Unaccompanied Homeless Youth and Sex Trafficking:

Follow up to "Estimating the Magnitude of Sex Trafficking Risk and Victimization of Juveniles and Young Adults"

- City of Milwaukee -

-January 1, 2013 through December 31, 2016-

A Supplemental Report by the Milwaukee Homicide Review Commission, Medical College of Wisconsin Institute for Health & Equity, Milwaukee Sexual Assault Review, and Milwaukee Police Department – Sensitive Crimes Division

December 9th, 2018

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Collaborative Rapid Advocacy for Youth (CRAY) informed recommendations from advocacy perspectives and provided additional interpretations of the data based on their experiences and expertise in social service provisions.

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Executive Summary

This report is a supplement to the March 2018 report, *Estimating the Magnitude of Sex Trafficking Risk and Victimization of Juveniles and Young Adults in the City of Milwaukee*. When youth are absent without leave (AWOL) from an out of home care (OHC) placement, they are considered unaccompanied and homeless as they are without adequate stable housing and appropriate adult supervision. Youth who are staying with someone who is not a legal guardian or living on their own before age 18 years old (not including those in an independent living placement) are also considered an unaccompanied homeless youth in this report. This places them in a position of extreme vulnerability to sex trafficking victimization. A review of official Milwaukee Police Department (MPD) incident reports from January 1, 2013 through December 31, 2016, identified 85 individuals as confirmed or believed to be victims of sex trafficking with a history of being reported as a missing person/AWOL at least one time while placed in OHC.

Key statistics:

- The majority of the sample (n = 85) was African American/Black (75%), female (97%), and confirmed victims of sex trafficking (94%).
- These individuals were reported as missing persons to MPD on 765 occasions (range: 1, 31; mean = 9).
- 61% (52) were listed as victims of sexual assault at least once (mean age: 15.3 years old).
 - The number of reported incidents of sexual assault victimization ranged from one to 11 (mean = 2.2).
- 24% (20) were listed as victims of domestic violence at least once (mean age: 18.12 years).
 - The range of reported battery/DV incidents of victimization was between one and five (mean = 1.8).
- 33% (28) were listed as victims of child abuse at least once (mean age: 14.87 years).
- 86% (73) of the victims were identified as victims, suspects, or witnesses of other reported incidents with MPD that do not include sex trafficking, sexual assault, battery, physical abuse of a child, drugs, and missing person's incidents.
- Over half (55%) had an indicator of cumulative trauma identified in an MPD report at age 13 or younger.

Introduction

In March 2018, the Milwaukee Homicide Review Commission (MHRC), Milwaukee Sexual Assault Review (MSAR), Medical College of Wisconsin - Institute for Health and Equity, Rethink Resources, and the Milwaukee Police Department (MPD) – Sensitive Crimes Division, authored a report that estimated the magnitude of sex trafficking risks and victimization of juveniles and young adults in Milwaukee. The goal of this report was to establish a baseline to inform future interventions for individuals who are victims and survivors of sex trafficking. It found that at least 340 individuals 25 years old or younger were confirmed or believed to be victims of sex trafficking between January 1st, 2013 and December 31st, 2016. Additionally, it found that 59% of the total victims had a history of being reported missing to MPD at least once and, of those with at least one missing report, 59% were reported missing from out of home care (OHC) one or more times. The purpose of this report is to supplement the March 2018 report and offer additional data and analyses of victims identified in the first report with involvement in OHC and histories of running away/AWOL or becoming homeless and unaccompanied.

When a youth is placed in out of home care (OHC) in Milwaukee County, the State of Wisconsin assumes legal responsibility for the care of that youth. According to the Wisconsin Department of Children and Families (DCF), there are several circumstances in which youth may be placed in OHC (Department of Children and Families, 2017). If a case worker determines there are safety concerns that cannot be controlled in the home and the youth is at risk, they may be placed in OHC through a court order or voluntary placement agreement with the parents/guardians. Youth considered to be uncontrollable by a parent(s), habitually truant from school or a dropout, continually truant from home, who committed a delinquent act before age 10 or are deemed not responsible or competent may also be placed.

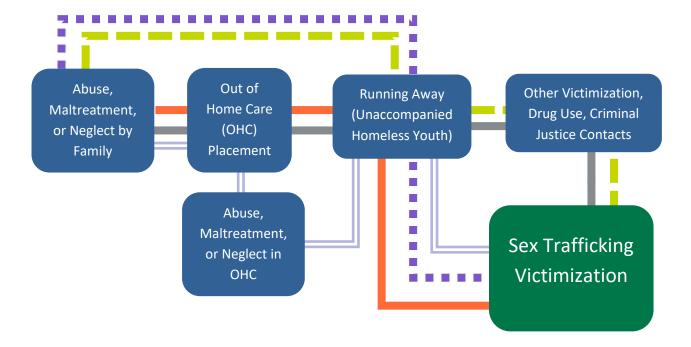
Standard OHC placement includes foster homes, group homes, residential care centers, shelter care, and for children in Milwaukee County, kinship care. Foster care is in home care provided by licensed foster parents that is usually temporary and provides families with time to make changes so the youth can return home. Group homes in Wisconsin are licensed by DCF and provide full time care for five to eight children or youth. A residential care center is also licensed by DCF and provides care and treatment for youth and young adults. Shelter care provides short term and non-secure residential care of youth who have pending court action, are under a voluntary placement agreement or children in need of respite services (DCF, 2017). Kinship care places a youth with a relative when they are unable to live with a parent. The standards for group homes, residential care centers and shelters are codified in Wisconsin Administrative Rules which provides controls on general provisions, personnel, admission and discharge of residents, as well as resident care, safety, and rates.

