Florida Department of Children and Families
Annual Human Trafficking Report
2017-2018 State Fiscal Year

Mission: To work in partnership with local communities to protect the vulnerable, promote strong and economically self-sufficient families, and advance personal and family recovery and resiliency
Florida Department of Children and Families

Annual Human Trafficking Report
October 2018

Background

Section 39.001(5), Florida Statutes, establishes the following goals for the treatment of sexually exploited children who are residing in the dependency system:

- Ensure these children are safe;
- Provide for the treatment of such children as dependent children, rather than as delinquents in the criminal or juvenile justice system;
- Sever the bond between exploited children and traffickers, and reunite these children with their families or provide them with appropriate guardians; and
- Enable these children to be willing and reliable witnesses in the prosecution of traffickers.

Purpose

This report provides information as required in section 39.524(3), Florida Statutes, as follows:

- The prevalence of the commercial sexual exploitation of children (CSEC) – number of children verified as victims of CSEC.
- The specialized services provided (residential and non-residential) and placement of such children.
- The number of children placed in safe houses and safe foster homes during the year.
- The criteria used to determine the placement of children.
- The number of children who were evaluated for placement.
- The number of children who were placed based upon the evaluation.
- The number of children who were not placed.
- The number of children who were referred to a safe house or safe foster home for whom placement was unavailable.
- The counties in which such placement was unavailable.
- The Department’s response to the findings and recommendations made by the Office of Program Policy Analysis and Government Accountability.

The majority of activities described within this report occurred between July 1, 2017 and June 30, 2018 (State Fiscal Year [SFY]), unless otherwise noted. Previous reports reflected data from the Federal Fiscal Year (FFY). However, with the passage of Senate Bill 852 (2017-023, Laws of Florida), the due date of the Annual Report changed from December 1 to October 1 impacting the timely reporting of information from a FFY prospective. This report and future reports will reflect information from the SFY.
The Department of Children and Families (DCF) tracked Human Trafficking allegations in two primary categories:

- **Human Trafficking-Commercial Sexual Exploitation of a Child (CSEC):** This maltreatment type is used for those cases in which the allegations appear to involve commercial sexual exploitation of a child (e.g., adult entertainment clubs, escort services, prostitution, etc.). Investigative types for this category may be: *In-Home, Other, or Institutional.* This distinction separates reports based on whether or not the alleged perpetrator is a parent, legal guardian or caregiver, or the alleged perpetrator appears to be an institution.

- **Human Trafficking-Labor:** This maltreatment type is used in those cases in which the allegations appear to involve issues associated with labor trafficking, slavery or servitude that do not appear to be sexual in nature.

**Investigative Reports**

The number of reports has increased each year since the introduction of the human trafficking maltreatment code into the maltreatment index in 2009, with the exception of state fiscal year 2017-18. In SFY 2017-18, the total number of reports, initial and additional, received by the Hotline alleging at least one of the human trafficking maltreatments was 2,133 reports, which is slightly less than the 2,224 reports from SFY 2016-17. In reviewing the last five years, in SFY 2013-14, there were 861 reports received and this increased to 1,337 reports in SFY 2014-15. In SFY 2015-16, the total number of reports to the hotline was 1,783. Overall, from SFY 2013-14 to SFY 2017-18, there was a 147.7% increase in reports to the hotline for human trafficking maltreatments. The chart below visually outlines these numbers through SFY 2017-18.
DCF also identifies the number of reports received per region. As in past years, the Central Region had the highest number of reports for the human trafficking maltreatment (521). In looking at county-level data, Miami-Dade (215), Broward (198) and Orange (186) received the most reports, followed by Hillsborough (143) and Duval (138). Approximately 12.7% of the reports received were male victims, which is consistent with the male victim rate of reports received during prior years. Approximately 92% were coded as Human Trafficking-CSEC, while just over 7% were coded as Human Trafficking-Labor. Of the 2,133 reports, 470 (22%) were closed as verified, but it should be noted that 132 (6%) of the cases were not yet closed at the time of the data pull in July 2018, so those findings were not available.

