

## HOUSE OF REPRESENTATIVES STAFF ANALYSIS

**BILL #:** CS/CS/HB 7141      **PCB HFS 14-02**

Human Trafficking

**SPONSOR(S):** Health & Human Services Committee; Health Care Appropriations Subcommittee; Healthy Families Subcommittee; Harrell

**TIED BILLS:** IDEN./SIM. BILLS: SB 1724

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
Orig. Comm.: Healthy Families Subcommittee	13 Y, 0 N	Entress	Brazzell
1) Health Care Appropriations Subcommittee	13 Y, 0 N, As CS	Fontaine	Pridgeon
2) Health & Human Services Committee	18 Y, 0 N, As CS	Entress	Calamas

### SUMMARY ANALYSIS

Sexual exploitation of a child is defined in s. 39.01(67)(g), F.S., which includes allowing, encouraging, or forcing a child to solicit for or engage in prostitution; engage in a sexual performance, as defined by chapter 827; or participate in the trade of sex trafficking as specified in s. 796.035, F.S. Children experiencing sexual exploitation often become bonded with their exploiters and do not see themselves as victims. These children experience trauma and are exposed to danger, but are often unable to leave their exploiter to seek help. Safe homes provide residential care and services to sexually exploited children.

S. 409.1678, F.S., governs safe homes. The bill changes statutory requirements for safe houses to establish standards for residential treatment of sexually exploited children and authorizes safe foster homes. The bill creates a certification program for safe houses and safe foster homes at the Department of Children and Families (DCF), and requires certification in order for these facilities to accept state funds specifically allocated to care for sexually exploited children.

The bill also makes administrative changes to the requirements for DCF and the community-based care agencies (CBCs) related to sexually exploited children. The bill requires DCF to create or adopt initial screening and assessment instruments for use in identifying and serving sexually exploited children, and allows a child to be placed in a safe house if the assessment instrument determines that is the most appropriate setting and a safe house is available. The bill also requires DCF, the CBCs, and the Department of Juvenile Justice (DJJ) to specially train certain employees to work with sexually exploited children. The bill requires DCF and the CBCs to hold multidisciplinary staffings to coordinate services for sexually exploited children.

The bill requires DCF and the CBCs to plan and to have response protocols in place regarding serving sexually exploited children. The bill also requires DCF, the CBCs, and DJJ to participate on any local task forces related to this population.

The bill requires residential treatment centers and hospitals providing residential mental health treatment to provide specialized treatment for sexually exploited children in the custody of DCF placed in these facilities pursuant to existing law.

The bill creates a statewide council on human trafficking, within the Department of Legal Affairs, to enhance the development and coordination of law enforcement and social services responses and specifies the membership, organization, and duties of the council.

The bill requires the Office of Program Policy Analysis and Government Accountability to conduct a study on commercial sexual exploitation of children in Florida and specifies topics for inclusion in the study.

The bill has a negative fiscal impact to the DCF due to the bill's requirements regarding safe home and safe foster home certification and inspection, the creation and evaluation of a pilot program, the development of screening and assessment tools, and administrative modifications related to training and interdepartmental coordination efforts. The House proposed General Appropriations Act provides \$3,000,000 to implement the provisions of the bill as well as provide services to youth expected to be determined as sexually exploited. The bill permits DCF to submit budget amendments to transfer budget authority in a manner that best fulfills the requirements of the act and establishes three full-time equivalent positions to address an anticipated workload increase for safe house and safe foster home inspection and certification.

The bill has an effective date of July 1, 2014.

## FULL ANALYSIS

### I. SUBSTANTIVE ANALYSIS

#### A. EFFECT OF PROPOSED CHANGES:

##### Present Situation

###### Human Trafficking

Florida law defines human trafficking as “soliciting, recruiting, harboring, providing, enticing, maintaining, or obtaining another person for the purpose of exploitation of that person.”<sup>1</sup> Human trafficking is a form of modern-day slavery, which involves the exploitation of persons for commercial sex or forced labor.<sup>2</sup> Trafficking often subjects victims to force, fraud, and coercion.<sup>3</sup>

There are no definitive statistics on the extent of human trafficking. The U.S. Department of State estimates that as many as 27 million victims are being trafficked worldwide at any given time. They also estimate that there were approximately 40,000 victims being trafficked in the United States in 2012.<sup>4</sup> Florida is estimated to have the third highest rate of human trafficking in the United States, following New York and California.<sup>5</sup>

###### Commercial Sex Trafficking of Minors

Human trafficking involving commercial sex is also known as commercial sexual exploitation or commercial sex trafficking. The United States Trafficking Victims Protection Act of 2000 defines sex trafficking as the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act.<sup>6</sup>

In cases of commercial sex trafficking of minors, pimps often operate as the primary domestic sex traffickers and target particularly vulnerable youth, such as runaway and homeless youth.<sup>7</sup> Pimps may engage in a “grooming” process where a child is showered with gifts, treats, and compliments in order to earn his or her trust.<sup>8</sup> Often the children have low self-esteem and may come from broken families or have past childhood trauma which may include sexual or physical abuse.<sup>9</sup> This makes the children easier targets because they are emotionally vulnerable, looking for someone to love and care for them. After the pimp earns the child’s trust the pimp may engage in physical, sexual, and/or emotional abuse of the child.<sup>10</sup> The effect is to psychologically and emotionally break the child so that he or she becomes completely dependent on the pimp.<sup>11</sup> Psychologists and clinicians call this phenomenon “traumatic bonding.”<sup>12</sup> This occurs where a person has dysfunctional attachment that occurs in the presence of danger, shame, or exploitation. These situations often include seduction, deception or betrayal, and some form of danger or risk is always present.<sup>13</sup> While this is a common way that commercial sexual exploitation occurs, some children are commercially sexually exploited by family members or organized networks.<sup>14</sup>

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<sup>1</sup> S. 787.06(2)(d), F.S.

<sup>2</sup> S. 787.06(1)(a), F.S.

<sup>3</sup> *Id.*

<sup>4</sup> *Trafficking in Persons Report 2013*, U.S. Department of State, accessible at: <http://www.state.gov/j/tip/rls/tiprpt/2013/>, last accessed January 6, 2014.

