Treatment and Intervention for Victims of Commercial Sexual Exploitation of Children

PROPOSER INFORMATION

Proposer Name: Pittsburgh Action Against Rape

Authorized Representative Name & Title: Alison Hall, Executive Director

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	Legal Status:	For-Profit Corp.	🛛 Nonprofit Corp.	□Sole Proprietor	□ Partnership
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Date Incorporated: 1972 REQUIRED CONTACTS

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Contract Processing Contact	Carlos Golfetto	412-431-5665	Carlosg@paar.net
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2016-2017 - BOARD OF DIRECTORS

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Treatment and Intervention for Victims of Commercial Sexual Exploitation of Children

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Board Chair information:

Board Chairperson Name & Title: Marie Hamblett, Program Director, Leadership Pittsburgh

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REFERENCES

Provide the name, affiliation and contact information [include email address and telephone number] for three references who are able to address relevant experience with your organization. *Please do not use employees of the Allegheny County Department of Human Services as references.*

Liz Miller, MD, PhD Chief, Division of Adolescent and Young Adult Medicine, Children's Hospital of Pittsburgh of UPMC Professor of Pediatrics Univ. of Pittsburgh School of Medicine

Delilah Rumburg President & CEO Pennsylvania Coalition Against Rape

Karen Stubenbort, LCSW, Ph.D. Clinical Consultant

PROPOSAL INFORMATION

Date Submitted 2/23/2017

Amount Requested: \$195,000

Proposal Abstract:

Outpatient Treatment

The intensive and unique needs of CSEC victims will be addressed through PAAR's drop-in center. This center is designed to create opportunity for CSEC victims to work toward healing from abuse and breaking free from their trafficker to gain self-sufficiency and build a strong support system.

Organization of the space within the drop-in will be designed to meet both practical and recreational needs of CSEC victims, short term and long-term needs of each victim will be assessed and include immediate and relevant responses to needs.

Staff will include: Case Center Manager, Trauma therapist, Case Manager, and Advocate. The center will provide a safe place for victims to come to on a daily basis where they can gain trust to discuss their immediate and long terms needs while addressing the trauma of sexual abuse.

This project will provide comprehensive and coordinated services that address the unique needs of CSEC victims, ages 13-21, through trauma therapy, intensive case management, life skill development, while providing all victim services in accordance with Pennsylvania Commission on Crime & Delinquency standards that PAAR has provided for over 45 years.

The center will be located in Pittsburgh's, South Side neighborhood, and will operate six days a week - Mondays through Thursdays 10:00 am to 6:00 pm., Fridays - 12:00 pm to 4:00 pm and Saturdays 10:00 am to 2:00 pm. There will be group space for psychoeducational work, personal space for interactions with peers and space for clients to use a computer, a shower, and kitchenette for small meals and snacks. There will be four offices for each staff member so that victims will have privacy in therapy, case management, goal development, and any legal, case discussions. Work will be done individually and in group settings facilitated by skilled professionals.

Case Managers and Advocates will assess the safety and the "practical/life needs" of these clients and respond with any crisis counseling and needs to first ensure safety. PAAR will work with any and all community providers to meet housing, medical, child, education, workforce, HIV needs that may exist. PAAR will provide these victims with a range of psycho-educational programs to assist them in their individual life goals while providing therapy to overcome trauma bonding with their trafficker and sexual abuse.

PAAR's program philosophy will empower CSEC victims through trauma services that include Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), Cognitive Processing Therapy (CPT), and Motivational Interviewing (MI) and the full continuum of victim services.

PAAR's trauma-focused services will be delivered by skilled professionals committed to offering victim-centered, trauma care for CSEC victims with complex needs. Finally, the drop-in center program model will support activities that facilitate CSEC victims meeting their short-term and long -term individual goals as they heal from abuse and gain their freedom and independence.

CERTIFICATION

Please check the following before submitting your Proposal, as applicable:

□ My firm is registered with the Allegheny County Department of Minority, Women and Disadvantaged Business Enterprises.

 \boxtimes I have read the standard County terms and conditions for County contracts and the requirements for DHS Cyber Security, EEOC/Non-Discrimination and HIPAA.

By submitting this proposal, I certify and represent to the County that all submitted materials are true and accurate, and that I have not offered, conferred or agreed to confer any pecuniary benefit or other thing of value for the receipt of special treatment, advantaged information, recipient's decision, opinion, recommendation, vote or any other exercise of discretion concerning this RFP.

