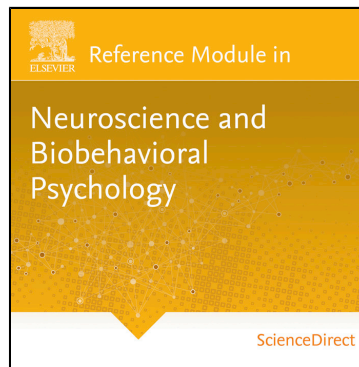


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Understanding and Preventing the Sexual Exploitation of Youth

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Introduction

Childhood sexual abuse (CSA) and commercial sexual exploitation of children (CSEC) are significant public health problems affecting millions of individuals in the United States (U.S.) and across the globe. Both forms of sexual exploitation extract a considerable toll on victims and society, and are egregious violations of children's fundamental rights to freedom from violence and exploitation. Shamefully, ours is a world where boys and girls of all ages are sexually exploited; fondled, molested, raped, and sold for an adult's personal or financial benefit. The purpose of this article is to provide an overview of all forms of sexual exploitation; commercial and non-commercial. This article will cover definitions and describe offenders, examine the scope of the problem, describe consequences, review risk factors across multiple ecological levels, and present a public health approach to primary prevention. Using an ecological framework, prevention strategies targeting many segments of society, including children, families, youth-serving organizations, society, and cyberspace, will be described.

Definitions and Offenders

Childhood sexual abuse (CSA) is a term used to describe a specific type of maltreatment experienced by minors (under the age of 18). The U.S. Department of Health and Human Services (U.S. DHHS, 2017) defines CSA as "a type of child maltreatment that refers to the involvement of the child in sexual activity to provide sexual gratification or financial benefit to the perpetrator, including contacts for sexual purposes, molestation, statutory rape, prostitution, pornography, exposure, incest, or other sexually exploitative activities." (p. 109). When perpetrated by adults, sexual abuse involves the exploitation of children's naiveté, trust, and obedience. Exploitation implies an inequality of power between adults and young individuals; minors who lack the emotional, maturational, and cognitive capacity to consent to such acts.

CSA involves a wide range of sexual interactions with children between 0 and 17 years of age. Some interactions involve physical contact between a perpetrator and victim, such as fondling of the genitals, oral sex, and anal or vaginal penetration. Non-contact sexual interactions include exposure (exhibitionism) or creating/distributing sexually abusive images. CSA can be perpetrated by someone in the child's family (referred to as incest or intra-familial abuse). Unlike child physical abuse or neglect, CSA often happens outside the home, and perpetrators can be non-family members (referred to as extra-familial abuse). Although abuse by strangers can occur (less than 10% of cases), CSA is most likely committed by known offenders; the majority of whom are males (Finkelhor et al., 2008). This male-monopoly finding holds regardless of whether the victims are male or female. When CSA victims are female, males are perpetrators in about 95% of cases, and when males are victims, the perpetrators are males in about 80%–85% of cases (Olafson, 2011). Minors are also at risk of being sexually abused by trusted adults—mostly male, but also female—serving in positions of authority in youth-serving organizations (YSOs) including schools, youth clubs, sporting leagues, or churches (Wurtele, 2012a). Minors can also be victimized while using information and communication technologies (ICTs), including the Internet and smartphones. The Internet is used by adults to create, collect, and exchange sexually abusive images of children, engage in sexual communication with minors, and in some cases, to contact youth offline for sexual purposes (Durkin and DeLong, 2012; Wurtele, 2017; Wurtele and Miller-Perrin, 2014). The Internet is also integral to the commercial sexual exploitation of children (CSEC).

CSEC was defined by the First World Congress Against Commercial Sexual Exploitation of Children held in 1996 as “sexual abuse by the adult and remuneration in cash or kind to the child or a third person or persons. The child is treated as a sexual and commercial object. The commercial sexual exploitation of children constitutes a form of coercion and violence against children, and amounts to forced labor and a contemporary form of slavery.” (p. 1). It is the commercial aspect that separates CSEC from other forms of CSA such as molestation, sexual assault, and rape (Finklea et al., 2011). The commercial aspect does not always involve money. In what is known as “survival sex” (Greene et al., 1999), sex may be exchanged for food, clothing, drugs or alcohol, transportation, or a place to stay. CSEC can take many forms, including prostitution, sexually abusive imagery (child pornography), sex trafficking, child sex tourism, and other child sexual entertainment and services (APSAC, 2013; IOM and NRC, 2013; Kotrla, 2010; Miller-Perrin and Wurtele, 2017).

Very little is known about adults who purchase sex from minors, except that they are primarily adult males. All over the world, adult men are the predominant buyers/exploiters of prostituted youth (Barnitz, 2001), but women do buy sex from [predominantly male] youth. For example, in the New York City study of prostituted youth, 40% of boys and 11% of girls surveyed said they had been purchased by a female “client” (Curtis et al., 2008). Although studies of men who buy sex from adults have been conducted (e.g., Lowman and Atchison, 2006), very few studies are available on buyers/exploiters of youth. One unique study placed advertisements for paid sex services with “sweet, hot girls” or “hot, perky girls” in *Craigslist.com*, *Backpage.com*, and other Internet sites commonly used for advertising paid sex services (Schapiro Group, 2009). When individuals (all males) responded to the advertisement, they were interviewed by operators. Results from 218 interviews showed that half of the men were between the ages of 30 and 39 (mean age was 33). Although only 6% of the men specifically requested an adolescent female, 42% of men either asked for young women or were willing to ignore all warnings that the female they were about to purchase sex from was an adolescent.

Those who work in the CSEC field commonly place buyers into two categories: “situational” and “preferential.” Situational child sex exploiters are those who purchase sex with minors because they are “available, vulnerable, and the practice is tolerated” (Shared Hope International, 2007, p. 3). Situational abusers typically have sex with other adults, but will purchase minors when the opportunity presents itself. In contrast, preferential child sex offenders prefer having sex with youth and actively seek out minors for sexual contact (usually pubescent youth). Some of these preferential buyers are pedophiles, who are primarily sexually attracted to pre-pubescent children. According to ECPAT (2008), the majority of child sex tourists are situational offenders. Far from the ‘older male pedophile’ image of the child-sex tourist who travels to foreign countries to sexually abuse very young children, the modern sex tourist exploiting children is usually a young adult male who is not a pedophile. In a study conducted in Italy, only 3% of the estimated 80,000 Italian nationals traveling abroad for sex were pedophiles, with most (90%) men being between 20 and 40 years of age (ECPAT, 2008). However, many apprehended child sex tourists are preferential offenders, and many are pedophiles. Since they often keep images of the abuse or share their sexually abusive images with other pedophiles, these buyers are often discovered by law enforcement through child pornography investigations (ECPAT, 2009).

Scope of the Problem

Incidence and prevalence studies show how widespread the problem is both in the U.S. and worldwide. The incidence of maltreatment refers to all new cases in a given time period (usually 1 year), whereas prevalence studies determine the size of the problem by asking adults if they had experienced sexual abuse as children. In the U.S., incidence data are collected annually through the voluntary participation of Child Protective Services (CPS) in all states. The most recent *Child Maltreatment* national incidence report revealed an estimated 57,000 cases of CSA in 2015 (U.S. DHHS, 2017). The U.S. also conducts National Incidence Studies (NIS) of Child Abuse and Neglect. This congressionally-mandated effort assesses the overall incidence of child maltreatment in the U.S. The NIS obtains reports directly from professionals working with children, called “sentinels,” who have contact with children and families in various social service contexts (such as schools, shelters, mental health agencies, hospitals, law enforcement agencies). Sentinels describe any children they encountered who they believed to be maltreated during the study period. In NIS-4, an estimated 180,500 children were victims of sexual abuse (Sedlak et al., 2010). NIS-4 documented a significant 47% decline in sexual abuse rates from the NIS-3 study in 1993 which found that 300,200 children were sexually abused (Finkelhor and Jones, 2012).

Note that this figure (180,500) is far greater than the number actually reported to and substantiated by CPS in 2013 (61,100). Official CPS statistics do not, however, present the true extent of CSA, as these numbers reflect cases that were reported and substantiated, and mostly cases where the perpetrators were family members or other caregivers. Many occurrences are not reported to CPS, especially when the perpetrator is a non-relative, like those serving in a position of trust in YSOs. These cases may be reported to law enforcement, or not disclosed at all. Less than 10% of CSA cases are reported to authorities (Lyon and Ahern, 2011).

Although the exact number of youth sexually abused in YSOs is unknown, indicators suggest that there is reason for great concern. For example, a large-scale investigation across England and Wales found that 52% of CSA occurring outside of the family was perpetrated in institutional settings (Gallagher, 2000). Media reports have highlighted sexual abuse of youth occurring in several competitive sports, including hockey, swimming, gymnastics, basketball, wrestling, and football (Zinser, 2011). In a sample of 370 athletes involved in organized competitive sports in Australia, Leahy et al. (2002) found that 13% of the females and 6% of the males had been sexually abused by someone affiliated with the sports program. To determine the scope of the CSA problem within the Catholic Church, the United States Conference for Catholic Bishops commissioned researchers at the John Jay College of Criminal Justice to investigate the nature and scope of child sexual abuse by priests and deacons in the U.S. from 1950 to 2002. The "Nature and Scope" study was based upon reports of priest abuse filed by officials from 97% of all dioceses and eparchies and 64% of religious communities of men in the U.S. Findings indicated that 4% of all priests, 4.3% of diocesan priests, and 2.5% of religious order priests were credibly accused of sexually abusing children between 1950 and 2002, totaling 4311 priests who abused 10,667 victims within that time period (John Jay College, 2004). Very few researchers have surveyed youth in YSOs asking whether they have been sexually victimized. The U.S. Bureau of Justice Statistics (BJS) surveyed juvenile correctional facilities and found that 10.3% of surveyed youth reported incidences of being sexually abused by staff (Beck et al., 2010). In U.S. schools, 9.6% of students reported being the targets of educator sexual misconduct at some point in their school career, with 7% reporting physical sexual contact with educators (Shakeshaft, 2004).

Prevalence studies determine the scope of the problem by asking adults if they had experienced sexual abuse during childhood. Three recent meta-analyses of CSA demonstrated that the global prevalence of CSA is alarmingly high, with about 20% of women and 8% of men reporting being sexually abused during childhood (Barth et al., 2013; Pereda et al., 2009; Stoltenborgh et al., 2011). Although estimates of CSA vary because of differing definitions (e.g., contact abuse or non-contact abuse) and different methods of data collection (e.g., interviews, surveys), it is clear that boys and girls of all nationalities, socioeconomic statuses, and ethnicities are sexually exploited.

Estimates of the number of commercially sexually exploited youth vary widely. One source claimed that worldwide, an estimated 10 million children are forced into prostitution (Willis and Levy, 2002). The International Labor Organization (ILO, 2012) estimated that 945,000 minors are victims of forced sexual exploitation worldwide, and this source suggested that the highest rates are in Africa and the Middle East, South and East Asia, and the Pacific. In the U.S., estimates have ranged from 1400 to 326,000 children (Hammer et al., 2002; Sedlak et al., 2002; Shared Hope International, 2009; U.S. DOJ, 2003). The most often-cited estimate of 326,000 was provided by Estes and Weiner (2001) based on the numbers of "at-risk" children in the U.S., including youth who had run away or were thrown away and homeless. Several U.S. anti-trafficking groups claim that at least 100,000 American children are sex trafficking victims. For example, Children of the Night (www.childrenofthenight.org), Shared Hope International (www.sharedhope.org), and the Polaris Project (www.polarisproject.org) all claim that at least 100,000 youth are used in prostitution in America each year. These alarmingly high numbers have been criticized by some who claim that estimates are exaggerated to enhance advocacy efforts. Weitzer (2012) suggests that these exaggerated numbers are often "designed to convince governments to commit greater resources to fighting prostitution, to fund rescue operations, and to enhance penalties against traffickers and clients" (p. 1348).

Others have examined the scope of the problem by investigating victim identification data. U.S. federally-funded human trafficking task forces provide some data about the extent of child sex trafficking through reports submitted to the Human Trafficking Reporting System (HTRS). These task forces track incidents of sex trafficking of both minors and adults which they have investigated and are then reported to the HTRS. Based on an analysis of reports between January 2008 through June 2010, 1016 alleged incidents of prostitution or sexual exploitation of children were identified (Banks and Kyckelhahn, 2011). According to another domestic child sex trafficking identification program, the FBI's Innocence Lost National Initiative, more than 3400 children have been rescued since the program's inception in 2003; averaging fewer than 300 minors per year (FBI, 2014). This number could be low as these cases are more likely to be handled by local law enforcement. Using data from the FBI's Uniform Crime Reporting (UCR) program, the number of minors arrested for prostitution in the U.S. in 2013 was 655 (see Table 38 of Uniform Crime Reports at www.fbi.gov). Of course, arrest data do not include prostituted youth who escaped detection, were arrested for some other offense (e.g., drug related), or those who were correctly recognized and treated as victims of crimes, not as criminal offenders. Although there is reason to question claims that there are millions or even hundreds of thousands of victims of child sex trafficking in the U.S., what is not debatable is that the purchase of youth for sexual purposes does occur and is the most "unsettling of children's rights violations" (UNICEF, 2014, p. 60).

Consequences

Sexual victimization during childhood has been associated with a number of negative short- and long-term outcomes. Research has documented the link between CSA and deleterious outcomes in a wide range of domains, including emotional, behavioral,

interpersonal, and physical health during childhood and across the lifespan (see reviews by [Berliner, 2011](#); [Fergusson et al., 2013](#); [Hillberg et al., 2011](#); [Hornor, 2010](#); [Irish et al., 2010](#); [Maniglio, 2012, 2013](#); [Noll et al., 2003](#); [Paolucci et al., 2001](#); [Pérez-Fuentes et al., 2013](#); [Roberts et al., 2004](#); [Tyler, 2002](#)). For youth, these consequences can include emotional disorders (e.g., depression, anxiety, posttraumatic stress disorder [PTSD]), cognitive disturbances (e.g., poor concentration, dissociation), academic problems (e.g., truancy, suspension, dropping out), physical problems (e.g., sexually transmitted diseases, teenage pregnancy), acting-out behaviors (e.g., risky sexual behaviors, self-harm, running away, substance use), and interpersonal difficulties. Numerous studies have documented long-term negative effects of CSA. Adult survivors of CSA are at increased risk for experiencing sexual dysfunctions, substance addictions, trust and intimacy problems, suicidal ideations and behaviors, PTSD, and sexual re-victimization ([Fergusson et al., 2013](#); [Gobin and Freyd, 2014](#); [Trickett et al., 2011b](#)). CSA is a leading contributor to several public health problems including depression, human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), alcohol use disorders, obesity, violence, and self-inflicted injuries ([Letourneau et al., 2014](#)).

Encouragingly, there is a sizable portion of child victims (up to one-half) who do not show negative outcomes or who return to pre-abuse functioning relatively quickly ([Kendall-Tackett et al., 1993](#)). In addition, effects of sexual victimization show considerable variability. A number of abuse-related characteristics have been associated with negative outcomes, including pre-abuse risk factors (e.g., prior trauma, family problems), younger age of onset of abuse, longer duration and repeated episodes of abuse, coercion (including use of force, threats, or psychological manipulation), trust violation (which may be related to the child's relationship to the perpetrator, particularly a parent or step-parent), intrusive sexual acts (penetration), and unsupportive responses when a child discloses ([Zajac et al., 2015](#)). Although no gender differences in psychopathology have been found ([Tolin and Foa, 2006](#)), effects do differ according to the nature of the abuse, age of onset, frequency and duration of abuse, number of and relationship to perpetrators, and whether threats or force were used. For example, [Fergusson et al. \(1996\)](#) found in a prospective study that children who experienced exposure or fondling were 4.8 times more likely to develop depression, whereas victims who experienced penetration were 8.1 times more likely to develop major depressive disorder and 11.8 times more likely to attempt suicide compared with non-victims. When survivors were followed up at age 30, similar results were found, as CSA victims who experienced sexual penetration had significantly higher rates of mental health problems (depression, anxiety, suicidal ideation, suicide attempts, alcohol and illicit drug dependence) compared to victims of non-contact or non-penetrative contact CSA ([Fergusson et al., 2013](#)).

Victims of commercial forms of sexual exploitation suffer from a number of physical and mental health problems. Physical health problems can include injuries (e.g., fractures, bruises, burns, or broken teeth), malnutrition, sexually transmitted infections and diseases (STIs), pelvic inflammatory disease, pregnancy, and sequelae of unsafe abortions ([Greenbaum and Crawford-Jakubiak, 2015](#); [Hornor, 2015](#)). Sexually exploited adolescents are vulnerable to the same STIs as adults, including human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), herpes, gonorrhea, and syphilis. In addition, commercially sexually exploited youth are at *greater* risk of STIs and HIV infection than adult sex workers, and carry an increased risk over and above that associated with homelessness or runaway status and a history of CSA ([Silverman, 2011](#); [Varma et al., 2015](#)). Over half (53%) of the U.S. adolescent CSE victims presenting for medical care had a history of STI compared to less than 8% of the age-matched sample of adolescents who had experienced CSA in [Varma et al. \(2015\)](#). Children are more vulnerable because their body tissues are easily damaged, especially the thin tissues around a boy's anus and rectum and a girl's vagina ([Barnitz, 2001](#)). Youth are also at greater risk of HIV infection because they are more likely to experience greater levels of physical and sexual violence (which increases the risk of tissue trauma and thus, infection), plus they have less power to demand the use of condoms by "clients" ([APSAC, 2013](#)). Many children trapped in the sex trade are also drug users, another risk factor for HIV infection. A serious long-term health implication of untreated STIs in prostituted girls is pelvic inflammatory disease, which can result in infertility, ectopic pregnancy, chronic pelvic pain, and an increased risk of cervical cancer and hysterectomies.

The mental health consequences for victims of juvenile prostitution can be quite severe including complex trauma, defined as "a type of trauma that occurs repeatedly and cumulatively, usually over a period of time and within specific relationships and contexts" ([Courtois, 2004](#), p. 412). Commercially sexually exploited victims can experience psychological difficulties such as depression, suicidality, PTSD, hostility, anxiety, and alcoholism and drug addiction ([Choi et al., 2009](#); [Hossain et al., 2010](#); [Yakushko, 2009](#)). In her review of the psychological impact of sex trafficking on children, [Rafferty \(2008\)](#) concluded that such experiences increase children's risks for a number of problems including educational deprivation, physical health problems, emotional problems (e.g., depression, hopelessness, guilt, shame, anxiety, and loss of self-esteem), and problematic behaviors (e.g., poor attachment and relating to others, antisocial behaviors, and alcohol and drug use).

Considerable evidence exists to suggest that substance use and abuse is common among CSE victims. The majority of commercially sexually exploited youth have high levels of alcohol and drug use ([Brawn and Roe-Sepowitz, 2008](#); [Countryman-Roswurm and Bolin, 2014](#); [Cusick and Hickman, 2005](#); [Flowers, 1998](#); [Kidd and Liborio, 2011](#); [Nadon et al., 1998](#); [Pedersen and Hegna, 2003](#); [Reid, 2012](#); [Varma et al., 2015](#)). Other studies have found high rates of cocaine, methamphetamine, marijuana, heroin, and prescription pain killer use ([Curtis et al., 2008](#); [Walls and Bell, 2011](#)). Among street youth living in Canada, nearly 60% of the adolescents reported consuming multiple types of drugs ([Roy et al., 2007](#)). What is unclear, however, is the causal direction of these associations. Substance abuse could be a consequence of the abusive and exploitive experiences of victims (as a way to self-medicate or dissociate from degrading experiences). Alternatively, prior substance use could lead to risky behaviors including exchanging sex to purchase drugs and maintain their drug habit. There is some evidence of this latter pattern (e.g., [Horn and Woods, 2013](#); [Warf et al., 2013](#)).

Characteristics of Victims

While there is no common profile of a child victim of sexual abuse, there may be characteristics or risk factors that make certain youth more vulnerable to sexual exploitation. Several risk factors have been identified that are believed to increase children's vulnerability to CSA and CSEC. These factors extend across multiple ecological levels including individual characteristics, family and community factors, as well as sociocultural and economic influences. Although these factors are organized into separate ecological levels, it is likely that each risk factor interacts within and across levels to increase risk of exploitation (IOM and NRC, 2013). With regard to sexual exploitation of youth, no single risk factor has been identified. Instead, a complex interplay of multiple risk factors in combination with the absence of protective factors can increase a young person's vulnerability to abuse and negative impact (Whittle et al., 2013). As is true of other types of child victimization (e.g., physical abuse), most research focuses on risk, not protective factors (Sullivan, 2013). This relative emphasis on risk factors is concerning, since many risks are non-modifiable (like a child's age or gender) or may be extremely difficult to modify with intervention. Table 1 presents risk factors for youth sexual exploitation (CSA and CSEC) across ecological levels. Identifying risk factors is essential for informing prevention efforts—the topic of the final section.

Child Risk Factors

Gender and Ethnicity

Among the demographic characteristics that put a child at risk for CSA, gender plays a very important role, with females being at higher risk for CSA than males. Female children are two to three times more likely to fall victim to CSA (Goodyear-Brown et al., 2012; Putnam, 2003). Girls are also more at risk than boys for online sexual solicitation and victimization (Wurtele, 2017; Wurtele and Miller-Perrin, 2014). An analysis of seized child abusive images within one United Kingdom (UK) law enforcement database found a 4:1 ratio of female-to-male images (Quayle and Jones, 2011). Likewise, victims of CSE are overwhelmingly female (Clawson et al., 2009; Estes and Weiner, 2005; ILO, 2012; Kotrla and Wommack, 2011) (See ECPAT-USA's, 2013 discussion paper about the lack of recognition of the commercial sexual exploitation of boys in the U.S.).

Gender ratios for contact abuse do, however, vary by location/settings, sample, and country. Within homes, more girls are sexually abused by family members compared to boys, whereas boys are more likely to be sexually victimized outside the family home, by non-family members (Averdijk et al., 2012; Romano and De Luca, 2001; Sullivan et al., 2011). Among homeless, sheltered, or runaway U.S. youth, studies have found an equal number of boys and girls being commercially exploited (Choi, 2015; Curtis et al., 2008; Reid, 2012; Tyler, 2009). In settings where the male/female ratio is similar, like schools, girls are slightly more likely than boys to report sexual victimization (7.6% of females and 6.2% of males from grades eight to 11 reported educator sexual misconduct in Shakeshaft, 2004). In a UK survey of sexual harm occurring in sport, young men were more likely to report being sexually harmed than young women (5% compared to 2%) (Alexander et al., 2011). In Afghanistan and coastal Sri Lanka, boys are more likely than girls to be subjected to prostitution (U.S. Department of State, 2013).

Findings regarding ethnicity are mixed, with some studies suggesting that the rates of CSA do not differ significantly by race (e.g., Saunders et al., 1999), in contrast to reports made to Child Protective Services (CPS), where African-American children have two times higher reported rates of CSA than White children, and Asian-American children have the lowest CSA rates (Sedlak et al., 2010). However, Asian cultural factors such as taboos about discussing sexuality and importance of virginity may hinder reporting of sexual abuse (Kenny and McEachern, 2000). In an analysis of the National Survey of Family Growth, African-American (16%) and Hispanic (14%) girls were more likely than White girls (8%) to report a "statutory rape" (i.e., sexual intercourse among young teens that occurred with someone three or more years older) (Child Trends, 2013). A self-report survey of over 80,000 students in Minnesota found differences in rates of sexual abuse across races, with Native-American, Hispanic-American and African-American girls reporting the highest rates of sexual abuse (Ackard and Neumark-Sztainer, 2003). In contrast, victims of child pornography tend to be White (Quayle and Jones, 2011).

Ethnic minority group status has been more strongly linked to CSEC. Several studies found high rates of African-American girls as victims of prostitution/sex trafficking (Amber, 2010; Clarke et al., 2012; Kaestle, 2012; Kramer and Berg, 2003; Reid and Piquero, 2014). In a U.S. national study of prostituted youth, although the majority (59%) were White, 36% were African-American, which is considerably higher than the national rate of 14.5% of African-American youth ages 10–19 (Mitchell et al., 2010). Among a sample of predominantly female CSE victims in New York, most (67%) were African American (Gragg et al., 2007). In the Oakland (CA) area, WestCoast (2012) reported that 58% of the prostituted girls were African American, with less than 5% White or Asian. Public health providers in the Boston (MA) area served mostly African American and Hispanic CSE victims (Macias-Konstantopoulos et al., 2015). In another study of homeless youth and young adults, African-Americans were 2.2 times more likely to engage in survival sex than Whites (Walls and Bell, 2011). Other research has suggested that Native American and Alaska Native children are disproportionately represented among CSE victims and are at increased risk due to their vulnerable and disenfranchised status (Pierce, 2012).

