

# Evaluation of California's Commercial Sexual Exploitation of Children (CSEC) program



PACT Convening, April 2023

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# Agenda

1. History of SB 855
2. Description of SB 855 evaluation
3. Initial findings from process study
4. Initial findings from outcome study
5. Survivor involvement in research and evaluation
6. Discussion

# CDSS – SB 855 HISTORY

# Description of SB 855 Evaluation

# Process Evaluation: Whether the Intervention Is Operating as Planned

- Process evaluation:
  - Monitor intervention activities
  - Understand how the context affects service delivery
  - Identify practice barriers and facilitators
  - Help explain why outcomes are or are not being produced

# Research questions

1. What are the **components** of SB 855 in terms of: Services; Staffing; Organizational Structure?
2. Are counties implementing SB 855 as **expected**?
3. To what extent did agencies within counties **collaborate** to implement SB 855?
4. Do counties have the **capacity** to meet the needs of CSEC?
5. What were the **barriers** and **facilitators** to implementing SB 855?
6. How did the implementation of SB 855 **vary** across counties?
7. What have been common **challenges** in implementing SB 855?
8. What are **best practices** for implementing local CSEC response programs?
9. Did the pandemic **disrupt** or **facilitate** CSEC services or protocols? And if so, how?

# Process evaluation

- Three cascading primary data sources:

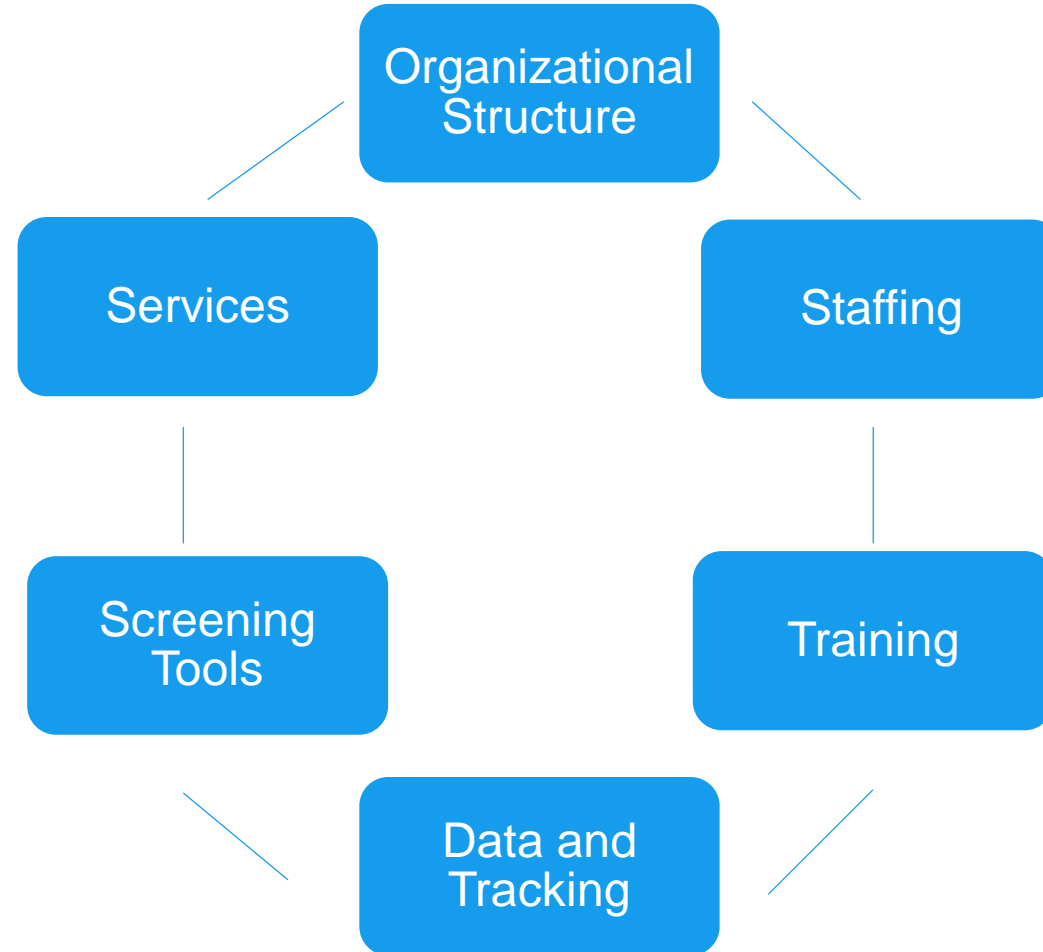
1. **County plans**

2. **Staff survey**

3. **Site visits**

# SB 855 Program Components

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# Environmental Scan – County Plan Analysis

