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Inequalities in US Child Protection: The Case of Sex Trafficked Youth

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Abstract: This article demonstrates how structural social work theory and critical consciousness development can be used to help facilitate a transition from a deficit model approach to an inequities perspective in a child welfare system that was working to improve the identification of and services for domestic minor sex trafficked youth (DMST). The response of Connecticut's child welfare system to the issue of DMST is provided as an example of how a child welfare systems could apply an inequities perspective to a population involved in and at risk for exploitation. Structural social work theory helps illustrate how neo-liberalist social structures in the United States perpetuate and maintain social inequity based on race, gender, age, sexual orientation, and socio-economic status for youth at risk for DMST. Through critical consciousness development, youth can be recognized as victims of intersecting forms of oppression, rather than criminals. These theories can be combined to increase individual awareness of the risks and oppression of youth across the population, and to identify how child welfare services can be leveraged to decrease inequities and improve child well-being.

Keywords: inequities; domestic minor sex trafficking; child welfare; structural social work theory; critical consciousness

1. Introduction

This article presents two theories that can be used to systematically shift the focus of a child welfare system from a deficit perspective towards an inequities perspective (Bywaters et al. 2015). To illustrate the difference between these two perspectives, we will use Connecticut's approach to addressing domestic minor sex trafficking (DMST) as an encouraging example of what using an inequities perspective to improve child safety through the child protective system could resemble. This example is drawn from the Connecticut State Department of Children and Families (DCF) internal and community response to the issue of DMST. As the issues of the risk-factors for DMST were better understood, DCF began extensive awareness trainings of the warning signs of DMST and the appropriate response. These efforts resulted in a rise in the identification of victims in the broader society and allowed victims access to appropriate services through the child welfare system. Child welfare's shift in focus from an individual deficits perspective to an inequities perspective represents a structural and social change. The utilization of structural social work theory (Mullaly 2007) affords a greater understanding of the larger social forces, social relations, and overall institutional and individual ideologies that support and perpetuate the problem. The theory provides a framework for how inequities can be recognized, confronted, and transformed to address the social problem. The theory of critical consciousness (Freire 1979) is used to illustrate the process of developing an awareness of the systems of domination and subjugation that create inequities in society, rather than perceiving them to be the result of individual-level problems or failings. Taken together, these theories explain the macro-origins of social problems and the inequities inherent in them; they can be used

to mobilize child welfare workers to assume an inequities perspective when working with children targeted by structural oppression.

2. Sex Trafficking and DMST

Across the globe in 2016, an estimated 24.9 million people were victims of forced sex or labor, and approximately 1 million of those exploited for sex were children (International Labor Organization (ILO 2017)). Since the 1990s, sex trafficking has become increasingly global and correspondingly complex. The countries that the victims come from tend to be poorer and less developed than the countries they are trafficked to; just as on an individual level the victims of sex trafficking tend to be the most vulnerable members of society (Hodge and Lietz 2007). Migrants and migration routes have been identified as particularly vulnerable to trafficking and exploitation for labor and sex because individuals are already vulnerable due to language, legal status, financial need in their home countries, among other reasons (ILO 2017). According to the ILO, a specialized agency of the United Nations, the majority of sexually exploited children (70%) originate in Asia and Pacific regions. These victims may be trafficked within their own or across international borders, but a majority of adult and child victims of sexual exploitation are victimized outside of their home country (ILO 2017). International trafficking requires a network to recruit and transport the victims through the use of deception and physical coercion (e.g., debt-bondage, recruiting for marriage or other occupations, kidnapping, etc.) (Hodge and Lietz 2007). Internationally-trafficked victims may be threatened with exposure to law enforcement and, partially due to language barriers and intentional isolation by the traffickers, are often unaware of the legal protection that may be afforded them in the country where they are located. Some efforts to combat international trafficking have focused on creating specific legal statuses for victims of trafficking. The ILO (2016) recommends the protection and non-punishment of victims as a key component of their Standards on Forced Labour to try to reduce or eliminate immigration or other legal issues that may be barriers to identifying victims.