Studies examining arrests of prostituted adolescents also show that African-American girls, especially those living in disadvantaged neighborhoods, are at higher risk for arrest compared to females of other races involved in the same activity (Flowers, 2001). Girls of color are disproportionately represented in both the criminal justice system and the commercial sex industry. As articulated by Lloyd (2011), race and class make a difference in how "victims" are viewed. When a domestically trafficked girl "has a lower-class background, a history with foster care or a single-parent home, and is a girl of color, especially black, you've hit a trifecta of sexuality,

Table 1 Risk factors for youth sexual exploitation

<i>Child sexual abuse</i>	<i>Commercial sexual exploitation</i>
Child risk factors	
Demographic factors (female, all ages [risk increases with age], lowest among Asian-Americans)	Demographic factors (female, young adolescent, ethnic minority status)
Victim of child maltreatment (physical, neglect, sexual)	Victim of child maltreatment (physical, emotional, sexual abuse)
Mental/Physical/Intellectual disabilities	Mental/Physical/Intellectual disabilities
Few close friends, socially isolated	Mental/Physical/Intellectual difficulties
Low self-esteem, lacks confidence	Gang membership
Passive, trusting, needy, obedient	Substance use/abuse
Lacks knowledge about appropriate and inappropriate sexual behavior	Run away, thrown away, homeless status
Sexual minority status (LGBTQ)	Sexual minority status (LGBTQ)
Lacks knowledge/understanding about sexual development	Risky sexual behaviors (e.g., pornography, early sexual initiation)
High need for attention/affection	Teenage parent
Early-maturing females	Academic and social problems, dropping out of school, lack of school engagement
Early attachment failures (insecure)	History of being system-involved (juvenile justice; foster care)
Family risk factors	
Parent dysfunction (psychopathology, criminal history, drug/alcohol abuse)	Parental dysfunction (criminal history, psychopathology, drug/alcohol abuse)
Single-parent home; presence of step-father or boyfriend (for females)	Absence of parent/caregiver (death, divorce)
Lack of supervision or parental monitoring both offline and online	Chaotic, ineffective, neglectful parenting
Family characterized by secretiveness, poor communication, discord, violence	History of involvement with Child Protective Services or Foster Care
Lack of parent-child communication regarding sexuality	Family involvement in prostitution/pornography
Absent and emotionally detached parenting	Sexualized home (pornography; prostitution in home)
Sexualized home (pornography, nudity); lack of privacy; household crowding	Family conflict, violence and child maltreatment
Socially or geographically isolated	Poverty and unemployment
Parent history of sexual abuse	Children perceived as property, objects, or commodities
Children required to give/receive physical affection from relatives	
Parent-child role reversal; inappropriately close or distant parent-child relationships	
Multiple caregivers; substitute caregivers not carefully chosen/screened	
Low educational level of parents	
Community/Societal risk factors	
Adults fail to recognize CSA as a public health problem	Presence of gangs, high crime (especially organized crime and sexual violence)
Youth are viewed as possessions and commodities, and youth are not valued or are negatively viewed	Presence of transient adult male population
Portrayal of children as sexual beings in media and advertising	Law enforcement corruption
Reluctance of legal system to prosecute and punish offenders	Adult prostitution prevalent and condoned
Lack of CSA education in the curriculum in medical, educational, and mental health fields.	Lack of awareness of child sex trafficking/exploitation
Strong masculine sexualization (females viewed as inferior, under-represented in positions of power and influence)	Perception of children as sex objects or commodities
News media focuses on sensational cases of child abduction, rape, and murder	Lack of resources to combat trafficking/sexual exploitation
Media portrays offenders as “monsters” or “predators”	Glorification of pimp culture
Erotic portrayal of children in media and advertising (sexualization of children)	Sexualization of children
Few Internet-based interventions for parents and youth	Gender discrimination/inequity
Community lacks treatment programs for offenders, victims, and families	Political/social upheaval
High levels of sexual violence	Poverty and unemployment

class, and race that will ensure that she is seen as a criminal." (p. 142). In contrast, no racial differences were found among homeless young women engaging in survival sex in Hollywood (CA) (Warf et al., 2013). Others claim that most prostituted juveniles in North America are White non-Hispanics, given the increased demand and willingness of buyers to pay more for sex with white or light-skinned females (Cooper et al., 2007; Flowers, 2001; Reid and Piquero, 2014). That was true of the sample of CSE victims in Cole et al. (2014), where 40% were White and 23% were Black. It is likely that all races are at risk, but ethnic vulnerability may be due to fewer educational and employment opportunities, and to low socioeconomic status of racial minority youths' families (Walls and Bell, 2011). Racial/ethnic differences could also be related to such social experiences as being placed into foster care (more common among African-American youth; Hickler and Auerswald, 2009), or even biological experiences like early pubertal development (more common among African-American and Hispanic girls; Wu et al., 2002).

Children who are members of groups with uncertain legal status are also at risk of entering the sex trade. These groups include refugees and immigrants. Being isolated, having language barriers, undocumented status, and lack of formal education make international minors at high risk (Barnitz, 2001).

Age

Children of all ages, from infants to adolescents, are at risk of being sexually exploited. However, risk of sexual exploitation tends to increase as children age. Adolescent females tend to be at highest risk for sexual abuse and commercial exploitation (Black et al., 2001; Finkelhor et al., 2005; Wurtele, 2012a; Sullivan et al., 2011). Indeed, several studies of CSA and CSEC report mean and modal ages of 14 or 15 (e.g., Bebbington et al., 2011; Davies and Jones, 2013; Kotrla and Wommack, 2011; Rafferty, 2013; UNICEF, 2014). Ages of CSA victims also vary by the gender of the perpetrator. Peter (2009) reported that CSA victims were younger for female perpetrators (average age = 5.84 years) compared to male perpetrators (average age 8.58 years). In fact, 92% of female-perpetrated sexual abuse victims were under the age of 9 years, compared to 57% for male-perpetrated abuse. In addition, the relationship between the child and perpetrator varies across ages, reflecting the increased dependency on caregivers among younger children. Thus, among preschool-aged children, the majority of sexual victimization involves caregivers or adult acquaintances of the family, whereas victimization by strangers and peers is rare. Among school-aged children, caregivers still account for a good portion of perpetrators (e.g., 41% in Averdijk et al., 2012), but now older siblings and cousins, peers, and adults (relatives and family acquaintances) are more likely perpetrators. Adolescent victims (older than 12) are most likely to be sexually victimized by their peers, but also other non-relative adults, whereas the proportion of victimization by caregivers declines (e.g., 20% in Averdijk et al., 2012). Young adolescents are also at higher risk for online victimization and CSEC. Because of more frequent Internet usage, sexual curiosity, urge for sensation seeking and risk-taking behavior, adolescents are more likely to become targets of Internet-related sexual abuse than children (Soo and Bodanovskaya, 2011; Wurtele, 2017; Wurtele and Miller-Perrin, 2014).

Putnam (2003) suggests that age as a risk factor operates differently for girls and boys, with girls being at heightened risk starting earlier and lasting longer than for boys. Risk is especially heightened for early-maturing girls; girls who have developed secondary sexual characteristics (e.g., breast development) at a young age. For girls, strong associations have been found between early pubertal development, risky sexual behaviors, and CSA (e.g., Baams et al., 2015; Foster et al., 2008; Mendle et al., 2011; Trickett et al., 2011a; Wise et al., 2009; Zabin et al., 2005). The exact pathway for these experiences is less clear, although support for a CSA-early puberty-risky sexual behavior pathway is appearing (Ryan et al., 2015). Research is needed to determine whether early pubertal development of young adolescents also increases their vulnerability to CSE/trading sex, particularly among sexually abused girls who reach puberty earlier.

Childhood Maltreatment

Studies and reporting systems typically rely on single-report maltreatment classifications, even though many children who experience CSA also experience other types of maltreatment. For example, after examining the characteristics of cases reported for sexual abuse in Los Angeles, Negriff et al. (2014) found the majority of these children also experienced physical abuse, emotional abuse, neglect, and caregiver incapacity, yet these co-occurring types of maltreatment were overlooked. Youth with prior or co-occurring history of maltreatment are extremely likely to be sexually victimized (Clarke et al., 2012; Boney-McCoy and Finkelhor, 1995; Fleming et al., 1997; Martin et al., 2011; Noll et al., 2013; Pérez-Fuentes et al., 2013; Reese-Weber and Smith, 2011; Roe-Sepowitz, 2012; Swanston et al., 2002; Whittle et al., 2013; Wildsmith et al., 2013). For example, CSA survivors in Australia were almost twice as likely to have experienced physical abuse compared to non-CSA respondents (Fleming et al., 1997). In this study, physical abuse was the strongest predictor for CSA that began both before and after the age of 12, and for intra-familial and extra-familial CSA. The authors suggest that a high level of violence and conflict in the home isolates children and perpetuates secrecy and shame, leading to further social isolation. In turn, social and emotional isolation make children more vulnerable to sexual abuse.

Experiencing any type of violence is far too common among today's youth. Eighty percent of American children (Finkelhor et al., 2009a; Turner et al., 2010) and 76% of Canadian children (Cyr et al., 2013) report being victimized. Many are "poly-victims" (Finkelhor, 2008)—children who experience several different forms of victimizations, including physical assault, sexual assault, physical abuse, or witnessing violence. In a U.S. sample of two- to 17-year-old children, 7% had seven or more different kinds of victimizations over the course of a year (Finkelhor et al., 2007b). Cyr et al. (2013) found that 9% of their sample of Canadian youth reported seven or more types of lifetime victimizations. Poly-victimization is associated with more severe symptoms and

putting youth at risk for multiple problems later in life (Felitti et al., 1998; Finkelhor et al., 2009a; Vranceanu et al., 2007). Of concern to this topic, sexual victimization is commonly found among poly-victims, leading Finkelhor et al. (2009b) to suggest that it may signal heightened risk for victimization vulnerability. Similarly, sexual victimization has been called a “gateway” victimization that may increase the risk for exposure to other forms of victimization (Finkelhor et al., 2007a, p. 162). Being involved in bullying is also associated with heightened risk of CSA. Holt et al. (2007) found that 32% of bully-victims (children who are both perpetrators and victims of bullying) reported being sexually victimized within the last year, compared with 12% of victims, 11% of bullies, and 3% of non-bullied youth. Offenders can take advantage of abused children’s social and emotional vulnerabilities.

Experiencing childhood maltreatment, especially sexual abuse, is exceedingly common among victims of CSE/prostitution. Many youth run away to escape their negative and abusive home environments. All (100%) of the 68 young runaway girls involved in the Runaway Intervention Program in Canada reported a history of sexual abuse (Saewyc and Edinburg, 2010). More than 75% of the CSE victims in the WestCoast (2012) study described having experienced child abuse or neglect. Roe-Sepowitz (2012) found that a high number of women who entered prostitution as juveniles said they had experienced emotional abuse during childhood. Childhood emotional abuse produced a significant unique contribution to juvenile entry into prostitution, even after controlling for childhood sexual and physical abuse. More CSE victims presenting for medical care experienced physical abuse by their caregivers compared to CSA victims (44% vs. 6%; Varma et al., 2015).

Surveys of adult sex workers find that the percentages of women reporting a history of CSA range from 33% to 100% (Bagley and Young, 1987; Cecchet and Thoburn, 2014; Clarke et al., 2012; Orchard et al., 2014; Roe-Sepowitz, 2012; Silbert and Pines, 1982). These studies are limited, however, by their retrospective nature. In a rare prospective study, Wilson and Widom (2011) found that victims of childhood maltreatment (i.e., neglect, physical abuse, sexual abuse) were more than twice as likely as non-victims to report involvement in prostitution as adolescents or adults. Early sexual initiation (before age 15) emerged as the strongest link between child maltreatment and later prostitution. Studies of clinical (e.g., youth arrested for prostitution) and non-clinical community samples of CSE/prostituted youth (both boys and girls) also find strong links between childhood histories of physical abuse and sexual abuse and later involvement in selling and trading sex (Abramovich, 2005; Bagley and Young, 1987; Cobbina and Oselin, 2011; Cole et al., 2014; Curtis et al., 2008; Greene et al., 1999; Kennedy et al., 2012; Lalor and McElvaney, 2010; Lavoie et al., 2010; Macias-Konstantopoulos et al., 2015; McClanahan et al., 1999; Nadon et al., 1998; Reid, 2011; Saewyc and Edinburg, 2010; Seng, 1989; Senn et al., 2008; Stoltz et al., 2007; Twill et al., 2010; Tyler et al., 2001; Varma et al., 2015; WestCoast, 2012). For example, Tyler et al. (2001) used path analysis to investigate the impact of childhood sexual abuse on later sexual victimization among 372 homeless and runaway youth in Seattle. High rates of CSA were reported, with females experiencing much greater rates compared to their male counterparts. Early sexual abuse in the home increased the likelihood of later sexual victimization on the streets indirectly by increasing the amount of time at risk, affiliating with deviant peers, and engaging in survival sex. Likewise, Williamson and Prior (2009) found that 30% of trafficked children reported sexual abuse by someone in their family and 14% disclosed sexual abuse by both someone within and outside of their family. Lavoie et al. (2010) found that among a large sample of Canadian high school students, childhood sexual abuse significantly predicted trading sex.

A history of abuse—emotional, physical, or sexual—also increases the risk for online sexual victimization. In one study, children who had a history of physical or sexual abuse were 8.6 times more likely to experience aggressive sexual solicitations online (Mitchell et al., 2007). Another study found that adolescents who had been maltreated (i.e., experienced physical abuse, sexual abuse, or neglect) were more likely to receive online sexual solicitations, and also to arrange offline meetings with persons first met online (Noll, et al., 2013). Swedish youth who sold sex online reported higher frequencies of both sexual and physical abuse than those who performed other online sexual behaviors (Jonsson et al., 2015).

Disabilities

Children with disabilities are two to three times more likely to be sexually abused as non-disabled children (Blasingame, 2010; Brunberg et al., 2012; Kendall-Tackett et al., 2005; McEachern, 2012; Reiter et al., 2007; Smith and Harrell, 2013; Sullivan and Knutson, 2000). Young people with intellectual disabilities and serious emotional disturbances are 4.6 times more likely to be sexually abused than children without disabilities (Lund and Vaughn-Jensen, 2012). Butler (2013) suggests that girls with intellectual disabilities are at heightened risk for sexual victimization because they are easier to manipulate. Learning- and intellectually-disabled children experience cognitive and emotional challenges that make them vulnerable to any form of victimization; both CSA and CSEC (Clawson et al., 2009; Grace et al., 2012; IOM & NRC, 2013; Roy et al., 2007; Twill et al., 2010).

Although children with disabilities who remain at home are at risk, placement in residential institutions dramatically increases the risk for sexual victimization. Risk is greater in institutions because children living in residential settings have been taught to obey authority figures, and because of their dependence on multiple caregivers for helping meet their hygiene needs. As such, children with disabilities may be alone with adults providing transportation, intimate personal care, occupational therapy, special education, and a host of other services. Offenders of youth with disabilities are often service providers (Sullivan and Knutson, 2000; Reiter et al., 2007). Institutionalized youth with speech and language disabilities, serious emotional disturbances, or intellectual impairments including mental retardation are also at greater risk (Jones et al., 2012a; Kvam, 2004; McEachern, 2012; Sullivan and Knutson, 2000). Children with multiple disabilities and those with more severe disabilities (e.g., deafness, blindness, severe mental retardation) are at greater risk for being sexually abused (Brunberg et al., 2012; Hershkowitz et al., 2007; Kvam, 2004). They are also less likely to report the abuse (e.g., only 6% of victims who were deaf at the time reported their abuse to the school or other authorities in Kvam, 2004). Children with disabilities may be less able to recognize abuse, less able to resist, or may be unable to

disclose due to communication difficulties. These same risk factors may also heighten their vulnerability to online abuse (Soo and Bodanovskaya, 2011). For example, it has been suggested that having a learning disability may make youth less able to recognize the dubious intentions of potential offenders, although this assumption has not been empirically supported, due to lack of research with this population.

Lack of Knowledge About Sexuality and Personal Safety

Children's limited knowledge about sexuality and sexual abuse make them vulnerable to abuse (Currier and Wurtele, 1996; Wurtele and Miller-Perrin, 1992). Pre-school aged children report minimal knowledge of sexual abuse and self-protection skills. They have difficulty recognizing inappropriate touch requests, especially when inappropriate requests come from "good" people (Kenny and Wurtele, 2010). In a study of 406 children, ages 3 ½ years to 5 ½ years, only 38% correctly recognized inappropriate touch requests; instead, the majority regarded sexual touching as acceptable (Wurtele and Owens, 1997). Furthermore, half of the children believed that abuse was the child's fault, and few participants thought that children should report secret touching. Few children were willing to tell anyone about the abusive incident, and even fewer knew how to report. Almost identical results were obtained among a sample of 150 preschool-aged children in China (Zhang et al., 2013).

Even with advanced age, older children and adolescents still lack knowledge about sexual development, perhaps due to absent or ineffective parent-child communication about sexuality or lack of school-based sexuality education. As one convicted child molester stated, "I targeted children I didn't think would talk to their parents. I'd talk to a teenager about his sexual identity, saying parents wouldn't understand such things." (Sprenkelmeyer and Vaughan, 2000). Even though "our society is happy to sell everything from cars to toothpaste using sex" (Lillywhite and Skidmore, 2006, p. 356), we still do a poor job talking openly to youth about sexuality, including how to keep themselves safe from sexual exploitation, sexually transmitted infections, and unplanned pregnancies. Children with disabilities are denied basic information about sexual health and relationships, perhaps due to a belief that they are "asexual" (Smith and Harrell, 2013, p. 6). As a result, sexuality education is rarely provided in special education classrooms and, when it is, it is not tailored to the needs of children with disabilities, resulting in a lack of knowledge and understanding about sex (Hershkowitz et al., 2007). In addition, rarely is school-based or sexuality education sensitive to the needs of lesbian, gay, bisexual, or transgender (LGBT) youth. Without an accepting environment to talk about sexual identity issues, young men and women remain at an increased risk of sexual exploitation.

Sexual Minority Status

Sexual minority youths (SMYs) experience higher rates of CSA and CSEC relative to their heterosexual peers. Higher rates are not a result of intrinsic characteristics; rather, they result from high levels of adversity that SMYs experience (Herrick et al., 2014). For example, LGBT youth are much more likely than their heterosexual peers to be victimized, harassed, and bullied at school due to their sexual orientation (Hong and Espelage, 2012; Huebner et al., 2015; Mitchell et al., 2014). Rates of substance use among SMYs are almost three times the rate of their heterosexual peers (Marshal et al., 2008). Experiencing school-based anti-LGBT victimization and substance use can also increase their risk for CSA. In their meta-analysis, Friedman et al. (2011) found that compared with heterosexual adolescents, sexual minority youths were almost four times more likely to experience CSA. This relationship was particularly strong for males. Male sexual minority youth were almost five times more likely to experience CSA compared with female sexual minority youth.

Sexual minority status is also a vulnerability factor for CSEC. LGBT youth have higher rates of CSEC victimization than their heterosexual peers, and as noted above for CSA, male sexual minority youth appear to be most at risk (Choi, 2015; Reid, 2012). Gay and transgendered youth are frequently cut off from family and peers, experience considerable stigma and isolation, and are at greater risk for being kicked out of or leaving their homes, which, in turn, increases the likelihood of selling or trading sex to survive (Cray et al., 2013; Mitchell et al., 2010; Svedin and Priebe, 2007). Youth who are confused about their sexual orientation are also at risk for online sexual victimization (Wurtele, 2017; Wurtele and Miller-Perrin, 2014). Wolak et al. (2004) found that sexual minority teenagers were more vulnerable to Internet-initiated sex crimes because of the frequency with which they searched sex-related sites. As found in Wolak et al. (2008), Internet offenders exploit boys' sexual confusion and insecurities surrounding their sexual orientation.

Mental Health

Several other individual characteristics can increase a youth's vulnerability for sexual victimization. Low self-esteem, susceptibility to persuasion, behavior difficulties, loneliness and social isolation, and emotional immaturity are all characteristics associated with sexual victimization (Dombrowski et al., 2004; Fleming et al., 1997; Whittle et al., 2013). Likewise, psychological problems (e.g., depression, self-harm, substance abuse, or attempted suicide) have been noted as risk factors for CSA (e.g., Davies and Jones, 2013). Similar vulnerabilities have been found in research relating to online sexual solicitations. Youth with these types of psychological problems tend to encounter more risks online, including sexual solicitations (Mitchell et al., 2007; Van den Heuvel, Van den Eijnden, Van Rooij and Van de Mheen, 2012; Wolak et al., 2004, 2008; Wurtele and Kenny, 2010; Wurtele and Miller-Perrin, 2014). These youth may be heightened risk because of their higher frequency of Internet use. For example, depression is positively related to chat room use and accessing the Internet more frequently and for longer durations (Beebe et al., 2004).

When CSA offenders are asked what they look for, many say they choose quiet, withdrawn, trusting, and passive children, those with poor self-esteem, who have few close friends, are not connected to social institutions (e.g., family, school, or church), and who are emotionally needy (Budín and Johnson, 1989; Conte et al., 1989; Elliott et al., 1995). Even online groomers say they can recognize when the young person is looking for empathy, attention, or feedback from an adult and they then exploit this normal need for attention (Dombrowski et al., 2004; Lanning, 2005). Likewise, youth who are dissatisfied with or having difficulties at school are at greater risk for being approached sexually by an adult, both online and offline (Whittle et al., 2013).

The association between drug and alcohol use and CSE/trading sex is strongly supported. Surveys of adolescents have found substance use to predict involvement in CSE/trading sex (Klatt et al., 2014; Pedersen and Hegna, 2003). Along with substance misuse, CSE victims often report a history of academic, behavioral, or social difficulties, such as engaging in delinquent activities (e.g., shoplifting), having sexual intercourse at an early age, and dropping out of school (Clawson et al., 2009; Cobbina and Oselin, 2011; Estes and Weiner, 2001; Flowers, 1998; IOM & NRC, 2013; Kramer and Berg, 2003; Lung et al., 2004; Pedersen and Hegna, 2003; Saewyc et al., 2008; Svedin and Priebe, 2007; Varma et al., 2015).

Running away

Multiple studies have shown that running away from or being thrown out of one's home is a key predictive variable for CSE/trading sex. A history of running away from home or foster care has been commonly found among prostituted women and youth (Abramovich, 2005; Cobbina and Oselin, 2011; Countryman-Roswurm and Bolin, 2014; Horn and Woods, 2013; Kaestle, 2012; Lloyd, 2011; Marcus et al., 2014; Nadon et al., 1998; Norton-Hawk, 2002; Raphael and Shapiro, 2002; Silbert and Pines, 1982; Varma et al., 2015; WestCoast, 2012). McClanahan et al. (1999) estimated that running away increased the risk for involvement in CSE/prostitution by more than 40 times. Kaestle (2012) found that among U.S. adolescents, homelessness significantly predicted involvement in CSE/trading sex. Not only does living on the street make these children more visible and vulnerable to traffickers, but street children are likely to engage in risky behaviors such as substance abuse and criminal behavior, which in turn, heightens their risk for CSE/trading sex. Street youth are also at risk because they lack resources to meet their basic needs for food and shelter, as well as the support from and connections with caring adults. According to Reid (2012), the strong emotional need for belonging and acceptance may increase the chance that previously abused girls would acquiesce to the demands of sex traffickers in hopes of gaining their acceptance and "love."

Runaway, thrown-away, and homeless youth see trading sex as their only means of survival, and exploiters take advantage of their vulnerable situations. Sex may be exchanged for money, food, clothing, drugs or alcohol, transportation, or a place to stay. Simply being on the streets and engaging in risky behaviors (e.g., drug use) makes these youth particularly vulnerable to being actively recruited into prostitution by friends or adults who exploit them (Barnitz, 2001; Dank, 2011; Edwards et al., 2006; Estes and Weiner, 2001; Lalor and McElvaney, 2010; Stoltz et al., 2007). Having friends or acquaintances involved in prostitution also predicted involvement in CSE/trading sex in Klatt et al. (2014).

Family Risk Factors

Many of these individual-level characteristics are related to family-level risk factors. Childhood experiences are profoundly impacted by family context. A number of family-related characteristics have been associated with increased risk for both CSA and CSEC.

Family Structure

Absence of one or both parents while growing up is one such risk factor. Some research has found that children living with only one biological parent, compared to two, were at two to three times' greater risk of sexual victimization (e.g., Averdijk et al., 2012; Bebbington et al., 2011; Black et al., 2001; Boney-McCoy and Finkelhor, 1995; Brown et al., 1998; Turner et al., 2013; Turner et al., 2007), perhaps because it is more difficult for single parents to effectively monitor or supervise their children, or because mothers bring unrelated romantic partners into the home. Living in homes headed by single-parent mothers increased the risk of CSA for girls in both Stroebel et al. (2013) and Sigfusdottir et al. (2008), and in homes with employed mothers, suggesting an increased exposure to risk due to lack of supervision during working hours (Ramírez et al., 2011). Girls living with a single parent who had a live-in partner had the highest risk; they were 10 times more likely to be victims of CSA than girls living with both biological parents (Sedlack et al., 2010). Both male and female teens who lived with two biological parents at age 14 were less likely than teens who lived in other family structures (including one biological and one adoptive/step-parent, along with a single parent and cohabiting partner) to report experiencing statutory rape (Child Trends, 2013). Females living with a stepfather, foster father, adoptive father, or partner of their mother are at much higher risk of being sexually victimized than girls living with their biological fathers (Averdijk et al., 2012; Finkelhor et al., 1990). Youth whose parents had separated were more likely to report selling sex in Pedersen and Hegna (2003). Youth from single-parent families are also more likely to intentionally seek out sexually explicit media sites (Svedin et al., 2011), to sell sex online (Jonsson et al., 2015), and are also more at risk for online sexual solicitation and are less likely to tell someone about the solicitation (Mitchell et al., 2007, 2010; Priebe et al., 2013). In contrast, adolescents from two-parent families typically experience closer parental monitoring of their sexual lives, online activities, and romantic attachments (O'Sullivan and Ronis, 2013).

