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In Five States, There Was No Evidence That Many Children in Foster Care Had a Screening for Sex Trafficking When They Returned After Going Missing

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Why OIG Did This Review

In 2020, the National Center for Missing and Exploited Children received more than 17,000 reports of possible child sex trafficking. Traffickers are known to prey on vulnerable children with low self-esteem and minimal social support, and histories of abuse, neglect, and trauma—traits that are common among children in foster care. Because of these children's heightened vulnerability, identifying who is, or is at risk of becoming, a victim of sex trafficking is a vital step to providing children in foster care with prevention and treatment services.

How OIG Did This Review

We identified five States that (1) reported the largest number of children in "runaway status" in fiscal year 2018, and (2) required children to be screened for sex trafficking after returning from going missing from foster care. From these States, we selected a random sample of children. We reviewed foster care case file documentation for 413 children to determine the extent to which the children in our sample were screened (as required) to identify whether they were victims of sex trafficking. Additionally, we assessed the extent to which States' policies may have contributed to the screening practices that we observed.

In Five States, There Was No Evidence That Many Children in Foster Care Had a Screening for Sex Trafficking When They Returned After Going Missing

Key Takeaway

In five States, there was no evidence that many children in foster care received a screening to determine whether they were victims of sex trafficking. For some of the children who were screened, their case file documentation lacked information to ensure that the children were accurately identified as possible victims of sex trafficking. As a result, many children's risks and potential needs may have gone unidentified and unaddressed.

What OIG Found

In 5 States, the case files of 65 percent of children in our review (268 out of 413 children) did not have evidence of a screening—following each child's return to foster care—to identify whether they were victims of sex trafficking. Such screenings are required by Federal law and State policy. Further, we found that for male children, the proportion of case files that had no evidence of a screening was greater than for female children (72 percent of males compared to 59 percent of females).

We found that when screenings occurred, they often lacked the information needed to ensure that children were accurately identified as victims of sex trafficking. Documentation showed instances in which (1) screenings did not include comprehensive questions to determine children's experiences while missing from care; (2) screenings did not have evidence of followup when children did not answer screening questions; and (3) screeners relied on children's self-disclosures to make determinations. Additionally, one-third of screenings conducted did not have a conclusion documented (e.g., whether the child was a victim of sex trafficking, whether more information was needed).

However—although such screenings are not required—we found a few examples of screenings that included an assessment of children's future risk for becoming victims of sex trafficking.

Finally, we found limitations in States' oversight mechanisms and policies that may have contributed to some of the poor screening practices we identified. Some States lacked in their ability to identify whether screenings for sex trafficking had occurred, limiting the States' ability to oversee and ensure that these screenings were occurring when required.

Additionally, although such policies are not required, none of the States that we reviewed had policies for identifying children in foster care who are at risk of becoming victims of sex trafficking when they return to foster care after going missing.

What OIG Recommends and How the Agency Responded

To better protect children in foster care from the dangers of sex trafficking and ensure that victims of sex trafficking are identified and provided with needed support services, we recommend that the Administration for Children and Families:

- (1) work with States to improve compliance with requirements to screen children who return to foster care after going missing to identify whether they are victims of sex trafficking;
- (2) encourage all States to evaluate the value of adding an assessment of risk for sex trafficking when children return to foster care after going missing; and
- (3) conduct oversight activities to identify States that may not screen all children for sex trafficking when they return to foster care after going missing.

ACF concurred with all three recommendations.

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BACKGROUND

OBJECTIVES

To determine the extent to which:

1. children in foster care from five selected States were screened to determine whether they were victims of sex trafficking when they returned after going missing, as required; and
 2. such screenings included an assessment of children's risk of becoming victims of sex trafficking, although such assessments are not required.
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Sex trafficking of children occurs across America in all settings: rural, urban, and suburban.¹ In 2020, the National Center for Missing and Exploited Children received more than 17,000 reports of possible child sex trafficking.² Sex trafficking of children means the recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting a child under 18 years of age for the purpose of a commercial sex act.³ A commercial sex act does not always include the exchange of money. For instance, items like food, shelter, and/or drugs may be offered in exchange for sex with a child.⁴

Children in foster care who are victims of sex trafficking can be negatively impacted by multiple physical and mental health issues that can have long-lasting effects. Trafficked children are at risk of significant physical health impacts, including injury, unplanned pregnancies, and sexually transmitted diseases.⁵ Additionally, these children can experience mental health issues such as depression, substance abuse, self-destructive behavior, and suicidality.⁶

Identifying children who are, or are at risk of becoming, victims of sex trafficking is a vital step to providing children in foster care prevention and treatment services. Traffickers are known to prey on vulnerable children with low self-esteem and minimal social support.⁷ These traits are common among children in foster care because of their histories of abuse, neglect, and trauma.⁸

In January 2022, the Department of Health and Human Services (HHS) announced the formation of the Task Force to Prevent Human Trafficking that will facilitate the implementation of the priority actions HHS has committed to in the President's *National Action Plan to Combat Human Trafficking*.^{9, 10} The task force will work to prevent human trafficking—particularly in high-need areas—while integrating an equity lens into new public awareness strategies to better reach populations at disproportionate risk for human trafficking.

ACF funding and oversight of State foster care programs

Under Titles IV-B and IV-E of the Social Security Act, the Administration for Children and Families (ACF) provides Federal funding to States and eligible Tribes (which we refer to collectively as States) to support child and family welfare, including programs that provide care and services for the over 670,000 children in foster care.^{11, 12, 13} To receive Federal funding, States are required to submit to ACF a Child and Family Services Plan (CFSP) every 5 years with annual updates, and a Title IV-E Plan, as necessary, to reflect new Federal requirements or changes within the State.¹⁴ State plans contain the official policies and procedures that individual States establish to fulfill the funding requirements of the respective programs. Each State must designate an agency (State Agency) responsible for administering child welfare and foster care programs.¹⁵

To help States achieve positive outcomes for children, ACF monitors and provides oversight to State foster care programs through various means. ACF oversight includes reviewing and approving State plans and annual updates, providing technical assistance, and conducting program reviews. ACF issues guidance, including program instructions, that explain procedures and methods for operationalizing program policies, add details to program regulations or policy guide requirements, and convey to grantees program guidance information on actions they are expected or required to take.¹⁶ Working with the States, ACF conducts periodic reviews of each State's foster care program, known as Child and Family Services Reviews (CFSRs), to determine whether the State is in "substantial conformity" with Title IV-B and IV-E State plans and program requirements, based on outcomes and systemic factors specified in regulation.¹⁷ In making its assessment, ACF uses a compliance review instrument that assesses particular criteria and makes a determination based on the entirety of the review. However, the CFSR instrument does not specifically address screenings for sex trafficking.¹⁸ ACF may conduct a "partial review" to address conformity with requirements outside of the scope of the CFSR.¹⁹

Preventing Sex Trafficking and Strengthening Families Act

The 2014 Preventing Sex Trafficking and Strengthening Families Act (Preventing Sex Trafficking Act) was enacted in an effort to prevent and address sex trafficking of children in foster care.²⁰ The Preventing Sex Trafficking Act amends the Social Security Act by requiring States to develop policies and procedures for identifying, documenting in agency records, and determining appropriate services for children in the placement, care, or supervision of the State Agency whom the State has reasonable cause to believe are, or are at risk of becoming, victims of sex trafficking.^{21, 22} Further, the Preventing Sex Trafficking Act added requirements that States develop policies and procedures for "expeditiously locating any child missing from foster care," and "determining the child's experiences while absent from care, including screening the child to determine if the child is a possible sex trafficking victim."²³