Domestic sex minor trafficking is understood as children or youth under the age of 18 that are sexually exploited within their own country. Awareness of DMST in the United States has increased substantially and garnered significant federal attention that began with the passage of the Trafficking Victims Protection Act (TVPA) in 2000 (Finklea et al. 2015; U.S. State Department Office to Monitor and Combat Trafficking in Persons 2014). In the last 20 years, greater awareness has been due in part to public educational campaigns, increase presence of law enforcement, and the creation of local and state human trafficking groups, such as the Connecticut Trafficking in Persons Council (U.S. State Department Office to Monitor and Combat Trafficking in Persons 2014). In 2012, President Obama increased federal funds and support to combat DMST (U.S. White House, Office of the Press Secretary 2012). As of 2014, all 50 states have anti-trafficking laws on the books and more than 31 states passed anti-trafficking legislation which view commercially exploited youth as victims (National Conference of State Legislatures 2014). Yet there is limited quantifiable evidence of how many victims exist across the United States (Mitchell et al. 2010). In 2017, 7255 sex trafficking cases for adults and children were reported through the National Human Trafficking Hotline in the USA (Polaris Project 2017), although this is widely acknowledged to be a significant undercount of the problem.

An important transition in the last 20 years has been defining youth engaged in sex as victims of DMST. Prior to passage of the TVPA, a U.S. minor found engaging in prostitution was treated as a criminal and processed through the legal system (Adelson 2008). With the passage of the first version of the TVPA in 2000 and under section 122 U.S.C. § 7102, domestic minor sex trafficking falls under the definition of severe forms of trafficking in persons and is defined as “sex trafficking ... in which the person induced to perform such act has not attained 18 years of age.” The federal law provides the framework for the prosecution of sex traffickers and sex trafficking, but does not provide guidelines for services or identification of victims.

Despite these legal changes and definitional clarifications, public and even professional perceptions of sex trafficking as a domestic problem have been slow to change (Hartinger-Saunders et al. 2017;

Johnston et al. 2014; Rand 2009). Media outlets often present stories of trafficking as episodic and frequently fail to connect the trafficking to larger social forces (Johnston et al. 2014). In a national study of mandated reporters, 21% thought that most “prostituted children” came from other countries, and 25% thought that sex trafficking of minors did not occur in their communities (Hartinger-Saunders et al. 2017). This represents a concerning pattern of misinformation—even among those in a position to identify and support victims. Knowledge of and attitudes towards DMST youth represent a potential barrier to victim identification and service delivery.

DMST can encompass a wide variety of situations but they can all fall under what Hartinger-Saunders and colleagues (2017) call “a transactional form of child sexual abuse” (p. 195). This is a useful conceptual definition for associating DMST with child abuse, rather than aligning it with prostitution, is an important conceptual shift. However, while child sexual abuse and DMST share some commonalities, they can also be distinct traumatic experiences and may require different responses. It is difficult to make generalizations about either of these experiences because of the vast range of situations that may inhabit one of these categories. Additionally, they may be comorbid, as many DMST victims have prior histories of child sexual abuse (Moore et al. 2017; Rand 2009; Wilson and Butler 2014). The sexual acts that youth are coerced to perform in both of these situations may be similar, however, the extent of the abuse and its context can draw attention to some critical differences. The perpetrator’s relationship to the youth is usually distinctive, the number of different partners/perpetrators is usually higher with DMST, the trauma may be more extreme, and, confusingly, in DMST the victim may not perceive him/herself as a victim but as a willing participant who has chosen to engage in these acts (Hartinger-Saunders et al. 2017; Marcus et al. 2014; National Human Trafficking Resource Center 2017). In child sexual abuse cases to which a child protective service agency generally responds, the perpetrator usually has to be someone who is responsible for the care or supervision of the child or youth (Hartinger-Saunders et al. 2017). Sex trafficking often, although not always, involves additional layers of trauma and victimization related to the victim’s situation, such as extended abuse, relocation, entrapment and other experiences that may result in complex trauma (Hardy et al. 2013). Although there are legal and contextual differences, both victims of child sexual abuse and/or DMST have an elevated risk of mental health problems (e.g., PTSD and depression) and may need similar services (Ijadi-Maghsoodi et al. 2016) to treat these complex issues. However, best practices are still being developed and tested.

In Connecticut, the child welfare system has become the locus of service provision and community education around the issues of DMST. While the child welfare agency cooperates with police and prosecutors on the arraignment of traffickers, the extension of DMST victim services to trafficked minors by the child welfare system has contributed to the growing education of the public to perceive these youth as victims rather than criminals. An outgrowth of this has been an increase in reports to DCF of youth being sex-trafficked, from 17 youth in 2011 to 212 youth in 2017 (CT DCF 2018; TIP Council 2011, Annual Report).

