexual encounters.	0	0	1	2
Indicator 4 Score: A subtotal of 0 = *No Concern*. A subtotal of 1 = *Possible Concern*. A subtotal from 2 to 14 = *Clear Concern*. **Circle score here →**	**0**	No Concern 0	Possible Concern 1	Clear Concern 2
5. RELATIONSHIPS AND PERSONAL BELONGINGS. The youth's relationships and belongings are not consistent with their age or circumstances, suggesting possible recruitmen*t by an exploiter.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth has unhealthy, inappropriate or romantic relationships, including (but not limited to) with someone older/an adult.	0	0	1	2
b. Youth meets with contacts they developed over the internet, including sex partners or boyfriends/girlfriends.	0	0	1	2
c. Explicit photos of the youth are posted on the internet or on their phone.	0	0	1	2
d. Youth receives or has access to unexplained money, credit cards, hotel keys, gifts, drugs, alcohol, transportation.	0	0	1	2

	No Information	No Concern	Possible Concern	Clear Concern
e. Youth has several cell phones or their cell phone number changes frequently.	0	0	1	2
f. Youth travels to places that are inconsistent with their life circumstances.	0	0	1	2
Indicator 5 Score: A subtotal of 0 = *No Concern*. A subtotal of 1 or 2 = *Possible Concern*. A subtotal from 3 to 12 = *Clear Concern*. **Circle score here →**	**0**	No Concern 0	Possible Concern 1	Clear Concern 2
6. SIGNS OF CURRENT TRAUMA. The youth exhibits signs of trauma exposure.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth appears on edge, preoccupied with safety, or hypervigilant.	0	0	1	2
b. Youth has difficulty detecting or responding to danger cues.	0	0	1	2
c. Youth engages in self-destructive, aggressive, or risk-taking behaviors.	0	0	1	2
d. Youth has a high level of distress about being accessible by cell phone.	0	0	1	2
Indicator 6 Score: A subtotal of 0 = *No Concern*. A subtotal of 1 or 2 = *Possible Concern*. A subtotal from 3 to 8 = *Clear Concern*. **Circle score here →**	**0**	No Concern 0	Possible Concern 1	Clear Concern 2
7. COERCION. The youth is being controlled or coerced by another person.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth has an abusive or controlling intimate partner.	0	0	1	2
b. Someone else is controlling the youth's contact with family or friends, leaving the youth socially isolated.	0	0	1	2
c. Youth is coerced into getting pregnant, having an abortion, or using contraception.	0	0	1	2
d. Someone is not allowing the youth to sleep regularly or in a safe place, go to school, eat, or meet other basic needs.	0	0	1	2
e. The youth or their friends, family, or other acquaintances receive threats.	0	0	1	2
f. Youth gives vague or misleading information about their age, whereabouts, residence, or relationships.	0	0	1	2
Indicator 7 Score: A subtotal of 0 = *No Concern*. A subtotal of 1 = *Possible Concern*. A subtotal of 2 to 12 = *Clear Concern*. **Circle score here →**	**0**	No Concern 0	Possible Concern 1	Clear Concern 2
8. EXPLOITATION. The youth exchanges sex for money or material goods, including food or shelter.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth is exchanging sex for money or material goods, including food or shelter for themselves or someone else, e.g. child, family, partner.	0	0	1	2
b. Youth is watched, filmed or photographed in a sexually explicit manner.	0	0	1	2
c. Youth has a history of sexual exploitation. ∞	0	0	1	2
d. Youth is forced to give the money they earn to another person.	0	0	1	2
Indicator 8 Score: A subtotal of 0 = *No Concern*. A subtotal of 1 = *Possible Concern*. A subtotal from 2 to 8 = *Clear Concern*. **Circle score here →**	**0**	No Concern 0	Possible Concern 1	Clear Concern 2

Scoring Instructions:

1. Enter each Indicator Score in the corresponding box in this table.
2. Add Indicator Scores 1 through 7 and enter the total in box A.
3. If Indicator 8 score = 1 (Possible Concern), enter 4 in box B. If Indicator 8 score = 2 (Clear Concern), enter 9 in box B.
4. Add boxes A and B for a Total Score between 0 and 23 and enter the Total Score in the final box.
5. Plot the Total Score on the Continuum of Concern below to determine level of concern for exploitation.

Continuum of Concern
(draw a line indicating level of concern for exploitation)

Indicator:		Indicator score
1. HOUSING AND CAREGIVING		
2. PRIOR ABUSE OR TRAUMA		
3. PHYSICAL HEALTH AND APPEARANCE		
4. ENVIRONMENT AND EXPOSURE		
5. RELATIONSHIPS AND PERSONAL BELONGINGS		
6. SIGNS OF CURRENT TRAUMA		
7. COERCION		
Add scores for indicators 1 through 7 (Score cannot exceed 14):	A.	
8. EXPLOITATION		
If Indicator 8 score is 1 (Possible Concern) put 4 in Box B If Indicator 8 is a 2 (Clear Concern) put 9 in Box B	B.	
TOTAL: Add boxes A and B for a total score between 0-23.	TOTAL	

No Concern 0-3 → Possible Concern 4-8 → Clear Concern 9-23

WESTCOAST CHILDREN'S CLINIC

IDENTIFYING COMMERCIALLY SEXUALLY EXPLOITED CHILDREN

Guidelines for Administering the
Commercial Sexual Exploitation – Identification Tool (CSE-IT)
Version 2.0

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ABOUT WESTCOAST CHILDREN'S CLINIC

WestCoast Children's Clinic is a community mental health clinic serving children and youth in Oakland, California, and surrounding communities. WestCoast is committed to providing psychological services to vulnerable children, youth, and their families regardless of their ability to pay, and to expanding the reach of psychological services through advocacy, research, and training. To ensure the ongoing availability of these services, WestCoast is dedicated to training the next generation of mental health professionals.

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ABOUT THE CSE-IT AND THIS USER GUIDE

The Commercial Sexual Exploitation-Identification Tool (CSE-IT, pronounced "See It") was created to help professionals identify children and youth who have been, or are being, commercially sexually exploited. This guide is intended to help users administer the CSE-IT. It includes information on how to use and score the CSE-IT, background information about commercial sexual exploitation of children (CSEC), trauma-informed considerations for engaging with youth, suggestions for preparing to use the tool, and the federal mandated reporting guidelines under the Child Abuse Prevention and Treatment Act. Mandated reporting requirements vary by state and users may want to seek additional sources for guidelines in their jurisdictions.

