

# Position Statement on Implementation of Safe Harbor Laws for Victims of Sex Trafficking



*Facing Risk, Runaways and Relapse: Lessons Learned from the Field*  
February 5, 2014

The commercial sexual exploitation of children (CSEC), also known as sex trafficking, or human trafficking, is a real and immediate problem in Florida. Many young girls are victims in US commercial sex markets which can include: pornography, stripping, escort services, and prostitution. Girls as young as 11 years old are forced into trafficking against their will and sold for sex. These exploited children are subjected to physical, sexual, and emotional abuse. Though human trafficking has a long history, the systematic study of how to address this modern blight: the identification, support and treatment of survivors, is an emerging field.

To address these issues, practitioners borrow from the field of domestic violence, substance abuse and trauma-informed services. Inherent to providing services to victims of sex trafficking are high rates of relapse and re-victimization.

Practitioners highlight the urgency for policy makers and program administrators to develop a deep understanding of these risks in order to both provide effective interventions and avoid inadvertent harm caused by implementing inappropriate practices for this vulnerable population.

Research suggests that the majority of sexually exploited children are girls and young women with histories of early sexual violence, physical abuse, family disengagement, trauma and neglect. Although a common historical narrative typically emerges when identifying common life

## In Florida

- 1,266 human trafficking cases investigated by Florida Department of Children and Families (DCF) from January 2010 to January 2013.<sup>1</sup>
- 200 minors received services through DCF in 2012.<sup>2</sup>
- 717 Potential Victims in the Florida Department of Juvenile Justice (DJJ) system.<sup>3</sup>
- More than half of survivors interacted with Florida DJJ Before Being Reported to the Child Abuse Hotline.
- Since the activation of the National Human Trafficking Report line by Polaris Project in 2007, Florida has ranked third nationally for calls to the tip line, following California and Texas.<sup>4</sup>

experiences prior to commercial exploitation and human trafficking, Florida does not have established criteria by which to identify those children at highest risk for sexual exploitation.

Evidenced based programming models and/or evaluation data is also limited. More alarming is the finding that once CSEC victims are identified, existing policies and practices within organizations inadvertently cause further harm to the children they serve.

<sup>1</sup> Florida Children and Families (2013, press release) Safe Harbor Act will ensure safety for victims of Human Trafficking. Available at: <http://www.myflfamilies.com/press-release/safe-harbor-act-will-help-ensure-safety-victims-human-trafficking>.

<sup>2</sup> Ibid.

<sup>3</sup> Florida Department of Juvenile Justice. (2013, August). Roadmap to System Excellence: *Putting Families First in Transforming Florida into a National Model for Juvenile Justice*. Available at: [http://www.djj.state.fl.us/docs/town-hall-meetings/roadmap-to-system-excellence\\_8-1-2013.pdf?sfvrsn=0](http://www.djj.state.fl.us/docs/town-hall-meetings/roadmap-to-system-excellence_8-1-2013.pdf?sfvrsn=0).

<sup>4</sup> National Human Trafficking Resource Center. (2010). Available at: <http://www.dcf.state.fl.us/programs/humantrafficking/docs/ContinuedPresence.pdf>.

Interview questions directed at the victim, for example, may reflect attitudes, beliefs and practices that blame and stigmatize the survivor or worse, criminalize her victimization. This secondary victimization is normalized through uninformed policies/procedures meted out by the very individuals and institutions entrusted to help the victim.

When those entrusted to protect children implement uninformed policies, the results for girls can be devastating. Survey responses from rape survivors after contact with the legal system paint a picture of secondary victimization: 87% of rape survivors reported they felt bad about themselves, depressed (71%), violated (89%), distrustful of others (53%), and reluctant to seek further help (80%).<sup>5</sup>

The state of Florida has passed Safe Harbor legislation, requiring victims of child sex trafficking not be treated as criminals, but instead receive help from child welfare professionals in a non-secure setting. While this is a favorable policy and should be vigorously enacted, in practice however, Florida at this time is neither prepared to meet the complex needs of victims nor to address how to effectively identify risk factors and implement effective interventions for those children most at risk.

