CHILD AND ADOLESCENT VICTIMS OF COMMERCIAL SEXUAL EXPLOITATION
A care model for institutions and organizations
CHILD AND ADOLESCENT VICTIMS OF COMMERCIAL SEXUAL EXPLOITATION:
A care model for institutions and organizations

WORK GUIDE

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In 1999 the International Labour Office approved Convention 182 concerning the prohibition and immediate action for the Elimination of the Worst Forms of Child Labour, including the use of children and adolescents for commercial sexual activities. This Convention has been approved by all countries in the region, and in an effort to support the implementation of this Convention, the ILO’s International Programme on the Elimination of Child Labour (IPEC) developed the project entitled “Contributing to the Prevention and Eradication of the Commercial Sexual Exploitation of Children and Adolescents in Central America, Panama and the Dominican Republic.”

In 2001-2002, studies were conducted in each of the abovementioned countries on the situation regarding the commercial sexual exploitation of children and adolescents, the characteristics of the actors involved in this form of violence, and each country’s legal and institutional response toward the eradication of the problem. Overall, the studies concluded that the response for eliminating the problem was inadequate. Exploiters often go unpunished; prevention activities are few and far between, and programmes for protecting and caring for victims of commercial sexual exploitation are largely ineffective.

Only 27.8% of the 618 underage victims interviewed for the studies in six of the seven countries said they had received help from an institution. This low figure is cause for concern given the risks faced by these children and adolescents, the existence of international commitments and the responsibility of the State to provide protection against sexual exploitation. There is also concern over the inadequacy of institutional support since, at the time of the interviews, the children and adolescents were still trapped in commercial sexual activities; that is, the exploitation had not been eradicated in the cases in which the boys and girls said that they had received help from an institution.

This document, “Child and Adolescent Victims of Commercial Sexual Exploitation: A Care Model for Institutions and Organizations”, has been developed to improve efforts for providing prompt and effective care for the children and adolescents lured by sexual exploiters; to ensure that exploitation is eradicated; and to allow these children and adolescents to begin to enjoy their human rights in their entirety.

The document is thus limited to the realm of care for the victims. It does not offer recommendations for improving the overall prevention of the problem or for improving punishment of exploiters. These issues are important, but this document focuses on the realm of care for victims and sets out guidelines and suggestions for effectively protecting children and adolescents against this form of sexual violence.
The Work Guide attempts to develop strategies and recommendations for incorporating a rights approach into care programmes for victims, thus, fostering a more effective response. This implies modifying the way in which care programmes have traditionally treated children and adolescents. Several of the programmes developed to date have attempted to improve the health and self-esteem of the victims without eliminating the sexual exploitation as such, which is the equivalent of improving the quality of life of a slave, without changing his or her condition of slavery. Other programmes seem to have mistakenly equated protection with institutionalization and have recommended the latter as a universal measure without evaluating each victim's particular situation. Underage persons who are victims of commercial sexual exploitation do not necessarily face the same economic, family and social conditions, and, therefore, require differentiated care.

It is hoped that this document will promote insight into the debate on how to improve care programmes for victims and will be of use to those who, on a daily basis, have the responsibility and opportunity to rescue children and adolescents from this form of economic and sexual exploitation.
In recent years we have succeeded in acknowledging the existence and severity of the commercial sexual exploitation of children and adolescents in the region. We are, therefore, now able to comprehend the multifaceted source of the problem, as well as the need to seek new strategies not only for prevention, but also for providing comprehensive care for victims and ensuring that perpetrators of this crime are punished accordingly.

The starting point for this guide is based on the definition below, followed by a brief conceptualization of the problem.

\[
\text{Commercial sexual exploitation:}
\]

Using an underage person for sexual purposes in which the child, adolescent, or the intermediary, is offered an economic reward to this effect. This includes:

- the in-country or international sale and trafficking of children and adolescents for sexual purposes.
- the use of underage persons in pornography, including on the internet and in public or private performances of a sexual nature.

Given the combination of factors that give rise to its existence, commercial sexual exploitation of children and adolescents is a complex problem which requires us to act and influence a variety of different spheres within society. This complexity may be understood not only by means of its multiple causes but also through the many ways in which it manifests itself presently. To this end, the causes and dynamics, which have characterized this issue for centuries, must be analyzed alongside current concerns and the manner in which it presents itself in today’s world.

Commercial sexual exploitation is as deep-rooted as the social structure that gave rise to it. In order to understand its origins we may refer to the popular saying “prostitution is the oldest profession in the world”, and add, “as old as patriarchal society”. If we carefully analyze myths and legends, as well as the first accounts and assessments of the situation carried out in the late nineteenth and beginning of the twentieth century, we unfortunately discover that the majority of those lured into the sex trade were very young women, including children. Thus, the common saying may well be changed to: “the sexual abuse of children and adolescents is the oldest profession in the world”.

The causes that gave rise to the sexual abuse of children and sexual preferences for younger and less powerful women still exist in today’s world. Thus, from biblical times to the present, incest and exploitation have formed part of our daily lives and the subjectivity constructed therein. However, when the “money”, “trade” and “business” components are added to the dynamics of abuse, other factors that distinguish the modern economy come into play, for example, globalization, trade networks, information, marketing and the search for clients via the Internet, and the use of advanced technology to obtain economic gains, among others. All these factors play a vital role in the way in which commercial sexual exploitation is currently perpetrated.
Understanding of the problem of commercial sexual exploitation requires us to recognize the presence of the factors associated with its occurrence, which include:

**A. Socio-cultural factors**

**a. Male chauvinism, sexism and misogyny:** Although these concepts can be interpreted as separate, we have placed them in the same category in order to include all the factors associated with the supremacy of traditionally masculine values and the debasing/hatred/rejection of feminine values which leads to the treatment of the female body as an object and the use of sexuality as a male privilege for controlling and suppressing women, among other things.

*Potential impact:* harassment, rape and abuse; death sentence for female adulterers; blaming of victims; minimization or denial of damage caused; impunity of offenders; prostitution; stigmatization of female sex workers and the over-valuing of the female virginity.

**b. Cultural tolerance** of sexual behaviour of adult males with younger and less powerful females.

*Potential impact:* marriage or cohabitation between adult males and girls, adolescents or women who are half their age; commercial sexual exploitation; impunity for exploiters and social legitimacy of “love” relationships between adults and underage girls.

**c. “Familismo”:** a concept which means that all understanding and intervention toward human welfare should be aimed at the family which is comprised of a group of persons made up of women and children under the control and supervision of an adult male.

*Potential impact:* tolerance of incest, marital rape, impunity of offences and interventions which focus on reconciling the victims with their aggressors.

**d. Legitimization of prostitution as a “necessary evil”:** Given the belief in the impulsive and uncontrollable sexual needs of males, this factor legitimizes the purchase of “certain” women’s bodies as a way of “safeguarding the virginity of other women” and of “sustaining marriage with honest wives” in our society. Despite this, “prostitutes” are stigmatized for “choosing, enjoying and profiting” from sexual activity. Combined with factors previously discussed, these attitudes and beliefs make no distinction between adult women and underage persons.

*Potential Impact:* for both adult women and the underage victims, there are increased risks in relation to sexual and reproductive health; physical violence and sexual abuse linked to the purchase of sexual favors; greater risk of homicide; stigmatization and gross violation of the human rights of children and adolescents.
In relation to the abuse of boys, these factors are intertwined for two fundamental reasons: the child’s powerlessness when confronted by the adult (“adultism”) and the similarity between the situation of children and the situation of women. Although sex between persons of the same sex is less tolerable from a cultural point of view, many adults seek sex with adolescent males, a significant portion of which are underage boys, given that there is no effective social punishment regarding age. The social penalty, when it exists, falls fundamentally on the condition of same sex, and not on the difference and use of power on the part of the adult.

**B. Economic factors:**

Given the huge demand for sex with underage persons, commercial sexual exploitation has become a lucrative business. The combination of social impunity, including legal endorsement – and economic benefits, constitute a major incentive for the direct or indirect trading of children and adolescents for sexual purposes. In this regard, we are now able to expose the existence of organized sex trafficking networks that search for and satisfy the demand both locally and abroad. In connection with the above, we encounter what is commonly known as “consumerism”, where the unlimited power of money is legitimized for buying anything, including human beings, in this case.

**e. “Adultism”:** Associated beliefs and behaviours for maintaining an imbalance of power between adults and underage persons.

Potential impact: social tolerance towards the sexual abuse of children; a lack of credibility in the testimony of children; criminal impunity; family and social alliances with offenders; the lack of adequate child protection and the institutionalization of children.
C. Factors related to globalization and advanced technology:

The ease with which we communicate, be it moving from one place to another, or establishing and maintaining interpersonal relationships over long distances, affects the way in which crimes are now committed. This advance in telecommunications has, for example, facilitated the trafficking of underage persons for sexual purposes. Sex tourism and child pornography on the Internet and through other technological means, such as computerized images, exemplify how such technology is being utilized to enhance commercial sexual exploitation of children and adolescents.

Added to the factors mentioned above are those associated with the vulnerability of underage persons being lured into sex trade networks. These are not the causes of commercial sexual exploitation but rather the factors that help to explain why some girls or boys are lured and others are not. In other words, they explain what aspects of family, social or personal life become risk factors for entrapment. As with all social problems, it is the combination of risk factors that explains the greater or lesser probability of its occurrence.

One of the most significant factors is poverty. The risk of being lured by sexual exploiters increases when boys and girls have to actively participate in the search for survival strategies for themselves and their families. Another factor is the lack of genuine opportunities for remaining within the family unit and school system; prolonged exposure to public spaces leaves these children and adolescents at the mercy of sex traders who take advantage of their vulnerability and offer them money, and other benefits required for survival, in exchange for sex. There is also the matter of gender-based violence, particularly, repeated physical and sexual abuse of women within families. For example, mistreatment of the mother reduces the family’s ability to keep the child or adolescent in the home and preserve the family as a unit because when such violence occurs, the family is no longer able to offer its members the assurance of physical and emotional protection. Likewise, sexual abuse within the family, and, in particular, father-daughter incest, becomes a factor linked to a lack of protection or vulnerability since, from an early age, sex is associated with a combination of affection, powerlessness, stigmatization and the inability to identify dangerous situations. This is aggravated by the lack of institutional mechanisms for early detection, coupled with institutional ineffectiveness in protecting children and adolescents against such abuse.
II. Work guide for those who provide services to child and adolescent victims

To be considered:

The factors linked to the vulnerability of children and adolescents that increase their risk of being lured by sexual exploiters are NOT the cause of their entrapment. The real reasons should be sought in the explanations of why adults take advantage of their vulnerability in order to subject growing human beings, in their early stages of development, to sexual slavery.

This guide, therefore, was conceived as a result of recognizing that commercial sexual exploitation is a multifaceted problem with dire consequences for its victims. The care provided for the latter, however, has received scant attention and service providers do not always respond effectively to their needs. This is due either to a lack of specific information regarding the problem or because we are still using interventions that predate the ratification of the Convention on the Rights of the Child, or both. Therefore, this guide, which is based on a human rights approach, aims to facilitate the organization and provision of services to detect, act, coordinate, remit and follow-up on the children and adolescents whose fundamental rights have been violated as a result of commercial sexual exploitation.

In this sense, this guide is not intended as a replacement for specialized training or the institutional or individual thought processes involved in finding ways to confront this problem.

Our goal is to guide the response at two fundamental questions:

1. How can we organize a specific care service for the child or adolescent who is a victim of commercial sexual exploitation?

2. What should be done when cases of commercial sexual exploitation are identified?

Thus, we have organized the contents of this guide into two main units and further subdivided each unit into various chapters. The first unit contains introductory information on the process of victimization and the human rights approach for comprehending this process. The second unit is divided into two chapters, one of which establishes guidelines for the administration of a comprehensive care programme and the second proposes the foundation on which work should be based to ensure that the programme’s goals are achieved.