ACF report to Congress

The Preventing Sex Trafficking Act required ACF to submit a summary report to Congress about the sex trafficking of children in foster care.²⁴ This ACF report, published in August 2019, provides an overview of children who had run away from foster care and their risk of becoming victims of sex trafficking.²⁵ The report stated that a history of child maltreatment is among the strongest risk factors for sex trafficking, including histories of child neglect and the experience of multiple forms of abuse (other than trafficking). The report further highlighted that children who go missing from foster care can have an increased susceptibility to trafficking victimization, especially those that have fewer resources and family relationships to fall back on while missing. ACF cited that studies of older foster youth found that nearly half report having run away from their placement at some point in their foster care experience. Additionally, this report cited that the National Center for Missing and Exploited Children found that males remain a small percentage of children who are assessed for sex trafficking, although the identification of male child victims has increased.²⁶

In this report, ACF noted that one method for screening is the use of indicator tools. Indicator tools can be used to identify a child as being at risk or at high risk of trafficking based on the number and severity of indicators identified.²⁷ One tool ACF cited, the WestCoast Children's Clinic's Commercial Sexual Exploitation-Identification Tool (CSE-IT), instructs screeners to score the concern level of numerous indicators across several categories. Some of the indicators include whether the child:

- runs away frequently;
- has unstable housing (including multiple foster care placements);
- has previous history of abuse;
- has significant change in appearance;
- has tattoos/scarring/branding that indicates being treated as someone's property;
- has health problems or complaints related to poor nutrition;
- has a significant change or escalation in substance use; and
- receives or has access to unexplained money, credit cards, hotel keys, gifts, drugs, alcohol, or transportation.

National Advisory Committee on the Sex Trafficking of Children and Youth in the United States

The Preventing Sex Trafficking Act also authorized the establishment of the National Advisory Committee on the Sex Trafficking of Children and Youth in the United States (the Committee).²⁸ The Committee was established in September 2017. In September

2020, the Committee published a report titled *Best Practices and Recommendations for States*.²⁹ The Committee provided recommendations to States and Federal stakeholders with the goal of improving the Nation's response to the sex trafficking of children. The recommendations include improvements to training; screening and identification; service provision; housing; and many others. The report also included a section specific to child welfare, with resources and examples of training; policies and procedures; and implementation. In January 2022, the Committee issued a preliminary report titled *Preliminary State Self-Assessment Survey Overview*, which summarized 29 States' self-assessments of their progress implementing the recommendations made by the Committee.^{30, 31} In a final report, the Committee will evaluate the extent to which States adopted the Committee's recommendations.³²

Screening for sex trafficking

Accurately screening children to identify who is a victim of sex trafficking is an important step to providing prevention and treatment services to children who return to foster care after going missing. Children often do not self-identify as trafficking victims and frequently do not disclose their abuse because of fear, shame, or loyalty to their abuser(s)—it is not the responsibility of children to recognize that they are being victimized; it is the responsibility of child-serving professionals to identify the vulnerabilities, risk factors, and indicators.³³

It is important that the screenings of children in foster care for sex trafficking be documented in agency records. Complete and accurate documentation is essential to support a supervisor or colleague's ability to assure a child's safety, well-being, and permanence, and ensure that appropriate services are provided. Additionally, such information is required for State agencies to meet Federal reporting requirements.³⁴

States may develop their own screening methods or use methods that have been developed by other entities. Some screening methods use behavioral or situational indicators, such as the WestCoast Children's Clinic's CSE-IT, that can be noted during conversations, observed during interactions, or identified from case records. Others involve standardized interview questions or the use of a tiered approach in which positive responses on a brief tool trigger more in-depth screening. States may use the same method to identify victims of sex trafficking as they use to identify children at risk of becoming victims of sex trafficking.

Related Work

OIG has previous work evaluating the health and safety of children in foster care. In May 2022, OIG published a national snapshot of how many children were missing from foster care in each State, and summarized States' policies and procedures to report and locate children missing from foster care.³⁵ In September 2021, OIG found that the Missouri foster care agency rarely attempted to reduce children's risk of going missing, failed to protect all children who were missing from foster care, and did not effectively use resources to assist in locating them.³⁶ In March 2021, OIG

found that some States lack oversight systems to ensure that every child victim has a court representative, and found that some States have challenges that impede their ability to appoint a representative to every child victim.³⁷ In 2020, OIG found that—contrary to Federal laws and regulations—Kansas did not ensure that all foster care group homes complied with State licensing requirements related to the health and safety of children in those homes.³⁸ In 2015, OIG found that in four States, nearly a third of children in foster care who were enrolled in Medicaid did not receive at least one required health screening.³⁹

Methodology

Scope and State selection. This evaluation focuses on screening children in foster care for sex trafficking when they return after going missing in five selected States: Illinois, Massachusetts, Minnesota, Pennsylvania, and Texas. Each State defines which situations are documented as going missing from foster care, including when children are missing, have been abducted, or have run away. For this report, we refer to all children who are missing, have run away, or are otherwise absent as “missing.” These States were selected using two criteria: (1) the States reported the largest number of children in “runaway status” in their reporting to ACF at the end of fiscal year 2018, and (2) the State policies required children to be screened for sex trafficking after returning from going missing from foster care.^{40, 41}

Sample selection. From each of the selected States, we requested a list of every child who returned to the State’s foster care program after going missing from July 1, 2018, through June 30, 2019. In the 5 states, these lists contained 2,629 children. We then selected about 100 children from each State, for a total sample of 501 children. Of the 501 children initially selected, 88 were excluded because they did not meet our evaluation criteria. This resulted in a final sample of 413 unique children. For each child selected, we requested that the State identify the last episode of going missing that occurred during the review period. See the Detailed Methodology for information on how many children were selected from each State.

Data collection. From each of the five selected States, we requested any policies and procedures related to identifying children in foster care who are victims of sex trafficking, such as related State statutes, regulations, policy manuals, and procedure instructions.

For each child in our review, we requested all documentation from foster care case files that demonstrated evidence of compliance with screening children to identify those who are victims of sex trafficking.

Data analysis. We reviewed each selected State’s policies and procedures to determine its requirements related to screening children in foster care for sex trafficking.

For each child in our review, we reviewed all documentation for the child’s final episode of going missing during the review period that was submitted by the States.

For each child, we determined whether a screening occurred and whether a conclusion of the screening was documented (e.g., whether the child was at risk of sex trafficking, whether the child was a victim of sex trafficking, whether more information was needed). We accepted any evidence of a screening that documented that the child was asked questions which would indicate whether the child was a victim of sex trafficking. This included conversations with the child about the child's experience while missing from care, interviews, or screening tools. The selected States varied in the timeframe required to complete a screening of children who return to foster care after going missing (from one business day to unspecified). We accepted any evidence of a screening that was specific to the child's episode of going missing, regardless of how long after the child's return to care it occurred.

We verified our findings with the States and gave them opportunities to provide additional documentation for any children's case files that did not show evidence of a screening.

Limitations

Our evaluation was limited to the 413 children in our review and the documentation the States submitted and cannot be generalized to all children that were missing from foster care during our review period. It is possible that some children in our review received screenings that were not included in the documentation submitted; therefore, this study may have underestimated the provision of required screenings, conclusions of screenings, and plans for next steps for these children.