![Human Trafficking Reports Received by Region](image)

**Available Safe Houses and Safe Foster Homes**

During SFY 2017-18, the number of available safe houses and safe house beds fluctuated. As of July 1, 2017, there were five safe houses available with a total of 28 beds. During July 2017, the state’s first safe house for males was licensed and certified with a bed capacity of five. Throughout the remainder of the state fiscal year, two existing safe houses, with a total of nine beds, closed and one more new safe house was certified in November 2017. As of the close of the state fiscal year, there were five safe houses with a total of 42 beds. All of the beds were gender-specific to females, with the exception of the five beds within the male-specific home. There are two new safe houses in development, including the first safe house in the Northwest Region.
Although the number of identified child victims of human trafficking is higher than the number of beds available in safe houses, these beds may not be filled at all times because the decision to place an individual child is based on the existing make-up of residents in a particular placement and the individual child’s specific needs. The complexity of the residents’ needs may limit the number of youth a safe home accepts at any given time. Often, there is a desire to not introduce too many new youth into a home at one time, to ensure good assimilation of the youth into the program and staff engagement with the existing youth. Each facility has its own intake and assessment process and ultimately determines the appropriateness of a child for that specific placement. It is also important to note that not all verified victims require the level of care provided at a safe house; some may be more appropriately served with community-based wrap-around services and others may need a higher level of care such as a residential treatment center.

There are two residential campus settings that have specialized CSEC treatment for child victims of commercial sexual exploitation. The residential campus settings are able to serve female, male and transgender youth. The beds available on these campuses fluctuate based on the total number of residents in all programs offered. These residential campuses also have additional specialized treatment for CSEC victims experiencing substance abuse and for CSEC victims with intellectual disabilities.

In addition to these residential campuses, there are also substance abuse treatment facilities throughout Florida that are equipped to serve the specialized needs of this population. When substance abuse is identified in a multidisciplinary team staffing, providing substance abuse treatment often becomes the priority to allow the youth to reach a more stable place prior to initiating services to address their victimization. A safe house would not be an appropriate placement for a youth currently struggling with substance abuse or in need of detox; therefore, it is critical that substance abuse treatment providers are trained on CSEC and able to serve the needs of this population. Aspire Health Partners in Central Region and Stewart-Marchman-Act Behavioral Healthcare in Northeast Region are two examples of substance abuse treatment providers that have also been trained to serve CSEC victims.

There were 15 safe foster home beds available within the Citrus Helping Adolescents Negatively Impacted by Commercial Exploitation (CHANCE) Program, a treatment program by Citrus Health Network implemented in Miami-Dade County to address the unique mental and behavioral health needs of youth who have been commercially sexually exploited. Devereux Florida, through its DELTA Foster Home Program, has six safe foster homes located in both Central and Northeast Regions with one more being certified in July 2018. They reported three additional safe foster homes pending certification and are expected to have a total of 10 soon. They continue to provide training for foster families statewide and collaborate with the Community-Based Care Lead Agencies (CBCs) in the Central Florida region to develop safe foster home capacity. The Safe Foster Home model is able to serve male, female or transgender children; there is a recommended standard of one-child per residence. In addition to their services in Miami-Dade County, Citrus Health Network has contracted
to develop safe foster beds in Broward County and, as of June 2018, they have three families trained to be foster parents within the Safe Foster Home model whose homes will be certified when they renew their licenses.