REQUIREMENTS

Please respond to the following. The maximum score a Proposal can receive is 100 points for an inpatient program and 100 points for outpatient services. The inpatient program and outpatient services will be scored separately. Please respond to the questions in the following sections:

A. Organizational Experience (20 points). Your response to this section should not exceed 3 pages.

1. Describe your experience providing services to victims of CSEC and human trafficking. Include your experience working with a variety of systems (e.g., child welfare, juvenile/criminal justice, legal advocates, non-profits that work with vulnerable youth).

PAAR's mission: Respond, Educate and Advocate to end sexual violence. PAAR was one of the first rape crisis centers in the country and was the first victim service provider in Allegheny County. PAAR has provided services to victims of sexual violence for over 44 years. Last year PAAR served over 3300 victims. Child victims have been treated at PAAR for over 38 years, and last year over 1200 children and families received services at PAAR.

During this time, PAAR has empowered survivors of sexual violence through medical accompaniment, legal advocacy, a helpline, prevention and outreach, and trauma counseling. PAAR's commitment to working with victims of sexual violence has led to local and national recognition, and PAAR is often requested to present to mainstream mental health providers on the subject of sexual violence.

Western Psychiatric Institute and Clinic routinely refers clients to PAAR, recognizing PAAR's skilled clinicians in the trauma treatment for victims of sexual abuse.

PAAR has a long track record of providing psycho-educational programs and direct services to the following vulnerable populations: victims of sex trafficking – adults and adolescents, members of the Latino/Hispanic Community, individuals struggling with addiction, immigrant populations, and the LGBTQ community.

PAAR's objective as an agency is to provide services and programs focused on the successful treatment, support, outreach and prevention of sexual violence.

PAAR also has decades of experience providing victims with the services they are entitled under the Victim's Rights Statute in Pennsylvania. PAAR follows the Consolidated Standards established by the Pennsylvania Commission on Crime and Delinquency (PCCD) for victim services.

PAAR has always been a key player in discussions on victim service delivery in Allegheny County.

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Since PAAR was the first agency in the county to offer services to victims PAAR have essentially helped craft the County Protocol for Sexual Abuse investigation and treatment. PAAR participate on A Child's Place and Children's Hospitals Child Advocacy Center's protocols as an established service provider, and represent victim services on the County's Multi-Disciplinary Investigative Team, and attend monthly case review meetings.

PAAR has longstanding relationships in the community and has worked with educators, schools, colleges, hospitals, workforce development agencies, drug and alcohol agencies, immigration attorneys, police, the District Attorney's office, and housing groups. PAAR has also collaborated with providers in the community to make services more accessible to victims of sexual violence by establishing two satellite offices in Lawrenceville and McKeesport

PAAR has played a key role since the inception of the Southwest Pennsylvania Human Trafficking Task Force in 2008. PAAR serves on the steering committee along with Special Agents from the FBI, Mary Burke, PhD. founder of the Project to End Human Trafficking, Elizabeth Miller, MD Chief of Adolescent Medicine Children's Hospital of Pittsburgh. PAAR also serves on the county's Unaccompanied Youth Task force as invited by the Department of Human Services.

PAAR chairs the Sex Offender Management and Containment Task Force of Allegheny County - this multidisciplinary-task force comprised of members of all systems in Allegheny County that play a role in the justice system related to sex offenses and victims of sexual violence was instituted by PAAR. The first Sex Offender Court in Pennsylvania is here in Allegheny County. It was approved by the Pennsylvania State Supreme Court in 2008, and is a direct result of PAAR's efforts. PAAR also participate in countless other community and statewide initiatives aimed at improving response to victims of sexual violence as well as preventing sexual violence.

PAAR has lead discussions and facilitated training on recognizing victims of human trafficking and assessing their needs. From a survivor's first call to the end of any needed service they can feel confident that a professional devoted to the needs of sexual violence victims will assist them throughout any service they need. Staff recognizes the issues unique to sexual assault victims that other crime victims may not experience.

PAAR has provided trainings on sex trafficking vulnerabilities and identification of victims to all City of Pittsburgh police and to Allegheny County detectives. Our training is now part of the standard curriculum at the City and County Police Academies. PAAR is versed in the enacted Federal and state laws on sex trafficking. PAAR represents Western Pennsylvania on the Pennsylvania Alliance Against Trafficking in Humans (PAATH) Steering Committee.

As PAAR discussed this project with local and federal law enforcement, medical personnel, they have all encouraged and support this needed effort. PAAR has worked with the FBI on Human Trafficking needs for over eight years, and is presently working with Liz Miller, MD to establish the county's first acute protocols for immediate and long term needs for trafficked youth. PAAR have also been participating in meetings with Shuman Center, since PAAR respond to victims at the facility, on what their plan may look like if they provide shelter for CSEC victims.

