

Primary Prevention Framework for Child Trafficking:

A WHITE PAPER

September 2020



GLOBAL ALLIANCE
for Behavioral Health and Social Justice

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Acknowledgements (alphabetical):

This paper was principally drafted by Gita Jaffe, Robin Kimbrough-Melton, Jill D. McLeigh, and Mary Sullivan. We would like to thank past and present task force members who have contributed to the development of the Primary Prevention Framework including: Liepa Boberiene, Jessa Dillow Crisp, Nancy Janus, Monica Landers, Jacqueline Larson, and Frances Recknor as well as all of the individuals who lent their expertise in the development of the primary prevention framework.

Executive Summary

Child trafficking is one of the most egregious violations of children's rights and well-being. It occurs in every country around the world, but estimating its prevalence is difficult.

Research suggests that child trafficking may adversely affect a child's physical, psychological, spiritual, and social-emotional development. Indeed, survivors of child trafficking can experience multiple layers of trauma, and the emotional effects can be persistent and devastating. Survivors may suffer from anxiety, panic disorder, major depression, substance abuse, hopelessness, and low self-esteem. Although there are many challenges to meeting the trauma-related needs of child trafficking victims, trauma-informed and trauma-specific services do exist, and studies to understand the specific needs of survivors have been and continue to be developed. Less attention has been given to the prevention of child trafficking *before* it occurs.

In 2018, following the completion of two comprehensive literature reviews and consultations and discussions among task force members and other experts in the field, the Human Trafficking Task Force of the Global Alliance for Behavioral Health and Social Justice (Global Alliance) identified the need for a coherent framework for conceptualizing the primary prevention of child trafficking and strategies for its implementation. The task force found that discussions of prevention in the literature rarely focused on *primary* prevention; that is, they failed to address the factors that lead to vulnerability to being trafficked or becoming a trafficker.

Key Facts

- ▶ At any given time in 2016, an estimated 40.3 million people were in modern slavery, including 24.9 million in forced labour and 15.4 million in forced marriage.
- ▶ Out of the 24.9 million people trapped in forced labour, 16 million people are exploited in the private sector, such as domestic work, construction or agriculture; 4.8 million persons in forced sexual exploitation, and 4 million persons in forced labour imposed by state authorities.
- ▶ 1 in 4 victims of modern slavery are children.
- ▶ Women and girls are disproportionately affected by forced labour, accounting for 99% of victims in the commercial sex industry, and 58% in other sectors.

Source: [Global Estimates of Modern Slavery: Forced Labour and Forced Marriage](#), Geneva, September 2017.

This White Paper outlines specific principles and strategies of operationalization that all individuals, families, communities, and states should apply. The framework recognizes that all individuals and organizations have responsibilities in implementation. Its principles and strategies are developed with the understanding that they will necessarily be tailored to the community. Policy makers should utilize this framework to end child trafficking and promote well-being and positive outcomes for children.

“Intervening during the trafficking process may be a case of ‘too little, too late’ unless the factors that determine the behavior of crucial actions are also addressed...”

DOTTRIDGE (2006)

Introduction

Child trafficking (i.e., the movement of a child, aged 0-18 years, within a country, or across borders, whether by force or not, with the purpose of exploiting the child; United Nations Children’s Fund [UNICEF], 2007) is one of the most egregious violations of children’s rights and well-being. To gain a better understanding of the crisis, the Global Alliance formed a task force in 2014. The task force members decided to first conduct a review of documents produced by U.N. treaty monitoring bodies to gain a better understanding of the global scope and scale of child trafficking and what was being done to address it. The task force found that the horrific experiences reported by survivors of trafficking had stimulated the development of hundreds of new programs to assist survivors and to identify victims earlier; new laws to strengthen the arrest, prosecution, and sentencing of perpetrators; efforts to raise awareness of the problem; and increased funding to support local efforts. Although several programs and policies had been designed to intervene during the four phases of child trafficking (e.g., recruitment and transportation; exploitation; withdrawal from the trafficking situation; and recovery/reintegration), the task force was concerned about the lack of focus on prevention.

Even when prevention was discussed, efforts tended to focus on secondary and tertiary (e.g., providing services to survivors to prevent them from reengaging in trafficking) levels. Missing from U.N. discussions was an emphasis on *primary* prevention.