The content of the CSE-IT (including all versions of the tool and user manuals) is based on research conducted by WestCoast Children's Clinic (WestCoast) and partner agencies. WestCoast gathered data through focus groups, interviews, and expert reviews from over 100 survivors and CSEC providers, in addition to reviewing existing screening tools and literature on risk factors and indicators of commercial sexual exploitation. WestCoast validated the CSE-IT in 2016 with data from the pilot study that included 52 agencies, over 2,000 service providers, and 5,537 youth. This study revealed that at least 635 young people, or 11.4% of children at our sample agencies, had clear signs of exploitation.

BACKGROUND ABOUT COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN

The Federal Trafficking Victims Protection Act defines sex trafficking as "the recruitment, harboring, transportation, provision, or obtaining of a person for the purposes of a commercial sex act" (18 U.S.C. § 1591). According to these definitions, a young person can be considered commercially sexually exploited whether or not a third party (e.g., pimp) is involved in their exploitation. Additionally, any person who buys or sells sex from a minor can be considered an exploiter.

Service providers report that over three-quarters of the sexually exploited youth they serve had been exploited for two to three years before there was a referral to specialized CSEC services (Basson, Rosenblatt & Haley, 2012). Using an evidence-based tool increases the number of victims who are identified, which allows for their protection from ongoing victimization and accelerated access to services and care.

Identification is key to revealing the prevalence of sexual exploitation. Organizations such as the California Child Welfare Council and the President's Interagency Task Force, created by the Trafficking Victims Protection Act of 2000, have highlighted the urgent need for screening to improve identification of sexually exploited children, in order to engage in early intervention and to understand the overall prevalence of child sexual exploitation.

For more background information, we recommend the following resources:

- Basson, D., Rosenblatt, E., & Haley, H. (2012). Research-to-Action: Sexually Exploited Minors Needs and Strengths. WestCoast Children's Clinic. http://www.westcoastcc.org/wp-content/uploads/2012/05/WCC_SEM_Needs-and-Strengths_FINAL.pdf

- Basson, D. (2017). Validation of the Commercial Sexual Exploitation-Identification Tool (CSE-IT): Technical Report. WestCoast Children's Clinic. http://www.westcoastcc.org/wp-content/uploads/2015/04/WCC-CSE-IT-PilotReport-FINAL.pdf

- Walker, K. (2013). Ending the Commercial Sexual Exploitation of Children: A Call for multi-system collaboration in California. California Child Welfare Council. http://www.youthlaw.org/fileadmin/ncyl/youthlaw/publications/Ending-CSEC-A-Call-for-Multi-System_Collaboration-in-CA.pdf

- Clawson, H. J., Dutch, N., Solomon, A. & Goldblatt, L.G. (2008). Human Trafficking Into and Within the United States: A Review of the Literature. Report submitted to the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. http://aspe.hhs.gov/hsp/07/humantrafficking/litrev/

PURPOSE AND LIMITATIONS OF SCREENING

Universal screening for commercial sexual exploitation can improve early identification of young people who experience this type of abuse and is a necessary first step in providing victims with services and subsequent protection from ongoing victimization. Universal screening is proactive and does not require signs or suspicion of exploitation as prerequisites to screen. Instead, universal screening means screening all youth who meet pre-determined criteria. For the CSE-IT, WestCoast recommends that universal screening include all youth ages 10 and over, regardless of gender, race, ethnicity,

culture, sexual orientation, residence, health, socioeconomic status, appearance, or behavior.

It is important to note that screening is not diagnostic. Rather, it is a preliminary step that prompts additional information gathering and interventions if problems or concerns are identified.

The Importance of Universal Screening for Identification

Universal screening is the first step in identifying the existence of a problem, facilitating early intervention, and preventing complications. For example, universal screening is used in mental health settings to identify youth at risk of suicide and in medical settings for early detection of certain diseases. Medical clinics routinely check blood pressure, pulse, and body temperature on all adults to identify potential health issues. In some outpatient mental health clinics, suicide screening is routine for all patients. In all cases, screening is conducted when pre-determined criteria are met— without regard to the presence of symptoms.

Universal screening is predicated on pre-determined criteria partly to minimize the possibility that patients are screened differently based on their public system involvement, or their gender, race, or any other aspect of identity.

Youth who fall outside the recommended age range for the CSE-IT, but who are at high risk of exploitation, should be screened as well. This is very similar to the principle of universal screening in many healthcare settings, where, for example, family history of an illness may result in screening a patient for a health concern even if the patient does not otherwise meet the screening criteria.

Screening Is Not Diagnostic

Screening is a preliminary step that prompts additional information gathering and interventions when problems or areas of potential risk or harm are identified. When a screening tool indicates risk, providers must gather additional information to determine appropriate interventions and response.

For youth at risk of victimization through commercial sexual exploitation, appropriate interventions may include conducting a full assessment of their needs and strengths, safety planning, harm reduction, crisis support, specialized treatment planning, or a forensic investigation, depending on the severity of the situation.

The CSE-IT is a guide to support identification and should not be used as the sole deciding factor to determine whether a youth is sexually exploited. Using other screening and assessment practices in combination with the CSE-IT will greatly enhance the use of the tool. Because identifying whether youth are being commercially sexually exploited can be difficult given the hidden nature of the problem and the often-indefinite information available to providers, it is important to remember that identifying these youth is an opening to services and care. It is not about labelling youth, investigating youth, or assigning them an "exploited" status.

COMPLETING THE CSE-IT AND GATHERING INFORMATION

The CSE-IT is an information integration tool, not a structured interview to be read verbatim to the youth or used as a self-administered questionnaire.

The CSE-IT is designed to be completed by providers who work directly with youth. Such providers already collect information that can be used to complete the tool. This information may come through conversations with youth, observations of their appearance or behavior, and from other sources, including client records or history, as well as conversations with providers close to the youth (e.g. social workers, case managers, caregivers, etc.).

It may be difficult to collect information directly from a young person. They may be unwilling or unable to disclose the circumstances of exploitation or abuse. For this reason, it is important to consider other sources of information. When asking questions directly, it is helpful to use language that is age- and situation-appropriate, choosing words a young person will either know or can relate to. This will help put the youth at ease when talking about difficult topics that may include sexual exploitation.

