



WESTCOAST CHILDREN'S CLINIC

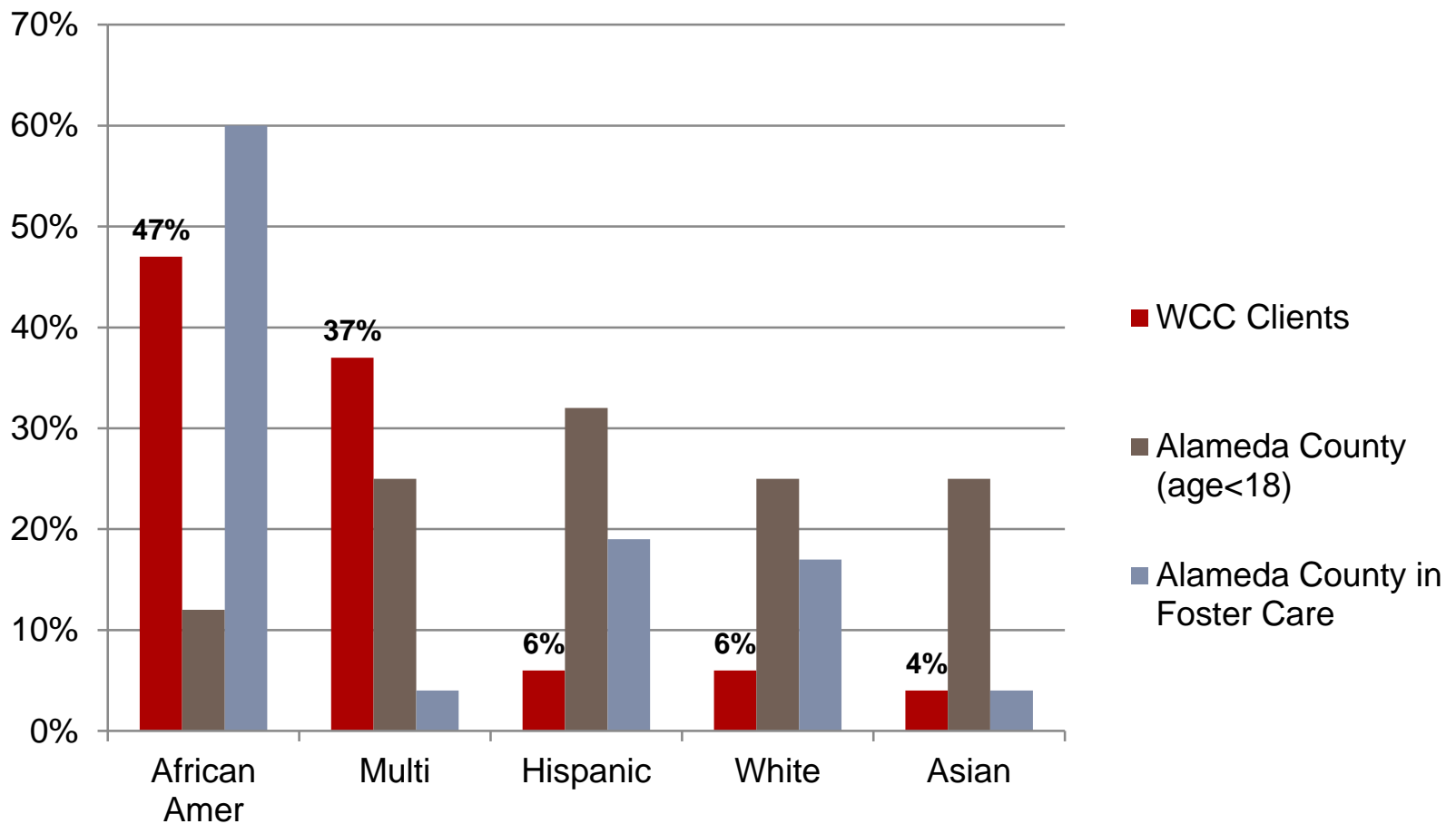
Needs & Strengths: Understanding Sexually Exploited Youth