Other Specialized Services (Non-Residential)

Devereux and CHANCE also provide community-based wrap-around services to CSEC youth who are not in specialized housing, whether that be with a relative, foster home, or other housing appropriate for that child. Community-based services are a crucial part of the continuum of specialized services available to CSEC youth and can be utilized for youth who have a stable and supportive living environment, youth who do not want to go to a safe house, or any youth who do not need the level of care of a safe foster home, safe house, or residential treatment center provides. Oftentimes, these services include therapy, specialized case management or advocacy, and other services to meet the individualized needs of that youth. In addition, there are two drop-in centers located in the Southern and Suncoast Regions. Kristi House’s Project Gold, located in the Southern Region, offers specialized case management, advocacy, empowerment groups and clinical services. More Too Life, located in the Suncoast Region, offers victim services, housing assistance, prevention and advocacy.

A new provider, The Open Doors Outreach Network, is now providing community-based services in five areas throughout the state covering 19 counties. Their service model includes a team made up of a clinician, a Regional Advocate and a Survivor Mentor who provide case management, advocacy, mentoring and counseling services. The Open Doors Outreach Network provides
services to youth and young adults age 10 to 24.

Vital to the continuum of care are providers that have specialized staff within their programs that can work with victims who are CSEC even though they may primarily serve a different, but related population. Young Parent’s Project focuses on serving pregnant and parenting court-involved teenage girls utilizing staff who are trained and able to serve pregnant and parenting CSEC youth. Zebra Coalition provides housing and support services to youth identifying as LGBTQ+, but have recently worked with Devereux to create a specialized advocate position for CSEC youth identifying as LGBTQ+. There are many providers, such as Child Advocacy Centers, providers serving at-risk youth, mental health providers and street outreach organizations located throughout the state of Florida that have seen the importance of understanding the specialized needs of CSEC youth and have trained their staff to be able to serve this population. Available services continue to expand; however, training and awareness on the intersections often seen with this population, such as homelessness/runaway or substance use, will continue to be a crucial role of DCF and local community task forces.

All specialized placements, at this time, exist in the Central, Suncoast, Southeast, Southern, and Northeast Regions. Success in expanding the state’s safe foster home beds occurred during the past year, with the certification of the first safe foster bed in the Northeast Region. In SFY 2017-2018, DCF Human Trafficking staff met with prospective safe house service providers in the Central and Northwest Regions to provide information on requirements for opening and operating a safe house. All of the specialized programs are available to any child in the state of Florida; therefore, while specialized beds do not currently exist in all regions, placement in specialized programs is available to youth from all regions.

As the continuum of care for CSEC victims continues to expand and develop, DCF encourages all specialized providers to partner with outside evaluators to assess their program. This will help determine the outcomes for specific programs, as well as provide much needed research on program and service types that work best with this population. The goal is to see promising practices become evidence-based practices.

The University of South Florida (USF) continues to evaluate the CHANCE program with findings that identify key characteristics of commercially sexually exploited youth and assess youth outcomes throughout treatment. In their fifth progress report dated January 31, 2018, USF identifies a number of promising outcomes over time. Specifically, the report notes, “Significant improvements have been realized in each of the five outcome domains (life functioning, educational needs, emotional and behavioral needs, risk behaviors, and strengths). Specific outcomes for which statistically significant improvements were found include: family functioning, living situation, use of recreational time, educational attainment, school behavior, school achievement, school attendance, prior school success, attitudes towards education, oppositional behaviors, adjustment to trauma, runaway behaviors, delinquency, judgment, life skills, resiliency and resourcefulness.” The report also noted that the
program achieved a reasonable degree of fidelity to the program model and that youth perceived the services to be largely positive and beneficial. Conclusions on youth areas of strength such as “self-expression, creativity, resiliency, resourcefulness, and involvement in treatment” and outcomes that appear more resistant to change, such as anger, anxiety and depression, may aid in informing practice throughout the state.

Florida’s Placement Continuum of Care for CSEC Victims Ages 18 and Under

The above graphic illustrates the full continuum of care for child victims of commercial sexual exploitation. Youth have the ability to move up and down from least restrictive to most restrictive, dependent on their needs. Placements in red reflect specialized CSEC placements.

