

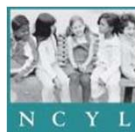
## Innovative, Multi-Disciplinary Approaches to Identifying and Supporting Victims of Human Trafficking

*Beyond the Bench 2017*

December 19, 2017  
San Diego, California



Children's Law Center  
of California  
*Excellence In Advocacy*  
www.clccal.org



 **WEAVE**<sup>™</sup>

## Introductions & Roadmap

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## Introductions

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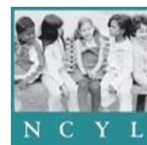
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## Roadmap

- California Statewide Policy Evolution
- Los Angeles County
  - Collaborative Courts
  - Victim Witness Testimony Protocol for CSEC
  - First Responder Protocol for CSEC
  - Detention Protocol for CSEC
- Survivor-Led Advocacy
- Q&A

# CALIFORNIA'S CSEC POLICY EVOLUTION

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## California: CSEC Policy Context

*Recent Shifts in Policy: California invests in child welfare system's capacity to identify and support victims while simultaneously shifting away from criminalization.*

- 2014 → SB 855 (1) clarifies that CSEC *may* be served by child welfare and (2) creates the CSEC Program, funding counties to develop collaborative responses to identifying and serving victims
- 2015 → SB 794 requires ALL counties to implement processes to identify, report, document and serve victims and at-risk children
- 2017 → SB 1322 renders prostitution and loitering with intent charges inapplicable to minors



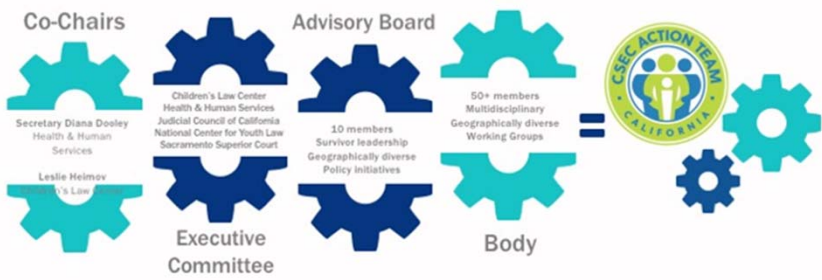
# California: 2017 CSEC Policy Landscape



- No minor can be arrested on prostitution charges
- 38 counties (66%) are implementing child welfare-led multidisciplinary responses and services for CSEC, using \$30+ million in State support
- 58 counties (100%) must:
  - Identify CSEC / at-risk among children receiving CW services
  - Connect them to appropriate services
  - Report as child abuse victims
  - Document relevant data
  - Train social workers and probation officers
  - Expediently locate children missing from care, understand why they left and what happened while they were away



# WHAT IS THE CSEC ACTION TEAM?



## LOS ANGELES COUNTY

Unique Jurisdiction Subject to  
Unique Challenges

### Los Angeles County: Comprehensive Support for CSEC

1. Two specialized trafficking courts
2. Specialized trafficking units within child welfare and juvenile justice
3. Collaborative, county-wide MDT process for CSEC
4. Community based CSEC advocates
5. Innovative protocols



# SPECIALIZED COLLABORATIVE COURTS

*For Commercially Sexually Exploited Children*

## STAR Court

- Succeeding Through Achievement & Resilience
- CSEC delinquency courtroom
- Established in 2012
- To date – served 425 CSEC
- Specialized Judge, attorneys, probation officers and additional advocates

## STAR Court

- Components & Results
  - Weekly MDT meetings
  - Frequent review hearings
  - Reduced time in detention
  - Lower recidivism
  - Continued relationships



## DREAM Court

- Dedication to Restoration Through Empowerment, Advocacy and Mentoring
- CSEC dependency courtroom,
- Established in 2016
- To date – served 200 CSEC
- Specialized Judge, attorneys, social workers, court officers, clerk, court reporter and bailiff



## How Cases Get to DREAM Court

- WIC 300 (b)(2) filings go directly to the CSEC Court
- No “wrong door” referral process
- Criteria