Youth in OHC have instability before, during, and after their placement and this instability increases as they age (Magnuson et al., 2017). Many youth in OHC have experienced a multitude of traumas in their lifetimes including abuse, neglect, abandonment, and family involvement in criminal activities (Benoit-Bryan, 2011; Courtney, Terao, & Bost, 2004; Kim et al., 2015). This trauma is often compounded when youth are removed from their families by child protective services and placed in OHC. These youth are more likely to run away than those in the general population (Dworsky, Napolitano, & Courtney, 2013; Sedlak, Finkelhor, Hammer, & Schultz, 2002) and once they run away, it is likely they will run again (Nesmith, 2006). In addition, Crosland and Dunlap (2015) stated the "dysfunctions" in OHC have contributed to the high number of youth who run away due to victimization within the system (p. 1699).

The rationale for youth running away and becoming unaccompanied homeless has been studied for decades and the simplest explanation for this behavior is they are either running to something or away from something. For example, youth placed in OHC may be running back to their families of origin while others may be running away from abuse, neglect, and strict rules they are experiencing in OHC. Crosland, Joseph, Slattery, Hodges, & Dunlap (2018) conducted interviews with professionals involved in the child welfare system, schools, and youth/young adults who ran away from OHC. Three themes were developed to explain why youth run away: social supports, normalcy, and activities. Social supports are human interactions that include "affect, affirmation or aid" (p. 38) and come from having relationships with people such as family and friends. Normalcy involves participation in activities that non-system youth participate in, such as caring for siblings or cooking meals, which may be limited for those in OHC. Activities consist of events that a youth would enjoy being involved in, such as visiting friends, attending parties, or going to the movies. Many youth say they go AWOL from OHC to attend these outside activities.

There are several potential consequences to youth running away and/or becoming unaccompanied and homeless, including sex trafficking, survival sex, other victimization, drug use, and involvement in the criminal justice system (Heerde et al., 2014; Whitbeck et al., 2016; Heerde and Hemphill, 2016; Sarri, Stoffregen, & Ryan, 2016; Yoder, Bender, Thompson, Ferguson, & Haffejee, 2014). The positive relationship between unaccompanied homeless youth and involvement in sex trafficking is well-documented (Countryman-Rosswurm & Bolin, 2014; Estes & Weiner, 2002; Fong & Cardoso, 2010; Halcon & Lifson, 2004; Hampton & Lieggi, 2017; O'Brien, White, & Fraga Rizo, 2017; Tyler & Johnson, 2006). For the purposes of this report, we will only focus on sex trafficking. Many youth run away and are unaccompanied homeless both before and after their involvement in trafficking. Figure 1 depicts the possible pathways for unaccompanied homeless youth to sex trafficking victimization.

Figure 1: Possible Pathways for Unaccompanied Homeless Youth to Sex Trafficking Victimization



Using the Data

By collecting data on sex trafficking, we hope to achieve the mission of working together to reduce the prevalence of sex trafficking and associated crimes through innovative interagency collaboration. The data presented in the primary sex trafficking report, and this and other supplementary reports, can be used to inform new and existing violence reduction programs, policies and practices. Examples of ways the data can be useful to different stakeholders can be found below.

Stakeholder	Data Usage
Local Residents	 Learn to identify and appropriately respond to risk factors and indicators of sex trafficking Connect residents with current initiatives focused on sex trafficking prevention efforts Develop a social media awareness campaign Create educational and awareness materials and activities
Law Enforcement	 Use data to inform specialized trainings for various levels of law enforcement, improving law enforcement's understanding of sex trafficking Develop protocols and best practices to identify, respond to, and investigate sex trafficking, ensuring evidence preservation and more successful prosecutions
Medical Providers	 Raise awareness of the magnitude of sex trafficking in Milwaukee among medical providers for educational purposes Support the need for additional resources, policies, and programs within medical institutions to address sex trafficking Identify risk factors and indicators of sex trafficking to inform prevention and identification efforts
Non-Profit and Social Service Providers	 Demonstrate problem severity and need when writing a grant proposal using Milwaukee-specific data. Assess intervention strategies for gaps and change or enhance existing efforts aimed at reducing sexual violence and related crimes Use Milwaukee-specific data to supplement internal and external evaluations
Criminal Justice Agencies	 Use data to develop trainings for new ADAs to successfully prosecute trafficking cases Understand characteristics of sex trafficking that may be visible in other justice-related settings (i.e. corrections)
Media	 Dispel myths and inaccurate perceptions about sex trafficking Disseminate information to further awareness of sex trafficking-related issues

Methodology

This report employed similar methodology as the March 2018 report. The report examined sex trafficking incidents that occurred in the City of Milwaukee between January 1, 2013 and December 31, 2016. The population included individuals who were ages 25 or younger, confirmed or believed to be involved in sex trafficking in Milwaukee, and who had contact with MPD which resulted in the filing of an incident report. A full description of the methodology can be found in the original report. A total of 340 individuals were confirmed or believed to have been sex trafficked between 2013 and 2016. Of the 340, 85 individuals had been reported as a missing person from OHC at least once in their lifetimes. These 85 individuals are the sample for this supplemental report.