<sup>5</sup> Healthy Families Subcommittee Presentation by Professor Terry Coonan, FSU Human Rights Center, January 14, 2014.

<sup>6</sup> Trafficking Victims Protection Act of 2000, 22 USC 7101.

<sup>7</sup> Sex Trafficking of Children in the United States, The Polaris Project, accessible at: <http://www.polarisproject.org/what-we-do/policy-advocacy/prosecuting-traffickers/895-sex-trafficking-of-minors> (last accessed March 2, 2014).

<sup>8</sup> *Id.*

<sup>9</sup> *Id.*

<sup>10</sup> *Id.*

<sup>11</sup> *Id.*

<sup>12</sup> *Id.*

<sup>13</sup> *Id.*

<sup>14</sup> *Id.*

The Department of Homeland Security (DHS) reports that each year as many as 100,000-300,000 children in the United States are at risk of being trafficked for commercial sex in the United States.<sup>15</sup>

### Commercial Sex Trafficking of Minors in Florida

The Department of Children and Families (DCF) verified 182 victims of commercial sex trafficking in FY 2012-13. Of these, nine victims were exploited by their caregiver, and 27 victims were removed from their caregivers. DCF also identified an additional 185 children who may be at risk of becoming commercial sexual exploitation victims.<sup>16, 17</sup> According to DCF, there are likely many more victims in Florida than have been identified.

#### *Safe Harbor Act*

The Florida Safe Harbor Act of 2012 allows sexually exploited children to be treated as dependent children<sup>18</sup> rather than delinquent children.<sup>19</sup> The act amended Florida law to make child prostitution abuse of a child, rather than a criminal act by the child, and allows children who are victims of sexual exploitation to be adjudicated dependent.<sup>20</sup>

Law enforcement officers are required to deliver a minor taken into custody to the DCF when there is probable cause to believe he or she has been sexually exploited.<sup>21</sup> Safe houses and short-term safe houses were created by the Safe Harbor Act, and DCF is authorized to place sexually exploited children in these facilities.<sup>22</sup>

#### *Efforts by Department of Children and Families and the Department of Juvenile Justice*

The Department of Juvenile Justice (DJJ) conducted a tri-county pilot project implementing a screening tool for commercial sexual exploitation of children in 2012-2013. In total, there were 353 individual youth screened. Of the 353 screenings, 42 youth were verified as victims of commercial sexual

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<sup>15</sup> Human Trafficking 101 for School Administrators and Staff, Blue Campaign, The Department of Homeland Security, accessible at: <http://www.google.com/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=1&cad=rja&ved=0CCoQFjAA&url=http%3A%2F%2Fwww.dhs.gov%2Fsites%2Fdefault%2Ffiles%2Fpublications%2Fblue-campaign%2FBlue%2520Campaign%2520-%2520Human%2520Trafficking%2520101%2520for%2520School%2520Administrators%2520and%2520Staff.pdf&ei=4DvMUp6oO4vrkQeAsYDoBg&usg=AFQjCNGLuEaOhuEVFzRuCTYISWLOrgTQ7w&sig2=AskcWjhjSuiLHF6D7LHrcg>, (last accessed January 7, 2014).

<sup>16</sup> Florida Department of Children and Families Annual Human Trafficking Report 2012-13 Federal Fiscal Year.

<sup>17</sup> To determine whether a child is at risk of becoming a commercial sexual exploitation victim, DCF looked at three additional data sets in their IT system for dependent children (FSFN). The three indicators in FSFN indicate that that the child possibly has involvement in sexual exploitation, is possibly involved in prostitution, or were previously verified as a victim of human trafficking.

<sup>18</sup> A child who is found to be dependent is a child who pursuant to ch. 39, F.S., is found by the court:

- (a) To have been abandoned, abused, or neglected by the child's parent or parents or legal custodians;
- (b) To have been surrendered to the department, the former Department of Health and Rehabilitative Services, or a licensed child-placing agency for purpose of adoption;
- (c) To have been voluntarily placed with a licensed child-caring agency, a licensed child-placing agency, an adult relative, the department, or the former Department of Health and Rehabilitative Services, after which placement, under the requirements of this chapter, a case plan has expired and the parent or parents or legal custodians have failed to substantially comply with the requirements of the plan;
- (d) To have been voluntarily placed with a licensed child-placing agency for the purposes of subsequent adoption, and a parent or parents have signed a consent pursuant to the Florida Rules of Juvenile Procedure;
- (e) To have no parent or legal custodians capable of providing supervision and care;
- (f) To be at substantial risk of imminent abuse, abandonment, or neglect by the parent or parents or legal custodians; or
- (g) To have been sexually exploited and to have no parent, legal custodian, or responsible adult relative currently known and capable of providing the necessary and appropriate supervision and care.

<sup>19</sup> S. 39.001(4)(b)(2), F.S.

<sup>20</sup> S. 39.01(67), F.S.; however, child prostitution is not considered sexual abuse of a child if the child is under arrest or being prosecuted in a delinquency or criminal proceed for a violation in chapter 796 (offenses related to prostitution) or forcing a child to solicit for or engage in prostitution, engage in a sexual performance, as defined by chapter 827, or participate in the trade of sex trafficking as provided in s. 796.035.

<sup>21</sup> S. 39.401(2)(b), F.S.

<sup>22</sup> S. 409.1678, F.S.

exploitation. This means that 11.9% of the youth that had a history of running away (the prerequisite for a screening), and were screened, were ultimately verified by DCF as a sexual exploitation victim.<sup>23</sup>

DCF primarily becomes aware of minors who are sexually exploited due to a call to the child abuse hotline or because the child is in the dependency system. As with any allegation of abuse, when allegations of commercial sexual exploitation of a child are reported to DCF's child abuse hotline and the hotline employee believes that the report meets the statutory definition of abuse, abandonment or neglect, an investigation by a child protective investigator is triggered.<sup>24</sup> If the allegation is verified and the child has no known parent, legal custodian, or responsible adult relative who is capable of providing the necessary and appropriate supervision and care, DCF may petition to have the child adjudicated dependent.<sup>25</sup>

Community-based care lead agencies (CBCs) determine placements for children who have been adjudicated dependent.<sup>26</sup> According to DCF, CBCs may also provide services to victims of human trafficking who are not adjudicated dependent as a means of preventing future involvement in the child welfare system. DCF has taken steps to strengthen the infrastructure for serving victims of human trafficking, such as training its child protective investigators and participating in regional task forces.