3. Structural Inequities and Domestic Minor Sex Trafficking

Victim-buyer patterns in DMST often mirror the power and privilege dynamics of our society. Here we are defining the primary perpetrator as the buyer of sex, rather than the trafficker. The role of traffickers or pimps seems to be more complicated in DMST than in international sex trafficking. Individuals responsible for trafficking these youth have been found to be family members, acquaintances, and peers who utilize their relationship to facilitate the exploitation (Cole and Sprang 2015; Reid et al. 2015), some youth operate without an identified third party, and some evidence suggests that in some cases the role of the third party trafficker/pimp may be less prominent than commonly assumed (Marcus et al. 2014).

However, there is little confusion about the characteristics of the buyer. The best information available demonstrates the majority of people who buy sex from minors are white men between the ages of 30 and 50 years old—the most privileged in society (Farley et al. 2017). Although there is evidence

that the overwhelming majority of DMST victims are female (Shigekane 2007), an accurate percentage of male vs. female youth who are sex trafficked is unavailable. The youth who are disproportionately targeted and victimized are frequently members of non-dominant social identity categories, such as Black and Latina girls (Farley et al. 2017). Additionally, while most sexually exploited youth are cisgender, heterosexual females, other groups such as sexual minority youth—particularly transgender youth—are at very high risk of being exploited (Gangamma et al. 2008; Wilson et al. 2009).

As a result of capitalism and gender oppression, females are viewed as a commodities and face exploitation, discrimination, marginalization and exclusion on both systemic and individual levels (Hardy et al. 2013). In a society where patriarchy is a dominant ideology, women and girls are subjected to misogyny and gender-oppression. Designating women as objects that exist for the pleasure of serving men is used to rationalize oppressive acts, such as DMST. Similarly, children have been exploited and subjected to acts of abuse, coercion, deprivation and invalidation, and denied full protection because of their powerlessness. Given that experiences of subjugation and oppression are common to women and children in the U.S., it is essential that child welfare workers are able to assess the impact that structural forces have on individuals' well-being, as well as challenge the oppressive social structures by advocating for change.

Social relations, institutions and dominant ideologies are present in all aspects of United States society, including governmental structure. Since states retain a significant amount of autonomy, this often results in different laws in different states regarding problems such as DMST. One advantage of this system is that state governments can decide to increase protection or services for particular groups within their state without agreement from other states. One disadvantage is that when the social problem crosses borders, having differing laws lessens the overall efforts to eliminate the problem. However, making changes to policies in one state can ultimately have an effect on others. This is the case of the growing social problem of youth sex trafficking in the USA.

Framed within neoliberal, patriarchal, and racial paradigms, the roots of child trafficking are embedded in cultural, political and economic structures that prioritize cisgender, heterosexual male power and pleasure over the other, particularly femaleness. Historically, women and children have lacked legal rights over their person. Despite advances in civil and human rights, laws and policies, the law limits children's economic vitality, while social, political, and cultural norms limit their rights within the community (Institute of Medicine and National Research Council 2013; Kangaspunta et al. 2008). Consequently, young girls can be coerced into trafficking due to poverty, lack of education, sexual abuse, maltreatment or the deception of the promise of a better life through job security (Barnett 2013; Logan et al. 2009). Utilizing a structural social work lens, the exploitation and victimization of trafficked youths can be critically viewed and understood.

4. Domestic Minor Sex Trafficking and Critical Theory

Throughout the history of the United States, the conceptualization of the role of children and purpose of childhood has evolved through the implementation of child labor laws, the creation of child welfare agencies, and the codification of children as a population in need of protection by the state (Stern and Axinn 2012). Child welfare agencies and public policy protections demonstrate our society's understanding that children under the age of 18 are more vulnerable than adults (Jimenez 2010). Despite the existence of these agencies and policies, and increasing awareness of the problem, only a few states have been focusing on domestic victims of trafficking.

Research demonstrates that a high proportion of DMST youth have current or past child welfare involvement (Brittle 2008; ECPAT 2012; Fong and Berger-Cardoso 2010; Kotrla 2010; Rand 2009). Early studies identified a relationship between DMST and child welfare involved children including foster care (we will use the term foster care to refer to traditional foster care and other out-of-home placements under the guardianship of the state), and juvenile justice services (Fong and Berger-Cardoso 2010; Kotrla 2010). A study of New York agencies who work with DMST victims found that almost 50% of those under the age of 18 years old were involved with child welfare and juvenile justice systems

(Gragg et al. 2007). A commonly cited statistic from early reports out of Connecticut is that 86 of the 88 girls who were suspected victims of DMST had some involvement with the child welfare system (e.g., U.S. Department of Health and Human Services, Administration for Children, Youth and Families 2013). One 2010 study estimated that over 80% of girls forced into child trafficking are engaged with public child welfare and family services (Gibbs et al. 2010). Child abuse and neglect are frequently cited as a risk factor for exploitation (Smith et al. 2009) and some victims have been prostituted to acquire drugs for their addicted parent or guardian (Kotrla 2010; Reid 2010). Children and youth who ran away from their home or a child welfare placement were at greater risk for being trafficked (Kotrla 2010).