In order to facilitate the reading’s orientation, each chapter culminates with a reflection exercise. We aim to assist the reader to identify the responses and specific gaps that presently exist in each country, area or region, regarding care for victims of commercial sexual exploitation, and to guide the reflection process surrounding the search for alternative actions that may effectively impact the lives of the children and adolescents in our region, allowing them to exercise all of their human rights.
III. Who is the work guide for?

a. Providers of direct services to victims of commercial sexual exploitation, from both government and civil society institutions.

b. Providers of direct services to children and adolescents, who have the opportunity to assist in the early detection of commercial sexual exploitation or who are vigilant about the exercise of human rights.

c. Decision-makers associated with care mechanisms for victims of commercial sexual exploitation.

d. Supervisors and those in charge of care services for children and adolescents and those involved in finding ways to confront this problem.
UNIT ONE

SEXUAL VICTIMIZATION AND HUMAN RIGHTS
Commercial sexual exploitation is a crime and care for victims should be linked to the justice system.

Commercial sexual exploitation is a gross violation of human rights. Care services should therefore adopt an approach that demands children and adolescents be allowed to exercise all of their rights.

Commercial sexual exploitation generally represents a link in a chain of violations that have not been timely or effectively addressed beforehand. In this sense, the intervention should articulate the work of a variety of different institutions in order to offer an integrated response.

Given the dynamics of the sex trade, the care response should be understood as a continuum of clearly defined services.

The victims of commercial sexual exploitation are not perverse or delinquent girls, boys or adolescents. They are victims of unscrupulous adults who profit from their vulnerability because of their age, social or familial circumstances. The children and adolescents involved in commercial sexual exploitation are not prostitutes. Rather, they are victims of a crime. In this respect, the Irregular Situation Doctrine or Approach should be replaced by a Human Rights Approach.

Care for victims requires a comprehensive and integrated approach towards the full exercise of the human rights that have been violated. A Human Rights Approach allows us to eliminate interventions centred on physical or psychological symptoms of victimization, which should be treated as consequences, and not as causal factors of commercial sexual exploitation.

Protecting underage persons against sexual exploiters is a priority when guaranteeing the right to life. This is the responsibility of adults. If the family cannot guarantee this right then the State institutions and their staff must do so.

In the development of a protection plan which includes the exercise of all rights, the opinions of underage persons should be taken into account. This does not mean that the victim can refuse his or her right to protection but, rather, ensures that his or her right to play an active role in decision-making is put into practice.

Institutions working in this field should establish policies, plans, protocols and procedures regarding the care of victims in accordance with the victims’ gender and age, without excluding the responsibility to combat commercial sexual exploitation for all groups. Institutions should likewise establish policies and regulations for the
protection of staff who provide direct care to victims of commercial sexual exploitation. The latter includes aspects related both to physical safety and integrity, as well as self-care to manage stress and prevent emotional exhaustion.

- Those providing care services for the victims of commercial sexual exploitation should have expert training in the field, as well as institutional support for offering articulated and comprehensive responses; be aware of the legal and standard ethical procedures required; possess the ability to connect and empathize with underage persons of different ages and genders; and reassess their own prejudices regarding sexuality, extreme poverty and the sex trade.

- Care programmes for victims require various conditions in order to be effective: they should be sustainable over time, have sufficient resources to execute plans, be coherent, realistic and monitor their direct impact on the victims.

Reflection Exercise:

Nora, a thirteen-year-old girl who has not been to school since second grade primary, was seen on one of the main streets in the port city of..., waiting on a corner for the adult who would pay her money for the only thing she could sell: her body. An initial interview reveals a history of incest, physical abuse within the family, abandonment and recurrent drug abuse. Tears run down Nora’s cheeks as she describes her background. Her mother co habited with several partners, two of whom abused the girl, who also witnessed the violence these men used against her mother. Nora says she feels better on the streets than at home and that she “would rather be raped for money than for nothing.” At the end of the interview, therefore, it is evident that several factors are present: sadness, unresolved conflicts, a history of aggression and problems within the family situation.

Think It Over:

1. Write a summary of the main points of this first chapter.

2. If you apply the approach which states that “personal and family problems explain why the commercial sexual exploitation of girls and boys exist,”

   What would be the causes of Nora’s exploitation?

   What type of care should she be provided with?

   How do you propose to stop Nora’s abuse within the sex trade?

3. Include other principles, using a rights approach that you consider to be priority issues in the care of victims.
CHAPTER TWO

Who are the victims of commercial sexual exploitation?

A. Understanding their needs

Maria Esther (aged 16)¹

“I only went to school for about two years, but I didn’t go back because the teachers told me I was very stupid and the woman who raised me didn’t send me back there again. I was living with her because my Dad raped me when I was about six and this neighbour found out so she took me to live with her.

But then I went back with my Mom, till – the State institution in charge of child protection – came around and sent us all to a shelter, then my Dad went to fetch us and we came back home, but only the eldest, the little ones stayed at the shelter and Mom suffered a lot because they wouldn’t let her in. I don’t know what happened to them; they say that they gave them away to someone from another country.

I’ve been to quite a few shelters already, but I run away if they treat me badly, because they give you a good whipping...not here, they’re very nice here.

I got pregnant when I was about eleven and then again after that, just like my sister. It’s because my Dad gets like that sometimes, not any more, he’s good to me now, I don’t know what he’s like with my sisters, but I told him, and my Mom too, that it was a sin.

I don’t like it here; I want to go home to my Mom.

I’ve got lots of friends where I live who take me out for meals and drinks too, I really like to smoke but they don’t let me here. The thing is I really like vices: drinking, smoking, dancing and screwing. Well, my friends from...they're really nice, the guy from the corner shop is too, he gives me lots of things. Well, he does ask me to do things with him, but he gives me money and takes me out for meals and his friends do too.

Yes, I do feel sad sometimes because I know I’m very bad and I’ll go to hell, and that really scares me, so once I drank a bottle of some stuff for cleaning floors and they had to take me to hospital and they sent me from there to a psychiatrist. I’ve taken pills too, the ones the Social Security gives you for your nerves, but I’m not dead...

Now all I want is to go home to my Mom.”

¹ Extract from an interview for admittance of an institutionalized youth in a specialized shelter for adolescent women in Costa Rica. Victimization by commercial sexual exploitation is evident.
Jose (aged 11)

“I was a little boy when I got here. I don’t even remember, I was about two years old. My Grandma says I was born in ... but my Mom went to the United States and left me with my Grandma and she came over the mountain, until we got to Upala and that’s where I lived.

But my Grandma gave me away because she couldn’t cope. First I was with a Costa Rican family, and then with a man who was going to send me to school.

Well, I never went to school; he just hit me and cursed me for being Nicaraguan.

One day a man from Ciudad Quesada came over and he ask me to go with him, and that if I helped him on his farm, he would give me lodging and food, and he said he would pay me good money.

So I went, but he never paid me, he did give me a place to stay with some others, and it was with them that I got into vices. They were like me, none of them went to school. That was...let me see...when I was about nine, but one day I got fed up and I came to San Jose with a friend who’s a really good guy and I’m still with him. What I really want is to get my papers and learn to read”.

The previous accounts were chosen from many others which were all marked more by their similarities than differences. The life conditions that children and adolescents lured into the sex trade have been subjected to are repeated time and again; poverty, family violence, abandonment, recurrent cycles of abuse against women over several generations, desperation and unscrupulous adults who take advantage of these conditions. This is coupled with an insensitive response, on the part of the State, to the needs of these children and adolescents, and tolerance of those who violate their human rights.

As with many of the problems faced by children and adolescents in our region, the main victims of commercial sexual exploitation, as shown by the accounts given at the beginning of the chapter, are also our societies’ most vulnerable. This vulnerability is linked to age, gender and life conditions, both past and present. These factors also contribute to our understanding of the continuous entrapment into sex trade rings. We use the word “contribute” since they do not, in themselves, explain it. Other factors not directly related to these children and adolescents, but which also contribute to their entrapment include: the social and legal impunity of the exploiters and their intermediaries, and the lack of prompt social and institutional responses for identifying and attending to the risks which such underage persons are subjected.

Sexual exploitation, as recognized in both international legislation and many of our national laws, takes advantage of the special condition of childhood and, in particular, that of the female gender, due to the discrimination and social repression of women. The inequality in power relationships between adult males and girls/adolescents fosters the abuse and exploitation of the latter. This is condoned by the current social order: the patriarchal society.

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2 Extract from an interview carried out as part of the study for the second chapter of the State of Child and the Adolescent Rights in Costa Rica, UNICEF, 2001.
Underage victims of commercial sexual exploitation are not, as many would like to believe, children and adolescents with strange or unusual problems. They are not, therefore, exploited because they suffer from problems regarding moral development or emotional traumas, or because they are promiscuous, bad or perverse.

Each victim has a name, a face and a history of abuse and abandonment which, from a very early age, has forced them out into the streets in search of a means of survival, into child labour and drugs; resulting in the risk of being constantly abused and exploited.

None of them have chosen the situation in which they find themselves. It is not possible, when one is born, to choose to live in conditions of exclusion, discrimination and violence. We may conclude, from the testimonies of so many children assessed in the region, that their vulnerability in the face of sexual exploiters is a process that is gradually constructed from birth. Its origin does not lie in genetic or biological causes but, rather, in the paradigms and social practices regarding childhood and adolescence; the sense of ownership some human beings have over others; the justification of poverty, misery and social exclusion, and, on a whole, all the different violations of human rights that occur throughout the world.

Different studies have demonstrated the fact that commercial sexual exploitation is the result of a chain of violations of the rights that children and adolescents possess, by virtue of their underage status. These violations take place in the face of indifference and the evasion of responsibilities on the part of society as a whole, and the State in particular.

Viewing the problem of commercial sexual exploitation from this perspective allows us to recognize the factors that make a child or adolescent vulnerable to being sexually exploited, and to work on these factors in order to combat this abuse.

B. Understanding vulnerability

The vulnerability of children and adolescents is a process which forms part of the social construct. Vulnerability is, therefore, a social condition.

The victims of commercial sexual exploitation are all those persons under 18 years of age who are used by exploiters, or other persons, to obtain personal sexual pleasure (direct or indirect sexual contact) in exchange for payment of money or other benefits.

Vulnerability factors may be understood as those elements, circumstances or conditions in a person’s life which create a risk for entrapment by sex traders. These factors allow us to comprehend why certain children and adolescents are more prone to being exploited than others. In this regard, we may begin to analyze them by asking ourselves the following questions:
Let us analyze each of these questions:

a. **Who are the sexual exploiters?**

Central American studies have shown that the majority of those who sexually exploit our children and adolescents are adult males. When the exploitation is carried out by means of direct sexual contact, the exploiters usually live in the same area as their victims. When they travel to another city or country, they approach their underage victims through intermediaries (INTERNET, tourist advertisements, taxi drivers, hotel/hostel staff and travel agencies, among others). There are also those, for example, who use a computer from their home or workplace to search for images of nudity or sexual and erotic acts in which children and adolescents from our region appear. For the most part, these children and adolescents have been located and lured by adults who, by and large, live in the same country.

b. **What are the sexual exploiters looking for?**

They are looking to satisfy their own sexual needs by using their buying power. However, sexual interest is not the only motive; there are also other incentives. In this respect, other questions need to be answered including the following:

b.1 **Why do they choose underage persons?**

In the adventure to find answers to this question, we have some clues: the relationship between the adult and the underage person cannot be understood in terms of a “sexual partnership” since the former could be twice the latter’s age, and uses a commercial approach with no strings attached, nor does he or she assume any responsibility in regard to the consequences that his or her actions may have on the other person. Thus, we may go on to say that the exploiters do not seek emotional ties or mutual sex, and are not willing to assume responsibility for their actions or the potential outcome of their actions. They could, if they so wished, seek pleasure in adult relationships. Sex with a person who is not fully grown or developed ensures their sexuality or power will not be questioned, nor will they be required to consider or respect the other person’s needs.
b.2 Why do they pay underage persons for sex?

We could say—without exhausting either the answers or the debate, but, rather, to begin it— that money and other economic benefits increase the adult’s power. They not only pay for sex but also for the right of total ownership of an underage person and, based on this belief, do with the victim what they please. Only in this way can we comprehend the brutal acts that sexual exploiters commit against children and adolescents.

In conclusion, we could say that exploiters seek power, control over the situation and the other person, assurance that their sexual performance will not be questioned and a way of avoiding responsibility for their actions. And who better to provide them with these benefits than children and adolescents?

c. Whom do they prefer?