Susan Drager, MSW, LCSW

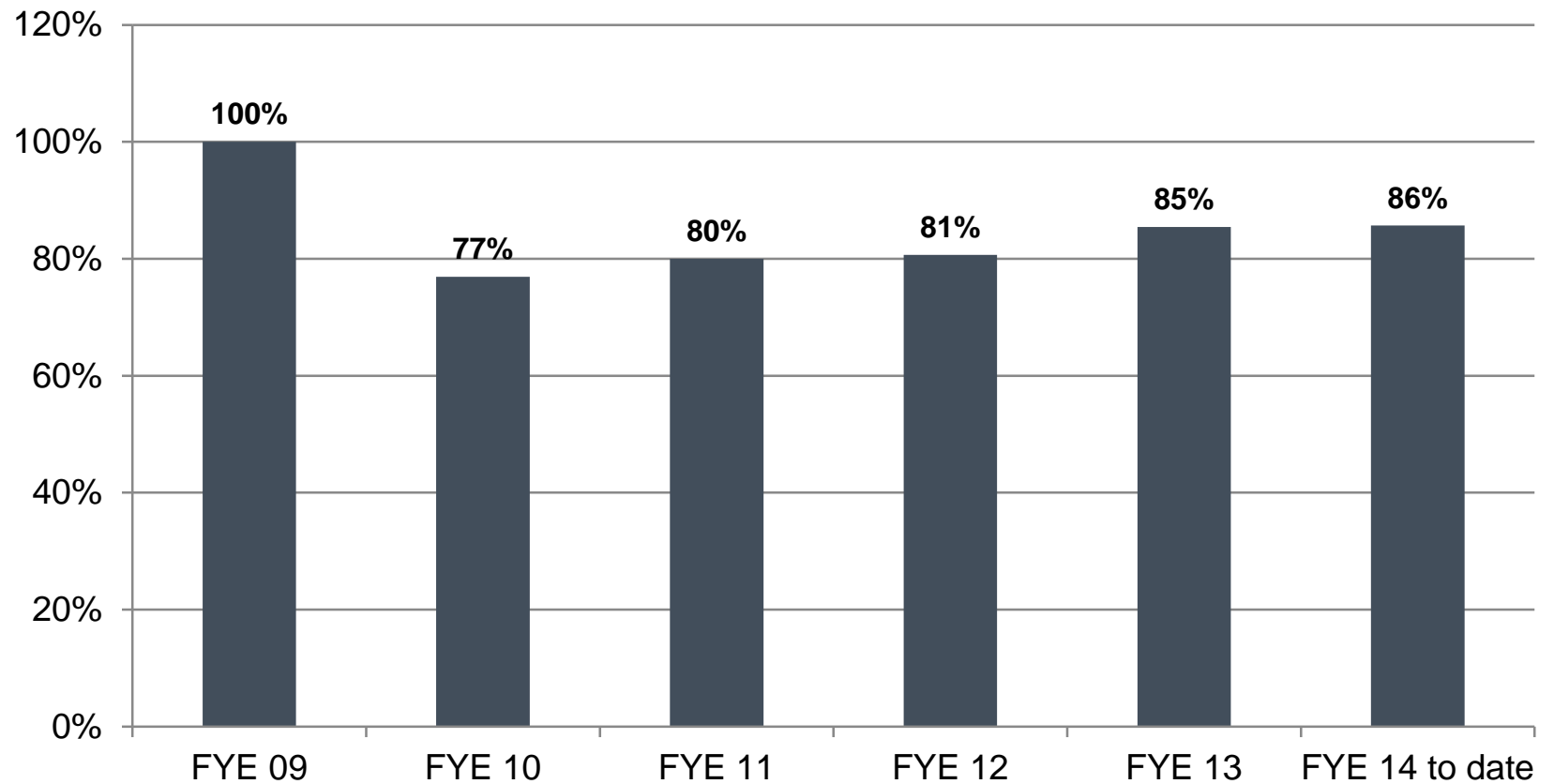
C-Change: Transforming the Lives of Sexually Exploited Youth Program