Standards

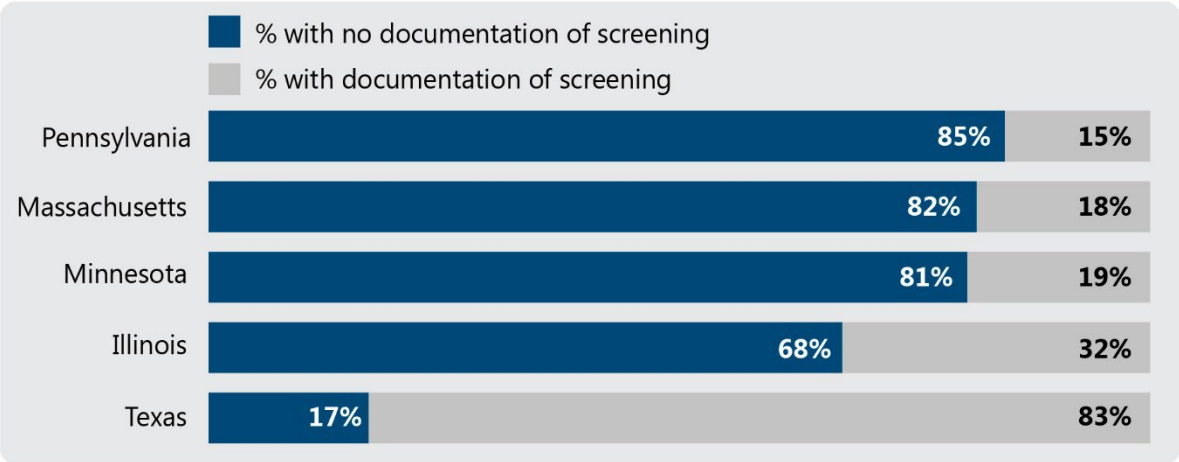
We conducted this study in accordance with the *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.

FINDINGS

In five States, there was no evidence that nearly two-thirds of children in our review received a required screening for sex trafficking when returning to foster care after going missing

In 5 States, the case files of 65 percent of children in our review (268 out of 413 children) did not have evidence that a screening to identify whether they were victims of sex trafficking, as required when a child returns to foster care after going missing. Of the States reviewed, Pennsylvania had the highest percentage of case files with no evidence of screening. At the other end of the spectrum, Texas screened 83 percent of the children, considerably more than each of the other four States reviewed. One possible reason for the higher rate of screening in Texas is that it is the only State reviewed that has special investigators conduct the majority of screenings to identify children who are victims of sex trafficking.⁴² See Exhibit 1 for individual State screening rates.

Exhibit 1: The case files of many children in our review had no documentation of a screening to identify whether they were victims of sex trafficking, as required.



Source: OIG analysis of documentation in foster care case files, 2022. Our review included 74 children from Pennsylvania, 91 children from Minnesota, 88 children from Massachusetts, 62 children from Illinois, and 98 children from Texas.

If States do not screen children for sex trafficking when they return to foster care, indicators that children are at risk or victims of sex trafficking, may be missed. In the documentation we reviewed, we found evidence that numerous children who were not screened for sex trafficking had risk factors or indicators of being trafficked. Multiple children had evidence of frequently going missing from foster care—a risk factor for heightened risk of trafficking victimization—yet they did not receive a screening when they returned to care after going missing. The documentation for

other children showed that the children received money from strangers, sold or used drugs, or became pregnant while missing; however, despite these risk factors and indicators, there was no evidence that these children were screened for sex trafficking.

We reviewed the case file documentation of one child who had frequently gone missing from care and had previously been investigated as a possible victim of sex trafficking. The documentation showed that during the time this child was missing from foster care, the child was suspected to be with a man and other females who were known to be involved in sex trafficking. Despite these risk factors, the child's case file did not contain evidence of a screening for sex trafficking after the child had returned from going missing.

For male children, the proportion of case files that had no evidence of a screening was greater than for female children

For male children, the proportion of case files that had no evidence of a screening was greater than for female children. The case files of 72 percent of male children (126 out of 174) lacked evidence of such a screening, compared to 59 percent of female children's files (142 out of 239). This is consistent with research which has indicated that males are less likely to be assessed for sex trafficking than females. See Appendix A for individual State screening rates.

Several male children reported experiences associated with risk or victimization of sex trafficking; however, without screenings, there was no evidence that these children's needs for services or interventions were identified. Several male children had frequent histories of going missing from care, or previous concerns noted in their case files; however, they were not screened for trafficking. The documentation reviewed for one child noted that he was frequently missing from his placement and often returned with "high priced items," and another child reported that he received money from strangers and had to sleep on the floor while missing. However, there was no evidence that either of these children were asked additional questions about these experiences, or any other questions to screen them for sex trafficking.⁴³

When screenings occurred, they often lacked important documentation

Screenings identified during our review often had limited documentation to indicate whether the children were accurately identified as victims of sex trafficking. The lack of documentation was concerning because accurately identifying children as victims of sex trafficking is a vital step to providing children in foster care with treatment services.

There were concerning instances where the screenings did not document the collection of information needed to identify whether children were victims of sex

trafficking. Additionally, one-third of the screenings conducted did not have a conclusion documented (e.g., whether children were victims of sex trafficking). However—although such screenings are not required—we found a few examples of screenings that included an assessment of children’s future risk for becoming victims of sex trafficking.

Documentation showed instances where screenings lacked the information needed to identify whether the child was a victim of sex trafficking

- **Documentation showed instances where screenings did not include comprehensive questions to determine children’s experiences while missing from care.** The documentation showed instances in which the questions screeners asked children did not provide the screeners with enough information to determine children’s experiences while missing from foster care. For example, according to case file documentation, one screener asked a child if the child had “engaged in risky behaviors” while missing from foster

One child was documented as disclosing having sexual activity while missing from foster care but said they could not remember any details. There was no evidence that the screener noted any concern about what happened to the child while they were missing or asked the child any additional questions.

care with no clarifications as to what risky behaviors may entail or any additional questions. Some of the more thorough screenings included questions such as, “Did anyone ask you to do anything in exchange for money, food, a place to stay, or anything else?”; “Where did you stay?”; “How did you get food?”; “Did anyone make you or ask you to do anything that made you feel uncomfortable?”; “Did anyone ask you to take or send inappropriate photos?”

- **Documentation showed instances where screenings did not have evidence of followup when children did not answer screening questions.** The documentation showed instances in which the screeners did not follow up when children refused to answer questions about sex trafficking and their experiences while missing from foster care. The case files for these children showed no additional attempts by screeners to question the children or to gain the information through other approaches (e.g., a trauma-informed approach, which responds to factors that can contribute to hesitancy to respond; referring the child to a Child Advocacy Center⁴⁴). These children may have experienced sex trafficking. However, when screeners do not get responses to screening questions, children may not be identified as victims of sex trafficking and may not receive necessary services.
- **Documentation showed instances where screeners relied on self-disclosure to make determinations.** The documentation showed instances in which screeners appeared to rely on children’s self-disclosure to determine that a child was not a victim of sex trafficking, despite the presence

of risk factors or indicators. Children often do not self-identify as victims for many reasons, and the goal of screening should be to identify the vulnerabilities, risk factors, and indicators of sex trafficking. In multiple cases, the conclusion documented by the screener stated that “the child made no outcry of abuse or trafficking.” In another case, the child stated he was not a victim of sex trafficking—he was the pimp who was trafficking others. Despite this child’s disclosure, there was no evidence that anyone discussed with this child the dangers and risks associated with being involved in sex trafficking, asked him questions about his safety, and no evidence of any attempts to intervene or to get him out of this “ring.”

It is possible that the screeners discussed more with the children than what was documented in the case files; however, child welfare professionals rely heavily on the information that is included in children’s case files to provide coordinated care and to ensure that children are provided needed services. When a comprehensive screening is not documented, other adults in a child’s life (e.g., case supervisors, court-appointed special advocates, new case workers who are assigned to a child’s case) cannot determine whether the child is receiving needed services.