Preferences can be extremely varied; still, however, women tend to be the main consumer “object” exchanged in the sex trade. Consequently, even though there are boys and adolescent males who are exploited, the main victims of commercial sexual exploitation are girls and adolescent females, due to their gender. According to the rules and regulations of this illicit business, young girls, virgins or girls with little sexual experience are valued more highly and adults who exploit children and adolescents, offer to pay a higher price for them.3

In addition, underage persons living in and protected by their families and communities represent a risk of social or legal action and therefore the exploiters choose those who are at greater disadvantage:

- Underage persons who have to find strategies for survival and as such find themselves in situations that jeopardize their safety because of their age, lack of formal education and job training: children and adolescents living on the streets, dependent on handouts, selling goods in public places, or those “willing” to accept money in exchange for sexual activities.

- Underage persons whose families, communities or societies have abandoned them. The exploiters know that nobody seems to care about ensuring their protection; they have already been expelled from their schools, families and communities.

- Underage persons with a history of child sexual abuse, the consequences of which are an ally with commercial sexual exploitation. As in Maria Esther’s case, many of them confuse love with sex and have grown up believing that in order to receive any benefit or help from an adult they should offer something in exchange: sex.

In addition, the detection of situations of commercial sexual exploitation does not put a stop to the crime and quite often, exploiters go unpunished. Moreover, the State’s response for providing comprehensive care for the needs of underage persons has, to date, been ineffective in the majority of the countries in the region. This increases the victim’s real and potential vulnerability to being repeatedly coerced into the sex trade.

3 Interview with Rocío Rodríguez. Casa Alianza
d. Where do they look and how?

Exploiters or their intermediaries generally find their victims on the streets and in public places; places frequented by children and adolescents (schools, skating rinks or electronic game halls, video clubs, dance halls and youth centres; institutions where children and adolescents are housed after being abandoned by their families or communities, such as shelters; just to name a few).

Both direct exploiters such as procurers and other kinds of intermediaries may approach these places to come in contact with children and adolescents, always with the offer of a better life. Lured by drugs, money or benefits, these young, impressionable individuals become trapped in the sex trade for the direct satisfaction of the exploiters or to put their young bodies on display for other adults to view.

We can, therefore, summarize the risk factors for coercion in the following list, provided that we interpret them as part of an interconnected series, and not as isolated elements.

### Risks for Coercion

Poverty and the need to support oneself or one’s family; child labour; begging or prolonged periods on the streets or in public places; expulsion from school; expulsion from the family or weaknesses in the family for its preservation as a unit (violence, negligence and abandonment – including non-payment of child support, abuse against mothers or substitute female figures, incest); expulsion from the community; alcohol and drug addictions; lack of State protection due to illegal immigrant status; lack of State protection in general.

### Consequences

If we observe in detail the consequences of commercial sexual exploitation we are able to disprove the mistaken views that apologists of commercial sexual exploitation use to continue the justification of the crime:

- The girls like it.
- They earn a lot of money; they buy clothes, go to university, and buy things for their family like televisions, refrigerators and furniture.
In relation to the first point, we can say that nobody enjoys being exploited, humiliated or living under the constant threat of beatings, arrest and rape. In relation to the second, even if this were true, what kind of society do we live in if, in order to pay for studies or buy basic appliances for the family or nice clothes, children and adolescents should have to offer sex in exchange?

The negative consequences of commercial sexual exploitation are many and varied:

- Consequences related to sexual and reproductive health: victims run a greater risk of early pregnancies, rape, injuries and being infected with sexually transmitted infections, including HIV and AIDS.
- Social exclusion: from stigmatization to the loss of opportunities for future economic stability due to a lack of formal education and technical or vocational training. These factors contribute to the generational cycle of violence, poverty and exclusion.
- Taking on responsibilities at an early age: maternity, living with a partner, economic survival. This reduces the opportunities for preparing – both emotionally and academically, through education – for the future.
- Consequences in emotional, behavioural and spiritual life which result from repeated and continued traumatic experiences.
- Early death or murder.

Reflection Exercise:

1. Explain, in your own words, the concepts of social vulnerability and the risk factors for commercial sexual exploitation.

2. Analyze, according to the above concepts, Maria Esther and Jose’s accounts.

3. Add other elements that respond to the reasons why adult males pay for sex with underage persons.
International commitments regarding care for victims of commercial sexual exploitation

Several international instruments have been signed and ratified by the majority of the countries in the region and, consequently, these instruments guide our work with the victims of commercial sexual exploitation. Those providing services for victims should ensure the said agreements have been ratified by their country and find out if legal or institutional changes have resulted. The most important of these are:

a. The Convention on the Rights of the Child

b. The International Labour Organization’s Convention 182.


d. The Commitment for a strategy against commercial sexual exploitation and other forms of sexual violence against children and adolescents in the region of Latin America and the Caribbean, signed in Uruguay, 2001.

What are the practical implications of these instruments?

Bearing in mind the characteristics of the victimization which occurs within commercial sexual exploitation, the following points taken from the international agreements are worth noting:

- Commercial sexual exploitation is a crime and the exploiters and intermediaries should be punished with sentences that are appropriate to its severity, by means of national laws and extradition treaties.

- Commercial sexual exploitation should be recognized as a violation of the human rights of underage persons and such victimization cannot be interpreted as a result of a mature decision made by children and adolescents. This is why those who experience it are referred to as victims and cannot, therefore, be judged for it. In this regard, the victims cannot be dealt with by the juvenile justice system.

- All underage victims, regardless of their age, religion, nationality or any other condition, have the right to be protected by the State. This means that State institutions should guarantee, respect and demand that all children and adolescents lured into the sex trade, are afforded the full enjoyment of their rights.
• It is the duty of the State, society and the family to respect all rights pertaining to underage persons and to ensure that they are fulfilled. Should the family be unable to provide protection, it is the State’s responsibility to protect children and adolescents from all forms of ill-treatment and to establish preventive measures and intervention in this respect.

• Underage persons have the right to a name, a nationality and an identity document paid for by the State. In accordance with the principle that every underage person, regardless of his or her nationality, has the charge of all his or her rights; this article should be present in the institutional policies and procedures for care for immigrant victims and especially for those who have an illegal immigrant status. The State institutions should, thus, take the necessary measures to validate this right.

• All children and adolescents have the right to good health, education and all the human rights set down in the Convention. Consequently, the institutions dealing with victims of commercial sexual exploitation should safeguard these and demand their fulfilment.

• The child is recognized as a subject of primary importance. This vision of the child or adolescent should be defined in public policies. In this respect, advocates of the human rights of children and adolescents should uphold this mandate.

• All underage persons have the right to a family life and cannot be separated from their families except in the case of a legal decision that determines this must be so. Institutionalization cannot, therefore, be considered the first and only option for ensuring that the right to protection against this crime is complied with. It can only be viewed as a temporary measure whilst the conditions that caused it are studied and modified.

• All underage persons have the right to supplementary benefits when those required to pay child support are unable to do so. The State should, therefore, take on the task of providing additional food for sexually exploited children and adolescents, and ensure the above responsibility is fulfilled.

• The appropriate authorities should pinpoint the places where underage persons are being exploited. This means that they should not wait for such cases to be reported or until they are asked to deal with specific cases.

• The State should ensure that all children and adolescents who have been liberated from commercial sexual exploitation have access to free basic education and, where possible, to professional training, when they are old enough to work.

• State institutions are required to identify underage persons at risk of being lured by sexual exploiters and make direct contact to immediately provide them with the appropriate care necessary to prevent exploitation.
• When sexual exploiters are brought to trial, the respective institutions should inform the children and adolescents of their rights, trial dates, the course of the proceedings, the court’s decision and its repercussions.

• The disproportionate number of underage female victims of commercial sexual exploitation is apparent. The Convention on the Rights of the Child should, therefore, be interpreted in keeping with the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the Inter-American Convention for the Prevention, Punishment and Elimination of Violence Against Women since these constitute the legal framework for combating all forms of gender-based violence.

The governments of Latin America and the Caribbean, in particular, together with the support of non-government and international organizations, signed a commitment in Uruguay in 2001 to adopt a strategy or plan of action to eliminate commercial sexual exploitation in the region.

As part of those plans, governments also agreed to offer comprehensive protection for victims within the framework of the Convention on the Rights of the Child. These plans were assessed in the year 2004. Consequently, government institutions and their staff are also committed to executing these plans of action. As citizens of civil society exercising our right to demand implementation, we should ensure this commitment is fulfilled. Likewise, governments should ensure that civil society organizations participate in the design, realization and monitoring of all National Plans of Action.
The following is a summary of the agreements signed in Uruguay, 2001, regarding care for underage victims.

**Uruguay commitments**

1. Development of a Public Policy of comprehensive protection for children and adolescents. Measures of protection should include procedures and mechanisms for the establishment of social care programmes for victims and their carers.

2. Development of gender-based education policies which ensure the coverage and quality required to avoid exclusion and expulsion from school.

3. Establish “legal procedures that are friendly towards children and adolescents”; as well as decriminalizing victims and ensuring that exploiters are prosecuted.

4. Give priority to and ensure the right to family and community life in actions designed for child and adolescent victims.

5. Develop recovery programmes using a Comprehensive Approach and not one that allows re-victimization.

6. Create operational systems to combat the trafficking of underage persons and adopt specific programmes for rescue and the provision of appropriate care for victims.

7. Develop and implement institutional protocols, inter-sectoral coordination and specific models of intervention for victims.

8. Design and establish indicators for recognizing and differentiating cases of commercial sexual exploitation and its risk factors.

9. Guarantee universal access to health care and socio-family support services.
Reflection Exercise:

1. Identify, according to your country’s legal regulations, how the international agreements, previously mentioned, are embodied. Once identified, find the following information:

   a. Administrative and judicial measures for offering protection against child sexual abuse, incest and commercial sexual exploitation.

   b. Legal and ethical duties and responsibilities of professional staff dealing with situations of abuse against underage persons.

   c. Requirements and procedures for admitting underage persons to an institution.

2. Identify the types of commercial sexual exploitation punishable by law and the relevant reporting procedures.

3. Analyze the following situation:

   In a police operation, not aimed at searching for victims, several female children and adolescents who were being sexually exploited were found in an underground bar. Two of them, aged 15 and 16, are foreigners. They do not have immigration papers and say they have been in the country for the past seven months. They claimed that they stopped here only intermittently, since their intended final destination is the United States of America. They added that they did not want to return to their country.

   - Identify the institution in this country responsible for dealing with the problem of immigrant youths who are victims of the sex trade. What are the procedures and protocols for dealing with the situation? Are they in writing? Is the staff in charge familiar with these procedures and protocols?

   - Research and identify the procedures stipulated by law or the institutional regulations for providing documentation for underage persons with illegal immigration status.

   - Identify the institutional procedures of the country in which the young girls are located so that contact can be made with the organizations responsible for child welfare in their country of origin.

   - If gaps were detected, what do you propose?

   - Comment on the results of your research and proposal with your work colleagues.
The rights approach to care provided to victims of commercial sexual exploitation

I. The rights approach vs. the Irregular Situation Doctrine

The human rights approach constitutes a new paradigm4 for understanding human welfare and development and, therefore, represents a code of ethics for shaping social action. In other words, the Rights Approach is a guide for all our behaviour, both in our private and professional lives. Moreover, as a social movement that emerged in the twentieth century, this paradigm is reflected in the public agenda, through national laws and international conventions and commitments, in order to regulate development and democratization of policies.

The fundamental principle of the human rights approach for underage persons is the recognition of every child and adolescent as the subject of those rights. We need to change our old way of thinking which views any action aimed at the child’s or adolescent’s welfare, as the granting of special prerogatives or privileges. Thus, every one of us has, from birth, a set of rights to be exercised. This was established in the last century with the signing of the Universal Declaration of Human Rights.

However, the emergence of a movement in favour of children and adolescents resulted in the repeated discrimination and abuse of underage persons in society at large. The recurrent violation of rights highlighted the need to specify each of the human rights set out in the Universal Declaration of Human Rights in the Convention on the Rights of the Child, which applies to both children and adolescents – all those persons under the age of 18 years. It may be said that children were, prior to this paradigm, viewed as children and adolescents grouped in a category different to that of a person or as miniature adults who were totally dependent on the will and power of those taking care of them. They were, therefore, treated as private property by their parents or the State who could carry out any action concerning them.