Given this information, a traditional child welfare approach would involve focusing on identification and prevention of abuse for youth already involved in child welfare services. Data suggest that the most vulnerable youth are likely to comprise the majority of victims, therefore, child welfare workers tend to focus on the youth already in the system particularly those who have been identified as being at risk for trafficking. This tendency to focus on individual behavior as both the problem and solution limits the scope of protection by overidentifying the youth already in the system and under-identifying youth not engaged in services. An inequities perspective suggests the risk factors for victimization may exist on a continuum throughout society. A broader reach would be more effective in protecting all children and youth at-risk regardless of previous or current child welfare involvement. Ignoring the risk factors that exist outside of an already identified at-risk population creates and maintains inequities.

5. Structural Social Work

Social work training, with its main principle of social justice focuses on social, political and economic inequities, as well as its dual focus on the person in environment, inherently subscribes to a structural social work perspective. As such, social workers are professionally prepared to understand and address conflicting micro/macro systems and use that knowledge to work with children and youth in child welfare. Structural social work interweaves critical theoretical traditions (such as Marxism, critical race theory and feminism) that are attuned to the socio-political and economic structures of society, and how neoliberalism and capitalism increase inequity among individuals and families. Structural social work views society as something that can be changed “from a society characterized by exploitation, inequity, and oppression to one that is emancipatory and free from domination” (Mullaly 2007, pp. 214–15). Further, structural social work theory assists in understanding the interactions between individual actors and systems (e.g., domestic sex trafficking victims and the child welfare system) that worsen and restrict the living conditions of poor and marginalized groups. Thus, this theory informs interventions that focus on the structural and systematic origins of social problems and the unequal distribution of power (Moreau 1979, 1990; Mullaly 1997, 2007).

Mullaly (2007) contends that the term “socially sanctioned structural violence” rather than “inequity” is a more accurate representation of what occurs in oppressive systems (p. 276), since it captures the physical and emotional consequences of oppression. DMST specifically stems from a combination of capitalistic and oppressive systems—including patriarchy and neoliberalism which are powerful forces shaping individual experiences. Political leaders in the United States, however, use rhetoric that blames individuals for their social problems (e.g., classifying trafficked youths as prostitutes or criminals and not victims), instead of working to alleviate the structural violence inherent in our society (e.g., the objectification of women and children’s bodies, wage disparities between men and women). For the trafficked youths, how they were perceived and treated was a result of the intersection of their marginalized social class, gender, race, and other identities. A special consideration for some victims is also their vulnerability as wards of the state, residing with relatives, in foster care or group homes.

It is necessary for child welfare workers to develop and implement strategies that address both individual and structural levels of change. Child welfare workers' and DMST victims' thoughts and daily interactions govern how they act and make choices, while simultaneously informing and being influenced by their broader surroundings. Given the theory posits that individuals and families are not to be blamed for inequitable social arrangements, at the practice level, it provides a framework for child welfare workers to understand how society's social structures and political decision-making are linked to social inequity among vulnerable people, and must be changed simultaneously with micro and mezzo interventions in order to alleviate harm (Mullaly 2007). Child welfare workers can influence local and state policies and also bring their expertise into the planning and collaboration leading to the development of such policies (Rothman et al. 2001).

6. Critical Consciousness

Critical consciousness theory provides a way for individuals to gain the needed knowledge and information to understand how the socio-political and economic systems work. In order for child welfare workers to recognize and be able to respond to inequities that stem from socially sanctioned structural violence, developing a critical consciousness is crucial. Critical consciousness enables an examined understanding of the presence and consequences of unjust social structures. Freire (2000) describes critical consciousness as comprising the following elements: power; critical discourse; de-socialization of stereotypes; and human agency. Each of these concepts will be discussed in more depth, as being conscious of these forces enables child welfare workers to locate and understand social inequities and how they are perpetuated and maintained. Having this conscious awareness can assist in the transformation of institutional policies and practices on a structural level.