Screenings for children did not always have a conclusion documented

The documentation for a third of the children who were screened lacked a documented conclusion, meaning the outcome of the screenings were unclear. Of the 145 children whose case files evidenced that they were screened for sex trafficking, 48 children’s screenings (33 percent) did not have a conclusion documented. For these children, the documentation did not indicate whether the child was a victim of sex trafficking, nor did it indicate what, if any, additional actions were needed to ensure the safety and well-being of the child. Of the States reviewed, screenings from Illinois lacked documented conclusions most often. This is likely because the screening tool Illinois uses does not prompt the screener for a conclusion response. See Appendix A for the number of documented conclusions for each State.

A conclusion is essential to ensuring that children receive critical supportive services to help address risks or trauma they may have experienced while missing from care. Children may benefit from supportive services such as therapy to address their mental health needs, or a change in placement to reduce their risk of going missing in the future. Additionally, documented conclusions help ensure that States report

an accurate number of children who were identified as victims of sex trafficking, as required by Federal law.

One child, whose case file we reviewed, reported during a screening that while missing from foster care the child sold drugs and stayed with an older, abusive boyfriend. This child also had a history of frequently going missing from care. There is no evidence in the case file as to whether the screener concluded that these indicators put this child at risk of sex trafficking or not, or evidence that the screener made any attempts to gain additional information about the child's experiences while missing from foster care.

A few of the screenings documented an assessment of children's risk for becoming victims of sex trafficking

The Preventing Sex Trafficking and Strengthening Families Act requires States to develop policies and procedures to identify children who are at risk of becoming victims of sex trafficking, as well as identifying those children who are already victims of sex trafficking. Although this requirement does not specify that this identification of risk should occur when children return from going missing from foster care, we found 20 screenings in our review that included such an assessment. These examples demonstrated the potential value of assessing the children's risk factors when they return to foster care after going missing and offer examples of preventative services that can be provided to children at risk of becoming victims of sex trafficking. Some of these services included therapy, counseling, a more thorough assessment at a Child Advocacy Center, and placement in a more secure setting or a facility that specializes in sexually exploited and trafficked youth. Additionally, we found evidence of case workers, in these instances, using this opportunity to educate children on the dangers of sex trafficking.

States lacked mechanisms to ensure screenings were conducted and lacked policies directing staff to identify children who are at risk of becoming victims of sex trafficking when children return after going missing



Three States lacked oversight mechanisms to ensure screenings were being conducted.

Three States had limited ability to identify whether screenings for sex trafficking occurred. Easy identification of completed screenings is important for State foster care agencies to be able to oversee and ensure that screenings are occurring when required. Three of the States reviewed did not have a system for collecting and storing screenings for sex trafficking that allowed for easy identification of screenings. These States must review each case file—either in paper or electronically—to determine whether a screening has occurred. This

method can be time consuming and makes it difficult to ensure that children receive required screenings. Further, continuity of care in the event of case worker turnover relies on comprehensive documentation. Without documentation of screenings for sex trafficking, including details and conclusions of the screenings, it can be difficult for case supervisors and other management to be assured that case workers screened the children as required.



Although they are not explicitly required by Federal law to have such policies, all five States lacked policies directing staff to identify children at risk of becoming victims of sex trafficking when they return after going missing. During our review, we found that many of the documented screenings did not determine or discuss children's risk of becoming victims of sex trafficking. Federal law requires foster care agencies to identify and document in agency records children who are at risk of becoming victims of sex trafficking. Although this law does not require such identification to occur at the time children are screened for sex trafficking when they return to foster care after going missing, critical attempts to prevent children from becoming victims of sex trafficking could be missed. Though there is no Statewide policy in Texas, the State's five largest counties require the use of the CSE-IT (WestCoast Children's Clinic's Commercial Sexual Exploitation-Identification Tool) to screen children when they return to foster care after going missing.⁴⁵ The CSE-IT is designed to assess children's risk of becoming victims. These five counties in Texas require that children in foster care be screened with the CSE-IT tool after returning from going missing from care.

CONCLUSION AND RECOMMENDATIONS

From our review of case files for children in foster care in five States, many children had no evidence of a screening for sex trafficking during a crucial period of their care. Children who are not screened or are poorly screened may not be accurately identified as victims of sex trafficking and may be at enhanced risk for future victimization. Additionally, these children may not be receiving care that they need to recover from trauma that they may have experienced.

In these five States, we found that the case file documentation for two-thirds of children lacked evidence that they were screened to identify whether they were victims of sex trafficking following the children's return to foster care, as required by Federal law and State policy. Additionally, we found that one-third of the screenings conducted did not have a conclusion documented. A conclusion is essential to ensuring that children receive critical supportive services to help address risks or trauma they experienced while missing from care. Finally, we found that most screenings did not include an assessment of children's future risk of becoming victims of sex trafficking after they returned from going missing, potentially missing critical opportunities to prevent or reduce children's risk.

Our findings indicate that although States have policies and procedures in effect to screen children returning to foster care for sex trafficking, States are often not complying with these policies and procedures. As a result, ACF cannot be assured that children in foster care are protected from the dangers of sex trafficking, or that victims of sex trafficking are identified and provided with needed support services.

We recommend that ACF:

Work with States to improve compliance with requirements to screen children who return to foster care after going missing to identify whether they are victims of sex trafficking

To do this, ACF should provide proactive technical assistance to States to improve compliance with requirements for: (1) screening children who return to foster care after going missing to identify who is a victim of sex trafficking and (2) documenting these screening conclusions. Depending on the State, technical assistance could include working with the State regarding methods to collect screenings for sex trafficking or assisting the State with developing oversight mechanisms to assess its compliance. ACF should consider consulting with internal and external offices with expertise on sex trafficking, such as the ACF Office on Trafficking in Persons, to develop the technical assistance.

Encourage all States to evaluate the value of adding an assessment of risk for sex trafficking when children return to foster care after going missing

As required by Federal law, every State should have policies for identifying children in foster care who are at risk of becoming victims of sex trafficking. Although the law does not specifically require an assessment of this risk when children return to foster care after going missing, ACF should encourage all States to evaluate the value of adding such an assessment, given children's heightened risk for trafficking at that time. ACF should provide technical assistance to States to develop effective and robust policies, as needed.

Conduct oversight activities to identify States that may not screen all children for sex trafficking when they return to foster care after going missing

Our review found that many children in five States were not screened to identify whether they were victims of sex trafficking when they returned after going missing, as required. ACF should conduct oversight activities to identify States that may not screen all children for sex trafficking when they return from going missing. These oversight activities could include ACF developing a process for and conducting partial reviews of States that appear to have vulnerabilities in this area. If the review reveals that the State is out of compliance with its IV-E State Plan, ACF should establish a program improvement plan with the State.

We acknowledge that resource limitations make a review of every State impracticable. OIG has provided ACF with information about States that—from the information in our review—do not appear to conduct these screenings as required, and ACF could use that information to prioritize oversight.

ACF could also consider the feasibility of requiring information about sex trafficking screenings in Child and Family Services Plans or assessing sex trafficking screenings in the measurement of one of the outcomes or systemic factors in future Child and Family Services Reviews, making any regulatory changes necessary.

AGENCY COMMENTS AND OIG RESPONSE

ACF concurred with all three of OIG's recommendations.

Regarding our first recommendation, ACF stated that through the Capacity Building Center for States (the Center), it will continue to work with States to improve compliance with requirements to screen children who return to foster care after going missing to identify whether they are victims of sex trafficking. The Center provides tailored technical assistance to States to improve outcomes and overall system functioning. The Center already has developed a peer group—the *Preventing and Addressing Sex Trafficking in Child Welfare* peer group—that promotes collaboration among child welfare professionals. Additionally, the Center has developed related publications, learning experiences, videos, and other digital products.