WestCoast Children's Clinic

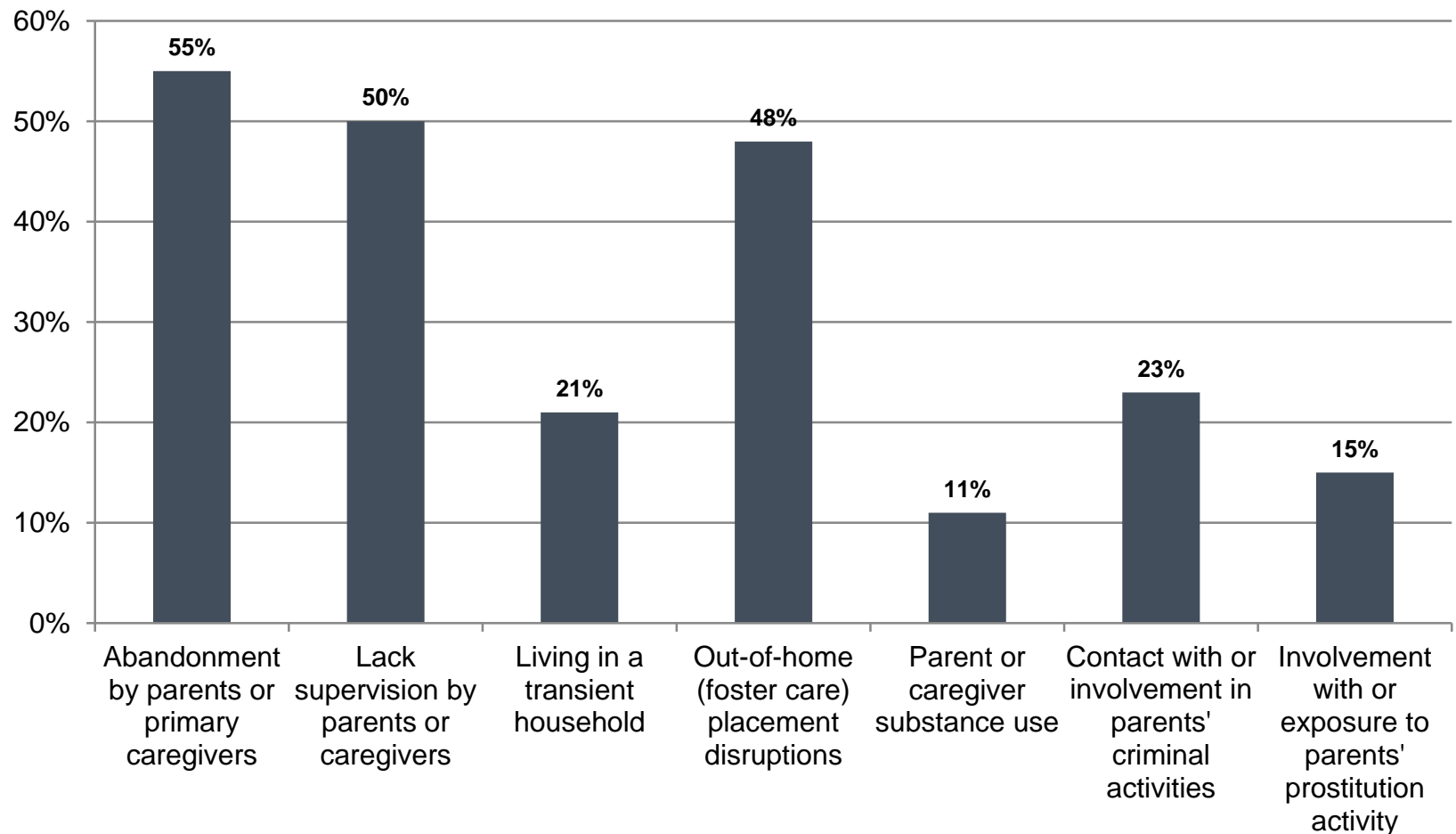
Race & Ethnicity Profile



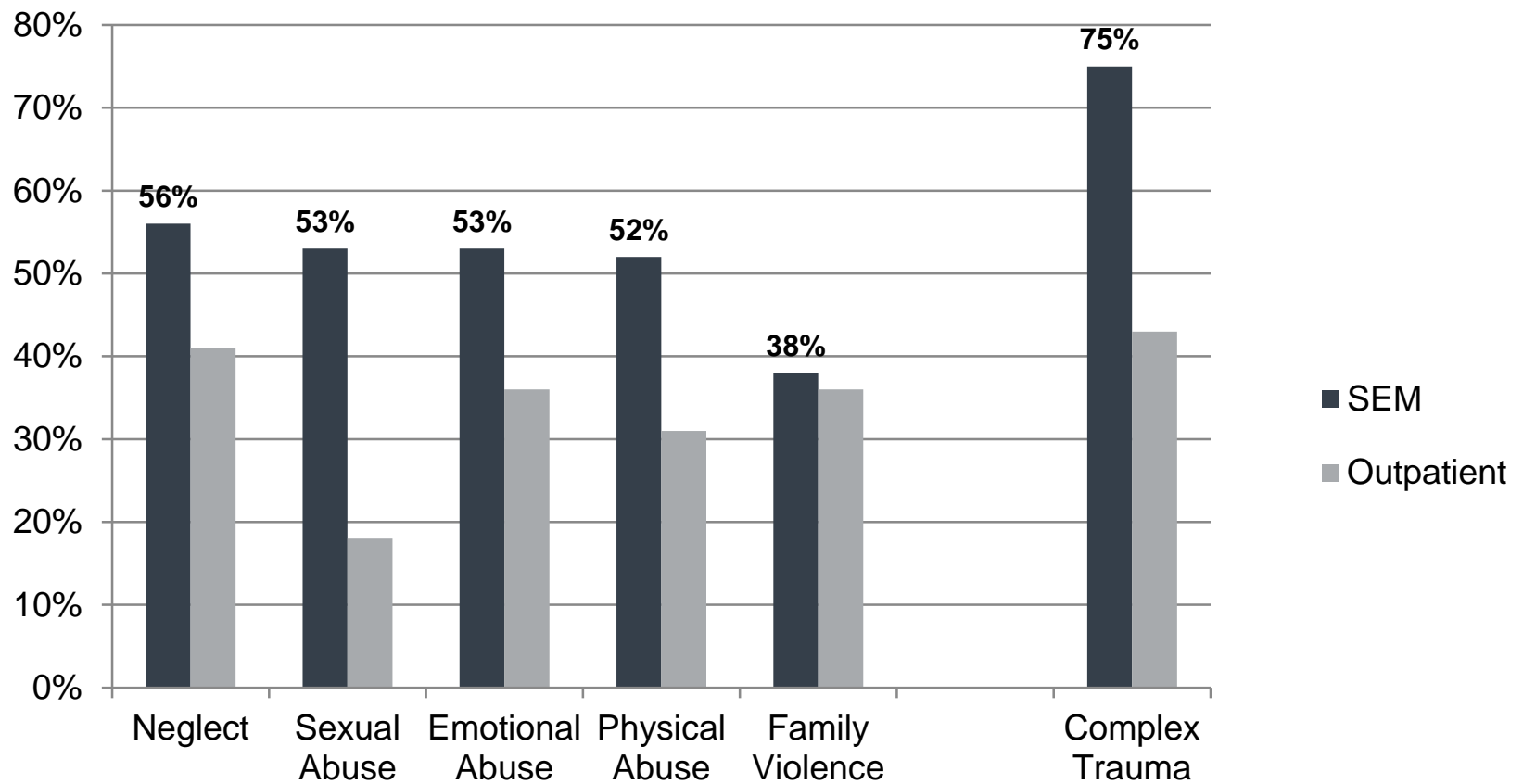
SEM in Foster Care



Prevalence of Known Family Disruptions



Trauma Exposure & Abuse History



What is Complex Trauma?

- Multiple exposures to multiple types of traumatic events and impacts—immediate and long-term
- Simultaneous and/or sequential forms of child maltreatment: emotional abuse & neglect, child sexual abuse, physical abuse, witnessing domestic violence, community violence, traumatic loss; often begins in early childhood
- Attachment difficulties with primary caretakers contributes to problems with relationships with others

Simple vs. Complex Trauma

Simple Trauma

- ▶ Non-interpersonal
- ▶ More likely a single trauma exposure
- ▶ Shorter duration
- ▶ Trauma exposure may be at later age
- ▶ More family support
- ▶ No significant attachment problems with primary caregiver(s)

Complex Trauma

- ▶ Interpersonal
- ▶ Multiple exposures of different types of trauma; longer duration
- ▶ Onset of traumatic exposures at earlier age
- ▶ Less or no support of primary caretaker/family
- ▶ Attachment difficulties
- ▶ Implicit and explicit memories of trauma

The Impact of Trauma

- Trauma can adversely affect brain development, impacting cognitive function, language acquisition, the ability to regulate emotions, executive functioning
- Traumatized children and adolescents display changes in levels of stress hormones similar to combat veterans
- Trauma has long term impact, affecting the way children and adolescents respond to future stress in their lives, and their long-term health

Pynoos et al. (1997)

Risk Behaviors

Many of our SEM clients are involved in activities that threaten their health and safety.

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

Risk Behaviors: Substance Use Disorder

31% (35 youth) have a substance use disorder.

Among these youth:

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

Risk Behaviors: Running Away

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

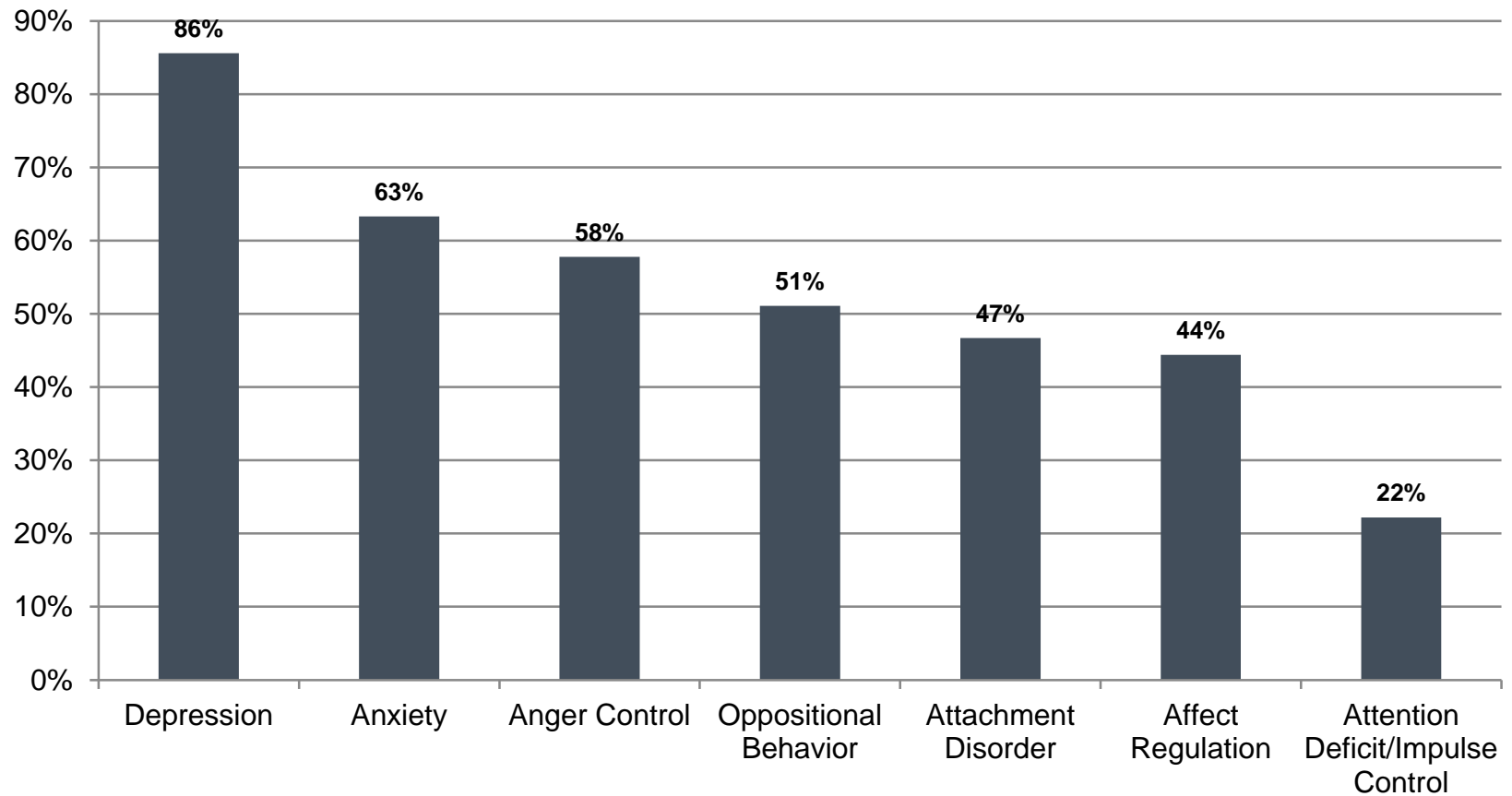
- 89% engage in delinquent, dangerous activities (e.g. exploitation) while on the run.
- 87% run to unsafe environments that cannot meet their basic needs or where the likelihood of victimization is high.
- 76% run to different locations or to no planned destination.
- 74% have unrealistic expectations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

Risk Behaviors: Juvenile Justice Involvement

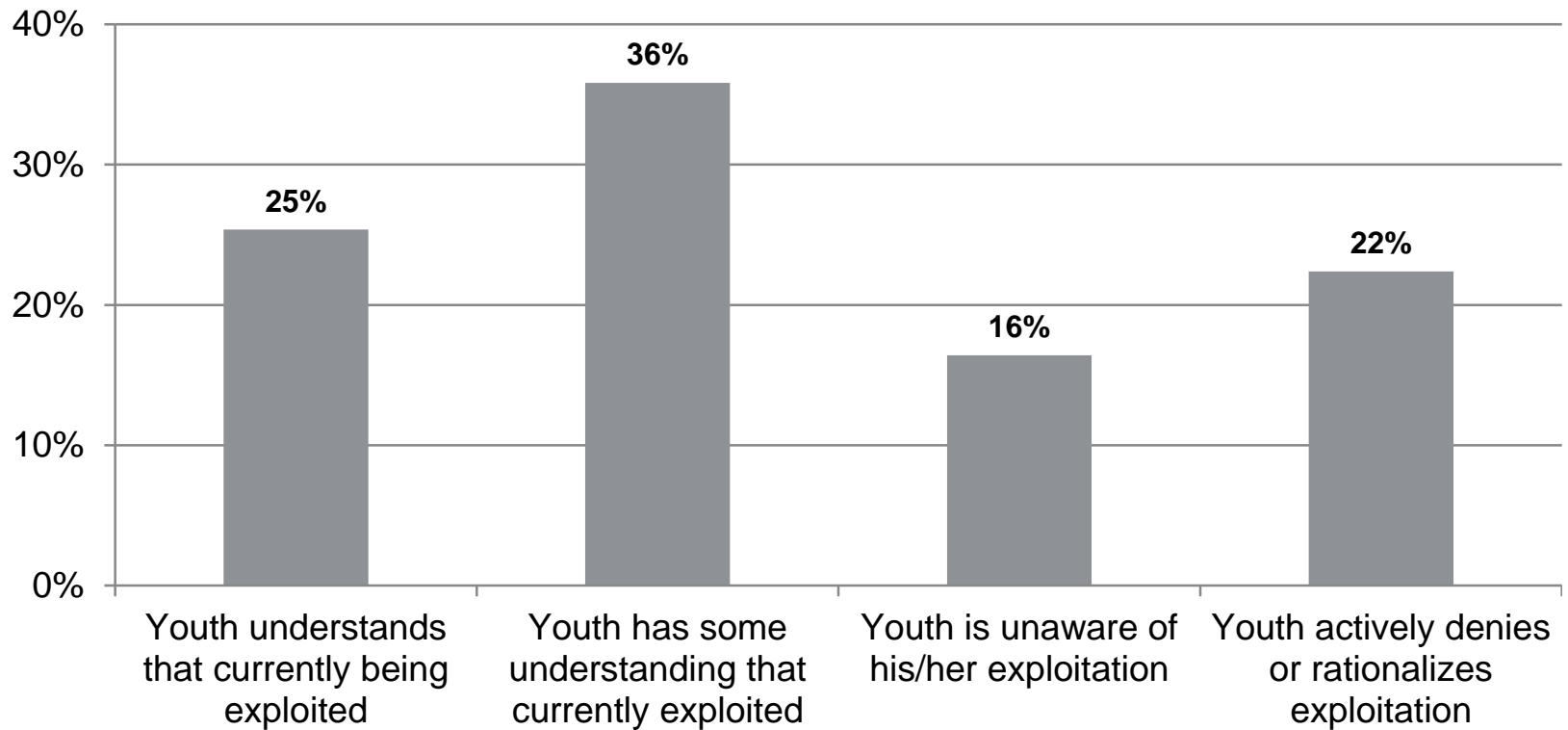
18% (17 youth) are involved in the juvenile justice system. Among these youth:

- 24% have been arrested.
- 29% involvement includes in activities against people.
- 29% involvement includes activities against property.
- 24% involvement includes illegal substances.
- 35% are involved due to environmental influences.
- 24% due to parental influences.
- 59% due to peer influences.

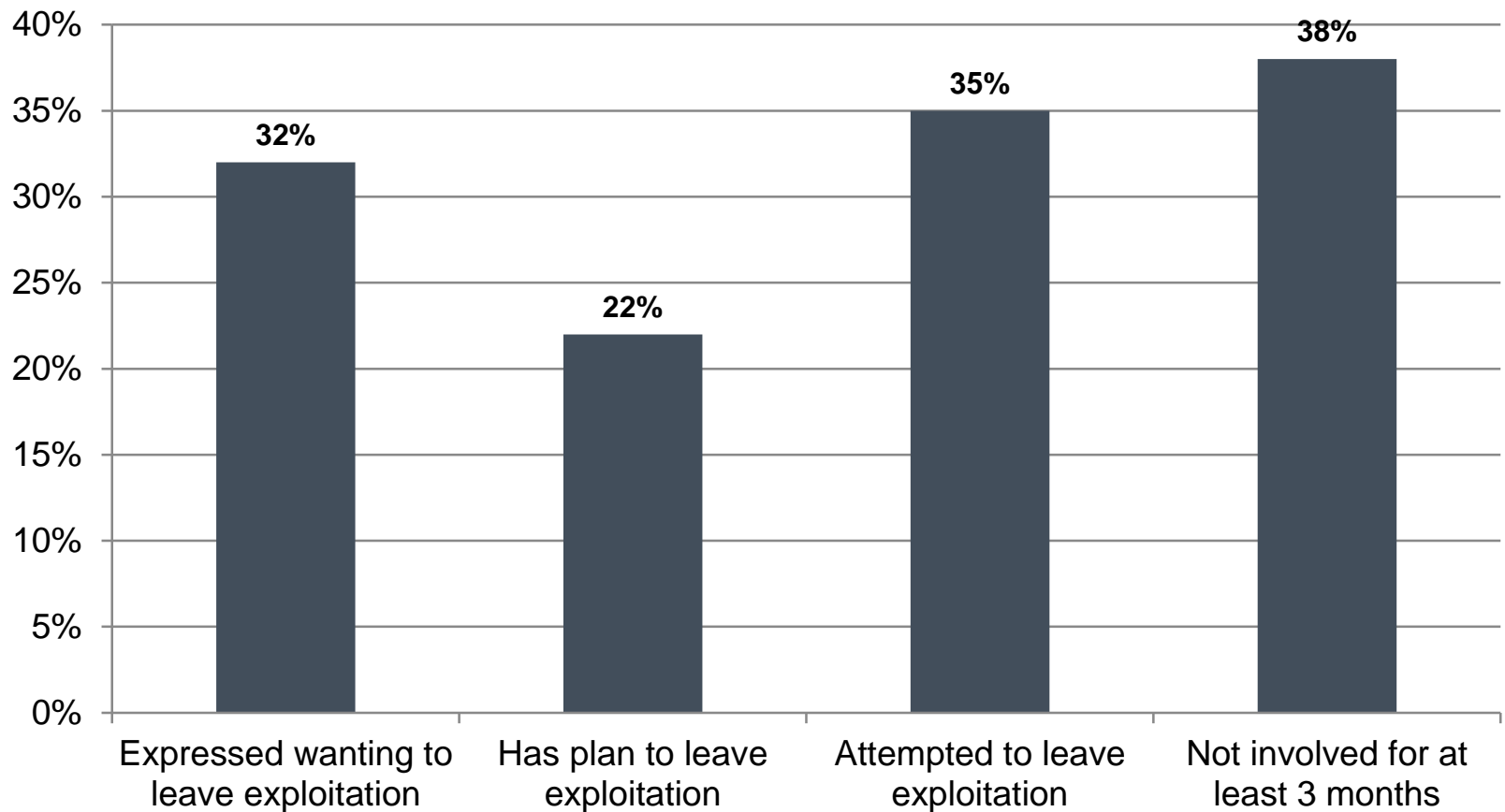
Prevalence of Mental Health Needs



Knowledge of Exploitation



Status of Exploitation



