



# COUNTY OF LOS ANGELES PROBATION DEPARTMENT

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**CALVIN C. REMINGTON**  
Interim Chief Probation Officer

July 12, 2016

TO: Supervisor Hilda L. Solis, Chair  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Don Knabe  
Supervisor Michael D. Antonovich

FROM: Calvin C. Remington  
Interim Chief Probation Officer  
CSEC Integrated Leadership Team

SUBJECT: **QUARTERLY REPORT BACK: EXPANSION OF THE FIRST RESPONDER  
PROTOCOL AND ADVOCACY SERVICES FOR COMMERCIALY  
SEXUALLY EXPLOITED CHILDREN (AGENDA OF JULY 12, 2016)**

On November 3, 2015, on motion of Supervisor Ridley-Thomas, seconded by Supervisor Knabe, your Board instructed the Commercially Sexually Exploited Children (CSEC) Integrated Leadership Team (ILT) to report back to the Board quarterly regarding updates to the Law Enforcement First Responder Protocol (FRP) and the county-wide expansion of the protocol. The ILT is comprised of representatives from the Probation Department, the Department of Children and Family Services, and the Sheriff's Department.

On December 15, 2015, on motion of Supervisor Ridley-Thomas, your Board instructed the CSEC ILT to include in the quarterly reports, performance updates on the community-based organizations that were selected through the Request for Proposal (RFP) process to provide advocacy services to CSEC, including:

- The number of youth identified and connected to services by each organization; and
- Any performance issues and/or deficiencies that might pose challenges to fulfilling contractual obligations, along with recommendations for improvement.

A report by the ILT was provided at the March 8, 2016 Board meeting regarding the expansion of the FRP and advocacy services for Commercially Sexually Exploited

Children. At this meeting, the following recommendations were approved by the Board:

- Supervisor Kuehl instructed the ILT to report back to the Board on any barriers or issues that might exist between the Departments regarding the integration of services;
- Supervisor Ridley-Thomas instructed the ILT to report back to the Board at a Board meeting on a quarterly basis; involve the Office of Child Protection (OCP) in the working group; and investigate additional funding sources such as philanthropic resources to benefit the CSEC work; and
- Supervisor Solis instructed the ILT to include in the next report back to the Board, information related to the outreach program, in terms of reaching out to the more difficult groups, including the lesbian, gay, bisexual and transgender communities; and information on increased employment opportunities for the youths.

In addition, on May 10, 2016, on motion of Supervisor Knabe, seconded by Supervisor Solis, your Board instructed the County's CSEC ILT to engage the OCP, the Directors of Public Social Services (DPSS), Health Services (DHS) and Children and Family Services (DCFS), the Acting Director of Mental Health (DMH), Interim Director of Public Health (DPH), the Interim Chief Probation Officer, the Sheriff and Fire Chief, on ways to rebrand and expand the Safe House Program to create safe harbors for victims of child sex trafficking and report back to the Board in 60 days on the following:

- Renaming and rebranding Los Angeles County Safe House Program as Los Angeles County Safe Youth Zone Program;
- Developing a protocol for when victims of child sex trafficking seek help at a designated Safe Youth Zone;
- An implementation plan that includes strategies to engage County Departments and other public safety agencies, train appropriate employees and outreach to the public to educate them on the Safe Youth Zone Program; and
- A funding plan for implementation, training and other necessary resources for the County Safe Youth Zone Program. (16-2352)

As indicated above, at the March 8, 2016 Board meeting, on motion of Supervisor Ridley-Thomas, the Board instructed the ILT to report back at a Board meeting on a quarterly basis, with the ensuing report due at the June 14, 2016 meeting. At the request of the Interim Chief Probation Officer, the Board continued the item to the July 12, 2016 meeting. The following provides the ILT's responses to the above motions.

## **I. LAW ENFORCEMENT FIRST RESPONDER PROTOCOL FOR CSEC: COUNTYWIDE IMPLEMENTATION UPDATE**

The Los Angeles County Law Enforcement First Responder Protocol for CSEC is the first protocol of its kind throughout the nation. Since the FRP's inception on August 15, 2014, there have been 117 CSEC youth recovered. The protocol has increased collaboration across agencies, decreased dramatically prostitution-related arrests, and most importantly, it has positively impacted youths' lives. Because of these successes, your Board instructed the ILT to develop a plan to expand the protocol county-wide.

On May 12, 2016, LASD deputies from the Lancaster, Palmdale and Santa Clarita stations along with representatives from Probation, DCFS, and DHS, as well as Aviva Center advocates participated in a half-day of CSEC training. The training included CSEC awareness, strategies to engage CSEC youth, the FRP and each agency's respective responsibilities within the FRP. On May 16, 2016, the FRP was expanded to the Los Angeles County Sheriff's Lancaster, Palmdale and Santa Clarita stations. Since implementation, there have not been any CSEC youth recovered in the expansion area.

The ILT is planning on expanding the FRP to all Los Angeles County Sheriff stations with an anticipated expansion date of October 2016.

## **II. CONTRACTORS' ADVOCACY SERVICES – PERFORMANCE UPDATES**

Contracting for advocacy services for CSEC youth through Saving Innocence, Aviva Center, and Sunrise Community Counseling Center, began January 1, 2016. To date, there have been a total of 84 referrals made to the advocacy agencies: 49 to Saving Innocence of which 37 were rolled over from a previous contract, 27 to Aviva Center, and eight to Sunrise Community Counseling Center.

Since the last quarterly report, Sunrise Community Counseling Center has had challenges in being able to secure advocates in order to provide adequate advocacy services for youth referred to their program. Probation met with the agency to provide technical assistance and support to the agency. On May 31, 2016, the Department received a letter from the agency stating that they would like to resign the Advocacy Services to CSEC under the Community Recidivism and Crime Reduction Grant contract. On June 7, 2016, the Department responded to and confirmed the agency's request to terminate the contract effective May 31, 2016. Subsequently, all CSEC cases have been transferred to Aviva Center.