DJJ has also been working to identify and provide services to human trafficking victims. In addition to the pilot project cited above, the agency secretary chairs the Florida Children and Youth Cabinet's Human Trafficking Workgroup.<sup>27</sup> The workgroup focuses on identifying ways in which Florida can end child sex trafficking. The workgroup has representation from the Governor's Office of Adoption and Child Protection, DCF, DJJ, the Florida State University Center for the Advancement of Human Rights and other stakeholders. Workgroup members have begun researching best practices throughout the nation as well as monitoring proposed legislation addressing child sex trafficking.<sup>28</sup>

#### *Human Trafficking Task Forces*

Many programs for identifying and providing services for human trafficking victims have emerged through local efforts, which are unique to each community. Human trafficking task forces began as a way to raise awareness, coordinate responses, and share information regarding available services. There are nineteen regional task forces dedicated to fighting human trafficking developed throughout Florida.<sup>29</sup> The task forces consist of community members involved in human trafficking issues in that area of the state. This may include law enforcement, providers, schools, and faith based organizations. DCF is involved in the leadership in all task forces. The task forces meet at least monthly and operate according to the community's needs.

#### Services for Victims of Human Trafficking in Florida

Serving victims of human trafficking presents challenges for a variety of reasons.<sup>30</sup> These children often do not see themselves as exploited or victims and thus will not self-identify. Instead, they often develop a "trauma bond" with the traffickers, and see themselves as a companion to the trafficker.<sup>31</sup> These children often run away from their placements, including from safe houses.<sup>32</sup> In a DJJ pilot program, DJJ found that of 64% of children who were confirmed victims of commercial exploitation had a history

<sup>23</sup> Sexual Exploitation of Youth, Department of Juvenile Justice, January 23, 2014.

<sup>24</sup> S. 39.201(2)(a), F.S.

<sup>25</sup> S. 39.01(15)(g), F.S.

<sup>26</sup> E-mail correspondence with the Florida Department of Children and Families, December 20, 2013, on file with subcommittee staff.

<sup>27</sup> Florida Children and Youth Cabinet: Human Trafficking Workgroup, accessible at: <http://www.flgov.com/childrens-cabinet-human-trafficking-workgroup/> (last accessed February 2, 2014).

<sup>28</sup> *Id.*

<sup>29</sup> The task forces are in the following counties: Alachua, Bay, Broward, Collier, Duval, Escambia, Hernando, Lake, Leon, Manatee, Marion, Martin, Miami-Dade, Okaloosa, Orange, Palm Beach, Pinellas, Polk, and St. Johns.

<sup>30</sup> Testimony from the panel of providers for victims of human trafficking, Healthy Families Subcommittee, February 19, 2014.

<sup>31</sup> Testimony from the Detective McBride, Healthy Families Subcommittee, February 15, 2014.

<sup>32</sup> Testimony from the panel of providers for victims of human trafficking, Healthy Families Subcommittee, February 19, 2014.

of over 5 instances of running away.<sup>33</sup> Victims may also try to recruit other children from their placements to go work for the pimp.<sup>34</sup>

Services are not consistently available across the state.<sup>35</sup> Availability depends on the local response which has emerged to meet the challenge in that area.<sup>36</sup> Children's family situations also vary.<sup>37</sup> Some children come from the dependency system, but others have a family which wants to remain involved with them and to help.<sup>38</sup> There is also not a standardized assessment tool for identifying victims,<sup>39</sup> and due to inconsistent training, the level of awareness of the signs of victimization and appropriate responses varies among personnel.<sup>40</sup>

### *Residential Services - Safe Houses*

The Safe Harbor Act in 2012 provided for "safe houses". Safe houses are homes for sexually exploited children who have been adjudicated dependent or delinquent and need to reside in a secure<sup>41</sup> residential facility.<sup>42</sup> Safe houses must provide a living environment that has set aside gender-specific, separate, and distinct living quarters for sexually exploited children and must have awake staff members 24 hours a day. Safe houses must also hold a license as a family foster home or residential child-caring agency. Each facility must be appropriately licensed in this state as a family foster home or a residential child-caring agency as defined in s. 409.175, F.S., and must have applied for accreditation within 1 year after being licensed.<sup>43</sup> A safe house serving children who have been sexually exploited must have available staff or contract personnel who have the clinical expertise, credentials, and training to provide:

- Security;
- Crisis intervention services;
- General counseling and victim-witness counseling;
- A comprehensive assessment;
- Residential care;
- Transportation;
- Access to behavioral health services;
- Recreational activities;
- Food;
- Clothing;
- Supplies;
- Infant care;
- Miscellaneous expenses associated with caring for these children;
- Provide necessary arrangement for or provision of educational services, including life skills services and planning services for the successful transition of residents back to the community; and
- Ensuring necessary and appropriate health care and dental care.<sup>44</sup>

DCF is required to assess dependent children for placement in a safe house if the child is older than six. The assessment is required to incorporate and address the following:

- Current and historical information from any law enforcement reports;

<sup>33</sup> Sexual Exploitation of Youth, Department of Juvenile Justice, January 23, 2014.

<sup>34</sup> Testimony from the panel of providers for victims of human trafficking, Healthy Families Subcommittee, February 19, 2014.

<sup>35</sup> Testimony from the Detective McBride, Healthy Families Subcommittee, February 15, 2014.

<sup>36</sup> *Id.*

<sup>37</sup> *Id.*

<sup>38</sup> *Id.*

<sup>39</sup> E-mail correspondence with the Department of Children and Families, December 23, 2013, on file with committee staff.

<sup>40</sup> Testimony from the Detective McBride, Healthy Families Subcommittee, February 15, 2014.