Family Income and Parent Education

Although poverty is strongly related to a child's risk for neglect and physical abuse, there is lack of consensus about the relationship between CSA and the family's socioeconomic status (SES). In some samples, lower family income and lower parental occupational status were associated with increased risk of child sexual abuse victimization (Black et al., 2001; Hussey et al., 2006; MacMillan et al., 2013), whereas other studies found no relationship (Butler, 2013; Paolucci et al., 2001; Putnam, 2003). Some studies find differences in rates according to parent educational levels—a proxy measure of SES. For example, female teens whose parents had a college degree or higher (4%) were less likely to report that their first sexual experience was statutory rape compared with those whose parents had less than a high school degree (22%) (Child Trends, 2013). Similarly, low parental education was related to increased risk for sexual assault among adolescents in Turner et al. (2007), and low maternal education has been found to be associated with the sexual victimization of girls (Bagley and Mallick, 2000; Butler, 2013). Referring to online abuse, Mitchell et al. (2007) also found that the education level of parents is more important than income in determining whether a young person experiences online sexual approaches. Youth with well-educated parents were less likely to be victims of online grooming.

More obvious ethnic and family income differences have been noted among victims of CSEC. Victims of CSEC are more likely to come from low-income homes (Clawson et al., 2009). Homelessness as a result of poverty increases the risk for prostitution and trafficking. One study of Native American communities with high rates of poverty and homelessness found that 39% of women prostitutes reported that they had been commercially exploited as minors (APSAC, 2013).

Caregiver Dysfunction

Caregiver history of both physical and sexual victimization has been linked to child risk of sexual victimization. Children whose mothers were sexually abused in their own childhood were found to be at greater risk for sexual abuse in Oates et al. (1998). Likewise, McCloskey and Bailey (2000) found that when a mother has a co-occurrence of two risk factors—a history of CSA and drug use—the risk that her child will be a victim of sexual abuse significantly increases. In her interviews with adult survivors of CSA, Hunter (2010) reported that half of the women believed that their mothers had been sexually abused as children.

Additional risk factors include high levels of violence and substance (alcohol and drug) abuse in the home. Caregiver drug and/or alcohol abuse makes it difficult for parents to monitor their children and meet their emotional and physical needs. Parental substance abuse or a family history of alcoholism have been found to increase risk for physical abuse, neglect, CSA, and can be a precursor for their children leaving home or being removed from the home (Berger et al., 2010; Dube et al., 2001; Dubowitz et al., 2011; Dunn et al., 2002; Fergusson et al., 1996; Fleming et al., 1997; Hanson et al., 2006; Pérez-Fuentes et al., 2013; Swanston et al., 2002; Tyler and Melander, 2015). Some substance-addicted parents are willing to “sell” their children to fulfill their drug habit (Walker, 2002). Having family members involved in prostitution is an additional risk factor associated with CSE. In fact, having family members involved in prostitution was the best predictor of a youth being involved in CSE/trading sex, increasing the odds by over seven times in Klatt et al. (2014).

Parent psychopathology (including alcohol or drug use, domestic violence, parent criminal behavior and imprisonment, hospitalization for mental illness, history of parental mental problems, depression, and suicide) are additional risk factors (Brown et al., 1998; Fleming et al., 1997; Pérez-Fuentes et al., 2013; Swanston et al., 2002). Caregivers with histories of abuse and current substance abuse or mental health disorders are likely to be either unavailable or intermittently available to their children, thus increasing the risk for insecure parent-child attachment, which in turn, could serve as an antecedent of CSA. Parental dysfunction can also result in lax supervision and neglect; thus increasing the risk for CSA and CSEC (Finkelhor et al., 2007; WestCoast, 2012). These findings may apply to cases where CSA co-occurs with neglect, or CSA is secondary to neglect and the failure to protect the child from potential perpetrators or dangerous situations (Werkele et al., 2013).

Toxic Homes

CSA often occurs when children are living in “toxic” home environments. Characteristics of “risky” families that make children more vulnerable to sexual exploitation include high levels of overt family conflict and aggression (including child maltreatment and partner violence), lack of family cohesion, absence of parental nurturing, deficient parental monitoring, emotionally detached parenting, insecure parent-child attachment, low family support, frequent caregiver changes, and parental psychopathology (including mental illness, drug or alcohol abuse, or police involvement) (Brown et al., 1998; Butler, 2013; Fleming et al., 1997; Pérez-Fuentes et al., 2013; Ramírez et al., 2011; Romano et al., 2011; Stroebel et al., 2013; Swanston et al., 2002; Zolotor et al., 2007). Zolotor et al. (2007) found that children in homes experiencing domestic violence were almost five times more likely to experience sexual abuse compared with children living in homes not experiencing domestic violence. In another study, CSA victims were more likely to have witnessed domestic violence (Hamby et al., 2010), and Barrett (2010) found that women who had experienced CSA were significantly more likely to have experienced physical abuse and been exposed to domestic violence than women who were not sexually abused as children. In their analysis of risk factors for father-daughter incest, Stroebel et al. (2013) found that having parents whose relationship included verbal or physical fighting or brutality increased the likelihood of incest by approximately five times. In another study, victims of severe CSA were more likely to report negative family characteristics including parents who changed partners frequently, had adjustment problems (substance abuse and criminal offending), and used regular or severe physical punishment on their children (Friesen et al., 2010). Young people who have poor relationships or are in conflict with their

parents are also more likely to perform risky online sexual behaviors (e.g., sell sex online) and to be more vulnerable to online sexual victimization (Jonsson et al., 2015; Mitchell et al., 2007; Wells and Mitchell, 2008; Wolak et al., 2004, 2008). Youth most often cite family conflict, including abuse and neglect, as the major reason for running away or being homeless (Fernandes-Alcantara, 2013), which in turn puts them at risk for CSEC (Choi, 2015; Varma et al., 2015; Wilson and Widom, 2011). Adult survivors of child sex trafficking (prostitution) described how their recruiters preyed upon their deeply rooted desire to be “loved,” likely stemming from their childhood experiences of sexual abuse and an absent father figure (Cecchet and Thoburn, 2014). Their early childhood experiences “created feelings of being unloved or uncared for and ultimately led these women to being more vulnerable to becoming involved in the sex trade.” (p. 489).

Removal From Home

Growing up in a dysfunctional, abusive, or neglectful family can also result in a child's removal and subsequent placement in foster care. Family involvement in the child welfare system is a major risk factor linked to CSE/prostitution. Substantial data show that many, if not most, victims of CSE had previous involvement in the child welfare or foster care system. In one study, 64% of Canadian women involved in prostitution had been involved in the child welfare system, with most (78%) having entered either foster care or a group home (Nixon et al., 2002). Other studies have found that the majority of trafficked/prostituted youth (ranging from 55% to 98%) were involved in child welfare system, and had been placed in group homes or residential facilities (Brantley, 2009; Gragg et al., 2007; Human Rights Project, n.d.; Mathews, 2000; WestCoast, 2012). In another study, significantly more (47%) of the CSE victims presenting for medical care had a history of CPS involvement, compared with 13% of the age-matched CSA victims (Varma et al., 2015). Among their sample of homeless youth in Canada, Hickler and Auerswald (2009) found that African-American youth were three times more likely to report having been in foster care than White youth. Interviews with 262 minors involved in sex work in New York City and Atlantic City revealed that their living situations made them vulnerable; living on the streets, in abusive families, or in “the system”—foster families, group homes, and juvenile facilities (Marcus et al., 2014). The strong emotional need for belonging and acceptance may increase the chance that previously abused girls would acquiesce to the demands of sex traffickers in hopes of gaining their acceptance and “love.”

Family Practices

Certain family practices surrounding sexuality can increase the risk for sexual abuse in the home. Homes can be under-sexualized, where parent-child communication about sexuality is absent, or over-sexualized, where children are exposed to sexual talk, activities, and materials (e.g., pornography). In one study, victims of father-daughter incest were more likely to report “it was common for my father to see me nude,” both before and after puberty (Stroebe et al., 2013). Clinicians working with incestuous families have provided many examples of such breakdowns in intergenerational boundaries (e.g., Meiselman, 1978; Yates, 1982), but this is one of the first epidemiological studies to identify family-tolerated nudity as a risk factor for father-daughter incest. Another way to breach personal boundaries is when the offender “accidentally” exposes himself or “accidentally” touches a child's genitals, perhaps while giving a massage or drying a child off after a bath. The person might touch the child's genitals but then apologize, saying it was an accident. One child victim described this technique by saying, “He accidentally on purpose comes in the bedroom or bathroom when you're undressed, or accidentally on purpose touches your private parts, or accidentally on purpose shows you his body naked.” (Berliner and Conte, 1990).

Parent-adolescent communication about sexuality would appear to be a key factor to consider. There is ample research showing that when parents are involved in the sexual health education of their children, their children are less likely to participate in risky sexual behaviors, more likely to delay intercourse, and more likely to use contraception including condoms when they do have intercourse (e.g., DiIorio et al., 2003). Good parent-child communication also proved to be a strong protective factor against CSA in Ramirez et al. (2011).

Community/Societal Risk Factors

Families do not live in isolation. Instead, they are nested in social systems that can range in size from neighborhoods to nations. As shown at the family level, poverty and the lack of access to resources increases the risk for both CSA and CSEC. In Columbia, Ramirez et al. (2011) found that community characteristics including access to health and education protected children against sexual abuse. Access to these resources may have reduced family stressors, which in turn, reduced the likelihood of abuse. Other community-level risk factors are gender, racial, and ethnic inequalities that result in differences in employment opportunities, educational resources, and access to health-care services. Rachel Lloyd, author of *Girls Like Us* (2011), articulates many of these systemic causes of CSEC: “The vast majority of commercially sexually exploited/trafficked children and youth have experienced prior trauma and abuse, thereby making them extremely vulnerable to the seductive tactics of pimps and traffickers, but this hasn't occurred in a vacuum. Commercially sexually exploited young women in the US, like their foreign counterparts, often come from low socio-economic backgrounds, making them at higher risk for recruitment than more affluent youth.” (p. 34). In addition to poverty, other community risk factors for sexual exploitation include presence of gangs, glorification of pimp culture, objectification of women and girls, and community violence. For girls, community violence is linked to sexual harassment, and many

youth—especially girls of color—live in what [Smith et al. \(2014\)](#) refer to as “coercive sexual environments”—toxic communities where sexual harassment, domestic violence, and sexual exploitation are a part of everyday life. In these environments, prostitution and violence are normalized, and female children, adolescents, and women are actively recruited into the sex trade ([Cecchet and Thoburn, 2014](#); [Farley and Kelly, 2000](#)). For LGBT youth, school-based anti-LGBT victimization has been shown to increase their risk for substance use and affiliating with deviant peers; both risk factors for sexual exploitation ([Huebner et al., 2015](#)).

Another community influence associated with CSEC is proximity to transient adult males within the community. Sex trafficking frequently occurs in communities that include transient adult males such as members of the military, truckers, conventioners, and tourists ([Barnitz, 1998](#); [Estes and Weiner, 2001](#); [Jeffreys, 1999](#); [Williamson and Prior, 2009](#)). The presence of large numbers of military men, separated from their families and normal societal conditions, has been known to spur on prostitution in every part of the world for thousands of years ([Barnitz, 1998](#)). Sporting events also provide lucrative opportunities for sex traffickers. U.S. FBI task force officials often target major sporting events, as they are known to attract people who solicit adult sex workers and also prostituted youth. For example, in the weeks before the 2014 Super Bowl in New Jersey, FBI officials rescued 16 minors, ranging in age from 13 to 17, forced to work as prostitutes ([Zezima, 2014](#)).

Social, cultural, and economic factors also contribute to CSEC on a global level. Traffickers exploit conditions in impoverished countries that are characterized by high rates of organized crime and violence against women and children, discrimination against women, government corruption, political instability, armed conflict, and few employment or educational opportunities, all of which contribute to vulnerability to sexual exploitation ([Bell, 2001](#); [UNODC, 2009](#); [U.S. Department of State \(2005\)](#)). Poverty is perhaps the most frequently cited risk factor associated with the involvement of children in international sex crimes. Many international trafficking victims originate from poor countries, for example, where human trafficking has become a significant source of income ([Newman, 2006](#)).

Another sociocultural factor that contributes to CSEC is gender inequality and gender-based discrimination, particularly the devaluation of women and girls. As noted by Mary Robinson of the UN High Commissioner for Human Rights, “Trafficking is ... inherently discriminatory. In the case of trafficking into the global sex industry, we are talking about men from relatively prosperous countries paying for the sexual services of women and girls – and sometimes men and boys – from less wealthy countries. It involves such a massive and harmful form of discrimination.” ([United Nations, 2001](#), p. 2). In addition, traffickers have been known to take advantage of the devaluation of women and girls in disadvantaged countries and communities, and capitalize on the demand for inexpensive, unprotected labor and the promotion of sex tourism in some countries ([Aronowitz, 2001](#); [Miller and Stewart, 1998](#)). Also, severely limited educational and employment opportunities may force girls and women into sexually exploitive relationships to survive or escape from intolerable conditions ([Reid, 2012](#)). Feminist scholars have described the globalization of the sex industry as generating a new form of “sexual colonization” ([Reid, 2012](#), p. 266), as “the women of poor countries can be sexually bought by men from rich countries” ([Jeffreys, 2009](#), p. 6).

Another potential sociocultural influence recognized by U.S. scholars that may contribute to youth sexual exploitation is the sexualization of female children in advertising and media portrayals ([APA, 2007](#); [APSAC, 2013](#); [IOM & NRC, 2013](#); [Smith et al., 2005](#); [Wurtele and Miller-Perrin, 1992](#)). Feminists have argued for years that various advertising images can be exploitive and some experts have even argued that some advertising images represent sexually abusive images ([Smith et al., 2005](#)). Sexualized images of girls are also reflected in products to make girls look ‘sexy’ (e.g., clothing, makeup, etc.), television programming, computer games, and other toys; all contributing to normalizing the sexualization of girls ([APA, 2007](#)).

Public Health Approaches to Preventing the Sexual Exploitation of Youth

Based on the global prevalence and the short- and long-term negative physical and mental health outcomes, CSA has been identified as a significant public health problem by the U. S. Centers for Disease Control and Prevention (CDC) ([Whitaker et al., 2005](#)) and as one of the leading global risks to health by the World Health Organization (WHO) ([Butchart et al., 2006](#)). Given the ubiquity and harmful effects of sexual exploitation of youth, primary and secondary prevention strategies are clearly warranted. Primary prevention refers to interventions designed to prevent problems from ever occurring, and can be done by providing services to everyone (i.e., universal prevention), or via secondary strategies targeting at-risk populations (i.e., selected prevention). In the prevention science field, consensus has emerged that etiologies of many health problems arise from multiple ecological levels ([Bronfenbrenner, 1977, 1979](#)), and experts recommend that prevention not only target factors at an individual level, but also promote systemic and institutional changes in an overall prevention strategy ([Romano, 2015](#)). Prevention of CSA and CSEC will require evidence-based programs targeting children, their parents, professionals, and the general public. Given the rise in cyber sexual exploitation, an additional level—the online world—must be added to this framework to keep youth safe in cyberspace.

Child-focused Programs

School-based empowerment programs to help children avoid sexual victimization were created and widely disseminated in both the United States and Canada starting in the early 1980s. The focus of these educational programs has primarily been to teach young children personal safety knowledge and skills through group-based instruction, usually conducted in schools. Schools evolved as the logical location to teach children about personal safety, given that their primary function is to meet children’s educational, emotional, and behavioral needs, and also because of their ability to reach large numbers of diverse children in a relatively

cost-efficient fashion. A universal primary prevention approach of this nature also eliminates the stigma of identifying specific children or families as at risk for sexual abuse, and thus avoids costly and intrusive interventions into family privacy. Most educational initiatives for young children share common goals, including the 5Rs of: (a) helping children *recognize* unsafe situations or potential abusers; (b) encouraging children to *refuse* sexual requests by saying “No”; (c) encouraging children to *resist* by removing themselves from the potential perpetrator; (d) encouraging children to *report* previous or ongoing abuse to a trusted authority figure; and (e) helping children understand that secret or inappropriate touching is never the child’s fault—it’s always the abuser’s *responsibility* (Wurtele, 2008). Of these goals, the first three address primary prevention—the focus of this review.

A sizable number of reviews and meta-analyses have been published that examine empirical studies (conducted mostly in the U.S., with additional studies from Canada, UK, Ireland, Australia and China). Reviews consistently conclude that children benefit from participating in these programs. Specifically, program participants have improved in their ability to recognize inappropriate touching along with increased knowledge of self-protection skills including refusing, resisting, and reporting (Fryda and Hulme, 2015; MacMillan et al., 2009; Mikton and Butchart, 2009; Topping and Barron, 2009; Walsh et al., 2015; Wurtele, 2002; Wurtele and Kenny, 2010c, 2012; Zwi et al., 2007). Some programs have increased participants’ willingness to disclose abuse, improved their self-esteem, facilitated the learning of correct genital terminology, and helped children learn that it is never their fault if abuse occurs (Kenny and Wurtele, 2009; MacIntyre and Carr, 1999; Weatherley et al., 2012; Wurtele and Owens, 1997). Few, if any, children experience negative effects of program participation (Fryda and Hulme, 2015; Lee and Tang, 1998; Wurtele, 2009).

Several characteristics of “high-quality” programs have been determined. Young children can learn personal safety skills if they are taught concrete concepts in a clear, developmentally appropriate way, and are given adequate time for learning, across multiple sessions, and when teachers employ active behavioral skills training. Wurtele, Marrs, and Miller-Perrin (1987) established the need for students to observe a skill and then actively practice that skill. Reviews have consistently concluded that programs which incorporate modeling (i.e., demonstrating the skill to be learned) and active rehearsal (e.g., role plays) are more effective than programs that primarily rely on individual study or passive exposure (Brassard and Fiorvanti, 2015; Davis and Gidycz, 2000; Finkelhor et al., 1995; Rispens et al., 1997; Roberts and Miltenberger, 1999; Topping and Barron, 2009; U.S. GAO, 1996; Wurtele, 2008, 2009; Wurtele and Kenny, 2010c, 2012; Wurtele and Owens, 1997; Zhang et al., 2013, 2014; Zwi et al., 2007). In addition, programs for young children are more effective if they are longer in duration (four sessions or more), if they repeat important concepts across spaced sessions rather than massed presentation, and if they are based on concrete rules rather than abstract concepts (like teaching about rights, feelings, intuition, or good-bad touches) (Collin-Vézina et al., 2013; Topping and Barron, 2009; Wurtele and Owens, 1997). The “good touch-bad touch” approach for teaching children how to recognize inappropriate touches has been shown to be confusing, especially for young children (Kenny and Wurtele, 2010; Wurtele et al., 1989), and it also potentially communicates to children that all sexual touches are “bad.”

Although personal safety education programs can effectively teach children to recognize, resist, and report abuse, it will become necessary to expand the content of these programs if CSA is to ever be eradicated. There are several ways to do so. First, programs must focus on potential perpetrators in the audience. As many sex offenders begin offending in adolescence (Seto and Lalumiere, 2010), there is great potential in addressing beliefs about and sexual interests in children at this time. At the minimum, youth (preteen, early adolescents) need to be taught that it is morally wrong and a crime to sexually experiment with or exploit children. In 2001, Plummer reviewed 87 prevention programs and found that one-fourth contained messages addressing the prevention of adolescent perpetration. It is unknown if current school-based programs contain these important messages.

Second, this information should be incorporated into a school curriculum promoting healthy sexual development, especially for children with disabilities and sexual minority youth. As noted above, sexuality education is rarely provided in special education classrooms and, when it is, it is not tailored to the needs of children with disabilities, resulting in a lack of knowledge and understanding about sex (Hershkowitz et al., 2007). Along with lack of sexuality education, few CSA primary prevention efforts have been developed for children with disabilities (McEachern, 2012; Smith and Harrell, 2013). Denied education about healthy sexuality and sexual abuse, they are also denied a language to disclose abuse and less likely to be believed if they do report. Moreover, adults around them—parents, educators, disability providers, medical professionals—are unlikely to be equipped to identify signs of sexual abuse. Likewise, without an accepting environment to talk about sexual identity issues, lesbian, gay, bisexual, or transgender (LGBT) youth remain at an increased risk of sexual exploitation.

A third suggestion is to teach children generic safety and social competency skills that are relevant to preventing all forms of victimization and promoting respectful interactions with others (Finkelhor, 2007, 2009; Wurtele, 2009). A similar call to expand the range and content of interventions has been made in related fields. Youth development interventions, aimed at improving general social competency and promoting prosocial behaviors, have been proposed as effective ways of reducing adolescent pregnancy and risky sexual behavior among adolescents (Kirby, 2007; Rotheram-Borus, 2000). These preventive interventions seek to affect shared risk and protective factors for diverse health risks, with possible positive effects on a broad range of mental, emotional, and behavioral outcomes (Hill et al., 2014). Relationship-skills training could focus on boundary setting, assertiveness, communication skills, empathy, conflict resolution, problem-solving skills, emotional regulation, as well as encouraging bystander engagement and help-seeking behaviors. Children need to be provided with relationship-skills training at the time when they most need it. For example, programs in elementary schools can target both abuse and bullying (physical, verbal, and psychological), whereas programs for middle-school students and young adolescents should target cyber-bullying, Internet safety, safe dating, and bystander intervention. Middle to late adolescence offers multiple opportunities to discuss sexual consent and sexual ethics; not only for the prevention of the teen’s own sexual exploitation but also to prevent the victimization of others (Wurtele, 1999). Ensuring youth have a voice about the design, content, and delivery of these programs is highly recommended.

Most efforts to confront CSEC/prostitution in the U.S. and globally have been tertiary approaches (i.e., identifying and rescuing victims, or providing assistance to youth already “in the life”). Child-focused interventions in high-income countries also primarily focus on preventing CSA rather than CSEC (Wurtele and Miller-Perrin, 2012). In a few countries with higher rates of CSEC, information about trafficking has been introduced into the school curriculum. There have also been initiatives to promote educational success and teach school children life skills to reduce the likelihood that they will be trafficked for sexual purposes. In the UK, Barnardo's produces a pamphlet for young people and family members entitled *Sexual Exploitation: Sex, Secrets and Lies*, to help users understand what sexual exploitation can be and provides tips to stay safe, both offline and online (available at: www.barnardos.org.uk). In addition, Barnardo's has produced *Real Love Rocks*, designed to provide extensive guidance and materials to enable professionals to feel confident in talking to adolescents about sexual exploitation (available at: www.barnardosrealloverocks.org.uk). Shared Hope International produces a film series entitled *Chosen*, designed to teach teens the warning signs and indicators of trafficking through the true stories of three teenage girls who were tricked into the commercial sex industry (available at: <http://sharedhope.org/what-we-do/prevent/awareness/>).

As reviewed above and indicated in Table 1, research points to several common factors that increase a child's risk for CSEC, suggesting that certain high-risk groups of youth could be targeted for selective prevention strategies. High-risk groups include youth who are disengaged from or have already dropped out of school, those who are at risk of or are already experiencing homelessness, along with those with a history of childhood maltreatment and subsequent involvement in the child welfare system. At-risk youth in runaway shelters, foster care, residential treatment centers, and in the juvenile justice system could be educated about the warning signs of CSE and taught strategies to avoid being exploited and exploiting others. Although programs for homeless youth have been developed to prevent HIV (Arnold and Rotheram-Borus, 2009), few interventions targeting CSEC were located for this review. One program is *My Life My Choice*, a 10-week curriculum for young women who are at-risk for CSE. According to the Website (www.fightingexploitation.org), “Groups teach at-risk girls how to recognize and avoid the recruitment tactics of pimps and find a path out of exploitation if they are already involved. The groups are designed to change girls' attitudes and perceptions of the commercial sex industry, as well as build self-esteem and personal empowerment.” In Canada, Saewyc and Edinburg (2010) describe the *Runaway Intervention Program*, created for runaway girls ages 12 to 15. These child-focused interventions to prevent CSEC are limited in number and scope (e.g., lack of focus on boys and LGBT youth), and few have been evaluated to determine their effectiveness (IOM & NRC, 2013; President's Interagency Taskforce, 2014; van der Laan et al., 2011). In addition, advising youth to avoid trading sex for shelter is an impractical solution, given the paucity of housing for at-risk youth (Shelton, 2015).