### **III. COUNTY DEPARTMENT INTEGRATION OF SERVICES**

Thus far, over the past five years, there have been various County collaboratives working towards combating sex trafficking of youth within Los Angeles County. Initially, in July 2013, under the leadership of Probation, there was the creation of the CSEC Leadership Team which consisted of Probation, DCFS, and the National Center for Youth Law. The goal of the CSEC Leadership Team was to ensure that youth who are exploited received the supports and services they needed to heal, address their trauma, and build skills to enter adulthood and become contributing members to society.

Beginning in 2014, under the leadership of DCFS, along with the CSEC Leadership Team, the County CSEC Steering Committee was formed with various agencies also playing key roles in supporting and serving CSEC, all of whom have been involved and engaged in creating a countywide response to the growing problem of CSEC.

The passage of SB 855 established a state-funded Commercially Sexually Exploited Children (CSEC) Program to fund prevention, intervention, training, and services for trafficked children. It allowed counties to opt into the Program by developing interagency protocols to serve children who have been commercially sexually exploited. In Los Angeles County, the agencies participating in the CSEC Program include DMH, DHS, DPH, law enforcement, children's attorneys (Dependency Attorneys, Public Defenders and Panel Attorneys), District Attorney's Office, Dependency and Delinquency Judges, County Counsel, and the Office of Child Protection

Since 2013, these agencies have worked together to develop:

- the initial CSEC Awareness Training;
- the Law Enforcement First Responder Protocol for CSEC;
- DCFS Hotline protocols;
- Prevention workshops for at-risk youth within foster care; and
- the initial outreach to foster care providers to build capacity for housing options for CSEC identified youth.

We are pleased to indicate that throughout our ongoing County collaboratives to combat the commercial sexual exploitation of children, there have not been any barriers or issues that exist between the County departments regarding the integration of services and support of our most vulnerable youth.

Department updates regarding CSEC activities and collaboration are provided in Attachments I – V.

#### **Investigation of Additional Funding Sources**

Members of the ILT met and conferred with the Office of Child Protection, Center for Strategic Private Public Partnership (CSPPP) to investigate additional philanthropic

resources. As a result, a preliminary three tier plan was developed: First, there is a commitment to look for opportunities to build relationships with philanthropic organizations in the community that would look to fund projects and initiatives that government funding would not be able to cover. Second, as CSPPP develops relationships with philanthropic organizations, there will be consideration on how those relationships can support CSEC populations and initiatives. Lastly, CSPPP will assist in making introductions to various philanthropic organizations for ILT members and agencies to outreach and make presentations. These presentations are intended to expand the knowledge base of philanthropic organizations on CSEC and look to fund smaller projects and activities. The ILT will continue to work with CSPPP in making these connections.

### **Outreach to Other Community Groups**

Since the creation of the Delinquency STAR Court and the Probation Child Trafficking Unit (CTU) in January 2012, there have been numerous trafficking victims who identify as LGBT coming through the STAR Court who have received enhanced supervision services through the CTU. Services for these youth have often required specialized placements and outreach services through the various LGBT organizations within the County in order to meet the youth's individualized case plan goals.

Within the past year, Probation, in collaboration with Nola Brantley Speaks, a survivor-lead organization, developed a training for county agencies and community partners specifically focusing on gay males and transgender females. This training was developed with the support and engagement of various LGBT organizations and male survivors of trafficking.

Most recently, Probation, DCFS, DMH, and DHS, and DPH have been conducting various outreach efforts to engage other community groups in order to ensure that all sex trafficking victims have access to services and support. These services include housing options, access to medical care for hormone treatments, counseling, and crisis hotlines/chat lines. The Departments will continue to engage these organizations as we work towards developing those services and supports needed for all sex trafficking youth to achieve our goal that they begin to heal and become successful young adults.

### **Increased Employment Opportunities for CSEC Youth**

A dual strategy must be utilized in addressing the employment needs of CSEC that addresses the short-term financial needs and the long-term barriers to gainful employment. As with many foster youth, this population does not have work experience or work skills. Additionally, CSEC are dealing with trauma that may impact their ability to function in a work setting without addressing the trauma.

The ILT team reached out to the Los Angeles Opportunity Youth Collaborative (OYC) and the Los Angeles Area Chamber of Commerce (Chamber) to leverage resources and maximize employment opportunities for the CSEC population. These opportunities



included recruiting CSEC for summer jobs, and ensuring that CSEC are aware of the upcoming enrollment opportunities for these opportunities.

Further, the CSEC population are great candidates for the Workforce Innovation and Opportunity ACT (WIOA) employment opportunities. These provide additional support to enrolled youth that include case management, assisting with connecting back to school and to employment opportunities. Another employment opportunity explored with OYC is the Grocery Initiative where youth are connected with employment opportunities in the grocery industry. Youth are provided a trauma informed employment curriculum and complete the Chamber's Workforce Readiness Certification Process. The ILT will work closely with OYC in identifying youth when the next cohort of youth is being created.

#### **IV. SAFE YOUTH ZONE**

Los Angeles County has a responsibility to protect its most vulnerable population. Sadly, children are exposed to terrifying and unsafe situations, and at times, they have no family to turn to for help. Kids who are abused, lost, frightened or in danger on the streets often do not have a place within the community where they can seek temporary refuge. In 1997, to address this issue, the Board, on motion of Supervisor Knabe, instructed the creation of the Safe House Program as a means of ensuring temporary haven for any child facing a potentially threatening situation and needing a place to go. The original Safe House program included all Los Angeles County Fire Stations which were outfitted with an easily identifiable white and yellow sign. When a young person was in trouble, they could seek out a local Safe House and be protected and connected with any services they needed.

Over the past three years, Los Angeles County has been working to protect one of our most vulnerable populations: victims of child sex trafficking. Children, some as young as 10 years old, are being forced by adults to sell themselves on the streets for profit. These kids are threatened with brutal abuse and violence against themselves and their family if they attempt to escape or do not make their quota. Often times, these children have no place to go for help, and end up going back to their trafficker where they are subjected to more abuse and exploitation. We've made significant strides to combat child sex trafficking of minors across our region and we continue to support the victims of this heinous crime, however, there is still much more work to be done.