4 Paradigm: In its broadest sense, it is the concept that refers to a predominant view through which the world and reality are interpreted. Due to its frequent and commonplace nature, this view eventually constitutes the criterion for truth. The concept also alludes to paradigmatic changes in the history of the human race and, therefore, to different world views and criteria for truth and reality. Although one particular paradigm may prevail at any given moment, previous paradigms coexist alongside them, battling for renewed prevalence.
Examples of the violation of fundamental rights when the Irregular Situation Doctrine is applied

“I hit him to teach him a lesson and nobody can do anything about it because he’s my son”

“I have sex with my daughter because she’s my daughter; she belongs to me first and then to someone else”

“When they misbehave here, as punishment, they do not get food”

“He was expelled from school for bad behaviour”

“Even though she’s ill, she can’t go to see a doctor because we can’t afford it and they won’t see us at the hospital because we’re from another country”

“I don’t send her to school because she has to help me look after her younger brothers and sisters”

“She doesn’t go to school because she has to work”

Since the Convention on the Rights of the Child was approved, the human rights approach has been incorporated into legal regulations adopted by the majority of countries worldwide. However, more needs to be done; given its guiding and ethical characteristics for our actions, we all need to undergo a process of assimilation in order to allow the previous paradigm to be substituted.

The most familiar and commonly used traditional approach of those that existed prior to the Convention on the Rights of the Child, and which is relevant to the field of commercial sexual exploitation, is the so-called “Irregular Situation Doctrine”. Under this paradigm, the issue of commercial sexual exploitation is interpreted not as a violation of human rights, but as an irregular situation that is normally due to the fact that the child or adolescent has a personal problem, or is as a result of the “irregularity” of his family life. Therefore, the understanding that he was “dysfunctional” meant he was considered a problem for society. Consequently, he was regarded and treated as a delinquent or was at-risk of ending up as such. To name but a few examples, he was arrested by the police, imprisoned alongside people who had broken the law or confined to a “correctional” institution.

This doctrine does not question society as a whole but, rather, the private life of the underage person. Psychological or psychopathologizing interpretations, therefore, abounded as ways of understanding, for example, the reasons why a child or adolescent “devoted herself to prostitution”. In this case, the victim was classified using textbook psychological or psychiatric diagnoses based on her intra-psychic or behavioural conflicts, since that is where we believed the exploitation originated. Responses, based on this perspective, usually resulted in advice, therapy, punishment or institutionalization.
This does not mean we wish to imply that the child and adolescent victims of commercial sexual exploitation do not have personal or family conflicts, but, rather, that we cannot explain the problem based on these. The series of abuse and violations experienced overtime, naturally leaves their mark on the victim’s personal psyche. These marks are, however, the effect, not the cause.

Thus, those offering care services must find the real causes of commercial sexual exploitation in order to secure life in a healthy environment for all underage persons lured by exploiters. All of us should be familiar with the risks of victimization and the sexual exploiters’ modern methods of luring children and adolescents (using money, drugs, economic benefits, emotional blackmail, to name a few). Only then will we be in a position to comprehend that we are able to guarantee children and adolescents their rights only when we act on these risk factors and entrapment methods.

In summary, let us now look at some examples of phrases used by government employees in relation to victims of commercial sexual exploitation. These comments reflect the Irregular Situation Doctrine. The objective is for us to identify when we ourselves use these and other similar expressions, and to understand where our personal process of assimilating the Human Rights Approach is leading.

Examples of remarks made under the Irregular Situation Doctrine

“They like it, they earn lots of money”

“They take advantage of adults, of tourists, of anyone who lets him or herself be persuaded”

“They’re not going to change, they’re too corrupt”

“We propose helping those who want to get out of it”

“When are you going to change? Why don’t you agree to go into an institution? I want to help you”

“They are mature little prostitutes”

“We will only be able to change the situation using innovative therapy”

“I give her advice, but she takes no notice”

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5 These are genuine phrases and comments made by government employees in interviews, questionnaires, opinions and the media.
These phrases reveal that under the irregular situation doctrine, the State shirks the responsibility for assuring the right of all children and adolescents to a life free from exploitation and abuse. It leaves that responsibility to the underage person or his or her family.

The rights approach breaks with this standpoint and thus, what emerges from the Convention on the Rights of the Child is that all underage persons, including adolescents, have the right to grow and develop in a healthy environment that is free from all forms of abuse and commercial sexual exploitation. Furthermore, it is the obligation of the State and, consequently, its institutions and staff to guarantee this right, regardless of the victim’s religious creed, nationality, sex, age, race, economic status or any other condition.

The approach not only recognizes underage persons as social subjects, but also upholds a range of principles, among which we may highlight the following:

- **Human rights cannot be relinquished.**
- **Human rights are comprehensive and inseparable, none is more important than the other.**
- **The child is of paramount importance.**
- **Human rights are universal.**
- **Human rights can be demanded.**
- **The State should, bearing in mind the special condition of children and adolescents, ensure all their human rights are fulfilled.**
II. Significance of the principles derived from the convention on the rights of the child regarding care for underage persons

a) The right to a life without violence and free from exploitation is applicable to all underage persons, regardless of their age, gender, nationality or any other condition. The principle of universality means no cultural factor can be used to justify a single girl or boy being denied the possibility of exercising this right. Likewise, the assumption that it is the right of an adolescent to decide whether or not to relinquish the right to be protected, is an erroneous interpretation of the approach.

b) The human rights of children and adolescents are inseparable. The violation of any one right represents a violation of them all. In this regard, the responses to victims’ needs should always be comprehensive. In the same way, when we validate a right we cannot violate another in order to attain the first.

c) The paramount importance of the child means that the State should give priority to child welfare policies and the funds needed to implement them. Given the gross violation of rights in commercial sexual exploitation, decision-making related to victims should have priority status, with a view to guaranteeing conditions for their growth and development. The State should, based on this principle, and in view of its obligation as the State, guarantee rights, and ensure the protection of underage persons when a member of their family is suspected of perpetrating abuse. In such cases, the accused must leave the home, not the victim.

d) Victims of commercial sexual exploitation cannot relinquish their human rights. Intervention based on the question posed to an underage person as to whether they wish to continue to be exploited or not, is therefore, unjustifiable, irrespective of whether that person is 15, 16 or 17 years old.

e) The State is required to ensure the effective protection of all underage victims with regard to the sex trade, whether or not they were born in the country of residence.

f) All adults must respect the human rights of children and adolescents – including, the right to protection against commercial sexual exploitation, and demand that all rights are fulfilled.
### III. Challenges encountered by service providers when applying the rights approach to care for victims of commercial sexual exploitation

The table below illustrates some of the obstacles that service providers encounter when incorporating the rights approach along with suggestions for overcoming them.

<table>
<thead>
<tr>
<th>Challenges</th>
<th>Response</th>
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<tbody>
<tr>
<td>Lack of awareness of Rights Approach</td>
<td>Ongoing and systematic training on the Approach and its application to daily life.</td>
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<tr>
<td>Ongoing and systematic training on the Approach and its application to daily life.</td>
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<tr>
<td>Limited understanding of Rights Approach</td>
<td>Ongoing and systematic training on the Approach and its application to daily life.</td>
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<tr>
<td>Ongoing and systematic training on the Approach and its application to daily life.</td>
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<tr>
<td>Use of psychological and psychopathological theories as explanations of the origins of victimization.</td>
<td>a. Encourage professional and institutional thought processes.</td>
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<tr>
<td>b. Incorporate monitoring and follow-up processes into interventions.</td>
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<tr>
<td>Insensitivity to the needs of the child and adolescent population and disrespect for the stipulations of the Convention on the Rights of the Child.</td>
<td>a. Adjust or modify staff selection processes.</td>
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<tr>
<td>b. Incorporate monitoring and follow-up processes into interventions.</td>
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<tr>
<td>c. Punishment or dismissal.</td>
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<tr>
<td>Fear of retaliation or threats from sex exploiters on one’s physical integrity and personal security.</td>
<td>Take institutional measures to ensure staff safety, in conjunction with legal and law enforcement authorities.</td>
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<tr>
<td>Despair of service providers concerning success in changing the paradigm on which interventions are based.</td>
<td>a. Constant monitoring of professional attitudes when working with victims.</td>
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<tr>
<td>b. Incorporate monitoring and follow-up processes into interventions.</td>
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<tr>
<td>c. Establish institutional policies for staff self-care.</td>
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## Challenges

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<tr>
<th>Challenges</th>
<th>Response</th>
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| Little or no experience working with other government institutions or civil society organizations. | a. Ongoing and systematic training on the Rights Approach, above all on the principles of collaboration and coordination.  
  b. Begin cooperation tasks. For example:  
    • Conduct an analysis of the services offered nationwide and in the region.  
    • Develop an organizational and professional directory.  
    • Initiate advocacy efforts to obtain institutional commitments. |
| Belief that lack of economic resources makes changing the focus of intervention impossible. | a. Institutional coordination and articulation.  
  b. Careful management of existing resources.  
  c. Maximize family and community resources. |

## Reflection Exercise:

1. Describe, in your own words, what you understand by the use of the rights approach versus the irregular situation doctrine in regard to care for victims of commercial sexual exploitation.

2. With reference to section II, mention one other meaning for points b and d.

3. Complete the table in section III of this chapter to include other challenges that you have encountered in the organization in which you work, and identify one or two responses for each new challenge included. Discuss these additions to the table with your colleagues.
UNIT TWO

GUIDELINES FOR INSTITUTING A CARE PROGRAMME
Guidelines for programmes providing direct care to victims

I. General guidelines for the elimination of commercial sexual exploitation

• Promote the exercise of human rights of all underage persons.
• Promote a culture of intolerance against commercial sexual exploitation and all forms of violence against children and adolescents.
• Comply with ratified international agreements regarding the elimination of commercial sexual exploitation.
• Adopt the necessary laws (criminal and procedural) and harmonize those in existence – related to sexual violence and the protection of underage persons – in order to effectively penalize all forms of commercial sexual exploitation.
• Develop and implement decentralized policies, plans and programmes for the elimination of commercial sexual exploitation to ensure nationwide coverage.
• Strengthen inter-institutional and inter-sectoral networks in the fight against commercial sexual exploitation.
• Strengthen universal social policies in order to improve the standard of living of poor families, in particular, those headed by women.

II. Managing the implementation of a comprehensive care programme for victims

Before beginning a comprehensive care programme for victims, the organization should make a series of decisions to direct their actions at the successful achievement of their activities. A possible name for this process is Care Model Management.

The Management process is used to systematically develop the institutional policy, principles and rules for the care of victims; goals and objectives, procedures and actions for internal work; and work done in conjunction with other organizations. It also involves designating responsibilities on all levels, developing a work plan, and the development of a model for the monitoring and evaluation of the policy in general, and of plans in particular. It is important, at this stage, to highlight the need to incorporate the views of children and adolescents in this process.
The task within this process is to develop an institutional policy regarding care for victims of commercial sexual exploitation. Once the policy has been developed and those in charge of executing it have been appointed, we can move on to defining goals, objectives and procedures. At the same time, we recommend that an institutional analysis be conducted to determine the resources, potential and weaknesses which need to be improved or addressed before initiating the work plan.

A. Institutional care policy

The institutional care policy should be developed with the participation of all sectors and stakeholders involved in providing care. Most importantly, it must include the opinion of child and adolescent victims of commercial sexual exploitation, as they are the primary beneficiaries of the services provided.

The policy should be written in simple and straightforward language to ensure that it will be easily understood. Doing so ensures that all staff will understand the results that the proper implementation of the policy hopes to achieve. It should clearly indicate the institution’s goals regarding the protection of underage persons and the exercise of their rights.

What is a care policy?

A care policy is the institutional commitment, made at the highest level, which establishes the declarations, guidelines, goals and general objectives with respect to care for victims of commercial sexual exploitation. This is expressed in a single document, which indicates who is in charge of implementation, supervision, evaluation, when these activities will take place and what results are expected. It represents the starting point for the appropriate management of the care model and expresses the institution’s intentions in relation to the protection and welfare of children and adolescents exploited in the sex trade. All service providers should understand the priority and importance of dealing with victims in a comprehensive manner with regard for the organization’s other values and tasks.

The care policy can be described as an institution’s declaration. It constitutes the organizational starting point since it comprises the commitments made by the organization and the care model’s basic management plan. This management plan should be read, understood and implemented by all personnel. It is the key to achieving the minimum and adequate standards for providing comprehensive care for child and adolescent victims of commercial sexual exploitation.