For this report, we employed additional search strategies including looking up misspellings of the individual's name and searching the individual in the RMS system using only the first initial of their first name and full last name. This additional search yielded more law enforcement incident reports than our original search for the March 2018 report. This provided a more detailed look at the victims, including information beyond that which was provided in the initial police incident report that identified their involvement in sex trafficking.

According to the Rape, Abuse, & Incest National Network (RAINN), the term "victim" tends to be used to describe "someone who has recently been affected by sexual violence; or when referring to aspects of the criminal justice system" (Rape, Abuse, & Incest National Network, 2018). The term "survivor" tends to be used to refer to "someone who has gone through the recovery process, or when discussing the short-or long-term effects of sexual violence" (Rape, Abuse, & Incest National Network, 2018). For the purposes of this supplement, we use the term "victim" to describe individuals who have experienced sex trafficking.

Results

Demographic Profile

Table 1 displays the descriptive statistics for sex/gender and race/ethnicity of the sample. The majority of those reported missing from OHC were females. It is possible that the actual number of male trafficking victims who were reported missing from OHC is an underreport as male victims are often reluctant to report being sexually victimized. This low number of male victims also runs contrary to what other local organizations such as Wraparound Milwaukee and Pathfinders are seeing. In addition, the data were limited in capturing gender identity as MPD does not have a consistent way to document transgender individuals. Two occurrences were identified only when a caseworker described the missing juvenile as transgender.

Table 1. Frequency and Percentages of Samples Sex/Gender and Race/Ethnicity

Demographics	N	%
Gender		
Female	82	96.5
Transgender	2	2.4
Male	1	1.2
Race		
African American/Black	64	75.3
White	11	12.9
Asian	2	2.4
Hispanic	4	4.7
Multicultural	4	4.7

Note. N = 85.

History of Being Reported as a Missing Person to MPD

In the original report, 136 (59%) of the sample had a history of being reported as a missing person to MPD. About 62% (85) of these individuals had at least one missing report filed while they were placed in OHC and are the sample for this report. These 85 individuals accounted for 765 unique missing persons incidents filed with MPD; table 2 shows the frequency of these incidents. Of the 765 missing persons incidents, 500 (65%) were reported while an individual was living in a group home; 172 (22%) while they were living with parents; 49 (6%) while they were placed in foster care; 34 (4%) while they were living with another family member; and 10 (1%) while at another location, such as school. The mean age of being reported as a missing person was 15.46 years (range: 10.26, 19.99).

Table 2. Frequency and Percentage of Reported Missing Persons Incidents

Number of Reported Missing Persons Incidents	N	%
1	7	8.2
2	7	8.2
3	5	5.9
4	7	8.2
5	10	11.8
6	6	7.1
7	4	4.7
8	7	8.2
9	2	2.4
10	1	1.2
11	3	3.5
12	3	3.5
14	2	2.4
15	6	7.1
16	4	4.7
17	2	2.4
18	1	1.2
19	1	1.2
21	1	1.2
23	2	2.4
24	1	1.2
29	1	1.2
30	1	1.2
31	1	1.2

Note: N = 85.

History of Reported Sex Trafficking Indicators to MPD

The 85 individuals in this report accounted for 167 MPD incident reports in which indicators of sex trafficking were identified between 2013 and 2016. The trafficking indicators were based on criteria contained in the *Wisconsin Child Sex Trafficking and Exploitation Indicator and Response Guide* (DCF, 2017). Eighty individuals were confirmed victims of sex trafficking and five were believed to be victims of sex trafficking. Figure 1 displays the frequency in which each individual was confirmed or believed to be a victim of sex trafficking between 2013 and 2016; over half of the sample (51%) was identified in two or more incidents. The mean age of the victims at the time of the trafficking incident was 16.48 years, with a range from 12.21 to 24.2 years old.

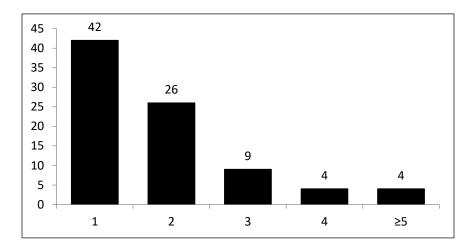


Figure 1. Number of incidents in which individuals were confirmed or believed to be victims of sex trafficking based on indicators in an MPD incident report between 2013 and 2016.