Regarding our second recommendation, ACF stated that it will continue to encourage all States to evaluate the value of adding an assessment of risk for sex trafficking when children return to foster care after going missing. ACF again cited the resources available to States through the Center. ACF did not specifically describe how it has, or will continue to, encourage States to add an assessment of risk for sex trafficking when children return to foster care after going missing.

Regarding our third recommendation, ACF stated that it takes the duty to prevent trafficking seriously and will work to emphasize this duty to State programs. ACF stated that it has instructed its regional office staff to contact the appropriate officials in each of the five States identified in this report as potentially not screening children for sex trafficking in accordance with Federal law. Additionally, ACF stated that if it believes that a State is in noncompliance with this requirement, it would initiate a partial review and would implement a program improvement plan, as necessary. ACF stated that it will continue to use its existing regulatory review and oversight processes to further explore the scope of potential noncompliance and will continue to evaluate what, if any, regulatory changes may be needed.

OIG appreciates ACF's continued efforts to work with States to respond to and develop strategies for preventing sex trafficking of children in foster care.

For the full text of ACF's comments, see Appendix B.

DETAILED METHODOLOGY

State policies

We collected State policies and procedures from five States related to identifying children in foster care who are victims of sex trafficking from the five selected States.

We reviewed each selected State's policies and procedures to determine its requirements related to screening children in foster care who are victims of sex trafficking. We then sent the list of requirements to each State for verification.

Population and sample selection

From each of the selected States, we requested population data on every child who returned to the State's foster care program after going missing from July 1, 2018, through June 30, 2019; however, one State—Pennsylvania—was unable to provide the requested population.

Pennsylvania's foster care program is administered by each county and it was determined to be too burdensome and time consuming to request the needed data from each county to identify the population of children we requested. Instead, the Pennsylvania State foster care agency used the biannual data it collects from the counties to identify the population. Pennsylvania identified 101 children who possibly met our evaluation criteria, but this is likely not the entire population of children who met these criteria. We collected and reviewed the submitted case file documentation for each of the 101 children and determined that 74 children met our evaluation criteria.

Illinois, Massachusetts, Minnesota, and Texas each provided the requested population of children, from which we selected a simple random sample of 100 children from each State. We collected and reviewed the submitted case file documentation for each child.

For the purpose of this report we define "child" as anyone in foster care that the State policies required to be screened for sex trafficking after returning from going missing. The policies in Illinois, Massachusetts, and Minnesota require children in foster care up to age 21 to be screened for sex trafficking when they return from going missing. The policies in Pennsylvania require such screenings for children up to age 18. The policies in Texas also require such screenings for children in foster care up to age 18; however, officials in Texas stated that because the screening is interview-based, the child must also be "able to communicate verbally/sign." For that reason, we included children age 4 and older.

To allow ample time for the screening to occur, the child must have been 6 months less than the age limit for required screening at the date of the child's return to foster

care (e.g., a child in Illinois must have been 20.5 years old or younger on the date the child returned to foster care to be included in our review).

After reviewing the documentation, we identified that Illinois had used incorrect criteria to identify the population of children, so many children in the sample were ineligible to be included in our evaluation. Specifically, children who were not missing from foster care, but rather were in unapproved placements, were included in the population; however, these children are not required to be screened for sex trafficking, per Illinois's policies, so they were ineligible for inclusion in our evaluation.

Due to the issues identifying accurate populations of children in Pennsylvania and Illinois, findings in these States are not projectable to all children who returned to foster care after going missing. We, therefore, did not project any of the findings in this report. See Exhibit 2 for details on each State-identified population and sample sizes.

Exhibit 2: State-identified population of children in foster care who returned to the State's foster care program after being missing from July 1, 2018, through June 30, 2019.

State	Identified Population of Children	Sample Size	Ineligible Sampled Children	Final Sampled Children in Our Review
Illinois	430	100	38	62
Massachusetts	949	100	12	88
Minnesota	200	100	9	91
Pennsylvania	101*	101	27	74
Texas	949	100	2	98
Total	2,629	501	88	413

*Due to data limitations, Pennsylvania identified children who possibly met our evaluation criteria, but this is likely not the entire population of children who met these criteria.

Source: OIG analysis of State data and documentation in foster care case files, 2022.

Data analysis

We reviewed the foster care case file documentation to determine whether each sampled child received a screening to identify whether the child was a victim of sex trafficking. Additionally, we reviewed the foster care case file documentation to determine, for the children who received a screening, whether the conclusion of the screening was documented and addressed both risk and victimization of sex trafficking.

Many of the children included in our review went missing from foster care multiple times during our review period. For each child, we reviewed the most recent return to foster care after going missing that occurred from July 1, 2018, through June 30, 2019. We evaluated any screenings related to sex trafficking for each child following the

child's most recent return to foster care, if any were found in the documentation submitted by the State.

In the cases for which a child refused to answer screening questions, we determined these attempts to screen counted as a screening (i.e., the State met its requirement to screen that child after the child returned to foster care). However, in the absence of any further attempts to screen the child or any notations of additional actions or services needed by the child, we determined these cases to not have a conclusion of the screening documented.

We used State-provided data to determine whether a child was male or female. For the children for whom the State did not provide such data, we used the case file documentation to identify the pronouns that were used to refer to the child and/or that the child used to refer to themselves. We then based our identification of male and female children on the pronouns that were used. We specifically analyzed gender based on previous research that indicated that male children are less likely to be screened to identify whether they are victims of sex trafficking.



Other characteristics have also been identified as increasing risk for sex trafficking victimization. ACF cited research that has identified children living in poverty; lesbian, gay, bisexual, and transgender youth; and minority-race youth to be at increased risk of trafficking; however, these findings may reflect the populations studied rather than underlying differences.⁴⁶ Additionally, the data we collected for this evaluation did not reliably identify these characteristics. Therefore, we did not request or analyze additional demographic characteristics for this evaluation.

Additionally, we conducted a structured interview with ACF staff who are responsible for providing oversight to States regarding children in foster care. The structured interview included questions about the oversight ACF conducted to ensure States identify children in foster care who are, or are at risk of becoming, victims of sex trafficking and related guidance ACF has provided States. Additionally, we asked about the feedback and/or technical assistance ACF provided to States related to preventing and addressing sex trafficking of children in foster care. We collected copies of any documentation available regarding the feedback and technical assistance provided.

APPENDICES

Appendix A: Overview of State screenings for children who return to foster care after going missing to identify whether they were victims of sex trafficking

Legend

-  **Did not** have documentation of a screening
-  **Did** have documentation of a screening

Illinois

62 children's case files reviewed:

-  **42 children** (25 females, 17 males)
-  **20 children** (11 females, 9 males)
- 20** screenings **did not have a conclusion documented**

Massachusetts

88 children's case files reviewed:

-  **72 children** (35 females, 37 males)
-  **16 children** (12 females, 4 males)
- 10** screenings **did not have a conclusion documented**

Minnesota

91 children's case files reviewed:

-  **74 children** (40 females, 34 males)
-  **17 children** (15 females, 2 males)
- 10** screenings **did not have a conclusion documented**

Pennsylvania

74 children's case files reviewed:

-  **63 children** (33 females, 30 males)
-  **11 children** (9 females, 2 males)
- 4** screenings **did not have a conclusion documented**

Texas

98 children's case files reviewed:

-  **17 children** (9 females, 8 males)
-  **81 children** (50 females, 31 males)
- 4** screenings **did not have a conclusion documented**

Source: OIG analysis of documentation in foster care case files, 2022.

Appendix B: Agency Comments

Following this page are the official comments from ACF.



