Florida Department of Children and Families
Annual Human Trafficking Report
State Fiscal Year 2018-2019

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 2019

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 child commercial sexual exploitation (CSE)-number of children verified as victims of CSE.
- 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 Florida Department of Children and Families (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, 2018 and June 30, 2019 (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 an FFY perspective.
The Department 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: Caregiver, Other, or Institutional. This distinction separates reports based on whether the alleged perpetrator is a parent, legal guardian, 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**

In SFY 2018-19, the total number of reports, initial and additional, received by the Florida Abuse Hotline (Hotline) alleging one of the human trafficking maltreatments was 2,198 reports. The chart below visually outlines the number of reports from SFY 2013-14 through SFY 2018-19. As shown in the chart, there was a significant increase in reports each year from SFY 2013-14 through 2016-17, and then the numbers of reports alleging human trafficking started to level off.

![Florida Abuse Hotline Reports Alleging Human Trafficking per State Fiscal Year](image)

There are several factors that likely contribute to these trends. When human trafficking was added to the abuse maltreatment index, staff, stakeholder, and community training efforts were initiated to
ensure that people could identify potential incidents of human trafficking and knew to report it to the Hotline as a form of child abuse. Human trafficking is a unique child abuse maltreatment in that cases are accepted on all perpetrator types, not exclusively caregivers; therefore, these training efforts were particularly vital in clarifying the Department’s role in investigating these allegations. Training initiatives were likely the largest contributing factor to increased reports in the first few years. The initiation of targeted identification efforts and the Human Trafficking Screening Tool within the Department of Juvenile Justice (DJJ - 2015) and the Department (2016) may have also played a role in increased identification of potential victims and reports to the Hotline alleging human trafficking. While training, awareness, and targeted screening efforts continue, it was expected that these numbers would start to flatten out.

For SFY 2018-19, approximately 14.5 percent of the reports received were male victims, which is consistent with the volume of reports received during prior years. Approximately 92.5 percent were coded as Human Trafficking-CSEC, while just over seven percent were coded as Human Trafficking-Labor. Of the 2,198 reports, 523 (23.8 percent) were closed as verified, but it should be noted that 193 (1.0 percent) of the cases were not yet closed with findings at the time of the data pull in July 2019.

The Department also identifies the number of reports received per county and region. In looking at county level data, Broward (250), Miami-Dade (197), and Orange (155) received the most reports followed by Duval (145) and Hillsborough (125). The below chart shows the number of reports received by region. As illustrated below, the highest number of reports for the human trafficking maltreatment came from the Suncoast Region (551). In previous years the Central Region had the most reports.

However, when calculating rate using the human trafficking data divided by the average estimated child population per region for SFY 2018-19, the picture changes drastically. Looking at the human trafficking
Intake rate per 100 children in the population, Northwest region had the highest rate of reports, followed by Northeast and Suncoast, which had similar rates based on child population. Southern Region had the smallest number of human trafficking reports and the lowest rate of reports based on population.

Available Safe Houses and Safe Foster Homes

During SFY 2018-19, the number of available safe houses and safe house beds increased. As of July 1, 2018, there were six safe houses with a total of 54 beds. As of the close of the state fiscal year, there were seven safe houses with a total of 59 beds. All the beds were gender-specific to females, except for the five beds within the male-specific home. There is one new safe house in development that is expected to open in 2019. This will be 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 always be filled because decisions to place an individual child are based on the existing make-up of residents and the individual’s specific needs. The complexity of the residents’ needs may limit the number of youths a safe home accepts at any given time. Often, there is a desire to not introduce too many new youths 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 that 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 can 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. Providing substance abuse treatment often becomes the priority when this need is presented in a Multidisciplinary Team (MDT) staffing to allow the youth to reach a more stable place prior to initiating services to address their victimization. A safe house placement 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 are two examples of substance abuse treatment providers that have also been trained to serve CSE youth.

As of July 1, 2019, there are 12 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 and Broward Counties 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 16 safe foster home beds available located in both Central and Northeast regions. 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 can serve male, female, or transgender children.

**Other Specialized Services (Non-Residential)**

Devereux and CHANCE also provide community-based wrap-around services to CSE 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 CSE youth and can be utilized for youth that have a stable and supportive living environment, youth that do not want to go to a safe house, or any youth that does not need the level of care of a safe foster home, safe house, or residential treatment center. Oftentimes, these services will include therapy, specialized case management or advocacy, and other services to meet the individualized needs of that youth. Redefining Refuge, the Nancy J Cotterman Center, and the Open Doors Outreach Network are other examples of service providers that offer community-based services to CSE youth. Redefining Refuge and the Nancy J Cotterman Center cover Hillsborough and Broward Counties, respectively, while the Open Doors Outreach Network operates in 32 counties throughout the state.
In addition, there are three drop-in centers serving minors in Florida. 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. Images of Glory, located in Central Region, offers victim services, pantry/supplies, and referrals.