The institutional commitments stated in the policy should be put into practice. The effectiveness of the policy is monitored by measuring its impact on both reducing the risks of being lured into commercial sexual exploitation and on the exercise of rights of all children and adolescents, whether being provided with care or not, and in how well the policy is written.
Requirements of a successful policy

- Focuses specifically on victims of commercial sexual exploitation to ensure that it appropriately speaks to the nature and scale of the risks of being lured into commercial sex networks.

- Includes the commitment to comply with existing domestic legislation and international agreements dealing with commercial sexual exploitation.

- Informed, implemented and maintained.

- Staff fully informed of the policy with the intention of making them aware of their individual duties.

- Made available to anyone who wishes or needs to read it.

- Supported with sufficient funds to ensure its implementation.

- Accompanied by an institutional programme to develop the knowledge, skills and capabilities of staff to ensure adequate implementation.

- Effectively monitored and transformed, if necessary.
The following is an example of a care policy. Through this example, we hope to illustrate how care policies are structured and what should be included in their content. We have chosen the example of a non-government organization, but could equally have chosen that of a government institution. Both should develop their respective policies.

Example of an institutional policy

The Ave Fenix⁶ non-government organization is committed to devoting all its efforts at reducing the risks of commercial sexual exploitation of children and adolescents participating in their care programmes.

It also aims to validate the exercise of fundamental human rights for all.

Thus:

a) The risks of underage persons being lured into commercial sexual exploitation can be reduced.

b) The safety and welfare of all children and adolescents are the responsibility of all those working at the organization.

c) One of the organization’s priorities is to demand that all human rights are fulfilled.

d) Institutional coordination and the strengthening of family preservation networks shall constitute the most important mechanisms for providing those under 18 years of age with comprehensive care.

e) All personnel are obligated to abide by the rules and procedures for institutional care.

⁶ Made-up name
B. Assigning responsibilities

In the management process, it is necessary to define who will be the persons or teams responsible for the implementation of the institutional policy.

Example

Establishing formal responsibilities

1. The formal responsibility of ensuring that the care programme is aimed at the protection of victims and the exercise of all their rights falls on:

   The Technical Board

2. The responsibility of ensuring that the care policy is put into practice falls on:

   Each area coordinator

3. The responsibility to ensure that the policy is carried out, and that the procedures for respecting the human rights of underage persons are maintained and improved, falls on:

   Coordinators/Supervisors in the technical field

   Administrative Manager

4. The responsibility of promoting, developing and extending the collaboration of the care services platform (inter-institutional network) is delegated to:

   Technical Board, Coordinators

5. The responsibility to monitor the impact of the policy on children and adolescents, falls on:

   Technical Board that selects and hires external advisors

The technical and administrative staff will, in addition, have specific responsibilities once the work plan has been drafted and these will be added to the table above.
III. Recommendations for the implementation of a comprehensive care programme for underage persons involved in commercial sexual exploitation

1. Diagnostic Phase

The diagnosis of the situation may be carried out prior to or at the same time as the implementation of the management process. The following should be taken into account:

- The institution’s experience in providing care for underage persons involved in commercial sexual exploitation or in similar social circumstances. This includes the lessons learned from previous experiences, institutional and staff challenges to working with this population under the Human Rights Approach and the experience gained in working in conjunction with other institutions.
- The human and financial resources available within the organization.
- The existence and level of development of national and local policies and plans for eliminating commercial sexual exploitation.
- The legal framework of each country and the ethical standards regarding sexual violence and care for persons under 18.
- Identification of existing institutional resources, both public and private, in the area the programme will cover, to build the platform of services available to underage persons and their families, for example: offices for reporting crimes; specialized or emergency shelters; state institutions legally responsible for child protection and welfare; courts dealing with matters related to family, children, child support and legal protection measures; support groups for women; specialized programmes for children and adolescents at social risk; police; educational institutions; immigration offices; state institutions and non-government organizations dealing specifically with family violence; as well as organizations and programmes working in the field of social, community and family welfare (benefits, housing, nutrition), among others.
- How commercial sexual exploitation of children and adolescents is characterized in the target area that the programme is to cover.
The following questionnaires are intended to guide the Diagnostic Phase.

**Diagnostic Phase**

**Questionnaire No. 1**

- What is known about the problem of commercial sexual exploitation in the target area that the programme is to cover?

- Does a national care plan for victims of commercial sexual exploitation exist? What are the key issues and strategies and how will they be adapted to the area in which the programme will be implemented?

- What kind of services are available in the area and in the country regarding sexual violence, teenage mothers, child and adolescent addictions, financial aid for families, school grants, benefits, basic education programmes outside the formal education system, guidance for families in crisis, employment agencies, technical education programmes, spiritual services for young people and families, services for abused women?

- What is the main medium for detection and care of child and adolescent victims of commercial sexual exploitation currently being used in the area to be covered by the programme? (NGOs, offices where crimes can be reported, hospitals, others)?

**Diagnostic Phase**

**Questionnaire No. 2**

- Does the country have a law that punishes commercial sexual exploitation? If so, what actions does it penalize and where are the loopholes? What are the procedures and requirements for reporting offences? To what authority in the area can incidents be reported?

- With regard to child sexual abuse and incest, what actions are typified as crimes and which remain unpunished? Are there differences in the classification, penalty or reporting procedures, depending on the age of the underage victim?

- How effective is the said legislation within the local context? Is data available on the number of reports made compared to the number of sentences passed? Are cases of commercial sexual exploitation reported?

- Is there an institution or programme that follows up on the impact and effectiveness of the laws against commercial sexual exploitation?

- Does the country have a Child and Adolescent Code? What does it say about the issue of sexual violence against underage persons? What are the service providers’ obligations when confronted with situations of child and adolescent abuse? Are there other laws related to the issue?

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7 Questionnaires adapted from: GENDER-BASED VIOLENCE. Self-study guide for health service providers. New York: International Planned Parenthood Federation, unpublished.
Diagnostic Phase  Questionnaire No. 3

• Which institution in the country is responsible for safeguarding the rights of children and adolescents? What procedures does it require for initiating administrative protection processes? What are the main protection strategies that the institution offers in cases of incest and child sexual abuse, negligence and physical ill-treatment, among others? Is there an office that represents the said institution in the area covered by the programme?

• Is there a specific programme or plan within this institution that offers care for the victims of commercial sexual exploitation? Do those in charge have special training for dealing with the issue of commercial sexual exploitation of children and adolescents?

• At the medical-legal level, what services and health professionals are authorized to carry out tests and gather forensic evidence for underage persons, in cases of sexual abuse in general, and commercial sexual exploitation in particular? Are they free? Are they available in the area covered by the programme? Do those in charge of these procedures have training related to sexual violence against children and adolescents?

Diagnostic Phase  Questionnaire No. 4

• Are there people within the organization who have specific training for working with victims of commercial sexual exploitation?

• Are there policies, rules, regulations and institutional protocols for dealing with underage persons who are victims of commercial sexual exploitation?

• Does the institution’s staff acknowledge the existence of the problem? Have they had specialized training? Are they familiar with the minimum ethical and legal standards for dealing with the issue?

• Do they have work experience in the field of sexual violence against underage persons? What are the lessons learned?

• Do they have experience coordinating with other institutions in tackling the issue of sexual violence? Have other areas had experience in coordination? Do they have networking experience? What are the lessons learned?

• If they have work experience with victims of commercial sexual exploitation, what are the lessons learned?

• What are the service providers’ attitudes towards commercial sexual exploitation?

• What are the possible obstacles within the institution for the establishment and implementation of care plans for victims?
Two products are expected as a result of the diagnosis:

**Products of diagnosis:**

1. Directory of organizations, programmes and professionals that can satisfy the needs of the underage persons and their families.
2. Table, divided into two columns, in which the problems or needs identified are included in the first column, and the solution strategies (including tasks and those responsible) are set out in the other.

**2. Work Plan Development**

Once the institutional management programme has been developed, the organization is ready to begin the process of developing a work plan.

The contents of the plan cover the following:

a. Institutional policies regarding care for victims of commercial sexual exploitation

b. Guiding principles of care programme

c. General purpose of programme (objective)

d. Temporary goals, translated into demonstrable criteria

e. Institutional articulation plan (how responses between different institutions are going to be coordinated to promote the growth and development of the child and/or adolescent within a healthy environment)

f. Selected strategies for working with underage persons (these are not activities and should be based on the real existing needs of the children and adolescents and their families within the community)

g. Defining activities for each of the strategies selected

h. Appointment of persons responsible for the execution of activities

i. Budget

j. Criteria for assessing the impact of the plan on underage persons (success criteria of said strategies)
k. Monitoring and evaluation of the success criteria (the plan’s impact); Should include the sources and tools for gathering information, how often assessments must be made and the identification of those responsible for undertaking this component

l. Safety regulations for personnel

\[\text{To be taken into account:}\]

\[\text{With regard to choosing care strategies:}\]

The strategies are not tasks or activities but, rather, the paths chosen by the institution for offering all children and adolescents protection and ensuring that their rights are fully exercised. For example, one strategy is the strengthening of family preservation networks, which is achieved through distinct tasks or activities, such as providing information regarding benefit plans, family guidance, support and assistance for the needs of mothers, detecting violence within the family, and banning those accused of violence from the home, among others.

Likewise, defining the success criteria does not mean undertaking activities in order to implement plans regarding protection and the exercise of rights. On the contrary, this should be demonstrated in the impact of the selected strategies on the daily lives of the children and adolescents and their families. For example, staff training is not a success criterion, neither is facilitating access to education. The success criteria of training providers is, rather, its impact on transforming the risk factors faced by underage persons involved in commercial sexual exploitation. Equally, it is not enough to facilitate the underage person’s access to formal education. The criterion of success is that every child and adolescent is placed within the education system. In other words, the success of the intervention is demonstrated through the exercise of all human rights.

3. Essential requirements for the development and implementation of a care programme

- has clearly defined aims,
- is based on a diagnosis,
- is strategic,
- is linked to other authorities and resources,
- has the capacity to be implemented and evaluated,
- is supported by political and financial commitment,
- is sustainable over time,
• has clearly established responsibilities regarding action,
• is monitored.

4. Elaboration of inputs and work tools

These include, among others:

• Referral and counter-referral mechanisms.
• Protocols for detecting, registering and caring for victims (including emergency medical care, basic and secondary care).
• Checklists and other instruments in addition to the work protocols.
• Monitoring instruments for the programme in general and for interventions, in particular.

To be taken into account:

Protocols are instruments that list every step of the activities that service providers should carry out in different areas or spheres of influence. They are, therefore, specific enough to describe in detail the actions to be developed. For example, the detection protocols are drafted specifically for hospitals, police operations, schools or institutions dealing with child welfare. Likewise, checklists can be attached to detection protocols to facilitate risk assessment.
Reflection Exercise:

1. Describe, in your own words, a care programme’s Management Process with regard to commercial sexual exploitation.

   Does the institution where you work have a care policy?

   If so, make an assessment of it according to the requirements for success described in section II A.

2. Complete the table below as an example. Remember to use the Rights Approach.

   **Objective:** To protect underage persons faced with commercial sexual exploitation.

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Reasons for choice</th>
<th>Does the strategy violate any other right established in the Convention? Yes or No</th>
<th>Strategy’s success criteria (Should be demonstrable according to the level of risk)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>2.</td>
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</tbody>
</table>
Protection from the sex trade, ensuring the exercise of all rights that have been violated and the recovery, are the main objectives of the care process for child and adolescent victims of commercial sexual exploitation. The care process must, therefore, comply with four essential requirements: promptness, timeliness, efficiency and effectiveness.

In order to achieve these objectives, it is necessary to understand that, due to the complexity of intervening factors, care for victims is a task that cannot be limited to one single sector or institution. The success of the programme is dependent upon the way in which it is implemented in conjunction with the range of services available within the country or the community, to be able to respond to the diverse needs of victims and their families. The programme will also encourage the institution responsible to develop the required skills to enhance its capacity to fulfil its legal mandate.