- We first conducted a document review, **analyzing the county plans** and other documentation submitted to CDSS for counties to participate in SB 855.
- The over **200 county plans** from **SFY15-16 to SFY19-20** helped us understand how counties collaborated and implemented SB 855
  - Over **time**
  - **Variance** from county to county
  - **Barriers and facilitators** to implementation



# Staff survey

- Built upon the knowledge gained from the county plan analysis.
- **Online survey** designed to broadly capture the **process/quality/capacity changes and cross-system collaboration** that took place during SB 855 implementation across **all participating counties**.
- Target responders: **CSEC program coordinators**
- Survey response rate: **98%** (46 out of 47 counties)

# Site visits

- Built upon the knowledge gained from the county plan analysis and staff survey.
- Chose **12 counties** to reflect a **variety of geography, population, and implementation factors and context**.
- In each site, held **informant interviews** with **key staff** involved in SB 855 implementation.
- In many sites, also held **focus groups** with individuals who could speak more directly about CSEC experience (e.g., **adults with lived experience**).

# Collaboration Components

Cross- System Collaboration (CSC) Framework	
Collective Impact	Coordinated Community Response
Common Agenda	Involvement of all essential systems
Shared Measurement	Mechanism for assigning clients to services
Mutually reinforcing activities	Functioning feedback mechanism
Continuous Communication	Mechanism for ongoing and future planning
Backbone support	Paid project manager/ coordinator

**To what extent did agencies within counties collaborate to implement SB 855?**

# Agencies included in interagency protocols\*

Agency	N respondents	Included	Required by SB 855
Juvenile probation	37	100%	Yes
Mental health	37	97%	Yes
Public health	37	84%	Yes
Juvenile courts	35	83%	Yes
Law enforcement	36	92%	No
Other	32	91%	No

\*This table reflects agencies that were required in the interagency protocol by SB 855. The statute was amended to mandate the Sheriff’s Department and County Office of Education to be included in interagency protocols in 2017 via AB 1227.

# MDT participation rates by agency

Agency	N respondents	Mean MDT participation*
Juvenile probation	37	77%
Mental health	37	74%
Survivors/advocates	32	71%
Law enforcement	33	51%
Public health	33	50%
Substance abuse	29	36%
Juvenile courts	29	24%

\*How often does someone from each agency participate in the CSEC MDT process? Slider from 0 (none) to 100 (all)

# Quality of collaboration

Question	N respondents	Agree	Neither agree nor disagree	Disagree
My agency and other collaborating agencies are aligned in our efforts to support and serve children at risk for or experiencing CSE.	44	84%	14%	2%
Agencies in my county are able to work together to support youth at risk for or experiencing CSE.	46	89%	11%	0%



**Do counties have the capacity to meet the needs of youth experiencing CSE?**

# Staffing capacity

- **Staffing shortages** identified as a challenge by many site visit counties
- On the survey, counties reported having enough staff to adequately serve youth who are at risk for or experiencing CSE *less than half of the time*
- County plans indicated that **staff turnover**:
  - reduced institutional CSE knowledge, and
  - negatively affected trust between youth experiencing CSE and the county, thereby reducing the chance of youth accepting services

# Service capacity

Question	N respondents	Mean
There are waitlists for CSE-specialized services.	34	21%
We are able to match youth who are at risk for or experiencing CSE to the best service to meet their needs, rather than refer them to the first available program slot.	43	51%
There are enough family-based placements for all children who experience or are at risk for CSE.	42	11%
There are enough CSE-specialized providers to meet the needs of all children in our county.	44	29%
We have to send youth who are at risk or experiencing CSE out-of-county to receive specialized services.	42	54%

# What were the barriers and facilitators to implementing SB 855?

# Examples of common barriers

- **Delays with day-to-day coordination:**
  - Difficulties in scheduling MDTs
  - Service accessibility
  - No DSAs to share pertinent information.