On May 10, 2016, Supervisor Knabe introduced a motion which would rebrand the existing Safe House Program. It will create a network of safe harbors for victims of child sex trafficking to seek out when they are in danger. Instead of waiting to be rescued by law enforcement, victims of child sex trafficking will be able to proactively seek out a safe place to hide from their trafficker and be connected with services that will empower them to escape the life on the streets and seek a better and brighter future.

As a result of this motion, Los Angeles County will move forward with renaming and rebranding the County's Safe House Program as Los Angeles County *Safe Youth Zone* Program. This program will work to expand the existing Safe House Program to include

County Fire Departments, Sheriff stations, hospitals, additional County facilities, along with other identified city and unincorporated area agencies throughout the greater Los Angeles area.

### **Safe Youth Zone Protocol**

When victims of child sex trafficking seek help at a designated Safe Youth Zone, the following protocol will be initiated:

- 1) Location staff takes youth in and assesses for any immediate resources required (Law Enforcement, Medical Care, etc).
  - a. If the youth is in immediate danger, call the jurisdictional law enforcement agency for assistance.
  - b. If the youth requires immediate medical attention, transport to the nearest emergency room, or call 911 for emergency assistance.
- 2) Report suspected child abuse to the DCFS Child Protection Hotline
  - a. The hotline worker will identify the youth through the Child Welfare Services Case Management System (CWS/CMS) or contact the Probation Department if unable to confirm the child in the system.
  - b. The hotline worker will create an expedited referral to DCFS or Probation to initiate the First Responder Protocol.
- 3) Provide the youth with a safe and secure space until a response team arrives.

### **Safe Youth Zone Implementation Plan**

The following provides the Safe Youth Zone Implementation Plan.

**Identification of Agency Participation in the Safe Youth Zone** – The protocol will initially be implemented as a pilot program in collaboration with the Los Angeles County Sheriff's Compton and Century Stations, the Los Angeles County Fire Department Lynwood, Willowbrook and Paramount stations, along with the Long Beach Police Department, with an anticipated implementation date of October 2016. This will allow the agencies to further refine the protocol prior to expanding county-wide.

Once the pilot phase is completed, the ILT will develop Strategies to expand the protocol to other County Sheriff and Fire Departments, County Hospitals, and other County Departments, as well as engage other law enforcement, fire stations, and hospitals within City and Unincorporated areas.

**Training** – Training for all participating agencies is imperative. First, agencies will receive CSEC 101 Awareness Training to ensure that they have a solid knowledge base about

CSEC, the dynamics of trafficking, and strategies to engage youth. Once they have that knowledge, each agency will then receive training on the Safe Youth Zone and First Responder protocol's along with their respective responsibilities within those protocols.

**Outreach to the Public to Educate them on the Safe Youth Zone Program** – In the pilot implementation phase, outreach and education efforts will be focused on targeting at-risk/CSEC youth. Currently, there are numerous efforts underway to engage at-risk/CSEC youth through the Delinquency STAR Court, Dependency DREAM Court, Probation Detention prevention workshops, community advocacy, etc. The Safe Youth Zone will be integrated into the youth CSEC prevention/intervention curriculums and workshops.

Upon expansion of the Safe Youth Zone project a broader outreach to the public will be conducted through training, literature, signage, etc.

**Tracking of Cases** – Since the First Responder Protocol will be the response whenever a youth seeks help at a designated Safe Youth Zone, these cases will be tracked through the FRP Multi-Agency Review Committee chaired by Probation. Updates will be provided to this Board through the ILT quarterly reports.

**Implementation Funding Plan** – Funding for initial implementation will be provided through the Healthier Communities, Stronger Families, Thriving Children (HST) funds allocated for the Safe Place program approved by the Board on November 3, 2016. Funding expenditures include, but are not limited to:

- Creation of a Training Video
- Safe Youth Zone decals
- Bumper stickers
- Safe Youth Zone Brochure
- Protocol wallet cards for participating agencies

We will provide the next quarterly report to your Board at the September 13, 2016 meeting as scheduled.

If you have any questions or require additional information, please contact Probation Director Michelle Guymon, at (661) 236-5405.

CCR:FC:MG

Attachments (5)

c: Sachi A Hamai, Chief Executive Officer  
Lori Glasgow, Executive Officer, Board of Supervisors  
Mary C. Wickham, County Counsel  
Sheila Williams, Senior Manager, Chief Executive Office  
Children's & Justice Deputies  
CSEC ILT Members






**JACKIE LACEY**  
**LOS ANGELES COUNTY DISTRICT ATTORNEY**

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HALL OF JUSTICE  
211 WEST TEMPLE STREET, SUITE 1200 LOS ANGELES, CA 90012-3205 (213) 974-3500

**TO:** CALVIN REMINGTON  
Interim Chief Probation Officer

**FROM:** JACKIE LACEY   
District Attorney

**SUBJECT:** SUMMARY OF DEPARTMENTAL ACTIVITIES RELATED TO PREVENTING AND ADDRESSING  
THE COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN

**DATE:** JUNE 21, 2016

**EXECUTIVE SUMMARY**

In July 2011, the Governor signed Senate Bill 1279. This bill authorized the County of Los Angeles, contingent upon funding, to establish a pilot project to develop a comprehensive, multidisciplinary model to address the needs and effective treatment of sexually trafficked children and young people who have been arrested or detained for prostitution or prostitution related crimes under Sections 647(a) or (b) and 653.22 of the Penal Code.

In February 2014, the LADA launched the First Step Diversion Program (First Step) operated by the Juvenile Division to divert sex trafficked children from the juvenile delinquency system, and help these children rebuild their lives through collaborative efforts with county and community based partners. The program was developed and launched after establishing protocols, MOU's and operational agreements with Probation, DCFS, County Counsel, Los Angeles Police Department, Los Angeles Sheriff's Department, Mental Health, Public Health and numerous community based groups and health care providers.

In June 2014, the LADA created the Human Trafficking Unit (HTU) within the District Attorney's Office to efficiently and effectively combat the increasingly common crime of human trafficking. The HTU is based out of the Sex Crimes Division and includes representatives from the Juvenile Division, Organized Crime Division, Victim Impact Program and Victim Services Program. The HTU works with human trafficking task forces operating in the Southern California region, creating training protocols, meeting with human trafficking victim advocates and developing a human trafficking database.