Our experience indicates that CSEC victims are not emotionally able to integrate into models of what presently exist in the County, therefore PAAR has established a drop-in center that will address the needs of these victims. This is a traumatized population that feel very isolated from their peers. Many may still reside with their trafficker, therefore, having issues and needs unique to trauma and trauma bonding. In addition, some of these victims PAAR see and the age mentioned in this request are much younger than the age served through existing programming.

2. Describe your understanding of the complex short- and long-term needs of CSEC victims.

PAAR is well suited to address the needs short term and long term needs for CSEC victims, since they mirror the issues of sexual assault victims- especially those who have a romantic relationship with their abuser.

Victims are at a significantly higher risk of experiencing long-term mental health consequences, including suicide, eating disorders, substance abuse, promiscuity, low self-esteem, psychiatric hospitalizations, and post-traumatic stress disorder.

CSEC and other victims of sexual violence experience high levels of PTSD, anxiety, depression, and higher risk of suicide than other crime victims. There may also be co-occurring disorders that our therapists readily recognize and will coordinate care to address other mental health issues, as well as medical needs. Victims also have a strong trauma bond with their trafficker, trust issues with other adults or peers, experience relationship problems, and anger issues.

PAAR's trauma-focused services include individual and supportive counseling utilizing evidencebased approaches—Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), Cognitive Processing Therapy (CPT), and Motivational Interviewing (MI). Both TF-CBT and CPT foundation in Cognitive Behavioral Therapy emphasize behavior change and work on eliminating cognitive distortions regarding the trauma bond with the trafficker. Also, aspects of (MI) counseling will be adopted to foster a collaborative, person-centered relationship with victims of sex-trafficking.

In addition to the therapeutic needs of victims, this population has unique practical needs which will be addressed by providing intensive personal advocacy/case management for all and any needs that exist for the victim to help them gain their freedom and independence. PAAR has longstanding relationships in the community and works with educators, schools, colleges, workforce development agencies, drug and alcohol agencies, immigration attorneys, police, District Attorney's office, housing groups, and other victim service agencies inside Allegheny County and throughout the country.

To address long and short term needs, psychosocial treatments will be used throughout the time victims spend in the drop-in center. Psycho-educational groups will also be utilized on a variety of topics – Anger and Shame, Managing Triggers, etc. Life Skill sessions will be held in group settings on Healthy Relationships and Sexuality, HIV Awareness, workforce development, nutrition, conflict resolution, financial and time management, educational needs, Immigration needs, and communication skills. Tutors can also be brought in as needed. Wellness and creative arts classes will also be available to victims.

3. Describe your experience fulfilling health and human services contracts.

PAAR has proven success as a contractor throughout our 44- year history. PAAR receives funding annually from PA DHHS as passed through PCAR, Federal and state funding through PCCD. PAAR has regular financial and programmatic audits by all government funders and is a contractor in good standing. PAAR is also a contractor in good standing with Allegheny County Department of Health and Human Services.

As a contractor with DHS for over 18 years PAAR have a long-standing history of successfully working with children and families in the child welfare system. As one can imagine sexual violence does not happen in a vacuum and the entire family unit is affected therefore PAAR also work closely with other services providers when they are involved with families as well to ensure continuity of services to that child and family while they are seeking services at PAAR.

4. Please attach a copy your organization's financial audits or certified financial statements for the past three years (not counted towards page limits).

See attached

C. Outpatient Services Design (80 points).

Your response to this section should not exceed 13 pages.

1. Describe your model for outpatient services that will provide evidence-informed services to address short- and long-term needs of CSEC victims.

Model of Outpatient Program:

- 1. Crisis intervention services counseling, accompaniment, safety planning, etc.
- 2. Group work (Psychoeducation, psychosocial rehabilitation and support groups)
- 3. Trauma-focused Cognitive Behavioral Therapy (TF-CBT)
- 4. Cognitive Processing Therapy (CPT)
- 5. Motivational Interviewing (MI)
- 6. Life skill development

PAAR's services will be provided to CSEC victims, in a victim-centered, trauma focused, culturally competent, and evidenced-based manner. PAAR's Drop-in Center will be a safe site for all CSEC victims. It is space where all victims, female, male and LGBTQ victims can come daily to gain social skills, life skills, while working to address the trauma of their abuse, in a setting staffed by individuals with extensive expertise to help and provide appropriate interventions.

Victims come to PAAR through a variety of ways – police, including FBI, medical facilities, schools, and by self -referral. It is expected that through word of mouth that the center will be a safe place with staff that relates to adolescents and young adults. Staff can address in the trauma of sexual abuse in a non-judgmental way while doing an assessment of client needs. The center will house a full time therapist, two case managers, and an advocate.