Having identified a gap in the literature on the problem of child trafficking and in keeping with a public health approach, the task force next conducted research aimed at identifying sources of vulnerability for children to trafficking. The goal was to identify areas where risk could be reduced and where protective factors could be developed and/or nurtured. The review included academic literature, reports from international and U.S. governing bodies, and information from nongovernmental organizations. The task force noted that numerous root causes of child trafficking had been identified, but that little to no discussion existed on strategies designed to address them. Further, the task force was concerned by the lack of attention to the socio-ecological model

“Why have we seen so little progress in reducing the prevalence of child trafficking and related forms of exploitation? ... the reality is that most of the work continues to focus on prosecuting perpetrators and, to a lesser extent, on assisting survivors. Few significant efforts have been aimed at prevention.”

TODRES (2014)

(Bronfenbrenner, 1979), as most publications addressing risk factors focused on individual-level vulnerabilities (e.g., low self-esteem; minority status; disability) while ignoring relational-, community- and societal-level vulnerabilities.

Based on information gleaned from the two comprehensive literature reviews and numerous discussions among task force members and with other experts in the field, the group identified the need for a coherent framework for conceptualizing the primary prevention of child trafficking.

Primary Prevention Framework for Child Trafficking

This framework is principle-based, comprehensive, and builds upon community strengths and resources to prevent child trafficking in all its forms. It incorporates aspects of both the human rights approach and public health approach to stimulate prevention-focused social change. This framework uses the Socio-Ecological Model (SEM) and the Capability Approach (CA), with influence from Spectrum of Prevention. In Figure 1 the theories influencing the development of the framework and their contributions to the primary prevention framework are explained.

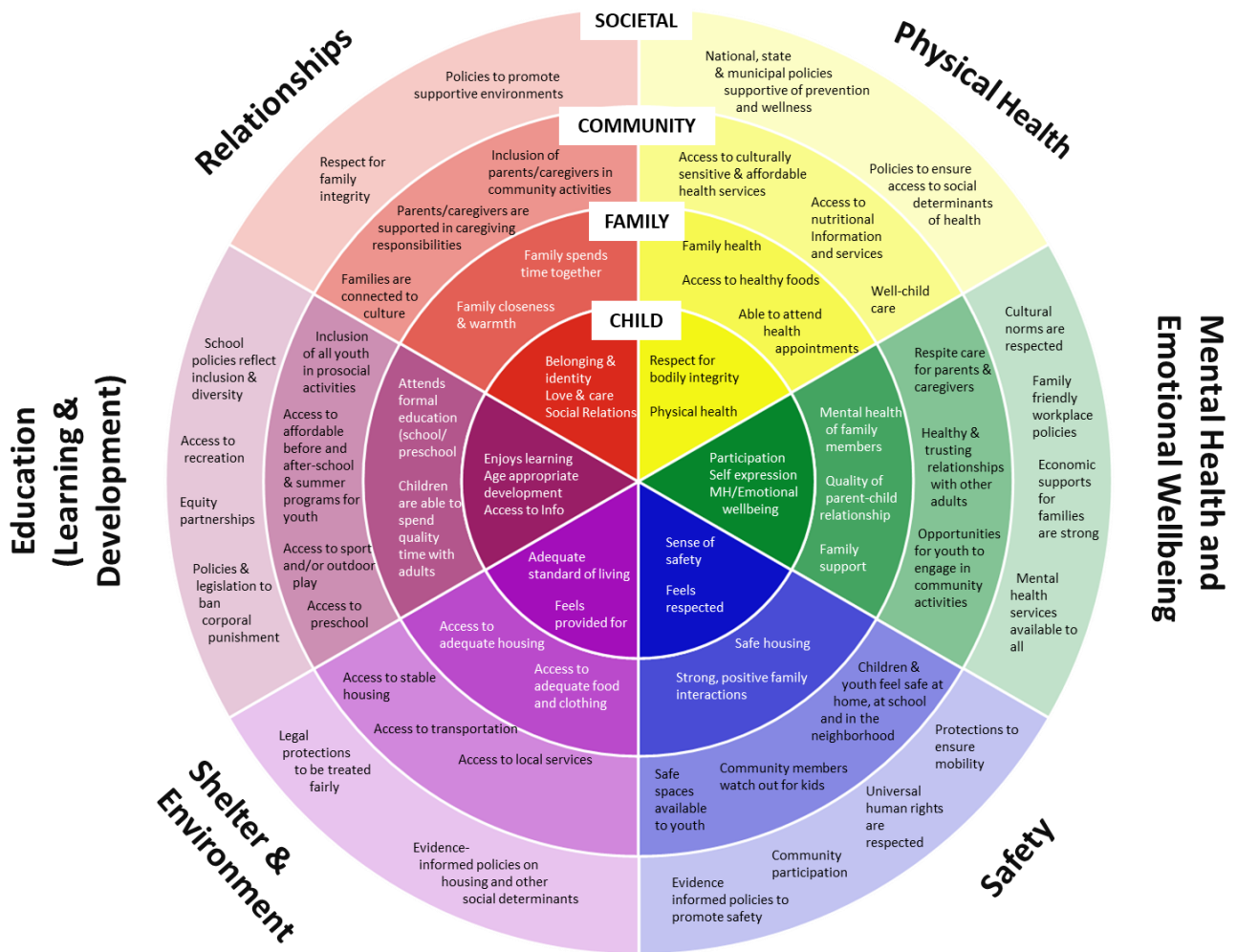
Figure 1: Theories Influencing the Development of the Framework