<sup>41</sup> The term "secure" is defined as a facility which is supervised 24 hours a day by staff members who are awake while on duty.

<sup>42</sup> S. 409.1678 (1)(b), F.S.

<sup>43</sup> According to DCF, there are currently no entities that accredit safe houses and safe houses are not sure what type of accreditation they are required to have. No safe houses have applied for accreditation at this time.

<sup>44</sup> S. 409.1671, F.S.

- Psychological testing or evaluation that has occurred;
- Current and historical information from the guardian ad litem, if one has been assigned;
- Current and historical information from any current therapist, teacher, or other professional who has knowledge of the child and has worked with the child; and
- Any other information concerning the availability and suitability of safe-house placement.

The child may be placed in a safe house if such placement is determined to be appropriate as a result of this assessment and if one is available, but placement is not required.<sup>45</sup> There are currently two safe houses in Florida, with a total of 11 beds statewide. A third safe house is projected to open in 2014 with 7 beds.<sup>46</sup>

#### *Residential Services - Therapeutic Foster Homes*

The Citrus Health Network developed the Citrus Helping Adolescents Negatively Impacted by Commercial Exploitation (CHANCE) Program in South Florida.<sup>47</sup> The program uses therapeutic foster care and a community response team for victims of commercial sexual exploitations.<sup>48</sup> The program places children in a therapeutic foster home, where only one child is placed.<sup>49</sup> The parents receive specialized training for this population. Foster parents are required to be available 24 hours per day, 7 days per week, to respond to crises or the need for special therapeutic interventions.<sup>50</sup> The foster homes are also required to have an advanced alarm system to alert the foster parents of intruders and allow the parents to be aware if the child is leaving the home.<sup>51</sup> The CHANCE program also includes the following intensive clinical and support services:

- Assessment and evaluation of the child and the family;
- Individual therapy 2-5 times per week with a therapist trained in trauma focused-cognitive behavioral therapy and motivational interviewing;
- Family therapy available as necessary;
- Assignment of a life coach who is a survivor of commercial sexual exploitation for each child;
- Assignment of a peer mentor to provide peer support and encouragement;
- Clinical staff available 24/7 for crisis management or supportive intervention;
- Certified behavioral analyst services to address the behavioral needs of this population;
- Targeted case management to facilitate linkage to all appropriate support services;
- Regular monitoring by the treatment team to ensure all service and treatment plan goals are consistently pursued; and
- Group therapy with other survivors of commercial sex exploitation.

The University of South Florida is contracted to conduct an evaluation of the CHANCE program. The evaluation will be available in November 2014.<sup>52</sup>

#### *Residential Services - Specialized Group Placements*

Specialized group placements are also available to serve commercially sexually exploited children. These group placements do not meet the statutory criteria to be safe houses, but have specialized programs serving sexually exploited children. These facilities may also serve children who have not experienced sexual exploitation. OASIS offers group placements for children served by DCF and DJJ as well as children not involved in either system.<sup>53</sup> To participate in its program for sex trafficking victims, the victims must be placed there by their caregivers. This program serves both boys and girls.

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<sup>45</sup> S. 39.524, F.S.

<sup>46</sup> E-mail correspondence with the Florida Department of Children and Families, December 20, 2013, on file with subcommittee staff.

<sup>47</sup> Testimony from Human Trafficking Panel, Healthy Families Subcommittee Meeting, February 19, 2014.

<sup>48</sup> *Id.*

<sup>49</sup> *Id.*

<sup>50</sup> *Id.*

<sup>51</sup> *Id.*

<sup>52</sup> *Id.*

<sup>53</sup> E-mail correspondence with the Department of Children and Families, February 24, 2014, on file with subcommittee staff.

The OASIS program was funded through a specific legislative line item.<sup>54</sup> Other providers with specialized programs that are not designated as safe houses include Chrysalis, Images of Glory, and Deveraux.<sup>55</sup>

Other victims of human trafficking have been placed with parents or relatives, in mental health facilities, in substance abuse facilities, in therapeutic foster homes, in foster care, in DJJ detention centers, or remained in their current placement, after identification as a victim.<sup>56</sup>

### *Non-Residential Services*

The CHANCE program serves 17 children not placed in safe houses with wraparound services. These services include assessment and evaluation, treatment and service plan development, 24/7 on-call clinical staff, individualized and family therapy, life coaching, peer mentorship, case management, certified behavioral analyst services, substance abuse treatment, and psychiatric services.<sup>57</sup> Victims of human trafficking may be offered other services generally available to children in need through the existing service array, such as substance abuse services, mental health services, and educational services.<sup>58</sup>

### Residential Programs in Other States

Limited research has been completed nationwide regarding best practices to serve and treat victims of human trafficking. However, there are some residential programs in other states which serve victims of human trafficking.

Wellspring Living (Wellspring) is a residential facility in Georgia, which serves girls ages 12-17 who are victims of human trafficking.<sup>59</sup> This program is licensed as a “maximum watchful oversight” child care facility.<sup>60</sup> The facility has security features such as locked doors, unbreakable Plexiglas windows, and a fence surrounding the facility. While this program is a locked facility, it has alarmed doors that the children can open. If the alarmed door is pushed there is a delay for the door to open and alarms inform the program staff that somebody has tried to leave the facility. While Wellspring considers themselves a locked facility, exit can occur without the involvement of facility staff. At Wellspring, girls receive trauma-informed therapies, life skills classes, education,<sup>61</sup> group therapies, family therapy, and other needed services.<sup>62</sup> Following the program, most girls return to their families or to a foster-home or group home setting. The program is working to develop a study of its effectiveness.

In California, Children of the Night (COTN) is a private, non-profit program for children between the ages of 11 and 17 that receives referrals from across the country and only accepts those children whom it believes are willing to leave prostitution and participate in long-term, comprehensive treatment. COTN is a homelike environment with 24 beds.<sup>63</sup> The children follow a highly structured program that includes attending an on-site school and a college placement program.<sup>64</sup> After children complete the comprehensive program of academic and life-skills education, caseworkers are available to provide ongoing case management to graduates.<sup>65</sup> COTN has existed since its inception through the sole support of private contributions from individuals, corporations, and foundations.<sup>66</sup>

### Treatment for Victims of Human Trafficking

<sup>54</sup> E-mail correspondence with the Department of Children and Families, January 14, 2014, on file with subcommittee staff.

