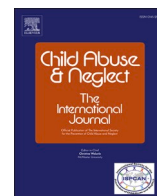




Contents lists available at ScienceDirect

Child Abuse & Neglect

journal homepage: www.elsevier.com/locate/chiabuneg

Research article

“She was willing to send me there”: Intrafamilial child sexual abuse, exploitation and trafficking of boys

Ena Lucia Mariaca Pacheco^{a,e,*}, Andrés Eduardo Buenaventura^{b,e},
Glenn Michael Miles^{c,d,e}

^a Royal Roads University, School of Humanitarian Studies, 2005 Sooke Road, Victoria, British Columbia V9B 5Y2, Canada

^b Your ECHO non-profit organization, Sana'a, Yemen

^c up! International, c/o sieber&partners, Schwanengasse 1, 3011 Bern, Switzerland

^d Institute of Anti-Trafficking Innovation, c/o Millennium Relief and Development Services, 5233, Bellaire Blvd STE B-358, Bellaire, TX 77401, United States

^e The Global Association of Human Trafficking Scholars, 2801 W. Bancroft Street, Toledo, OH 43606, United States

ARTICLE INFO

Keywords:

Intrafamilial child sexual exploitation and abuse (CSEA)

Familial trafficking

Female perpetrators

Trauma-informed practices

Adverse childhood experiences (ACEs)

Barriers to disclosure

ABSTRACT

Background: Boys subject to intrafamilial child sexual exploitation and abuse (CSEA) - in particular, cases which begin as incest and later evolve into child trafficking for sexual exploitation - face many barriers in disclosing their exploitation, often leaving victims and survivors feeling isolated from society and dismissed or mishandled by service providers such as law enforcement officers, child protection specialists, medical staff and mental health professionals.

Objective: This study explores the unique characteristics of intrafamilial CSEA through the sex trafficking of boys, and the barriers to disclosure and recovery experienced by male victims and survivors.

Participants and setting: Ten adult male survivors of intrafamilial child trafficking for sexual exploitation were interviewed multiple times to gain a deeper understanding of intrafamilial CSEA and how it compares and contrasts with non-familial CSEA. Participants in this study primarily came from North America.

Methodology: Multiple semi-structured online interviews were conducted with these 10 adult male survivors because they experienced 1) intrafamilial CSEA and 2) being trafficked by their families to be sexually exploited by non-familial perpetrators. The participants were then asked to compare and contrast intrafamilial and non-familial CSEA. The research team employed a descriptive phenomenological approach and interview transcripts were coded, analyzed, and compared to identify patterns of non-verbal CSEA indicators and thematic narratives. The study also explored the internal and external barriers to disclosure reported by participants. Trauma-informed, person-centered practices were used throughout the entirety of the study to minimize harm to participants. The research team employed a co-productive approach using participants' initial interviews and feedback to formulate new questions for later rounds of interviews and by having the participants confirm the accuracy of their respective quotes and case summaries.

Results and discussion: This study highlights several CSEA modalities, such as “boy-swap” events and local/national/transnational trafficking rings engaged in CSEA of boys. It also discusses how

* Corresponding author at: Lyon, France.

E-mail addresses: enaluciamariaca@protonmail.com (E.L. Mariaca Pacheco), andres@buenaventura.dev (A.E. Buenaventura), drglennmiles@gmail.com (G.M. Miles).

URL: <https://linktr.ee/enaluciamariaca> (E.L. Mariaca Pacheco).

<https://doi.org/10.1016/j.chiabu.2022.105849>

Received 1 February 2022; Received in revised form 8 August 2022; Accepted 14 August 2022

Available online 8 November 2022

0145-2134/© 2022 Published by Elsevier Ltd.

survivors' experiences differed between intrafamilial and non-familial CSEA and trafficking, and how familial settings may facilitate concealment of CSEA. Participants described various modus operandi used by abusers, traffickers, and buyers of all genders. While all 10 intrafamilial CSEA cases included male perpetrators, female perpetrators were also present in nine of them. In addition, participants identified various psychological and physiological CSEA and trafficking indicators that evidenced their victimization during their childhood years. All 10 survivors reported long-term health consequences into adulthood and scored highly on Adverse Childhood Experiences (ACEs) questionnaires.

Recommendations and conclusion: Findings underscore the importance of trauma-informed practices for identifying, liberating, and rehabilitating victims and survivors. Participants reported receiving more effective assistance from service providers that exhibited trauma-informed practices. Traditional gender stereotypes may hinder the ability of service providers to recognize and provide support to boys victimized and trafficked by their families for CSEA. Consequently, service providers may stand to benefit from training on 1) trauma-informed, person-centered practices and 2) conscious and unconscious biases, particularly those related to gender. Survivors in recovery require expanded support services, such as the provision of safe housing, online/in-person support communities, and professional/life skill training. Co-productive research methods that integrate the views and experiences of CSEA and trafficking survivors are also recommended.