Life Domain: Health Needs

In terms of health needs:

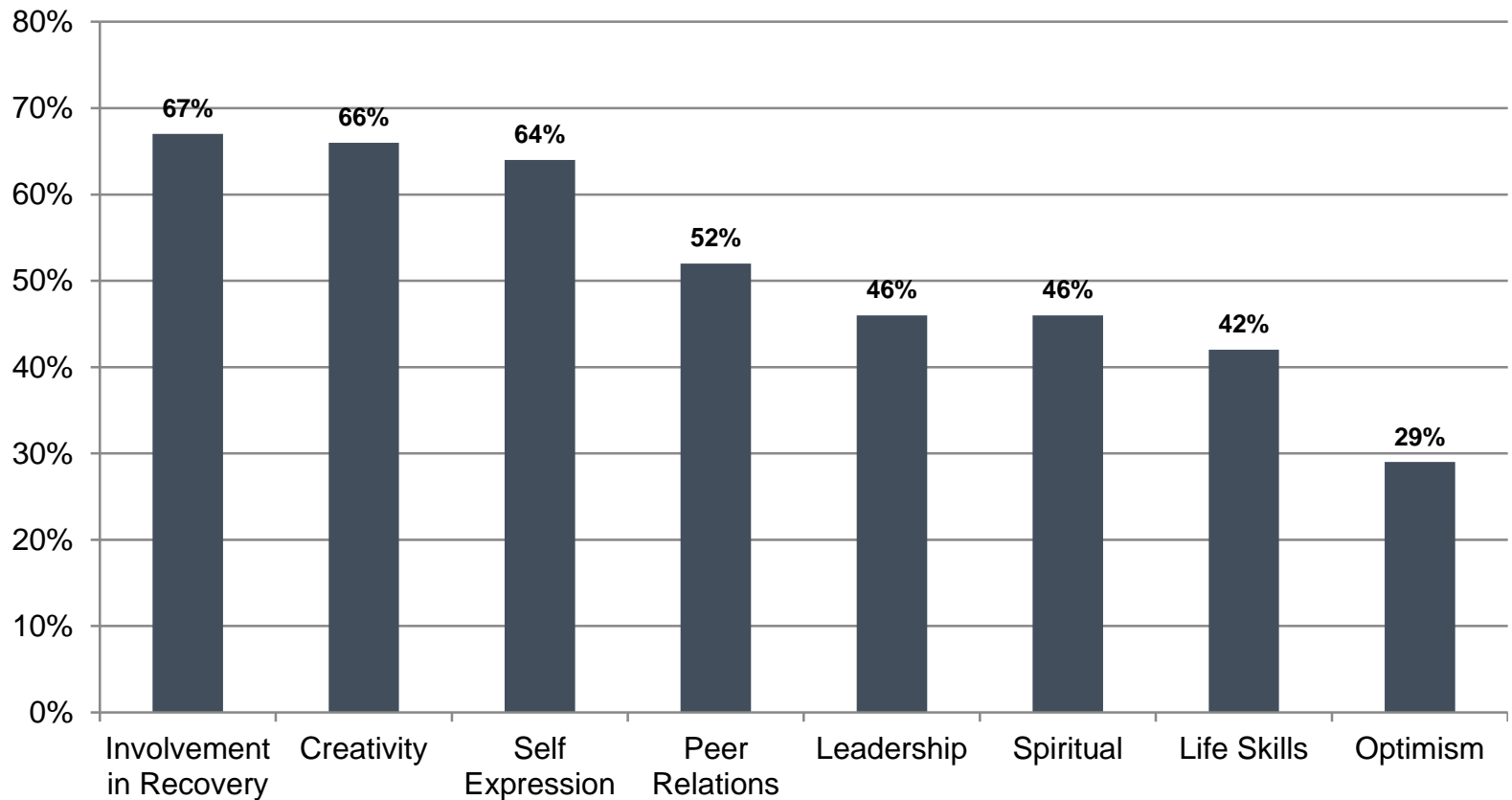
- 12% experience chronic physical or medical problems.
- 10% are under- or over-weight to a degree resulting in serious or deadly health outcomes.
- 31% have problems with sleep and are generally sleep deprived.
- 14% are pregnant at any given time (and 56% of pregnant youth are using drugs or other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