## DREAM Court Multidisciplinary Team (MDT)

- Department of Children and Family Services
- Dependency court attorneys including the CLC , LADL and County Counsel
- Department of Mental Health
- Public health nurses
- Juvenile court physicians
- Education representatives
- Placement representatives
- Survivor advocates
- Probation (where applicable)





## DREAM Court

- Components & Results
  - Weekly MDT meetings
  - Frequent court hearings (once every 4-6 weeks)
  - Non-adversarial
  - Restoration funds



## VICTIM WITNESS TESTIMONY PROTOCOL

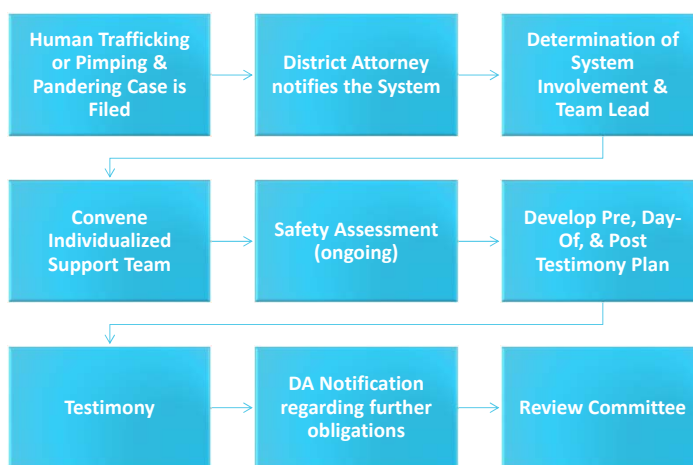
*For Commercially Sexually Exploited  
Children*

## Purpose of the Victim Witness Testimony Protocol

1. Collaborative Support for Human Trafficking Victims
2. Communication among team members
3. Timely notice of relevant changes
4. Proactive Safety Planning
  - Known and potential issues
5. Adequate Preparation
6. Reduction of Re-Traumatization



## VWTP: Phase 1 Overview



## Victim Witness Support Team

- Victim witness support team made of team leads from
  - DCFS
  - Children's Law Center (CLC)
  - Public Defender/Alternate Public Defender
  - Probation
  - District Attorney
  - Department of Mental Health

## Pilot Implementation January 2018

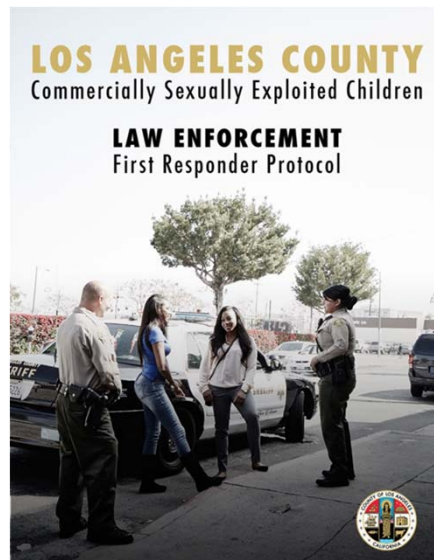
- Initial notification & convening of support team
- Prior to preliminary hearings
- Post-testimony

# LAW ENFORCEMENT FIRST RESPONDER PROTOCOL

*For Commercial Sexually Exploited Children*

## Background: Purpose of the FRP

- Commitment to treat commercially sexually exploited children (CSEC) as victims of child abuse and human trafficking, rather than criminalizing.
  - ✓ Immediate response upon identification
  - ✓ Avoids arrest and detention
  - ✓ Involves youth in safety planning
  - ✓ Fosters collaboration among child-serving agencies