Frameworks	Explanation	Contribution to the framework
Human rights	<ul style="list-style-type: none"> ▶ Starts from a rights-based approach, as opposed to being deficits-based ▶ Provides a foundation for creating an environment that is respectful of people 	<ul style="list-style-type: none"> ▶ Views children as rights holders ▶ Keeps focus on the fulfillment of economic and social rights of children by attending to issues of inequality and discrimination ▶ Recognizes the dignity of all children and society’s responsibility toward them ▶ Contributed to the selection of domains, as the concepts can be found in the Convention on the Rights of the Child
Public health	<ul style="list-style-type: none"> ▶ Focuses on prevention, and therefore emphasizes early detection and support ▶ Inclusive of population health and health promotion 	<ul style="list-style-type: none"> ▶ Puts focus on preventing harm before it occurs ▶ Seeks to involve all stakeholders who can play a role in addressing a problem or issue ▶ Uses data to understand the nature of problems (data-driven) ▶ Suggests strategies for intervention

<p>Socio-ecological model (SEM)</p>	<ul style="list-style-type: none"> ▶ Recognizes that influences on well-being exist not just within the individual, but also at the community and societal levels 	<ul style="list-style-type: none"> ▶ Provides a framework for considering the individual, family, community, and societal influences to address a problem or issue ▶ Suggested actions that can be undertaken at each of the socio-ecological levels
<p>Capability Approach (CA)</p>	<ul style="list-style-type: none"> ▶ Moves beyond the concept of just having resources ▶ Refers to interaction and relationships, not just individual or social resources ▶ Acknowledges the fallacy of one-size-fits all approaches ▶ Encourages tailoring efforts to the local community 	<ul style="list-style-type: none"> ▶ Contributed to the selection of domains, as the domains recognize rights that children’s themselves identified as important ▶ Principles acknowledge the challenges of one-size-fits-all (“cookbook”) approaches ▶ Complements the human rights and public health approaches

Figure 2 provides a graphic representation of the Primary Prevention Framework for Child Trafficking within a social ecological model. The six domains—Relationships, Physical Health, Mental Health and Emotional Well-being, Safety, Shelter and Environment, Education (Learning and Development)—were informed by children identifying their own capability sets in Biggeri’s (2003) and Buchordt and Vizard’s (2008) research.

Figure Two: Primary Prevention Framework for Child Trafficking



Guiding Principles for Implementing the Framework

Although child trafficking is a global problem, strategies to prevent it must address all levels of the socio-ecological model. In thinking about a framework for the primary prevention of child trafficking, the task force recognized that a one-size-fits-all approach was not possible. Indeed, strategies need to be tailored to the specific contexts in which they will be employed. Thus, the task force devised a set of principles to guide primary prevention efforts implemented in diverse settings. The principles are grounded in the collective knowledge of task force members—several of whom conducted additional reviews on factors affecting children’s well-being and safety—and the experts with whom they consulted. The principles, strategies for operationalization and examples for implementing the strategies at the community and society level are provided in Figure 3.