Improvement in Functioning

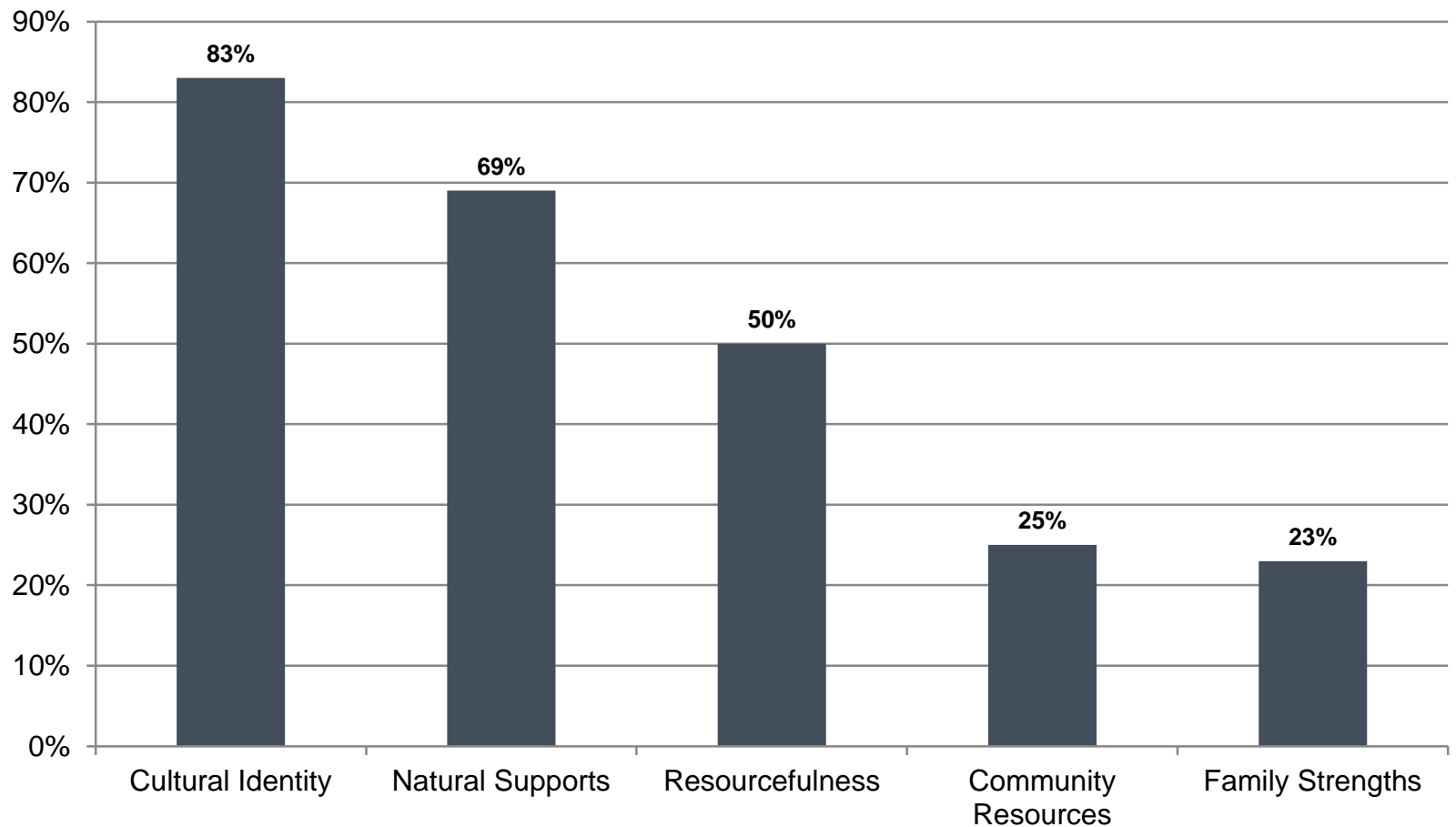
After six months of therapy:

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

Internal Strengths



External Strengths



What We Can Do with What We Know

- Violence and exploitation is happening all the time, while they are in our care
- Relationships are key
- Collaboration is essential
- History of sexual abuse and involvement in child welfare system make our youth targets to exploiters
- How child welfare system can respond
 - Screen and identify youth at risk of, or are currently being exploited
 - Develop appropriate placement options (continuum of care)
 - Train and support child welfare workers, foster parents , group home providers
 - Develop CSEC CWW teams
 - Implement a trauma informed practice
- Exploited youth's caregivers need to be screened and assessed for their capacity to keep youth safe



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Q & A

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