Placement of Victims in Safe Houses and Safe Foster Homes

A Human Trafficking Screening Tool was developed in the fall of 2014 through a DCF and Department of Juvenile Justice (DJJ) workgroup. This tool is designed to assist child welfare professionals and DJJ staff with identifying youth who have been victims of commercial sexual exploitation and labor trafficking. DJJ launched the tool in its Juvenile Assessment Centers (JAC) statewide beginning February 27, 2015. DCF initiated statewide implementation of the tool on January 13, 2016. As of June 30, 2018, DJJ staff administered 12,237 tools to a total of 6,773 youth, 54.5% of tools were administered to girls and 45.5% to boys. Of those screenings, 5,394 resulted in a call to the Hotline, with 2,786 calls accepted for investigation (an acceptance rate of 52%). According to DJJ, which tracks the results as part of its efforts to validate the tool, the acceptance rate for calls for girls was 57% and 41% for boys.

Upon identification of a child victim of commercial sexual exploitation, CBCs assess the child to determine the most appropriate placement. The current mechanism for assessment of placement is through the Multidisciplinary Team (MDT) staffing and use of the Level of Care Placement Tool. The Level of Care Placement Tool considers factors that help determine the most appropriate placement for a youth including the following: elopement history, foster care history, current involvement with a gang and/or trafficker, current substance use, behavioral and psychiatric history, positive support systems, location considerations such as court involvement, and readiness to receive services. Youth with high-level needs such as substance abuse or mental health treatment needs often require a high level of targeted care such as a substance abuse treatment facility or a residential treatment center. Youth with a good support system at home may be best served with specialized community-based wrap-around services. Those victims that are CSEC who may need a structured living environment and are ready to receive services may be a good fit for a safe house.

The Level of Care Placement Tool is only one portion of the MDT staffing. These staffings include the DCF, DJJ, service providers and other parties as required by section 409.1754, Florida Statutes. These staffings include a discussion among the parties present to determine the specific service needs of the child; the staffings can be guided by DCF’s Human Trafficking MDT Staffing Form and result in a service plan being developed for each child. In compliance with the changes to statute created by Senate Bill 852 (2017-023, Laws of Florida), the Human Trafficking MDT Staffing Form was updated to include information necessary to complete a follow-up six months after the close of the investigation with all verified victims of CSEC. This section is sent to DCF’s Regional Human Trafficking Coordinators, who complete the six-month follow-up.

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2 Email from Office of Research and Data at the Department of Juvenile Justice dated 7/29/18.
In the reported evaluation information from the CBCs for July 1, 2017 through June 30, 2018, it was noted that a total of 511 youth were evaluated for placement in a safe house or safe foster home. Of these 511 youth, 79, or 15.5%, of the youth were placed in a safe house or safe foster home based on the evaluation. The Central Region CBCs reported the most youth placed in a safe house or safe foster home with 24 youth placed.

Of the youth evaluated for a safe home placement, 432 were not placed in a safe house or safe foster home for a variety of reasons. Of those assessed, 196 were not placed in a safe house because that was not the recommended level of care. These youth may have needed a higher level of care such as a residential treatment center or substance abuse facility, or may have been court ordered to a juvenile justice facility. There were 35 other youth not placed in a safe house because they were on runaway status. There are cases where a child may still be placed in a safe house or safe foster home after recovery from a runaway episode or upon discharge from a juvenile justice facility or higher level mental health facility. Many of these youth were referred to specialized non-residential services in the community to address their needs as a commercially sexually exploited child. The CBCs reported that 587 youth were referred to specialized community-based services, which includes youth with verified cases and some with cases in which CSEC is suspected.