Figure 3: Principles and Operational Strategies with Examples

Principle	Strategy to Operationalize	Society Level Examples (Domain)	Community Level Examples (Domain)
<p>Strategies ensure opportunities for children and youth to actively participate, including in decision making of community structures.</p>	<ul style="list-style-type: none"> ▶ Expand opportunities to participate in school and community efforts 	<ul style="list-style-type: none"> ▶ Involve children in designing parks (Shelter and Environment, Relationships, and Mental Health and Emotional Well-being) 	<ul style="list-style-type: none"> ▶ Engage children in the leadership of the school (Education, and Relationships) ▶ Develop a children’s council to design a peer-mentoring program in their school (Education, Relationships, and Mental Health and Emotional Well-being)
<p>Strategies are child-centered and family-focused.</p>	<ul style="list-style-type: none"> ▶ Develop opportunities for children and youth to be taken seriously as members of the family 	<ul style="list-style-type: none"> ▶ Engage youth and their families in the development of curricula for a life skills program needed for independent 	<ul style="list-style-type: none"> ▶ Involve children, youth and their families in developing afterschool opportunities (Safety,

		living (Mental Health and Emotional Well-being, Education)	Mental Health and Emotional Well-being)
Community investment in children and youth promotes family functioning.	<ul style="list-style-type: none"> ▶ Create opportunities for children to be connected to and monitored by adults ▶ Foster opportunities for children to represent and share experiences from their families and for their families ▶ Develop family-strengthening opportunities 	<ul style="list-style-type: none"> ▶ Engage youth voice in national strategies (All Domains) ▶ Connect youth with adult leaders (e.g. participation on task forces) (All Domains) 	<ul style="list-style-type: none"> ▶ Engage children and youth in the development of non-formalized mentorship programs (e.g. community gardens) (Mental Health and Emotional Well-being) ▶ Ensure bus stops all have adequate lighting, and are in close proximity to homes and key locations children frequent (Shelter and Environment, Safety)
Strategies are tailored to community strengths and resources.	<ul style="list-style-type: none"> ▶ Provide opportunities for the community to conduct strengths and needs assessments ▶ Develop a platform to share resources ▶ Create collaborative opportunities ▶ Develop opportunities to recognize and celebrate contributions 	<ul style="list-style-type: none"> ▶ Engage communities from local levels to participate in a national platform to share resources, lessons and collaborative opportunities (All Domains) 	<ul style="list-style-type: none"> ▶ Engage youth to conduct needs and strengths assessments (Education) ▶ Have communities 'repurpose existing infrastructure' by contracting community members based on the outcomes of the assessments (Safety; Relationships)
Strategies are comprehensive.	<ul style="list-style-type: none"> ▶ Cultivate opportunities for multi-sectoral collaborations 	<ul style="list-style-type: none"> ▶ Initiate a national task force with multi-sectoral; 	<ul style="list-style-type: none"> ▶ Encourage community councils with representatives from diverse groups (i.e. business leaders, Faith-

	<ul style="list-style-type: none"> ▶ Develop platforms for like-minded stakeholders to share their experience 	interdisciplinary members (All Domains)	<p>based leaders, teachers) (Education; Relationships)</p> <ul style="list-style-type: none"> ▶ Integrate opportunities for respite care with programs (Learning and development/ Mental Health and Emotional Well-being)
Respect and support relationships that are important to children.	<ul style="list-style-type: none"> ▶ Recognize the importance of ensuring the well-being of adults is also important to a child’s development 	<ul style="list-style-type: none"> ▶ Adopt a model of foster care such as <u>Safe Families</u> out of Chicago (All Domains) 	<ul style="list-style-type: none"> ▶ Foster support groups for grandparents-raising-grandchildren (Relationships)
Be universal and inclusive.	<ul style="list-style-type: none"> ▶ Ensure all children and caregivers can participate as valued, respected and contributing members of society by actively investing in conditions for inclusion 	<ul style="list-style-type: none"> ▶ Increase investment in programs such as Early Head Start, which focus on ages 0 to 3 and pregnant women (Education) ▶ Support laws and policies that promote non-discrimination (All Domains) 	<ul style="list-style-type: none"> ▶ Embed family supports in primary community institutions (e.g., schools, medical clinics, recreation centers) to normalize help-seeking (All Domains)

Conclusion

The Primary Prevention Framework for Child Trafficking was designed as a holistic approach to combat one of the most egregious violations of children's rights and well-being. This framework provides individuals, families, communities and societies with principles and strategies for implementing child trafficking prevention measures. The framework provides guidance and examples policy makers can support at the community and society level in each of the domains to improve the health and well-being of all children. Moving forward, the Global Alliance's Human Trafficking Task Force will explore the possibilities of developing companion documents to this White Paper and further outlining implementation and entry points to the framework.