To prevent technology-related sexual solicitation and victimization of adolescents, teen-focused safety education programs are sorely needed. Although almost half of U.S. youth in one survey reported receiving prevention messages at school about online sexual solicitation (Mitchell et al., 2013), a recent review of Internet-safety education materials revealed that these programs are of dubious quality and many of their safety recommendations have questionable protective logic (Jones et al., 2012b). Awareness-building strategies are needed to help youth recognize that there are manipulative adults, whether online or in-person, who will exploit their sexual curiosity and take advantage of their normal needs for affection, intimacy, and romantic connections. The warning signs that they are being groomed online need to be described, covering such inappropriate sexual advances as being asked personal questions, talking about sex, being asked to send or receive sexually explicit images, or being told to keep the relationship a secret (Wolak and Finkelhor, 2013; Wurtele, 2012b). It would also be useful for youth to hear from victims of online abusers about how easy it was to become enmeshed in the relationship (Whittle et al., 2015), and the variety of manipulation techniques used throughout the grooming process, like being offered payment for sexual services or the promise of modeling work (Shannon, 2008). It is also important to counter the belief that only girls are targeted online (Davidson and Martellozzo, 2008). Educators can assist students in preventing cyber sexual solicitation by integrating online safety into lessons about cyber-bullying, health, and sex education, with specific strategies and tailored interventions for students who may be at higher risk for online victimization (Burrow-Sanchez et al., 2011; van Ouytsel et al., 2014).

In addition to recognizing inappropriate sexual advances, young people need instruction on how to respond to solicitations and how to report such incidents to prevent offline contact (Wolak and Finkelhor, 2013). Although teenagers rarely inform their parents when they receive sexual solicitations online (Mitchell et al., 2013), they often tell their friends (Katz, 2013; Whittle et al., 2013), who, if informed about how to respond to disclosures of online relationships, could intervene. Chat-room or social-networking users could also be recruited to become “cyber-bystanders” (Palasinski, 2012) and encouraged to warn the adolescent about the possibility that they are being sexually exploited.

Most importantly, youth need to be informed about their right to be protected from all forms of sexual exploitation and how to exercise that right; consistent with the spirit and intent of the United Nation's Convention on the Rights of the Child (see www.ohchr.org). Although some have raised concerns about putting the onus of preventing sexual exploitation onto children rather than on the adults in the community, Finkelhor (2009) has cogently argued that it is “morally reprehensible” not to equip children with knowledge and skills that could help keep them safe from sexual exploitation. Although child-focused personal safety programs play an important part in prevention efforts, they should not be expected to single-handedly prevent such a complex problem as youth sexual exploitation.

Parent-focused Prevention Strategies

Additional prevention partners include supportive adults present in a child's environment; most importantly, their parents or caregivers. A major reason for targeting parents is that the home is the most proximal level of the child's ecology. Forming a ‘prevention

partnership' (Wurtele and Miller-Perrin, 1992) with parents has long been recommended and has several advantages (Babatsikos, 2010; Elrod and Rubin, 1993; Reppucci et al., 1994; Wurtele and Kenny, 2010a). Parents can play an important role in empowering their own children to protect themselves either by supporting their child's participation in a school-based program or by providing personal safety education in the home. Caregivers can teach and reinforce personal safety rules and skills at home, and have to be found to be effective teachers (Wurtele et al., 1992). Children learn safety messages better when they receive them both at home and at school. In addition, many factors that heighten a child's risk for sexual exploitation relate to the home environment (e.g., lax supervision, lack of privacy, presence of unrelated males, restricted parent-child communication about sexuality, ineffective screening of substitute caregivers, children taught blind obedience to authority figures, etc.). Educating parents about these risk factors can enable them to improve the safety of their homes by increasing monitoring and supervision, communicating with their children about healthy sexuality, and screening substitute caregivers (Mendelson and Letourneau, 2015; Wurtele and Berkower, 2010; Wurtele and Kenny, 2010a). Parents can also encourage YSOs to protect youth from sexual exploitation by ensuring staff and volunteers are carefully vetted, trained, and supervised. Parents play important roles in recognizing and responding to questionable behaviors or boundary violations exhibited by YSO employees or volunteers, like when a staff member communicates with a minor (via cell phone, text messages, or letters) about personal or sexual issues. Parents can also be provided with suggestions about how to limit access of potential perpetrators to their children, informed about sexual grooming, and provided with descriptions of the ploys and manipulations used by sex offenders (Babatsikos and Miles, 2015; Kaufman et al., 2006; Wurtele, 2010, 2012b; Wurtele and Berkower, 2010). Involving parents may also help reduce the secrecy surrounding the topic and can stimulate parent-child discussions about sexual abuse in the context of healthy sexuality, providing an important protective factor within the home. Certain parent-child interactions, such as regularly asking questions of children, have been associated with a lower risk of CSA in children (Ramírez et al., 2011).

Studies in several countries indicate that parents want to be involved in preventing CSA, either by supporting school-based education or by being their children's first educators on this topic (Hunt and Walsh, 2011; Walsh and Brandon, 2012). Research also supports the need to educate parents about the realities of child sexual exploitation. Despite the fact that most sexual abuse is carried out by someone known to the child and their family, the majority of parents (80%–95%) focus their CSA-prevention discussions on "stranger-danger" warnings (Chen and Chen, 2005; Chen et al., 2007; Deblinger et al., 2010; Ige and Fawole, 2011; Wurtele et al., 1992). Parents in China feared that discussing CSA prevention concepts would result in their children knowing too much about sex, and were more likely to provide prevention messages to their daughters than to their sons, as they viewed boys at low risk of abuse (Chen and Chen, 2005; Chen et al., 2007). A study of parents in Africa revealed that many blamed children for sexual abuse (e.g., because they dressed provocatively) (Mathoma et al., 2006).

There have been a limited number of studies evaluating CSA parent educational trainings. The few studies conducted to date have primarily focused on either increasing parent knowledge or enhancing parent-child communication about CSA. Studies in the U.S., Canada, and Ireland have reported increases in parents' knowledge about children's disclosure and help-seeking resources, along with characteristics of perpetrators, victims, and grooming (MacIntyre and Carr, 1999; Wurtele et al., 2008). Parent education not only increased parents' reported intentions to talk to their children about CSA, but also the amount of parent-child discussions (Burgess and Wurtele, 1998; Wurtele et al., 2008).

Although parents are of critical importance to the success of child-focused educational programs, the full potential of "parent partnerships" has yet to be realized (Hunt and Walsh, 2011; Mendelson and Letourneau, 2015; Walsh and Brandon, 2012; Wurtele, 2009; Wurtele and Kenny, 2010a). Recruiting and retaining parents for educational programs have proven significant challenges for researchers and educators. Attendance rates at informational meetings have been quite low (e.g., 21% of parents in Tutty, 1997; 20% in Hébert et al., 2001), and fathers rarely attend (Elrod and Rubin, 1993; Tang and Yan, 2004). In an exploration of Chinese adults' intentions to participate in CSA prevention programs, only 24% definitely intended to participate (Tang and Yan, 2004). Parents often cite scheduling conflicts or lack of time as barriers to attending (Babatsikos, 2010; Wurtele and Kenny, 2010a). Parent educators have offered numerous suggestions to enhance parental participation, especially fathers, and encouraged the development of Web-based training and educational modules (Wurtele and Kenny, 2012). Compared to attending workshops, the Internet offers a confidential and more convenient way to get information about CSA. Internet-based interventions (IBIs) may be especially useful for parents, yet few existing IBIs are aimed at parent-child dyads (Amstadter et al., 2009). Web-based intervention can reach a large population at relatively low cost, and can be accessed privately and conveniently from home—a plus for parents who may be reluctant or unable to attend school-based meetings.

Additional challenges include the majority of programs and materials are targeted at parents of young children, with less attention paid to parents of adolescents, even though risk for sexual exploitation increases with age. Similar to child-focused programs, parent materials rarely include information about prostitution, sex trafficking, and online solicitation. Given the potential for adolescents to be abused through online sexual solicitation, it is critical that parents are informed about safe Internet use and how to talk to their children about cyber safety (e.g., Wurtele, 2012b, 2017; Wurtele and Miller-Perrin, 2014). It is important that parents discuss the dangers of meeting a new Internet friend offline, how to handle receiving sexually explicit images or messages, especially when sent to them by adults, and how to recognize and respond to E-grooming (Wurtele, 2009), including what "exit strategies" (Tynes, 2007) to adopt if they are sexually solicited online by an adult. Parents are also encouraged to talk about online behaviors shown to increase risk of sexual solicitation (e.g., flirting and having sexual conversations with strangers, posting provocative pictures, sexting, visiting pornography sites, etc.). In the U.S., the National Center for Missing and Exploited Children has developed an awareness campaign directed at children and their parents which emphasizes the need for parental knowledge about Internet safety (www.netismartz.org/InternetSafety). The UK Safer Internet Center provides resources for parents

and carers of children in two age groups: 3–11 and 11–19 (www.saferinternet.org.uk). Program evaluation is needed to determine how successful such campaigns are at increasing parental knowledge and preventing online sexual victimization of adolescents.

As seen in [Table 1](#), negative family environments increase the risk for adolescent sexual exploitation; both online and offline, along with commercial and non-commercial forms of abuse. Family characteristics found to increase the likelihood of sexual exploitation include family violence, parental substance misuse, witnessing or directly experiencing family abuse (emotional, sexual, or physical), absence of family support or parental monitoring, having only one biological parent, along with stress associated with economic insecurity. Thus, there may be a limit to what parent-focused programs can do for some youth. Rather than education, these families need support and resources. Yet few U.S. states provide such services as support programs (provided by 31% of states), housing programs (4%), substance abuse programs (29%), or homeless shelters (12%) ([CDC, 2010](#)). Growing up in a community that cares about families and provides resources and support to parents is critical, so that parents can develop healthy attachments to and nurture their children and thus prevent the adverse childhood experiences shown to increase vulnerability to sexual exploitation.

Prevention Efforts in Youth-Serving Organizations

As children mature and become more independent, they interact with other adults—teachers, coaches, faith leaders, and other mentors in youth-serving organizations. Youth-serving organizations (YSOs) are establishments, institutions, and clubs that provide various services to children. They include schools, youth groups, foster care, residential schools/institutions, correctional facilities, faith-based institutions, and recreational or sporting clubs. As noted by [Trocmé and Schumaker \(1999\)](#), “participation in these activities provide children with important protective factors against sexual abuse including increased self-esteem and skills development, relationships with adults outside the home who may act as role models and confidants, and relationships with peers” (p. 631). Many of these organizations foster close and caring relationships between youths and adults outside the family, but this same closeness can provide opportunities for sexual exploitation.

Sexual abuse in organizations can be viewed through the lens of situational crime prevention theory ([Tonry and Farrington, 1995](#)), which shifts attention from an exclusively individual-level (‘a rotten apple’) to the institutional context in which the offender and victim interact (‘a rotten basket’; [Timmerman and Schreuder, 2014](#)). From a situational crime perspective, there are certain characteristics of an organization that can increase the risks of staff committing sexual crimes against youth (see also [Smallbone et al., 2008](#)). These risks can include the physical condition of the facility (e.g., classrooms with no windows), and also the less visible risk factor of an agency’s culture. Culture is the way an agency does business, as described in the mission statement and policies and procedures, along with its character. An organization’s character is reflected through staff-to-staff and staff-to-youth relations, language, dress, hiring processes, and work environment. Staff sexual misconduct is more likely to occur in a “sexualized” work environment; where the behaviors, dress, and speech of either staff and/or youth create a sexually-charged workplace ([Texas Youth Commission, 2009](#)). Indicators of a sexualized work environment include suggestive materials (e.g., sexualized cartoons or emails), use of profanity, talk containing sexual overtones, flirting, or teasing youth about their appearance or sexual orientation. In a sexualized environment, the professional boundaries between staff and youth are significantly eroded, leading to a suspension of ethics, which in turn, creates opportunities for staff sexual misconduct to occur. YSOs must have zero tolerance for any form of abuse of youth, whether it is emotional, physical, or sexual. Broad approaches to protect youth from abuse in institutions include screening, establishing safety and protection policies and procedures, along with training, monitoring, and supervision of staff and volunteers to reduce the risk of sexual abuse and promote appropriate professional boundaries ([Wurtele, 2012a](#)).

In the U.S., guidelines for screening staff are provided in a document produced by the Centers for Disease Control and Prevention entitled, *Preventing Child Sexual Abuse Within Youth-Serving Organizations* ([Saul and Audage, 2007](#)). A standard recommendation is to conduct criminal background checks on potential candidates, and U.S. agencies typically conduct checks of criminal offenses and determine if the potential employee or volunteer is listed on a Sex Offender Registry. In the UK, the Safeguarding Vulnerable Groups Act of 2006 and the Safeguarding Vulnerable Groups Order (Northern Ireland) of 2007 set up a Vetting and Barring Scheme that lists those disqualified from working with children ([Erooga, 2009](#)). Although checking for criminal records is essential, the majority of those who have abused children serving in positions of trust do not have criminal records. For example, of professionals who sexually abused children in youth-serving organizations, only 16% had previous sexual convictions and 10% had previous non-sexual convictions ([Sullivan et al., 2011](#)). Given the limitations of criminal background checks, stringent interviews must be conducted to determine whether potential employees exhibit behaviors, attitudes, or beliefs that might indicate they are a potential risk to children. However, convicted offenders in one study reported that screening and interview procedures for their organizational positions were often not rigorous (e.g., interviews were not particularly challenging; screening of references was insufficient) ([Erooga et al., 2012](#)). In addition, other studies have found that psychometric measures are not very effective in identifying sexual offenders, at least with professional perpetrators ([Sullivan et al., 2011](#)), suggesting the need for risk-management strategies addressing staff-youth boundaries, providing staff training and monitoring, and establishing a culture of safety.

It is important for organizations to establish specific policies, procedures, guidelines, and ethical standards to ensure the safety and protection of children in their care. Organizations can establish policies limiting physical access to children ([Cranley, 2015](#); [Noble and Vermillion, 2014](#); [Read, 2013](#); [Saul and Audage, 2007](#); [Wurtele, 2012a](#); [Wurtele and Kenny, 2012](#)). One strategy is to minimize opportunities for staff to be alone with children. For example, in the U.S., the Boy Scouts of America (BSA) has a “two-deep leadership” policy, which requires at least two adults be present on all trips and outings and which prohibits youth

workers from transporting children alone in a vehicle (BSA, n.d.). Others recommend that contacts between staff and youth are limited to organization-sanctioned activities and restrict out-of-program contact (Lanning and Dietz, 2014; Wurtele, 2012a; Wurtele and Kenny, 2012). Codes of conduct, providing clear guidance to staff on standards of behavior, are also important. Convicted sex offenders have reported that organizations are often not clear about regulations and expectations about relationships between staff and children (Erooga et al., 2012). Ethical and behavioral standards for the clergy and other church personnel are available from faith-based institutions (e. g., National Board for Safeguarding Children, 2008; Unitarian Universalist Association, 2004). Several standards of practice for preventing the sexual abuse of children in sport are also available (Child Protection in Sport Unit (2003); Irish Sports Council, 2000; Play By The Rules (2011); Queen's Printer for Ontario, 2002; USA Gymnastics, 2009; USOC's Safe Sport program at www.safesport.org).

Recognizing that youth are vulnerable to technology-facilitated sexual grooming, YSOs must develop and implement responsible-use-of-technology policies, outlining the acceptable and unacceptable uses of digital devices and electronic communications, including guidelines for communication between staff and youth on social networking sites (SNSs) and via cell phones. For example, in the U.S., the New York City Department of Education (DOE) publishes Social Media Guidelines for both employees and students, recommending that DOE employees maintain separate professional and personal SNSs and e-mail accounts, and that they only communicate with students through these school-based professional social media sites and e-mail accounts. However, the guidelines do not address one-to-one communication via cell phones and text messaging between teachers and students, which have been more widespread and problematic (Chen and McGeehan, 2012). Other school districts prohibit their teachers from giving out cell phone numbers to students or calling students under the age of 18 on their cell phones without parent authorization. However, stricter E-communication guidelines are meeting resistance from some teachers because of the increasing importance of technology as a teaching tool and of the benefits of social media for engaging with students (Preston, 2011). In addition to schools, other YSOs are developing and implementing policies to limit digital contact between staff and youth in their care (e.g., Boy Scouts of America; USA Swimming).

Once selected for positions, it is critical that in-service training be offered to all employees and volunteers to raise their awareness of sexual exploitation in YSOs (Lanning and Dietz, 2014; Saul and Audage, 2007; Wurtele, 2012a). In-service training informs all employees and volunteers about the organization's commitment to child protection, along with its prevention policies and procedures. Trainees need opportunities to discuss ethical principles and values underlying their care of youth, particularly the need to maintain professional boundaries, knowing what constitutes sexual misconduct, and acknowledging the potential for exploiting their greater status and power. Boundary and ethics training for staff serving youth with intellectual and other developmental disabilities is critical for prevention and early intervention (Blasingame, 2010). Training should also be provided on how to recognize and respond to questionable behaviors or boundary violations exhibited by fellow staff members, like when a co-worker has a special relationship with a particular child, is seen touching the child in question in inappropriate ways, or communicates with a child (via cell phone, text messages, or letters) about personal or intimate issues. In the U.S., one adult-focused CSA prevention program is offered by the non-profit organization Darkness to Light (see www.d2l.org), whose mission is to empower adults to prevent CSA. Darkness to Light's (2004; 2013) *Stewards of Children* program teaches adults in YSOs (i.e., staff, volunteers, parents) how to prevent, recognize, and react responsibly to CSA. The program is available both in-person and online. Rheingold and colleagues (Rheingold et al., 2014; Rheingold et al., 2012) have conducted studies showing the program's promise for efficacy and have also compared different formats, both in-person and Web-based. Additional research on the online version likewise found support for the program's convenience and cost-effectiveness (Paranal et al., 2012).

YSOs also need to develop monitoring and supervision protocols (Gula, 2010; Noble and Vermillion, 2014; Saul and Audage, 2007; Wurtele, 2012a). All employees and volunteers should be informed about the monitoring protocol and be clear about their roles and responsibilities in response to observed, disclosed, or suspected sexual abuse. Organizations must have policies for dealing appropriately with allegations of staff-child sexual abuse. It is also essential that there are easily accessible ways for children to disclose abuse. Saulet et al. (2010) recommended empowering youth by encouraging them to intervene or tell someone when they see inappropriate interactions between adults and youth.

There are challenges to implementing prevention efforts in institutions. Lack of personnel and resources to provide educational programs for staff is frequently mentioned (Parent and Demers, 2011; Read, 2013; Wiersma and Sherman, 2005; Wurtele, 2012a). Another potential problem is reticence on the part of employees to address the subject. Agency administrators are sometimes concerned that promoting prevention may arouse fear within the organization, possibly leading members to worry that measures are being implemented because sexual abuse exists in their organization (Parent and Demers, 2011). Staff members might also become fearful of false allegations due to heightened sensitivity and monitoring by parents, co-workers, and supervisors about engaging in various forms of nonsexual physical contact, E-communication, and social media with students (Andrzejewski and Davis, 2008; Preston, 2011; Vamos, 2001). There may be denial among employees and administrators that CSA abuse exists within their organization (Malkin et al., 2000; Wurtele, 2012a), with staff refusing to believe that their colleagues are capable of such behavior (Hendrie, 1998; Lanning and Dietz, 2014; Noble and Vermillion, 2014). Administrative difficulties have also been cited as potential challenges to implementing CSA prevention policies. For example, administrators of sports programs have been observed to encounter problems in carrying out policies, due to delays in criminal background checks or reluctance to share information about offending coaches (Noble and Vermillion, 2014), along with a lack of support from senior management (Hartill and Lang, 2014).

Although the various strategies described above are potentially promising ways to prevent CSA from occurring in YSOs, there is a dearth of research available to confirm their effectiveness. The final section reviews societal-level prevention efforts.

Societal-Level Prevention Strategies

Societal-level factors that might contribute to the sexual exploitation of youth include social conditions, societal values, and shared beliefs and attitudes. This final section describes prevention efforts targeting societal risk factors including strategies such as public awareness media campaigns, human rights instruments, criminal justice responses, and national child protection plans. Those urging a public-health approach to youth sexual exploitation stress the importance of a broad spectrum of approaches, including macro-system influences (Tabachnick and Blanchard, 2002; Wurtele, 2009).

Cross-cultural studies on attitudes and beliefs about adult-child sex provide evidence of a lack of understanding about CSA (e.g., Jones and Jemmott, 2009; Stop It Now! 2010). There is also a widespread lack of understanding about CSEC (Miller-Perrin and Wurtele, 2017). Studies have found a low level of knowledge and awareness among law enforcement, prosecutors, judges, and jurors about the crime of sex trafficking, as well as negative attitudes from law enforcement toward CSE victims, who are often seen as responsible for their own victimization (Farrell et al., 2012; Mikton et al., 2013). In 2012, girls represented 76% of all juvenile arrests for "prostitution" and certain subgroups of girls fare especially poorly—ethnic and sexual minority youth are at greatest risk of being arrested and ending up trapped in the juvenile justice system (Sherman and Balck, 2015).

One key societal factor—the media—holds significant power to affect public attitudes and norms related to the sexual exploitation of youth, and to shape public policy, funding, and service delivery. In one analysis of media coverage of CSA cases, researchers found that the media tended to focus on criminal justice responses rather than include contextual information about causes of and solutions to CSA, making sexual crimes against minors appear as though they occur in a vacuum, instead of the product of broader social conditions (Dorfman et al., 2011). In addition, prevention-oriented solutions rarely appeared. In this study, only 18% of articles described a preventative measure, and half of these suggested education for children and their parents. By contrast, only 4% of articles suggested policy changes or broad-scale prevention activities focused on either potential victims or potential perpetrators (Dorfman et al., 2012; Mejia et al., 2012). In a review of news articles about CSEC in Canada, Saewyc et al. (2013) found that the majority of print media portrayed images of young, heterosexual females as both victims and willing "sex workers," but there was little discussion of exploitation faced by males or LGBTQ youth. Very few stories described the exploiters, potentially reinforcing the notion that CSEC is a "victimless crime"; it also means less responsibility is placed on the purchasers for the continued problem of sexual exploitation (p. 101). Most importantly, few portrayed CSE as a crime against children and youth, or as a violation of their basic human rights under national and international law. Words do matter, and media professionals have much to offer by accurately describing the experiences of youth victims of sexual exploitation (Letourneau et al., 2014; Mejia et al., 2012; Saewyc et al., 2013). The development of comprehensive toolkits to help the media disseminate information would be helpful (Collin-Vézina et al., 2013).

Few media campaigns targeting CSA have been mounted in the United States. One exception is the Stop It Now! program which includes affiliates in the U.S. and UK and uses social marketing campaigns to advance two ideas: (1) Many people who sexually exploit children want treatment to control their impulses; and (2) All adults are responsible for noticing warning signs and engaging with people at risk of sexually abusing a child, before a child is harmed (see www.stopitnow.org). Since 1992 this organization has stressed that it is the responsibility of adults to create safe environments for children and to recognize the warning signs that might indicate an individual is at risk of sexually abusing a child. Prevention messages are delivered through newspaper advertisements, television and radio ads, talk shows, articles, billboards, transit posters, and news features. A confidential toll-free Helpline (1-888-PREVENT) is available for information and referrals.

In the U.S., the Enough Abuse Campaign is a state-wide education and community mobilization effort whose mission is "to prevent people from sexually abusing children now and to prevent children from developing sexually abusive behaviors in the future" (Massachusetts Citizens for Children, 2010). The Campaign provides information about conditions and social norms associated with the occurrence of CSA and offers training for parents and child care professionals to identify and respond to sexual behaviors of children. Along with media coverage and community presentations and workshops, a variety of CSA prevention materials and resources are available on their Website (www.enoughabuse.org). The Campaign also supports efforts to affect public policies related to CSA (e.g., reforming the state's statute of limitations) (Schober, Fawcett and Bernier, 2012a). Evaluations are promising. Following the Campaign, more Massachusetts residents believed that adults, rather than children, should take responsibility for preventing CSA (an increase from 69% in 2003 to 93% in 2007; Schober et al., 2012a). As another potential indicator of program impact, substantiated reports of CSA in Massachusetts declined 69% from 1990 to 2007. Similar effects were observed in Georgia, as substantiated reports decreased four of the 5 years of the implementation period (Schober et al., 2012b). These findings suggest that a state-wide effort can impact abuse rates and promote community responsibility for prevention.

Evaluations of CSA-targeted media campaigns in the U.S. have shown promise (e.g., Self-Brown et al., 2008). An evaluation of Stop It Now! was shown to effectively change public awareness and knowledge about CSA over a 2-year period (Chasan-Taber and Tabachnick, 1999). Other evaluations of media campaigns in other U.S. cities, as well as other countries (see Lalor and McElvaney, 2010), show similar positive outcomes (e.g., increased knowledge, awareness, and disclosures). Despite methodological limitations of these evaluations, public awareness initiatives hold great promise for focusing on the most appropriate targets: potential offenders and bystanders. In Berlin, the Prevention Project Dunkelfeld aims to prevent the sexual abuse of children by providing clinical and support services to individuals who are sexually interested in children and want help controlling their interests. An initial evaluation of the project demonstrated its effectiveness in reaching potential offenders via a media campaign, and persuading them to enroll in a treatment program (Beier et al., 2009a, 2009b).