1. Introduction

I realized that I was denying how much I knew - even as a kid - of my mom's involvement with the trafficking. But what I do know is that she was willing to send me there, knowing that I would be hurt. And that was the worst part of my entire abuse experience (Joe).*

* All 10 survivors' names cited in this article are pseudonyms chosen by them

People generally expect organized criminal groups to sexually exploit and traffic children, but they might not foresee the involvement of the children's own families as exploiters (Todres, 2015; Turton, 2010, p. 238; U.S. Department of State, 2021). Yet familial perpetrators may capitalize on this bias by pre-emptively formulating untrue, yet plausible explanations and excuses for a minor's visible child sexual exploitation and abuse (CSEA) indicators to minimize suspicion and discourage interventions by teachers, doctors, and law enforcement (Bunting, 2007; Deliver Fund, 2021; Royal Canadian Mounted Police Government of Canada (RCMP), 2021). Several interrelated biases appear to compound this problem for boys in particular. Multiple studies (Hamilton, 2021; Mitchell et al., 2017; Procopio, 2018; Zack, Lang, & Dirks, 2018) suggest that societal assumptions about boys' behavior, vulnerability, resilience, and sexuality – which are driven by gender stereotypes – can inhibit a person's ability to recognize indicators of a boy's potential victimization (Hill & Diaz, 2021; McNaughton Nicholls, Cockbain, Brayley, Harvey, & Fox, 2014; McNaughton Nicholls, Harvey, & Paskell, 2014). Such biases may cause classic CSEA indicators (such as social isolation, running away and combative behavior) to be overlooked in boys (Deliver Fund, 2021; NCMEC, 2021a; Palfy, 2016; Procopio, 2018; Royal Canadian Mounted Police Government of Canada (RCMP), 2021; Smiragina-Ingelstrom, 2020; Zack et al., 2018). Furthermore, when boys disclose CSEA they are less likely than girls to receive counseling or treatment from frontline professionals and service providers (Cashmore & Shackel, 2014), as girls are considered more likely to be trafficking and CSEA victims (Hill & Diaz, 2021; McNaughton Nicholls, Harvey, & Paskell, 2014) even if a boy is showing indicators of the most severe forms of CSEA (Procopio, 2018).

Identifying any victim of CSEA for trafficking purposes requires medical professionals, law enforcement officers, social workers, child protection specialists and other service providers to possess an elevated degree of trauma-informed training in order for them to consistently recognize the various physical, behavioral, emotional, and psychological indicators associated with sexually exploited children (Centers for Disease Control and Prevention (CDC), 2020; Greenbaum, 2018; SOAR, 2021). However, these factors are particularly challenging when the trafficker or abuser is a parent or familial perpetrator because the notion of a family member being an abuser, exploiter or facilitator of trafficking may present unique challenges and be unexpected for frontline professionals and service providers (Deliver Fund, 2021; Royal Canadian Mounted Police Government of Canada (RCMP), 2021, Turton, 2010, p. 238).

Consequently, this study aims to provide additional understanding of familial CSEA and modus operandi for the sex trafficking of boys, explore the indicators of familial CSEA exhibited by boys, and highlight the importance of implementing trauma-informed, person-centered practices for earlier identification, support, and healing of male CSEA victims and survivors. It uses "familial CSEA" as an umbrella term that encompasses child sexual abuse (CSA) (sexual activities committed by an adult perpetrator onto a child), incest (CSA committed by a close family member) and child sexual exploitation (the exchange of any form of compensation - money, drugs, business opportunities, or social status - in return for the opportunity to sexually exploit a child, which is also referred to in this study as "trafficking") as these are all distinct, yet closely related phenomena (Inter-agency Working Group on Sexual Exploitation of Children, 2016, p. 18, 20, 29; INTERPOL, 2020, pp. 4–5).

2. Background

For more than 100 years, the sexual abuse of underage boys by adults has been a phenomenon described by scholarly inquiries into pathological human sexual behavior (Krafft-Ebing, 1894). However, recent studies suggest that boy victims of CSEA have been met with inadequate recognition and responsiveness from those in a position to detect their exploitation and provide assistance due to

numerous limiting factors. For example, traditional gender stereotypes appear to inhibit service providers' ability to recognize the potential victimization of boys as compared to girls (Beech et al., 2018; Berelowitz, Clifton, Firimin, Gulyurtlu, & Edwards, 2013; Cockbain, Ashby, & Brayley, 2017; Hill & Diaz, 2021; Josenhans, Kavenagh, Smith, & Wekerle, 2020; McNaughton Nicholls, Harvey, & Paskell, 2014). Boys may also hesitate to disclose their exploitation due to their internalized gender perceptions whereby concepts such as victimhood, fear, trauma and vulnerability are incompatible with societally dominant narratives on heteronormative masculinity to which boys are often exposed. This ultimately constructs a significant barrier to disclosure for male CSEA victims (Hill & Diaz, 2021; Hlavka, 2017; Josenhans et al., 2020; Mayer, 1992; Palfy, 2016; Price-Robertson, 2012; Van der Kolk, McFarlane, & Weisæth, 2007).