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Appendix A. Accomplishments of the Task Force

Products and Presentations

[Congressional Briefing](#) (2017), Washington, DC (Read the [policy brief](#) from the Congressional Briefing)

McLeigh, J. D., Kimbrough-Melton, R., Jaffe, G., & Sullivan, M. (2019, November). *A primary prevention framework for child trafficking: A public health and human rights approach*. Presentation made at the annual meeting of the American Public Health Association, Philadelphia, PA.

Jaffe, G., Kimbrough-Melton, R., Sullivan, M., & McLeigh, J.D. (2019, November). *Preventing child trafficking: A framework for involving the Community*. Poster presented at the annual meeting of the American Public Health Association, Philadelphia, PA.

Jaffe, G., Kimbrough-Melton, R., Larson, J., McLeigh, J. D., & Sullivan, M. (2019, June). *Multisectoral reflections on a primary prevention framework for child trafficking: A roundtable discussion*. Presentation made at the Society for Community Research and Action Biennial Conference, Chicago, IL.

McLeigh, J. D., & Kimbrough-Melton, R. (2018, November). *Protecting victims of human trafficking: Monitoring implementation of the right to health*. Presentation made at the annual meeting of the American Public Health Association, San Diego, CA.

McLeigh, J. D., Kimbrough-Melton, R., Jaffe, G., Sullivan, M., & Larson, J. (2018, November). *Factors that influence young people's vulnerability to trafficking*. Poster presented at the annual meeting of the American Public Health Association, San Diego, CA.

McLeigh, J. D., Jaffe, G., Kimbrough-Melton, R., & Sullivan, M. (2017, September). *Toward a framework for child trafficking prevention*. Paper presented at the Interdisciplinary Conference on Human Trafficking, Lincoln, Nebraska.

Trafficking Related Eblasts

7/17/2017: New Resolution from the Global Alliance: Child Trafficking Prevention

1/22/2018: Human Trafficking Day

2/27/2018: New Policy Brief on Child Trafficking Prevention from the Global Alliance

7/13/2018: World Day Against Trafficking

1/15/2019: January is... National Slavery & Trafficking in Persons Prevention Month

1/10/2020: Human Trafficking Awareness Day

OTIP Prevention Statement (July 2019)

A [resolution](#) on child trafficking prevention, approved by our Board of Directors in 2017.

Appendix B: American Journal of Orthopsychiatry (AJO) Trafficking-Related Articles

Gervais, S. J., & Eagan, S. (2017). *Sexual objectification: The common thread connecting myriad forms of sexual violence against women*. *American Journal of Orthopsychiatry*, 87(3), 226–232.

Hartinger-Saunders, R. M., Trouteaud, A. R., & Matos Johnson, J. (2017). *Mandated reporters' perceptions of and encounters with domestic minor sex trafficking of adolescent females in the United States*. *American Journal of Orthopsychiatry*, 87(3), 195–205.

Peled, E., & Parker, A. (2013). *The mothering experiences of sex-trafficked women: Between here and there*. *American Journal of Orthopsychiatry*, 83(4), 576–587.

Rafferty, Y. (2013). *Child trafficking and commercial sexual exploitation: A review of promising prevention policies and programs*. *American Journal of Orthopsychiatry*, 83(4), 559–575.
<https://doi.org/10.1111/ajop.12056>

Rafferty, Y. (2018). *Mental health services as a vital component of psychosocial recovery for victims of child trafficking for commercial sexual exploitation*. *American Journal of Orthopsychiatry*, 88(3), 249–260.

Reid, J. A., Baglivio, M. T., Piquero, A. R., Greenwald, M. A., & Epps, N. (2019). *No youth left behind to human trafficking: Exploring profiles of risk*. *American Journal of Orthopsychiatry*, 89(6), 704–715.

Appendix C: Statement to the Office of Trafficking in Persons



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07.23.19

Statement to the Office on Trafficking in Persons

The *Human Trafficking Task Force* of the **Global Alliance for Behavioral Health and Social Justice** (Global Alliance) is pleased to submit the following comments to the Office on Trafficking in Persons (OTIP) for consideration in the development of a national human trafficking prevention action plan.