Opportunities exist to fill in the gaps between existing policy and practice, starting with efforts to learn best practices in the fields of substance abuse and domestic violence prevention/treatment. This rigorous exploration should address the critical issues of risk, relapse, and runaway behaviors frequently seen in victims subsequent to their exploitation and traumatization.

Research on risk and protective factors suggest that girls who are positively supported tend to avoid interaction with the justice system. Therefore, the Policy Center calls for immediate action to fully address Florida's sexually exploited girls.

Overall, our recommendations for increasing successful outcomes with victims of sex trafficking take into account that they must be driven by professionals in the field as well as informed and guided through the thoughtful involvement of survivors.

There are viable policies and programming models that can be implemented in Florida. These recommended actions outlined below will address the issues that are currently not being effectively addressed in our state including relapse, runaway, trauma-bonds with the trafficker, trauma-informed services, staff training, programming capacity and community-based alternatives.

## **1 Protect the original intent of the Safe Harbor Act. Likewise, do not amend the Baker Act or Marchman Act or similar strategies of involuntary hospitalization to be used for this population.**

We acknowledge and recognize that creating policies and practices to effectively serve sexually exploited children is complicated at best. However, changing the statute can have serious unintended consequences for the girls affected as well as the entire dependency system. The Safe Harbor Act currently seeks to address the child welfare needs of girls, provide services including placement of children alleged to be dependent and sexually exploited to short-term safe houses. Criminalizing victims in a razor wire lock-up or other restrictive environment is not the answer and goes against the original intent of the legislation. Girls move from dependency to delinquency system with criminal justice histories that could be avoided. Based on their life histories, victims are prone to become angry or act out when their movement is restricted. This may result in victims turning their anger onto the staff of the locked up facility or institution who are ill equipped to meet the complex trauma needs. Victims then are at risk of entering the criminal justice system for assault and battery or other charges.

Research suggests that perpetrators create environments where victims are forced to form attachments to their offenders for their survival --

even in the face of abuse and violence.<sup>6</sup> As a result, the bond between the pimp/trafficker and the exploited child is often difficult to sever making this population prone to run away or relapse, similar to the phenomenon in substance abuse treatment programs.<sup>6</sup>

Further, we assert that the involuntary hospitalization of CSEC victims is not an alternative to effective interventions. The Baker Act is intended to provide psychiatric hospitalization for mental illness when someone is a danger to themselves or others. The Marchman Act allows for hospitalization for youth in need of substance abuse services. Use of the Baker Act or Marchman Act legislation is a disservice for this target population. Victims of sexual abuse experience feelings of stigmatization, powerlessness, traumatic sexualization and betrayal.<sup>7</sup> The demeaning nature of mandated inpatient hospitalization, and the stigmatization, and powerlessness inherent in inpatient treatment creates an environment that may further traumatize the victim.<sup>8</sup> As a result, there is an immediate need for the development of a gender-responsive, developmental appropriate and therapeutic model to address the needs of CSEC victims.

## **2 Continue prosecution of sex traffickers and johns.**

We must continue to uphold the state laws in place to prosecute offenders and reduce demand. Holding perpetrators accountable reduces the likelihood of re-offense/re-victimization of current victims and/or new victims. For example, statute 787.06 establishes that any person who uses coercion for commercial sexual activity with a minor or for the transfer or transport of any individual from outside this state to within the state is punishable by a felony in the first degree. This statute also clarifies that any person who engages in commercial sexual activity in which any child under the age of 15 is involved, commits a life felony. In addition, Safe Harbor Act section 796.07, requires any person who

is found guilty of soliciting, inducing, enticing, or procuring a youth to commit prostitution, lewdness or assignation shall be "assessed a civil penalty of \$5,000."