PAAR's advocates respond to the crisis needs of all victims –support and accompaniment to hospitals for medical care, support when victims speak with police and are present at any and all law enforcement proceedings. They will develop a safety plan and ensure victims' immediate safety needs. They will continue to work with the victim as long as it takes to help them through the legal system, and also assist with all rights the victim has under the Victims' Rights Laws in PA.

List of Victim services provided to all victims of sexual assault including CSEC: Helpline

PAAR's 24/7 crisis helpline assisted 6,300 people last year. This initial contact is critical for victims to experience validation of their experiences, and PAAR strives to utilize the most efficient systems available.

Crisis Intervention

Crisis intervention provides the person in crisis with the tools to manage the crisis and to facilitate movement toward stability. PAAR will provide a range of services, including safety planning, to a victim during any crisis that may occur in the aftermath of a sexual assault.

PAAR will provide safety planning to any sexual assault victim who has immediate safety needs. If the victim is in danger, a safety plan addressing the immediate situation will be developed utilizing strategies for achieving physical safety. Those strategies may include:

- Alternative housing including shelter and/or witness protection program.
- Address Confidentiality Program (ACP).
- Alternative contact plans.
- Obtaining a protection from abuse order, or other safety strategies

Accompaniment

PAAR staff will provide accompaniment and the necessary services for all individuals regardless of abilities or English proficiency in both criminal cases and juvenile cases. During accompaniment, staff provides crisis intervention, crisis counseling or victim education as the need arises. Staff will explain the purpose of the proceeding and clarify the victim's role in the proceeding. These advocates are knowledgeable about all criminal or juvenile justice proceedings through their regular contact with the courts. PAAR is an integral part of Allegheny County's Sex Offender Court and was largely responsible for its development. PAAR staff will provide in-person support, scheduling and orientation information, and coordinate the provision of accompaniment services that will eliminate duplication of efforts. **Assessment**

Assessment begins at the point of engagement when the victim voluntarily accepts services offered. Assessment consists of the initial and ongoing process whereby PAAR staff obtains the necessary information from a victim in order to assist them, identifies victims' needs from the victimization, and provides the victim with information on services and rights. Assessment information also gives staff appropriate information regarding any cultural, language, and/or disability needs of the victim and then staff will make the appropriate accommodations. PAAR will help the victim understand all services PAAR offer and their purpose, as well as provide an explanation of Victim's rights in Pennsylvania.

Individual Advocacy

PAAR engages in individual advocacy by obtaining information or by providing active visible support throughout criminal, juvenile justice, protection orders and enforcement proceedings or situations related to the victimization requested by and on behalf of the victim. Individual advocacy is an active process that can occur any time after victimization. PAAR staff will ensure that individual advocacy is provided in the wide range of situations that arise for victims. In addition, PAAR staff will advocate for other services that might benefit a sexual assault victim and will link an individual with the resources necessary to address those needs.

Provide other services within the system by:

- a. Intervening with creditors, landlords and employers.
- b. Intervening with justice system personnel.
- c. Obtaining document replacement.
- d. Supporting the crime victim before, during and after the trial or other criminal/juvenile proceeding.
- e. Orienting the crime victim to the justice system.
- f. Orienting the crime victim to the Victim's Bill of Rights.
- g. Introducing the crime victim to other systems personnel.
- h. Obtaining a Protective Order.
- i. Providing crime-specific information.
- j. Planning safety strategies.
- k. Assisting with Victims Compensation.

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I. Composing a Victim Impact Statement.

m. Post sentencing Victim Input and Notification.

n. Arranging for property return and/or repair.

Victims Compensation Assistance

The Victims Compensation Assistance Program (VCAP) is a financial resource available to victims of crime in Pennsylvania that helps victims and their families ease the financial burdens they may face as a result of crime. PAAR will provide information to the victim about Victims Compensation Assistance and assist, directly or indirectly, in the preparation, filing and follow-up of any claim for Victims Compensation Assistance.

The Case workers will assist victims with any and all other short term and long-term needs and a service plan will be developed with clients for their short and long term goals.

Safe housing will be a priority for each client, and PAAR will work with providers to establish a safe alternative to those victims who leave their trafficker.