Power. Power that operates on a structural level must be addressed as these invisible mechanisms are constantly working to support the dominant ideologies that oppress subjugated voices. Power plays a fundamental role in the intersection of oppressive ideologies, social systems, and interpersonal interactions that create social inequities. Structural forces also affect consciousness. Without recognizing that all levels of social, economic, and political interaction are ordered by their relation to power, it is difficult to acknowledge that lived consequences are the result of these power relations in which all individuals have a social position. Critical consciousness is an awareness of culpability and accountability in oppressive structures, coupled with a critical sense of how to use individual and systemic agency to intervene in inequitable systems—regardless of who benefits from them (Freire 1979).

Critical Discourse. The language that child welfare workers use to describe the population most affected by the inequities caused by a power imbalance is paramount to unveiling the structural forces that create and perpetuate inequities, as well as to reframing how the larger society perceives the social problem. When sexism and other forms of oppression are discussed only from an individual/interpersonal level, the influence of enduring social, political, and economic inequities undergirding social hierarchies are left unseen. Involving individuals in shifting the discourse that necessitates a recognition of socially sanctioned structural violence, both on the policy and practitioner level, allows for broader education to occur. It supplants the general perspective of intervention as the best practice, to prevention as the intended goal. Establishing or changing policy to address inequities can be challenging, as the myriad of factors that contribute to the oppression inherent in inequity need to be addressed. Recognition, creation of, as well as engagement in the critical discourse surrounding the inequity is vital. One must use this awareness of social forces to redefine the problem and create and utilize language that is not victim-blaming. When youth are defined as 'troubled,' or 'delinquent,' the assumption is they are in control of their behavior created by social context and therefore, deserve the situations in which they find themselves. Changing the discourse from categorizing these youth as being neglected rather than problematic, shifts the narrative from children being seen as undeserving, or even voluntarily committing crimes, to children in need of care.

Similarly, when the youth who are victims of DMST are labeled as prostitutes, which carries with it a category of criminalization, they are less likely to receive services that may be essential to their mental health. Being labeled as a criminal also comes with a series of potential interconnected consequences, such as disruption in education, employments, and housing (Miller and Garrahan 2017). Critical language must be accessible to all individuals, institutions, and organizations that come into contact with the dispossessed population. One tactic that can be helpful in developing this liberatory discourse is utilizing the testimonies of the individuals directly affected by the problem and presenting them to critical stakeholders in the process. This gives voice and power to the people most invested in the policy outcomes, and highlights the process of human agency requisite in the process of policy making.

Desocialization of Stereotypes. The desocializing of stereotypes embedded in society is key to the dismantling of inequities caused by larger structural forces (Freire 2000). Due to the power of stereotypes, individuals from oppressed groups are not only marginalized, but often intentional targets. In the United States, where the dominant paradigm is race, much of the desocialization is centered around disavowing the ideology of white supremacy and racism. Connected to this is the durable inequity of patriarchy and its outgrowth, gender oppression. One of the main strategies of desocialization is education around the systemic causes of inequities resulting in the creation of an affected population such as DMST youth. The stereotypes created and maintained by the dominant culture are a way of fragmenting the stories and lived experiences of oppressed groups. Revealing the oppressive roots of these stereotypes can result in a broader shift in perspective from these youth being categorized as criminals to them being victims of larger society. Shifting this perspective heightens the empathy and awareness of individuals in society that unknowingly come into contact with DMST youth and provides an impetus for greater surveillance.

A variety of constituents need to be involved in reframing the problem, not only to policy makers but the public overall. Trainings that desocialize common stereotypes of 'problem youth' and develop awareness of the larger social forces (such as patriarchy, racism, and neoliberalism) creating the problem are necessary for the individuals who are most likely to come in contact with the victims and youth at risk. Hotel workers, casino workers, local judges and police all need to be trained to recognize their socially sanctioned stereotypes of DMST youth and become involved in their liberation.

Human Agency. Highlighting the role of human agency is essential to the reduction of inequities caused by socially sanctioned structural violence. It is critical to reconstituting the fragmented portrait of DMST youth. Not only does society have a biased perspective of the youth, so too do the youth of themselves. As posited by Freire (2000), "the more completely they accept the passive role imposed on them, the more they tend simply to adapt to the world as it is and to the fragmented view of reality deposited in them" (pp. 72–73).