For 20 of the youth referred for CSEC placement, such placement was unavailable. CBCs have cited the following reasons safe homes were not available:

- Lack of capacity (no vacant beds);
- Program refusal due to the child engaging in recruitment behavior, substance abuse issues, mental health issues, and history of running away;
- Youth who were unwilling to engage in services;
- Non-dependent youth who were involved with Diversion services and not sheltered;

At this time, there are no emergency placement options specifically for CSEC victims, although shelters under the Florida Network of Youth and Family Services have been building capacity to serve this population through training, policy and utilization of the Human Trafficking Screening Tool. There is often a delay between identifying the victim and placement in a specialized program. Available programs that focus on the specific trauma needs of these children have their own specific intake and assessment processes. Such processes often require an interview of the child and/or a willingness of the child to participate in the program. Limitations on placement can also include factors such as gang affiliation and commonality of exploiter – meaning these types of factors must be considered in determining placement and the makeup of the safe house or CSEC program. Youth who have a shared gang affiliation or a conflicting gang affiliation, or youth who have shared exploiters, often cannot be placed together due to the degree of conflict it may cause in the home. Safe homes frequently refuse youth who engage in recruitment activity, who display significant history of violence, or who have complex unmet needs, such as active drug use or non-compliant mental health treatment.
Expenditures for Human Trafficking

In SFY 2014-15, $3,000,000 in recurring General Revenue funds was appropriated to serve the needs of youth who were victims of sexual exploitation and had been adjudicated dependent or who were the subject of an open investigation due to allegations of abuse, neglect or exploitation. As directed by the Legislature, the funds were provided to the CBCs for costs associated with placement and services for sexually exploited youth. In SFY 2015-16, SFY 2016-17, and SFY 2017-18 the $3,000,000 in recurring funds continued to be provided to the CBCs for costs associated with placement and services for this population.

Expenditures reported by the CBCs in the Florida Safe Families Network (FSFN) indicate they spent a total of $5,217,267 on CSEC services and placements for 264 youth during SFY 2017-18. As in past years, there may be additional expenditures for services to this population that were not recorded in FSFN. CBC of Central Florida had the highest reported expenditures for CSEC services at $1,037,443, which exceeded their allocation of $198,979 by $838,464. Of the payments reported in FSFN for CSEC services, the statewide average cost of care for an individual client was $19,762.38.

Of the service providers that were funded by the CBCs to provide services to victims of commercial sexual exploitation, Vision Quest Sanctuary Ranch received the largest share of the funding, for a total of $1,021,632 to serve 27 youth. Citrus Health Network received the second largest share of the funding, for a total of $869,709 to serve 107 youth. Finally, Wings of Shelter received the third largest share of the funding for a total of $282,600 to serve four youth.

Update on the Implementation of Senate Bill 852

During the 2017 Legislative Session, the Legislature passed Senate Bill 852 (2017-023, Laws of Florida), which included amendments to ss. 39.524 and 409.1754, Florida Statutes. New statutory requirements affected the MDT staffings that determine the need for services for suspected and verified victims of commercial sexual exploitation, the development of individual service plans for this population and information to be included in the Annual Report to the Legislature, including DCF’s response to the findings and recommendations made by the Office of Program Policy Analysis and Government Accountability as required in section 409.16791, Florida Statutes. Please see DCF’s response pursuant to section 409.16791, Florida Statutes, in Appendix A of this report. Lastly, the new legislation required a follow up with all verified victims of commercial sexual exploitation within six months of the completion of the child abuse investigation. This legislation went into effect October 1, 2017.

In 2017, DCF’s Human Trafficking Unit staff modified Children and Families Operating Procedure 170-14, Response to the Human Trafficking of Children, to reflect the new statutory requirements. The Human Trafficking Unit staff then conducted training efforts throughout the state to ensure that DCF and
contracted staff understood the new requirements. As noted previously, DCF also created new forms to enhance the MDT process and collect the required information and data on this population, in compliance with the new statutory requirements. The DCF’s Regional Human Trafficking Coordinators initiated the six month follow ups with verified victims of CSEC on April 1, 2018, six months from the effective date of the statutory changes.