The CSE-IT is organized into 8 Key Indicators (in shaded boxes on the CSE-IT form). Individuals using the tool should familiarize themselves with the Key Indicators in advance. The indicators are:
1. Housing and Caregiving
2. Prior Abuse or Trauma
3. Physical Health and Appearance
4. Environment and Exposure
5. Relationships and Personal Belongings
6. Signs of Current Trauma
7. Coercion

8. Exploitation

Each of the 8 Key Indicators on the tool has the following:
- **Definition** (in the shaded box): A description of the Key Indicator.
- **Statements to Consider** (check boxes): Sub-items to help rate the Key Indicators. The screener has flexibility in how they use the sub-items and are not required to assess them all.
- **Notes on Scoring**: Directions on how to rate the Key Indicator, based on the scores to the supporting Statements to Consider.

While gathering information to complete the CSE-IT, screeners are encouraged to begin with indicators they already have information about and then explore other areas of potential vulnerability or risk. The Key Indicators and Statements to Consider are areas the provider should consider while screening for commercial sexual exploitation but are not topics that must be asked about directly.

GUIDELINES FOR USE

The guidelines for using the CSE-IT are flexible in order to accommodate the many ways that different settings provide care to youth. As described previously, WestCoast strongly recommends universal screening for indicators of sexual exploitation. This approach proactively and systematically increases the possibility of identifying youth *before* signs of commercial sexual exploitation become obvious.

Steps to Completing the CSE-IT

1. **Preparing**. Review the CSE-IT prior to interviewing youth or gathering information from other individuals or sources so you will know what to listen for in completing the CSE-IT.

2. **Screening**. Many settings have standardized procedures for assessments and interviews (e.g. CANS assessment tool). These assessments likely already ask about many of the Key Indicators on the CSE-IT. For example, when a youth visits an outpatient mental health clinic, providers may meet with the youth to gather information about their reason for the visit, current life stressors, safety needs, residential or placement needs, needs related to daily functioning, or other needs and strengths that may inform treatment. However, there may be Key Indicators that are not already part of the existing screening and assessment process or that

are not explored as comprehensively. Providers may need to incorporate additional questions to address these gaps.

The supporting Statements to Consider provide a means of assessing areas of immediate risk or vulnerability and can be used as a guide for areas to talk to youth about. The Statements to Consider also help highlight where more information is needed. When talking to youth, questions should be posed in language that is accessible and comfortable for both providers and youth.

3. **Completing and Scoring the CSE-IT**. Once you gather information, you may complete the CSE-IT.

   a) Use your professional judgement and the information available to you to mark all Statements to Consider (check boxes) that are known or possible vulnerabilities or risk factors for the young person.

   b) After reviewing the Statements to Consider and marking the relevant boxes, consider the number of items marked and the intensity or acuity of the item to determine the rating for each Key Indicator. Circle: "No Information," "No Concern," "Possible Concern," or "Clear Concern" for all Key Indicators.

      In determining the rating for each **Key Indicator** keep in mind:

      No Information – Rate a Key Indicator "No Information" if there is insufficient information to determine a level of concern at this time.

      No Concern – The information gathered does not indicate that the Key Indicator requires intervention at this time.

      Possible Concern – The information gathered indicates evidence of a problem that requires intervention, however the problem may not be serious or chronic. Even if the youth denies having needs in an area, the provider may still suspect or have some level of concern. Evidence of a past problem may also be rated as a Possible Concern.

      Clear Concern – Rate the Key Indicator a "Clear Concern" when there is clear, discerning evidence that there is vulnerability or risk. Evidence may include disclosure from the youth, from other collaterals about the youth, or from observations or client records. If there is clear evidence of a problem on any Key Indicator or Statement to Consider, determine what interventions may be required, including mandated reporting, safety planning, and continued client engagement. See the section below titled "Next Steps" for more information.

c) Tally the selected Key Indicator values (for all eight indicators) and write the final score in the "Total Score" box at the bottom of the page. The maximum score for the CSE-IT is 23 points. If you calculate a score higher than 23, check your addition. Lastly, mark the checkbox next to the level of concern category (No Concern, Possible Concern, Clear Concern) that corresponds with the total score.

Scoring Timeline for Indicators

90 Days

When scoring Indicators 1, 3, 4, 5, 6, 7, and 8, please score with the last 90 days in mind. Anything that has been a concern within the past 90 days would be rated 2 (Clear Concern). Anything that was a concern in the past—but not within the last 90 days—would be rated 1 (Possible Concern) as an "Historical" rating. Anything that was not a concern at all in the past 90 days or longer would be rated 0 (No Concern). If the youth is placed in juvenile hall or a locked residential facility for longer than 90 days and the risk of exploitation is thereby controlled, the CSE-IT score may not accurately represent risk for the youth once they return to a non-controlled environment. Please keep this in mind and re-administer the CSE-IT based on your assessment of their vulnerability as the youth prepares to return to a non-controlled environment.

Lifetime

When scoring all Statements to Consider for Indicator 2: Prior Abuse or Trauma, please score with the youth's lifetime in mind. If abuse is known to have occurred in the youth's past, rate "2" or "Clear Concern." If there is some information to suggest past abuse, but this is not known or clear, rate "1" or "Possible Concern." If there is no known or suspected abuse exposure, please rate "0" or "No Concern." Additionally, rate any Statement to Consider that references "history" or "past" with the youth's lifetime in mind (1G, 4F, 8C). These indicators are noted with the "∞" symbol.

UNDERSTANDING THE FINAL SCORE ON THE CSE-IT

The completed CSE-IT will result in a final score that indicates the youth's level of risk at the time of screening. The final score falls into one of three categories: **No Concern, Possible Concern, or Clear Concern**.

Indicator:		Indicator score
1. HOUSING AND CAREGIVING		
2. PRIOR ABUSE OR TRAUMA		
3. PHYSICAL HEALTH AND APPEARANCE		
4. ENVIRONMENT AND EXPOSURE		
5. RELATIONSHIPS AND PERSONAL BELONGINGS		
6. SIGNS OF CURRENT TRAUMA		
7. COERCION		
Add scores for indicators 1 through 7 (Score cannot exceed 14):	A.	
8. EXPLOITATION		
If Indicator 8 score is 1 (Possible Concern) put 4 in Box B If Indicator 8 is a 2 (Clear Concern) put 9 in Box B		
	B.	
TOTAL: Add boxes A and B for a total score between 0-23.	TOTAL	

No Concern. This final score category indicates either that the information available does not suggest the youth is being sexually exploited or that there is not enough information to determine a rating at this time. This rating does not state that sexual exploitation categorically does not exist.