Internationally, there has been significant media coverage about CSEC in sex tourist destination countries (e.g., the Philippines, Thailand, Taiwan, Brazil, Nicaragua, and Costa Rica) largely as a result of grassroots efforts. For example, in Costa Rica an information campaign was launched entitled, "Behind a job promise could be a destination of pain!" aimed at adolescent girls to increase their awareness of risks and enable them to resist what might seem like tempting offers of work or travel that could lead to exploitation in the sex industry (U.S. Department of State (2010), p. 121). In the U.S., public awareness media campaigns targeting primary prevention of CSEC are limited and lack evaluations, and the few that do exist focus exclusively on girls (e.g., the Minnesota Women's Foundation campaign, "MN girls are not for sale" or Shared Hope International's billboard campaign, "This man wants to rent your daughter" (available at: www.DoYouKnowLacy.com).

Other examples of societal-level prevention efforts include criminal justice system responses to offenders. All U.S. states have criminal laws prohibiting sexual relationships between adults and youth (Myers, 2011). In addition to criminal charges and incarceration, criminal justice responses also include community protection policies such as community notification and expansive sex offender residency restrictions (Letourneau and Levinson, 2011). These approaches are most often considered to be tertiary rather than primary prevention strategies (since they apply after abuse has occurred). However, because of the potential deterrent effect on future acts of abuse, they could serve as primary prevention. Unfortunately, most legislative initiatives have not been adequately evaluated and what research is available suggests that sex offender policies are not only ineffective but harmful (Horowitz, 2015; Letourneau and Levenson, 2011; Letourneau et al., 2014; Zandbergen, Levenson and Hart, 2010). Thus, the impact of these legislative initiatives on primary prevention of CSA perpetration is unknown.

With regard to CSEC, the U.S. enacted the Trafficking Victims Protection Act in 2000 (TVPA; P.L. 106–386). TVPA is considered to be the seminal piece of U.S. legislation to combat human trafficking and help victims as it criminalizes human trafficking on a federal level (Adams et al., 2010). TVPA's three main components, referred to as the "3P" paradigm, include Protection, Prosecution, and Prevention. The act extended existing anti-trafficking criminal statutes and also strengthened efforts to prosecute traffickers along with increased prevention efforts (U.S. Department of Justice (2010a), 2010b). TVPA was reauthorized in 2003, 2005, and in 2008 with the William Wilberforce Trafficking Victims Protection Reauthorization Act (P.L. 110–457). The reauthorization of TVPA in 2013 enhanced law enforcement capacity to combat sex tourism by prosecuting U.S. citizens who travel or live abroad and purchase children for sex (Alliance to End Slavery and Trafficking [ATEST], 2014). Over the past 10 years since TVPA was enacted, the number of cases of human trafficking (including cases of child sex trafficking) investigated, charged, and prosecuted in the U.S. has increased (U.S. Department of Justice (2010b)). However, some experts believe that progress is too slow. For example, Farrell et al. (2012) found that as of 2012, only 700 cases of trafficking suspects had been federally prosecuted while only 18 states had attempted prosecutions under state human trafficking statutes.

Human rights instruments are essential tools to effectively protect the rights of children. The First World Congress Against Commercial Sexual Exploitation of Children held in Stockholm, Sweden in 1996 is often identified as the first international effort to both acknowledge the problem of commercial exploitation of children and to offer guidelines for combating child sex trafficking. Since the First World Congress, many additional international legal frameworks to combat child sex trafficking have been established. One of the most influential human rights organizations is the United Nations (UN), which has been instrumental in combating CSEC. In 1989, for example, the UN General Assembly adopted the *Convention on the Rights of the Child* (CRC). Article 34 of the CRC states that national governments are obliged to protect children from all forms of sexual exploitation and sexual abuse and that they should take all appropriate measures to prevent children from being sexually exploited. Other international human rights instruments include the Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Child Prostitution and Child Pornography entered into force in 2002, the *Protocol to Prevent, Suppress, and Punish Trafficking in Persons, Especially Women and Children* entered into force in 2003, the *African Charter on the Rights and Welfare of the Child* entered into force in 1999, and the Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse, also known as the Lanzarote Convention, which entered into force in 2010 (Council of Europe, 2012; UNICEF, 2014; United Nations General Assembly, 2000). The Lanzarote Convention is perhaps the most comprehensive legal instrument on the protection of children against sexual exploitation and sexual abuse, as it covers all possible kinds of sexual offenses against minors (including sexual abuse, child prostitution, child pornography, and solicitation of children for sexual purposes, including Internet grooming) and includes commercial and non-commercial forms of sexual exploitation. It also promotes national and international cooperation, and facilitates the exchange of stakeholders' views and experiences on good practices in preventing and combating sexual exploitation and sexual abuse of children (see www.coe.int/lanzarote).

National Action Plans for preventing child maltreatment are beginning to appear which incorporate many of the societal-level approaches described in this section. For example, the World Health Organization's Regional Committee for Europe recently released a national action plan for Europe entitled *Investing in Children: The European Child Maltreatment Prevention Action Plan 2015–2020* (WHO, 2014). The plan calls for both population-level actions and selective approaches for high-risk groups and outlines the following objectives:

- Make health risks more visible by setting up information systems
- Strengthen governance through partnerships and multi-sectoral action by developing national plans
- Reduce risks by strengthening health systems

Australia has developed a similar national action plan entitled *Protecting Children is Everyone's Business*, the goal of which is to ensure the safety and well-being of Australia's children (Commonwealth of Australia (2010)). Many action plans target general child health and well-being, rather than specifically preventing child maltreatment in general or sexual exploitation in particular.

Risk factors for sexual exploitation are different from other forms of child maltreatment, and thus CSA prevention strategies must be unique (Dubowitz, 2014; Olafson, 2011). To that end, Sri Lanka's establishment in 1998 of the National Child Protection Authority (NCPA; see www.childprotection.gov.lk) is notable. Authority board members, representing many disciplines (law, psychology, non-governmental organizations, education, social services, tourism, media), report directly to the President of Sri Lanka (de Zoysa, 2002). Functions of the NCPA include advising the Government in the formulation of a national policy on the prevention of child abuse and creating an awareness of children's rights to be protected from abuse. In the U.S., a group of individuals formed the National Coalition to Prevent Child Sexual Abuse and Exploitation (www.preventtogether.org) and ILO, 2012 produced the *National Plan to Prevent the Sexual Abuse and Exploitation of Children* to address six targets (Research; Public Awareness; End the Demand; Policies and Organizational Practice; Collaborative Practices; Funding). Another action plan developed in the U.S. focuses specifically on human trafficking, including child sex trafficking. ILO, 2012, President Obama created an interagency task force to monitor and combat trafficking in persons that developed an action plan for 2013–2017, seeking to create a victim-centered approach to treatment, public awareness, and outreach efforts for those affected by human trafficking (President's Interagency Taskforce, 2014). Others in the U.S. have called for federal leadership (e.g., a National Institute on Sexual Violence) to signal the government's commitment to ending the sexual exploitation of youth (Freyd, 2015). Such an institute could provide guidance on best practices for preventing sexual exploitation, especially in YSOs. For example, the extent and quality of prevention training in YSOs is unknown. Alarming, only 18 U.S. states require school districts to provide training on sexual misconduct (U.S. GAO, 2014).

Social, cultural, and economic factors all contribute to commercial sexual exploitation of children. Advocates must address the underlying systemic and structural determinants of CSEC, including discrimination, inequality, and poverty. Child sex traffickers exploit conditions in impoverished countries in Asia, Eastern Europe, Africa, and Latin America, for example, that offer few employment opportunities, have limited educational opportunities, and are characterized by high rates of organized crime and violence against women and children, gender inequality, government corruption, political instability, and armed conflict, all of which render women and children vulnerable to sexual exploitation (Duger, 2015; Kristof and WuDunn, 2009; Miller-Perrin and Wurtele, 2017; UNODC, 2009). Unfortunately, very little research has explored how societal culture and policies influence CSA and CSEC, despite the calls for prevention efforts targeting adults and systems within the broader macro-system (e.g., UNICEF, 2014).

Conclusion

All forms of sexual exploitation of children are egregious human rights violations and world-wide public health problems. This brief overview identifies global strategies for preventing the sexual exploitation of youth. Clearly, for sexual exploitation of youth to be eliminated, a spectrum of approaches at all levels of the ecology must be employed. Confronting the sexual exploitation of our youth should be a priority matter under the public agenda and must involve national child protection agencies, departments of health and education, and mass media to generate a culture of zero tolerance of sexual exploitation of children and adolescents.

References

- Boy Scouts of America [BSA]. n.d. Youth protection. Retrieved from: www.scouting.org/Training/YouthProtection.htm.
- Centers for Disease Control and Prevention [CDC], 2010. Findings from the 2009 Child Maltreatment Prevention Environmental Scan of State Public Health Agencies. Retrieved from: http://www.cdc.gov/violenceprevention/pdf/PHLI_CM_environmental_scan-a.pdf.
- Abramovich, E., 2005. Childhood sexual abuse as a risk factor for subsequent involvement in sex work: a review of empirical findings. *J. Psychol. Hum. Sex.* 17 (1–2), 361–376.
- Ackard, D.M., Neumark-Sztainer, D., 2003. Multiple sexual victimizations among adolescent boys and girls: prevalence and associations with eating behaviors and psychological health. *J. Child Sex. Abuse* 12 (1), 17–37.
- Adams, W., Owens, C., Small, K., 2010. Effects of Federal Legislation on the Commercial Sexual Exploitation of Children. U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention.
- Alexander, K., Stafford, A., Lewis, R., 2011. The Experiences of Children Participating in Organized Sport in the UK. Retrieved from: <http://www.childprotection.edu.ac.uk>.
- Amber, J., 2010. Black Girls for Sale. *Essence Magazine*. Retrieved from: http://www.jeanineamber.com/uploads/cgblog/id21/black_girls_for_sale_.pdf.
- Amstadter, A.B., Broman-Fulks, J., Zinzow, H., Ruggiero, K.J., Cercone, J., 2009. Internet-based interventions for traumatic stress-related mental health problems: a review and suggestions for future research. *Clin. Psychol. Rev.* 29, 410–420.
- Andrzejewski, C.E., Davis, H.A., 2008. Human contact in the classroom: exploring how teachers talk about and negotiate touching students. *Teach. Teach. Educ.* 24, 779–794.
- American Psychological Association [APA], 2007. Report of the APA Task Force on the Sexualization of Girls. American Psychological Association, Washington, DC. Available from: www.apa.org/pi/wpo/sexualization.html.
- American Professional Society on the Abuse of Children [APSAC], 2013. The Commercial Sexual Exploitation of Children: The Medical Provider's Role in Identification, Assessment and Treatment. Available from: www.apsac.org.
- Arnold, E.M., Rotheram-Borus, M.J., 2009. Comparison of prevention programs for homeless youth. *Prev. Sci.* 10, 76–86.
- Aronowitz, A.A., 2001. Smuggling and trafficking in human beings: the phenomenon, the markets that drive it and the organizations that promote it. *Eur. J. Crim. Policy Res.* 9, 163–195.
- Alliance to End Slavery and Trafficking [ATEST], 2014. Recommendations for a Trafficking in Persons Focus Country Approach. Retrieved from: <http://www.endslaveryandtrafficking.org/coming-into-focus-how-the-us-government-can-tip-the-fight-against-human-trafficking/>.
- Averdijk, M., Muller-Johnson, K., Eisner, M., 2012. Sexual Victimization of Children and Adolescents in Switzerland. Retrieved from: www.optimusstudy.org.
- Baams, L., Dubas, J.S., Overbeek, G., van Aken, M.A.G., 2015. Transitions in body and behavior: a meta-analytic study on the relationship between pubertal development and adolescent sexual behavior. *J. Adolesc. Health* 56, 586–598.
- Babatsikos, G., 2010. Parents' knowledge, attitudes and practices about preventing child sexual abuse: a literature review. *Child. Abuse Rev.* 19, 107–129.

- Babatsikos, G., Miles, D., 2015. How parents manage the risk of child sexual abuse: a grounded theory. *J. Child Sex. Abuse* 24, 55–76.
- Bagley, C., Mallick, K., 2000. Prediction of sexual, emotional, and physical maltreatment and mental health outcomes in a longitudinal cohort of 290 adolescent women. *Child Maltreat.* 5 (3), 218–226.
- Bagley, C., Young, L., 1987. Juvenile prostitution and child sexual abuse: a controlled study. *Can. J. Community Ment. Health* 6, 5–26.
- Banks, D., Kyckelhahn, T., 2011. Characteristics of Suspected Human Trafficking Incidents, 2008–2010. US Department of Justice, Office of Justice Programs, Bureau of Justice Statistics.
- Barnitz, L., 1998. Commercial Sexual Exploitation of Children: Youth Involved in Prostitution, Pornography and Sex Trafficking. Youth Advocate Program International, Washington DC.
- Barnitz, L., 2001. Effectively responding to the commercial sexual exploitation of children: a comprehensive approach to prevention, protection, and reintegration services. *Child Welf.* 80 (5), 597–610.
- Barrett, B., 2010. Childhood sexual abuse and adulthood parenting: the mediating role of intimate partner violence. *J. Aggress. Maltreat. Trauma* 19 (3), 323–346.
- Barth, J., Bermetz, L., Heim, E., Trelle, S., Tonia, T., 2013. The current prevalence of child sexual abuse worldwide: a systematic review and meta-analysis. *Int. J. Public Health* 58, 469–483.
- Bebbington, P.E., Jonas, S., Brugha, T., Meltzer, H., Jenkins, R., Cooper, C., King, M., McManus, S., 2011. Child sexual abuse reported by an English national sample: characteristics and demography. *Soc. Psychiatry Psychiatr. Epidemiol.* 46, 255–262.
- Beck, A.J., Harrison, P.M., Guerino, P., 2010. Sexual Victimization in Juvenile Facilities Reported by Youth, 2008–09 (NCJ Report No. 228416). Retrieved from: <http://bjs.ojp.usdoj.gov/content/pub/pdf/svjfry09.pdf>.
- Beebe, T.J., Asche, S.E., Harrison, P.A., Quinlan, K.B., 2004. Heightened vulnerability and increased risk-taking among adolescent chat room users: results from a statewide school survey. *J. Adolesc. Health* 35, 116–123.
- Beier, K.M., Ahlers, C.J., Goecker, D., Neutze, J., Mundt, I.A., Hupp, E., Schaefer, G.A., 2009a. Can pedophiles be reached for primary prevention of child sexual abuse? First results of the Berlin Prevention Project Dunkelfeld (PPD). *J. Forensic Psychiatry Psychol.* 20 (6), 851–867.
- Beier, K.M., Neutze, J., Mundt, I.A., Ahlers, C.J., Goecker, D., Konrad, A., Schaefer, G.A., 2009b. Encouraging self-identified pedophiles and hebephiles to seek professional help: first results of the Prevention Project Dunkelfeld. *Child Abuse Negl.* 33, 545–549.
- Bell, R.E., 2001. Sex trafficking: a financial crime perspective. *J. Financ. Crime* 9 (2), 165–177.
- Berger, L.M., Slack, K.S., Waldfoegel, J., Bruch, S.K., 2010. Caseworker-perceived caregiver substance abuse and child protective services outcomes. *Child Maltreat.* 15 (3), 199–210.
- Berliner, L., 2011. Child sexual abuse: definitions, prevalence and consequences. In: Myers, J.E.B. (Ed.), *The APSAC Handbook on Child Maltreatment*, third ed. Sage, Thousand Oaks, CA, pp. 215–232.
- Berliner, L., Conte, J.R., 1990. The process of victimization: the victims' perspective. *Child Abuse Negl.* 14, 29–40.
- Berliner, L., Elliott, D.M., 2002. Sexual abuse of children. In: Myers, J.E.B., Berliner, L., Briere, J., Hendrix, C.T., Jenny, C., Reid, T.A. (Eds.), *The APSAC Handbook on Child Maltreatment*, second ed. Sage, Thousand Oaks, CA, pp. 55–78.
- Black, D.A., Heyman, R.E., Smith Slep, A.M., 2001. Risk factors for child sexual abuse. *Aggress. Violent Behav.* 6, 203–229.
- Blasingame, G.D., 2010. Prevention efforts and persons with intellectual and other developmental disabilities. In: Kaufman, K.L. (Ed.), *The Prevention of Sexual Violence: A Practitioner's Sourcebook*. NEARI Press, Holyoke, MA, pp. 379–398.
- Boney-McCoy, S., Finkelhor, D., 1995. Prior victimization: a risk factor for child sexual abuse and for PTSD-related symptomatology among sexually abused youth. *Child Abuse Negl.* 19, 1401–1421.
- Brantley, N., 2009. Framing the Issues of Commercial Sexual Exploitation of Children. Motivating, Inspiring, Supporting and Serving Sexually Exploited Youth (MISSEY), Oakland, CA.
- Brassard, M.R., Fioravanti, C.M., 2015. School-based child abuse prevention programs. *Psychol. Sch.* 52 (1), 40–60.
- Brawn, K.M., Roe-Sepowitz, D., 2008. Female juvenile prostitutes: exploring the relationship to substance use. *Child. Youth Serv. Rev.* 30, 1395–1402.
- Bronfenbrenner, U., 1977. Toward an experimental ecology of human development. *Am. Psychol.* 32, 513–530.
- Bronfenbrenner, U., 1979. *The Ecology of Human Development: Experiments by Nature and Design*. Harvard University Press, Cambridge, MA.
- Brown, J., Cohen, P., Johnson, J.G., Salzinger, S., 1998. A longitudinal analysis of risk factors for child maltreatment: findings of a 17-year prospective study of officially recorded and self-reported child abuse and neglect. *Child Abuse Negl.* 22 (11), 1065–1078.
- Brunnberg, E., Bostrom, M.L., Berglund, M., 2012. Sexual force at sexual debut. Swedish adolescents with disabilities at higher risk than adolescents without disabilities. *Child Abuse Negl.* 36, 1401–1421.
- Budin, L., Johnson, C., 1989. Sex abuse prevention programs: offenders' attitudes about their efficacy. *Child Abuse Negl.* 13, 77–87.
- Burgess, E.S., Wurtele, S.K., 1998. Enhancing parent-child communication about sexual abuse: a pilot study. *Child Abuse Negl.* 22, 1167–1175.
- Burrow-Sanchez, J.J., Call, M.E., Zheng, R., Drew, C.J., 2011. How school counselors can help prevent online victimization. *J. Couns. Dev.* 89, 3–10.
- Butchart, A., Phinney Harvey, A., Mian, M., Fürmss, T., 2006. *Preventing Child Maltreatment: A Guide to Taking Action and Generating Evidence*. WHO, Geneva, Switzerland.
- Butler, A.C., 2013. Child sexual assault: risk factors for girls. *Child Abuse Negl.* 37, 643–652.
- Cecchet, S.J., Thoburn, J., 2014. The psychological experience of child and adolescent sex trafficking in the United States: trauma and resilience in survivors. *Psychol. Trauma Theory Res. Pract. Policy* 6 (5), 482–493.
- Centers for Disease Control and Prevention [CDC]. n.d. *The Social-Ecological Model: A Framework for Prevention*. Retrieved from: <http://www.cdc.gov/violenceprevention/overview/social-ecologicalmodel.html>.
- Chasen-Taber, L., Tabachnick, J., 1999. Evaluation of a child sexual abuse prevention program. *Sex. Abuse J. Res. Treat.* 11, 279–292.
- Chen, J.Q., Chen, D.G., 2005. Awareness of child sexual abuse prevention education among parents of Grade 3 elementary school pupils in Fuxin City, China. *Health Educ. Res.* 20 (5), 540–547.
- Chen, D.W., McGeehan, P., May 1, 2012. Social Media Rules Limit New York Student-teacher Contact. Retrieved from: <http://www.nytimes.com/2012/05/01/nyregion/social-media-rules-for-nyc-school-staff-limits-contact-with-students.html>.
- Chen, J.Q., Dunne, M.P., Han, P., 2007. Prevention of child sexual abuse in China: knowledge, attitudes and communication practices of parents of elementary school children. *Child Abuse Negl.* 31 (7), 747–755.
- Child Protection in Sport Unit, 2003. *Standards for Safeguarding and Protecting Children in Sport*. Child Protection in Sport Unit, Leicester, UK. Retrieved from: <http://www.therfl.co.uk/~therflc/clientdocs/CPSU%20Standards.pdf>.
- Child Trends, 2013. *Statutory Rape: Sex between Young Teens and Older Individuals*. Retrieved from: http://www.childtrends.org/wp-content/uploads/2012/01/100_Statutory-Rape.pdf.
- Choi, K.R., 2015. Risk factors for domestic minor sex trafficking in the United States: a literature review. *J. Forensic Nurs.* 11 (2), 66–76.
- Choi, H., Klein, C., Shin, M.S., Lee, H.J., 2009. Posttraumatic stress disorder (PTSD) and disorders of extreme stress (DESNOS) symptoms following prostitution and child abuse. *Violence Against Women* 15 (8), 933–951.
- Clarke, R.J., Clarke, E.A., Roe-Sepowitz, D., Fey, R., 2012. Age at entry into prostitution: relationship to drug use, race, suicide, education level, childhood abuse, and family experiences. *J. Hum. Behav. Soc. Environ.* 22, 270–289.
- Clawson, H.J., Dutch, N., Solomon, A., Grace, L.G., 2009. *Human Trafficking into and within the United States: A Review of the Literature*. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation.
- Cobbina, J.E., Oselin, S.S., 2011. It's not only for the money: an analysis of adolescent versus adult entry into street prostitution. *Sociol. Inq.* 81, 310–332.