**FIRST STEP DIVERSION PROGRAM**

The First Step Diversion Program provides swift intervention and prevention strategies in the form of diversion from prosecution for a period of up to one year, referral services for sexual assault and mental health counseling, substance abuse treatment, and other appropriate services. The program also offers a 10-week educational component, designed to break the psychological effects of being abused by a pimp. A Deputy District Attorney is assigned to each case to monitor the progress and insure appropriate services are obtained. If the minor voluntarily completes the program, all charges are

## Executive Summary

June 21, 2016

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dropped, the case is sealed and the Department of Justice is notified of the disposition pursuant to Penal Code Section 1001.9(a).

The First Step Diversion Program works in collaboration with county agencies and law enforcement throughout Los Angeles County. The program also works with community based agencies such as Saving Innocence, Strength United, CAST, YWCA-LA, Alliance for Children's Rights, Journey Out, Long Beach Trauma Center, Two Wings Mentors and Job Placement and Children's Law Center. LADA has conducted trainings and developed protocols with Probation, DCFS and Law Enforcement on awareness of the program, referrals and implementation.

### HUMAN TRAFFICKING UNIT

The District Attorney's Office is committed to a comprehensive approach to combat human trafficking in the County of Los Angeles. In an effort to lessen the trauma of human trafficking victims and increase consistency in prosecutions, human trafficking cases are vertically prosecuted in the County of Los Angeles. Our efforts have resulted in the prosecution of 377 perpetrators on human trafficking or human trafficking related charges between January 1, 2013 and January 21, 2016. A key development in our efforts to hold traffickers accountable was the creation of the Human Trafficking Unit in June, 2014. The HTU maintains a database to track human trafficking cases in the county. It also works closely with law enforcement agencies, community groups and other justice partners to provide trainings, develop protocols, review legislative proposals, and provide counsel on other issues related to human trafficking. The HTU also meets regularly with the Los Angeles County District Attorney's Human Trafficking Committee which consists of various office experts from our Hardcore Gang Division, Organized Crime Division, and Juvenile Division to identify and discuss trends and needs for the successful investigation and prosecution of human trafficking cases. In addition to aggressively prosecuting traffickers, the District Attorney's Office has specially-trained victim advocates assigned to work exclusively with victims of human trafficking. Our victim advocates work with outside agencies to coordinate services provided to recovered minor victims.

### INTERAGENCY COLLABORATION

In addition to the First Step Diversion Program and Human Trafficking Unit, the LADA is involved in multiple collaborative efforts throughout Los Angeles County. Those include: the development of a victim-witness protocol for minor victim witnesses in human trafficking prosecutions, participation in the Countywide First Responder Protocol, Succeeding Through Achievement and Resilience Court, LA County Regional Task Force on Human Trafficking, the Southern California Regional Human Trafficking Task Force, Commercial Sexual Exploitation of Children countywide steering committee and various other locally based community human trafficking task forces.

If you have any questions, please feel free to contact Phillip Glaviano at 213 479-2246 or via email at [Pglaviano@da.lacounty.gov](mailto:Pglaviano@da.lacounty.gov).



LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH  
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ROBIN KAY, Ph.D.  
Acting Director

DENNIS MURATA, M.S.W.  
Acting Chief Deputy Director

RODERICK SHANER, M.D.  
Medical Director

June 16, 2016

**TO:** Michelle Guymon  
Child Trafficking Unit Director  
Probation Department

**FROM:** *Robin Kay Ph.D.*  
Robin Kay, Ph.D.  
Acting Director

**SUBJECT: EXECUTIVE SUMMARY: LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH (LACDMH) - COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN AND YOUTH (CSECY)**

### **EXECUTIVE SUMMARY**

Recognizing that a strategic response to sex trafficking required a comprehensive understanding of the local situation and a collaborative effort, the Los Angeles County Board of Supervisors approved a Board motion in September 2013 establishing a countywide, multi-agency response model to train staff to identify and better serve child victims of sexual exploitation. Los Angeles County Department of Mental Health (LACDMH) participated in the implementation of the countywide, multi-agency first responder protocol in 2014.

Following the implementation of the protocol, LACDMH continues to partner with law enforcement agencies including the Probation Department and Sheriff's Department; the Departments of Children and Family Services (DCFS), Health Services, Public Health (DPH), Public and Social Services (DPSS); District Attorney's Office; Public Defender; community organizations; advocacy agencies; and other key stakeholders, including survivors of commercial sexual exploitation to ensure effective collaboration in the prevention, identification, investigation, prosecution and provision of services for CSECY in Los Angeles County. Notably, last year, through the continued collaboration with the Steering Committee for Commercially Sexually Exploited Children (CSEC), LACDMH participated in the creation of the Los Angeles County Memorandum of Understanding (MOU) for CSEC in conjunction with nine other County agencies to respond to the needs of the sexually exploited youth in Los Angeles County.

### **TRAINING, RESEARCH, AND CONSULTATION**

Understanding that it is essential that mental health service providers working with victims of commercial sexual exploitation obtain specialized training that is culturally competent and trauma-informed, LACDMH developed and implemented its first CSEC training plan in 2013. To date and across all service areas countywide, the Department has trained over

one thousand (1,000) LACDMH providers on *CSEC 101/Awareness and Clinical Approaches to Working with Sexually Exploited Youth*.

The Department has recently expanded the training curriculum to include: CSEC Boys, Young Men and Transgender Youth; Trauma-Informed Care in the Juvenile Justice setting; and CSEC 101/Awareness training for members of the community at large, community colleges, faith-based organizations, parent-partners, and homeless shelters.

LACDMH has partnered with a Northern California based agency to participate in the validation of a screening tool (Commercial Sexual Exploitation Identification Tool "CSE-IT") designed to identify risk factors of children and youth that may have fallen victim to or at risk of CSE. This screening instrument is recognized nationwide as one of the first instruments that can be used by mental health professionals for aiding in their clinical assessment and ultimately, in the treatment of CSEC youth. The tool is currently piloted within the Juvenile Justice setting.