Figure 2 displays the year(s) in which individuals were confirmed or believed to be a victim of sex trafficking. Twenty individuals (24%) were identified as victims of sex trafficking in multiple years. They are included in the count for every year they were trafficked. One individual was identified as a victim of sex trafficking in all four years (2013, 2014, 2015, 2016).

While it appears that more individuals were trafficked in 2016 versus 2013, this figure does not consider the multitude of factors that may impact this number. For example, the amount of resources law enforcement allocated towards enforcing prostitution and sex trafficking may impact the number of victims identified annually. Additionally, improved methods in identifying victims of trafficking may also impact annual stats.

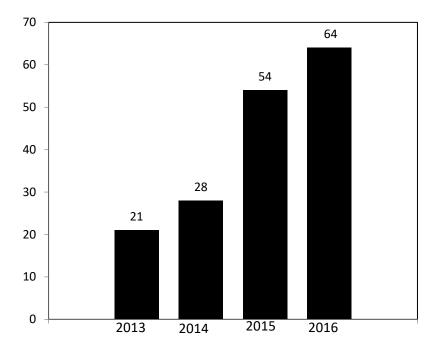


Figure 2. Number of incidents in which individuals were confirmed or believed to be victims of trafficking based on indicators in reported incidents to MPD between 2013 and 2016 by year.

The 167 incident reports filed by MPD in which sex trafficking indicators were present accounted for 243 unique criminal offenses. When several crimes are perpetrated at about the same time and location, one police incident report is filed which notes all of the crimes committed. For example, if an underage victim disclosed involvement in sex trafficking as well as sexual assault by the pimp, MPD would record this in one incident report as Sex Trafficking of a Child (Wisconsin State Statute 948.051) and Sexual Assault of a Child (Wisconsin State Statute 940.225). Table 3 displays the criminal offenses recorded in the 167 sex trafficking incidents identified between 2013 and 2016.

Table 3. Frequency of criminal offenses recorded in the sex trafficking incidents identified between 2013 and 2016

Criminal Offenses	N	%
Missing Persons Report	41	16.9
Sexual Assault of a Child - 948.02/ 948.09	40	16.5
Trafficking of a Child - 948.051	33	13.6
Child Enticement – 948.07/Soliciting a Child – 948.08/Exposing Genitals to a Child – 948.10	32	13.2
Prostitution – 944.30/944.32/944.34 Pandering – 944.33	16	6.6
Kidnapping – 940.31/False Imprisonment - 940.30	15	6.2
Sexual Assault – 940.225	14	5.8
Human Trafficking – 940.302	13	5.3
Physical Abuse of a Child – 948.03	8	3.3
Carrying Concealed Weapon - 941.23 / Endangering Safety – 941.20/941.30 Felon in Poss. of a Firearm – 941.29	7	2.9
Poss. Controlled Substance – 961.41/Keeper Drug House – 961.42	7	2.9
Battery – 940.19 / Strangulation – 940.235	5	2.1
Robbery – 943.32	3	1.2
Bail Jumping – 946.49	3	1.2
Obstructing an Officer – 946.41	2	.8
Tattooing of Children – 948.70	1	.4
Intimidation of a Witness – 940.45	1	.4
Homicide – 940.01	1	.4
Crisis Intervention	1	.4

Note: N=243.

Victim History of Reported Sexual Assault with MPD

Fifty-six individuals (66%) were involved in a total of 129 incidents of reported sexual assault to MPD as a victim (116 incidents), suspect/arrestee (5 incidents), or witness (8 incidents). Sixty-one percent (52) were victims of a sexual assault at least once. All but two of the victims were confirmed victims of sex trafficking. The number of reported incidents of sexual assault victimization ranged from one to 11 (mean=2.2). The mean age of sexual assault victims at the time of their assault was 15.3 years and the age range was 7.3 to 21.5 years old.

All five of the victims who were listed as suspects in a reported incident of sexual assault were confirmed victims of trafficking. Three of these individuals were also victims of a sexual assault prior to becoming a suspect. The mean age at the time of their involvement as a suspect was 14.1 years and the age range was 12.53 and 15.33 years. Seven victims also witnessed eight unique incidents of sexual assault. The mean age of witnessing an incident of sexual assault was 15.74 years and the age range was 12.88 to 19.89 years.

Victim History of Reported Incidents of Battery/Domestic Violence with MPD

This analysis included batteries that were not domestic violence-related, batteries that were domestic violence-related, incidents with a domestic abuse modification, and strangulation and suffocation incidents. Municipal battery incidents which resulted in the issuance of a municipal citation or child abuse incidents were not included.

Forty-one individuals (48%) were involved in a total of 76 incidents of battery and domestic violence reported to MPD; this involvement was as a victim (36 incidents), suspect/arrestee (19 incidents), or witness (21 incidents). (Note: Six individuals had a history of being both a victim and witness, a witness and suspect, or victim and suspect in prior battery complaints). Twenty-four percent (20) were a victim of battery at least once in their lifetimes. All but one battery victim were confirmed victims of sex trafficking. The mean age of battery/ DV victims at the time of the assaults was 18.12 years of age and the age range was from 12.79 to 21.43 years. The range of reported battery/DV incidents of victimization was between one and five and the mean number of battery/DV incidents reported by victims was 1.8.