Determine whether client is currently a victim and or also has history of sex trafficking through: Trauma history Family and social background Addiction history Legal history Medical history including psychiatric history

Assessment of client's stage of change by using MI approach (Collaboration, Evocation, Autonomy). Preparatory Change Talk: Desire (I want to change) Ability (I can change) Reason (It's important to change) Need (I should change)

And most predictive of positive outcome: Implementing Change talk Commitment (I will make changes) Activation (I am ready, prepared, willing to change) Taking Steps (I am taking specific actions to change)

Trauma-sensitive interventions will include safety as the foundation of work and aim to achieve abstinence from substance, eliminate self-harm, develop trustworthy relationships, gain control over symptoms, attain healthy self-care, and remove oneself from dangerous situations. **Psychoeducation groups**

A major benefit of group work is validation. By being in a group with a number of people struggling with the same problem, one can see that he/she is not alone. In addition, survivors learn that some people in the group are having a hard time coping with the same difficulties - relationship problems, substance use, loss of sleep, or impulsive behaviors. In addition, it can be difficult for a person without PTSD to understand what someone with PTSD is going through. They may have a hard time understanding how difficult it is to cope with thoughts and feelings about a past traumatic event. However, in a group

setting, other people with PTSD may be able to more easily recognize and validate what one is going through because they have had very similar experiences.

PAAR has a system of service delivery that meets clients where they are in the healing process. PAAR engages in a process of ongoing assessment so PAAR can craft a treatment plan that not only asserts their basic victim rights but will also assist victims and significant others in the overall healing from their traumatic experiences.

This list is a sample and not exhaustive of the topics through group work:

Anger and Shame, Managing Triggers, Life Skill sessions held in group settings on Healthy Relationships, Healthy Sexuality, HIV Awareness, workforce development, nutrition, conflict resolution, financial and time management, educational needs, Immigration needs, and Wellness. Tutors will also be on site.

The goal of this program is to provide the clients with safety, a foundation for life skills development, treatment for trauma so they are empowered to lead a safe and independent life from their trafficker.

Case management also includes life skills development and will include, but not limited to: **Education**

Basic goal – HS diploma or GED Study skills / Homework assistance Time management skill work Workforce Development **Resume Preparation** Job interview skills Dressing for success ESL if needed **Immigration Consultation** Writing Clinics Independent Living / life skills Cooking, cleaning, laundry, money management, Nutrition Social skills / conflict resolution / getting involved in the community **Healthy Relationships** Healthy Sexuality (could be done in an education format) **HIV Awareness** Wellness classes Transportation will also be provided by PAAR to assist clients in reaching their goals.

Individual Therapy:

CSEC and other victims of sexual violence experience high levels of PTSD, anxiety, depression, a higher risk of suicide than other crime victims. There may also be co-occurring disorders that our therapists readily recognize and will coordinate care so other mental health issues are addressed.

PAAR's trauma-informed services will include individual and supportive counseling utilizing evidence-based approaches – Trauma- Focused Cognitive Behavioral Therapy (TF-CBT) for child victims. TF-CBT is an evidence-based treatment shown to help children, adolescents, and their caregivers overcome trauma-related difficulties. Its components-based psychosocial treatment model incorporates elements of cognitive-behavioral, attachment, humanistic, empowerment, and family therapy models.

CPT is indicated for adult clients, 18 years and older, who have experienced a recent rape, childhood sexual abuse and/or have extensive trauma histories. It is appropriate for clients with co-morbid

disorders including depression and anxiety. It can be adapted for clients with special needs including people with a mild to moderate intellectual disability.

Eye Movement Desensitization and Reprocessing (EMDR) – is a treatment that helps clients to process a traumatic experience by using bilateral eye movements to reduce distressing lingering effects and develop more adaptive coping mechanisms.

7. Describe how you will meet the complex needs of CSEC-involved youth through outpatient services, identifying partner organizations if necessary.

PAAR's therapists have an extensive training background in working with victims of sexual violence. All approaches used by our therapists, follow evidence-based practices and non-judgmental care principles. This philosophy is extended to our work with CSEC victims at our drop-in center as well. PAAR will also use its experience on working with underserved minority populations. PAAR will create an environment for victims that values, empowers, and fosters positive change for male and female victims of sexual exploitation. PAAR is aware that CSEC victims are particularly susceptible to deceptive persuasions of grooming also known as trauma bonding. Since victims have not yet developed a full understanding of social interactions, PAAR's trauma-focused approach will emphasize positive and healthy strategies through social rehabilitation and psychoeducational groups. To attend to the varied array of services CSEC victims require, PAAR will collaborate with other systems in the community. These services include but will be not limited to: long term housing, access to food, clothing and personal care items, access to affordable health care, education, employment, life skills training, trauma therapy, group therapy, and chemical dependence rehabilitation. These services will be facilitated by on-site case managers.

Carlos Golfetto, MsEd., NCC, ACS, LPC, PAAR's Clinical Director has expertise in running a drop in-center since he did so for Peoples Oakland. It is important to have a full complement of staff to ensure efficacy of programming and to mitigate any personal conflicts that may come up in a group setting.