The LACDMH CSECY team provides in-service training, consultation, and resources on a regular basis to mental health service providers countywide. Among the services provided include: Presentations at Service Area Advisory Council (SAAC) meetings, and Collaborative events between DMH and the Faith-Based/Clergy community and participation in case conferences.

## **RESOURCES**

Resources such as fact sheets, brochures, and additional information guides are available on the LACDMH Transition Age Youth web page [http://dmh.lacounty.gov/wps/portal/dmh/our\\_services/tay](http://dmh.lacounty.gov/wps/portal/dmh/our_services/tay).

A list of trained mental health service providers was made available to key partner agencies, such as DCFS and Probation. The provider list is also available on the LACDMH website to serve as a resource for the community in referring and linking children and youth whom have experienced trauma as a result of commercial sexual exploitation.

## **INTER-AGENCY COLLABORATIONS**

Within the juvenile justice setting, CSECY-trained mental health clinicians partnered with Los Angeles County Probation staff to provide prevention and early intervention workshops and psychoeducational programming for CSEC-identified youth detained in juvenile halls or camps. Further, LACDMH actively participates in the development and implementation of the interagency response protocol for youth in custody identified as CSECY.

LACDMH partnered with local law enforcement, DCFS, Probation, advocacy groups, and juvenile court personnel to develop a countywide protocol for youth who testify as witnesses (against their traffickers) in adult criminal human trafficking cases.

Michelle Guymon  
June 16, 2016  
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LACDMH collaborates with the Probation Department (Child Trafficking Unit) to provide referrals to the Succeeding Through Achievement and Resilience (STAR) court—a specialized courtroom within the delinquency purview providing intervention and assistance to victims of sex trafficking.

The Los Angeles County Juvenile Court Dependency system has also put in place a dedicated CSEC calendar for youth being sexually exploited in order to better protect and serve child victims and those at risk. DMH has actively participated in the development and implementation of multi-disciplinary team (MDT) meetings. Cases referred to either (dependency or delinquency) courts are reviewed by a multi-disciplinary team (MDT), which may include but is not limited to representatives from Probation, DCFS, children's attorneys, DMH, DPH, juvenile court physicians, education representatives, placement representatives, and survivor advocates. The MDT team helps to inform the court decisions on what is in the best interest of the youth.

Partnerships have been established between LACDMH, the Inter-Agency Council on Child Abuse and Neglect (ICAN), and other anti-human trafficking task forces in Los Angeles County—including child and adult-focused groups. DMH participates in building awareness of human trafficking and CSECY-issues and performs a key role in the development and implementation of professional trainings and conferences and in identifying resources available to victims of sex trafficking.

### **SUPPORT FOR MENTAL HEALTH PROVIDERS**

Mental health service providers listen to client's stories of pain, loss and trauma, including serious issues and accounts of sexual violence and trauma. Much of the emotional residue from the client's experience is absorbed by the mental health professional. Therapists working with high clinical need clients and with survivors of trauma are particularly at risk to develop vicarious trauma and compassion fatigue. It is important to understand that there are risk factors inherent in this type of work and that building resiliency and support is key. Through the support of the leadership in Juvenile Justice, a plan was developed and implemented to address the need for clinical support, case consultation and (reflective) supervision for clinicians who serve CSECY and other vulnerable youth. This plan includes offering ongoing consultation, group supervision and didactic in-service trainings to clinicians on vicarious trauma and compassion fatigue prevention.

RK:TB:ER:km

Attachments



## Commercial Sexual Exploitation of Children and Youth (CSECY) FY 2015-16 Training Update for Los Angeles County Department of Mental Health (LACDMH)

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During the 2015-16 fiscal year, the Los Angeles County Dept. of Mental Health (LACDMH) made significant strides in the provision of training within the mental health network. The CSECY training team utilized feedback from the initial cohort to modify the clinical component of the training. The team integrated elements of complex trauma, screening tools, engagement strategies, treatment planning, and self-care, in addition to evidence-based practices.

### Training Components:

#### Part I. Commercial Sexual Exploitation of Children and Youth 101

This curriculum is composed of four modules that address: Definitions and terminology; Risk factors; Victim identification and engagement; and the psychosocial impact of sexual exploitation.

#### Part II. Commercial Sexual Exploitation of Children and Youth: Clinical Applications

This curriculum focuses on the psychological impact of CSECY, specifically complex trauma, including the neurobiology of trauma; Common symptoms experienced; Trauma-informed practices in screening; Engaging youth; And providing clinical interventions. In addition, the training includes information on the application of Motivational Interviewing to the Stages of Change Model. Evidence-based practices applicable to this population are used to assist practitioners in short term and long term care.

### Evidence-Based Practices Applied to CSECY

**Crisis Oriented Recovery Services (CORS):** a short-term model designed to provide immediate crisis intervention; addresses identified case management needs, and assure hard linkage to ongoing services. The primary objective is to assist individuals in resolving and/or coping with psychosocial crises by mitigating additional stress or psychological harm. It promotes the development of coping strategies that individuals can utilize to help restore them to their previous level of functioning prior to the crisis event.

**Trauma-Focused Cognitive Behavioral Therapy (TF-CBT):** designed to support children ages 3–18 and their parents in overcoming the negative effects of physical and/or sexual abuse. It targets serious emotional problems, including Post-Traumatic Stress Disorder, stress, anxiety, fear, and depression, by teaching new skills to process thoughts and emotions that result from the traumatic events. TF-CBT integrates cognitive and behavioral interventions with traditional child abuse therapies. Its focus is to help children talk directly about their traumatic experiences in a supportive environment.

**Seeking Safety (SS):** a present-focused therapy that helps people attain safety from trauma or PTSD and substance abuse. It consists of 25 topics that focus on the development of safe coping skills while utilizing a self-empowerment approach. The treatment is designed for flexible use and is conducted in group or individual format, in a variety of settings, and for culturally diverse populations.