In Connecticut, social welfare workers, DMST youth, and the broader public had a role in shifting the overall discourse from intervention to prevention, criminal to victim, eliminating individual problem behavior to realizing overall child well-being. The utilization of critical consciousness enabled practitioners, policymakers and individuals likely to come into contact with DMST youth to focus not only on interventions on the individual level, but include the transformation of institutional policies and practices on a structural level that emphasize prevention. The recognition of how oppressive mechanisms operate, particularly on a structural level, afforded practitioners the ability to understand the ongoing connection between oppressive ideologies, social systems, and interpersonal interactions. As previously noted, acknowledging the existence of sexism and other forms of oppression merely on an individual or interpersonal level misses the influence of durable social, political, and economic social structures undergirding social inequities. At the same time, only considering oppression as the result of characterless systems can obscure the ways in which oppression is created and recreated through action and inaction, which diminishes the role our individual human agency has in confronting change. Used together with structural social work, critical consciousness development allowed connections to be made between dominant ideology, socialization, institutional structures and their social relations

among people in the broader society. Not only does it allow for the identification of inequities existing in myriad systems, it also offers a framework for transforming them through prevention (Freire 2000).

Although the response was not explicitly informed by an inequities perspective, the results of Connecticut's efforts to identify and provide services for victims of DMST support using the inequities perspective to inform child welfare services. Additionally, the current structure of the state's and DCF's response may serve as an example of what using an inequities perspective in child welfare services could look like in other aspects of protecting and promoting child well-being.

7. Risk across the Population

Providing child welfare services to all suspected DMST victims positions the child welfare system as the central service point for DMST—regardless of the perpetrator or prior living situation. This is an unusual step because the jurisdiction or scope of child protection systems is limited to maltreated children. Traditionally, child welfare services are for children who have been abused or neglected by their parent or guardian. Thus, to meet the definition of child maltreatment, the perpetrator typically has to be the child's parent, guardian, or other adult responsible for their care or custody.

Recognizing maltreatment as a risk factor for susceptibility to traffickers, but not the only risk factor, shifts the focus to identifying all victims of trafficking rather than primarily looking within the child welfare population. In recognition that youth who were not actively involved in the child welfare system needed appropriate services and safe environments, in 2010, Connecticut's DCF modified their policies for the state child maltreatment hotline. This was an internal change DCF could accomplish without legislative action. Consequently, any suspected victims of DMST could be accepted into the system to receive services as an "uncared for youth", regardless of their relationship to the suspected perpetrator. This was an important shift in the perception of the target population for child welfare services.

To identify more youth who were being trafficked, additional training needed to be conducted because youth, particularly 16 and 17 year olds, were often being viewed by first responders (such as police, firefighters, EMT, etc.) as criminals willingly engaging in prostitution rather than victims being sex trafficked. To increase the number of suspected youth who were identified and offered services, DCF and other advocates in the state successfully advocated for a law requiring police to call the hotline when they arrested a 16 or 17 year old for prostitution (Connecticut General Assembly 2010). At the time the law was passed, youth of that age could still be charged with prostitution. This mandatory reporting is a more equitable approach than allowing individual child welfare workers to subjectively decide. However, to fully shift the practice of contacting DCF from an option to a requirement, the child welfare agency and other advocates endorsed a legal change to require all suspected cases be referred to DCF. By establishing the policy in statute, it changed the structure of care so it no longer depended on individuals deciding to refer youth. This reduced the individual level bias exhibited by police, prosecutors, or others determining whether someone was committing a crime, or was the victim of a crime that should be prosecuted, and/or was a victim and offered services. This new policy disentangled the criminal prosecution aspect from service provision, further distancing the youth from the perception that they are criminals. Mandatory reporting reduced the influence of unconscious biases at the individual level and increased the opportunities for all victims to receive services.

The DCF policy for suspected victims of DMST is comprehensive and consistent with the available recommendations for treatment of victims (CT DCF 2014; Ijadi-Maghsoodi et al. 2016; Miller-Perrin and Wurtele 2017). The policy covers the process of assessment and care beginning with an accepted hotline report. Key staff, including the Human Anti-trafficking Response Team Liaison (HART) at the assigned office, have to be alerted that a trafficking case has been identified so they can begin to coordinate the response. The suspected victims require special transportation in an identifiable DCF vehicle. The policy recommends a battery of assessments, which included substance abuse, medical, behavioral health and dental. The policy specifies that acute needs should be assessed in emergency departments and have personnel trained in the Emergency Department Assessment Protocol so that