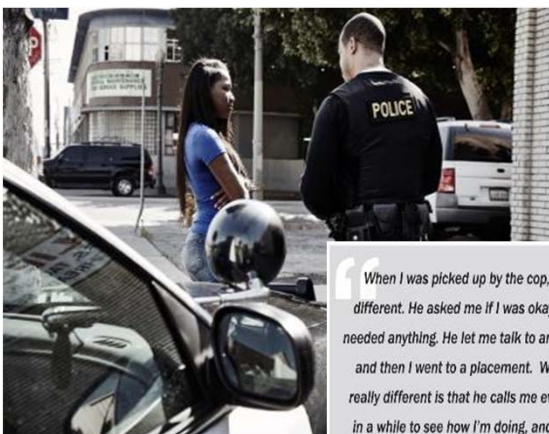


## First Responder Protocol: Law Enforcement

LAW ENFORCEMENT  
interfaces with Child

DCFS HOTLINE  
Mandatory Report  
to DCFS

Transport child to  
Staging area  
(i.e. police/sheriff's station  
or hospital)



“ When I was picked up by the cop, it was different. He asked me if I was okay and if I needed anything. He let me talk to an advocate and then I went to a placement. What was really different is that he calls me every once in a while to see how I'm doing, and lets me know that if I need anything or if I'm ever in a bad situation and need help, to call him.

-YOUTH

## First Responder Protocol: DCFS Response

DCFS Hotline  
Identifies Youth

Initiate Expedited  
Response

DCFS  
MART/Probation  
Child Trafficking Unit  
Dispatched



## First Responder Protocol: Collaborative Response

Specialized Advocate Responds

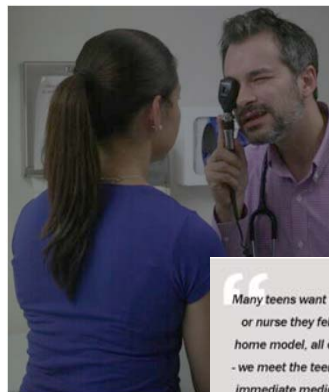
Multi-Disciplinary Meeting

Detention/Return Home / Emergency Housing



## First Responder Protocol: Health Services

DHS Medical Hub



*“Many teens want to stay healthy, but they’ve never had a doctor or nurse they felt comfortable opening up to. In our medical home model, all our specialists practice trauma-informed care - we meet the teen where they are emotionally, we provide their immediate medical and mental health needs, and we begin to build trust in order to empower them to make positive decisions about their health. And some of them have chosen to keep coming back for regular checkups - it’s been very exciting to see.”*