# Examples of common barriers

- **Building rapport and engaging youth in services:**
  - Youth often leave placement without permission (AWOL) either before or during service provision
  - Staff often do not have enough time to build rapport with youth and get them connected to services

# Examples of common barriers

- **Tension between different agencies' philosophies or mandates that impacts collaboration:**
  - Disagreement among staff on the merits of a harm reduction approach

# Examples of common barriers

- **Cross-county collaboration:**
  - Cross-county MOUs often do not exist
  - Agencies are unable to receive all pertinent information about youth



# Examples of facilitators

- **Steering committees** and **stakeholder meetings** help counties to understand the range of services available to youth experiencing CSE and how to best coordinate them.

# Examples of facilitators

- **MDTs** are very effective at quickly coordinating service provision, but only when they are regularly attended by county agencies and partners.

# Examples of facilitators

- **MOUs and CSEC protocols** set counties up for success regarding service integration, as they specifically lay out agency and partner roles and coordination activities.

# Examples of facilitators

- Many counties said that **universal screening** (especially CSE-IT) helps quickly identify youth who are being exploited or at risk and begin the process of CSEC service provision.

# How did the implementation of SB 855 vary across counties?

# Region / urbanicity

- Counties in Southern California and the Bay Area were more likely to report **having all required agencies involved in their interagency protocol** compared to counties in Northern California and the Central Valley.
- **CSEC Coordinators** were less common in rural areas.
- Rural counties were less likely to **employ CSEC-specific staff**.
- Rural counties reported having **fewer available services**, and **fewer specialized services**.

**What have been common challenges in implementing SB 855?**

# Examples of common challenges

- **Staff turnover / shortages**
- **Placement availability**
- No mechanism to serve youth experiencing / at risk for CSE who are **not under the jurisdiction of child welfare**
- Need **updated training** that looks at current CSE trends (e.g., cyber recruitment)
- Enthusiasm for the CSEC program was high at the beginning but has waned over time – **need for re-evaluating goals and future directions**



**What are some best practices for implementing local CSEC response programs?**

# Examples of best practices

- Having a **unit/workers specifically designated to respond to CSE**, but not *exclusively* responding to CSE
- **24/7 dual response from child welfare and CSE advocate** (voluntary non-profit) when going out for investigations
- **Specialized CSE-specific staff** (e.g., CSEC mental health clinician, missing persons liaison)
- Weighting CSE cases more heavily when **calculating caseloads** with the acknowledgment that they are more intensive

# Outcome Study: Child Welfare Metrics

# What is a performance measure?

A quantifiable indicator used to assess how well an organization or program is achieving its desired objectives.

Also Called...

- Key Performance Indicators (KPIs)
- Metrics
- Goals



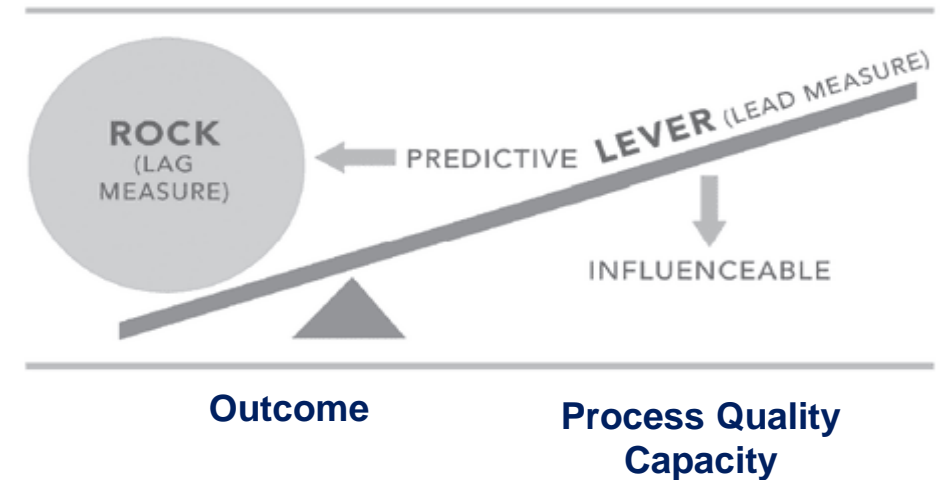
# Selecting Measures that Move the Needle