- Cole, J., Sprang, G., Lee, R., Cohen, J., 2014. The trauma of commercial sexual exploitation of youth: a comparison of CSEC victims to sexual abuse victims in a clinical sample. *J. Interpers. Violence*.
- Collin-Vézina, D., Daigneault, I., Hébert, M., 2013. Lessons learned from child sexual abuse research, prevalence, outcomes, and preventive strategies. *Child Adolesc. Psychiatry Ment. Health* 7 (22), 1–9.
- Commonwealth of Australia, 2010. Protecting Children Is Everyone's Business: National Framework for Protecting Australia's Children 2009-2020. Retrieved from: https://www.dss.gov.au/sites/default/files/documents/pac_annual_rpt_0.pdf.
- Conte, J.R., Wolf, S., Smith, T., 1989. What sexual offenders tell us about prevention strategies. *Child Abuse Negl.* 13, 293–301.
- Cooper, S.W., Estes, R.J., Giardino, A.P., Kellogg, N.D., Vieth, V.I., 2007. *Child Sexual Exploitation for Healthcare, Social Services, and Law Enforcement Professionals*. G. W. Medical Publishing, Inc, St. Louis, MO.
- Council of Europe, 2012. Council of Europe Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse. Council of Europe Publishing, Strasbourg Cedex. Retrieved from: http://www.coe.int/t/dghl/standardsetting/children/default_en.asp.
- Countryman-Roswurm, K., Bolin, B.L., 2014. Domestic minor sex trafficking: assessing and reducing risk. *Child Adolesc. Soc. Work J.* 31 (6), 521–538.
- Courtois, C.A., 2004. Complex trauma, complex reactions: assessment and treatment. *Psychother. Theory Res. Pract. Train.* 41 (4), 412–425.
- Cranley, D., 2015. 8 Ways to Create Their Fate: Protecting the Sexual Innocence of Children in Youth Serving Organizations. Tate Publishing, Mustang, OK.
- Cray, A., Miller, K., Durso, L., 2013. Seeking Shelter: The Experiences and Unmet Needs of LGBT Homeless Youth. Center for American Progress, Washington, DC. Retrieved from: <https://www.americanprogress.org/wp-content/uploads/2013/09/LGBTHomelessYouth.pdf>.
- Currier, L.L., Wurtele, S.K., 1996. A pilot study of previously abused and non-sexually abused children's responses to a personal safety program. *J. Child Sex. Abuse* 5, 71–87.
- Curtis, R., Terry, K., Dank, M., Dombrowski, K., Khan, B., 2008. *The Commercial Sexual Exploitation of Children in New York City*. In: *The CSEC Population in New York City: Size, Characteristics and Needs*, vol. 1. National Institute of Justice, US Department of Justice. Retrieved from: <https://www.ncjrs.gov/pdffiles1/nij/grants/225083.pdf>.
- Cusick, L., 2002. Youth prostitution: a literature review. *Child. Abuse Rev.* 11, 230–251.
- Cusick, L., Hickman, M., 2005. "Trapping" in drug use and sex work careers. *Drugs Educ. Prev. Policy* 12 (5), 369–379.
- Cyr, K., Chamberland, C., Clément, M.-E., Lessard, G., Wemmers, J., Collin-Vézina, D., Gagné, M.-H., Damant, D., 2013. Polyvictimization and victimization of children and youth: results from a population survey. *Child Abuse Negl.* 37 (10), 814–820.
- Dank, M., 2011. The commercial sexual exploitation of children in New York City. In: Dalla, R.L., Baker, L.M., DeFrain, J., Williamson, C. (Eds.), *Global Perspectives on Prostitution and Sex Trafficking*. Lexington Books, Lanham, MD, pp. 201–217.
- Davidson, J.C., Martellozzo, E., 2008. Protecting vulnerable young people in cyberspace from sexual abuse: raising awareness and responding globally. *Police Pract. Res.* 9 (4), 277–289.
- Davidson, J.C., Martellozzo, E., Lorenz, M., 2009. Evaluation of CEOP ThinkUKnow Internet Safety Programme and Exploration of Young People's Internet Safety Knowledge. Retrieved from: <http://www.cats-rp.org.uk/pdf%20files/Internet%20safety%20report%204-2010.pdf>.
- Davies, E.A., Jones, A.C., 2013. Risk factors in child sexual abuse. *J. Forensic Leg. Med.* 20 (3), 146–150.
- Davis, M.K., Gidycz, C.A., 2000. Child sexual abuse prevention programs: a meta-analysis. *J. Clin. Child Psychol.* 29, 257–265.
- de Zoysa, P., 2002. Child sexual abuse in Sri Lanka: the current state of affairs and recommendations for the future. *J. Child Sex. Abuse* 11 (2), 97–113.
- Deblinger, E., Thakkar-Kolar, R.R., Berry, E.J., Schroeder, C.M., 2010. Caregivers' efforts to educate their children about child sexual abuse: a replication study. *Child. Maltreat.* 15 (1), 91–100.
- Dilorio, C., Pluhar, E., Belcher, L., 2003. Parent-child communication about sexuality: a review of the literature from 1980-2002. *J. HIV/AIDS Prev. Educ. Adolesc. Child.* 5 (3/4), 7–32.
- Dombrowski, S.C., LeMasney, J.W., Ahia, C.E., Dickson, S.A., 2004. Protecting children from online sexual predators: technological, psychoeducational, and legal considerations. *Prof. Psychol. Res. Pract.* 35 (1), 65–73.
- Dorfman, L., Mejia, P., Cheyne, A., Gonzalez, P., 2011. Case by Case: News Coverage of Child Sexual Abuse. Berkeley Media Studies Group, Berkeley, CA.
- Dorfman, L., Mejia, P., Gonzalez, P., Cheyne, A., 2012. Breaking News on Child Sexual Abuse: Early Coverage of Penn State. Berkeley Media Studies Group, Berkeley, CA.
- Dube, S.R., Anda, R.F., Felitti, V.J., Croft, J.B., Edwards, V.J., Giles, W.H., 2001. Growing up with parental alcohol abuse: exposure to childhood abuse, neglect, and household dysfunction. *Child Abuse Negl.* 25, 1627–1640.
- Dubowitz, H., 2014. The Safe Environment for Every Kid (SEEK) Model: helping promote children's health, development, and safety. *Child Abuse Negl.* 38, 1725–1733.
- Dubowitz, H., Kim, J., Black, M.M., Weisbart, C., Semiati, J., Magder, L.S., 2011. Identifying children at high risk for a child maltreatment report. *Child Abuse Negl.* 35, 96–104.
- Duger, A., 2015. Focusing on prevention: the social and economic rights of children vulnerable to sex trafficking. *Health Hum. Rights J.* 17 (1), 114–123.
- Dunn, M.G., Tarter, R.E., Mezzich, A.C., Vanyukov, M., Kirisci, L., Kirillova, G., 2002. Origins and consequences of child neglect in substance abuse families. *Clin. Psychol. Rev.* 22, 1063–1090.
- Durkin, K.F., DeLong, R.L., 2012. Internet crimes against children. In: Yan, Z. (Ed.), *Encyclopedia of Cyber Behavior*. IGI Global, Hersey, PA, pp. 799–807.
- End Child Prostitution and Trafficking [ECPAT] International, 2008. Combating Child Sex Tourism: Questions & Answers. Retrieved from: http://www.ecpat.net/sites/default/files/cst_faq_eng.pdf.
- End Child Prostitution and Trafficking [ECPAT] Netherlands, 2009. Offenders Beware: Child Sex Tourism Case Studies. Retrieved from: <http://www.defenceforchildren.nl/images/13/1401.pdf>.
- End child Prostitution and Trafficking [ECPAT] United States, 2013. And Boys Too: An ECPAT-USA Discussion Paper about the Lack of Recognition of the Commercial Sexual Exploitation of Boys in the United States. Retrieved from: <https://d1qkyo3pi1c9bx.cloudfront.net/00028B1B-B0DB-4FCD-A991-219527535DAB/1b1293ef-1524-4f2c-b148-91db11379d11.pdf>.
- Edwards, J.M., Iritani, B.J., Hallfors, D.D., 2006. Prevalence and correlates of exchanging sex for drugs or money among adolescents in the United States. *Sex. Transm. Infect.* 82 (5), 354–358.
- Elliott, M., Browne, K., Kilcoyne, J., 1995. Child sexual abuse prevention: what offenders tell us. *Child Abuse Negl.* 19, 579–594.
- Elrod, J.M., Rubin, R.H., 1993. Parental involvement in sexual abuse prevention education. *Child Abuse Negl.* 17, 527–538.
- Erooga, M., 2009. Towards Safer Organisations: Adults Who Pose a Risk to Children in the Workplace and Implications for Recruitment and Selection. NSPCC, London. Retrieved from: www.nspcc.org.uk/inform.
- Erooga, M., Allnock, D., Telford, P., 2012. Towards Safer Organisations II: Using the Perspectives of Convicted Sex Offenders to Inform Organisational Safeguarding of Children. NSPCC, London. Retrieved from: www.nspcc.org.uk.
- Estes, R.J., Weiner, N.A., 2001. The Commercial Sexual Exploitation of Children in the U. S., Canada, and Mexico. Available from: <http://caster.ssw.upenn.edu/restes/CSEC.htm>.
- Estes, R.J., Weiner, N.A., 2005. The commercial sexual exploitation of children in the United States. In: Cooper, S.W., Estes, R.J., Giardino, A.P., Kellogg, N.D., Vieth, V.I. (Eds.), *Medical, Legal, and Social Science Aspects of Child Sexual Exploitation: A Comprehensive Review of Pornography, Prostitution, and Internet Crimes*. G. W. Medical Publishing, Inc, St. Louis, Missouri.
- Farley, M., Kelly, V., 2000. Prostitution: a critical review of the medical and social sciences literature. *Women Crim. Justice* 11, 29–64.
- Farrell, A., McDevitt, J., Pfeffer, R., Fahy, S., Owens, C., Dank, M., Adams, W., 2012. Identifying Challenges to Improve the Investigation and Prosecution of State and Local Human Trafficking Cases. U.S. Department of Justice, Office of Justice Programs, National Institute of Justice, Washington, D.C.. Available from: <https://www.ncjrs.gov/pdffiles1/nij/grants/238795.pdf> (Federal Bureau of Investigation).
- FBI, 2014. Innocence Lost. Available from: http://www.fbi.gov/about-us/investigate/vc_majorthefts/cac/innocencelost.

- Felitti, V.J., Anda, R.F., Nordenberg, D., Williamson, D.F., Spitz, A.M., Edwards, V., Marks, J.S., 1998. Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: the Adverse Childhood Experiences (ACE) Study. *Am. J. Prev. Med.* 14 (4), 245–258.
- Fergusson, D.M., Lynskey, M.T., Horwood, L.J., 1996. Childhood sexual abuse and psychiatric disorders in young adulthood: prevalence of sexual abuse and factors associated with sexual abuse. *J. Am. Acad. Child Adolesc. Psychiatry* 34 (10), 1355–1374.
- Fergusson, D.M., McLeod, G.F.H., Horwood, L.J., 2013. Childhood sexual abuse and adult developmental outcomes: findings from a 30-year longitudinal study in New Zealand. *Child Abuse Negl.* 37, 664–674.
- Fernandes-Alcantara, A.L., January 15, 2013. Runaway and Homeless Youth: Demographics and Programs. Congressional Research Service, pp. 7–5700. Retrieved from: http://www.nchcw.org/uploads/7/5/3/7/533556/crs_2013_rhya_history_and_lit_review.pdf.
- Finkelhor, D., 2007. Prevention of sexual abuse through educational programs directed toward children. *Pediatrics* 120 (3), 640–645.
- Finkelhor, D., 2008. *Childhood Victimization: Violence, Crime, and Abuse in the Lives of Young People*. Oxford University Press, New York.
- Finkelhor, D., 2009. The prevention of childhood sexual abuse. *Future Child.* 19 (2), 53–78.
- Finkelhor, D., Jones, L., 2012. Have Sexual Abuse and Physical Abuse Declined Since the 1990s? Retrieved from: www.unh.edu/ccrc.
- Finkelhor, D., Hotaling, G., Lewis, I.A., Smith, C., 1990. Sexual abuse in a national survey of adult men and women: prevalence, characteristics, and risk factors. *Child Abuse Negl.* 14, 19–28.
- Finkelhor, D., Asdigian, N., Dziuba-Leatherman, J., 1995. The effectiveness of victimization prevention instruction: an evaluation of children's responses to actual threats and assaults. *Child Abuse Negl.* 19 (2), 137–149.
- Finkelhor, D., Ormrod, R., Turner, H., Hamby, S.L., 2005. The victimization of children and youth: a comprehensive, national survey. *Child. Maltreat.* 10 (11), 5–25.
- Finkelhor, D., Ormrod, R.K., Turner, H.A., 2007a. Poly-victimization and trauma in a national longitudinal cohort. *Dev. Psychopathol.* 19, 149–166.
- Finkelhor, D., Ormrod, R.K., Turner, H.A., 2007b. Poly-victimization: a neglected component in child victimization trauma. *Child Abuse Negl.* 31, 149–166.
- Finkelhor, D., Hammer, H., Sedlak, A.J., 2008. Sexually Assaulted Children: National Estimates and Characteristics. Retrieved from: <http://www.ojdp.gov/publications/PubAbstract.asp?pubi=235922>.
- Finkelhor, D., Ormrod, R.K., Turner, H.A., 2009a. Lifetime assessment of poly-victimization in a national sample of children and youth. *Child Abuse Negl.* 33, 403–411.
- Finkelhor, D., Ormrod, R., Turner, H., Holt, M., 2009b. Pathways to poly-victimization. *Child. Maltreat.* 14 (4), 316–329.
- Finklea, K.M., Fernandes-Alcantara, A.L., Siskin, A., June 21, 2011. Sex Trafficking of Children in the United States: Overview and Issues for Congress. Available from: www.fas.org/sgp/crs/misc/R41878.pdf.
- First World Congress against Commercial Sexual Exploitation of Children, 1996. Declaration and Agenda for Action. Retrieved from: www.ecpat.net/sites/default/files/stockholm_declaration_1996.
- Fleming, J., Mullen, P., Bammer, G., 1997. A study of potential risk factors for sexual abuse in childhood. *Child Abuse Negl.* 21 (1), 49–58.
- Flowers, R.B., 1998. *The Prostitution of Women and Girls*. McFarland & Company, Inc, Jefferson, NC.
- Flowers, R.B., 2001. The sex trade industry's worldwide exploitation of children. *Ann. Am. Acad.* 575, 147–157.
- Foster, H., Hagan, J., Brooks-Gunn, J., 2008. Growing up fast: stress exposure and subjective "weathering" in emerging adulthood. *J. Health Soc. Behav.* 49, 162–177.
- Freyd, J.J., 2015. Proposal for a national institute on sexual violence. *J. Trauma Dissociation* 16, 497–499.
- Friedman, M.S., Marshal, M.P., Guadamuz, T.E., Wei, C., Wong, C.T., Saewyc, M.M., Stall, R., 2011. A meta-analysis of disparities in childhood sexual abuse, parental physical abuse, and peer victimization among sexual minority and sexual nonminority individuals. *Am. J. Public Health* 101 (8), 1481–1494.
- Friesen, M.D., Woodward, L.J., Horwood, L.J., Fergusson, D.M., 2010. Childhood exposure to sexual abuse and partnership outcomes at age 30. *Psychol. Med.* 40 (4), 679–688.
- Fryda, C.M., Hulme, P.A., 2015. School-based childhood sexual abuse prevention programs: an integrative review. *J. Sch. Nurs.* 31 (3), 167–182.
- Gallagher, G., 2000. The extent and nature of known cases of institutional child sexual abuse. *Br. J. Soc. Work* 30, 795–817.
- Gobin, R.L., Freyd, J.J., 2014. The impact of betrayal trauma on the tendency to trust. *Psychol. Trauma Theory Res. Pract. Policy* 6 (5), 505–511.
- Goodyear-Brown, P., Fath, A., Myers, L., 2012. Child sexual abuse: the scope of the problem. In: Goodyear-Brown, P. (Ed.), *Handbook of Child Sexual Abuse: Identification, Assessment, and Treatment*. John Wiley & Sons, Inc, Hoboken, NJ, pp. 3–28.
- Gordon, R., 1987. An operational definition of disease prevention. In: Sternberg, J.A., Silverman, M.M. (Eds.), *Preventing Mental Disorders*. U.S. Department of Health and Human Services, Rockville, MD, pp. 20–26.
- Grace, L.G., Starck, M., Potenza, J., Kenney, P.A., Sheetz, A.H., 2012. Commercial sexual exploitation of children and the school nurse. *J. Sch. Nurs.* 28 (6), 410–417.
- Gragg, F., Petta, I., Bernstein, H., Eisen, K., Quinn, L., 2007. New York prevalence Study of Commercially Sexually Exploited Children. New York State Office of Children and Family Services, Rensselaer, NY. Retrieved from: <http://www.octs.state.ny.us/main/reports/csec-2007.pdf>.
- Greenbaum, J., Crawford-Jakubiak, J.E., Committee on Child Abuse and Neglect, 2015. Child sex trafficking and commercial sexual exploitation: Health care needs of victims. *Pediatrics* 135 (3), 566–574.
- Greene, J.M., Ennett, S.T., Ringwalt, C.L., 1999. Prevalence and correlates of survival sex among runaway and homeless youth. *Am. J. Public Health* 89 (9), 1406–1409.
- Gula, R.M., 2010. *Just Ministry: Professional Ethics for Pastoral Ministers*. Paulist Press, Mahwah, NJ.
- Hamby, S., Finkelhor, D., Turner, H., Ormrod, R., 2010. The overlap of witnessing partner violence with child maltreatment and other victimizations in a nationally representative survey of youth. *Child Abuse Negl.* 33, 403–411.
- Hammer, H., Finkelhor, D., Sedlak, A.J., 2002. *Runaway/Thrownaway Children: National Estimates and Characteristics*. U.S. Department of Justice, Office of, Washington, DC.
- Hanson, R.F., Self-Brown, S., Fricker-Elhai, A.E., Kilpatrick, D.G., Saunders, B.E., Resnick, H.S., 2006. The relations between family environment and violence exposure among youth: findings from the National Survey of Adolescents. *Child. Maltreat.* 11, 3–15.
- Hartill, M., Lang, M., 2014. "I know people think I'm a complete pain in the neck": an examination of the introduction of child protection and "safeguarding" in English sport from the perspective of National Governing Body Safeguarding Lead Officers. *Soc. Sci.* 3, 606–627.
- Hébert, M., Lavoie, F., Piché, C., Poitras, M., 2001. Proximate effects of child sexual abuse prevention program in elementary school children. *Child Abuse Negl.* 25, 505–522.
- Hendrie, C., 1998. Sex with students: when employees cross the line. *Educ. Week* 18 (14), 1–5.
- Herrick, A.L., Egan, J.E., Coulter, R.W.S., Friedman, M.R., Stall, R., 2014. Raising sexual minority youths' health levels by incorporating resiliencies into health promotion efforts. *Am. J. Public Health* 104 (2), 206–210.
- Hershkowitz, I., Lamb, M.E., Horowitz, D., 2007. Victimization of children with disabilities. *Am. J. Orthopsychiatry* 77 (4), 629–635.
- Hickeler, B., Auerswald, C.L., 2009. The worlds of homeless white and African American youth in San Francisco, California: a cultural epidemiological comparison. *Soc. Sci. Med.* 68, 824–831.
- Hill, K.G., Bailey, J.A., Hawkins, J.D., Catalano, R.F., Kosterman, R., Oesterle, S., Abbott, R.D., 2014. The onset of STI diagnosis through age 30: results from the Seattle social development project intervention. *Prev. Sci.* 15 (Suppl. 1), S19–S32.
- Hillberg, T., Hamilton-Giachritsis, C., Dixon, L., 2011. Review of meta-analyses on the association between child sexual abuse and adult mental health difficulties: a systematic approach. *Trauma Violence Abuse* 12, 38–49.
- Holt, M., Finkelhor, D., Kaufman Kantor, G., 2007. Hidden forms of victimization in elementary students involved in bullying. *Sch. Psychol. Rev.* 36 (3), 345–360.
- Hong, J.S., Espelage, D.L., 2012. A review of research on bullying and peer victimization in school: an ecological system analysis. *Aggress. Violent Behav.* 17, 311–322.
- Horn, K.A., Woods, S.J., 2013. Trauma and its aftermath for commercially sexually exploited women as told by front-line service providers. *Issues Ment. Health Nurs.* 34 (2), 75–81.
- Honor, G., 2010. Child sexual abuse: consequences and implications. *J. Pediatr. Health Care* 24 (5), 358–364.
- Honor, G., 2015. Domestic minor sex trafficking: what the PNP needs to know. *J. Pediatr. Health Care* 29 (1), 88–94.
- Horowitz, E., 2015. *Protecting Our Kids? How Sex Offender Laws Are Failing Us*. Praeger, Santa Barbara, CA.

- Hossain, M., Zimmerman, C., Abas, M., Light, M., Watts, C., 2010. The relationship of trauma to mental disorders among trafficked and sexually exploited girls and women. *Am. J. Public Health* 100 (12), 2442–2449.
- Huebner, D.M., Thoma, B.C., Neilands, T.B., 2015. School victimization and substance use among lesbian, gay, bisexual, and transgender adolescents. *Prev. Sci.* 16, 734–743.
- Hunt, R., Walsh, K., 2011. Parents' views about child sexual abuse education: a systematic review. *Aust. J. Early Child.* 36 (2), 63–76.
- Hunter, S.V., 2010. *Childhood Sexual Experiences: Narratives of Resilience*. Radcliffe Publishing, Oxford, UK.
- Hussey, J.M., Chang, J.J., Kotch, J.B., 2006. Child maltreatment in the United States: prevalence, risk factors and adolescent health consequences. *Pediatrics* 118 (3), 933–942.
- Ige, O.K., Fawole, O.I., 2011. Preventing child sexual abuse: parents' perceptions and practices in urban Nigeria. *J. Child Sex. Abuse* 20 (6), 695–707.
- International Labour Organization [ILO], 2012. ILO Global Estimate of Forced Labour 2012: Results and Methodology. Author, Geneva, Switzerland. Available from: www.ilo.org/global/topics/forced-labour/publications/WCMS_182004/lang-en/index.htm.
- Institute of Medicine & National Research Council [IOM & NRC], 2013. *Confronting Commercial Sexual Exploitation and Sex Trafficking of Minors in the United States*. The National Academies Press, Washington, DC.
- Irish, L., Kobayashi, I., Delahanty, D.L., 2010. Long-term physical health consequences of childhood sexual abuse: a meta-analytic review. *J. Pediatr. Psychol.* 35, 450–461.
- Irish Sports Council, 2000. Code of Ethics and Good Practice for Children's Sport. Retrieved from: www.irishsportsCouncil.ie/Participation/Code_of_Ethics/.
- Jeffreys, S., 1999. Globalizing sexual exploitation: sex tourism and the traffic in women. *Leis. Stud.* 18 (3), 179–196.
- Jeffreys, S., 2009. Prostitution, trafficking and feminism: an update on the debate. *Women's Stud. Int. Forum* 32, 316–320.
- John Jay College of Criminal Justice, 2004. *The Nature and Scope of the Problem of Sexual Abuse of Minors by Catholic Priests and Deacons in the United States 1950-2002*. City University of New York, Washington, DC.
- Jones, A.D., Jemmott, E.T., 2009. *Child Sexual Abuse in the Eastern Caribbean*. United Nations Children's Fund Action for Children and University of Huddersfield, Huddersfield.
- Jones, L., Bellis, M.A., Wood, S., Hughes, K., McCoy, E., Eckley, L., Bates, G., Mikton, C., Shakespeare, T., Officer, A., July 12, 2012a. Prevalence and Risk of Violence against Children with Disabilities: A Systematic Review and Meta-analysis of Observational Studies. *The Lancet*. Retrieved from: www.thelancet.com.
- Jones, L.M., Mitchell, K.J., Walsh, W.A., 2012b. Evaluation of Internet Child Safety Materials Used by ICAC Task Forces in School and Community Settings. Retrieved from: <https://www.ncjrs.gov/pdffiles1/nij/grants/242016.pdf>.
- Jonsson, L.S., Bladh, M., Priebe, G., Svedin, C.G., 2015. Online sexual behaviours among Swedish youth: associations to background factors, behaviours and abuse. *Eur. Child Adolesc. Psychiatry* 24, 1245–1260.
- Justice Programs, 1964/1969. Office of Juvenile Justice and Delinquency Prevention. NCJ. Retrieved from: <https://www.ncjrs.gov/pdffiles1/ojdp/196469.pdf>.
- Kaestle, C.E., 2012. Selling and buying sex: a longitudinal study of risk and protective factors in adolescence. *Prev. Sci.* 13 (3), 314–322.
- Katz, C., 2013. Internet-related child sexual abuse: what children tell us in their testimonies. *Child. Youth Serv. Rev.* 35, 1536–1542.
- Kaufman, K.L., Mosher, H., Carter, M., Estes, L., 2006. An empirically based situational prevention model for child sexual abuse. In: Smallbone, S., Wortley, R. (Eds.), *Situational Prevention of Child Sexual Abuse, Crime Prevention Studies*, vol. 19. Criminal Justice Press, Monsey, NY.
- Kendall-Tackett, K., Williams, L.M., Finkelhor, D., 1993. Impact of sexual abuse on children: a review and synthesis of recent empirical studies. *Psychol. Bull.* 113 (1), 164–180.
- Kendall-Tackett, K., Lyon, T., Taliaferro, G., Little, L., 2005. Why child maltreatment researchers should include children's disability status in their maltreatment studies. *Child Abuse Negl.* 29, 147–151.
- Kennedy, A.C., Bybee, D., Kulkarni, S.J., Archer, G., 2012. Sexual victimization and family violence among urban African American adolescent women: do violence cluster profiles predict partner violence victimization and sex trade exposure? *Violence Against Women* 18, 1319–1338.
- Kenny, M.C., McEachern, A., 2000. Prevalence and characteristics of childhood sexual abuse in multiethnic college students. *J. Child Sex. Abuse* 9, 57–70.
- Kenny, M.C., Wurtele, S.K., 2009. A counselor's guide to preventing childhood sexual abuse. *Couns. Hum. Dev.* 42 (1), 1–14.
- Kenny, M.C., Wurtele, S.K., 2010. Children's abilities to recognize a "good" person as a potential perpetrator of childhood sexual abuse. *Child Abuse Negl.* 34, 490–495.
- Kidd, S.A., Liborio, R.M.C., 2011. Sex trade involvement in Sao Paulo, Brazil and Toronto, Canada: narratives of social exclusion and fragmented identities. *Youth Soc.* 43 (3), 982–1009.
- Kilpatrick, D.G., Ruggiero, K.J., Acierno, R., Saunders, B.E., Resnick, H.S., Best, C.L., 2003. Violence and risk of PTSD, major depression, substance abuse/dependence, and comorbidity: results from the national survey of adolescents. *J. Consult. Clin. Psychol.* 71 (4), 692–700.
- Kirby, D., 2007. *Emerging Answers: Research Findings on Programs to Reduce Teen Pregnancy*. Retrieved from: <http://thenationalcampaign.org/resource/emerging-answers-2007%E2%80%9494full-report>.
- Klatt, T., Caver, D., Egan, V., 2014. Rationalising predictors of child sexual exploitation and sex-trading. *Child Abuse Negl.* 38, 252–260.
- Kotrla, K., 2010. Domestic minor sex trafficking in the United States. *Soc. Work* 55 (2), 181–182.
- Kotrla, K., Wommack, B.A., 2011. Sex trafficking of minors in the U.S.: implications for policy, prevention and research. *J. Appl. Res. Child. Inf. Policy Child. Risk* 2 (1). Article 5. Retrieved from: <http://digitalcommons.library.tmc.edu/cgi/viewcontent.cgi?article=1012&context=childrenatrisk>.
- Kramer, L.A., Berg, E.C., 2003. A survival analysis of timing of entry into prostitution: the differential impact of race, educational level, and childhood/adolescent risk factors. *Sociol. Inq.* 73 (4), 511–528.
- Kristof, N.D., WuDunn, S., 2009. *Half the Sky: Turning Oppression into Opportunity for Women Worldwide*. Vintage Books, New York.
- Kvam, M.H., 2004. Sexual abuse of deaf children: a retrospective analysis of the prevalence and characteristics of childhood sexual abuse among deaf adults in Norway. *Child Abuse Negl.* 28, 241–251.
- Lalor, K., McElvaney, R., 2010. Child sexual abuse, links to later sexual exploitation/high-risk sexual behavior, and prevention/treatment programs. *Trauma Violence Abuse* 11 (4), 159–177.
- Lanning, K.V., 2005. *Compliant Child Victims: Confronting an Uncomfortable Reality*. Retrieved from: <http://www.abuse.watch.net/Compliant%20Child%20Victims.pdf>.
- Lanning, K.V., Dietz, P., 2014. Acquaintance molestation and youth-serving organizations. *J. Interpers. Violence* 29 (15), 2815–2838.
- Lavoie, F., Thibodeau, C., Gagné, M., Hébert, M., 2010. Buying and selling sex in Quebec adolescents: a study of risk and protective factors. *Arch. Sex Behav.* 39, 1147–1160.
- Leahy, T., Petty, G., Tenenbaum, G., 2002. Prevalence of sexual abuse in organized competitive sports in Australia. *J. Sex. Aggress.* 8 (2), 16–36.
- Lee, Y.K., Tang, C.S., 1998. Evaluation of a sexual abuse prevention program for female Chinese adolescents with mild mental retardation. *Am. J. Ment. Retard.* 103 (2), 105–116.
- Letourneau, E.J., Levinson, J.S., 2011. Preventing sexual abuse: community protection policies and practice. In: Myers, J.E.B. (Ed.), *The APSAC Handbook on Child Maltreatment*, third ed. Sage, Thousand Oaks, CA, pp. 307–321.
- Letourneau, E.J., Eaton, W.W., Bass, J., Berlin, F.S., Moore, S.G., 2014. The need for a comprehensive public health approach to preventing child sexual abuse. *Public Health Rep.* 129, 222–228.
- Lillywhite, R., Skidmore, P., 2006. Boys are not sexually exploited? A challenge to practitioners. *Child. Abuse Rev.* 15 (5), 351–361.
- Lloyd, R., 2011. *Girls Like Us*. Harper, New York.
- Lloyd, R., November 18, 2013. *A World for Girls*. Huffington Post. Retrieved from: http://www.huffingtonpost.com/rachel-lloyd/a-world-for-girls_b_3947673.html.
- Lowman, J., Atchison, C., 2006. Men who buy sex: a survey in the greater Vancouver regional district. *Can. Rev. Sociol. Anthropol.* 43 (3), 281–296.
- Lund, E.M., Vaughn-Jensen, J.E., July 12, 2012. Comment: Victimization of Children with Disabilities. *The Lancet*. Retrieved from: www.thelancet.com.
- Lung, F., Lin, T., Lu, Y., Shu, B., 2004. Personal characteristics of adolescent prostitutes and rearing attitudes of their parents: a structural equation model. *Psychiatry Res.* 125, 285–291.
- Lyon, T.D., Ahern, E.C., 2011. Disclosure of child sexual abuse. In: Myers, J.E.B. (Ed.), *The APSAC Handbook on Child Maltreatment*, third ed. Sage, Newbury Park, CA, pp. 233–252.