<sup>55</sup> E-mail correspondence with the Department of Children and Families, February 24, 2014, on file with subcommittee staff.

<sup>56</sup> Florida Department of Children and Families Annual Human Trafficking Report 2012-13 Federal Fiscal Year.

<sup>57</sup> Testimony from Human Trafficking Panel, Healthy Families Subcommittee Meeting, February 19, 2014.

<sup>58</sup> *Id.*

<sup>59</sup> *Id.*

<sup>60</sup> *Provider Resource Results*, State of Georgia Out-of-Home Care, accessible at:

[https://www.gascore.com/resourceguide/search\\_results.cfm](https://www.gascore.com/resourceguide/search_results.cfm).

<sup>61</sup> Testimony from Human Trafficking Panel, Healthy Families Subcommittee Meeting, February 19, 2014.

<sup>62</sup> *Wellspring Living for Girls*, Wellspring Living, accessible at: <https://wellspringliving.org/wellspring-living-for-girls/>.

<sup>63</sup> Children of the Night, accessible at: <https://www.childrenofthenight.org/index.html>, last accessed March 2, 2014.

<sup>64</sup> *Id.*

<sup>65</sup> *Id.*

<sup>66</sup> *Id.*

## *Trauma-Focused Cognitive Behavioral Therapy*

In the immediate as well as long-term aftermath of exposure to trauma, children are at risk of developing significant emotional and behavioral difficulties.<sup>67</sup> Trauma-focused cognitive behavioral therapy (TF-CBT) is an evidence-based treatment approach shown to help children, adolescents, and their caregivers overcome trauma-related difficulties.<sup>68</sup> It is designed to reduce negative emotional and behavioral responses following child sexual abuse, domestic violence, traumatic loss, and other traumatic events.<sup>69</sup> The treatment is based on learning and cognitive theories, and addresses distorted beliefs and attributions related to the abuse.<sup>70</sup> TF-CBT provides a supportive environment in which children are encouraged to talk about their traumatic experience.<sup>71</sup> TF-CBT combines elements drawn from:

- Cognitive therapy, which aims to change behavior by addressing a person's thoughts or perceptions, particularly those thinking patterns that create distorted or unhelpful views;
- Behavioral therapy, which focuses on modifying habitual responses (e.g., anger, fear) to identified situations or stimuli; and
- Family therapy, which examines patterns of interactions among family members to identify and alleviate problems.<sup>72</sup>

TF-CBT is a short-term treatment typically provided in 12 to 18 sessions of 50 to 90 minutes, depending on treatment needs.<sup>73</sup> The intervention is usually provided in outpatient mental health facilities, but it has been used in hospital, group home, school, community, residential, and in-home settings.<sup>74</sup>

Recent research findings suggest that TF-CBT is more effective than nondirective or client centered treatment approaches for children who have a history of multiple traumas (e.g., sexual abuse, exposure to domestic violence, physical abuse, as well as other traumas).<sup>75</sup>

### *Strengths-Based Approach*

An individualized, strengths-based approach refers to policies, practice methods, and strategies that identify and draw upon the strengths of children, families, and communities.<sup>76</sup> Strengths-based practice involves a shift from a deficit approach, which emphasizes problems and pathology, to a positive partnership with the family.<sup>77</sup> The approach acknowledges each child and family's unique set of strengths and challenges, and engages the family as a partner in developing and implementing the service plan.<sup>78</sup>

### Involuntary Examination and Commitment

Current law allows children who have not committed any crimes to be confined to receive treatment and keep those children safe. Under s. 394.463, also known as the Baker Act, children can be involuntarily confined in a hospital or crisis stabilization unit for mental health assessment.<sup>79</sup> In 2012 there were 25,286 involuntary exams of children between the ages of 4 and 17 in Florida.<sup>80</sup>

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<sup>67</sup> Trauma-Focused Cognitive Behavioral Therapy for Children Affected by Sexual Abuse or Trauma, The Administration for Children and Families, U.S. Department of Health and Human Services, August 2012, accessible at: <https://www.childwelfare.gov/pubs/trauma/>.

<sup>68</sup> *Id.*

<sup>69</sup> *Id.*

<sup>70</sup> *Id.*

<sup>71</sup> *Id.*

<sup>72</sup> *Id.*

<sup>73</sup> *Id.*

<sup>74</sup> *Id.*

<sup>75</sup> *Id.*

<sup>76</sup> An Individualized, Strengths-Based Approach in Public Child Welfare Driven Systems of Care, Administration for Children and Families, US Department of Health and Human Services, accessible at:

<https://www.childwelfare.gov/pubs/acloserlook/strengthsbased/strengthsbased1.cfm> (last accessed February 25, 2014).

<sup>77</sup> *Id.*

<sup>78</sup> *Id.*

<sup>79</sup> S. 394.463, F.S.

<sup>80</sup> Baker Act Examinations for Youth in Calendar Year 2012, Annette Christy, Associate Professor, University of South Florida, September 2013.

The assessment is performed by an expert, a physician or clinical psychologist.<sup>81</sup> If an involuntary examination finds that child needs involuntary inpatient placement (IPP) for treatment, he or she is either retained in the facility where the involuntary exam was performed or transferred to a mental health treatment facility.<sup>82</sup> The court must hold a hearing within 5 days and find that the child needs IPP in order for the child to continue receiving services.<sup>83</sup> The court must review whether or not the child requires involuntary inpatient treatment every six months.<sup>84</sup>

Section 39.407(6), F.S., allows DCF to place children involuntarily in mental health treatment facilities.<sup>85</sup> At the facility, the dependent children are examined by a psychiatrist or psychologist to determine whether treatment is necessary.<sup>86</sup> The treatment program must review the appropriateness and suitability of the placement every 30 days to determine whether the child is receiving benefit toward the treatment goals and whether the child could be treated in a less restrictive treatment program.<sup>87</sup> The court with jurisdiction over the child must also conduct a hearing to review the status of the child's residential treatment plan every 3 months after the child's admission to the residential treatment program.<sup>88</sup>