## **3 Appropriate funding for quality safe houses.**

Earmark adequate funding for two high quality therapeutic safe houses in South Florida and in the North Florida Region respectively. In the state of Florida, these are the two areas with the greatest need for services. These staff secure safe houses will require the highest trained staff, best clinicians who implement service delivery protocols that deliberately address the multiplicity of needs of identified victims. This may include PTSD, trauma, substance use, runaway behaviors and relapse. Further, it is critical that trained survivor mentors serve as a first responder when a victim is identified either through law enforcement, DJJ, DCF, shelter, schools, hospitals, etc. to gain trust and assist law enforcement with the transport to the closest safe house. The programming model would strategically recruit and train survivor mentors who are geographically located across the state and can respond within two hours in any "catchment area." The program model components of the safe house should include 1) meeting basic needs, 2) intensive care management, 3) mental health counseling and substance about treatment, 4) medical screening/routine care, 5) mentoring with peer survivors, and 6) life skills/job training. Additional funding should be earmarked to assess the number of children served, their needs, and to evaluate outcomes of both pilot safe houses.

## **4 Appropriate funding for specialized training.**

Invest in intensive training to develop skills and increase understanding of the challenges and

<sup>5</sup> Campbell, R. (2005). What really happened? A validation study of rape survivors' help-seeking experiences with the legal and medical systems. *Violence & Victims*, 20, 55-68.

<sup>6</sup> Burke, M.C. (2012). Human trafficking: An overview for law enforcement. *Law Enforcement Executive Forum: Human Trafficking*, 12, 1-178.

<sup>7</sup> Finkelhorn, D. & Browne, A. (1985). The traumatic impact of child sexual abuse: A conceptualization *American Journal of Orthopsychiatry*, 55, 530-541.

<sup>8</sup> Fromuth, M.E. & Burkhart, B.R. (1992). Recovery or Recapitulation? *Women & Therapy*, 12(3), 81-95.

complex needs of this population. Specialized training should be mandatory for all who interface with CSEC victims from first responders and healthcare providers to judges and school administrators. Critical areas of focus include identifying victims and protocol for utilizing survivor mentors as first responders, securing victim services, understanding issues specific to this population, and establishing mechanisms for building trusting and therapeutic relationships with victims/survivors.

Policymakers play a critical role in choosing to be informed and act on behalf of the best interests of girls. Florida can get on a better track in implementing the Safe Harbor legislation

and expanding the reach of services in a trauma informed and fiscally responsible manner. To address the growing number of victims identified in our state, we need practices informed by experts, resources for local communities to effectively respond and to increase the number of potential adults who can build strong relationships with girls and are available when girls need them. These types of relationships and therapeutic environments will impact how long a girl stays, when she returns, and her safety with the ultimate goal of replacing her connection with the pimp with a healthier, more adaptive and trusting relationship.

## About the Delores Barr Weaver Policy Center

Headquartered in Jacksonville, Florida, the Delores Barr Weaver Policy Center (Policy Center) is led by Dr. Lawanda Ravoira, one of the country's foremost experts in gender-responsive trauma informed care. Ravoira rescued sex trafficked children off the strip in Ft. Lauderdale, was a key staffer in a national organization serving runaway and homeless youth, and grew the Florida based PACE Center for Girls organization from 3 to 20 centers. The Policy Center engages communities, organizations and individuals through quality research, community organizing, advocacy, training and model programming to advance the rights of girls and young women, especially those in the justice and child protection systems.

The position statement was extracted from a forthcoming research brief, *Facing Risk, Runaways, and Relapse* that will be available through the Policy Center in February 2014.

The Delores Barr Weaver Policy Center is focused on the specific needs of girls and calls for action to fully address Florida's sexually exploited girls while always acting in the girl's best interest.

In keeping with best practices, the Policy Center has researched effective policies, practices and programming models throughout the country specific to effectively addressing the multiplicity of needs of victims of sex trafficking. Our goal is to identify the most effective policies and services and bring those practices to our local communities.

The Policy Center has earned national recognition for leading-edge research, quality training and model direct services programs. Effective advocacy initiatives are undertaken through a strategic alliance with The Children's Campaign and Voices for Florida Girls.

For more information, contact: Dr. Lawanda Ravoira

904.423.1560

lravoira@seethegirl.org



1022 Park Street, Suite 301  
Jacksonville, FL 32204  
904.598.0901 fax 598.0902  
www.seethegirl.org