Vital to the continuum of care are providers that have specialized staff within their programs that can work with CSE youth 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, but staff that are trained and able to serve pregnant and parenting CSE 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 CSE 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 CSE 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 the Department and local community task forces.

All specialized placements, currently, exist in the Central, Suncoast, Southeast, Southern, and Northeast Regions. All 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. The Department’s Human Trafficking Unit Staff meet with all specialized CSEC residential providers on a quarterly basis to address issues pertaining to these providers and provide technical support.

As we continue to expand and develop the continuum of care for CSE youth, the Department 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 sixth progress report dated July 16, 2018, USF identifies several areas of significant improvement in youth needs from intake to discharge. Specifically, the report notes, “significant improvements in the areas of leadership, family functioning, school behavior, oppositional behavior, adjustment to trauma, runaway behaviors, and intentional misbehavior.” The report also provided helpful youth and foster parent perspective through qualitative interviews.

In their first program evaluation report from January 29, 2019, Devereux’s DELTA program showed similar progress among youth at intake and discharge. All this information may be helpful in informing practice throughout the state.

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

![Diagram of placement continuum]

*The above graphic illustrates the full continuum of care for child victims of commercial sexual exploitation. Youth can 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 (JACs) statewide beginning February 27, 2015. DCF initiated statewide implementation of the tool on January 13, 2016. As of August 1, 2019, 16,477 tools had been administered by DJJ staff to a total of 8,769 youth, 54.2 percent
of tools were administered to girls and 45.8 percent to boys. Of these screenings, 7,807 resulted in a call to the Hotline, with 3,875 calls accepted for investigation (an acceptance rate of 49.6 percent). According to DJJ, which tracks the results as part of its efforts to validate the tool, if possible, the acceptance rate for calls for girls was 54.7 percent and 39.3 percent 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 an 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 CSE youth 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 Department, 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 for the child; the staffings can be guided by the Department’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 Chapter 2017-23, 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 CSE victims. This section is sent to the Department’s Regional Human Trafficking Coordinators, who complete the six-month follow-up.

In the reported evaluation information from the CBCs for July 1, 2018 through June 30, 2019, it was noted that a total of 516 youth was evaluated for placement in a safe house or safe foster home. Of these 516 youth 64, or 12.4 percent, 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 20 youth placed.

Of the 516 youth evaluated for a safe home placement, 365 were not placed in a safe house or safe foster home for a variety of reasons. 68 of those assessed 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

2 Email from Office of Research and Data at the Department of Juvenile Justice dated 8/10/2019.
justice facility. There were 112 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 395 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. The CBCs have cited the following reasons safe homes were not available:

- Lack of capacity (no vacant beds);
- Program refusal due to the child’s recruitment behavior, substance abuse issues, mental health issues, and history of running away;
- Youth who were unwilling to engage in services; and
- 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 built 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 individualized 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 funds was appropriated from the General Revenue funds to serve the needs of youth who were victims of sexual exploitation and has 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 each subsequent SFY, the $3,000,000 in recurring funds have been provided to the CBCs for costs associated with placement and services for this population.
Expenditures reported by the CBCs in FSFN indicate they spent a total of $4,249,196 on CSEC services and placements for 221 youth during SFY 2018-19. As in past years, there may be additional expenditures for services to this population that were not recorded in FSFN. ChildNet Inc. had the highest reported expenditures for CSEC services at $608,141, which exceeded their allocation of $198,979 by $838,464. Of the payments reported in FSFN for CSEC services, the average cost of care for an individual client was $19,227.13. 

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 4 youth.

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 CSEC. As a result, the Department has a representative on a national expert council, a national human trafficking workgroup, and the 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. In 2019, the Department was highlighted in a TIME Magazine article regarding commercial sexual exploitation of youth in the United States. The Department’s Human Trafficking Unit Staff regularly provides technical assistance to other states. Florida’s child welfare data has been requested for multiple national research projects regarding human trafficking. While progress has been made in building a more comprehensive system of care for CSE youth, 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.
APPENDIX A: Department Response to the 2018 OPPAGA Report
June 28, 2019

R. Philip Twogood, Coordinator
OPPAGA
111 West Madison Street, Room 312
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 13 related to the commercial sexual exploitation of children. 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 CSE.

During OPPAGA’s review period, DCF continued its efforts to address the commercial sexual exploitation of children through identification and service provision. Additional details related to the findings in the report are provided below.

**Section 1: Prevalence**

*Number of verified CSE victims continued to rise in 2018; population characteristics similar to victims identified in prior reports.*

**Response:** DCF, in partnership with other state agencies, task forces and community stakeholders, continues to conduct extensive training to teach frontline staff, first responders, and members of the public how to recognize and report potential human trafficking. These training efforts, along with targeted screening and identification efforts within fields such as juvenile justice, health and law enforcement, likely 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. During the review period, DCF offered additional training to department hotline staff to ensure appropriate identification and coding of suspected human trafficking cases as well as a statewide Human Trafficking Train-the-Trainer session that was open to every DCF Region, Sheriff’s Office CPI Unit, and CBC.