The Global Alliance (formerly the American Orthopsychiatric Association) is a 96-year old interdisciplinary professional association of psychologists, social workers, psychiatrists, nurses, lawyers, educators, sociologists, students and others dedicated to informing policy, practice and research concerning behavioral health, social justice, and wellbeing. As a behavioral health organization that embeds its work in principles of human rights and social justice, we are committed to the **primary** prevention of child trafficking. Our recommendations to you are based on a multi-year examination of the scholarly literature, NGO reports, and reports from international and U.S. governing bodies to understand what is known about the prevention of child trafficking. We found that although prevention is a key element of the legal framework for combatting child trafficking, implementation of prevention strategies has taken a back seat to protection and prosecution. The **primary** prevention of child trafficking has been especially neglected.

The horrific consequences of child trafficking – both physical and behavioral -- demands a prevention strategy. Research has shown that human trafficking intersects with a variety of other forms of interpersonal violence including child abuse, sexual assault, intimate partner violence, and community violence. Early experiences of violence, such as child abuse, may pave the way for later exploitation. Research also shows that positive or negative experiences in the early years fundamentally alter the architecture of a child's brain. Early adversity has long-term health (e.g., obesity, diabetes, chronic diseases, suicide) consequences, and impact behavioral risk factors (e.g., smoking, alcoholism, drug use) and life potential, such as graduation rates, academic achievement, and lost time from work. For these reasons, prevention of violence, and early intervention when violence has occurred, is critically important to a comprehensive trafficking strategy. Moreover, failure to prevent trafficking is a violation of the human rights of children by absolving individuals, institutions and

communities, which have an obligation to respect, protect, and fulfill the rights of children, of their responsibility.

Preventing child trafficking will require a comprehensive approach that addresses the multiple pathways into trafficking and the root causes, including social and environmental factors, that create vulnerabilities to trafficking. To address these challenges, and in keeping with our values and approach, we support a human rights-based and public health focus on prevention of child trafficking, both among those children vulnerable to becoming trafficked and those children vulnerable to becoming traffickers. We further support efforts to affirm the dignity of human trafficking survivors through trauma-informed care and community inclusion and not just prosecution. We recognize that we cannot prosecute our way out of this problem – we must prevent child trafficking *before it occurs*.

Accordingly, we recommend the following:

1. Preventing child trafficking requires a population health approach aimed at building community capacity to support children and their families.

A population health approach seeks to improve the health of the entire population and to reduce health inequities between population groups. This type of approach is important in addressing the effects of the social determinants of health on the wellbeing of children and youth. Communities shape the behavior of children and youth and influence health outcomes.

In this context, the challenge for communities is creating environments for children and youth that foster strong and secure psychological, emotional, economic, and physical attachments. A population health perspective can help to facilitate integration of knowledge across sectors with a goal of developing a shared community vision. It can also create a sense of community responsibility for children and their families by engaging community residents, leaders, and faith- and community-based organizations in providing leadership in addressing the social determinants of health. The engagement of the broader community such as private industry, health care professionals and educators, will also contribute to the sustainability of the effort.

2. In keeping with a public health lens, adopt the socio-ecological model as a framework for guiding prevention efforts.

A public health lens is most promising for creating the conditions that will enable children to be healthy and less vulnerable to risk. The socio-ecological model is informative in developing prevention efforts because it shows the interplay between the individual, relationship, community, and societal levels and it helps us to understand the factors that put children at risk and that protect them from risk.

3. Strengthen social networks at the community level.

Communities characterized by community engagement and inclusive social networks are more likely to be safer for children. In turn, safer neighborhoods are more likely to provide the emotional and instrumental support needed by parents and caregivers to adequately care for their children and to protect against depression and other mental health challenges. Safer neighborhoods are also associated with reduced risk of behavioral problems in children.

Finally, safer neighborhoods are more likely to attract economic investment and other community resources necessary for healthy development.

We applaud the commitment of the OTIP to developing a comprehensive (e.g., primary, secondary, and tertiary) action plan for preventing child trafficking. Please let us know if we can provide assistance.

Respectfully Submitted,

A handwritten signature in blue ink, appearing to read 'Gita Jaffe', is positioned below the closing text.

Gita Jaffe, PhD, Chair Human Trafficking Task Force Global Alliance for Behavioral Health and Social Justice