## LAG measures tell you if you achieve the goal:

- Measures the goal
- Tells you what already happened

## LEAD measures tell you if you are likely to achieve the goal:

- Predictive – measures something that leads to the goal
- Influenceable
- Find actions with more leverage



# Selecting Measures that Move the Needle

LEAD measures tell you if you are likely to achieve the goal

LAG measures tell you if you achieve the goal



# SMART Measures

- ✓ **Specific**
- ✓ **Measurable**
- ✓ **Attainable**
- ✓ **Relevant**
- ✓ **Time-bound**

NUMBER OF GOALS (in addition to the whirlwind)	2-3	4-10	11-20
	↓	↓	↓
GOALS ACHIEVED WITH EXCELLENCE	2-3	1-2	0

# Attainable Goals

How many goals can staff be expected to achieve while keeping up with their daily work?

Which are *most* important?

What kinds of support will staff need to succeed?

## Before setting attainable goals, we'll need to establish baselines...

A **baseline** is a point of reference (either a historical or current level of performance) against

What do we want to know?	How will we look at it?
CSE Reporting and Assessment	CSE Reports - Investigated Referrals - Substantiations
CSE Reporting and Assessment	CSEC Risk and Victimization entered on Client pages
Case Factors	Already in a case – Time to case opening – Diversion - Dual status
Placement	Already in placement – entries/reentries – episode length by setting
Service Receipt	Services available vs. Services referred vs. Services received
System Exit	Case closure type? Transition to AB12? Reentry as Nonminor Dependent?





# CPS Reports of CSE

Client Services - Referral [L, Mother] - [Allegation [L, Susie (15)]]

File Edit Search Action Associated Attach/Detach Window Help Tools

ID Conclusion

**Conclusion**

**Current Conclusion**

**People Involved**

Alleged Victim: L, Susie

Abuse Category: General Neglect

Alleged Perpetrator:

Conclusion Date: 04/12/2016

Allegation Conclusion: Substantiated

Abuse Information

+ Abuse Subcategory

**Select Abuse Information**

Abuse SubCategory

- Fail/Unable to Protect from CSE
- Failure to Provide Adequate, Safe Shelter
- Failure to Provide Clothing
- Failure to Provide Food
- Failure to Provide General Medical Care
- Lack of Supervision
- Prenatal Exposure to Drugs/Alcohol

OK

Cancel

Help

Allegation

No

Client Services - Referral [L, Mother] - [Allegation [L, Susie (15)]]

File Edit Search Action Associated Attach/Detach Window

ID Conclusion

**Conclusion**

**Current Conclusion**

**People Involved**

Alleged Victim: L, Susie

Abuse Category: Exploitation

Alleged Perpetrator:

Conclusion Date: 04/12/2016

Allegation Conclusion: Substantiated



- Between Fiscal Years (FY) 2015 and 2021, a total of **71,865** reports were made to the child protection system due to concerns of CSE.



- About **two-thirds** (62.4%) of CSE reports were screened in for investigation.



- Approximately **one in seven** CSE reports (13.7%) were substantiated.



- However, we know that some youth are identified in multiple CSE reports...



## CPS Reports of CSE

The **71,865** CSE reports made between FY 2015-2021 identified a total of **39,819 children**.