**Individual Cognitive Behavioral Therapy (Ind CBT):** an early intervention for individuals who either have or may be at risk for symptoms related to the early onset of anxiety, depression, and the effects of trauma that impact various domains of daily living. CBT incorporates a wide variety of treatment strategies including psychoeducation, skills acquisition, contingency management, Socratic questioning, behavioral activation, exposure, cognitive modification, acceptance and mindfulness strategies and behavioral rehearsal.

## Outcomes and Recommendations

This fiscal year, the CSECY training series began in November 2015. The trainings in the fall were conducted in a one-day format with the awareness curriculum presented in a three-hour session in the morning and the clinical curriculum presented in a three-hour afternoon session. The trainings were conducted in five service planning areas to ensure all service providers had the opportunity to participate. The training audience was expanded to include directly-operated adult clinics, the Emergency Outreach Bureau, Age Group Navigators and SB 82 Triage Teams. The training team utilized training facilities with capacity for 50 people. Each training met capacity for registration within a week of release demonstrating the high interest in this topic. The target population included both contract providers and directly operated clinical staff that have been trained in at least one of the trauma-informed evidence-based practices.

The feedback from this training series was positive with some suggestions for improvement, including more time, information on LGBTQ youth in CSECY, and information on male victimization. It was suggested that the training curriculum be returned to two full day trainings (Day 1 Awareness; Day 2 Clinical). The training audience enjoyed the personal stories reflected by the presenter and videos, the application of motivational interviewing and stages of change model to CSECY, and use of evidence-based practices. Participants also reported interest in understanding complex trauma and the impact on this population.

<b>1-Day: CSECY 101 and Clinical Training Series</b>	<b>No. Trained</b>
<i>November 4 (Culver City)</i>	42
<i>November 10 (Norwalk)</i>	41
<i>December 2 (San Fernando Valley)</i>	47
<i>December 7 (San Pedro)</i>	46
<i>December 10 (El Monte)</i>	48
<b>TOTAL</b>	<b>224</b>

As a result of feedback from the fall training series, the training team revised the format of the CSECY trainings. The spring training series included a full day for CSECY 101. This format allowed for increased capacity and for all providers to attend the training sessions without the pre-requisite of being EBP-trained. Three training dates were presented throughout LA County. Clinically trained participants who completed the initial CSECY 101 Training were invited to attend a full day CSECY Clinical Training on May 25, 2016. During fiscal year 2015-16, approximately 481 mental health providers completed the CSEC 101 training and about 250 providers completed the both the awareness and clinical training components.

<b>1-Day: CSECY 101 Awareness Training</b>	<b>No. Trained</b>
<i>March 23 (Wilmington)</i>	53
<i>April 6 (Downtown LA)</i>	93
<i>May 9 (Pasadena)</i>	85
<b>TOTAL</b>	<b>231</b>
<b>1-Day: CSECY Clinical Training</b>	<b>No. Trained</b>
<i>May 25 (Lennox)</i>	26



## Additional CSECY Trainings

At the request of Santa Clarita's Blue Ribbon Task Force Human Trafficking Subcommittee, on March 9, 2016 the training team presented a 3-hour training on the Clinical Applications of CSECY. The training was held at Child and Family Center in Santa Clarita. The training provided an overview of commercial sexual exploitation of children and youth, complex trauma, and trauma-informed interventions appropriate for this population. The training targeted licensed and unlicensed clinicians in the Antelope and Santa Clarita Valleys. There were approximately 34 participants from local school districts and community-based agencies.

On May 3, 2016, the Los Angeles County Department of Mental Health sponsored the training titled, Commercial Sexual Exploitation of Boys, Young Men, and Transgendered Youth. The training targeted DMH Directly Operated employees who have participated in CSEC 101 trainings previously. There were 85 employees who attended the training from Specialized Foster Care, Juvenile Justice, TAY Navigation, EOB, and Service Area 6 programs. Steven Procopio, ACSW, LICSW, was the invited subject matter expert. Mr. Procopio is a consultant and trainer with the Massachusetts Dept. of Justice, Office of Victim Crimes. He is also the founder of Roxbury Youth; the first free standing program to serve commercially sexually exploited adolescent males and transgender youth in the United States.

## Future Training Plan

*"Providing education and training to other service providers including social workers, child care workers, educators, health care providers, attorneys, faith/traditional leaders as well as the community at large is important in ensuring that survivors are surrounded by knowledgeable providers and community members." (Basile, K.C., Smith, S.G., Fowler, D.N., Walters, M.L., & Hamburger, M.E., 2016)*

Basile, K.C., Smith, S.G., Fowler, D.N., Walters, M.L., & Hamburger, M.E., 2016. Sexual Violence Victimization and Associations with Health in a Community Sample of African American Women. *Journal of Aggression, Maltreatment & Trauma*, 25(3), pages 231-253

The CSECY Training Team is currently working on a plan to expand the CSECY training program to local community members during the next fiscal year. The goal is to bring awareness to faith-based organizations, homeless shelters, drop-in centers, and other agencies that may be in contact with these victims. Training focused on the unique needs and circumstances of the CSECY population will improve the overall treatment outcomes for these youth. Additionally, the training plan for fiscal year 2016-17 will include: CSECY 101; CSECY Clinical Approaches; CSECY Male Victims; and trainings focused on substance abuse, LGBTQ issues, and providing clinical supervisors with skills for supporting clinicians working with CSECY.



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June 16, 2016

TO: Calvin Remington  
Interim Chief Probation Office

FROM: Jeffrey D. Gunzenhauser, M.D., M.P.H.   
Interim Health Officer

SUBJECT: **SUMMARY OF DEPARTMENTAL ACTIVITIES RELATED TO PREVENTING AND ADDRESSING THE COMMERCIAL SEXUAL EXPLOITATION OF CHILDREN**

This is to provide you with information about Department of Public Health (DPH) activities related to preventing and addressing the commercial sexual exploitation of children (CSEC). DPH has been actively engaged in the County's multi-agency planning efforts for CSEC since 2013 and continues work to improve our response to potentially trafficked youth. This memo provides a summary of the CSEC-related work underway in DPH.