Of the 14 individuals who were suspects/arrestees in 19 reported incidents of battery or DV, one was a male and the remainder female. All but one suspect were confirmed victims of trafficking. The mean age of involvement as a battery/ DV suspect or arrestee was 16.69 years and the range was between 12.83 to 24.20 years.

Fifteen individuals had involvement as a witness in 21 battery/ DV complaints. Thirteen were confirmed victims of trafficking. The mean age of those who witnessed a reported battery/ DV was 14.63 years and the age range was between 7.33 to 22.81 years.

Victim History of Reported Child Abuse to MPD

It should be noted not all allegations and substantiations of child abuse will rise to the level of law enforcement involvement and may be handled directly by the Division of Milwaukee Child Protective Services (DMCPS). For this reason, it is likely that incidents of reported child abuse are underrepresented in this report.

Twenty-eight individuals (33%) had prior involvement in 34 reported incidents of child abuse as a victim (28), suspect (3), and/or witness (3). The mean age of child abuse victims at the time of the abuse was 14.87 years, and the age range was between 10.89 to 17.60 years. All were confirmed victims of sex trafficking.

Three individuals were suspects in a child abuse case. The age range for child abuse suspects was between 15.33 to 15.95 years (mean=15.7 years). Three individuals were also witnesses to child abuse. The mean age of witnessing a child abuse incident was 15.17 and the age range was between 11.57 to 20.69 years. All suspects and witnesses to child abuse were confirmed victims of sex trafficking.

Victim History of Reported Drug Crimes to MPD

To determine a history of reported drug crimes, MPD incident reports and Milwaukee Municipal Court data were analyzed. The drug crimes included possession of drug paraphernalia, possession of a drug (i.e. heroin, cocaine, or marijuana), possession with intent to deliver, and drug trafficking. The information obtained through Milwaukee Municipal Court was based on drug related citations that resulted in charges being issued by the City Attorney's Office. Citations that did not result in charges are not listed on the public access website and were not included in this data.

Thirteen individuals (15%) were involved in 24 felony drug incidents as a victim (4), suspect (2) or witness (18); all of these individuals confirmed victims of sex trafficking. The mean age at the time of these incidents was 18.76 for a felony drug related arrest, 16.5 years for witnessing a drug related felony, and 16.21 for being a victim in a drug related felony. Nine individuals also received a total of 11 citations for municipal drug charges.

Many victims of sex trafficking report illegal drug addiction as one of the factors that contributed to their victimization. This section does not report that information. Instead, it indicates the number of victims who have a history of drug related crimes in Milwaukee and *not* the number who use or abuse illegal substances.

Victim History of Other Reported Offenses to MPD

Approximately 86% (73) of the individuals identified in this report accounted for 331 other reported incidents with MPD that do not include sex trafficking, sexual assault, battery, physical

abuse of a child, drugs, and missing person's incidents. These other incidents identified individual involvement as victims (97), suspects/arrestees (132), or witnesses (102).

Fifty-two individuals (71%) were identified as victims of other reported incidents to MPD. The mean age of victimization was 15.80 years but ranged from 7.36 to 22.58 years. The mean number of other reported victimizations to MPD was 1.86 and the range was between one to six reported incidents of other victimization. All victims of other incidents were confirmed victims of trafficking.

Forty-three individuals (59%) were identified as a suspect/arrestee in 132 other reported incidents to MPD. The mean age at the time of a reported incident in which the individual was a suspect was 16.61 years, and the age range was between 11.8 to 24.6 years. The mean number of reported incidents of other offenses in which the individual was a suspect is 3.21 and the range was from one to twenty-nine incidents.

Forty-nine individuals (67%) were identified as witnesses in 102 other reported incidents. The mean age of being a witness was 16.32 years and the age range was between 8.02 to 23.57 years. The mean number of other incidents witnessed was 2.08 and the range was between one to seven incidents.

Victim History of First Reported Indicator of Cumulative Trauma or Vulnerability

A reported indicator of cumulative trauma or vulnerability that puts an individual at risk for sex trafficking victimization is defined for this report as an event for which a police report was filed and indicates a traumatic event in an individual's life. This trauma is defined as cumulative because it has ongoing, negative consequences later in the person's life. The types of events analyzed included witnessing or being the victim of a sexual assault, battery/domestic violence, child abuse, sex trafficking, a felony drug related offense, other reported incident, or the first incident in a series of missing persons reports within a six-month period. These indicators are similar to measures identified as adverse childhood experiences in the Adverse Childhood Experiences survey (ACEs). However, not all of these traumatic incidents occurred during the individual's childhood and being reported as a missing person is not an ACE indicator. The missing report history is included as an indicator because if an individual is reported missing more than once in a six-month time frame, it is likely they are running away. The mean age at first reported indicator of cumulative trauma is 13.65 years and the age range is 7.33 to 18.03 years. Figure 3 identifies the age at the first reported indicator of cumulative trauma or vulnerability. Over half (55%) had an indicator of cumulative trauma identified in an MPD report at age 13 or younger.