Collaborative Partners include–The Project to End Human Trafficking, Children's Hospital, Department of Human Services in Allegheny County, FBI, City of Pittsburgh Police, Allegheny County Police, various Drug and Alcohol treatment providers – POWER, Gateway Rehab, Cove Forge, Schuman Center for short term housing alternative, other housing agencies that include – Action Housing, Women's Center & Shelter, other providers through the DHS, employment centers Job Corp, University of Pittsburgh, literacy agencies, 412 Youth Zone, YWCA, and transportation companies. The above list is not exhaustive given PAAR will interface with agencies depending on the unique needs of the victims.

8. Describe your plan for accommodating the various populations of CSEC victims, including male and transgender youth.

PAAR has historically treated males and LGBTQ youth and adults. PAAR's therapists are aware of specific needs related to working with male survivors of sexual violence and the LGBTQ community. PAAR's therapists understand that trauma looks different in men than in women due to their different life experiences, as well as, gender roles. PAAR has partnered with Persad to bring trainings to our staff to increase awareness when working with the LGBTQ community. PAAR is a designated Safe Zone for LGBTQ youth. In May 2017, PAAR will receive training on sexual orientation, gender

identity, and gender expression (SOGIE) from Persad center to increase staff awareness of LGBTQ needs.

With regard to male victims, PAAR understands that they are less likely to report the abuse and seek for counseling services. PAAR has reached out and provided services to male victims of sexual violence from all ages in the community. PAAR therapists are aware of specific needs related to male survivors of sexual violence including cognitive beliefs about their victimization. PAAR has also noticed that the number of male clients is growing each year. In our experience males may question their identity and sexual orientation more frequently. Also, male victims' symptoms following trauma can look different, therefore, they are more likely to develop emotional disorders, substance abuse, and risk taking behavior. PAAR is confident that its trauma-focused services can accommodate CSEC victims with attention tailored to their recovery needs. Services will be also coordinated with other agencies in the community to connect CSEC victims with systems through PAAR's Drop-in center staff.

9. Provide examples of how your approach will be victim-centered and culturally competent.

As one of the oldest rape crisis centers in the county, PAAR's services have always been victim centered, and trauma informed. PAAR are a contractor and program in good standing with Pennsylvania Coalition Against Rape (PCAR) which sets the standards for services to sex assault victims, and also with PCCD – again establishing standards for all services victims are entitled to under the Victim Rights Statute in PA.

Under those standards PAAR offers culturally competent services. PAAR is a designated Safe Zone for LGBTQ youth. PAAR is committed to working effectively with culturally diverse clients and underserved minority populations from a social justice perspective. Our entire staff has gone through trainings to exemplify best practices in underserved populations. In May 2017, PAAR will receive training on sexual orientation, gender identity, and gender expression (SOGIE) from Persad center. PAAR have been collaborating with key community centers such as Casa San Jose, Latino Center, Community Justice Project, and the Jewish Family & Children Center. One of our clinicians was appointed this past year to receive a training offered by Harvard University on Trauma and recovery on Refugees. This same clinician will be attending a training on "Evaluating Immigrant Survivors of Torture and III Treatment" offered by Tulane University School of Social Work. In 2016, Julie Evans, Director of Victim Response and Prevention was the recipient of The Stardust Award" for her outreach in the Gay, Lesbian, Bisexual, and Transgendered communities in Allegheny County.

In 2014 Carlos Golfetto, Clinical Director, was selected by SAMHSA (Substance Abuse and Mental Health Services Administration) to the National Board for Certified Counselors as one of their Minority Fellowship Program Fellowship Awardees for his academic qualifications as well as his commitment to serving underserved minority populations. Golfetto also facilitated a workshop in 2016 on trauma-informed care for the counseling center at Dammam University in Dammam City, Saudi Arabia.

PAAR has two full-time Spanish speaking therapists who are available to provide services CSEC victims.

10. Describe how you will assess and recommend next steps for youth during and upon completion of outpatient services.

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As a comprehensive center PAAR will assess each client according to their individual goal achievement. The main concern would be that the client is stable, safe, have a healthy support network, and continues to work toward individual goals. If client enters and completes therapy and needs something beyond trauma, PAAR's focus will connect them to an appropriate mental health provider if they are not presently working with one. PAAR will also follow-up with caregivers to confirm they are acting as a strong support for victims and reinforcing the healthy coping skills clients have learned through group and/or individual therapy.

11. Describe how will you engage and help youth participating in outpatient services who do not recognize that they are victims of CSEC.

PAAR offers sexual violence education programs for survivors of sexual violence in the community. PAAR recognizes that many survivors may remain underserved due to poverty, transportation, homelessness, addiction, mental illness, and the inability to recognize sexual abuse.