Possible Concern. A "Possible Concern" final score indicates that the youth may be at risk for or experiencing sexual exploitation but there is either not enough information available or the current behaviors and circumstances do not clearly indicate exploitation. Providers should actively monitor a young person who receives this rating, fully assess their needs, and initiate preventive actions to ensure that exploitation does not intensify or occur.

Clear Concern. This final score category indicates that numerous risk factors and vulnerabilities are present, suggesting the youth is being commercially sexually exploited or is at high risk for sexual exploitation. This score should immediately trigger actions to address sexual exploitation of the youth. The next section addresses possible next steps, including collaboration and consultation with a supervisor if a provider is unsure about an appropriate response.

NEXT STEPS

The overall level of risk for sexual exploitation as indicated by No Concern, Possible Concern, or Clear Concern will help the provider determine the next appropriate steps. If the CSE-IT indicates an overall Possible or Clear Concern score, providers should consider the following actions:

- Follow internal protocol for responding to sexual exploitation or other forms of child abuse. This may include a mandated report, safety planning, helping youth with physical or hygiene needs, and referral to community agencies to develop a comprehensive service plan for the youth. (Please see the Mandated Reporting section for additional information on this topic.)

- Conduct a thorough assessment of the young person's needs and strengths. If the provider or department is not able to conduct such an assessment, refer the youth to an agency that is able to do so. One assessment tool that is specific to the needs and strengths of sexually exploited youth is the Child and Adolescent Needs and Strengths-Commercial Sexual Exploitation (CANS-CSE).

- Collaborate and consult with a supervisor, social workers, or other providers. Refer the young person to a provider that is able to develop a comprehensive service plan to address the youth's current needs, including safety, physical health, mental health, and access to basic needs.

It is important to remember that clear, unambiguous information about whether a youth is being commercially sexually exploited is not required to provide care that addresses needs arising from exploitation.

CSE-IT: KEY INDICATORS

This section provides background information on each of the 8 Key Indicators on the CSE-IT, explains why the indicators are on the tool, and describes each one.

1. Housing and Caregiving. The youth experiences housing or caregiving instability for any reason.

1. HOUSING AND CAREGIVING. The youth experiences housing or caregiving instability for any reason.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth runs away or frequently leaves their residence for extended periods of time (overnight, days, weeks).	0	0	1	2
b. Youth experiences unstable housing, including multiple foster/group home placements.	0	0	1	2
c. Youth experiences periods of homelessness, e.g. living on the street or couch surfing.	0	0	1	2
d. Youth relies on emergency or temporary resources to meet basic needs, e.g. hygiene, shelter, food, medical care.	0	0	1	2
e. Parent/caregiver is unable to provide adequate supervision.	0	0	1	2
f. Youth has highly irregular school attendance, including frequent or prolonged tardiness or absences.	0	0	1	2
g. Youth has current or past involvement with the child welfare system. ∞	0	0	1	2

Indicators of housing or caregiving instability may be direct or indirect causes of exploitation or they may result from the exploitation. Instability interferes with a person's ability to access resources to meet basic needs, including shelter, food, hygiene, and health. Instability also hinders a person's capacity for age-appropriate activities of daily living, such as attending school. Instability, especially in residential placement, results in an inability to rely on relationships formed while in a given living arrangement, because caregivers, location, friends, and schools may be constantly changing (Coy, 2009). Lack of adequate, consistent supervision by caregivers may leave a young person vulnerable to those who may exploit them.

Instability in housing and caregiving among exploited youth is well documented in the literature and was frequently reported by service providers who contributed to the development of the CSE-IT. The types of instability include having insecure residential placements (Coy, 2009); lacking caregiver support, being abandoned, experiencing homelessness (Clawson & Dutch, 2008; Basson, Rosenblatt, & Haley, 2012; Covenant House 2013); and running away from or not returning to home or placement (Clawson & Dutch, 2008; Coy, 2009; Mitchell, Finkelhor, & Wolak, 2010; Thomson, et al. 2011; and Estes & Weiner, 2001). This instability in housing or caregiving may result in child welfare involvement. Research shows that many youth who are exploited are served by the child welfare system at some point in their lives (Basson, Rosenblatt, & Haley, 2012; California Child Welfare Council, n.d.; Walker, 2013).

Exploitation is strongly related to continually leaving home or placement for both males and females (Clawson, et al. 2009; Greene et al., 1999). Running away may be a direct or indirect cause or effect of exploitation (Saewyc & Edinburgh, 2010; Saewyc, Solsvig, & Edinburgh, 2008; and Estes & Weiner 2001; Thomson, 2011; Reid 2011). Studies find that approximately 60% of sexually exploited youth have a history of running away (Mitchell, Finkelhor, & Wolak, 2010; Basson, Rosenblatt, & Haley, 2012).

Young people are often approached for exploitation when on the streets because their lack of access to resources to meet basic needs related to shelter, food, hygiene, and health makes them vulnerable (Shahera, et al., 2012; Covenant House, 2013; Greene et al., 1999).

A youth's ability to achieve their educational benchmarks is impacted by housing and caregiving instability. Research notes that 50% of exploited youth or at-risk youth are making no progress toward their educational goals or have no goals; 21% have problems with regular school attendance and have been out of school for one year or more; and when in school 35% experience limited or no school success (Basson, Rosenblatt, & Haley 2012). School functioning may also be impacted by peer relationships and bullying or harassment about exploitation (Basson, Rosenblatt, & Haley, 2012). Providers report that youth may be targeted verbally, physically, or sexually, which may lead to school avoidance, tardiness, interrupted learning, reduction in school performance, or dropping out. (See Indicator 4, Environment and Exposure, to rate bullying.)

2. Prior Abuse or Trauma ∞. The youth has experienced trauma (abuse or neglect, not including exploitation).

2. PRIOR ABUSE OR TRAUMA. The youth has experienced trauma (not including exploitation).	No Information	No Concern	Possible Concern	Clear Concern
a. Youth has been sexually abused. ∞	0	0	1	2
b. Youth has been physically abused. ∞	0	0	1	2
c. Youth has been emotionally abused. ∞	0	0	1	2
d. Youth has witnessed domestic violence. ∞	0	0	1	2
Indicator 2 Score: A subtotal of 0 or 1 = No Concern. A subtotal of 2 = Possible Concern. A subtotal from 3 to 8 = Clear Concern. Circle score here➔	0	No Concern 0	Possible Concern 1	Clear Concern 2

Previous victimization puts children at risk for future victimization, including sexual exploitation (Gidyez, et al., 1993; Reid, 2011; Cuevas, et al., 2010; Barnes, et al., 2010; Lalor & McElvaney, 2010; Finkelhor, et al., 2007; Rich, et al., 2005). Past or ongoing exposure to traumatic events may result in an impaired ability to assess risk and safety or manage unsafe situations, which can lead to further victimization.