ADMINISTRATION FOR
CHILDREN & FAMILIES

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June 8, 2022

Ms. Suzanne Murrin
Deputy Inspector General
U.S. Department of Health and Human Services
330 Independence Avenue, SW
Washington, DC 20201

Dear Ms. Murrin:

I am writing to provide the Administration for Children and Families' (ACF) response to the Office of Inspector General's (OIG) draft report titled "In Five States, There Was No Evidence That Many Children in Foster Care Had a Screening for Sex Trafficking When They Returned After Going Missing" (OEI-07-19-00371), which contains recommendations for the Children's Bureau. We appreciate the opportunity to review and comment on the report. Below you will find our response to each recommendation.

Recommendation 1: Work with states to improve compliance with requirements to screen children who return to foster care after going missing to identify whether they are victims of sex trafficking.

ACF Response: ACF concurs with this recommendation. Through the Capacity Building Center for States (the Center), we will continue to work with states to improve compliance with requirements to screen children who return to foster care after going missing to identify whether they are victims of sex trafficking.

The Center assists state and territorial child welfare agencies with building capacity to improve child welfare practices and achieve better outcomes for children, youth, and families. The Center develops and delivers a variety of services that span the child welfare continuum, including those focused on the prevention of trafficking, and that can support trafficking assessment and screening for children who return to foster care after being missing. Current available services to states include:

- Tailored technical assistance to states and territories to improve outcomes and overall system functioning. At the request of a jurisdiction or the Children's Bureau, customized assistance is available to jurisdictions to support prevention of sex trafficking and implementation of any relevant federal guidance. In collaboration with the state (and counties as appropriate) and the Children's Bureau, the Center can assist child welfare agencies in implementing performance improvement efforts and is available to support the development of programs and services that prevent and address trafficking and screen children who return to foster care after being missing.

- Facilitation of peer-to-peer connections through peer groups, such as the *Preventing and Addressing Sex Trafficking in Child Welfare Peer Group*, promotes collaboration among child welfare professionals responsible for coordinating the response to sex trafficking and the multidisciplinary partners they work with, including law enforcement, courts, service providers, and other role-specific professional groups, including the State Foster Care Managers and State Liaison Officers. Membership is open to individuals who meet the criteria and must be approved by the Children's Bureau. Through the Center's peer groups, collaboration is promoted, and problem solving among peers is prioritized. Peers identify challenges and share best practices across areas of interest and need, and topics discussed have and may include implementation of federal guidance and services and supports to prevent sex trafficking and assessment of risk for children who return to foster care after going missing.
- Supporting identified needs and enhanced service delivery through existing Center-developed publications, learning experiences, videos, and other digital products. Products that support jurisdictions in responding to and developing strategies for preventing sex trafficking of youth, including related to requirements to screen children who return to foster care after going missing, include:
 - *At Risk for Sex Trafficking: Youth Who Run Away From Foster Care* explores how data can be used to learn more about youth who run away from state custody and how this knowledge can inform interventions.
 - *Child Welfare Response to Child and Youth Sex Trafficking, Parts 1, 2, and 3* builds capacity to identify and serve survivors of child and youth sex trafficking in order to support the Preventing Sex Trafficking and Strengthening Families Act (Pub. L. 113–183) provisions. It contains a series of four discrete, interconnected training modules and includes digital stories from the perspectives of survivors, workers, caregivers, and providers. An accompanying introductory webinar and training for trainers are available on the Children's Bureau's learning management system CapLEARN.
 - *Child Welfare Virtual Expo: Building Capacity to Address Sex Trafficking and Normalcy*. The 2016 Virtual Expo supported child welfare agencies, courts, and tribes in meeting the mandates of Pub. L. 113–183. This event featured recognized leaders from national and state programs, sex trafficking survivors and advocates, and young adults formerly in foster care. Videos, handouts, and resources are available through the learning experience on CapLEARN.
 - *Collaborating With Youth-Serving Agencies to Respond to and Prevent Sex Trafficking of Youth* provides state and local child welfare agencies with information on partnering with other agencies to address sex trafficking and meet the requirements of Pub. L. 113–183.
 - *Identifying Minors and Young People Exploited Through Sex Trafficking: A Resource for Child Welfare Agencies* provides information and guidance about sex trafficking and identification of sex trafficking victims.
 - *Resources for State Implementation of the Anti-Trafficking Provisions of P.L. 113–183: The Preventing Sex Trafficking and Strengthening Families Act of 2014* (recorded webinar) provides information on resources

developed to support states as they implement requirements from Pub. L. 113–183 aimed at preventing sex trafficking and improving the child welfare response to trafficking victims.

- Identification of existing resources and jurisdictional strategies for meeting compliance requirements related to the screening of children who return to foster care after going missing to identify whether they are victims of sex trafficking.
- Dissemination of information and resources to public child welfare agencies to support compliance with requirements to screen children who return to foster care after going missing to identify whether they are victims of sex trafficking via the Center’s webpage, general dissemination messages through its primary listserv, targeted dissemination messages to specific peer groups via listservs, including a Pub. L. 113-183: Preventing Sex Trafficking Constituency Group listserv, and through direct communication with child welfare agency contacts through the Center’s tailored services.

Recommendation 2: Encourage all states to evaluate the value of adding an assessment of risk for sex trafficking when children return to foster care after going missing.

ACF Response: ACF concurs with this recommendation. We will continue to encourage all states to evaluate the value of adding an assessment of risk for sex trafficking when children return to foster care after going missing.

As noted, on behalf of the Children’s Bureau, the Center assists state and territorial child welfare agencies with building capacity to improve child welfare practices and achieve better outcomes on behalf of the Children’s Bureau. The Center develops and delivers a variety of services that span the child welfare continuum including those focused on prevention of trafficking and supporting jurisdictional enhancements related to assessment and response to trafficking risk for children who return to foster care after being missing. Available services to states include:

- Tailored technical assistance to states and territories including services to support the prevention of sex trafficking and implementation of related risk assessments for children returning to foster care after going missing. In collaboration with the state (and counties as appropriate) and the Children’s Bureau, the Center is available to support the development of programs and services that respond to federal legislation and prevent and address sex trafficking.
- Facilitation of peer-to-peer connections through peer groups such as the *Preventing and Addressing Sex Trafficking in Child Welfare Peer Group*, which promotes collaboration among child welfare professionals responsible for coordinating the response to sex trafficking and the multidisciplinary partners with whom they work. Through the Center’s peer groups, including role-specific groups like the State Foster Care Managers, peers identify challenges and share best practices across areas of interest and need. Topics are discussed and focus on problem-solving and may include services and supports to prevent sex trafficking and assessment of risk for children who return to foster care after going missing.
- Identification of existing resources and jurisdictional strategies that demonstrate the value of, as well as examples of processes and tools for assessing risk for trafficking particularly for children who return to foster care after going missing.

- Dissemination of existing information and resources to public child welfare agencies related to evaluating the value of assessing risk for trafficking, particularly for children who return to foster care after going missing, via the Center’s webpage; general dissemination messages through its primary listserv; targeted dissemination messages to specific peer groups via listservs; and indirect communication with public child welfare agency contacts through its tailored services.

Recommendation 3: Conduct oversight activities to identify states that may not screen all children for sex trafficking when they return to foster care after going missing.

ACF Response: ACF concurs with this recommendation. We have instructed regional office staff to contact the appropriate officials in each of the five states identified in the report as potentially not screening children for sex trafficking in accordance with section 471(a)(35)(A)(iii) of the Act. The regional offices will remind these state officials of the title IV-E plan requirement and work with them to ensure they are meeting it. However, we caution that a review of case file documentation alone does not capture the full extent of practice for a particular case. In our experience, this shows how successful a state is at documenting items in case files rather than how these requirements were implemented and carried out through casework practice. We developed the case review process for the Child and Family Services Reviews (CFSRs) with this in mind (the process includes not only a review of case file documentation, but also interviews with those involved in the case).