## **Effect of Proposed Changes**

### Initial Screening and Assessment Instruments

The bill creates s. 409.1754, F.S., related to administrative requirements for serving sexually exploited children. The bill deletes the current assessment process to determine whether a child should be placed in a safe house and requires DCF to develop or adopt one or more initial screening and assessment instruments to identify, determine the needs of, plan services for, and identify an appropriate residential environment for sexually exploited children. The bill requires that the assessment instruments include the ability to determine whether placement in a safe house is appropriate. The bill requires that the initial screening and assessment instruments used to determine appropriate residential placement of a sexually exploited child consider:

- Risk of the sexually exploited child running away;
- Risk of the sexually exploited child recruiting other children into the commercial sex trade;
- Level of the sexually exploited child's attachment to his or her exploiter;
- Level and type of trauma that the sexually exploited child has endured;
- Nature of the child's interactions with law enforcement;
- Length of time that the child was sexually exploited; and
- Extent of any substance abuse by the sexually exploited child.

The bill specifies that if a safe house placement is determined to be the most appropriate setting using the assessment tool, the child may be placed in a safe house, as long as a placement is available. However, the bill specifies that a child may be placed in another setting if it is more appropriate to his or her needs and the child's behaviors can be managed in those settings in a manner that does not endanger other children, or if a safe house or safe foster home is not available.

The bill requires the initial screening and assessment instruments to be validated if possible and requires the instruments to be used by the DCF, juvenile assessment centers, CBCs, and providers serving sexually exploited children. The bill requires DCF to consult state and local agencies, organizations, and individuals involved in the identification and care of sexually exploited children to develop or adopt the initial screening and assessment instruments. The bill requires DCF to establish rules specifying the initial screening and assessment instruments to be used, the requirements for their

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<sup>81</sup> S. 394.463 (2)(f), F.S.

<sup>82</sup> S. 394.467 (2), F.S.

<sup>83</sup> S. 394.467 (6), F.S.

<sup>84</sup> S. 394.467 (7)(d), F.S.

<sup>85</sup> S. 39.407(6), F.S.

<sup>86</sup> S. 39.407(6 (b)-(c), F.S.

<sup>87</sup> S. 39.407(6 (f), F.S.

<sup>88</sup> S. 39.407(6)(h), F.S.

use, and the reporting of data collected through them and specifies that entities are not precluded from using additional assessment instruments in the course of serving sexually exploited children.

### DCF and CBC Requirements

The bill requires DCF and CBCs to assign cases where a child is alleged, suspected, or known to have been sexually exploited to child protective investigators (CPIs) and case managers who have received specialized intensive training in investigating cases involving a sexually exploited child. Similarly, the bill requires the Department of Juvenile Justice juvenile probation staff administering the detention risk assessment instrument to have specialized intensive training in identifying and serving sexually exploited children. The bill specifies CPIs and case managers must receive this training prior to accepting any case involving sexually exploited children.

The bill requires DCF and CBCs to conduct regular multidisciplinary staffings for sexually exploited children to ensure that all relevant information is known to all parties and that services are coordinated across systems. The bill requires DCF or the CBC to coordinate these staffings and invite individuals involved in the child's care. The bill specifies that this may include, but is not limited to, staff from the juvenile justice system, the school district, service providers, and victim advocates.

The bill requires each CBC and DCF region to jointly identify the service needs of sexually exploited children and plan for developing sufficient capacity to meet them.

The bill requires each CBC and DCF circuit to establish local protocols and procedures that are responsive to the varying circumstances that sexually exploited children are in. The bill requires the protocols and procedures to address the full continuum of needs of sexually exploited children to the extent of available funding. The bill requires that the protocols and procedures be used by CMs and CPIs when working with a sexually exploited child.

The bill requires the local DCF circuit administrator or his or her designee, the local circuit director of the Department of Juvenile Justice or his or her designee, and the CBC chief operating officer, or his or her designee to participate in any task force, committee, council, advisory group, coalition, or other entity active in the circuit for coordinating responses to address human trafficking or sexual exploitation of children. If no such entity exists, the bill specifies that the local DCF circuit administrator must initiate one.

The bill provides DCF rulemaking authority regarding the administrative requirements.

### Safe Houses and Safe Foster Homes

The bill amends the definition of "safe house" as a "group residential placement certified by DCF to care for sexually exploited children," and creates and defines "safe foster home" as "a foster home certified by DCF to care for sexually exploited children." The bill also deletes "short-term safe houses" from statute and adds the term "safe foster home" to s. 797.07, F.S.

The bill also amends the definition of a sexually exploited child to include those children who have not been adjudicated dependent, which permits them to be served by safe houses and safe foster homes.

The bill specifies that safe houses and safe foster homes are required to provide a safe, separate, and therapeutic environment tailored to the needs of sexually exploited children who have endured significant trauma. The bill requires DCF to certify safe homes and safe foster homes.

### *Certification Requirements*

The bill amends the current requirements for safe houses, and creates requirements for safe foster homes, in order to be certified by DCF. The bill requires that safe houses and safe foster homes be

licensed as residential child-caring agencies or licensed family foster homes, respectively, and that safe houses have awake staff on duty 24 hours a day.

The bill requires that safe houses and safe foster homes house a single sex, group children with similar chronological ages or levels of maturity together, and treat and care for these children in a manner that separates them from children with other needs. The bill specifies that safe houses and safe foster homes may care for other populations, as long as those populations do not interact with the sexually exploited children. The bill requires that safe houses and safe foster homes use trauma-informed and strength based approaches to care, to the extent possible and appropriate.

The bill requires that safe houses and safe foster homes provide appropriate security through facility design, hardware, technology, staffing, and siting, including but not limited to using external video monitoring or alarmed doors, or being situated in a remote location. The bill specifies that sexually exploited children must be allowed to exit the safe house or safe foster home if they choose.