These limiting factors persist today despite the findings from earlier CSEA studies in the 1980s and 1990s which indicated from the outset that a significant number of victims were boys (Baker & Duncan, 1985; Finkelhor, 1994) and that organized groups of perpetrators had been victimizing boys and girls alike (Lanning & Burgess, 1984; Burgess, Hartman, McCausland, & Powers, 1984; Creighton, 1993; Wild & Wynne, 1986). Lower societal awareness and recognition of boys' victimhood results in them having inadequate access to justice, legal services, law enforcement protection, safe home accommodations, and mental health assistance (McNaughton Nicholls, Harvey, & Paskell, 2014; Smiragina-Ingelstrom, 2020). As a result, CSEA incidents against boys are likely to be common, yet disbelieved, underreported, underdetected and undertreated (Josenhans et al., 2020; Moynihan et al., 2018; Palfy, 2016; Salter, 2017a,b).

Several recent CSEA studies indicate that the victimization of boys by their families is a complex societal issue requiring deeper understanding and holistic public policy responses. A 2018 study of information recorded for than 1 million online-facilitated child sexual abuse materials (CSAM) conducted by INTERPOL and ECPAT suggested that boys of all ages, prepubescent (56.2 %), pubescent (25.4 %) and infants/toddlers (4.3 %) were at the greatest risk of severe online CSA, live-streamed assault and torture associated with levels 6–10 (corresponding to 6 – explicit erotic posing, 7 – explicit sexual activity, 8 – assault, 9 – gross assault, and 10 – sadism/bestiality) of the Combating Pedophile Information Networks in Europe (COPINE) scale (ECPAT & INTERPOL, 2018). In a second 2018 study analyzing two datasets containing 4049 cases of CSAM distributed online (Seto, Buckman, Dwyer, & Quayle, 2018), findings suggested that the most widely distributed CSAM images were those depicting the most extreme forms of CSA of infants and toddlers (boys and girls); these cases were also most likely to involve familial offenders. The study also indicated that the severity of CSA depicted in CSAM traded online appears to be increasing over time. According to a 2017 study of adverse childhood experiences (ACEs) reported by 913 children in a U.S. state juvenile justice system, CSA was the strongest risk factor for trafficking (Reid, Baglivio, Piquero, Greenwald, & Epps, 2017). Among boys, emotional abuse and sexual abuse were significantly correlated with trafficking. *“The odds of exploitation in human trafficking were 2.55 times greater risk for boys who had experienced emotional abuse, and 8.21 times greater for boys who reported histories of sexual abuse”* (Reid et al., 2017, p. 309).

These recent studies also demonstrate that victimhood in CSEA is prevalent for boys as well as girls, however their findings contrast with socially constructed generalizations about criminal offenders and victims, where males as seen as the former and females the latter (Beech et al., p. 6; Franchino-Olsen, 2021, p. 101; Josenhans et al., 2020, p. 6; Long, 2021, p. 349–350, 353; Mitchell et al., 2017, p. 147). Hamilton, in contrast, challenges these assumptions and suggests that trafficking perpetrators can also be women, and victims can also be boys (Hamilton, 2021, p. 88). In Sprang & Cole's, 2018 study of 31 survivors (58 % female, 42 % male) of familial CSEA and trafficking, 64.5 % of the survivors reported that their mothers had trafficked them (Sprang & Cole, 2018). Case data from the Counter-Trafficking Data Collaborative (CTDC) – a centralized database of more than 156,330 human trafficking cases for labor and sexual exploitation from 189 countries and territories – indicates that more than a quarter (25.29 %, or approximately 39,530 cases on all forms of trafficking) included male victims. Among the 39,530 cases featuring male victims, 52.95 % (20,931) included underage male victims of sexual exploitation (Counter-Trafficking Data Collaborative (CTDC), 2021). Within this final set of CSEA cases, the traffickers were reported to be family members of the boys in nearly half of them (8929, or 42.66 %) (Counter-Trafficking Data Collaborative (CTDC), 2021). As CSEA and trafficking of boys may still be misunderstood by society (McNaughton Nicholls, Harvey, & Paskell, 2014, pp. 32–33) and underreported (Cockbain et al., 2017, p. 661; Hill & Diaz, 2021, p. 644; Hlavka, 2017, p. 486), and as population surveys of the number of males who have experienced CSEA exhibit methodological problems (Mitchell et al., 2017, pp. 147–148) and are few in number (Franchino-Olsen, 2021, p. 101), these figures do not represent the actual incidence rate of CSEA endured by boys. They do, however, underscore the need to advance our understanding of CSEA and how service providers may better identify, understand and support male victims, particularly those victimized by their families.