A history of emotional, physical, sexual abuse, and exposure to family violence is common among exploited youth (Clawson & Dutch, 2008; Bittle, 2002; Roe-Sepowitz, 2012). Several studies indicate that over 70% of youth who are exploited have been exposed to prior trauma(s) (Basson, Rosenblatt, & Haley, 2012; Covenant House, 2013).

3. Physical Health and Appearance. The youth experiences notable changes in health and appearance.

3. PHYSICAL HEALTH AND APPEARANCE. The youth experiences notable changes in health and appearance.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth presents a significant change in appearance, e.g. dress, hygiene, weight.	0	0	1	2
b. Youth shows signs of physical trauma, such as bruises, black eyes, cigarette burns, or broken bones.	0	0	1	2
c. Youth has tattoos, scarring or branding, indicating being treated as someone's property.	0	0	1	2
d. Youth has repeated or concerning testing or treatment for pregnancy or STIs.	0	0	1	2
e. Youth is sleep deprived or sleep is inconsistent.	0	0	1	2
f. Youth has health problems or complaints related to poor nutrition or irregular access to meals.	0	0	1	2
g. Youth's substance use impacts their health or interferes with their ability to function.	0	0	1	2
h. Youth experiences significant change or escalation in their substance use.	0	0	1	2
Indicator 3 Score: A subtotal of 0 or 1 = No Concern. A subtotal of 2 or 3 = Possible Concern. A subtotal from 4 to 16 = Clear Concern. **Circle score here** →	**0**	No Concern 0	Possible Concern 1	Clear Concern 2

Exposure to chronic violence and abuse (often part of exploitation) can affect the whole body—inside and out. Physical health problems may be a direct result of injury or may be stress-related illnesses (Office of Refugee Resettlement, 2012; Lederer & Wetzel, 2014; Clawson & Dutch, 2008; Grace et al., 2012; Clawson, Saloman, & Grace, 2008). Direct injuries include bruises, black eyes, scrapes, broken bones, concussions, burns, scars, and vaginal or anal injuries, such as tearing. Youth may account for these marks on the body by blaming themselves (saying they are clumsy or "bruise easily"). Sexually exploited youth may also present with reproductive health needs, such as sexually transmitted infections, menstrual problems, pregnancies, and abortions (voluntary or forced). Frequent testing for reproductive needs, regardless of test outcomes, can itself be an indicator.

In focus groups conducted by WestCoast, providers reported observing youth with health problems or complaints related to poor nutrition, not having access to regular meals, or eating disorders. Gastrointestinal disorders, including stomach complaints or loss of appetite, are also frequently reported. This can be caused by not having access to food but might also be related to stress or trauma. Similarly, providers report that exploited youth present with sleep issues. This may be related to not getting enough sleep, not having a regular or safe place to sleep, unusual sleeping patterns (e.g., they sleep during the day and stay up at night), or stress-related disturbances. These physical health issues may impact presentation, hygiene, or appearance.

Service providers also frequently report shifts in how youth style themselves or dress. This may involve dressing in a manner that is atypical for the youth's age, community, situation, or the weather. For example, a young person who is being exploited may wear, carry, or own clothes typically worn by sex workers (United Nations, n.d., Moossy, 2009). There may also be noticeable markings on the body. Tattoos, scarification, and branding are frequently used as mechanisms of influence or control and may indicate an exploiter's treatment of the youth as property (United Nations, n.d.; Cantrell, 2013).

Providers also report that a significant shift or increase in substance use can be linked to exploitation. This can be due to the youth's response to the overwhelming stress of sexual exploitation or abuse, but it can also be a tactic of an exploiter in the recruitment stage or a means of control and influence once exploitation has begun. Substance use is common among exploited youth—both males and females (Lederer & Wetzel, 2014; Roe-Sepowitz, 2012; Reid & Piquero, 2014; Stoltz, et al., 2007; ACYF 2016).

Basson, Rosenblatt, & Haley (2012) found that over 30% of sexually exploited youth had substance abuse problems severe enough to require treatment. Among exploited youth with noted substance use disorders, 94% were using severely for over one year and denied the existence of a problem or need for recovery. Most were in environments or peer groups that encouraged substance use.

4. Environment and Exposure. The youth's environment or activities place them at risk.

4. ENVIRONMENT AND EXPOSURE. The youth's environment or activities place them at risk of exploitation.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth engages in sexual activities that cause harm or place them at risk of victimization.	0	0	1	2
b. Youth spends time where exploitation is known to occur.	0	0	1	2
c. Youth uses language that suggests involvement in exploitation.	0	0	1	2
d. Youth is connected to people who are exploited, or who buy or sell sex.	0	0	1	2
e. Youth is bullied or targeted about exploitation.	0	0	1	2
f. Youth has current or past involvement with law enforcement or juvenile justice.∞	0	0	1	2
g. Youth has gang affiliation/contact that involves unsafe sexual encounters.	0	0	1	2
Indicator 4 Score: A subtotal of 0 = *No Concern*. A subtotal of 1 = *Possible Concern*. A subtotal from 2 to 14 = *Clear Concern*. **Circle score here →**	**0**	No Concern 0	Possible Concern 1	Clear Concern 2

It is important to consider the people in a youth's environment, where they spend their time, what they do, and the quality of their relationships when assessing risk for exploitation. Youth may reside in or frequent locations associated with sex work or exploitation (United Nations, 2013). Physical proximity to exploitation activity is an

indicator as it places youth at risk or may be a result of their exploitation. Similarly, exposure to people involved in the sex trade or exploitation may be a cause or an effect of exploitation. A young person may be exposed to sex work in their community, peer group, home, or family (Basson, Rosenblatt, & Haley, 2012), or may have family members who are collaborating with exploiters (Clawson & Dutch, 2008) or who are exploiters.

If a youth is exploited or exposed to exploitation, this may impact their language. Providers report that youth may use terms typically associated with exploitation (e.g., "trick," "john," "date," "bottom," "track," "blade," "pimp," "daddy," etc.) or may have knowledge— not matching their age or life circumstances— of things associated with exploitation, such as sexual knowledge, hotel locations, truck stops, or websites.

