

Contents lists available at [ScienceDirect](https://www.sciencedirect.com)

# Child Abuse & Neglect

journal homepage: [www.elsevier.com/locate/chiabuneg](http://www.elsevier.com/locate/chiabuneg)

## “Sometimes, Somebody Just Needs Somebody – Anybody – to Care:” The power of interpersonal relationships in the lives of domestic minor sex trafficking survivors



Jennifer E. O’Brien

Department of Social Work, The University of New Hampshire, Pettee Hall, Durham, NH 03824, United States

### ARTICLE INFO

#### Keywords:

Domestic minor sex trafficking  
Qualitative  
Interpersonal relationship  
Risk and resiliency framework

### ABSTRACT

Domestic minor sex trafficking (DMST) is the recruitment, harboring, transportation, provision, or obtaining of U.S. minors for the purposes of a commercial sex act. DMST victims and survivors often become involved with state-level systems including the child welfare and/or juvenile justice systems. This study presents exploratory qualitative findings regarding the role of interpersonal relationships in the lives of system-involved DMST survivors from the perspectives of DMST survivors. Results indicate survivors perceive interpersonal relationships as key to promoting risk, providing protection, and fostering resiliency over DMST. Findings from the current study not only provide a context for understanding the role of interpersonal relationships in the lives of DMST survivors but also point to directions for development of interventions targeted toward this population.

### 1. Introduction

Domestic minor sex trafficking (DMST) is the recruitment, harboring, transportation, provision, or obtaining of U.S. minors for the purposes of a commercial sex act ([Trafficking Victims Protection Act \[P.L. 106–386\]](#)). DMST also includes a person’s exchange or acceptance of sex acts as a means of meeting basic needs, also termed *survival sex* (e.g., sex in exchange for food or shelter; [Adelson, 2008](#)). Due to a lack of parental supervision and the illegal acts inherent in the crime, DMST victims and survivors have a higher chance of becoming involved in state-level systems (e.g., the child welfare and/or juvenile justice systems; [Fong & Berger-Cardoso, 2010](#); [Jordan, Patel, & Rapp, 2013](#); [Stransky & Finkelhor, 2008](#)). Similarly, known risk factors for DMST include both childhood abuse and delinquent activities such as drug use, running away, fighting, and gang activity ([Lutnik, 2016](#); [Watson & Edelman, 2012](#)). At the same time, researchers and clinicians are unclear about what would foster resiliency among these children, thereby reducing their risk of future or ongoing DMST victimization. Interpersonal relationships have been identified as both a risk and protective factor for a number of risky adolescent behaviors including early sexual relationships, delinquency, and drug use ([Boyden & Mann, 2005](#); [Fraser, Galinsky, & Richman, 1999](#); [Tusaie & Dyer, 2004](#)). It remains unclear if interpersonal relationships play a similar role for system-involved victims and survivors of DMST.

#### 1.1. Domestic minor sex trafficking in the United States

DMST is one of the most hidden forms of child abuse in the United States ([Clawson & Goldblatt Grace, 2007](#); [Kotrla, 2010](#)). DMST traffickers are motivated to keep their criminal acts concealed and- if caught- are often prosecuted for crimes parallell to trafficking

E-mail address: [Jennifer.Obrien@unh.edu](mailto:Jennifer.Obrien@unh.edu).

<https://doi.org/10.1016/j.chiabu.2018.04.010>

Received 14 November 2017; Received in revised form 5 April 2018; Accepted 13 April 2018  
0145-2134/ © 2018 Elsevier Ltd. All rights reserved.

such as pimping (Lutnik, 2016). Thus, only scant research exists about traffickers and other exploiters who contribute to the perpetration of this crime (Lutnik, 2016; Schauer & Wheaton, 2006). Similarly, DMST victims are a hidden population made up of children who might not wish to be identified, such as runaways or those who suffer from addictions (Clawson, Dutch, Solomon, & Goldblatt Grace, 2009). For these reasons, the research methods typically used for investigating prevalence and incidence are not useful when attempting to establish the scope of DMST (Smith, Vardaman, & Snow, 2009). The true incidence and prevalence of DMST is unknown (Lutnik, 2016; Stransky & Finkelhor, 2008).

Among DMST victims, the lack of parental supervision and the illegal nature of their activities is likely to bring these young victims to the attention of authorities. Thus, survivors of DMST become clients in the public child welfare system (Clawson & Goldblatt Grace, 2007; Fong & Berger-Cardoso, 2010) and/or the juvenile justice system (Jordan et al., 2013; Stransky & Finkelhor, 2008). New federal and state legislation recognizes the importance of identifying and providing services to system-involved DMST survivors, and requires that states identify and provide services for all children who are either at risk for being sex trafficked or are survivors of DMST (e.g., the Preventing Sex Trafficking & Strengthening Families Act [P.L. 113–183], Trafficking Victims Protection Act [P.L. 106–386], and state-level Safe Harbor laws [Polaris Project, 2015]). Although this legislation is important, little is known about the lives and vulnerabilities of system-involved DMST survivors, which hinders attempts toward prevention and care (Brittle, 2008; Fong & Berger-Cardoso, 2010; Lutnik, 2016).