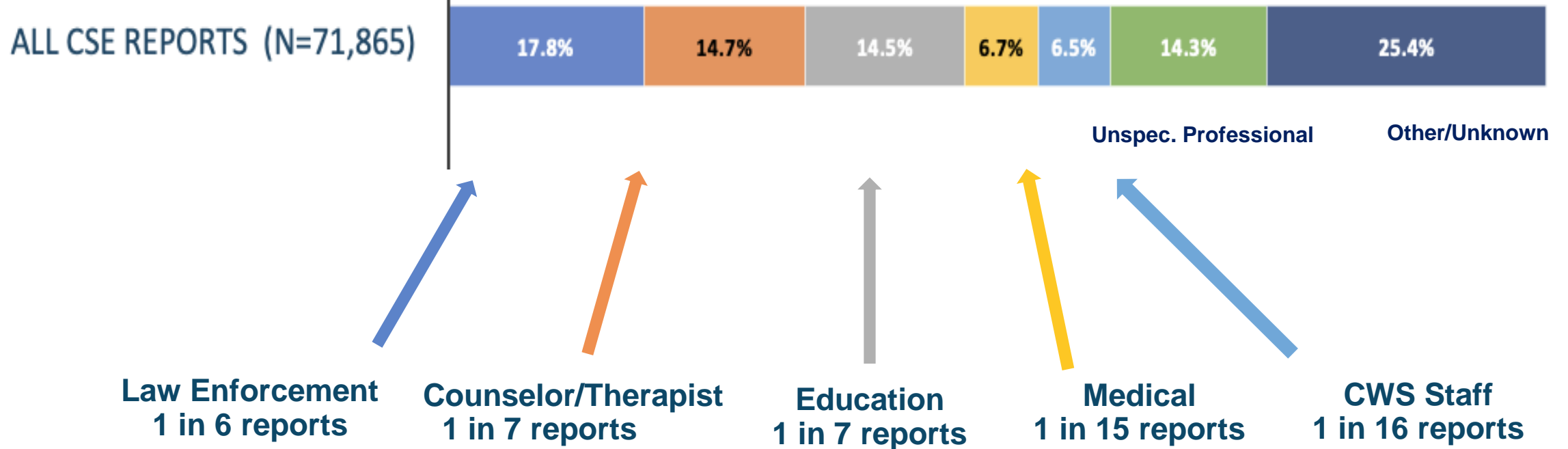
Within this population:

- **13.7%** (N = 5,457) of these children had their initial CSE reports substantiated.
- **23.2%** had a second CSE report screened-in for investigation within a year of the initial CSE report.
- **16.4 %** (N = 6,626) of referred children had a CSE report substantiated within a year of the initial CSE report.



# CPS Reports of CSE

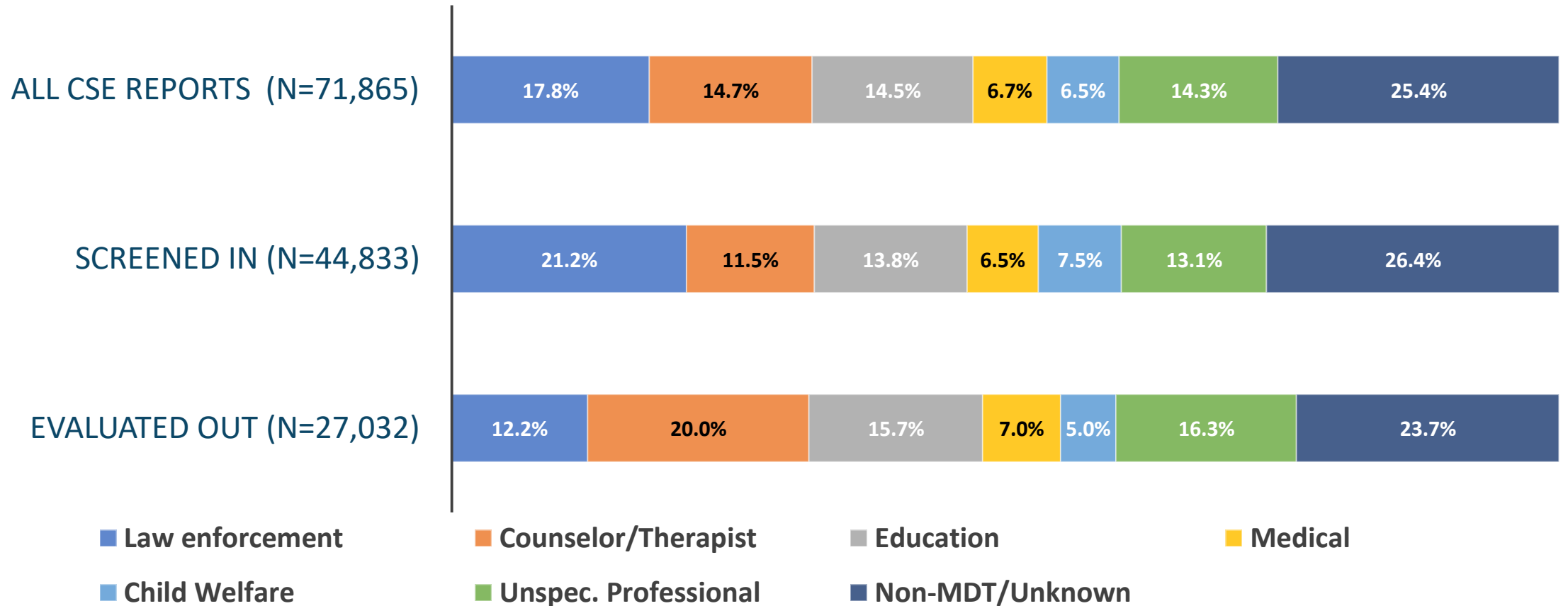
Reporter type by multidisciplinary team (MDT) participants