At the same time, the range of services available should be understood as a cycle of services adapted to the specific needs of the child or adolescent. It is very important that this is understood. If we think in terms of linear responses aimed in one direction only, we may fail to reach our goals. On an individual level, for example, an adolescent may require the same or similar services at different stages of the intervention process. Underage persons involved in the sex trade require a wide range of responses depending on specific circumstances, and the search for and implementation of different protection options may require several and varied attempts. In other words, if we plan services in a linear fashion for each victim, it means we are not taking into account specific needs, for example, those related to age and gender, or the needs of the same person at different moments in their life. This does not imply a change of objectives since the goal is the same for all the underage persons.

Let us illustrate what is meant by a linear response model, which, from the moment commercial sexual exploitation is detected, does not take into account the specific needs of the child or adolescent in the planning of services.
This view of services shows us why a linear model does not take into account the characteristics of each situation. Not all victims will need to be sent to a shelter for emergency situations but, equally, for others, this may be repeatedly inevitable. That is why we believe that the response used should be applied in terms of a cycle of specific needs.
The aim of the model we propose is to guide service providers in decision-making regarding care, within a range of services that meet the specific needs of underage persons. This model is comprised of four components or work axes. The grouping is based on the aim of the activities and not on the type of response. Two principles are of fundamental importance to this proposal:

a. Services in each component should be interpreted within a sequence of responses.

b. Underage persons may access the services planned for each component at different moments in their lives.

This means that the same person may require the same responses from the primary intervention component (which will be explained later) at different times in his or her life or that the offer of secondary services should be available at all times according to the individual's specific needs.
Example

Martha’s condition is one of exploitation (First Component) and she is offered all services to ensure her protection from exploitation (Second Component). Let us assume that these were successful. However, three months later, when she was at another stage of the care process, the programme discovers that she was raped by one of her relatives (First Component). Activities and services similar to the stage she has already been through thus need to be made available to her once more to ensure that she is protected from this new violation (Second Component).

First Component
Detection

Second Component
Primary Intervention

The services are made available according to age, specific circumstances regarding the type of exploitation, gender and any other condition that requires specific responses.

The components have been grouped according to their objectives and not according to the services each one provides.
### I. Work components

1. Detection and registration
2. Primary intervention
3. Secondary intervention
4. Follow-up

### II. First component: detection and registration

Includes the following objectives:

- Early detection,
- Registration of affirmative cases,
- Gathering and registration of all forensic evidence (medical, social and psychological),
- Working in conjunction with the criminal justice system in order to report cases of incest and sexual abuse and other crimes; and offering all necessary cooperation for investigating, reporting and prosecuting commercial sexual exploiters and their intermediaries.
- Assessment of risk factors,
- Ensuring immediate care when there are signs that the underage person may be in danger of being lured by the sex exploiters once again.
The detection of problems is the first requirement for ensuring the exercise of human rights. In this respect, it could be described as the process of safeguarding rights. With regard to commercial sexual exploitation, detecting such incidents offers us the opportunity to guarantee the exercise of rights when confronted with abuse and other violations that, by and large, form part of the history of underage persons enslaved by the sex trade. It also constitutes the ultimate opportunity to identify other real or potential victims and to prosecute sexual exploiters.

In this respect, the institutions or organizations, including your programmes designed to offer services within the community, should include systematic regulations and procedures to detect and register victims as part of their routine. Appropriate and early detection could be a child’s or adolescent’s only opportunity to grow and develop within a healthy environment.

Likewise, the registration system linked to detection contributes not only to improving the information available and awareness of how commercial sexual exploitation works, but it also allows us to design policies and programmes aimed specifically at the prevention of risk factors.

At the individual level, registration commits us to follow up on activities undertaken to ensure the victim’s success within the care process.

In order to carry out early and effective detection, it is crucial that the institutions that are in a position to do so have at their disposal the pertinent protocols for executing the following activities:

• Detection interview. This includes: focus on the place in which the interviews will be conducted, which is required to be conducive to the needs of victims; key questions to be explored; ensuring that interviewers have the capacity and opportunity to conduct the interview and that they are able to display empathy and support.

• Procedures for relocating underage persons, including who, how and where;

• Immediate referral mechanisms;

The following should be taken into account:

Given that commercial sexual exploitation is a crime, it is recommended that the following questions be answered in order to gather medical evidence:

• Who will undertake the collecting of forensic evidence? Where?

• When a case is positively detected in the victim’s home or community, how will the gathering of evidence be informed?

• What are the legal requirements for collecting medical evidence?

• What is the procedure if the victim does not wish to undergo forensic tests?

• Who accompanies the underage victim during this process?
• Procedures for gathering medical, social and psychological evidence;
• Instructions for registration;
• Procedures for risk assessment;
• Immediate responses to ensure protection;
• Procedures for working with the justice system and the police.
• Procedures for working with state institutions in charge of providing administrative protection measures.
• Procedures to establish initial links with the family.
• Other essential procedures depending on the country or area and the dynamics of the exploitation that persons are subjected to.

In order to comply with these requirements, we believe it is essential for the organization to conduct a workshop, to bring key stakeholders together to make initial decisions and, thereafter, proceed to develop and systematize protocols and additional instruments (to assist those in charge of the process). The contents and application of the protocols and instruments should be validated by all sectors involved.

III. Second component or primary intervention

This component encompasses the coordination of services to ensure that victims are afforded their rights to life and protection when confronted with the sex trade.

Once it has been determined that the child or adolescent is a victim of commercial sexual exploitation, a work plan which ensures that the victim is able to exercise his/her human rights must be put into practice immediately.

This component is also known as emergency intervention to highlight the fact that the imminent risks of abuse, exploitation and death should be taken into account and reduced with the utmost urgency.

Service providers should also be prepared to coordinate immediate responses to ensure that victims are offered emotional support and empathy throughout the entire care process.

The aim of primary intervention is to ensure that all human rights are exercised. All rights are equally important; however, at this stage in the process our actions should be prioritized. In the early stages of intervention it will sometimes be necessary to focus on a particular right or group of rights. Nonetheless, the work plan should reflect that all other rights are addressed and enjoyed shortly thereafter. This component should be completed within a short period of time. We suggest that it be carried out within the period established for crisis intervention models, which propose a maximum period ranging from four to six weeks.
A. Principles of primary intervention.

- **Underage persons have the right to live with their family.**

  A range of services must be offered to the families of victims in an effort to contribute to the development of the family’s protective potential, making this unit better able to meet the needs of its children and adolescents.

- **The safety of the children and adolescents is a priority.**

  The immediate response is desirable and family visits help to assess the risks and allow the implementation of safety plans. If it is determined that the child or adolescent is not safe at home due to the presence of a risk factor(s), for example, an incestuous father, stepfather or relative in the home, then the alleged exploiter/perpetrator should be removed from the home before taking any measures to remove the underage person. In other cases, alternative protection must be sought. For practical purposes, institutionalization does not always ensure protection. Children may also be physically, sexually and psychologically abused in shelters. In other cases, their anxiety and discomfort is such that they cannot be restrained by the institutions and they run away to the streets, where they are in greater danger. Still, in other cases, the parents require help to keep their children within the family and home. The need for assistance may vary and range from a non-violent disciplinary model to needs related to the survival of the family unit: food, adequate housing, clothes, and payment of public services/utilities, etc.

- **Specific assistance for the immediate needs of the family.**

  As previously mentioned, feeling excluded is one of the victim’s main vulnerability factor related to commercial sexual exploitation, services related to material survival must be identified and provided. Bearing in mind that many of the adolescents are also parents themselves, their financial needs must be considered and addressed in order to prevent this circumstance from being used as justification for going out into the streets and being exploited in order to survive.

- **Mothers are the main source of support.**

  In our society, the maternal figure is the main source of support and protection for children and adolescents. However, gender-based violence often reduces their ability to protect. Despite the difficulties they face, mothers are, by and large, the main allies of programmes aimed at effectively assisting victims of commercial sexual exploitation.

- **Family members help each other.**

  Even in families where abuse, incest and negligence take place, there are also strong ties of affection and favourable attitudes for caring for children and adolescents. The ability to identify and strengthen behaviours resulting from such attitudes and sentiments, contributes to the success of the safety plan for underage persons.
**B. Fundamental objective of primary intervention**

To mobilize and coordinate institutional, communal and familial resources to ensure protection against commercial sexual exploitation and the exercise of rights.

**C. Procedures**

Given the characteristics of commercial sexual exploitation, we are including essential steps in this second component. Although all human rights should be ensured, we propose that work on the following should take priority:

1. **Exercising the right to life and the right to health**
   
   Emergency medical care.
   
   Includes:
   
   • Dealing with injuries or the consequences of sexual violence,
   
   • All interventions required for providing immediate health care, including dealing with cases of intoxication, pregnancy and other problems requiring care,
   
   • Counselling and preventive measures for reducing the risk of pregnancy, STI’s, HIV and AIDS and Hepatitis infection.

2. **The right to protection against all forms of abuse and exploitation**

   Includes:

   2.1 Assessing the risks for commercial sexual exploitation (both personal and that of other underage persons linked to the victim, for example: siblings). This assessment is based on the characteristics of both family and community life in order to examine the risk factors. Assessing the probability of renewed exploitation or abuse is, likewise, based on the dynamics of the commercial sexual exploitation that the victim experiences.
### What knowledge do we need to gain from this risk assessment?

<table>
<thead>
<tr>
<th>Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Is there an impending danger that the underage person may be sexually</td>
</tr>
<tr>
<td>exploited once again?</td>
</tr>
<tr>
<td>b. Is he/she being threatened by procurers, drug traffickers, intermediaries, exploiters?</td>
</tr>
<tr>
<td>c. Is he/she in danger of being murdered?</td>
</tr>
<tr>
<td>d. Is he/she living in a hotel, hostel, brothel or on the streets?</td>
</tr>
<tr>
<td>e. Is she pregnant?</td>
</tr>
<tr>
<td>f. Does he/she have financial responsibilities towards his/her family, children or others?</td>
</tr>
<tr>
<td>g. Does he/she live with a partner who forces or puts pressure on him/her to earn money?</td>
</tr>
<tr>
<td>h. What is his/her family like? Do they abuse him/her? Is there abuse against the mother? Do addictions exist? Does the mother have any form of disability? Is he/she pressured into contributing money, among other things?</td>
</tr>
<tr>
<td>i. Is he/she at the mercy of drug traffickers?</td>
</tr>
<tr>
<td>j. Does he/she have debts?</td>
</tr>
<tr>
<td>k. Does he/she have a serious addiction and constantly need money to buy drugs?</td>
</tr>
<tr>
<td>l. Is there a risk of suicide?</td>
</tr>
<tr>
<td>m. Has he/she been expelled from his/her family or community for reasons related to sexual preference?</td>
</tr>
<tr>
<td>n. Is he/she an orphan?</td>
</tr>
</tbody>
</table>

2.2 **Assessment of the exercise of rights.** Does the child or adolescent live with his or her family? Does he or she go to school and, among others, exercise his or her right to health?

2.3 **Assessment of the emotional stability and internal resources that allow for the participation of the child or adolescent in the plan of action to be determined.** This includes assessing addictions, disability, etc.
2.4 Assessment of external resources available to the underage person, including both family and institutional resources, and public and private resources (range of services).

2.5 Information and education. Children and adolescents have the right to be informed about abuse and the procedures and actions that should be carried out on their behalf, in order to stop such violence. Information regarding awareness of the rights system and the way in which rights may be exercised is, likewise, given according to the age and level of development of the child or adolescent.

2.6 Developing a plan of immediate action, taking into account the opinion of the underage person.

2.7 Implementing the plan through the mobilization and efficient use of resources.

2.8 Following up on the plan’s impact.

To be taken into account:

With regard to emergency internment (placement):

Emergency shelters may be a necessary resource for some children and adolescents, but should never be the first option.

The first alternative should always be to reside in the family itself, in the broadest sense of the term, which includes extended family.

The second alternative is a community home, with families chosen from within the community where the underage person lives, who are trained to care for victims in their homes for short periods of time.

The third is the institutional resource.

The period in which victims remain in any of the alternative placements, other than the family itself, should be used to assess the situation that gave rise to the removal and placement of the child or adolescent. This places persons working with victims and their families in a position to transform this situation, i.e. in order to achieve the aims of a primary intervention, including emergency medical care.

The following are some criteria that help in choosing institutional internment: the whereabouts of the family are unknown; the person lives on the streets, in a hotel or in a brothel (without adult protection); he/she is in a state of chronic intoxication; he/she has migrated alone or with other children or adolescents; he/she is prey to sex traffickers; he/she is at risk of death.