appropriate services (including the youth's placement needs) can be identified. The assigned DCF worker is responsible for scheduling follow-up visits for any recommended services, but the HART Liaison is responsible for verifying that all necessary follow-up occurred. The HART Liaison also works with community agencies to identify appropriate services and coordinates with law enforcement. The policy provides screening tools for physical and mental health problems and identifies specific services that youth may need. Further, the policy also contains a screening tool (with three categories: Confirmed Victim, High Risk and At Risk) to identify the likelihood of youth being a DMST victim. Additionally, the policy provides direction for securing the necessary paperwork and permissions for foreign national youth. The DCF is also engaged in a federally funded study of treatment for DMST victims and, at the time this article was published, the pilot project is still in progress; the eventual results may be informative to other jurisdictions looking to provide DMST-appropriate services.

A key outcome of shifting DMST screenings away from law enforcement is that potential DMST victims can be evaluated by staff trained in trauma-informed interviewing and treatment practices, rather than a police officer or prosecutor who may or may not be fully informed about this issue. By classifying these youth as maltreated under the category of "uncared for youth" who need services, the State sends a message to other professionals (such as the police and to the community in general) that these youth are victims in need of services, not criminals under the jurisdiction of the Department of Justice.

8. Preparing to Provide Services

Identification is critical, but bringing suspected victims into the child welfare system is only useful if the system can provide appropriate and effective services. In tandem with the efforts to increase the number of youth who were suspected victims being reported to the child welfare system, DCF, internally, was busy developing an appropriate procedure to consistently and systematically provide services to suspected victims (TIP Council 2011, Annual Report). In 2009, the DCF created the Human Trafficking Response Team, since renamed the Human Anti-Trafficking Response Team (HART). In 2010, the first protocol for suspected victims was added to DCF policies and implemented statewide. The policy covers the intake procedures, the assessments and screenings that should be conducted, provides a human trafficking screening tool and flow-chart of services, and describes the role and responsibilities of the HART liaisons. In 2011, DCF completed 35 trainings which included DCF employees, police, EMS, and public schools (TIP Council 2011, Annual Report). Between 2012 and 2014, DCF completed more than 100 trainings statewide with more than 3000 people trained (TIP Council 2014, Annual Report). The results of extensive awareness and training that DCF has provided internally and to relevant parties throughout that state, have supported the suspicion of more widely distributed risk. Widening the net of people responsible for identification has resulted in more "looking across the population" for victims and a corresponding increase in identification. This has resulted in a more than 1000% increase in identified youth between 2011 ($n = 17$) and 2016 ($n = 202$) (TIP Council 2011, Annual Report; CT DCF 2017). These were not only runaways or youth in foster care; more than half of the youth identified in 2016 were living in the home of a parent or guardian at the time of identification (CT DCF 2017). Every year since 2014 the percentage of suspected victims who are living with a parent or guardian has increased, even as the total number of suspected victims continued to climb (CT DCF 2015, 2016, 2017, 2018). These results tentatively indicate that children at risk for DMST were being attended to inequitably; risk is distributed across the population, and outreach and prevention efforts should be targeted widely.

Without the extensive outreach and education, it is likely that many victimized youth would have been overlooked by focusing on child welfare-involved youth. Trainings have also been conducted at high schools and youth centers as a form of prevention, again targeted at the general population and not limited to youth already identified as "at-risk." As awareness of DMST has increased in Connecticut over the last decade through extensive training and outreach efforts, the state's environment for the trafficking and sexual exploitation of minors (DMST) illustrates the benefits of inequities perspective

that social work postulates. Child welfare workers have been a critical voice in each step of this process resulting in the child welfare system being leveraged to address inequities in society.

9. Discussion

Addressing inequities with the assistance of structural social work lens recognizes a priori the interaction between unjust social structures and individuals which creates both individual and social realities. These structures exist in the form of social institutions, cultural ideologies, social relations and the unseen mechanisms of power that create, maintain and perpetuate oppression. Such structures have a reciprocal association and critical theory facilitates the understanding of these relationships. Critical theory highlights how society's substructure of dominant ideologies and narratives create structural forms of oppression that are maintained through social systems. Recognizing inequities that arise from structural oppression can be done through critical consciousness and challenged through policy change. Together, unjust structures and individual bias can be transformed to create an equitable and just system. Changing the discourse from undeserving problem children to victims in need of services, exposes the socially sanctioned structural violence that occurred at the intersection of the child welfare and criminal justice systems.