### 1.2. Risk factors, protective factors, and resiliency

Studies have determined important risk and protective factors associated with resiliency among populations of at-risk youth (e.g., foster youth), but have yet to determine if these factors are similar to- or unique from- those foster DMST. Distinguishing DMST-specific risk and protective factors would provide a beneficial focus for DMST victim and survivor identification, as well as for treatment protocols (Hamby, Grych, & Banyard, 2017). Accordingly, an urgent need exists for evidence to guide the development of identification strategies for system-involved DMST victims/survivors and those at risk of DMST victimization to address this public health problem and aid in primary prevention efforts.

To this end, the risk and resiliency framework is valuable for understanding individual and environmental risks, protections, and the subsequent likelihood of demonstrating resiliency over childhood adversities, including sexual exploitation (Fraser et al., 1999). Individual and environmental risk factors, as well as individual risk-related life events (e.g., death of a parent), are likely to influence a survivor's sense of agency and future outcomes (Fraser et al., 1999; Tusaie & Dyer, 2004). Similar to risk factors, protective factors also help predict future outcomes by either modifying risk or moderating the relationships among risk factors (Fraser et al., 1999; Ungar, 2003). Put another way, an individual's likelihood of demonstrating resiliency when faced with unsafe or illegal activities (including DMST) can be either hindered by risk factors or promoted by protective factors (Boyden & Mann, 2005; Fraser et al., 1999; Tusaie & Dyer, 2004). Moreover, the terms *resilience* and *resiliency* refer to the process of overcoming the negative effects of risk exposure, coping successfully with traumatic experiences, and/or avoiding the negative trajectories associated with risk (Bonanno, 2004; Fergus & Zimmerman, 2005). Negative trajectories associated with risk could be initial, renewed, or ongoing risky activities that can contribute to future risk (Fergus & Zimmerman, 2005).

#### 1.2.1. Risk

Risk can exist in multiple areas of a young person's life. A child can encounter risk factors within their community, their family, or themselves (e.g., low self-esteem, poor self-soothing; Fraser et al., 1999). Risk factors are often interconnected such that youth who experience risk (e.g., physical maltreatment) are more likely to experience additional risk (e.g., sexual maltreatment) (Finkelhor, Turner, Ormrod, & Hamby, 2009; Hamby et al., 2017). In addition, risks factors are additive meaning that the more risk factors present in a person's life, the greater the person's need for resiliency to overcome hurdles and adverse situations (Hamby et al., 2018). Children and youth living in environments where they are exposed to sexual exploitation might perceive such behavior as normalized or even encouraged by family members and friends. In turn, such children may develop internal beliefs that DMST is a primary means to meet their basic needs, and that other methods of attaining/maintaining their basic needs do not exist or are otherwise unattainable. This example exemplifies multiple areas of DMST-related risk because there are risk factors at the community, family, and individual levels. Similarly, there may be a cumulative effect of these risk factors. Specifically, if a child or youth were to address one of these risk factors (e.g., self-esteem), she or he would continue to have two other areas of risk to overcome (e.g., community and family). Both additive risk and multiple areas of risk are likely to increase the overall risk of DMST engagement.

In the literature, risk factors have been used to predict diverse youth problems, including substance abuse, violence, delinquency, school drop out, and teen pregnancy (Coleman & Hagell, 2007; Fraser et al., 1999). Extant research seems to indicate that there are many overlapping risk factors for violent behaviors among youth (Finkelhor et al., 2009; Hamby et al., 2018). However, it remains unclear if there are any specific DMST-related risk factors, or if risk factors for DMST are similar to risk factors for other forms of youth violence. Risks factors that have been associated with DMST include the adolescents' age, history of child maltreatment by a caregiver, involvement in the child welfare system, and low socioeconomic status (Estes & Weiner, 2002; National Clearinghouse on Families & Youth [NCFY], 2005). Frequent incidents of running away have also been associated with DMST (e.g., Biehal & Wade, 2000; O'Brien, White, & Rizo, 2017; Tyler, Whitbeck, Hoyt, & Cauce, 2004).

#### 1.2.2. Protective factors

Protective factors buffer exposure to risk (Boyden & Mann, 2005; Fraser et al., 1999; Tusaie & Dyer, 2004). Similar to risk factors, protective factors can be individual characteristics (e.g., IQ, temperament), family factors (e.g., parental warmth), or extrafamilial

Download English Version:

<https://daneshyari.com/en/article/6831819>

Download Persian Version:

<https://daneshyari.com/article/6831819>

[Daneshyari.com](https://daneshyari.com)