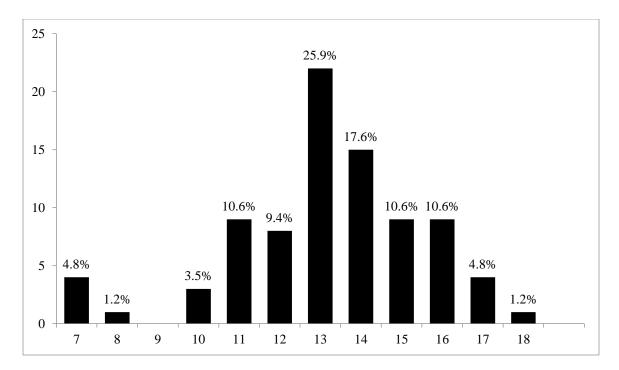


Figure 3. Age at first reported indicator of cumulative trauma or vulnerability identified in an MPD report that put an individual at risk for sex trafficking

Vignettes

The following vignettes put the data from this report into context and illustrate how individuals reported as a missing person/AWOL while placed in OHC can become a victim of sex trafficking. These are not the stories of specific individuals, but rather representative composites developed during the review of police reports.

#1: The victim is a juvenile female who has been consistently placed at one group home and occasionally goes AWOL, each time returning after one to three days. While AWOL, she met the trafficker on the street. They initially established a boyfriend/girlfriend relationship and the trafficker began to supply her with marijuana and alcohol. He requested that she "work" for him since they were in a relationship. He took photos of her and placed them on Backpage (a classified advertising website that was seized by the FBI in April 2018). Her "dates" (the exchange of sex for something of value) occurred at hotels and private residences. She eventually disclosed her trafficking victimization to a trusted adult.

#2: The victim is a juvenile female who has been placed at multiple group homes over the past year. She had a trauma history prior to her involvement in OHC which led to behavior problems and a criminal record. She routinely comes and goes from the group home. She met her trafficker while AWOL from the group home with another female juvenile resident. The trafficker took photos of both young girls and placed them on Backpage. He also had them walking in an area of the city known for commercial prostitution of adults. "Dates" took place at hotels, private residences and vehicles. The victim disclosed her sex trafficking victimization to police during a sexual assault investigation.

Discussion

Limitations

The limitations of this study and the data collected have implications for the findings presented and the conclusions and recommendations made. Where possible, efforts were made to minimize the limitations. The data collected is reflective of established partnerships existing within the systems we are attempting to study and improve their responses to sex trafficking. A list of limitations to the study can be found listed in the original report.

Discussion

Consistent with prior research, we found that the individuals included in this report had a history of trauma, with 55% reporting a traumatic event to MPD before age 14 years old. Since only trauma reported to law enforcement was included in this number, it is likely an underestimate. This also does not include the potential trauma every individual included in this sample may have sustained from being placed and living in out of home care. This finding further emphasizes the role of trauma as an important risk factor for sex trafficking victimization.

Additionally, these individuals all had involvement in at least two systems (law enforcement and child protective services), indicating potential missed opportunities for intervention and prevention. Since the individuals in our sample were all living in out of home care, they had to have at least one significant interaction with child protective services that resulted in their removal from the home as well as any ongoing services they received while placed in out of home care. All of the individuals included in this report also had at least one missing report filed with MPD, with an average of nine missing reports. Beyond the missing reports, most individuals had at least one additional interaction with MPD. For example, 86% were listed as a victim, suspect/arrestee, and/or witness for an incident that did not include a sexual assault, battery, physical abuse of a child, drug crime, or missing person's report. Given that sex trafficking is clandestine in nature, it is critical that we seize any opportunity for prevention and intervention when high risk individuals interact with any system.

It is important to note that there have been several changes to DCF policy and practice in the years following those included in this report (January 1, 2013 - December 31, 2016), with more changes scheduled over the next two years, that may improve identification of and care for high risk individuals or victims of sex trafficking. For example, as was mentioned in the original report, effective May 2017, child protective services (CPS) agencies are now required to investigate all cases of alleged child sex trafficking, regardless of the type of relationship between alleged victims of child sex trafficking and alleged maltreaters. It also requires law enforcement to report all suspected cases of sex trafficking of a minor to the local CPS agency. In addition, the federal Family First Prevention Services Act (FFPSA) was passed and signed into law on February 9, 2018. The FFPSA allows for federal Title IV-E reimbursement for prevention

services and raises standards for congregate care (i.e. group homes). As these changes have significant programmatic and fiscal implications for Wisconsin's child welfare system, Wisconsin is exercising the two-year delay option to allow for time to plan and implement the required changes. Our recommendations for this report should be placed in the context of these changes.