If ACF believes that a state is not in compliance with the requirement in section 471(a)(35)(A)(iii) of the Act, ACF would initiate the existing partial review process as described in regulation at 45 CFR 1355.32(d). If ACF then determines that the state is out of compliance with the title IV-E plan, we would then notify the state and work with them to implement a program improvement plan. If the state remains out of compliance, the state could be subject to penalties related to the extent of noncompliance as described in regulation at 45 CFR 1355.36.

ACF does not yet have enough information to determine whether amending ACF regulations to require states to report information about sex trafficking screenings in the Child and Family Services Plan (CFSP) or to assess sex trafficking screenings as part of the CFSRs is necessary, but we take the duty to prevent trafficking seriously and will work to emphasize this duty to state programs. As OIG acknowledges, in relying on case file documentation, the study may have underestimated how many children received required screenings. We will continue to use our existing regulatory review and oversight processes as described above to further explore the scope of potential noncompliance and will continue to evaluate what, if any, regulatory changes may be needed.

Again, I appreciate the opportunity to review and comment on this draft report. Please direct any follow-up inquiries to our OIG liaison Scott Logan, Office of Legislative Affairs and Budget, at (202) 401-4529.

Sincerely,

A handwritten signature in black ink, appearing to read "January Contreras". The signature is fluid and cursive, with a long horizontal stroke at the end.

January Contreras
Assistant Secretary
Administration for Children and Families
U.S. Department of Health and Human Services

ACKNOWLEDGMENTS AND CONTACT

Acknowledgments

Abbi Warmker, a Deputy Regional Inspector General for Evaluation and Inspections in the Kansas City regional office, served as the team leader for this study. Others in the Office of Evaluation and Inspections who conducted the study include Haley Lubeck and Andrea Staples. Office of Evaluation and Inspections headquarters staff who provided support include Althea Hosein, Kevin Manley, and Christine Moritz.

We would also like to acknowledge the contributions of other Office of Inspector General staff, including Jessica Swanstrom.

This report was prepared under the direction of Brian Whitley, Regional Inspector General for Evaluation and Inspections in the Kansas City regional office, and Dana Squires, Deputy Regional Inspector General.

Contact

To obtain additional information concerning this report, contact the Office of Public Affairs at Public.Affairs@oig.hhs.gov. OIG reports and other information can be found on the OIG website at oig.hhs.gov.

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ENDNOTES

¹ The Administration for Children and Families (ACF), *Guidance to States on Addressing Human trafficking of Children and Youth in the United States*, September 2013. Accessed at <https://www.acf.hhs.gov/cb/resource/human-trafficking-guidance> on April 24, 2019.

² National Center for Missing and Exploited Children (NCMEC), *Child Sex Trafficking Overview*, 2021. Accessed at <http://www.missingkids.org/content/dam/missingkids/pdfs/CST%20Identification%20Resource.pdf> on November 5, 2021.

³ The Trafficking Victims Protection Act of 2000, as amended (P.L. 106-386, Oct. 28, 2000) includes definitions codified at 22 U.S.C. § 7102. “Sex trafficking” is defined as “the recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a person for the purpose of a commercial sex act. “Severe forms of trafficking in persons” includes sex trafficking in which the person induced to perform such act has not attained 18 years of age. “Commercial sex act” means any sex act on account of which anything of value is given to or received by any person. 22 U.S.C. §§ 7102(12),(11), and (4), respectively.

⁴ NCMEC, *Child Sex Trafficking Overview*, 2021. Accessed at <http://www.missingkids.org/content/dam/missingkids/pdfs/CST%20Identification%20Resource.pdf> on November 5, 2021.

⁵ ACF, *Report to Congress: The Child Welfare System Response to Sex Trafficking of Children*, August 2019. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/cb/report_congress_child_trafficking.pdf on April 26, 2021.

⁶ ACF, *Report to Congress: The Child Welfare System Response to Sex Trafficking of Children*, August 2019. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/cb/report_congress_child_trafficking.pdf on April 26, 2021.

⁷ ACF, *Guidance to States on Addressing Human Trafficking of Children and Youth in the United States*, September 2013. Accessed at <https://www.acf.hhs.gov/cb/resource/human-trafficking-guidance> on April 24, 2019.

⁸ ACF, *Guidance to States on Addressing Human Trafficking of Children and Youth in the United States*, September 2013. Accessed at <https://www.acf.hhs.gov/cb/resource/human-trafficking-guidance> on April 24, 2019.

⁹ HHS, *Secretary Becerra Announces New HHS Task Force to Prevent Human Trafficking*, January 2022. Accessed at <https://www.hhs.gov/about/news/2022/01/31/secretary-becerra-announces-new-hhs-task-force-to-prevent-human-trafficking.html> on February 2, 2022.

¹⁰ The White House, *The National Action Plan to Combat Human Trafficking (NAP)*, December 2021. Accessed at <https://www.whitehouse.gov/briefing-room/statements-releases/2021/12/03/fact-sheet-the-national-action-plan-to-combat-human-trafficking-nap/> on February 2, 2022.

¹¹ 45 CFR § 1355.20. For Title IV-B, “State” means the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Virgin Islands, the Commonwealth of the Northern Mariana Islands, and American Samoa. For Title IV-E, “State” means the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, the United States Virgin Islands, Guam, and American Samoa.

¹² For eligibility requirements for Tribes, see 42 U.S.C. §§ 628, 632(b)(2), and 679c. “Tribes” refers to Indian Tribes and Tribal organizations as defined in 25 U.S.C. 450(b).

¹³ States reported that more than 670,000 children were served by the foster care system in fiscal year 2019—the fiscal year that most closely aligns with this evaluation’s review period. ACF, “The AFCARS Report.” Accessed at <https://www.acf.hhs.gov/sites/default/files/documents/cb/afcarsreport27.pdf> on August 12, 2021. The most recently available data shows that States reported over 630,000 children were served by the foster care system in fiscal year 2020. ACF, *The AFCARS Report*. Accessed at <https://www.acf.hhs.gov/sites/default/files/documents/cb/afcarsreport28.pdf> on December 29, 2021.

¹⁴ 45 CFR §§ 1357.15(b) and 1356.20(c)(2).

¹⁵ 42 U.S.C. § 671(a)(2).

¹⁶ ACF, *Program Instructions*. Accessed at <https://www.acf.hhs.gov/cb/laws-policies/program-instructions> on August 12, 2021.

¹⁷ 42 U.S.C. § 1320a–2a. ACF, *Monitoring*. Accessed at <https://www.acf.hhs.gov/cb/training-technical-assistance/monitoring> on August 12, 2021.

¹⁸ ACF, *CFSR Round 4 Onsite Review Instrument and Instructions*, 2021; and *CFSR Statewide Assessment*, 2021. Accessed at <https://www.cfsrportal.acf.hhs.gov/resources/round-4-resources/cfsr-round-4-instruments-tools-and-guides> on January 27, 2022. The CFSR includes assessments of child safety, permanency, and child and family well-being. It also measures State performance on seven systemic factors, including the effectiveness of (1) the statewide child welfare information system; (2) the case review system; (3) the quality assurance system; (4) staff and provider training; (5) the service array and resource development; (6) the agency's responsiveness to the community; and (7) foster and adoptive parent licensing, recruitment, and retention. ACF, *CFSR General Factsheet*. Accessed at <https://www.acf.hhs.gov/cb/fact-sheet/child-and-family-services-reviews-fact-sheet> on January 27, 2022.

¹⁹ 45 CFR § 1355.32(d). ACF, *Child Welfare Policy Manual*, § 5.1.