### **Services**

The bill requires safe houses and safe foster homes to provide services tailored to the needs of sexually exploited children and to determine these needs on a case-by-case basis. The bill specifies that in addition to the services required for traditional foster homes and child caring facilities, safe houses and safe foster homes also coordinate the following services:

- A comprehensive assessment of the service needs of each resident;
- Victim-witness counseling;
- Family counseling;
- Behavioral health services;
- Treatment and intervention for sexual assault;
- Life skills services;
- Mentoring by a survivor of sexual exploitation, if available and appropriate;
- Substance abuse screening, and where necessary, access to treatment;
- Planning services for the successful transition of residents back to the community;
- Activities for sexually exploited children residing in the safe house, scheduled in a manner that provides them with a full schedule; and
- Any additional services determined by DCF.

The bill requires foster parents of safe foster homes to complete intensive training regarding the needs of sexually exploited children, the effects of trauma and sexual exploitation, and how to address those needs using strength-based and trauma-informed approaches. The bill requires DCF to specify this training by rule. The bill also allows DCF to establish additional criteria in rule for the certification of safe houses and safe foster homes.

The bill requires that safe houses and safe foster homes reapply for certification and be inspected annually. The bill allows DCF to place a moratorium on referrals and revoke the certification of a safe house or safe foster home if it does not meet the requirements of certification.

The bill specifies that in order to accept state funds specifically allocated to provide services to sexually exploited children, the residential facility must be certified as a safe house or safe foster home.

### **Residential Treatment Centers and Hospitals**

The bill requires residential treatment centers (RTCs) and hospitals which provide residential mental health treatment to provide specialized treatment for sexually exploited children who are in the custody of DCF and placed in these facilities pursuant to s. 39.407(6) (treatment for emotionally disturbed children in DCF custody), s. 394.4625 (voluntary admission for mental health treatment), or s. 394.467 (involuntary inpatient placement for mental health treatment). When serving this population, the bill requires the RTC or hospital meet the following requirements:

- Use strength-based and trauma-informed approaches to care, to the extent possible and appropriate;
- Group sexually exploited children by age or maturity level;
- Care for sexually exploited children in a manner that separates those children from children with other needs;
- Have awake staff members on duty;
- Provide appropriate security through facility design, hardware, technology, staffing, and siting;
- Meet other criteria established by DCF in rule; and
- Provide, arrange for, or coordinate the same services as required by safe houses and safe foster homes.

The bill also requires these facilities to ensure that children are served in single-sex groups and that staff working with these children are adequately trained in the effects of trauma and sexual exploitation, the needs of sexually exploited children, and how to address those needs using strength-based and trauma-informed approaches.

The bill also specifies that the array of services established by DCF to meet the individualized services and treatment needs of children and adolescents who are members of target populations and their families may include trauma-informed services for children who have suffered sexual exploitation.

#### Statewide Council

The bill creates a Statewide Council on Human Trafficking (Council) within the Department of Legal Affairs to enhance the development and coordination of state and local law enforcement and social services responses to fight human trafficking and support victims.

#### *Membership*

The bill requires the following members to serve on the Council:

- The Attorney General or a designee;
- The Secretary of DCF or a designee;
- The State Surgeon General or a designee;
- The Secretary of the Agency for Health Care Administration or a designee;
- The executive director of the Department of Law Enforcement or a designee;
- The Secretary of DJJ or a designee;
- The Commissioner of the Department of Education or a designee;
- A member of the Senate, appointed by the President of the Senate;
- A member of the House of Representatives, appointed by the Speaker of the House of Representatives;
- A elected sheriff, appointed by the Attorney General;
- An elected state attorney, appointed by the Attorney General; and
- Two members appointed by the Attorney General and two members appointed by the Governor, who have professional experience to assist the Council in the development of care and treatment options for victims of human trafficking.

The bill specifies that the Attorney General or a designee will serve as the chairperson and the Secretary of DCF or a designee will serve as the vice chairperson. The bill specifies that members are appointed to 4-year staggered terms, in which the Attorney General, President of the Senate, and the Speaker of the House of Representatives each initially appoint their respective members to serve 2-year terms and all subsequent appointments will be 4-year terms. The bill specifies that vacancies that occur must be appointed in the same manner as the original appointment and are only for the remainder of the unexpired term of that seat. The bill specifies that members may not receive commissions, fees, or financial benefits in connection with serving on the Council, but may be reimbursed for per diem and travel expenses by the state agency the member represents. The bill

specifies that members not affiliated with a state agency must be reimbursed by the Department of Legal Affairs.

### *Duties*

The bill specifies the responsibilities of the Council. The bill requires the Council to develop recommendations for comprehensive programs and services for victims of human trafficking to include recommendations for certification criteria for safe houses and safe foster homes and make recommendations for apprehending and prosecuting traffickers and enhancing coordination of responses. The bill also requires the Council to annually hold a statewide policy summit in conjunction with an institute of higher learning in Florida. The bill specifies that the Council must work with DCF to create and maintain an inventory of human trafficking programs and services in each county, including awareness programs and victim assistance services, which can be used to determine how to maximize existing resources and address unmet needs and emerging trends. The bill requires the Council to develop policy recommendations that advance the duties of the Council and that further the efforts to combat human trafficking in Florida.

The bill specifies that the Council must meet at least once per quarter per calendar year and that the first meeting must be held by September 1, 2014. The bill specifies that meetings can be held via teleconference or electronic means. The bill specifies that a majority of the members of the Council constitutes a quorum and that the Department of Legal Affairs must provide the Council with staff necessary to assist the Council in performing its duties.

The bill requires the Council to submit a report summarizing the accomplishments of the Council during the preceding fiscal year and making recommendations regarding the development and coordination of state and local law enforcement and social services responses to fight human trafficking and support victims. The bill requires the Council to submit the report to the President of the Senate and the Speaker of the House of Representatives by October 31 of each year.