Providers report that many exploited youth experience bullying or harassment about exploitation. Youth may be targeted verbally, physically, or sexually by peers, community members, family, or caregivers. This may lead to isolation, defensiveness, aggression, or hopelessness. Bullying about exploitation may also impact the youth's ability or desire to participate in age-appropriate activities.

Exploited youth often encounter the legal system and end up involved in the juvenile justice system (Walker, 2013). One study noted that almost 80% of exploited youth receiving services had been incarcerated in the juvenile justice system at some point (WestCoast, 2012). Juvenile justice involvement may be due to status offenses or crimes committed related to exploitation, trauma bonding, or coercion (e.g., theft, drug possession, assault, missing curfews, loitering, false identification) (Cantrell, 2013; Saar, Epstein, Rosenthal, & Vafa, 2015). Some providers report that involving youth in criminal acts can be a form of connection, grooming/recruitment, control, coercion, isolation (e.g. "no one will keep you safe like I can"), or used as a threat to turn them in. Youth may feel more isolated and constrained as they realize that previous delinquent or criminal acts impact job prospects, credit scores, and other life circumstances.

Gangs recognize the high payout and low risk associated with the sexual exploitation of children (Carpenter and Gates, 2016; Greenbaum, 2014). Gangs may provide relationship, sense of acceptance, basic needs, and protection for vulnerable youth whose need for these is unmet. Gangs often use coercion and manipulation to recruit and exploit youth. The exploitation may be to generate income or resources for the gang, or it may entail being traded among gang members as property. Providers

report that exploited youth may report having friends or acquaintances who are in a gang without being affiliated themselves.

5. Relationships and Belongings. The youth's relationships and personal belongings are not consistent with their age or circumstances, suggesting possible recruitment.

5. RELATIONSHIPS AND PERSONAL BELONGINGS. The youth's relationships and belongings are not consistent with their age or circumstances, suggesting possible recruitment by an exploiter.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth has unhealthy, inappropriate or romantic relationships, including (but not limited to) with someone older/an adult.	0	0	1	2
b. Youth meets with contacts they developed over the internet, including sex partners or boyfriends/girlfriends.	0	0	1	2
c. Explicit photos of the youth are posted on the internet or on their phone.	0	0	1	2
d. Youth receives or has access to unexplained money, credit cards, hotel keys, gifts, drugs, alcohol, transportation.	0	0	1	2
e. Youth has several cell phones or their cell phone number changes frequently.	0	0	1	2
f. Youth travels to places that are inconsistent with their life circumstances.	0	0	1	2
Indicator 5 Score: A subtotal of 0 = *No Concern*. A subtotal of 1 or 2 = *Possible Concern*. A subtotal from 3 to 12 = *Clear Concern*. Circle score here →	**0**	No Concern 0	Possible Concern 1	Clear Concern 2

Young people may be susceptible to unhealthy, dangerous, or violent intimate relationships due to challenges in safely negotiating interpersonal relationships (Barnes, et al., 2010; Rich et al., 2005). Exploiters use emotional connection with youth to lower their defenses and gain trust and dependency (Human Smuggling and Trafficking Center, 2008; Walker 2013). This is a common strategy for grooming or recruitment. An adult may develop a relationship with a youth and become a romantic partner or protector (Human Smuggling and Trafficking Center, 2008; Department of Homeland Security, 2008). For these reasons, the youth may display loyalty or trust towards adult exploiters (Walker, 2013; Clawson & Dutch, 2008; Basson, Rosenblatt, & Haley, 2012), which is often considered trauma bonding or Stockholm Syndrome.

Exploiters may become a primary source of basic needs for youth lacking access to shelter, food, health care, or hygiene. Exploiters may also provide material goods as part of the seduction or recruitment process (e.g., cell phones, jewelry, clothes, basic needs, transportation, etc.) (Human Smuggling and Trafficking Center, 2008). Once exploitation has begun, youth may have access to material goods related to exploitation (large amounts of money, hotel keys, transportation, beauty products/services, clothing, technology, etc.). It is useful to notice when a youth's material items are inconsistent with their socio-economic status or age.

Service providers report that technology (cell phones, other devices, and email) is used by exploited youth to communicate with buyers or sellers. Technology is also used by exploiters for control by keeping tabs on a young person's whereabouts and activities. Prepaid, no-contract, and disposable mobile devices facilitate human trafficking because of the potential for anonymity. Law enforcement professionals and researchers find that social networking, online chats, and digital media are commonly and increasingly used by exploiters to access youth and recruit buyers (Cantrell, 2013; University of Southern California, 2012; Mitchell, Finkelhor, & Wolak, 2010). Youth may have multiple cell phones or their cellphone numbers may change frequently. In settings where contact information for patients is updated, it may be useful to keep a record of these changes.

Because of the nature of exploitation and strategies of exploiters, exploited youth may travel with individuals or groups who are not relatives to places that are inconsistent with the youth's life circumstances or age. Exploiters use travel to deliver youth to buyers, increase youth's isolation and limit their control, and reduce risk of being noticed or caught. In situations where travel documents are required, a youth's travel documents may be held by someone else or they may be given false identity or travel documents (United Nations, n.d.).

6. Signs of Current Trauma. The youth exhibits signs that may result from exposure to any current trauma.

6. SIGNS OF CURRENT TRAUMA. The youth exhibits signs of trauma exposure.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth appears on edge, preoccupied with safety, or hypervigilant.	0	0	1	2
b. Youth has difficulty detecting or responding to danger cues.	0	0	1	2
c. Youth engages in self-destructive, aggressive, or risk-taking behaviors.	0	0	1	2
d. Youth has a high level of distress about being accessible by cell phone.	0	0	1	2
Indicator 6 Score: A subtotal of 0 = *No Concern*. A subtotal of 1 or 2 = *Possible Concern*. A subtotal from 3 to 8 = *Clear Concern*. Circle score here →	0	No Concern 0	Possible Concern 1	Clear Concern 2

Exploited youth often experience current trauma while they engage with providers and services. Signs of trauma may be physical or emotional (Lederer & Wetzel, 2014; Roe-Sepowitz, 2012). (Physical signs of trauma are rated in Indicator 3: Physical Health and Appearance.) Many exploited youth are in situations that threaten their health and safety, with 84% exhibiting impaired judgment that places them at risk of significant physical harm (Basson, Rosenblatt, & Haley, 2012). Exploited youth may exhibit behavioral, psychological, or emotional signs associated with adjustment to trauma (Clawson, Saloman, & Grace, 2008; Lederer & Wetzel, 2014; Basson, Rosenblatt, &

Haley, 2012). Though not all providers will be able to fully assess for such symptoms, it is important to note that numbing, dissociation, hyperarousal, hypervigilance, avoidance, and affective and physiological dysregulation can indicate traumatic stress (see for example, Basson, Rosenblatt, & Haley, 2012). These trauma symptoms can result in a young person being on edge, constantly scanning for danger, being hypervigilant, or preoccupied with safety. While these symptoms may be neurological and nervous system-based survival tactics, they sometimes result in an inability to appropriately assess and respond to danger. Some providers report that this anxiety or distress may also be transferred or linked to objects associated with an exploiter (e.g., cellphone, jewelry, or clothing provided by the exploiter).