²⁰ P.L. No. 113-183 (Sept. 29, 2014), § 101(a)(3)(C)(i), codified at 42 U.S.C. § 671(a)(35)(A)(i).

²¹ 42 U.S.C. § 671 (a)(9)(C)(i). States were required to demonstrate that they developed these policies and procedures by September 29, 2015, and implemented these policies and procedures by September 29, 2016, 1 and 2 years after the Preventing Sex Trafficking and Strengthening Families Act enactment, respectively (42 U.S.C. §§ 671(a)(9)(C)(i) and (ii)).

²² This requirement applies to “any child or youth in the placement, care or supervision of the title IV-E agency who is at-risk of becoming a sex trafficking victim or who is a sex trafficking victim (including those not removed from home; those who have run away from foster care and under age 18 or such higher age elected under 475(8); and youth not in foster care who are receiving services under the Chafee Foster Care Independence program (CFCIP) (477)), and at the option of the agency, youth under age 26 who were or were never in foster care. ACF, *ACYF-CB-IM-14-03*. Accessed at <https://www.acf.hhs.gov/sites/default/files/documents/cb/im1403.pdf> on March 21, 2022.

²³ 42 U.S.C. §§ 671(a)(35)(A)(i) and (iii).

²⁴ P.L. No. 113-183 (Sept. 29, 2014), § 105.

²⁵ For the purposes of the foster care program, a “sex trafficking victim” is defined as either (a) a victim of “sex trafficking,” which is the recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a person for the purpose of a commercial sex act; or (b) a victim of “severe forms of trafficking in persons,” which includes a commercial sex act, in which the person induced to perform such act has not attained 18 years of age, regardless of force, fraud, or coercion (42 U.S.C. § 675(9)).

²⁶ ACF, *Report to Congress: The Child Welfare System Response to Sex Trafficking of Children*, August 2019. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/cb/report_congress_child_trafficking.pdf on April 26, 2021.

²⁷ ACF, *Report to Congress: The Child Welfare System Response to Sex Trafficking of Children*, August 2019. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/cb/report_congress_child_trafficking.pdf on April 26, 2021.

²⁸ P.L. No. 113-183 (Sept. 29, 2014), § 121; codified at 42 U.S.C. § 1314b.

²⁹ National Advisory Committee on the Sex Trafficking of Children and Youth in the United States, *Best Practices and Recommendations for States*, September 2020. Accessed at https://acf.hhs.gov/sites/default/files/documents/otip/nac_report_2020.pdf on September 25, 2020.

³⁰ National Advisory Committee on the Sex Trafficking of Children and Youth in the United States, *Preliminary State Self-Assessment Survey Overview*, January 2022. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/otip/NAC%20Preliminary%20State%20Self-Assessment%20Survey%20Overview_January%202022.pdf on April 4, 2022.

³¹ According to the report, the Committee will statutorily sunset in January 2022. However, the Committee has been authorized to operate as a discretionary advisory committee for an additional 24 months. Through this extension, the Committee will submit a more comprehensive report that is inclusive of responses and updates received from States after December 10, 2021, and that analyzes the narrative information that States submitted.

³² P.L. No. 113-183 (Sept. 29, 2014), § 121(e)(d)(3)(E); codified at 42 U.S.C. § 1314B(d)(3)(E).

³³ National Advisory Committee on the Sex Trafficking of Children and Youth in the United States, *Best Practices and Recommendations for States*, September 2020. Accessed at https://acf.hhs.gov/sites/default/files/documents/otip/nac_report_2020.pdf on September 25, 2020.

³⁴ The State must report to ACF on an annual basis the total number of children who are sex trafficking victims. The number of children who were sex trafficking victims prior to entering foster care and while in foster care must be reported to the Adoption and Foster Care Analysis and Reporting System (AFCARS). P.L. No. 113-183 (Sept. 29, 2014), §§ 102 and 103; codified at 42 U.S.C. §§ 679(c)(3)(B) and 679(c)(3)(E).

³⁵ OIG, *National Snapshot of State Agency Approaches To Reporting and Locating Children Missing From Foster Care*, May 2022. Accessed at <https://oig.hhs.gov/oas/reports/region7/72006095.pdf> on June 15, 2022.

³⁶ OIG, *Case Study: Missouri Efforts To Protect Children Missing From Foster Care*, September 2021. Accessed at <https://oig.hhs.gov/oei/reports/OEI-07-19-00372.pdf> on October 20, 2021.

³⁷ OIG, *ACF Cannot Ensure That All Child Victims of Abuse and Neglect Have Court Representation*, March 2021. Accessed at <https://oig.hhs.gov/oei/reports/OEI-12-16-00120.pdf> on July 7, 2021.

³⁸ OIG, *Kansas Did Not Ensure That Group Homes for Children in Foster Care Complied With All State Health and Safety Requirements*, July 2020. Accessed at <https://oig.hhs.gov/oas/reports/region7/71906087.pdf> on September 8, 2021.

³⁹ OIG, *Not All Children in Foster Care Who Were Enrolled in Medicaid Received Required Health Screenings*, March 2015. Accessed at <https://oig.hhs.gov/oei/reports/OEI-07-13-00460.pdf> on July 7, 2021.

⁴⁰ States report annually to the Adoption and Foster Care Analysis and Reporting System (AFCARS). They report the placement status of each child in their foster care program on September 30—one status that can be reported is “runaway” status. We used fiscal year 2018 AFCARS data—the most recent at the time—to make the State selection.

⁴¹ At the time we selected States for this evaluation, not every State had yet developed policies and procedures for screening children to determine if they are possible sex trafficking victims after locating children missing from foster care, as required by the Preventing Sex Trafficking Act.

⁴² In the Texas Department of Family and Protective Services (DFPS), a special investigator is a DFPS staff member with a law enforcement background and experience in criminal investigations. Texas DFPS, *Special Investigations*. Accessed at https://www.dfps.state.tx.us/Investigations/special_investigations.asp on November 4, 2021.

⁴³ We specifically analyzed gender based on previous research that indicated that male children are less likely to be screened to identify whether they are victims of sex trafficking. Other characteristics have also been identified as increasing a child’s risk for sex trafficking victimization. ACF cited research that has identified children living in poverty; lesbian, gay, bisexual, and transgender youth; and minority-race youth to be at increased risk of trafficking; however, these findings may reflect the population studied rather than underlying differences. Additionally, the data we collected for this evaluation did not reliably identify these characteristics. Therefore, we did not request or analyze additional demographic characteristics for this evaluation. ACF, *Report to Congress: The Child Welfare System Response to Sex Trafficking of Children*, August 2019. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/cb/report_congress_child_trafficking.pdf on April 26, 2021.

⁴⁴ Child advocacy centers are community-based, child-friendly, multidisciplinary services for children and families affected by sexual abuse or severe physical abuse. These centers have trained interviewers “who know the right questions to ask in a way that does not retraumatize the child,” and the centers provide a coordinated, comprehensive response to victims and their caregivers. ACF, *Child Advocacy Centers*. Accessed at <https://www.childwelfare.gov/topics/responding/iaa/investigation/multidisciplinary/advocacy/> on July 6, 2021 (webpage no longer active). National Children’s Alliance, *How The CAC Model Works*, 2022. Accessed at <https://www.nationalchildrensalliance.org/cac-model/> on February 1, 2022.

⁴⁵ The five counties were Bexar, Dallas, Harris, Tarrant, and Travis.

⁴⁶ ACF, *Report to Congress: The Child Welfare System Response to Sex Trafficking of Children*, August 2019. Accessed at https://www.acf.hhs.gov/sites/default/files/documents/cb/report_congress_child_trafficking.pdf on April 26, 2021.