Additional resources about human trafficking and DCF’s efforts to address this issue can be found at:
http://www.myflfamilies.com/service-programs/human-trafficking

Conclusion

Florida continues to be a national leader in its response to the issue of commercial sexual exploitation of children. As a result, DCF has a representative on a national expert council, a national human trafficking workgroup, and the federal Department of Health and Human Services’ Administration for Children and Families’ (ACF) Southeast Region (IV) Human Trafficking Workgroup. In 2018, Florida’s efforts to address the commercial exploitation of youth were featured in a national webinar series entitled “Stop the Injustice.” This series was developed by Shared Hope International, a nationally recognized non-governmental organization that addresses research, law, policy and practice on human trafficking issues. DCF’s Human Trafficking Unit Staff regularly provides technical assistance to other states, including advising on the initiation of ACF’s new Human Trafficking Workgroup in Region VI. While we have made progress in building a more comprehensive system of care for victims of CSEC, child welfare professionals continue to see a need for the independent evaluation of placements and programs to fully understand and identify the best intervention options for the children served.
June 22, 2018

R. Philip Twogood, Coordinator
Office of Program and Policy Analysis & Government Accountability
111 West Madison Street
Room 312, Claude Pepper Building
Tallahassee, FL 32399-1475

Dear Coordinator Twogood:

This letter is in response to the preliminary findings issued by the Office of Program and Policy Analysis & Government Accountability (OPPAGA) to the Department of Children and Families (DCF) on June 8 related to human trafficking. DCF remains absolutely committed to preventing, identifying, and providing effective services to victims of commercial sexual exploitation (CSE) in Florida. We appreciate the acknowledgement of the progress that has been made in Florida and the complexity of the nature of the work related to human trafficking.

During OPPAGA’s review period, DCF continued its efforts to address human trafficking and serve victims of human trafficking. Additional details related to the findings in the report are provided below.

Finding 1: There was a smaller increase in total CSE children in 2017; population characteristics were similar to prior victims.

Response: DCF continues to conduct extensive training to teach frontline staff, first responders, and members of the public how to recognize and report potential human trafficking. The Human Trafficking Screening Tool (HTST) has been in effect for more than two years. These efforts are likely to continue to contribute to increased identification of CSE victims.

Training, including adaptations based on new research and emerging trends, will continue to be a priority as we strive to identify and serve human trafficking victims in Florida. This will include a new training for hotline staff to ensure staff understand the indicators to listen for in potential trafficking cases, different types of human trafficking, and how to properly identify and code investigations with the understanding that the perpetrator can be someone other than the child’s caregiver.

1317 Winewood Boulevard, Tallahassee, Florida 32399-0700

Mission: Work in Partnership with Local Communities to Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency
Response to the Office of Program and Policy Analysis & Government Accountability
(OPPAGA).
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Finding 2: CSE service model is slowly adapting to ensure services for community children.

Response: On April 1, 2018, DCF began the process of following up on all verified CSE cases within six months of the close of the investigation to determine service engagement. It is anticipated that these follow-ups will facilitate a better understanding of community youth’s access to and attainment of services.

Florida has spent the last several years focused on establishing a comprehensive system of care equipped to meet the many individualized needs of CSE victims, including both community and dependent youth. Over the course of the past year, DCF has strengthened the multi-disciplinary team (MDT) staffing process to ensure that each youth has their individualized needs for therapeutic services, placement, victim advocacy, medical, and all other needs addressed to the fullest extent possible. DCF has also helped train many key partners, including service providers and personnel in the behavioral health field, to equip them with the knowledge and tools to identify and serve this population.

It is a DCF priority to identify existing resources that can be leveraged in the development of a comprehensive system of care and identify promising practices for producing the best outcomes. The Services and Resources Committee, under the Statewide Council on Human Trafficking, has met with multiple providers to develop an understanding of what types of services are most effective for this population. Key goals are to create a strong continuum of care for all victims of human trafficking and ensure accountability of state funds.