Within various settings – community agencies, churches and libraries PAAR offers survivors programming designed to enable them to recognize abuse, abusive relationships, make connections between sexual violence and addiction, promote healing and develop healthy relationships and seek needed services.

Public presentations are a vital provision to any community. They provide important information and an avenue of access for victims to resources available to them. PAAR receives numerous referrals from community groups, mental health agencies, and from victims directly contacting PAAR for crisis and counseling services. It is common for survivors to disclose sexual abuse immediately following these programs. PAAR is able to provide crisis intervention services in that moment and immediately connect survivors to services. Targeted outreach includes: individuals struggling with addiction and mental health issues, homeless shelters, individuals with cognitive or physical disabilities and the Latino/Hispanic Community.

Some victims do identify themselves as CSEC, but most do not since the trauma bond with the trafficker is strong. The victims are attached to their trafficker since they may be their boyfriend, parent, caretaker. Therefore, it takes a skilled advocate/practitioner to finesse the conversation to gain information to assess victimization.

PAAR's advocates are skilled at developing relationships with adolescents, teens, and young adults so dialog can occur. Advocates respond to high schools or community groups when someone has disclosed potential sexual abuse, as well as the standard protocol to dispatch a PAAR advocate to Children's Hospital, and/or A Child's Place both Child Advocacy Centers. PAAR also meet victims at Shuman Center when disclosures occur. PAAR's advocates are engaging youth at the 412 Youth Zone two afternoon/evenings a week, which will help identify victims of abuse and connect them to services.

All PAAR staff have received training on cues that can indicate CSEC. At times, our advocates are the only people that victims trust and relate.

In addition to our extensive outreach, PAAR has also conducted targeted messages through our billboard campaigns. These are placed throughout the county, to connect victims to services, and to recognize potential abuse. Our website is presently being updated and will include information about services to victims who are trafficked. PAAR's billboard campaigns run for three months each year, and PAAR will continue to do so in the future.

12. Describe your strategy for staffing outpatient services, including the recruitment, retention and qualifications of staff.

As a dedicated victim service center all staff and volunteers take the 40-hour Sexual Assault Counselor's training to enable privilege between all modes of communication between PAAR staff/volunteers and the victims PAAR serve.

PAAR's therapists are Master's level fully licensed or license- eligible which means they have passed their respective licensing exam and are now gaining hours for full licensure. In addition to their specialized education, PAAR has a 20 hour/year ongoing education development requirement for all direct service staff.

PAAR's trauma-informed services will include individual and supportive counseling utilizing evidence-based approaches – Trauma- Focused Cognitive Behavioral Therapy (TF-CBT) for child victims. TF-CBT is an evidence-based treatment shown to help children, adolescents, and their caregivers overcome trauma-related difficulties. Its components-based psychosocial treatment model incorporates elements of cognitive-behavioral, attachment, humanistic, empowerment, and family therapy models.

CPT is indicated for adult clients, 18 years and older, who have experienced a recent rape, childhood sexual abuse and/or have extensive trauma histories. It is appropriate for clients with co-morbid disorders including depression and anxiety. It can be adapted for clients with special needs including people with a mild to moderate intellectual disability.

Eye Movement Desensitization and Reprocessing (EMDR) – is a treatment that helps clients to process a traumatic experience by using bilateral eye movements to reduce distressing lingering effects and develop more adaptive coping mechanisms.

Therapists most recently have attended the University of Wisconsin-Madison's Conference on Child Sexual Abuse- Evidence-Based Research and Practice in Child Sexual Abuse Treatment in October 26-28, 2015.

While PAAR does not require Advocates to have a Master's degree, most do. In addition to the 40hour Sex Assault Counselor's training Advocates typically receive 30 hours of ongoing victim service, trauma, or human trafficking training each year. The advocates received over 128 hours of training related to human trafficking in 2014 and 2015. They have also facilitated numerous trainings in Allegheny County on the subject.

The detailed information below lists the conferences advocates attended in the last two years. Juvenile Sex Trafficking (JuST) Conference, *Shared Hope International in November 2015* Human Trafficking, Prostitution & Sex Work Conference, *University of Toledo in Oct 2015* GEMS Human Trafficking Training, *PCAR in August 2015*

Human Trafficking, Prostitution & Sex Work Conference, *University of Toledo in Sept 2014* National Sexual Assault Conference, HT workshops in August 2014

Case Managers will be expected to have the same qualifications and training requirements as PAAR's Advocates.

PAAR's entire staff will receive an eight- hour training in March 2017 conducted by Rita Abadi, LMPC, Operations Manager and Clinician, at the Mt. Sinai Sexual Assault and Violence Intervention Program (SAVI) in New York City. Ms. Abadi started the Human Trafficking program at SAVI and has over 10 years of experience with this population.