DPH's Human Trafficking/CSEC Work Group was established in November 2013 and meets on a quarterly basis. The goal of the Work Group is to ensure that DPH staff that may encounter this vulnerable population understand the issue and know how to effectively respond if they suspect a client or patient has been trafficked. One of the first tasks of the Work Group was to develop the DPH Protocol Framework for Improving our Identification of and Response to Commercially Sexually Exploited and Trafficked Children, which details the roles and responsibilities of our diverse programs.

***CSEC-Related Activities:***

- DPH is a member of the Los Angeles County CSEC Integrated Leadership Team and is represented on the Interagency CSEC Steering Committee by the Associate Medical Director of the Office of HIV and STD Programs (DHSP) and the Director of Children's Medical Services (CMS). Committee meetings are also attended by staff from DPH programs that have an active role in serving CSEC.
- Division of HIV and STD Programs provides CSEC-related services within Juvenile Hall including case management and individualized health education and referrals for youth testing positive for sexually transmitted infections (STI) and for CSEC-identified youth. DHSP case managers work closely with Juvenile Hall Medical Services to provide individualized health education and referrals for STI-positive

and CSEC-identified youth. This includes weekly case conferencing; CSEC-specific meetings at Los Padrinos with Probation, DMH, LACOE and DHS; and CSEC champion meetings at Central with all DHS medical staff to assist with development of internal medical protocols and procedures for CSEC-identified youth. Juvenile Hall staff also attend monthly interdepartmental meetings convened by the Probation Department's Child Trafficking Unit.

- Public health nurses (PHNs) in the CMS Health Care Program for Children in Foster Care (HCPCFC) assess children and youth in foster care for indications of CSEC risk, provide education to potential CSEC victims related to reproductive and sexual health, and provide them with other resources, support, services, or referrals as needed. In addition, the CMS Court Pediatrician and Nurse Liaison are available to consult with the CSEC multi-disciplinary team (MDT) at the Edelman Children's Court as needed.
- Community Health Services (CHS) provides clinical services through DPH's 14 Public Health Centers. CHS' Sexually Transmitted Disease (STD) clinics offer confidential clinical services for testing and treatment for STDs and HIV, and also distribute condoms and emergency contraception as needed. At intake, staff ask CSEC assessment questions and provide information and referrals regarding sexual health and access to contraceptives, and also have a localized referral network, including access to the DCFS hotline for CSEC. The Refugee Health Assessment Program provides medical evaluations and referrals to asylees, as well as human trafficking survivors, and uses CSEC questions during assessments and physical exams.
- The Office of Women's Health's Violence Against Women (VAW) Workgroup provides leadership for the DPH Domestic Violence and Human Trafficking Care Integration Project. This project brings together DPH programs and community partners to collaborate and add value to the important domestic violence and human trafficking work being conducted in the community. This includes training public health and medical professionals about domestic violence, human trafficking, and trauma-informed care to enhance victim identification and response efforts.
- Maternal, Child, and Adolescent Health's Nurse Family Partnership (NFP) PHNs conduct screening and protocol procedures for potential and ongoing pregnant clients. All domestic violence, mental health, and CSEC screening items are embedded within NFP tools.
- To help inform the development and implementation of DPH's CSEC related work, the Office of Health Assessment and Epidemiology (OHAE) provides research and evaluation support. OHAE has provided pre- and post-test evaluation analysis for the VAW Workgroup's Domestic Violence and Human Trafficking Care Integration Project and conducted human trafficking surveys at eleven Community- and Faith-based organization meeting in Service Planning Area 6.

***Training Activities:***

DPH staff have participated in a variety of CSEC, trauma-informed care, and related trainings. Examples of these trainings are provided below.

- In early February 2016, over 500 DPH staff received training in trauma-informed service delivery through the VAW Workgroup's Domestic Violence and Human



Trafficking Care Integration Project. Personnel trained included public health nurses, physicians, public health investigators, and staff from Community Health Services, Nurse Family Partnership, the Childhood Lead Poisoning Prevention Program, the Health Care Program for Children in Foster Care, the Child Health Disability Prevention Program, and DHSP. These trainings will be available to additional personnel through a webinar and audio recording, and the Office of Organizational Development and Training (ODT) is hosting an additional webinar on human trafficking on June 16, 2016.

- The DPH Human Trafficking/CSEC Work Group leadership provides members with information about on line trainings on CSEC.
- Over 120 staff and PHNs completed the 8-hour CSEC 101: An Overview of Sex Trafficking training.
- 88 staff, including Nurse Family Partnership PHNs, attended “Current Issues in Cyber-Crime and Child Exploitation” provided by Tracy Webb, Deputy City Attorney on the Counsel on Child Abuse Policy and Cyber Crime
- 121 DPH staff received the Healthy Moms, Happy Babies and Connected Parents, Connected Kids trainings provided by the VAW Workgroup’s Domestic Violence and Human Trafficking Care Integration Project.

***CSEC-Related Policies/Procedures:***

- DHSP Juvenile Hall case managers assess for CSEC at intake and immediately report, via the DCFS Hotline, any suspected or disclosed CSEC that have not already been identified by the Probation Department or Department of Health Services medical staff.
- In Maternal, Child, and Adolescent Health Programs, existing policies and procedures within the Nurse Family Partnership Program cover response to CSEC.

***Future Activities:***

- DHSP plans to expand the Juvenile Hall program by implementing an evidence-based sexual health education curriculum at all three Juvenile Hall Facilities for all probationary youth. Group classes will be offered for boys and girls, tailored by gender and age, to provide culturally appropriate sexual health education. The “kick-off” to these classes is a Wellness Conference convened at Los Padrinos on May 14, 2016 for all detained female youth. DHSP staff will provide an interactive sexual health education presentation about reproductive and sexual health, including information on healthy relationships, family planning, contraception options, STDs, clinic resource, and referrals in the community. Classes should be implemented within the next year, as curriculum needs to be developed and piloted, and additional staff hired.
- In CMS, formal HCPCFC nursing policies and procedures are under development, with a projected timeline for implementation and training of staff in November 2016.
- In the Office of Women’s Health, the VAW Workgroup plans on completing its strategic plan in the next four months, while also developing subgroups to implement the defined priorities over the next few years. This involves training additional DPH staff, as well as a second set of trainings linking community based providers and

Calvin Remington  
June 16, 2016  
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SPAs. Various interventions within DPH, such as the Domestic Violence and Human Trafficking Care Integration STD Clinic Pilot are also planned.