Recommendations

As plans for the changes required under the Family First Prevention Services Act are made, we ask that the following be considered:

Increase in-person interaction requirements between caseworkers and youth in the child welfare system and/or set up a system that ensures youth have consistent in-person interaction with community supports: Currently, children involved with the child welfare system have at minimum monthly meetings with their caseworkers. For many youth, this is the only time they see their caseworkers, unless there is a serious issue, such as when the child is reported missing or is hurt. Therefore, some younger juveniles may run away or go AWOL from their placement facility due to lack of attention, placing them in a vulnerable position that may cause them to be more susceptible to sex trafficking victimization. While many caseworkers meet with the children on their caseload more frequently than the minimum required by their agency, there is a lack of consistency with how often youth have face time with their caseworkers. Caseworkers should be required to visit in person with their clients who are at high risk for sex trafficking victimization at least once per week. Realizing caseworkers have heavy caseloads that may prevent them from meeting the needs of a high risk child on their caseload and that these children may have trauma from their interactions with child welfare, there should be a team-centered approach implemented incorporating support from long-term caseworkers, family support specialists, medical and psychological health support, youth advocacy, family, and other community support based on the needs of the child identified by both the team and the child.

Consider safety concerns and support structure when deciding placement for victims of sex trafficking: For most children living in group homes, it is best to keep them living in their own communities. For victims of sex trafficking, however, this may not be recommended due to safety concerns for the youth. There should be explicit consideration for placement of victims of sex trafficking who are in the child welfare system, and if it is safer to keep them in their communities or to place them far away from where they were exploited. The academic literature indicates that juvenile victims of sexual exploitation have different needs than victims of child sex trauma (Cole, Sprang, Lee & Cohen, 2016). Group homes in Wisconsin have "target groups" they seek to serve, including AODA, Children in Need of Protection (CHIPS), children with emotional and behavioral disorders, delinquent children, children with a history of sexual abuse, etc.; victims of sex trafficking may fit several of these categories due to their compounded trauma and compounded needs. Since each child's situation is unique, it is important to engage the youth in discussions surrounding his/her placement as well. If it is decided that the youth will be placed far away, it is critical that a transition plan be put in place for when they return to their community.

Alternatives to group homes: Many social service partners expressed a desire for alternatives to group homes for victims of sex trafficking, including specialized care safe homes with trained, professional foster parents or trained homes outside the foster care system that would be able to provide individual level interventions for sex trafficked youth. This individual-level care would also include programming that could address the manipulation and trauma victims have endured. These safe homes may also include support from adult victims of trafficking, who would be able to relate to these youth in a way that a non-victim could not. Some victims who have criminal histories or histories with child welfare for caregiver abuse or neglect would be able to attend training and become licensed through a rehabilitative review process through the Department of Children and Families (DCF). There is currently one specialized safe home in Milwaukee providing individualized care for juvenile victims of sex trafficking. This Wraparound program, implemented through La Causa, has touted early success and should be evaluated and expanded.

Legislation deeming trafficking of a child placed in out of home care an egregious event:

According to 2009 Wisconsin Act 78, the Department of Children and Families - Division of Safety and Permanence (DSP) is required to notify the public in cases of child death, serious injury and egregious incidents due to maltreatment or suspected maltreatment. An incident of egregious abuse or neglect is defined in Wisconsin Statute 49.981(7)(cr)(1b) as "an incident of suspected abuse or neglect...involving significant violence, torture, multiple victims, the use of inappropriate or cruel restraints, exposure of a child to a dangerous situation, or other similar, aggravated circumstances." Act 78 also requires DSP to provide a quarterly and annual summary report of all children in OHC who have been sexually abused. An incident in which a youth placed in OHC is a victim of sex trafficking should be legally designated an egregious event so DSP is required to review the incident and report the results to the community. This is not currently the practice since sex trafficking often occurs when youth are away from their placement setting (e.g., AWOL, at school) and Act 78 focuses on incidents that occur at the placement site. Currently, when a youth is sex trafficked away from the placement site, it would be considered a serious offense and reported to the State of Wisconsin Child Welfare Licensing Section.

Impose penalties on group homes that are noncompliant with state standards: Partners expressed concerns of non-compliance with reporting requirements for group homes. As of May 2017, DCF standards indicated a group home must report a juvenile missing within 8 hours to law enforcement and within 24 hours to the National Center for Missing and Exploited Children (NCMEC). They must also report when the juvenile returns and if they were sex trafficked. Although some group homes have stricter internal requirements such as reporting a missing juvenile to law enforcement within three hours, some group homes do not comply with mandated reporting requirements if they know (or think they know) where the juvenile has run off to. There is also a failure to notify law enforcement when a juvenile has returned from missing, so law enforcement data may indicate they are missing for much longer than the time they were actually gone. Punitive measures should be imposed on these noncompliant group homes, up to and including a revocation of their license with DCF. As a preventative measure, DCF should coordinate with local law enforcement and other reliable partners who work with

group homes and conduct a site visit before issuing new or continued licenses. We recommend that DCF perform site visits at group homes with active licenses at least twice annually. Because some group home owners run multiple group homes, it is important they are compliant with DCF requirements before being issued a renewed or new license. Local law enforcement and social service partners would have a pulse on which group homes are compliant with standards, and which are not, based on the nature of their partnership. Law enforcement can also provide them with information on incidents reported at the group home or involving residents of the group home.