Finding 3: Limited progress made in advancing CSE safe house/safe foster home model.

Response: DCF continues to prioritize the needs of the child on an individual basis, including a specific tool to assess the level of placement needed. Ensuring a wide array of services is available, including specialized placements, allows the system to address a child’s individualized needs and determine the effectiveness of services. Community-based care lead agencies oversee recruitment of new providers and are actively implementing recruitment plans.

DCF strives to facilitate regular communication between specialized residential providers. With multiple new providers now serving this population, DCF has scheduled the first of many in-person meetings between all of these providers (including prospective providers) to discuss lessons learned, strengths and challenges, promising practices, and other applicable topics. During the reporting period, DCF provided technical support to multiple providers, including Bridging Freedom and the new safe house in the Northwest Region, conducted site visits, answered all questions and
provided additional support as needed. All prospective safe house providers are given contact information for existing providers and encouraged by DCF’s human trafficking staff to reach out to these providers, as early in the process as possible, for in-depth information on serving this population, along with a site visit and mentorship opportunities. DCF’s Statewide Human Trafficking Prevention Director serves as a central point of contact for all existing and prospective specialized CSE providers.

Finding 4: Serving CSE children is also hindered by victim resistance, complex needs, and challenging behaviors.

Response: CSE children often experience complex trauma and the journey to healing often requires years of support. Upon initial identification, there may be a great deal of resistance to services and the victim may not self-identify as a victim or survivor. We understand that progress in social outcomes, school outcomes, therapeutic healing, and the ability to recognize victimization and leave the exploitative situation may take years as a result of this high level of trauma. It continues to be a DCF priority, in partnership with other agencies represented on the Statewide Council on Human Trafficking, to ensure that we understand the services that produce the best outcomes for this population and continuously identify existing resources that can be leveraged in creating a comprehensive system of care to meet complex, long-term needs.

Finding 5: Review of local agency service data provides insight into services and costs.

Response: DCF appreciates OPPAGA’s analysis of the cost associated with serving this population.

Finding 6: CSE children identified beginning in 2013 have not done well on social outcomes.

Response: When assessing social outcomes over a short time period, it is important to note the extreme level of trauma that most CSE victims have experienced. Many survivors explain that their healing journey often continues decades later.

While reviewing the progress on social outcomes of this population, the report notes that “dependent CSE children were more likely to be re-victimized than children living in the community” with 28 percent of dependent children in their outcome population experiencing re-victimization compared to 17 percent of community children within that population. Although it may appear that dependent children are more likely to be re-victimized, a contributing factor may be that their new victimization experience is more likely to be reported because of the active oversight of child welfare personnel. There is not sufficient information to conclude that dependent youth are actually more likely to be re-victimized.
Response to the Office of Program and Policy Analysis & Government Accountability (OPPAGA).
June 22, 2018
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Update 1: DCF implemented new requirements to coordinate services and streamline processes statewide.

Response: DCF appreciates OPPAGA’s overview of the efforts made during the reporting period to implement new requirements in section 409.1754, F.S., effective October 2017. As outlined in the report, DCF human trafficking staff updated policy, developed a new MDT staffing form to include information required for the six-month follow-up, and updated a reporting tool to collect all information needed for the annual report to the Legislature. Staff provided training to MDT staffing leadership on the new policies and forms and continue to provide oversight and technical support on this process. DCF will also continue to work to standardize these processes in an effort to enhance our ability to understand and meet the service needs of CSE victims across the state.

Update 2: DCF and DJJ have not validated the Human Trafficking Screening Tool or assessed triggering criteria.

Response: As noted in the report, DCF has partnered with the Florida Institute for Child Welfare (FICW) to assess the triggering criteria for the HTST and explore options for validating this tool. The survey was the second project completed, in conjunction with the FICW, to evaluate triggering criteria. This assessment was another step in our efforts to understand the effectiveness of the tool in identifying CSE victimization. DCF looks forward to a continued partnership with FICW to evaluate effectiveness and ensure integrity in implementation.