- Macias-Konstantopoulos, W.L., Munroe, D., Purcell, G., Tester, K., Burke, T.F., 2015. The commercial sexual exploitation and sex trafficking of minors in the Boston metropolitan area: experiences and challenges faced by front-line providers and other stakeholders. *J. Appl. Res. Child. Inf. Policy Child. Risk* 6 (1), Article 1.
- MacIntyre, D., Carr, A., 1999. Evaluation of the effectiveness of the Stay Safe primary prevention program for child sexual abuse. *Child Abuse Negl.* 23, 1307–1325.
- MacMillan, H.L., Wathen, C.N., Barlow, J., Fergusson, D.M., Leventhal, J.M., Taussig, H.N., 2009. Interventions to prevent child maltreatment and associated impairment. *Lancet* 373, 250–266.
- MacMillan, H.L., Tanaka, M., Duku, E., Vaillancourt, T., Boyle, M.H., 2013. Child physical and sexual abuse in a community sample of young adults: results from the Ontario Child Health Study. *Child Abuse Negl.* 33, 179–192.
- Malkin, K., Johnston, L., Brackenridge, C., 2000. A critical evaluation of training needs for child protection in UK sport. *Manag. Leis.* 5 (3), 151–160.
- Maniglio, R., 2012. The role of child sexual abuse in the development of psychopathology. In: Turner, R.A., Rogers, H.O. (Eds.), *Child Abuse: Indicators, Psychological Impact and Prevention*. NOVA, New York, pp. 99–132.
- Maniglio, R., 2013. Child sexual abuse in the etiology of anxiety disorders: a systematic review of reviews. *Trauma Violence Abuse* 14 (2), 96–112.
- Marcus, A., Horning, A., Curtis, R., Sanson, J., Thompson, E., 2014. Conflict and agency among sex workers and pimps: a closer look at domestic minor sex trafficking. *Ann. Am. Acad. Polit. Soc. Sci.* 653, 225–246.
- Marshall, M.P., Friedman, M.S., Stall, R., King, K.M., Miles, J., Gold, M.A., Morse, J.Q., 2008. Sexual orientation and adolescent substance use: a meta-analysis and methodological review. *Addiction* 103, 546–556.
- Martin, A., Najman, J.M., Williams, G.M., Bor, W., Gorton, E., Alati, R., 2011. Longitudinal analysis of maternal risk factors for childhood sexual abuse: early attitudes and behaviours, socioeconomic status, and mental health. *Aust. N. Z. J. Psychiatry* 45, 629–637.
- Massachusetts Citizens for Children, 2010. Enough Abuse Campaign. Retrieved from: <http://www.enoughabuse.org>.
- Mathews, P., 2000. A Review and a Way Forward: A Report on the Sexual Exploitation of Boys and Young Men. Barnardos, Barking, UK.
- Mathoma, A.M., Maripe-Perera, D.B., Khumalo, L.P., Mbayi, B.L., Seloiwe, E.S., 2006. Knowledge and perceptions of parents regarding child sexual abuse in Botswana and Swaziland. *J. Pediatr. Nurs.* 21 (1), 67–72.
- McClanahan, S.F., McClelland, G.M., Abram, K.M., Teplin, L.A., 1999. Pathways into prostitution among female jail detainees and their implications for mental health services. *Psychiatr. Serv.* 50, 1606–1613.
- McCloskey, L.A., Bailey, J.A., 2000. The intergenerational transmission of risk for child sexual abuse. *J. Interpers. Violence* 15 (10), 1019–1035.
- McEachern, A.G., 2012. Sexual abuse of individuals with disabilities: prevention strategies for clinical practice. *J. Child Sex. Abuse* 21, 386–398.
- Meiselman, K.C., 1978. *Incest: A Psychological Study of Causes and Effects With Treatment Recommendations*. Jossey-Bass Publications, San Francisco.
- Mejia, P., Cheyne, A., Dorfman, L., 2012. News coverage of child sexual abuse and prevention, 2007–2009. *J. Child Sex. Abuse* 21 (4), 470–487.
- Mendelson, T., Letourneau, E.J., 2015. Parent-focused prevention of child sexual abuse. *Prev. Sci.* 16, 844–852.
- Mendle, J., Leve, L.D., Van Ryzin, M., Natsuaki, M.N., Ge, X., 2011. Associations between early life stress, child maltreatment, and pubertal development among girls in foster care. *J. Res. Adolesc.* 21 (4), 871–880.
- Mikton, C., Butchart, A., 2009. Child maltreatment prevention: a systematic review of reviews. *Bull. World Health Organ.* 87, 353–361.
- Mikton, C., Power, M., Raleva, M., Makoa, M., Eissa, M.A., Cheah, I., Cardia, N., Choo, C., Almuneef, M., 2013. The assessment of the readiness of five countries to implement child maltreatment prevention programs on a large scale. *Child Abuse Negl.* 37, 1237–1251.
- Miller, A., Stewart, A., 1998. Report from the roundtable on the meaning of trafficking in persons: a human rights perspective. *Women's Rights Law Report* 20 (1), 11–19.
- Miller-Perrin, C., Wurtele, S.K., 2017. Sex trafficking and the commercial sexual exploitation of children. *Women Ther.* 40 (1–2), 123–151. <http://dx.doi.org/10.1080/02703149.2016.1210963>.
- Mitchell, K.J., Finkelhor, D., Wolak, J., 2007. Youth Internet users at risk for the most serious online sexual solicitations. *Am. J. Prev. Med.* 32 (6), 532–537.
- Mitchell, K.J., Finkelhor, D., Wolak, J., 2010. Conceptualizing juvenile prostitution as child maltreatment: findings from the national juvenile prostitution study. *Child. Maltreat.* 15 (1), 18–36.
- Mitchell, K.J., Jones, L.M., Finkelhor, D., Wolak, J., 2013. Understanding the decline in unwanted online sexual solicitations for U.S. youth 2000–2010: findings from three Youth Internet Safety Surveys. *Child Abuse Negl.* 37, 1225–1236.
- Mitchell, K.J., Ybarra, M.L., Korchmaros, J.D., 2014. Sexual harassment among adolescents of different sexual orientations and gender identities. *Child Abuse Negl.* 38, 280–295.
- Muffic, L., Finn, M., 2013. Health outcomes among women trafficked for sex in the United States: a closer look. *J. Interpers. Violence* 28 (9), 1859–1885.
- Myers, J.E.B., 2011. Criminal prosecution of child maltreatment. In: Myers, J.E.B. (Ed.), *The APSAC Handbook on Child Maltreatment*, third ed. Sage Publications, Thousand Oaks, CA, pp. 87–99.
- Nadon, S., Koverola, C., Schludermann, E., 1998. Antecedents to prostitution. *J. Interpers. Violence* 13 (2), 206–221.
- National Board for Safeguarding Children, 2008. Safeguarding Children: Standards and Guidance Document for the Catholic Church in Ireland. Retrieved from: www.achonrydiocese.org/safeguarding.pdf.
- Negrão, C.I., Bonanno, G., Noll, J.G., Putnam, F.W., Trickett, P.K., 2005. Shame, humiliation and childhood sexual abuse: distinct contributions and emotional coherence. *Child. Maltreat.* 10, 350–363.
- Negriff, S., Schneiderman, J.U., Smith, C., Schreyer, J.K., Trickett, P.K., 2014. Characterizing the sexual abuse experiences of young adolescents. *Child Abuse Negl.* 38, 261–270.
- Newman, G., 2006. *The Exploitation of Trafficked Women (Problem Oriented Guides for Police Problem Specific Guides Series No. 38)*. U. S. Department of Justice. U. S. Government Printing Office, Washington, DC.
- Nixon, K.L., 2002. Leave him or lose them: the child protection response to woman abuse. In: Tutty, L., Goard, C. (Eds.), *Reclaiming Self: Issues and Resources for Women Abused by Intimate Partners*. Fernwood Publishing and RESOLVE, Halifax, Nova Scotia, Canada, pp. 64–80.
- Noble, J., Vermillion, M., 2014. Youth sport administrators' perceptions and knowledge of organizational policies on child maltreatment. *Child. Youth Serv. Rev.* 38, 52–57.
- Noll, J.G., Trickett, P.K., Putnam, F.W., 2003. A prospective investigation of the impact of childhood sexual abuse on the development of sexuality. *J. Consult. Clin. Psychol.* 71 (3), 575–586.
- Noll, J.G., Shenk, C.E., Barnes, J.E., Haralson, K.J., 2013. Association of maltreatment with high-risk Internet behaviours and offline encounters. *Pediatrics* 123 (6), e510–e517.
- Norton-Hawk, M., 2002. The life course of prostitution. *Women, Girls Crim. Justice* 3 (1), 7–9.
- O'Sullivan, L.F., Ronis, S.T., 2013. Virtual cheating hearts: extradyadic and poaching interactions among adolescents with links to online sexual activities. *Can. J. Behav. Sci.* 45 (3), 175–184.
- Oates, R.K., Tebbutt, J., Swanston, H., Lynch, D.L., O'Toole, B.I., 1998. Prior childhood sexual abuse in mothers of sexually abused children. *Child Abuse Negl.* 22 (11), 1113–1118.
- Olafson, E., 2011. Child sexual abuse: demography, impact, and interventions. *J. Child Adolesc. Trauma* 4, 8–21.
- Orchard, T., Farr, S., Macphail, S., Wender, C., Wilson, C., 2014. Expanding the scope of inquiry: exploring accounts of childhood and family life among sex workers in London, Ontario. *Can. J. Hum. Sex.* 23 (1), 9–18.
- Palasinski, M., 2012. The roles of monitoring and cyberbystanders in reducing sexual abuse. *Comput. Hum. Behav.* 28, 2014–2022.
- Paolucci, E.O., Genuis, M.L., Violato, C., 2001. A meta-analysis of the published research on the effects of child sexual abuse. *J. Psychol.* 135 (1), 17–36.
- Paranal, R., Thomas, K.W., Derrick, C., 2012. Utilizing online training for child sexual abuse prevention: benefits and limitations. *J. Child Sex. Abuse* 21, 507–520.
- Parent, S., Demers, G., 2011. Sexual abuse in sport: a model to prevent and protect athletes. *Child. Abuse Rev.* 20, 120–133.
- Pedersen, W., Hegna, K., 2003. Children and adolescents who sell sex: a community study. *Soc. Sci. Med.* 56, 135–147.

- Pereda, N., Guilera, G., Forns, M., Gómez-Benito, J., 2009. The prevalence of child sexual abuse in community and student samples: a meta-analysis. *Clin. Psychol. Rev.* 29 (4), 328–338.
- Pérez-Fuentes, G., Olsson, M., Villegas, L., Morcillo, C., Wang, S., Blanco, C., 2013. Prevalence and correlates of child sexual abuse: a national study. *Compr. Psychiatry* 54, 16–27.
- Peter, T., 2009. Exploring taboos: comparing male and female perpetrated child sexual abuse. *J. Interpers. Violence* 24 (7), 1111–1128.
- Pierce, A., 2012. American Indian adolescent girls: vulnerability to sex trafficking, intervention strategies. *Am. Indian Alaska Native Ment. Health Res.* 19 (1), 37–56.
- Play By The Rules, 2011. Making Sport Inclusive, Safe and Fair. Retrieved from: www.playbytherules.net.au.
- Plummer, C.A., 2001. Prevention of child sexual abuse: a survey of 87 programs. *Violence Vict.* 16, 575–588.
- President's Interagency Taskforce to Monitor and Combat Trafficking in Persons, 2014. Federal Strategic Action Plan on Services for Victims of Human Trafficking in the United States 2013–2017. U.S. Department of Justice, Washington, D.C., USA. Retrieved from: <http://www.ovc.gov/pubs/FederalHumanTraffickingStrategicPlan.pdf>.
- Preston, J., 2011. Rules to Stop Pupils and Teachers from Getting Too Social Online. Retrieved from: <http://www.nytimes.com/2011/12/18/business/media/rules-to-limit-how-teachers-and-students-interact-online.html>.
- Priebe, G., Mitchell, K.J., Finkelhor, D., 2013. To tell or not to tell? Youth's responses to unwanted Internet experiences. *Cyberpsychol. J. Psychosoc. Res. Cybersp.* 7 (1). Article 6.
- Putnam, F.W., 2003. Ten-year research update review: child sexual abuse. *J. Am. Acad. Child Adolesc. Psychiatry* 42 (3), 269–278.
- Quayle, E., Jones, T., 2011. Sexualized images of children on the Internet. *Sex. Abuse J. Res. Treat.* 23 (1), 331–362.
- Queen's Printer for Ontario, 2002. Making It SafeR: Preventing Sexual Abuse of Children in Sport. Queen's Printer for Ontario, Toronto, ON. Retrieved from: www.tourism.gov.on.ca.
- Rafferty, Y., 2008. The impact of trafficking on children: psychological and social policy perspectives. *Child. Dev. Perspect.* 2 (1), 13–18.
- Rafferty, Y., 2013. Child trafficking and commercial sexual exploitation: a review of promising prevention policies and programs. *Am. J. Orthopsychiatry* 83 (4), 559–575.
- Ramírez, C., Pinzón-Rondón, A.M., Botero, J.C., 2011. Contextual predictive factors of child sexual abuse: the role of parent-child interaction. *Child Abuse Negl.* 35, 1022–1031.
- Raphael, J., 2004. Listening to Olivia: Violence, Poverty, and Prostitution. Northeastern University Press, Boston, MA.
- Raphael, J., Shapiro, D., 2002. Sisters speak Out: The Lives and Needs of Prostituted Women in Chicago. Center for Impact Research, Chicago, IL.
- Read, D., 2013. It takes a team. *Athl. Manag.* 25 (2), 31–35.
- Reese-Weber, M., Smith, D.M., 2011. Outcomes of child sexual abuse as predictors of later sexual victimization. *J. Interpers. Violence* 26 (9), 884–905.
- Reid, J.A., 2011. An exploratory model of girl's vulnerability to commercial sexual exploitation in prostitution. *Child. Maltreat.* 16, 146–157.
- Reid, J.A., 2012. Exploratory review of route-specific, gendered, and age-graded dynamics of exploitation: applying life course theory to victimization in sex trafficking in North America. *Aggress. Violent Behav.* 17, 257–271.
- Reid, J.A., Piquero, A.R., 2014. Age-graded commercial sexual exploitation of male and female youth. *J. Interpers. Violence* 29 (9), 1747–1777.
- Reiter, S., Bryen, D.N., Shachar, I., 2007. Adolescents with intellectual disabilities as victims of abuse. *J. Intellect. Disabil.* 11 (4), 371–387.
- Reppucci, N.D., Jones, L.M., Cook, S.L., 1994. Involving parents in child sexual abuse prevention programs. *J. Child Fam. Stud.* 3, 137–142.
- Rheingold, A.A., Zajac, K., Patton, M., 2012. Feasibility and acceptability of a child sexual abuse prevention program for childcare professionals: comparison of a Web-based and in-person training. *J. Child Sex. Abuse* 21 (4), 422–436.
- Rheingold, A.A., Zajac, K., Chapman, J.E., Patton, M., de Arellano, M., Saunders, B., Kilpatrick, D., 2014. Child sexual abuse prevention training for childcare professionals: an independent multi-site randomized controlled trial of Stewards of Children. *Prev. Sci.* 1–12.
- Rispens, J., Aleman, A., Goudena, P.P., 1997. Prevention of child sexual abuse victimization: a meta-analysis of school programs. *Child Abuse Negl.* 21, 975–987.
- Roberts, J.A., Miltenberger, R.G., 1999. Emerging issues in the research on child sexual abuse prevention. *Educ. Treat. Child.* 22 (1), 84–102.
- Roberts, R., O'Connor, T., Dunn, J., Golding, J., The ALSPAC Study Team, 2004. The effects of child sexual abuse in later family life; mental health, parenting and adjustment of offspring. *Child Abuse Negl.* 28, 525–545.
- Roe-Sepowitz, D.E., 2012. Juvenile entry into prostitution: the role of emotional abuse. *Violence Against Women* 18 (5), 562–579.
- Romano, J.L., 2015. Prevention Psychology: Enhancing Personal and Social Well-being. American Psychological Association, Washington, DC.
- Romano, E., De Luca, R.V., 2001. Male sexual abuse: a review of effects, abuse characteristics, and links with later psychological functioning. *Aggress. Violent Behav.* 6, 55–78.
- Romano, E., Bell, T., Bilette, J., 2011. Prevalence and correlates of multiple victimization in a nation-wide adolescent sample. *Child Abuse Negl.* 35, 468–479.
- Rotheram-Borus, M.J., 2000. Expanding the range of interventions to reduce HIV among adolescents. *AIDS* 14, s33–s40.
- Roy, E., Haley, N., LeClerc, P., Boudreau, J.-F., Boivin, J.-F., 2007. Risk factors for initiation into drug injection among adolescent street youth. *Drugs Educ. Prev. Policy* 14 (5), 389–399.
- Ryan, R.M., Mendle, J., Markowitz, A.J., 2015. Early childhood maltreatment and girls' sexual behavior: the mediating role of pubertal timing. *J. Adolesc. Health* 57, 342–347.
- Saewyc, E.M., Edinburgh, L.D., 2010. Restoring healthy developmental trajectories for sexually exploited young runaway girls: fostering protective factors and reducing risk behaviors. *J. Adolesc. Health* 46, 180–188.
- Saewyc, E.M., MacKay, L.J., Anderson, J., Drozda, C., 2008. It's Not what You Think: Sexually Exploited Youth in British Columbia. University of British Columbia School of Nursing, Vancouver, BC. Retrieved from: <http://www.nursing.ubc.ca/PDFs/ItsNotWhatYouThink.pdf>.
- Saewyc, E.M., Miller, B.B., Rivers, R., Matthews, J., Hilario, C., Hirakata, P., 2013. Competing discourses about youth sexual exploitation in Canadian news media. *Can. J. Hum. Sex.* 22 (2), 95–105.
- Saul, J., Audage, N.C., 2007. Preventing Child Sexual Abuse within Youth-serving Organizations: Getting Started on Policies and Procedures. U.S. Centers for Disease Control and Prevention, Atlanta, GA.
- Saul, J., Patterson, J., Audage, N., 2010. Preventing sexual maltreatment in youth-serving community organizations. In: Kaufman, K.L. (Ed.), *The Prevention of Sexual Violence: A Practitioner's Sourcebook*. NEARI Press, Holyoke, MA, pp. 449–463.
- Saunders, B.E., Kilpatrick, D.G., Hanson, R.F., Resnick, H.S., Walker, M.E., 1999. Prevalence, case characteristics, and long-term psychological correlates of child rape among women: a national survey. *Child. Maltreat.* 4, 187–200.
- Schapiro Group, 2009. Men Who Buy Sex with Adolescent Girls: A Scientific Research Study. Retrieved from: <http://ncfy.acf.hhs.gov/library/2009/men-who-buy-sex-adolescent-girls-scientific-research-study>.
- Schober, D.J., Fawcett, S.B., Bernier, J., 2012a. The Enough Abuse Campaign: building the movement to prevent child sexual abuse in Massachusetts. *J. Child Sex. Abuse* 21 (4), 456–469.
- Schober, D.J., Fawcett, S.B., Thigpen, S., Curtis, A., Wright, R., 2012b. An empirical case study of a child sexual abuse prevention initiative in Georgia. *Health Educ. J.* 71 (3), 291–298.
- Sedlak, A.J., Finkelhor, D., Hammer, H., Schultz, D.J., 2002. National Estimates of Missing Children: An Overview. In: OJJDP NISMART Bulletin Series. U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention, Washington, DC. NCJ 1964/65.
- Sedlak, A.J., Mettenberg, J., Basena, M., Petta, I., McPherson, K., Greene, A., Li, S., 2010. Fourth National Incidence Study of Child Abuse and Neglect (NIS-4): Report to Congress. U.S. Department of Health and Human Services, Administration for Children and Families, Washington, DC.
- Self-Brown, S., Rheingold, A.A., Campbell, C., de Arellano, M.A., 2008. A media campaign prevention program for child sexual abuse: community members' perspectives. *J. Interpers. Violence* 23 (6), 728–743.
- Seng, M., 1989. Child sexual abuse and adolescent prostitution: a prospective study. *Adolescence* 24 (95), 665–675.
- Senn, T.E., Carey, M.P., Venable, P.A., 2008. Childhood and adolescent sexual abuse and subsequent sexual risk behavior: evidence from controlled studies, methodological critique, and suggestions for research. *Clin. Psychol. Rev.* 28, 711–735.