- The Office of the Medical Director plans to host training sessions and offer continuing medical education (CME) units for direct service providers within DPH. Training sessions will be archived and available on the DPH Health Care Provider website. There will also be a CSEC response presentation at the Annual Provider Conference. All training for direct service providers will include updated guidelines on California's mandatory reporting laws.
- Environmental Health is working on the development of a script for staff in the Customer Call Center to review when callers are reporting human trafficking and CSEC.
- ODT has developed a Human Trafficking/CSEC webinar with Susie Baldwin, M.D., M.P.H. which will be part of the Expert Speaker Webinar Series that is coordinated by ODT.

If you have any questions or need additional information, please let me know.

JDG:al



**Health Services**  
LOS ANGELES COUNTY

June 21, 2016

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**TO:** Calvin Remington  
Interim Chief Probation Officer

**FROM:** Mitchell H. Katz, M.D. *Mitchell Katz*  
Director

**SUBJECT: DEPARTMENT OF HEALTH SERVICES (DHS) UPDATE  
ON SERVICES PROVIDED TO COMMERCIALY  
SEXUALLY EXPLOITED CHILDREN (CSEC)**

The DHS is actively engaged in the County's CSEC Integrated Leadership Team. The following provides a brief synopsis of how DHS identifies and provides services to CSEC youth.

**Mitchell H. Katz, M.D.**  
Director

**Hal F. Yee, Jr., M.D., Ph.D.**  
Chief Medical Officer

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DHS is a participant in the CSEC First Responder Protocol. Both the Martin Luther King Jr. (MLK) Medical Hub clinic and LAC+USC Medical Hub Clinic provide services to youth that are identified as CSEC from the Department of Children and Family Services (DCFS) through the protocol. LAC+USC's Adolescent Care and Transition (ACT) clinic, which is part of the Medical Hub, has also been receiving referrals from the Probation Department for CSEC identified at the juvenile halls and from the CSEC Multidisciplinary Team at Dependency Court.

*To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.*

CSEC youth referred to the Medical Hub clinics are scheduled for 90 minute medical appointments. As part of the First Responder Protocol, DCFS notifies the Medical Hub's co-located DCFS Children's Social Worker of a CSEC referral and an expedited Medical Hub appointment is scheduled for the same or next day as requested. The CSEC exam is a comprehensive medical examination addressing all medical needs including reproductive health. Depending on appropriateness and patient acceptance, services may include a general medical examination, mental health assessment, pelvic exam, long-acting reversible contraception, Sexually Transmitted Infection (STI) testing, and HIV post-exposure prophylaxis. When appropriate, a Sexual Assault Response Team (SART) exam is offered for the collection of evidence, but this has been declined by all CSEC patients to date.

At the ACT clinic at the LAC+USC Medical Hub, a total of 27 CSEC exams were completed from October 2015 through April 2016. Of those 27 patients, 19 were seen for at least one follow-up visit. At the MLK Medical Hub, a total of five CSEC exams were completed between July 2015 and April 2016, and two were seen for at least one follow up visit. The Harbor-UCLA Medical Hub also conducted one CSEC exam during this period.



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Ongoing mental health services are available through the VIP Community Mental Health Center (VIP) at the LAC+USC Medical Hub, through the Hub psychologist, or out-stationed Department of Mental Health (DMH) staff at the MLK Medical Hub. The SB82 program at VIP provides mental health services for youth with unstable placements and assigns a case manager and therapist who can meet with the youth up to four times a week in the community for 6-8 weeks.

#### DHS Involvement within the Juvenile Halls

Currently, a DHS CSEC Champions Team, collaborating with the Probation and Mental Health departments, acts as an interdepartmental team to develop guidelines, policies and procedures for identifying and assisting CSEC youth. DHS staff (pediatricians) undergo CSEC trainings to provide a background in working with these high-risk youth. Staff usually identify these youth through clinic visits. Notification is done through the DCFS Child Abuse Hotline to continue to document a history for the youth. Staff currently work with the LAC+USC Medical Hub through the VIP and ACT clinics to arrange for the first appointment with the VIP clinic and also to help establish follow-up care with the ACT clinic. Ideally, this establishes a rapport in the clinical relationship between the youth and the Medical Hub staff before the youth are discharged from the Juvenile Detention Facility to encourage continued follow-up care.

#### Dependency Court CSEC Multidisciplinary Team

DHS participates actively in the Dependency Court CSEC Multidisciplinary Team meetings held each Wednesday. Eunice Rios, M.D., the medical director of the LAC+USC ACT Clinic, has attended the meetings since its inception in February 2016. She searches for and reviews patient medical records in advance from the E-mHub data system at the Medical Hub clinics and from the DHS ORCHID electronic medical record system, as well as any information available from the DCFS Health and Education Passport and any medical records provided by the attorney. She participates in case discussions with DCFS, the Children's Law Center, Alliance for Children's Rights and the youth's advocate (where applicable) to develop a plan for the youth. If there are any unaddressed medical needs, she arranges for the youth to be brought into the ACT clinic or the MLK Hub for medical evaluation as soon as possible.

#### Staff Training

DHS staff at the LAC+USC Medical Hub and MLK Medical Hub have completed the CSEC 101 training and some have also completed the CSEC 102 training. In advance of the implementation of the First Responder Protocol in the Antelope Valley, all staff at the High Desert Medical Hub clinic attended a training on the protocol held on May 12, 2016. In addition, Catherine DeRidder, M.D., Child Abuse Pediatrician at the LAC+USC Medical Hub, conducted a grand rounds training on CSEC for LAC+USC Department of Pediatrics medical residents and attending staff in 2015. We hope to bring these grand rounds to Olive View-UCLA Medical Center and Harbor-UCLA Medical Center during fiscal year 2016-2017, and to train DHS Emergency Department and pediatrics staff with a web-based or in-person training in the same time period.

If you have any questions, please let me know.

MHK:mg