### OPPAGA Study

The bill requires the Office of Program Policy Analysis and Government Accountability (OPPAGA) to conduct an annual study on commercial sexual exploitation of children in Florida. The bill requires the study to assess the extent of sexual exploitation of children in Florida, including the prevalence in various regions of the state, estimates of the number of youth who have been sexually exploited, and service gaps for treating this population. The bill requires the study to analyze the operation of safe houses in Florida and address the effectiveness of safe houses, safe foster homes, residential treatment centers and hospitals with specialized programs for sexually exploited children, and other residential options for sexually exploited children in addressing the safety, therapeutic, health, and emotional needs of sexually exploited children, including the nature and appropriateness of subsequent placements, extent of sexual exploitation post-placement, and educational attainment. The bill specifies that the study must also include the number of children involuntarily committed to treatment facilities who are victims of sexual exploitation and the outcomes of those children for the three years after completion of inpatient treatment. The bill requires all state agencies and contractors receiving state funds to comply with requests for data and information from OPPAGA.

The bill requires OPPAGA to report its findings to the Governor, the President of the Senate, and the Speaker of the House of Representatives beginning on July 1, 2015.

## B. SECTION DIRECTORY:

- Section 1:** Creates s. 409.1754, F.S., relating to sexually exploited children.
- Section 2:** Amends s. 409.1678, F.S., relating to specialized residential options for children who are victims of sexual exploitation.
- Section 3:** Amends s. 39.524, F.S., relating to safe-harbor residential placement.
- Section 4:** Amends s. 39.401, F.S., relating to taking a child alleged to be dependent into custody.
- Section 5:** Amends s. 796.07, F.S., relating to prohibiting prostitution and related acts.

- Section 6:** Amends s. 985.115, F.S., relating to release or delivery from custody.
- Section 7:** Amends s. 394.495, F.S., relating to child and adolescent mental health system of care.
- Section 8:** Creates an unnumbered section of law relating to the Office of Program Policy Analysis and Government Accountability.
- Section 9:** Creates s. 16.671, F.S., related to the statewide council on human trafficking.
- Section 10:** Creates an unnumbered section of law relating to appropriations.
- Section 11:** Provides for an effective date.

## **II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT**

### **A. FISCAL IMPACT ON STATE GOVERNMENT:**

#### **1. Revenues:**

None.

#### **2. Expenditures:**

The total, estimated cost to DCF is \$265,788 as outlined below. Currently, DCF licenses foster homes as part of the department's routine regulatory operations. The bill creates a unique designation for licensed foster homes that provide safe home services. According to DCF, the certification of safe homes or safe foster homes presents a workload increase of approximately \$265,788 to fund three full-time equivalent positions.

There may be other indeterminate costs to the department and are discussed in the *Fiscal Comments* section<sup>89</sup>.

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<sup>89</sup> Data used to support the Expenditures and Fiscal Comments sections was obtained from the bill analysis provided by the Department of Children and Families, dated March 6, 2014, and on file with staff of the Health Care Appropriations Subcommittee.

**B. FISCAL IMPACT ON LOCAL GOVERNMENTS:**

1. Revenues:

None.

2. Expenditures:

None.

**C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:**

None.

**D. FISCAL COMMENTS:**

Certain provisions of the bill may have an indeterminate fiscal impact to DCF as follows:

- The bill requires the development or adoption of an assessment tool specifically designed to recognize sexual exploitation in children, and that the selection of such tool be a collaborative effort among DCF and other state agencies. There is insufficient, existing data on such assessments upon which a cost estimate can be developed.
- The bill requires specialized training be provided to DCF child protective investigators and CBC case managers. The cost for developing the curriculum and providing the instruction is indeterminate as it is unknown if such material currently exists.
- Other administrative costs related to the required participation in multidisciplinary meetings and development of local procedures and protocols relevant to working with sexually exploited youth. Transportation costs for the secure, initial placement of the child may be required, but is unknown at the time. Modifications to the Florida Safe Family Network (FSFN) data management system may be warranted to accommodate additional information from the CBCs specific to this population.

The House proposed General Appropriations Act (GAA) provides \$3,000,000 to the CBC lead agencies to fund additional direct services for this population. The GAA specifies that the allocation of these funds be based upon an evaluation of the areas of greatest need, and that a report containing the distribution methodology, the number of children served, and other relevant findings be made available by January 1, 2015.

The bill permits DCF to submit a budget amendment to transfer budget authority among certain categories as necessary to disburse the \$3,000,000 appropriation provided in the House proposed GAA. It also authorizes the establishment of three full-time equivalent positions as needed to fulfill the department's anticipated workload increase associated with the certification of safe houses or safe foster homes.

**III. COMMENTS**

**A. CONSTITUTIONAL ISSUES:**

1. Applicability of Municipality/County Mandates Provision:

Not Applicable. This bill does not appear to affect county or municipal governments.

2. Other:

None.

**B. RULE-MAKING AUTHORITY:**

The bill requires DCF to establish rules regarding the initial screening and assessment instruments and the training for staff of safe houses and foster parents in safe foster homes. The bill provides DCF rulemaking authority regarding additional criteria for certification of safe houses and safe foster homes.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

#### **IV. AMENDMENTS/ COMMITTEE SUBSTITUTE CHANGES**

On April 8, 2014, the Health Care Appropriations Subcommittee adopted one amendment providing:

- That DCF may submit a budget amendment to transfer budget authority associated with a \$3,000,000 appropriation in Specific Appropriation 342 of the proposed GAA as necessary to implement the provisions of the bill and
- The authorization of three full-time equivalent positions to address the workload increase the department may realize from the bill's safe home or safe foster home certification and regulation process.

On April 10, 2014, the Health and Human Services Committee adopted two amendments. The amendments:

- Eliminate the secure safe house pilot and the associated placement processes;
- Require residential treatment centers and hospitals providing residential mental health treatment to provide specialized treatment for sexually exploited children in the custody of DCF placed in these facilities pursuant to existing law;
- Require these facilities to meet criteria similar to those for safe houses and safe foster homes.
- Expand the OPPAGA study to include a review of residential treatment centers and hospitals with specialized programs for sexually exploited children and to track the outcomes for children placed there. Also requires state agencies and contractors to comply with requests for data and information from OPPAGA;
- Require the OPPAGA study to occur annually, beginning in 2015;
- Create a statewide council on human trafficking within the Department of Legal Affairs to enhance the development and coordination of law enforcement and social services responses; and
- Specify the membership, organization, and duties of the council.

This analysis is drafted to the committee substitute.