If the victim is also a mother who is responsible for her child(ren), her child(ren) should remain with her, regardless of the alternative placement chosen.
IV. Third component or secondary care

Development and implementation of plans for the exercise of all rights, including the right to emotional recovery.

This stage – which begins only after the objectives of protection and safety that correspond to primary care have been achieved – will attempt to lessen the impact of the abuse and promote a positive change in the daily lives of these children and adolescents and their families. This stage should be initiated only after the child or adolescent is out of danger. Many providers have a tendency of dealing with the emotional impact of commercial sexual exploitation on victims even when the victim is still being exploited. This tendency is, on a whole, the result of how the causes of commercial sexual exploitation are interpreted within the victim's private life and it is thought that if “we develop self-esteem, values and the resolution of conflicts”, the child will stop “prostituting him/herself”. This same erroneous tendency is evident, for example, in services being provided for victims of incest, who assume that it is the girl or boy who causes the problem, and that he or she will be able to stop the abuse through therapy or good advice.

Let us revert to the beginning of the chapter, which indicates that the services available should satisfy the specific needs of individuals, and, to this end, appropriate alternatives based on gender, age and any other condition that requires the development of specialized programmes must be sought. This, therefore, demands of us creativity and persistence.

It includes:

1. Ensuring all rights – including education, recreation, participation, living with the family, etc. – are exercised.

2. Recovery or dealing with chronic health problems, and providing adequate care for physical consequences of commercial sexual exploitation.

3. Emotional recovery from the violence experienced.

4. Recovery from the effects on the person’s sex life.

5. Strengthening family and community networks that will allow the underage person to remain within the family or community.

6. Reintegration into school life and development of occupational abilities and capacities in persons over 15 years of age.

7. Search for economic self-sufficiency or, alternatively, family survival options.
Take into account the following:

Emotional recovery from commercial sexual exploitation – as with other forms of sexual violence – should be undertaken bearing in mind the main consequences that it has on the lives of those who are affected. In this sense, the method of group work is given priority because this method:

- helps to deal with and lessen stigmatization;
- contributes to strengthening cohesion and solidarity;
- allows members of the group help each other;
- makes the best possible use of institutional resources;
- constitutes an opportunity for favouring education based on experience;
- creates a political space for underage persons to participate in the search for and implementation of responses to these and other social problems.

Another important aspect to take into account is education. Let us remember that every person under 18 has a right to basic education, and this can never, therefore, be substituted, although it can be complemented by, technical or occupational training.

Likewise, basic educational services should be creative, fun and flexible to be attractive for underage persons who have been excluded from the system or expelled from it a long time beforehand and where there is, thus, a gap between age and school grade. The educational services should respond to particular needs, such as context, age, gender and other conditions that require specialized programmes.

V. Fourth component or follow-up

The actions undertaken to achieve the objectives of the different component should be individualized and take into account several factors such as gender, age, the dynamics of commercial sexual exploitation, economic needs, addictions and, overall, the underage person’s level of risk of re-entering the sex trade.

The aim of this component is, therefore, to assess the effectiveness of the actions developed in previous components.

The process is carried out by means of two main types of activities:

a. Monitoring the interventions of the programme’s service providers.

b. Monitoring the exercise of human rights.
Under point (a) we include, as a means of assessment, for example: checking care files (which should clearly indicate the procedures and results of the intervention strategies, in accordance with the aims and objectives of the care plan); focus group discussions on specific interventions (which may be selected at random); and studies for assessing the quality of the services (namely, finalization surveys). Under point (b,) by way of example: follow-up house calls; interviews with the underage person; checking academic records to monitor school attendance and performance; interviews with healthcare staff to check access to and provision of appropriate medical care, etc.

VI. Monitoring and evaluation of care plans

The overall effectiveness of the plan should be evaluated using demonstrable criteria according to the aims and objectives proposed. The organization may proceed to identify the criteria for success, as well as the way in which they will be evaluated and who is to conduct the evaluation.

This way, we can guarantee that the plan is effective in its aim to ensure the exercise of human rights of all children and adolescents covered by the programme.

Questions that direct the Monitoring of a Plan:

a. What is the plan's overall goal and how is it verified?

b. What is the plan’s goal for the work period under evaluation? Is it possible to verify in statistical and demonstrable terms?

c. What are the most pressing problems that the plan attempts to solve?

d. What strategies were chosen to provide solutions to these problems?

e. What is the criteria that determines the success of these strategies?

f. What are the sources of information used to verify the success criteria?

g. When, how and by whom will the plan be monitored? In this regard, it is worth remembering that it is important for monitoring to be conducted by independent persons or teams.

The answers to these questions will help us not only to develop the monitoring system but, more importantly, to implement it.

Let us bear in mind that it is only through continuous and consistent evaluation that we will know whether our efforts and resources are being effective. If this is not the case, we will need to modify, adapt or change our strategies.
Reflection Exercise:

1. Give an example of a Linear Response Model of Care for underage victims of commercial sexual exploitation.

2. Develop a care plan for Nora (from the Exercise for consideration in Chapter One, Unit One) and Jose (Chapter Two, Unit One). These should include the following:
   a. Primary Intervention strategies,
   b. Secondary Intervention strategies
   c. Follow-up strategies
   d. Specify the information you need in order to develop the plan
   e. Justify the strategies you have chosen for this purpose.

3. In accordance with your country’s characteristics:
   a. What are the main problem areas that care plans for victims of commercial sexual exploitation should take into account?
   b. What are the existing strengths and opportunities in your country for developing a cyclical care model for victims, using a human rights approach?
CONCLUSION

In conclusion, we can only add that those who take on the task of providing comprehensive care for underage persons who are victims of commercial sexual exploitation face several challenges, among which the following may be highlighted:

a. The need to re-examine our paradigms to consider children and adolescents as social subjects with rights and not recipients of our favours or concessions.

b. The need to re-examine our myths and prejudices in regard to sexuality, sexual violence and commercial sexual exploitation.

c. The need to re-examine our myths and prejudices regarding gender-based violence and, in particular, the erroneous idea that the mothers of victims are women who are insensitive to their children's needs and are our enemies.

d. The need to coordinate our efforts with those of other institutions, programmes or individuals.

e. The need to develop and include family preservation mechanisms in our plans and activities.

f. The need to incorporate a comprehensive approach that meets the wide-ranging needs of the victims.

In addition, our own personal care is essential in order to prevent us from becoming emotionally and physically drained. In this respect, let us bear in mind that, should this situation arise, we should ask for help and take steps to overcome such issues. Our children and adolescents cannot wait any longer!
Álvarez – Correa, Miguel y Suárez, Roberto (1998). *Niños y jóvenes de sexo masculino prostituidos. Una visión desde la perspectiva de sus derechos.* Santa Fe de Bogotá: Procuraduría General de la República, Universidad de los Andes, UNICEF.


CHECKLISTS FOR THE SUCCESSFUL INCORPORATION OF THE RIGHTS APPROACH INTO PROGRAMMES PROVIDING CARE FOR CHILD AND ADOLESCENT VICTIMS OF COMMERCIAL SEXUAL EXPLOITATION

General Instructions

These checklists are grouped according to the sources that were used to obtain information. The sources that are taken into account are:

1. The underage person
2. The staff of the institution and those come in contact with underage victims
3. The programme or institution

The methods to obtain information will have to be standardized for each source. This instrument provides the checklist with the items that should be observed.

This instrument is not exclusive nor does it contain numerical value. It is an instrument for monitoring the care programmes and it is hoped that all the elements outlined within will be complied with in their entirety.

Among the recommendations for its use is to take into account the existing documentation within the institution. The manuals, protocols and internal regulations, or lack thereof, are other sources that may be used when monitoring a programme.

It is not recommended that the monitoring be based solely on interviews.

The use of explanatory notes is important when the points on the checklist do not apply to the institution that is being assessed. These exceptions will be used in the absence of a certain population type (for example, the absence of pregnant girls or a group with some form of disability).

It is important to remember that, with regard to the institutions responsible for care and/or guidance in child-related issues, the said explanatory notes are not applicable since all countries have ratified international legislation by which they are committed to ensuring the fulfilment of rights.

Monitoring instrument set up by Laura Porras Alfaro and Beatriz Slooten Navarro, as part of their Final Graduation Paper entitled: “Setting up a Monitoring Instrument for Incorporating the Rights Approach in Care for Underage Victims of Commercial Sexual Exploitation”, for the Bachelor’s Degree in Psychology at the University of Costa Rica, February 2003.
A.

**The following conditions apply to the underage participants in the programme, and their children:**

1. **Health:**

Underage persons who participate in the programme, along with their children, should:

1.1 Have regular medical checkups.

1.2 Know the state of their health.

1.3 Be checked by a doctor to identify diseases.

1.4 Have access to adequate and specific care for their illnesses.

1.5 Receive adequate information for checking their own health (appropriate self-examination and checking for the appearance of or changes in symptoms).

1.6 Have adequate hygiene.

1.7 Receive appropriate dental treatment.

1.8 Feel comfortable about approaching health services.

1.9 Have an adequate diet.

1.10 Have access to and information on methods of contraception.

1.11 Be informed as to whether they suffer from any disease (including HIV and AIDS, STI’s).

1.12 Be informed as to whether they suffer from AIDS or are HIV positive.

1.13 Be informed as to whether they have a Sexually Transmitted Infection.

1.14 Feel supported during the therapeutic process.

1.15 Engage in therapy and/or psychological checkups as regularly as each case demands.

1.16 Receive appropriate gynaecological-obstetrical treatment.

1.17 Receive emotional and/or therapeutic support during maternity.

1.18 Receive prenatal and postnatal care.

1.19 Participate in psychoprophylactic birth courses (Lamaze classes).
1.20 Be given guidance regarding tasks such as breastfeeding, caring for a newborn, etc.
1.21 Have access to milk should they not be able to breastfeed.
1.22 Be provided with paediatric support for their children.
1.23 Begin the process of going from being victims to survivors by coming to terms with their history of abuse and setting short, mid and long-term life goals.
1.24 Receive specialized care regarding problems of addiction, which involves appropriate treatment and management of the issue.

2. *Discrimination:*

2.1 Underage persons with some form of disability feel comfortable when provided with care.
2.2 Underage persons from ethnic minorities feel comfortable when provided with care.
2.3 Underage persons who are immigrants feel comfortable when provided with care.
2.4 Underage persons with some form of disability participate in educational programmes that are specialized to meet their needs.
2.5 Underage persons know that they have the right to report any form of discrimination and are familiar with the mechanisms for doing so.
2.6 There is an authority where children and adolescents can report such violations of their rights internally.
2.7 Regardless of gender, the immigrant population, as well as those from ethnic minorities and those who are pregnant, have the same access to all benefits as do the rest of the population (in accordance with the criteria established in the present instrument).
   2.7.1 healthcare
   2.7.2 protection
   2.7.3 leisure
   2.7.4 forums
   2.7.5 recreation
   2.7.6 education
3. **Education:**

Underage persons:

3.1 Are included in the formal education system.

3.2 Have access to educational material as support for their education.

3.3 Have a place and time in which to do the school assignments and homework.

3.4 Have individual educational support for the process of reintegration into school life.

3.5 Have their family’s participation in the teaching-learning process encouraged.

3.6 Are informed about their rights and the mechanisms by which they are fulfilled.

3.7 Who are teenage mothers are aware of the laws that protect them during maternity (paternity, child support, etc.).

4. **Protection:**

4.1 Receive psychological support during the entire process of reporting and/or prosecution of procurers and/or abusers.

4.2 Are supported in this process by as many family members as possible.

4.3 Are educated and informed as to risk situations and how to legally report them.

4.4 Are aware of and have access to the places where suspicious situations can be reported.

4.5 Are aware of and have access to community networks that promote protection.

5. **Spaces:**

5.1 Express opinions as to what the success criteria for the goals of the institution or programme should be.

5.2 Children and adolescents who are temporarily institutionalized:

5.2.1. Have specific places of study and access to information (computer labs or libraries).

5.2.2. Have designated personal spaces for keeping their personal belongings

5.2.3. Have physical spaces in which they can exercise their right to privacy

5.2.4. Have spaces that promote spiritual growth.

6. **Recreation:**

6.1 Children and adolescents participate in sporting activities.

6.2 Children and adolescents participate in cultural or artistic activities.

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1 Formal education is understood as basic primary education and, following this, secondary education or college. It is differentiated from technical education.
B.