# CPS Reports of CSE

## Reporter Type by CPS Response (FY 2015-21)



# Client Notebook CSE Data

**CSEC Data**

CSEC Type	Start Date	End Date
1		

CSEC Type: <None> Start Date: End Date:

## Instructions for entering the CSEC Special Project Codes

**Client Services - [Case [E, Benjamin]]**

File Edit Search Action Assogated Attach/Detach Window Help Toolz

ID Svc Comp Assignment Trans Req ICPC-100A ICPC-100B Doc Tracking Spec Proj

**Special Project**

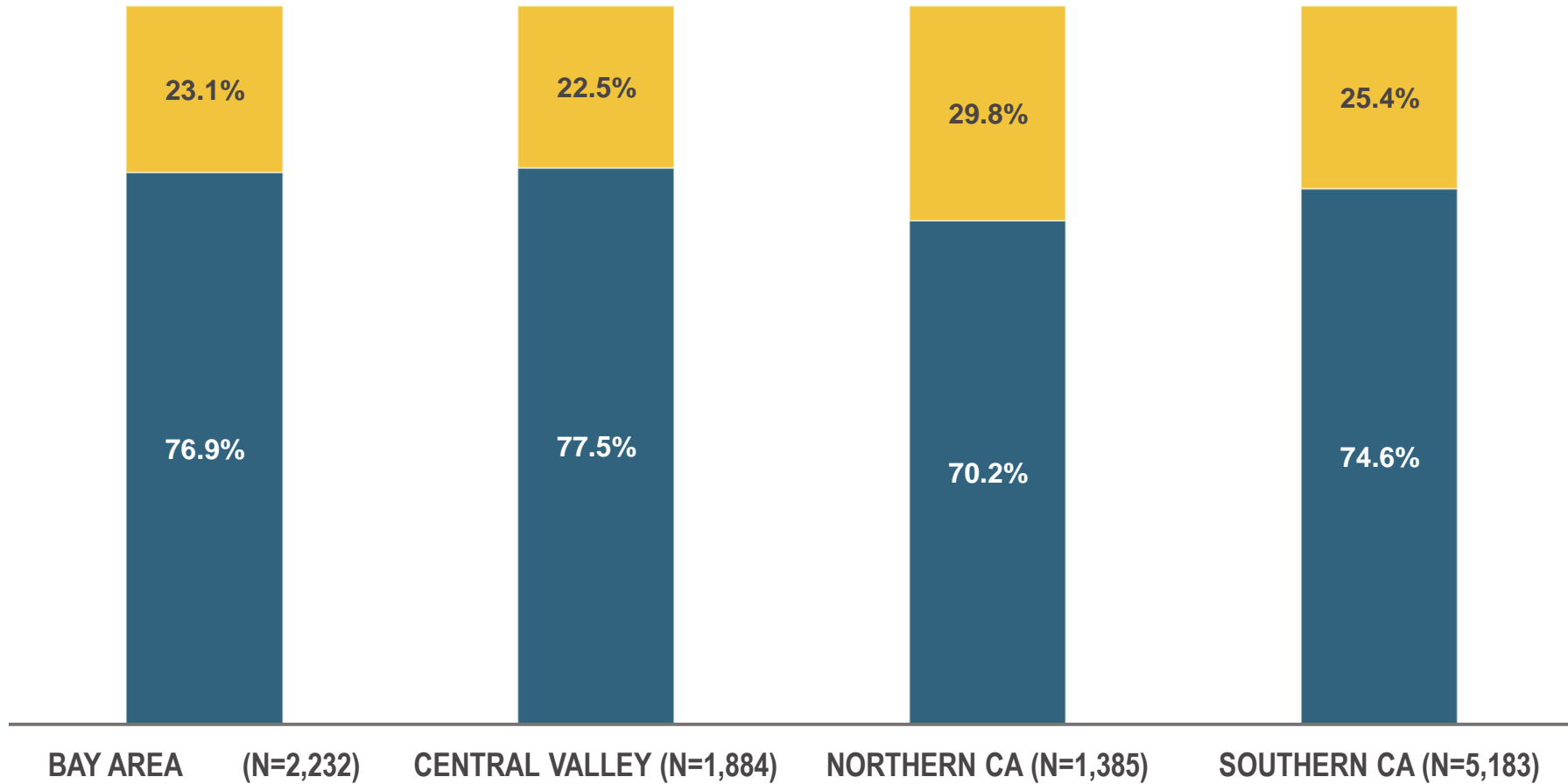
Special Project Name	Start Date	End Date	County