Child welfare workers employed within the DCF are constrained by the types of interventions they can implement because of larger social and institutional policies. Due to the lack of family-oriented foster homes, many youths are placed in group homes with a staff of caretakers who are on shifts. As a result, youth were monitored more closely than in private foster homes, but also may have looser ties with, and receive less social and emotional support from, their caretakers. This may make them prone to seek this support in other ways. In utilizing the skill of recognizing the influence socio-economic-political and physical structures had on youth, child welfare workers began to interpret their behavior differently. Previously when youth left their residence without permission, their behavior had been categorized as "running away" or being a "rule breaker," and now it was seen as a coerced action. Youth had fallen victim to the capitalist system that supported the exploitation of vulnerable individuals at the hands of (mostly) adults and men who held more power due to their gender, economic, sexual orientation and racial status. Once the issue of DMST was identified in these closely-monitored youth, the full extent of the problem could be explored and identified in the general population of youth. While youth in state custody are at higher risk, more than half of the cases of DMST in 2016 were from youth living in a parent's home.

When youth are categorized as criminals or morally corrupt, they can become part of a web of socially sanctioned violence. The inequities resulting from this web reverberate throughout the youth's life trajectory. Society often views these youth as unlikely to be rehabilitated, deeming them undeserving of services. Practitioners engaged with DMST youth understood the distinct meaning of certain cultural norms, values and ideas based on their social group memberships and larger oppressive social forces that have shaped their lives. Developing critical consciousness trains practitioners to recognize how socially sanctioned structural violence can manifest due to dominant culture ideologies.

Rather than perceive the youth's lack of interest in education or their desire to have expensive material things as further evidence of their moral failings, they were recognized as a child's developmental need to feel valued, cared for, protected and have a sense of belonging. For many youths their pimp is a provider and protector of these developmental needs, additionally the money the youth earn allow them buy things that perhaps they previously could not afford. Giving voice and value to the narratives of these youth that lay on the margins of society enables the youth's human agency. These narratives are often ignored, devalued, or unrecognized because they fail to follow the standard dominant culture's perspective. The use of a critical perspective supports practitioners in their efforts to recognize cultural differences that existed between the youth and themselves. The practitioners worked for and within the institutions that created policy and practices that affected the youth's overall well-being within the confines of the social relations of racism, sexism and ageism. Within the DCF system they developed protocols to screen and provide services for sexually exploited youth with

signs of trauma (CT DCF 2014). These policies along with expanding the understanding of child maltreatment to include abuse or neglect committed not only by a parent or legal guardian, but also by individuals to whom youth are not legally bound. This policy change gave them greater legal protection and access to DCF services. Developing a critical consciousness is one way for child welfare workers to recognize the myriad of oppressive forces impacting the trafficked youths' social location, victimization, agency and societal culture, and marginalized experience. Workers took what they knew about the youth's experiences and created a way to transform the larger structures, through policy and legislation, and provided a socially just practice.

Critical consciousness and critical theory provide a structured mechanism to move from a traditional approach to an inequities approach. The Connecticut response to DMST has given us an example of what an inequities approach in child welfare could look like. Although a narrow example of one aspect of child maltreatment, such an approach could be used to inform other types of maltreatment prevention efforts. The results of an inequities approach justify the assumption of distribution of risk across the continuum. This supports outreach to the general population as a means of prevention and promoting child well-being. This goes beyond the federal requirements of focusing on child welfare (National Conference of State Legislatures 2014). Youth who would typically not be identified as victims now have access to services.

10. Conclusions

A critical theoretical framework provided a lens for both understanding how structural contexts negatively impact the well-being of marginalized populations, and for identifying practices that promote structural change. In this paper, we have presented two critical theoretical frameworks and have discussed their relevance for defining DMST as a problem needing a policy-based solution. We have used a critical lens to examine how earlier DCF policies and service delivery systems, which are interconnected, were unprepared to address the needs of the emerging and growing DMST youth population. Simultaneously, legislation in conjunction with law enforcement attitudes and behaviors had to be transformed in order to no longer perpetuate structural violence. Finally, we presented how social workers, through development of critical consciousness, advocated for legislation that allowed for an alternative model of practice in the realms of service delivery that connect interventions at the personal level to the structural and cultural levels. In doing so, they challenged the oppressive structural context in which victims of sex trafficking are situated. We suggest that when educated about these theories, child welfare workers can engage in social justice-oriented, emancipatory practice through appropriate problem definition and implementation of interventions that promote personal healing, while simultaneously challenging oppressive elements of social systems and their underlying ideologies.

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