**The persons who work with or have contact with child and adolescent victims of commercial sexual exploitation - this includes the staff of those institutions with which services are coordinated:**

1. **Health:**

   1.1. Provide the children and adolescents in the programme with information and adequate linkages to regular health checks, which include relevant self-examinations and checking for the appearance of or changes in symptoms.

   1.2. Provide adequate treatment that is specific to the health problems of the underage person.

   1.3. Clearly explain to the child or adolescent, using appropriate language, what he or she is suffering from.

   1.4. Be aware of and provide information on birth control.

   1.5. Be trained to detect the child or adolescent’s risk of being exploited.

   1.6. Give priority to the problems that require immediate solutions according to the risk they represent.

   1.7. Give feedback about the programme’s intervention.

   1.8. Recognize the health conditions associated with commercial sexual exploitation as a product of victimization and do not, therefore, blame the underage person.

   1.9. Create intervention registers.

   1.10. Use registers for future interventions.

   1.11. Monitor eating habits, check and follow up on diets.

2. **Discrimination:**

   2.1. All members of staff have been sensitized to providing non-discriminatory care to the immigrant population, persons with disabilities or those from ethnic minorities.

   2.2. Members of staff are familiar with the penalties imposed on those who discriminate.
2.3 Pay attention to how the underage person is regarded, if he or she has been discriminated against or is vulnerable to discrimination.

2.4 Deal specifically with the problems that have been detected in relation to the immigrant population.

2.5 Deal specifically with the problems that have been detected in relation to ethnic minorities.

2.6 Deal specifically with the problems that have been detected in relation to persons with disabilities.

2.7 Health service providers (doctors, psychologists, nurses and any other professional who comes in contact with underage persons) have the training and sensitivity to deal with the problems associated with immigrants or ethnic minorities, taking into account language, customs and other factors.

2.8 All personnel are trained to work with persons with disabilities.

2.9 All personnel are trained in human rights in order to provide care for children and adolescents that is free of discrimination and culturally sensitive.

2.10 All staff respect the religious and cultural beliefs of the child and adolescent.

3. **Education:**

3.1 Participate in meetings and discussions with the teachers of the children and adolescents participating in the programme.

3.2 Teachers are informed of the problems faced by child and adolescent victims of commercial sexual exploitation.

3.3 Underage persons are trained to report any situation that puts them at the risk of re-victimization.

3.4 Teachers recognize the fact that the child or adolescent is a victim.

3.5 Teachers recognize the potential problems at school which are as a result of victimization and do not, therefore, blame the underage person.

3.6 All personnel are trained to provide comprehensive sex education, including aspects of health, prevention, respect, freedom from blame and reproduction.

4. **Protection:**

4.1 Staff does not blame the child or adolescent for their victimization.

4.2 Staff trained to provide psychological support (*2*)

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*2 The staff do not have to be professional psychologists to offer this type of support.*
4.3 Staff display empathy and warmth with the children and adolescents.

4.4 They are familiar with the penalties and crimes related to the problem, and how they are applied.

4.5 They are trained about the problem, and the strategies and mechanisms for protecting children and adolescents.

4.6 They are aware of the obligation to report issues of commercial sexual exploitation to the appropriate legal and administrative authorities.

4.7 They use mechanisms (forms, interviews, etc.) to detect resources either in the child or adolescent’s immediate or extended family.

4.8 They strengthen the family’s resources.

4.9 The staff at the schools and in other programmes are aware of the situation and provide support regarding protection.

4.10 The teachers, doctors and all the staff who deal with children and adolescents are trained to identify the risk factors of commercial sexual exploitation.

4.11 They are familiar with the risk factors and use them for early detection.

4.12 They are aware of the goals of protection that are expected of their work

4.13 They have access to policies, protocols and other instruments related to protection.

5. Spaces:

5.1 Providers listen to and take the child or adolescent’s opinion into account on all matters affecting them.

5.2 They respect the privacy of underage persons.

5.3 They guarantee confidentiality, without putting the child or adolescent at risk.

6. Recreation:

6.1 The staff is trained to use their creativity.

6.2 The staff is trained to promote the creativity of underage persons.

6.3 The staff acknowledges the importance of creativity, recreation and leisure in the child or adolescent’s life and promotes actions and opportunities for these to take place.
C.

The programme or institution:

General Characteristics:

All programmes should have and apply the following characteristics. They are based on the problems most frequently encountered by care programmes.

0. The programme or institution:

0.1 Ensures and monitors the conditions established in the present instrument for underage persons and health providers

0.2 Keeps watch, in particular, over:

0.2.1 The existence of and updating each underage person's file.

0.2.2 The establishment and following up of networking and coordination mechanisms

0.3 Provides and receives feedback, via the established mechanisms regarding the interventions involving underage persons.

0.4 Has a directory of community institutions, programmes and resources.

0.5 Supports and participates in local, national and/or regional efforts in favour of the human rights of underage victims of commercial sexual exploitation.

0.6 Has instituted goals, policies, guidelines, manuals, protocols and instruments.

1. Health:

1.1 Establishes mechanisms for coordinating with hospitals that provide quality service for complicated surgery.

1.2 Ensures access to specialized health services that include the following:

1.2.1 the effects of sexual victimization on the sexual and social development of underage persons;

1.2.2 Provision nutrition directly within the programme, or in conjunction with other institutions or the family.

1.2.3 Deals with eating disorders either directly within the programme, or in conjunction with other institutions.

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3 With access to specialized medical care, surgery and with adequate waiting lists.
1.2.4 Provides general medical care either directly within the programme, or in conjunction with other institutions.

1.2.5 Provides specialized gynaecological-obstetric medical care either directly within the programme, or in conjunction with other institutions.

1.2.6 Provides psychological care and/or emotional support either directly within the programme, or in conjunction with other institutions.

1.2.7 Strengths prevention related to health matters, either directly within the programme, or in conjunction with other institutions.

1.2.8 Offers group sessions as a form of support either directly within the programme, or in conjunction with other institutions.

1.2.9 Offers other health services identified in the population either directly within the programme, or in conjunction with other institutions.

1.3 Provides guidance for an adequate diet, either in the form of provisions or information and benefits (in the case of children and adolescents who are not institutionalized).

1.4 Provides training and has links with the family while they participate in health programmes.

2. **Discrimination:**

2.1 There are institutional policies, procedures and protocols that regulate care for immigrants.

2.2 Promotes and participates in formal institutional networks with embassies, foreign ministries or organizations, in order to locate networks of family support for immigrant victims.

2.3 Promotes and participates in formal institutional networks with embassies, foreign ministries or organizations, in order to locate documents (birth certificates, school or health records and others) belonging to immigrant victims.

2.4 Provides support for the cultural and emotional development of immigrant children and those from ethnic minorities.

2.5 Provides access to doctors specializing in children and adolescents with physical disabilities.

2.6 Establishes mechanisms to coordinate with the education centre dealing with the underage person. This includes the joint coordination of training for service providers.

2.7 There is furniture that is adapted to the needs of children and adolescents with disabilities.
2.8 There are people within the institution or via the networks who deal with the specific needs of the underage persons with specific types of disabilities.

2.9 There are people within the institution or via the networks who deal with the specific needs of ethnic minorities (language, customs and others).

2.10 There are inter-institutional networks that offer programmes dealing with and providing support for persons with disabilities.

2.11 There are procedures that grant the asylum of to underage illegal immigrants.

2.12 Underage persons with disabilities participate in educational programmes that provide specialized care when required.

2.13 The institutional mechanisms for reporting discriminatory situations are efficient and effective.

2.14 There are policies against gender discrimination.

3. **Education:**

3.1 The programme assumes responsibility for including all of children and adolescents participating in the care programme into the formal education system.

3.2 Promotes actions that allow the population’s chronological age and academic grade to be equated.

3.3 The institution makes sure that alternative education programmes (technical, for example) do not substitute formal education.

3.4 The programme promotes academic success through verbal or other forms of recognition.

3.5 It encourages the formation of study groups among the children and adolescents to allow the more advanced students to help those at a lower level.

3.6 It promotes links between schools and colleges in which the children and adolescents in the programme may be reintegrated.

3.7 The programme participates in parents’ meetings and in the schools’ extra-curricular activities to adequately support the children and adolescents in institutions.

3.8 The programme promotes the family’s participation in the schools’ extra-curricular activities and parents’ meetings.

3.9 It promotes feedback mechanisms between teachers and those in charge of the children and adolescents in the programme.

3.10 It promotes the integration and participation of the family in the education process to support the underage person.
4. **Protection:**

4.1 The children and adolescents detected are protected from commercial sexual exploitation and are not re-victimized.

4.2 The activities that the children and adolescents undertake will be rigorously monitored for their protection.

4.3 It promotes community action and strengthens the family to keep watch over and ensure the rights of its children and adolescents.

4.4 It reports illicit situations.

4.5 The programme recognizes which institutions are involved with the population and support the actions to eliminate risk factors.

4.6 There are written reports made by the institutions that work with these children and adolescents.

4.7 The reports are written regularly and are filed as reference material for other cases, decision-making and care policy reforms.

4.8 The institution or programme participates in social and political forums to promote actions that contribute to eliminating and raising awareness about the issue of commercial sexual exploitation.

4.9 The institution or programme has mechanisms (forms, interview guides, etc...) to detect the resources that children and adolescents have, either in their immediate or extended family.

4.10 The institution or programme boosts the protective resources of the children and adolescents by supporting their family and community.

4.11 If the programme includes institutionalization, opportunities and support for living with the family are provided that do not present risk factors for re-victimization underage victims.

4.12 If the child or adolescent is rehabilitated within the family the institution conducts regular visits to monitor the survivor and ensure all his/her rights are fulfilled.

4.13 There is a protocol that stipulates the risk factors of this population.

   4.13.1 according to age and gender.

   4.13.2 according to the area where they live.

   4.13.3 according to the level of risk for re-victimization.

4.14 The programme is aware of the penalties and crimes related to the non-fulfilment of rights.
4.14.1 There is awareness of the imposition of these penalties.

4.14.2 It promotes opportunities for reporting these crimes to the legal authorities as a result of inter-institutional networks.

4.15 The protection measures for underage victims are not exclusive to the programme or institution, but are linked to the reports and/or legal and police protection measures.

4.16 The psychological support provided to the victims offers care through support groups, individual intervention or both.

4.17 The institution or programme provides or facilitates support, advice and follow-up on the victims' legal proceedings through networking.

4.18 It promotes coordination with police and fiscal systems in order to comply with and follow up on protection measures.

4.19 Existence of legal protection measures for victims.

4.20 Monitors the protection’s effectiveness.

5. **Spaces:**

5.1 The opinions of children and adolescents are considered as valid feedback.

5.2 It offers areas to ensure privacy is protected (for keeping personal belongings).

5.3 It offers facilities that promote the sharing and camaraderie of the children and adolescents in the programme.

6. **Recreation:**

6.1 The institution and the staff value the importance of the recreational spaces and opportunities.

6.2 The institution or programme ensures recreation areas are provided.

6.3 The institution or programme offers different options for recreation and creative expression of the children and adolescents.


Claramunt, Cecilia (2001). Algunas consideraciones para la incorporación del enfoque de derechos con perspectiva de género en los programas de atención para mujeres víctimas de violencia. Ponencia presentada en el Taller Regional sobre violencia de género, IPEC Santo Domingo, República Dominicana.


Treguear, Tatiana; Carro, Camen (1997). Niñas y adolescentes prostituidas: Silencio social y violación de derechos. UNICEF; San Jose, Costa Rica.


INTERNATIONAL CONVENTIONS

• Convención de Naciones Unidas sobre los Derechos del Niño.
• Convenio 182 de la OIT sobre las Peores Formas de Trabajo Infantil
• Protocolo Facultativo de la Convención sobre los Derechos del Niño Relativo a la Venta de Niños, la Prostitución infantil y la Utilización de niños en Pornografía.
• Convención Americana sobre Derechos Humanos. Pacto de San José.
This Work Guide constitutes an effort to develop strategies and recommendations to incorporate the rights approach in the care programmes that assist victims of Commercial Sexual Exploitation in order to promote a more effective response, this implies a change in the way care institutions provide services for children and adolescents.

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San Jose Office
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