## Client Notebook CSE Data

- **10,684 youth** had concerns of CSE documented on their client notebook (risk or victimization)
- **1 in 4** had documented experiences of CSE victimization
- Across opted-in counties, the percentage of children with CSE concerns who had a “Victim” entry ranged from **5% to 70%**

# CSEC Grid: Victimization versus Risk



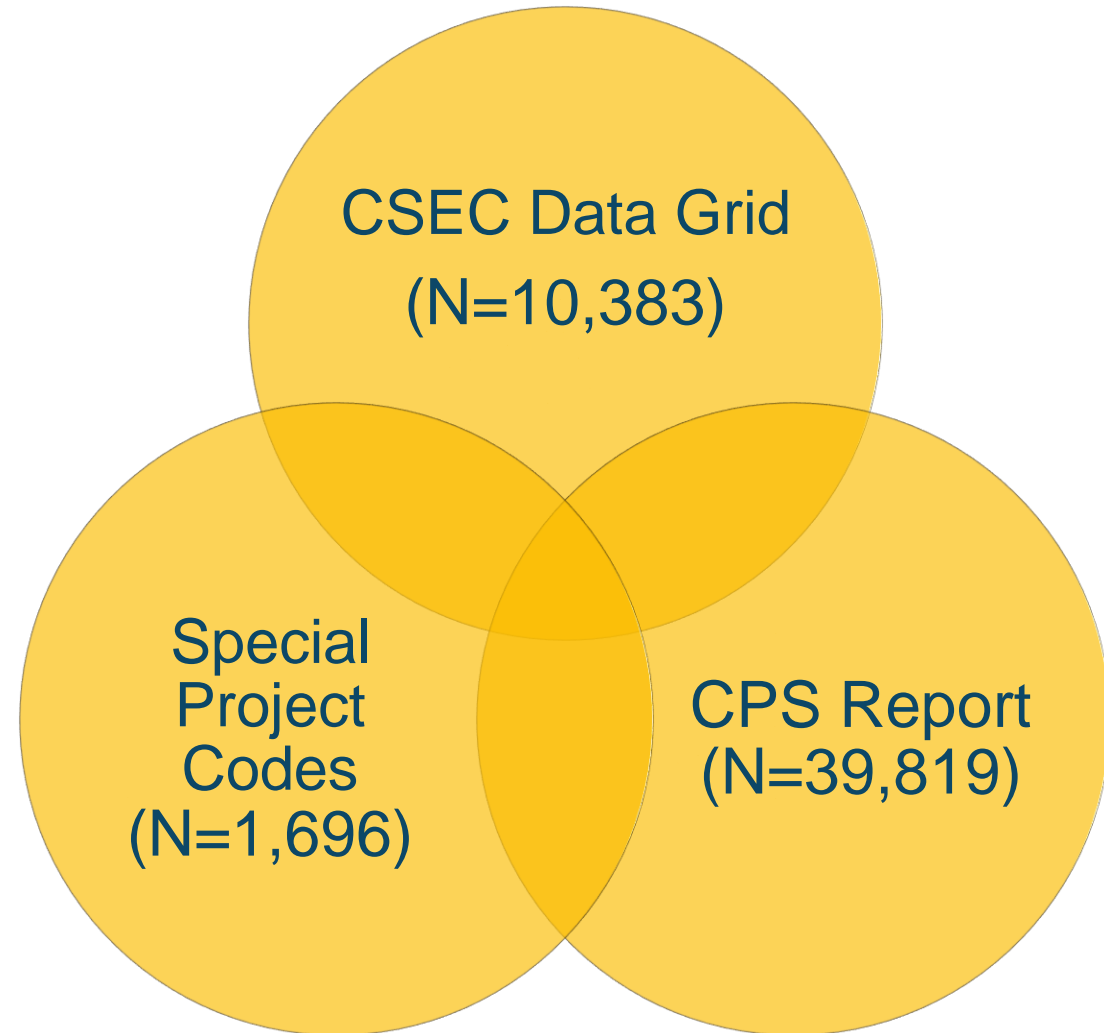
■ Children with Risk    ■ Children with Victimization