In closing, Florida continues to receive national recognition as a leader in the fight against human trafficking, recognized in particular for strong legislation and the child welfare system’s efforts to serve this population. While we have made great strides as a state, DCF remains committed to encouraging evaluation of existing service types, identifying promising practices, assisting in the development of new placements and community-based services, and enhancing all efforts to identify and serve CSE children in Florida.

If you have any questions, please contact Traci Leavine, Director of Child Welfare Practice, at traci.leavine@myffamilies.com or 850-717-4760.

Sincerely,

[Signature]
Mike Carroll
Secretary
NOTICE OF FILING

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Abstract: A legislatively mandated report must be submitted to the Governor and Legislature each year, providing details about the Department’s provision of services to child victims of commercial sexual exploitation.

The 2017-2018 report addresses requirements in Section 39.524, F.S. as follows:

(3)(a) By October 1 of each year, the department, with information from community-based care agencies and certain sheriff's offices acting under s. 39.3065, shall report to the Legislature on the prevalence of child commercial sexual exploitation; the specialized services provided and placement of such children; the local service capacity assessed pursuant to s. 409.1754; the placement of children in safe houses and safe foster homes during the year, including the criteria used to determine the placement of children; the number of children who were evaluated for placement; the number of children who were placed based upon the evaluation; the number of children who were not placed; and the department's response to the findings and recommendations made by the Office of Program Policy Analysis and Government Accountability in its annual study on commercial sexual exploitation of children, as required by s. 409.16791.

(b) The department shall maintain data specifying the number of children who were verified as victims of commercial sexual exploitation, who were referred to nonresidential services in the community, who were placed in a safe house or safe foster home, and who were referred to a safe house or safe foster home for whom placement was unavailable, and shall identify the counties in which such placement was unavailable. The department shall include this data in its report under this subsection so that the Legislature may consider this information in developing the General Appropriations Act.

Copies of this report may be obtained by contacting Traci Leavine at Traci.Leavine@myflfamilies.com or 850.717.4760. Lawful recipients will not be charged for copies. Charges for copies requested by others will conform to requirements of Department of Children and Families CFOP 15-9, Requests for Public Records.

CF 1610, Oct 96
**LEGISLATIVELY MANDATED REPORT – STATUTORY REQUIREMENT**

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| A legislatively mandated report must be submitted to the Governor and Legislature each year, providing details about the Department’s provision of services to child victims of commercial sexual exploitation. | s. 39.524(3), F.S.    | By October 1, the Department shall submit a report to the Governor, the President of the Senate, and the Speaker of the House of Representatives that addresses requirements in Section 39.524, F.S. as follows:  

(3)(a) By October 1 of each year, the department, with information from community-based care agencies and certain sheriff’s offices acting under s. 39.3065, shall report to the Legislature on the prevalence of child commercial sexual exploitation; the specialized services provided and placement of such children; the local service capacity assessed pursuant to s. 409.1754; the placement of children in safe houses and safe foster homes during the year, including the criteria used to determine the placement of children; the number of children who were evaluated for placement; the number of children who were placed based upon the evaluation; the number of children who were not placed; and the department’s response to the findings and recommendations made by the Office of Program Policy Analysis and Government Accountability in its annual study on commercial sexual exploitation of children, as required by s. 409.16791.  

(b) The department shall maintain data specifying the number of children who were verified as victims of commercial sexual exploitation, who were referred to nonresidential services in the community, who were placed in a safe house or safe foster home, and who were referred to a safe house or safe foster home for whom placement was unavailable, and shall identify the counties in which such placement was unavailable. The department shall include this data in its report under this subsection so that the Legislature may consider this information in developing the General Appropriations Act. |