**Section 2: Placements and Services**

*CSE service model is slowly evolving to ensure placements and services for dependent and community children, but challenges remain.*

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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: 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. As noted in the report, these follow-ups revealed some challenges to service provision, including youth not being ready to engage in services, and limitations in CSE-specific service availability in some areas. The department will continue to monitor these six-month follow-ups to determine any frequent barriers to service provision and ways to overcome those barriers.

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 review period, DCF held quarterly meetings with specialized CSE residential providers to talk through successes and concerns, share information on potential funding streams, and discuss provider-requested topics. In an effort to expand and strengthen services, DCF has also continued to hold informational meetings with prospective safe house providers, facilitated community stakeholder meetings with community-based service providers, and helped train many key partners, including services providers, to equip them 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. A key end goal is to create a strong continuum of care for all victims of human trafficking and ensure accountability of state funds being provided for serving this population.

Section 3: Outcomes
Many children with verified CSE have DCF and/or DJJ involvement in the years following verification; K-12 school attendance rates are low.

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. Any therapeutic treatments must address all the types of trauma that a youth has experienced in addition to their CSE. Many survivors explain that their healing journey often continues decades later. 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 an ability to recognize victimization and leave the exploitative situation may take years because 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.

More program evaluations are needed to determine best practices in serving this population. However, Progress Reports completed by the University of South Florida on the Citrus Helping Adolescents Negatively Impacted by Commercial Exploitation (CHANCE) Program have shown some promising improvements for youth served. In CHANCE Evaluation Progress Report 8, it was noted that “significant improvements were observed in the areas of leadership, family functioning, school behavior, oppositional behavior, adjustment to trauma, runaway behaviors, and intentional misbehavior.”

DCF continues to prioritize the needs of the child on an individual basis, including a specific tool to assess the level of placement needed, to address their most critical needs and enhance long-
term outcomes. Further studies like the CHANCE Evaluation will provide the necessary information to create an evidence-based continuum of care that can address the specific needs of CSE youth.

Section 4: Review of re-victimized children’s case files
Re-victimized CSE children face significant challenges.

Response: The department appreciates OPPAGA’s analysis on youth who experience multiple or continued instances of CSE victimization. The report notably highlights the high level of adverse childhood experiences and resulting trauma and behavioral health issues that create an increased vulnerability to continued exploitation. The report also highlights that revictimization also often leads to additional poor outcomes such as extensive juvenile justice involvement, chronic runaway behavior, and the likelihood that the youth may engage in risky behaviors such as survival sex to have basic needs met. All these factors compound the needs of these youth, but also make it particularly difficult to engage this subpopulation of CSE victims in long-term services to address their needs. Revictimization is a factor that is addressed through the multidisciplinary team-staffing process as it pertains to safety concerns and service recommendations. The department strives to understand the risk factors for each youth in order to determine the most appropriate plan to meet their individualized needs.

Recommendation 1: We recommend that DCF and DJJ expand the provision of CSE-specific services for victims residing in DJJ facilities.

Response: The department has partnered with the Department of Juvenile Justice (DJJ) for over five years on CSE initiatives to enhance both agencies’ efforts to identify and serve commercially sexually-exploited children. For CSE youth that are involved in the juvenile justice system, DJJ personnel are a key part of the multidisciplinary team staffing process to determine appropriate services for a youth and ensure that all those working with the youth are addressing those needs as a CSE victim. The department will continue to work closely at the state level with the Human Trafficking Director at DJJ to explore service provision options for youth in residential facilities throughout Florida as well as at the local level to coordinate services for individual youth. DCF looks forward to a continued partnership with DJJ as the two agencies collaborate to ensure effective service provision to all CSE children regardless of their current placement.

Recommendation 2: We recommend that DCF create a repository of information for new CSE providers.

Response: The department strives to come alongside prospective CSE providers as early in the exploratory process as possible. The department has met with many prospective safe house and community-based service providers during the earliest brainstorming phases to provide important information on serving this population and being a safe house provider. This often includes certification language for safe houses, connection to licensing specialists, contact information for other providers that we encourage them to connect with, information we know about the population, and potential things they will need to consider such as funding and zoning. For providers that are further along in the process, the Human Trafficking Unit Staff try to connect with them as soon as we are made aware that they are offering, or interested in offering, services to CSE youth. Historically, DCF’s Human Trafficking Unit Staff in partnership with licensing staff, and other CSE providers have served as the repository of information on
serving the population. However, DCF is committed to ensuring that both DCF Regional staff and prospective providers are easily able to locate and access the necessary information to knowledgably move forward in the process of developing a CSE program. DCF will explore options for increasing accessibility of key information for prospective providers. The Human Trafficking Unit will also continue to serve as a resource and support to anyone serving or interested in serving this population and continue to connect with prospective providers throughout the program development process.

In closing, Florida continues to receive national recognition as a leader in the fight against human trafficking, recognized 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 and reviewing evaluation of existing service types, identifying promising practices and assisting our current CSEC-specific service providers. We are also committed to 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,

Chad Poppell  
Secretary