Between Fiscal Years 2015 and 2021, a total of **47,745** minors had CSE concerns identified by or reported to the CWS.

After excluding children that only had evaluated out CSE reports, **40,389** minors had CSE concerns identified by or reported to the CWS.

- **24.5%** (N=9,366) had CSE victimization documented.





## Case & Placement Status

- Of the 40,389 children with CPS reports, CSEC grid entries and special project codes indicating concerns of CSE:
  - **About one-third (N=13,266)** had a CWS case open during or following CSE identification
    - **14.2%** (N=5,750) had a case already open at CSE Identification
    - **12.0%** (N=4,848) were in an open placement episode
    - **15.5%** (N=6,273) had a placement opened after CSE was identified



## Takeaways

- About 4,000 fewer CSE reports were made during FY 2019-2021 as compared to FY 2015-2018
- The percentage of CSE reports substantiated remained about the same (13-14%)
- Considerable differences in counties' data collection practices emerged, particularly with regard to the use of the "at-risk" field on Client notebooks.
- A minority of youth were in care when CSE concerns were first documented.



## Next steps

- Placement experiences during/after CSE concerns
- Placement exits
- Case closures
- Extended foster care entry

# **Survivor Involvement in Research and Evaluation**

## **Why should evaluators of CSE-relevant programs engage individuals and communities with relevant lived experiences in the research process?**

- ✓ **Provide first hand experience**
- ✓ **Facilitate deeper understanding of CSE- related issues**
- ✓ **Provide solid, actionable solutions**
- ✓ **Offer context and concrete examples for learning**

**Experts with lived experiences should be included in the process every step of the way in order to:**

- ✓ **Promote research activities that are trauma-informed**
- ✓ **Ensure language and content are appropriate**
- ✓ **Bridge qualitative data and quantitative data**
- ✓ **Aid in interpreting findings and identifying implications**

## How should contributors with lived experiences be identified and compensated?

- ✓ **Compensation should be equivalent to consultants with commonly recognized expertise (PhDs, etc.)**
- ✓ **Compensation should be monetary unless survivor favors an alternative**
- ✓ **Full transparency regarding workload, payment and sharing findings**



## **Successes**

- ✓ **Communication throughout the process**
- ✓ **Adaptability and flexibility**
- ✓ **Treated as equal collaborators**

## **Challenges**

- ✓ **Providing adequate time for feedback/input**
- ✓ **Ensuring that survivors feel validated, heard, and seen**

# Acknowledgements

Our work was made possible by the California Department of Social Services' Child Trafficking Response Team

This presentation represents the collaborative efforts of:



# Discussion

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