Improve training for and communication between group homes and law enforcement: On the law enforcement side of this issue, some group homes and advocates have expressed concerns they are discouraged from reporting a juvenile missing if they are considered a habitual runaway and will likely return within a consistent time frame. Although there are standard operating procedures in place for the communication between group homes and law enforcement, consistent trainings need to be provided for both law enforcement and group homes so they understand and are compliant with the recent changes to state requirements on missing reporting policies. To help build consistent relationships between group homes and law enforcement, there should be a small cadre of officers on each shift at every district to handle missing reports. Additional training should be provided to these officers to identify warning signs of sex trafficking from information given in missing reports. The standard operating procedure related to missing persons should also be updated to include if sex trafficking is suspected by the group home worker. To ensure the accuracy of this, mandatory trainings on identifying indicators of sex trafficking in a group home setting should be provided to group home owners, program managers, and workers.

Limit the number of sex trafficked youth placed in a single group home: Both police narratives and social service partners indicated that recruitment for sex trafficking happens in group homes. One partner described it as the girls "moving from one stable to another." However, as current alternatives to placing juvenile sex trafficking victims into group homes are limited, the number of sex trafficked youth placed in one single group home should be limited. Oftentimes group home workers are unfamiliar with the history of a youth, making improved communication between caseworkers and group home workers crucial. It should be required that a caseworker convey the youth to the group home before being placed there if they suspect sex trafficking or if they believe the child is at risk for sex trafficking victimization.

Develop curricula to build the physical and emotional well-being of youth in group homes, to be implemented in a group home setting: Group homes should consider building on current curricula to improve the safety of the children they serve. Group homes are mandated to offer group sessions (e.g., fitness, nutritional health, job skills, confidence building workshops, etc.) five days per week but there is no consistency in this curriculum. DCF should consider mandating a specific, consistent curriculum aimed at building the physical and emotional health of children in group homes. Also, as these workshops are intended to help youth living in group homes to build healthy skills and relationships but are not mandatory, some of the youth may not be receiving the potential benefits of these workshops. Youth should be required to attend sessions at least twice per week.

Conduct an independent audit of current DCF policies and practices surrounding group homes and implement national best practices moving forward: An independent audit of current group home policies and practices should be conducted to ensure they are current, based in research, and representative of national best practices. The use of best practices results in better outcomes overall and should be incorporated in the planning, implementation and evaluation of all services. This is especially imperative when it comes to the policies and practices of group homes and other OHC placements that provide housing and care for the most vulnerable youth in our community.

Programming support for parents of at-risk youth: While some of the youth were placed in the child welfare system due to an abusive home environment, others entered the system because they were "uncontrollable" to their parents or guardians. The parents of these uncontrollable youth require programming support from social service systems to learn strategies to support their child and help them develop healthy coping and life skills. Currently, DCF contracted agencies, Saint A, and the Milwaukee County Courts Family Intervention Support and Services (FISS) program, provide this support. Additional support from this programming could prevent some youth from becoming involved in the system—a risk factor for sex trafficking. It may also prevent uncontrollable youth from being involved in activities that are risk factors for sex trafficking, including running away from home or going AWOL from out of home care, committing petty or violent crimes, and drug use. There are also prevention opportunities by supporting non-guardian adults in the child's life.

Implement prevention and education programming in schools: Just as there are prevention programs in schools for drugs, high risk sexual activity, suicide, and bullying, awareness curriculums for sex trafficking should be implemented in area schools. The DCF/WI DOJ Anti-Human Trafficking Task Force has recommended two awareness curricula, I Empathize and Prevention Project, which can be implemented in schools. These interventions can occur in the same setting as other prevention curriculums, such as a health class. The goal would be to assist youth with practicing healthy relationships, identifying the warning signs of trafficking recruitment, and providing resources to appropriately take action. Training should also be mandated for school staff who works with children in middle school and high school, the times when youth are most susceptible to sex trafficking victimization. The younger victims identified in this report were in middle school when first groomed by a trafficker. Teachers and school staff are in a unique position to be able to identify at risk youth and victims of trafficking. They may overhear conversations between youth or identify potential indicators through the youth's comportment and the way they dress. They are well-suited to do this because they see the youth on a regular basis. This does not negate the responsibility of other non-guardian adults in a child's life who may not see them as frequently, but they are nonetheless uniquely equipped to identify indicators of trafficking given their relationship to the child.

Improve screening for sex trafficked youth to expedite deployment of support services: For example, Wraparound Milwaukee currently implements a team-centered approach to support the youth they serve. Wraparound currently requires at least one mental health diagnosis as defined by the Diagnostic and Statistical Manual of Mental Disorders (DSM-V) and that at least one parent resides in Milwaukee County for a child to be eligible for services. Operating under

the assumption that sex trafficking constitutes a traumatic event, a protocol should be developed in which youth who are suspected of being trafficked are automatically referred to and screened by Wraparound for eligibility for services. The youth would then have access to wraparound services as well as be referred to other support services based on the needs of the youth.

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