13. Describe your current capacity and the number of youth you would be able to serve once you implement outpatient services. DHS anticipates that between five and 20 youth may need outpatient treatment at any given time.

Since July 2016 PAAR has served 12 CSEC victims. PAAR still have eight of them on our current caseload. I believe it will not take long to reach the threshold of 20 clients mentioned in this request.

PAAR has the capacity to serve the number of clients listed in the proposal, and more as PAAR anticipate more and more victims will come forward to disclose CSEC. PAAR will leverage PCCD funding for one case manager to this project so that present and future clients will be served through this center.

While PAAR are offering therapy and legal advocacy PAAR are not able to offer the complete continuum of services outlined in this proposal. Clients would greatly benefit from the intensive case management and life skill program that PAAR is proposing. The center will allow a comprehensive approach to the needs of this population.

14. Describe your experience working with managed care organizations to receive reimbursement and your willingness to do so for the outpatient services.

PAAR has worked with managed care organizations for the past six years. Our licensed therapists are approved/credentialed by CCBH, UPMC, Highmark, and Value Care in Beaver County since PAAR provide services to children there at the request of Beaver County CYF. Not all PAAR clients have insurance, but no one is turned away for services.

PAAR has received reimbursement for providing therapy to eligible clients, but has not billed for case management. Case management for the project population is more intensive and will explore that billing option in the future.

15. Describe how you will collect outcome data and provide reports to DHS for the outpatient services.

PAAR utilized ETO – Efforts to Outcome Client Software that is approved by PCCD tracks outcomes and efforts. The program is cumbersome to use, and PAAR are looking for a less cumbersome client tracking system in the near future, but for now ETO will suffice.

Outcome measures of the CSEC program will include:

Tracking attendance of clients in social rehabilitation and psycho-social rehabilitation groups. Case Management efforts will be measured by reviewing goals achieved by each client as listed on their individual service plan. Such as – is client back in school, obtained a GED, enrolled in a vocational training program or college, or other post-secondary institute, obtained employment, practice health coping skills, established a healthy support network, attended a specific group in the community related to the service plan, is away from trafficker and living in a healthy environment, is client stable enough to begin individual therapy.

For those victims who enter therapy the efficacy of therapeutic modalities will be assessed by self -report tools that measure decrease in posttraumatic stress symptoms, depression, anxiety through self-report assessments These tools include: PCL - Post- Traumatic Checklist, Becks Depression Inventory, or Child Depression Inventory. CPSS – PTSD checklist for children.

PAAR will provide report data to DHS through the DHS Key Information and Demographic System KIDS or other reports that can be provided.

16. Describe the outcome data that will be provided to DHS for outpatient services.

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See above outcomes that will be provided. PAAR are happy to work with DHS to determine what kind of data/demographic information that they would want to see.

17. Provide an outpatient services budget that does not exceed \$200,000 and a budget narrative that reflects an accurate estimate of the costs associated with implementing services. The budget may be an attachment that does not count towards page limits.

Salaries & Benefits:

- Center & Case Manager on-site project manager, and provide intensive case management and psychoeducation and psychosocial groups.
- Advocate provides victim services accompaniment, crisis support, victims comp. etc.
- Admin. Client Services tracks demographics and outcomes
- Accounting submits billing for reimbursement
- > Executive Director overall program and service management and contract management
- Clinical Director Project director

Program Expenses:

- Client Travel –related travel toward achieving clients' individual goals
 - GED testing, doctor's visits, etc.
- Emergency Clothing appropriate clothing provided for appointments & meetings
 - o 50 people -\$25/person
- Emergency Food snacks and meals for clients
- Emergency Supplies toiletries, personal hygiene products, undergarments, etc.

Facility:

- Rent
- Utilities & Maintenance includes repairs, cleaning, and maintaining a security system at the site.

Administrative:

• All items are relevant to providing programming at the center and staff travel for accompanying victims to appointments.

PAAR is utilizing other funding that includes: VOCA, third party reimbursement, private donor dollars, etc. to provide this program and services PAAR believe is most effective for success in healing and establishing independence for CSEC victims.

18. Provide a timeline that corresponds with the budget and that reflects a realistic plan to start and sustain services.

- June to August 31st
 - Renovation of space includes- 4 offices, conversation areas, group instruction, client computer space, shower, and small kitchenette
 - Purchase relevant furniture and equipment
 - > Hire and train Center and Case Manager and one Advocate
 - > Produce material for systems for awareness of program
 - Update website on Drop-in Center

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- September 1st
 - > Fully functional, Center opens for services