- Seto, M.C., Lalumiere, M.L., 2010. What is so special about male adolescent sexual offending? A review and test of explanations through meta-analysis. *Psychol. Bull.* 136 (4), 526–575.
- Shakeshaft, C., 2004. *Educator Sexual Misconduct: A Synthesis of Existing Literature*. U.S. Department of Education, Washington, DC.
- Shannon, D., 2008. Online sexual grooming in Sweden—online and offline sex offences against children as described in Swedish police data. *J. Scand. Stud. Criminol. Crime Prev.* 9, 160–180.
- Shared Hope International, 2007. *Demand: a Comparative Examination of Sex Tourism and Trafficking in Jamaica, Japan, The Netherlands, and the United States*. Shared Hope International, Vancouver, WA.
- Shared Hope International, 2009. *The National Report on Domestic Minor Sex Trafficking: America's Prostituted Children*. Shared Hope International, Vancouver, WA.
- Shelton, J., 2015. Transgender youth homelessness: understanding programmatic barriers through the lens of cisgenderism. *Child. Youth Serv. Rev.* 59, 10–18.
- Sherman, F.T., Baick, A., 2015. Gender Injustice: System-Level Juvenile Justice Reforms for Girls. Retrieved from: www.nationalcrittenon.org/gender-injustice.
- Sigfusdottir, I.D., Aegisdottir, B.B., Gudjonsson, G.H., Sigurdsson, T.F., 2008. A model of sexual abuse's effects on suicidal behavior and delinquency: the role of emotions as mediating factors. *J. Youth Adolesc.* 37 (6), 699–712.
- Silbert, M.H., Pines, A.M., 1982. Entrance into prostitution. *Youth Soc.* 13, 471–500.
- Silverman, J.G., 2011. Adolescent female sex workers: invisibility, violence and HIV. *Arch. Dis. Child.* 96 (5), 478–481.
- Smallbone, S., Marshall, W.L., Wortley, R., 2008. *Preventing Child Sexual Abuse: Evidence, Policy and Practice*. Willan Publishing, Portland, OR.
- Smith, N., Harrell, S., March 2013. *Sexual Abuse of Children with Disabilities: A National Snapshot*. Retrieved from: <http://www.vera.org/pubs/sexual-abuse-children-with-disabilities>.
- Smith, L.W., Herman-Giddens, M.E., Everette, V.D., 2005. Commercial sexual exploitation of children in advertising. In: Cooper, S.W., Estes, R.J., Giardino, A.P., Kellogg, N.D., Vieth, V.I. (Eds.), *Medical, Legal, and Social Science Aspects of Child Sexual Exploitation: A Comprehensive Review of Pornography, Prostitution, and Internet Crimes*. G. W. Medical Publishing, Inc, St. Louis, Missouri, pp. 25–57.
- Smith, R., Gallagher, M., Popkin, S., Mireles, A., George, T., 2014. Coercive sexual environments: what MTO tells us about neighborhoods and sexual safety. *Citiescape A J. Policy Dev. Res.* 16 (1), 85–112.
- Soo, K., Bodanovskaya, Z., 2011. Risk factors of becoming a victim of Internet related sexual abuse. In: Ainsaar, M., Loof, L. (Eds.), *Online Behaviour Related to Child Sexual Abuse: Literature Report*, pp. 46–49. Retrieved from: http://www.childcentre.info/robert/public/Online_behaviour_related_to_sexual_abuse.pdf.
- Sprengelmeyer, M.E., Vaughan, K., October 8, 2000. Stalking children: imprisoned molesters reveal dark secrets, tell Colorado's parents how to protect their children. *Rocky Mountain News* 5a, 41–51.
- Stoltenborgh, M., van Ijzendoorn, M.H., Euser, E.M., Bakermans-Kranenburg, M.J., 2011. A global perspective on child sexual abuse: meta-analysis of prevalence around the world. *Child. Maltreat.* 16 (2), 79–101.
- Stoltz, J.M., Shannon, K., Kerr, T., Zhang, R., Montaner, J.S., Wood, E., 2007. Associations between childhood maltreatment and sex work in a cohort of drug-using youth. *Soc. Sci. Med.* 65 (6), 1214–1221.
- Stop It Now!, 2010. What Do U.S. Adults Think about Child Sexual Abuse? Measures of Knowledge and Attitudes Among Six States. Retrieved from: http://www.StopItNow.org/rdd_survey_reportft.
- Stroebe, S.S., Kuo, S., O'Keefe, S.L., Beard, K.W., Swindell, S., Kommor, M.J., 2013. Risk factors for father-daughter incest: data from an anonymous computerized survey. *Sex. Abuse A J. Res. Treat.* 25 (6), 583–605.
- Sullivan, T.P., 2013. Think outside: advancing risk and protective factor research beyond the intimate-partner-violence box. *Psychol. Violence* 3 (2), 121–125.
- Sullivan, P.M., Knutson, J.T., 2000. Maltreatment and disabilities: a population-based epidemiological study. *Child Abuse Negl.* 24 (10), 1257–1273.
- Sullivan, J., Beech, A.R., Craig, L.A., Gannon, T.A., 2011. Comparing intra-familial and extra-familial child sexual abusers with professionals who have sexually abused children with whom they work. *Int. J. Offender Ther. Comp. Criminol.* 55 (1), 56–74.
- Svedin, C.G., Priebe, G., 2007. Selling sex in a population-based study of high school seniors in Sweden: demographic and psychosocial correlates. *Arch. Sex. Behav.* 36, 21–32.
- Svedin, C.G., Akerman, I., Priebe, G., 2011. Frequent users of pornography. A population based epidemiological study of Swedish male adolescents. *J. Adolesc.* 34, 779–788.
- Swanston, H.Y., Parkinson, P.N., Oates, R.K., O'Toole, B.I., Plunkett, A.M., Shrimpton, S., 2002. Further abuse of sexually abused children. *Child Abuse Negl.* 26, 115–127.
- Tabachnick, J., Blanchard, G., 2002. The prevention of sexual abuse: psychology and public health perspectives. *J. Sex. Addict. Compulsivity* 9, 1–14.
- Tang, C.S., Yan, E.C., 2004. Intention to participate in child sexual abuse prevention programs: a study of Chinese adults in Hong Kong. *Child Abuse Negl.* 28, 1187–1197.
- Texas Youth Commission, 2009. *Staff Development Curriculum: PREA & Preventing Sexual Misconduct*. Retrieved from: <http://www.prearesourcecenter.org/sites/default/files/library/staffdevelopmentcurriculum2.pdf>.
- Timmerman, M.C., Schreuder, P.R., 2014. Sexual abuse of children and youth in residential care: an international review. *Aggress. Violent Behav.* 19, 715–720.
- Tolin, D.F., Foa, E.B., 2006. Sex differences in trauma and posttraumatic stress disorder: a quantitative review of 25 years of research. *Psychol. Bull.* 132, 959–992.
- Tonry, M., Farrington, D., 1995. *Building a Safer Society; Strategic Approaches to Crime Prevention*. Chicago University Press, Chicago, IL.
- Topping, K.J., Barron, I.G., 2009. School-based child sexual abuse prevention programs: a review of effectiveness. *Rev. Educ. Res.* 79 (1), 431–463.
- Trickett, P.K., Negri, S., Ji, J., Peckins, M., 2011a. Child maltreatment and adolescent development. *J. Res. Adolesc.* 21 (1), 3–20.
- Trickett, P.K., Noll, J.G., Putnam, F.W., 2011b. The impact of sexual abuse on female development: lessons from a multigenerational, longitudinal research study. *Dev. Psychopathol.* 23, 453–476.
- Trocme, N., Schumaker, K., 1999. Reported child sexual abuse in Canadian schools and recreational facilities: implications for developing effective prevention strategies. *Child. Youth Serv. Rev.* 21 (8), 621–642.
- Turner, H.A., Finkelhor, D., Ormrod, R.K., 2007. Family structure variations in patterns and predictors of child victimization. *Am. J. Orthopsychiatry* 77 (2), 282–295.
- Turner, H.A., Finkelhor, D., Ormrod, R., 2010. Child mental health problems as risk factors for victimization. *Child. Maltreat.* 15 (2), 132–143.
- Turner, H.A., Finkelhor, D., Hamby, S., Shattuck, A., 2013. Family structure, victimization, and child mental health in a nationally representative sample. *Soc. Sci. Med.* 87, 39–51.
- Tutty, L.M., 1997. Child sexual abuse prevention programs: evaluating “who do you Tell?”. *Child Abuse Negl.* 21, 869–881.
- Twil, S.E., Green, D.M., Traylor, A., 2010. A descriptive study on sexually exploited children in residential treatment. *Child Youth Care Forum* 39 (3), 187–199.
- Tyler, K.A., 2002. Social and emotional outcomes of childhood sexual abuse: a review of recent research. *Aggress. Violent Behav.* 7, 567–589.
- Tyler, K.A., 2009. Risk factors for trading sex among homeless young adults. *Arch. Sex. Behav.* 38 (2), 290–297.
- Tyler, K.A., Melander, L.A., 2015. Child abuse, street victimization, and substance use among homeless young adults. *Youth & Soc.* 47 (4), 502–519.
- Tyler, K.A., Hoyt, D.R., Whitbeck, L.B., Cauce, A.M., 2001. The impact of childhood sexual abuse on later sexual victimization among runaway youth. *J. Res. Adolesc.* 11 (2), 151–176.
- Tynes, B.M., 2007. Internet safety gone wild? Sacrificing the educational and psychosocial benefits of online social environments. *J. Adolesc. Res.* 22 (6), 575–584.
- U. S. General Accounting Office [GAO], 1996. *Preventing Child Sexual Abuse: Research Inconclusive about Effectiveness of Child Education Programs*. U. S. Government Printing Office, Washington, DC.
- U. S. General Accounting Office [GAO], 2014. *Federal Agencies Can Better Support State Efforts to Prevent and Respond to Sexual Abuse by School Personnel*. U. S. Government Printing Office, Washington, DC.
- U. S. Department of Justice, 2010a. *Attorney General's Annual Report to Congress and Assessment of U. S. Government Activities to Combat Trafficking in Persons: Fiscal Year 2009*. Available from: <http://www.state.gov/documents/organization/125840.pdf>.
- U. S. Department of Justice, 2010b. *Report on the Tenth Anniversary of the Trafficking Victims Protection Act*. Available from: http://www.justice.gov/crt/about/crm/trafficking_newsletter/tpaanniversaryreport.pdf.

- U. S. Department of State, 2010. Trafficking in Persons Report. Available from: <http://www.state.gov/tip/ris/tiprpt/2010/index.htm>.
- United Nations Children's Fund [UNICEF], 2014. Hidden in Plain Sight: A Statistical Analysis of Violence against Children. Retrieved from: http://www.unicef.org/publications/files/Hidden_in_plain_sight_statistical_analysis_EN_3_Sept_2014.pdf.
- Unitarian Universalist Association, 2004. Balancing Acts: Keeping Children Safe in Congregations. Retrieved from: www.uua.org.
- United Nations, 2001. The Race Dimensions of Trafficking in Persons – Especially Women and Children. Department of Public Information.
- United Nations General Assembly, 2000. Optional Protocol to the Convention on the Rights of the Child on the Sale of Children, Child Prostitution and Child Pornography, United Nations, New York. Retrieved from: www.ohchr.org/EN/ProfessionalInterest/Pages/OPSCCRC.aspx.
- United Nations Office on Drugs and Crime [UNODC], 2009. Annual Report 2009. Available from: www.unodc.org/documents/about-unodc/AR09_LORES.pdf.
- U.S. Department of Health and Human Services [DHHS], 2015. Child Maltreatment 2013. Retrieved from: <http://www.acf.hhs.gov/sites/default/files/cb/cm2013.pdf>.
- U.S. Department of Health & Human Services, 2017. Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau. Child Maltreatment 2015. Available from: <http://www.acf.hhs.gov/programs/cb/research-data-technology/statistics-research/child-maltreatment>.
- U.S. Department of Justice, 2003. Juvenile Offenders and Victims: 2002 National Report. USDJO, Office of Juvenile Justice and Delinquency Prevention, Washington, DC.
- U.S. Department of State, 2005. The Facts about Human Trafficking for Forced Labor. Available from: <http://www.state.gov/tip/ris/fs/2005/50861.htm>.
- U.S. Department of State, 2013. Trafficking in Persons Report. Retrieved from: <http://www.state.gov/tip/ris/tiprpt/2013/index.htm>.
- USA Gymnastics, 2009. Participant Welfare Policy. Retrieved from: www.californiatnt.com/USA%20Welfare.pdf.
- USA Swimming. n.d. Model Policy: Electronic Communication. Retrieved from: www.usaswimming.org/protect.
- Vamos, M., 2001. The concept of appropriate professional boundaries in psychiatric practice: a pilot training course. *Aust. N. Z. J. Psychiatry* 35, 613–618.
- Van den Heuvel, A., Van den Eijnden, R.J.J.M., Van Rooij, A.J., Van de Mheen, D., 2012. Meeting online contacts in real life among adolescents: the predictive role of psychosocial wellbeing and internet-specific parenting. *Comput. Hum. Behav.* 28, 465–472.
- van der Laan, P.H., Smit, M., Busschers, I., Aarten, P., 2011. Cross-border trafficking in human beings: prevention and intervention strategies for reducing sexual exploitation. *Campbell Syst. Rev.* 9.
- van Ouytsel, J., Walrave, M., van Gool, E., 2014. Sexting: between thrill and fear— how schools can respond. *Clear. House* 87, 204–212.
- Varma, S., Gillespie, S., McCracken, C., Greenbaum, V.J., 2015. Characteristics of child commercial sexual exploitation and sex trafficking victims presenting for medical care in the United States. *Child Abuse Negl.* 44, 98–105.
- Vranceanu, A.M., Hobfoll, S.E., Johnson, R.J., 2007. Child multi-type maltreatment and associated depression and PTSD symptoms: the role of social support and stress. *Child. Maltreat.* 31, 71–84.
- Wakeling, H.C., Webster, S., Moulden, H.M., Marshall, W.L., 2007. Decisions to offend in men who sexually abuse their daughters. *J. Sex. Aggress.* 13 (2), 81–99.
- Walker, K.E., 2002. Exploitation of children and young people through prostitution. *J. Child Health Care* 6 (3), 182–188.
- Walls, N.E., Bell, S., 2011. Correlates of engaging in survival sex among homeless youth and young adults. *J. Sex Res.* 48 (5), 423–436.
- Walsh, K., Brandon, L., 2012. Their children's first educators: parents' views about child sexual abuse prevention education. *J. Child Fam. Stud.* 21, 734–746.
- Walsh, K., Zwi, K., Woolfenden, S., Shlonsky, A., 2015. School-based education programmes for the prevention of child sexual abuse (review). *Cochrane Database Syst. Rev.* 4. Retrieved from: <http://www.thecochranelibrary.com>.
- Warf, C.W., Clark, L.F., Desai, M., Rabinovitz, S.J., Agahi, G., Calvo, R., Hoffman, J., 2013. Coming of age on the streets: survival sex among homeless young women in Hollywood. *J. Adolesc.* 36 (6), 1205–1213.
- Weatherley, R., Hajar, A.B.S., Noralina, O., John, M., Preusser, N., Yong, M., 2012. Evaluation of a school-based sexual abuse prevention curriculum in Malaysia. *Child. Youth Serv. Rev.* 34, 119–125.
- Weitzer, R., 2012. Sex trafficking and the sex industry: the need for evidence-based theory and legislation. *J. Crim. Law Criminol.* 101 (4), 1337–1369.
- Wells, M., Mitchell, K.J., 2008. How do high-risk youth use the Internet? Characteristics and implications for prevention. *Child. Maltreat.* 13 (3), 227–234.
- Werkele, C., Bennett, T., Francis, K., 2013. Child sexual abuse and adolescent sexuality. In: Bromberg, D.S., O'Donohue, W.T. (Eds.), *Handbook of Child and Adolescent Sexuality: Developmental and Forensic Psychology*. Academic Press, New York, pp. 325–345.
- WestCoast Children's Clinic, 2012. Research to Action: Sexually Exploited Minors (SEM) Needs and Strengths. WestCoast Children's Clinic, Oakland, CA. Retrieved from: http://www.westcoastcc.org/WCC_SEM_Needs-and-Strengths_FINAL.pdf.
- Whitaker, D.J., Lutzker, J.R., Shelley, G.A., 2005. Child maltreatment prevention priorities at the centers for disease control and prevention. *Child. Maltreat.* 10 (3), 24–259.
- Whittle, H.C., Hamilton-Giachritsis, C.E., Beech, A.R., Collings, G., 2013. A review of young people's vulnerabilities to online grooming. *Aggress. Violent Behav.* 18, 135–146.
- World Health Organization [WHO], 2014. Investing in Children: The European Child Maltreatment Prevention Action Plan 2015–2020. Retrieved from: <http://www.euro.who.int/en/about-us/governance/regional-committee-for-europe/64th-session/documentation/working-documents/eurrc6413-investing-in-children-the-european-child-maltreatment-prevention-action-plan-20152020>.
- Whittle, H.C., Hamilton-Giachritsis, C.E., Beech, A.R., 2015. A comparison of victim and offender perspectives of grooming and sexual abuse. *Deviant Behav.* 36, 539–564.
- Wiersma, L.D., Sherman, C.P., 2005. Volunteer youth sport coaches' perspectives of coaching education/certification and parental codes of conduct. *Res. Q. Exerc. Sport* 76 (3), 324–338.
- Wildsmith, E., Barry, M., Manlove, J., Vaughn, B., October 2013. Dating and Sexual Relationships. Retrieved from: <http://www.childtrends.org/wp-content/uploads/2013/10/2013-04DatingSexualRelationships.pdf>.
- Williamson, C., Prior, M., 2009. Domestic minor sex trafficking: a network of underground players in the Midwest. *J. Child Adolesc. Trauma* 2, 45–61.
- Willis, B.M., Levy, B.S., 2002. Child prostitution: global health burden, research needs, and interventions. *Lancet* 359, 1417–1422.
- Wilson, H.W., Widom, C.S., 2011. Pathways from childhood abuse and neglect to HIV-risk sexual behavior in middle adulthood. *J. Consult. Clin. Psychol.* 79 (2), 236–246.
- Wise, L.A., Palmer, J.R., Rothman, E.F., Rosenberg, L., 2009. Childhood abuse and early menarche: findings from the Black women's health study. *Am. J. Public Health* 99 (Suppl. 2), S460–S466.
- Wolak, J., Finkelhor, D., 2013. Are crimes by online predators different from crimes by sex offenders who know youth in-person? *J. Adolesc. Health* 53, 736–741.
- Wolak, J., Finkelhor, D., Mitchell, K., 2004. Internet-initiated sex crimes against minors: implications for prevention based on findings from a national study. *J. Adolesc. Health* 35 (5), 424.e11–424.e20.
- Wolak, J., Finkelhor, D., Mitchell, K.J., Ybarra, M.L., 2008. Online "predators" and their victims: myths, realities, and implications for prevention and treatment. *Am. Psychol.* 63 (2), 111–128.
- Wu, T., Mendola, P., Buck, G.M., 2002. Ethnic differences in the presence of secondary sex characteristics and menarche among US girls: the third National Health and Nutrition Examination Survey, 1988–1994. *Pediatrics* 110, 752–757.
- Wurtele, S.K., 1999. Preventing child maltreatment: multiple windows of opportunity in the health care system. *Children's Health Care* 28 (2), 151–165.
- Wurtele, S.K., 2002. School-based child sexual abuse prevention. In: Schewe, P.A. (Ed.), *Preventing Violence in Relationships*. American Psychological Association, Washington, DC, pp. 9–25.
- Wurtele, S.K., 2008. Behavioral approaches to educating young children and their parents about child sexual abuse prevention. *J. Behav. Anal. Offender Victim. Treat. Prev.* 1 (1), 52–64.
- Wurtele, S.K., 2009. Preventing sexual abuse of children in the twenty-first century: preparing for challenges and opportunities. *J. Child Sex. Abuse* 18, 1–18.
- Wurtele, S.K., 2010. *Out of Harm's Way: A Parent's Guide to Protecting Young Children from Sexual Abuse*. Parenting Press, Seattle, WA.
- Wurtele, S.K., 2012a. Preventing the sexual exploitation of minors in youth-serving organizations. *Child. Youth Serv. Rev.* 34, 2442–2453.
- Wurtele, S.K., 2012b. *Safe Connections: A Parent's Guide to Protecting Young Teens from Sexual Exploitation*. Parenting Press, Seattle, WA.

- Wurtele, S.K., 2017. Preventing cyber sexual solicitation of adolescents. In: Alexander, R. (Ed.), *Research and Practices in Child Maltreatment Prevention*, vol. 1. STM Learning, Inc., St. Louis, MO, pp. 361–393.
- Wurtele, S.K., Berkower, F., 2010. *Off Limits: A Parent's Guide to Keeping Kids Safe from Sexual Abuse*. Safer Society Press, Brandon, VT.
- Wurtele, S.K., Kenny, M.C., 2010a. Partnering with parents to prevent childhood sexual abuse. *Child Abuse Rev.* 19, 130–152.
- Wurtele, S.K., Kenny, M.C., 2010b. Preventing online sexual victimization of youth. *J. Behav. Anal. Offender Victim. Treat. Prev.* 2 (1), 63–73.
- Wurtele, S.K., Kenny, M.C., 2010c. Primary prevention of child sexual abuse: child- and parent-focused approaches. In: Kaufman, K.L. (Ed.), *The Prevention of Sexual Violence: A Practitioner's Sourcebook*. NEARI Press, Holyoke, MA, pp. 107–119.
- Wurtele, S.K., Kenny, M.C., 2012. Preventing childhood sexual abuse: an ecological approach. In: Goodyear-Brown, P. (Ed.), *Handbook of Child Sexual Abuse: Identification, Assessment and Treatment*. Wiley Press, Hoboken, NJ, pp. 531–565.
- Wurtele, S.K., Miller-Perrin, C.L., 1992. *Preventing Child Sexual Abuse: Sharing the Responsibility*. University of Nebraska Press, Lincoln, NE.
- Wurtele, S.K., Miller-Perrin, C.L., 2012. Global efforts to prevent sexual exploitation of minors. In: Dubowitz, H. (Ed.), *World Perspectives on Child Abuse*, tenth ed. International Society for Prevention of Child Abuse and Neglect, Denver, CO, pp. 82–88.
- Wurtele, S.K., Miller-Perrin, C., 2014. Preventing technology-initiated sexual victimization of youth: a developmental perspective. In: Kenny, M.C. (Ed.), *Sex Education: Attitude of Adolescents, Cultural Differences and Schools' Challenges*. Nova, New York, pp. 147–175.
- Wurtele, S.K., Owens, J., 1997. Teaching personal safety skills to young children: an investigation of age and gender across five studies. *Child Abuse Negl.* 21, 805–814.
- Wurtele, S.K., Marrs, S.R., Miller-Perrin, C.L., 1987. Practice makes perfect? The role of participant modeling in sexual abuse prevention programs. *J. Consult. Clin. Psychol.* 55 (4), 599–602.
- Wurtele, S.K., Kast, L.C., Miller-Perrin, C.L., Kondrick, P.A., 1989. A comparison of programs for teaching personal safety skills to preschoolers. *J. Consult. Clin. Psychol.* 57, 505–511.
- Wurtele, S.K., Gillispie, E.I., Currier, L.L., Franklin, C.F., 1992. A comparison of teachers vs. parents as instructors of a personal safety program for preschoolers. *Child Abuse Negl.* 16, 127–137.
- Wurtele, S.K., Kvaternick, M., Franklin, C.F., 1992. Sexual abuse prevention for preschoolers: a survey of parents' behaviors, attitudes, and beliefs. *J. Child Sex. Abuse* 1, 113–128.
- Wurtele, S.K., Moreno, T., Kenny, M., 2008. Evaluation of a sexual abuse prevention workshop for parents of young children. *J. Child Adolesc. Trauma* 1, 1–10.
- Yakushko, O., 2009. Human trafficking: a review for mental health professionals. *Int. J. Adv. Couns.* 31, 158–167.
- Yates, A., 1982. Children eroticized by incest. *Am. J. Psychiatry* 139, 482–485.
- Zabin, L.S., Emerson, M.R., Rowland, D.L., 2005. Childhood sexual abuse and early menarche: the direction of their relationship and its implications. *J. Adolesc. Health* 36, 393–400.
- Zajac, K., Ralston, M.E., Smith, D.W., 2015. Maternal support following childhood sexual abuse: associations with children's adjustment post-disclosure and at 9-month follow-up. *Child Abuse Negl.* 44, 66–75.
- Zandenbergen, P.A., Levenson, J.S., Hart, T.C., 2010. Residential proximity to schools and daycares: an empirical analysis of sex offense recidivism. *Crim. Justice Behav.* 37, 482–502.
- Zeizima, K., February 4, 2014. Super Bowl Prostitution Ring Forced Teens as Young as 13 into Sex Work. FBI. Retrieved from: http://www.huffingtonpost.com/2014/02/04/super-bowl-prostitution_n_4724522.html.
- Zhang, W., Chen, J., Feng, Y., Li, J., Zhao, X., Luo, X., 2013. Young children's knowledge and skills related to sexual abuse prevention: a pilot study in Beijing, China. *Child Abuse Negl.* 37 (9), 623–630.
- Zhang, W., Chen, J., Feng, Y., Li, J., Liu, C., Zhao, X., 2014. Evaluation of a sexual abuse prevention education for Chinese preschoolers. *Res. Soc. Work Pract.* 24 (4), 428–436.
- Zinser, L., December 10, 2011. Coaching Gives Abusers Opportunity and Trust. Retrieved from: <http://www.nytimes.com/2011/12/11/sports/culture-of-sports-works-against-children-especially-boys-reporting-abuse>.
- Zolotor, A.J., Theodore, A.D., Coyne-Beasley, T., Runyan, D.K., 2007. Intimate partner violence and child maltreatment: overlapping risk. *Brief Treat. Crisis Interv.* 7, 305–321.
- Zwi, K.J., Woolfenden, S.R., Wheeler, D.M., O'Brien, T.A., Tait, P., Williams, K.W., 2007. School-based education programmes for the prevention of child sexual abuse (Review). *Cochrane Database Syst. Rev.* 3. Art. No: CD004380.