Some youth resort to self-harm as a means of expressing or regulating overwhelming feelings or unbearable circumstances. This may include suicidal thoughts or attempts, cutting, or hand banging, but may also include self-destructive risk-taking where the youth is likely to be harmed by others. Examples include walking into traffic, having unprotected sex, being aggressive, or provoking fights.

7. Coercion. The youth is being controlled or coerced by another person.

7. COERCION. The youth is being controlled or coerced by another person.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth has an abusive or controlling intimate partner.	0	0	1	2
b. Someone else is controlling the youth's contact with family or friends, leaving the youth socially isolated.	0	0	1	2
c. Youth is coerced into getting pregnant, having an abortion, or using contraception.	0	0	1	2
d. Someone is not allowing the youth to sleep regularly or in a safe place, go to school, eat, or meet other basic needs.	0	0	1	2
e. The youth or their friends, family, or other acquaintances receive threats.	0	0	1	2
f. Youth gives vague or misleading information about their age, whereabouts, residence, or relationships.	0	0	1	2
Indicator 7 Score: A subtotal of 0 = *No Concern*. A subtotal of 1 = *Possible Concern*. A subtotal of 2 to 12 = *Clear Concern*. Circle score here →	0	No Concern 0	Possible Concern 1	Clear Concern 2

Coercion indicates that a young person is at very high risk for exploitation or that exploitation has occurred. Even if a youth is not being exploited, evidence of coercion indicators may require intervention to address the youth's safety.

Coercion may involve actual or threatened violence against the youth or someone they know. Fear can be a symptom of coercion. This includes fear of retaliation against the youth or their family, fear of law enforcement and of disclosure (Clawson & Dutch, 2008). Exploiters may exert physical and psychological control over youth. Youth may be kept isolated with no freedom of movement while contact with others is controlled

(Clawson & Dutch, 2008). Secrecy is common (Clawson, Saloman, & Grace, 2008), as young people may be asked to lie about topics such as their name or age (Leitch & Snow, 2013).

It is important to keep the dynamics of exploitation in mind when screening for commercial sexual exploitation and supporting youth who are at risk. As Basson, et al. (2018) note, "A damaging misperception about youth who are being exploited is that they choose to engage in their own victimization. This harmful judgment fails to account for the impact of coercive control, whereby a person gains power over another often through intermittent and unpredictable physical and sexual violence alternating between expressions of love and threats of abandonment. This power is buttressed through enforced drug use; control of eating, sleeping, and sexual practices; not allowing youth to attend work or school; and controlling money or access to basic needs. The dependency that results is known as a trauma bond, and it can develop with third party exploiters, buyers, or others involved in the exploitation." This bond is amplified through isolation, economic control, and psychological abuse tactics such as denial of experience and blaming the youth for their situation.

Youth may also have no control over their sexual health or safety. Exploiters may try to enforce whether a youth can or must use contraception, receive an abortion, or maintain a pregnancy. Exploiters may impregnate a youth and then later use the child as a means of ongoing coercion and control over the youth.

8. Exploitation. The youth exchanges sex for money or material goods, including food or shelter.

8. EXPLOITATION. The youth exchanges sex for money or material goods, including food or shelter.	No Information	No Concern	Possible Concern	Clear Concern
a. Youth is exchanging sex for money or material goods, including food or shelter for themselves or someone else, e.g. child, family, partner.	0	0	1	2
b. Youth is watched, filmed or photographed in a sexually explicit manner.	0	0	1	2
c. Youth has a history of sexual exploitation. ∞	0	0	1	2
d. Youth is forced to give the money they earn to another person.	0	0	1	2
Indicator 8 Score: A subtotal of 0 = *No Concern*. A subtotal of 1 = *Possible Concern*. A subtotal from 2 to 8 = *Clear Concern*. Circle score here →	**0**	No Concern 0	Possible Concern 1	Clear Concern 2

Sexual exploitation, past or present, includes a range of sex crimes against children, including filming or watching minors in sexually explicit activities. Some service providers ask youth directly if they exchange sex for shelter, food, or other goods, and a young person may disclose their exploitation in response to direct questions

(Covenant House, 2013; Greenbaum, Dodd, & McCracken, 2018; see also Asian Health Services screening, Chang, 2015). However, often youth do not self-disclose their exploitation due to fear, shame, or trauma bonding with their exploiter. They may not recognize their own exploitation or identify as victims (Walker, 2013; Basson, Rosenblatt, & Haley, 2012; Clawson, Saloman, & Grace, 2008). Because of this, disclosure may come from other individuals in their lives or from documentation in their case or medical histories.

USING A TRAUMA-INFORMED APPROACH TO SCREENING

When working with youth who have potentially been exploited or abused, it is essential that providers use a trauma-informed approach. This requires understanding the impact that trauma may have on a youth's life and using interpersonal skills to ensure that interactions are supportive of recovery and not re-traumatizing. Interactions with youth may include forensic interviews, mental health screenings, ongoing meetings or counseling sessions, physical health exams, or an organization's intake process.

It is important to create a positive, trusting relationship with youth prior to asking sensitive questions directly. For example, beginning an exam or interview with a series of sensitive questions, such as, "Have you been sexually abused?" or "Have you ever terminated a pregnancy?" prior to establishing your trustworthiness may cause a young person to become overwhelmed, agitated, or disengaged. They may question the provider's motives and experience the inquiries as intrusive.

In interviews in which professionals are asking youth to disclose details of traumatic events, the focus should be on creating safety and minimizing distress. It is important to take the necessary time to address safety and create an environment in which youth feel comfortable disclosing personal information.