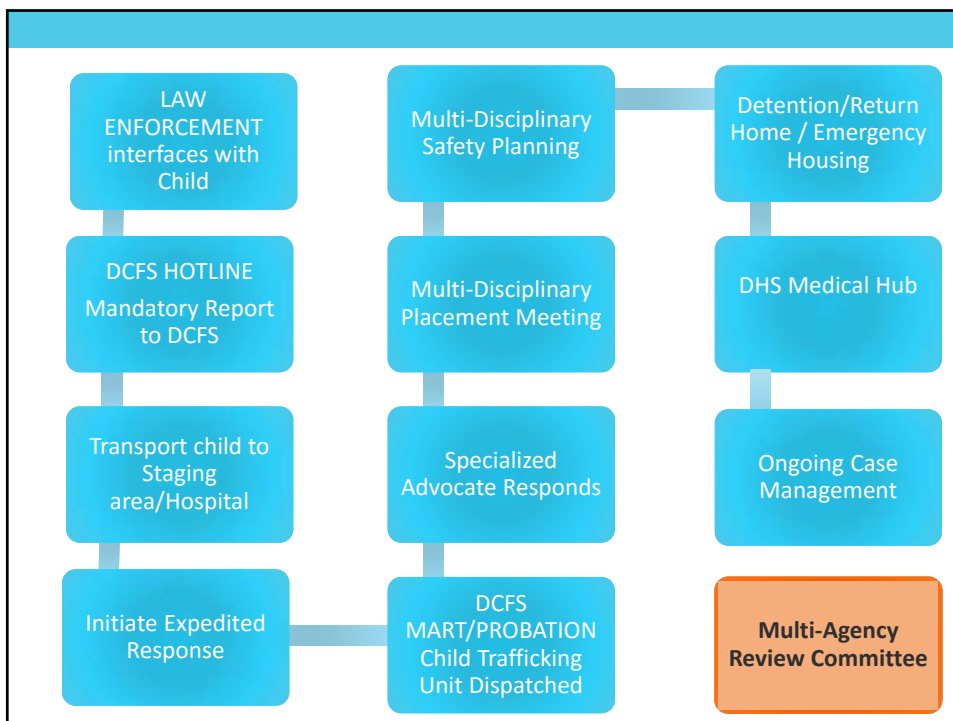
-PHYSICIAN

## First Responder Protocol: Case Management

Ongoing Case Management



*"My advocate has helped me with everything in my life... There's times when all I want to do is go back to the life and it's her that makes me stay. If it weren't for her I wouldn't be here now. I would be somewhere in the streets..."*  
- YOUTH



## Multi-Agency Review Committee

- Membership
  - ✓ Agencies participating in the First Responder Protocol
- Responsibilities
  - ✓ Review protocol and cases without identifying information,
  - ✓ Identify successes and barriers,
  - ✓ Engage youth and survivors for feedback on the Protocol,
  - ✓ Analyze data and outcomes,
  - ✓ Refine the Protocol, as necessary, and
  - ✓ Assess the sufficiency of resources.
- Submit quarterly reports to Board of Supervisors



# INTERAGENCY DETENTION PROTOCOL

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Overview



## Interagency Detention Protocol

- **Goals:**

- Identify potential and confirmed CSE youth,
- Ensure CSE youth's medical and mental health needs are met ASAP,
- Provide CSE-informed and gender-responsive services through a multidisciplinary approach for youth while in detention,
- Assist CSE youth in making progress toward their short-term and long-term goals
- Document key information about youth that can be used to inform case planning and placement decisions
- Collaboratively develop a safety plan with the youth,
- Streamline communication among the agencies, and
- Ensure CSE youth has a plan for services and support when the youth transitions out of detention.



## Detention Protocol Partners

1. Probation Department
2. Department of Mental Health
3. Juvenile Hall Health Care Services
4. Department of Children and Family Services
5. Courts
6. Specialized Advocates



## How the coordination works

- Internal MDTs
  - Juvenile hall partners gather on a regular basis to support identified CSE in the hall
- External MDTs
  - Agency and community partners meet on weekly basis to support identified CSE
- Personnel to bridge MDTs
  - CSEC Coordinators
  - CTU Liaisons



## SURVIVOR LEADERSHIP

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# WHAT IS OUR IMPACT?

## **EDUCATING LAWMAKERS WORKGROUP**

- \* In Spring 2017, we spent a day at the California State Capitol educating over 20 legislative offices on CSEC, importance of training child-serving agents, and the impact of California's CSEC Program
- \* Our next step is to lead a CSEC 101 training for California legislators and staffers

## HIRING SURVIVORS WORKGROUP

- \* In Spring 2017, we conducted a survey of 52 individuals from agencies and organizations serving survivors to understand:
  - \* In what capacity are California agencies and organizations currently employing survivors?
  - \* What are the common barriers to hiring, maintaining and advancing survivors on staff?

## HIRING SURVIVORS WORKGROUP

- \* We found:
  - \* 92% of surveyed respondents want to hire survivors, but only 27% of our respondents currently have survivors on staff.
  - \* Respondents cited include insufficient hiring pool (45%), survivors lacking the training, education, and/or licensing for available positions (43%), lack of funds to hire (35%), and background checks and licensing concerns (35%) as barriers to hiring and maintaining survivors
  - \* There is also a lot of confusion around the terms “survivor-led” and “survivor-informed”.

## OUTREACH TO COUNTIES WORKGROUP

- \* In Spring 2017, we sent a survey to the 20 counties that have not opted into California's CSEC Program non-participating counties to learn:
  - \* Their familiarity with the CSEC Program
  - \* Counties' progress in addressing trafficking
- \* We found all but one respondent county were familiar with the CSEC Program. Of the counties familiar with the CSEC Program, nearly 60% reported that their county did not choose to participate because they had few CSEC cases and could serve children with existing resources

## ACCOMPLISHMENTS

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## LESSONS LEARNED

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QUESTIONS?

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## Contact Information

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