Trauma-Informed Engagement Considerations[1]

Below are considerations to keep in mind when interacting with youth who have experienced trauma, including trauma resulting from exploitation. These suggestions will help providers create a safe, trauma-informed process and environment. Whatever the meeting's setting or purpose, keep in mind the following:

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[1] Interview considerations were adapted from interview guides for asking about exploitation (including the Shared Hope International *Intervene* interview and the Loyola University Chicago interview guides) and from WestCoast's clinical staff's experience working with traumatized youth.

Address basic needs first. If basic needs such as shelter, clothing, hygiene, food, medical, and others are not met, youth will not be able to engage in dialogue. Not attending to basic needs may also inhibit rapport-building.

Building trust with youth is an ongoing process. Youth may have had previous negative experiences with or false information about service providers, which may result in little initial trust. The information they are willing to provide may evolve as their relationship with the provider evolves, regardless of the length of time a provider may have with the youth.

Be realistic about how much information can be collected during an exam or interview with a child or youth who has experienced extreme trauma.

Be attentive to signs of distress. If the young person shows signs of agitation, numbing, or feeling overwhelmed, such as changes in breathing, facial coloration, or posture, take a moment to give them a break, shift discussion topics, or delay the interview. Even if they do not show obvious signs, it may be helpful to check in and ask how they are doing.

Give the youth space and respect personal boundaries. Consider the youth's emotional as well as physical space. Do not ask a continuous series of invasive or very personal questions, especially if the youth is showing signs of distress. Do not assume the youth will welcome physical contact. Ask before placing hands on the youth during an exam and narrate what you will be doing throughout the appointment. Stay attentive to signs of distress related to having easy access to an exit. Keep an open path to the door for the young person to leave if they would like to.

Speak with youth in a confidential and safe environment. Aim to create an environment that is not intimidating. If possible, speak with the youth alone. When meeting youth in the community, it is important to make sure both the provider and the youth are safe.

Be non-judgmental. Be kind and empathetic, but also project neutrality. Do not react in an emotional or biased way to disclosures about exploitation or exploiters.

Allow the youth to feel heard. Limiting interruptions, such as references to personal stories or other reactions, can help youth feel heard. While rapport-

building can be a reciprocal interaction, when youth are disclosing information about their history, it is important to stay focused on them.

Use open-ended questions. Closed-ended questions do not allow youth to communicate their story on their terms and in their own words. It is important to remember that the CSE-IT items are not interview questions and should not be asked verbatim.

Avoid challenging questions. Questions that start with "Why" may be perceived as challenging. For example, a question that starts with "Why did/didn't you…?" may be perceived as questioning the youth's motives or judgment. Opening a dialogue with "Tell me about…" may convey more openness and feel less intrusive.

Don't focus on inconsistencies. Youth may provide inconsistent answers because of a reluctance to disclose or as a result of their adjustment to trauma. In addition, there may be genuine disagreement between the youth's reporting of the facts and the way others who know the youth report them. It can be helpful to ask for clarification in a non-judgmental way, but do not insist on clarity and completeness right away. Remember, it may take time for a youth to tell their story.

Commercially sexually exploited children may experience trauma bonding. Trauma bonding (sometimes referred to as Stockholm Syndrome) manifests as an emotional attachment to an exploiter. Do not identify youth as victims, their perpetrator as an exploiter or trafficker, or yourself as offering rescue.

Avoid clinical or technical language. Do not label a youth's experiences in clinical terms or use language that pathologizes them and their experience. For example, avoid the following words: CSEC, rehabilitation, treatment, coercion, grooming.

Be honest. Providers should introduce themselves, their organization or department, and mandated reporting requirements. It is important to set realistic expectations with youth regarding what can be done on their behalf. For example, it may not be realistic to say, "Everything will be okay."

If using an interpreter, ask if it is OK. The Center for Human Rights for Children at Loyola University Chicago recommends not using as an interpreter someone already known to the child or youth as that person may have been involved in their

exploitation (Walts, et al., 2011). Be sure to introduce the interpreter and explain their role. Avoid having side conversations with the interpreter.

LEGAL ISSUES AND MANDATED REPORTING

Human trafficking is a crime under federal and international law. The Justice for Victims of Trafficking Act (2014) amended the Child Abuse Prevention and Treatment Act (CAPTA 42 U.S.C. § 5106g) to expand the definitions of "child abuse and neglect" and "sexual abuse" to include child sex trafficking. If a mandated reporter suspects that a child is a victim of child abuse, including child sex trafficking, a child abuse report must be filed. Note that reasonable suspicion is sufficient cause for filing a report; confirmation of abuse is not required. The child welfare or law enforcement agency receiving the report is responsible for investigating.

Legally mandated reporters include (but are not limited to) the following professionals:

a. A teacher, teacher's aide or assistant, or other instructional aide employed by any public or private school.
b. A classified employee of any public school.
c. Employees at institutions of higher learning.
d. Directors, employees, and volunteers at organizations that supervise or provide activities for children, such as camps, youth centers, and recreation centers.
e. An administrative officer or supervisor of child welfare and attendance.
f. Health care personnel including physicians, psychiatrists, dentists, nurses, therapists and other mental health professionals, among others.
g. Any employee of any police department, sheriff's department, probation, or welfare department.
h. Social workers.

However, not every state responds to child sex trafficking through the child welfare system. To effectively respond to child sex trafficking, agencies using the CSE-IT should research appropriate local agencies to which they can refer children who are identified as exploited. For more information, see WestCoast's "Implementing the CSE-IT", available at this link: http://www.westcoastcc.org/wp-content/uploads/2017/09/WCC-CSE-IT-ImplementationGuide-FINAL.pdf

The Child Welfare Information Gateway fact sheet "Mandatory Reporters of Child Abuse and Neglect" contains additional information about mandatory reporting, including summaries of state laws. It is available at this link: https://www.childwelfare.gov/systemwide/laws_policies/statutes/manda.pdf

Though law enforcement and other public agencies may be primarily concerned with victimization that occurred within the United States, trafficking situations that occurred outside the U.S. may have significant implications for a victim's legal relief, allowing someone to access benefits or stay in the country legally. Organizations that work with clients who are immigrants to the U.S. should be aware of laws and benefits for individuals in these circumstances. The U.S. Department of Health and Human Services Office of Refugee Resettlement provides information on these topics (http://www.acf.hhs.gov/programs/orr/programs/anti-trafficking).

TECHNICAL ASSISTANCE AND TRAINING

Please contact us at screening@westcoastcc.org with any training, technical assistance, and implementation guidance requests, or other questions related to the CSE-IT.

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