3. Methodology

This study utilized a holistic, victim-centered and trauma-informed approach to guide the exploratory, qualitative research methodology (Creswell & Creswell, 2018). Partnerships with male survivor-focused NGOs (MaleSurvivor, MatrixMen, and the Hard Places Community) were established before and during the study through various forms of online outreach. In particular, MaleSurvivor – which has more than 15,000 members globally – reviewed the research proposal, ethics documentation, questionnaires, and selection criteria before helping to source interviewees by issuing a “call for participants” on their website.

3.1. Sampling

The study used the criterion and intensity purposeful sampling method to select participants that met the predetermined criteria (Palinkas et al., 2015; Patton, 2015). Each participant had to be 1) a biological male at birth who experienced 2) intrafamilial CSEA as a boy and 3) the progression of intrafamilial CSEA into child trafficking for sexual exploitation by non-familial perpetrators. Snowball sampling (Creswell & Creswell, 2018) was also employed by the research team, as participants chosen for the sample posted on NGO

partners' online forums and encouraged other men with similar stories to be interviewed. The intensity sampling with a smaller number of participants provided a rich and in-depth look specifically into intrafamilial CSEA and trafficking of boys, as every participant's primary abuser and trafficker was a family member (either immediate or extended family).

3.2. Data collection

Primary data was collected through six rounds of online, semi-structured email and video interviews with closed- and open-ended questions. The methodology was designed to limit the re-traumatization and triggering of the survivors undergoing the research process (Centers for Disease Control and Prevention (CDC), 2020; SOAR, 2021; Surtees & Brunovskis, 2015; United Nations Inter-Agency Project on Human Trafficking (UNIAP), 2008). The primary researcher spent several months building rapport with the participants, allowing them to open up and discuss their experiences at their own pace. Discussions with each participant lasted between 10 and 15 hours in duration over several sessions (six sessions per interviewee), and all interviews were transcribed and conducted using video conferencing software or email. Data collection formats were diverse and included interviews, long-answer questionnaires, and a survey with multiple-choice questions. By providing both written and verbal collection methods to the participants, three survivors with disabilities could more easily participate, either dictating their answers vocally or writing them out if they no longer had the physical capability to speak. The data collection and analysis processes were concurrent, as early findings influenced the following rounds of interview questions.

The research team also conducted a literature review including peer-reviewed academic publications as well as gray literature, such as law enforcement reports, international trafficking databases and NGO research on the trafficking of boys.

3.3. Co-production

The research team recognized that the survivors are lived-experts of their own experiences. Articles 12 and 13 of the UN Convention on the Rights of the Child establish the principle known as a child's right *"to be heard in any judicial and administrative proceedings affecting the child..."* and that *"the child shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds..."* (Office of the United Nations High Commissioner for Human Rights (OHCHR), 1989). The co-productive approach used in this study aimed to minimize survivors' re-traumatization and adhere to Articles 12 and 13, as adults who were abused as children may also benefit from exercising their basic right to be heard. The research team aimed to transform research into practice (Amann & Sleight, 2021, p. 715) by including survivors' voices in the study methodology and incorporating insights derived from male survivors' experiences of intrafamilial CSEA and trafficking when proposing recommendations for frontline professionals and service providers. See Table 1 for an overview of all 10 survivors' narratives.

The research team implemented a co-productive approach by conducting six rounds of interviews with the participants whereby each subsequent round of questioning incorporated the survivors' answers and feedback from the previous round. In total, this was a seven-step process:

1. Participants first described their personal experiences of incest, CSA and CSEA to the primary researcher.
2. They were then asked 10–20 follow-up questions to further understand perpetrators' modus operandi.
3. The participants then completed a questionnaire which focused on details related to the familial CSA and CSEA.
4. Another round of follow-up questions was conducted to further understand each case of familial CSEA and how it compared with non-familial CSEA.
5. The participants then completed the 10-question ACEs questionnaires.
6. Repeated non-verbal CSEA indicators and long-term health effects were identified from the survivors' written and oral accounts. Each survivor was then asked in a multiple-choice survey whether they had also experienced the CSEA-related indicators and health issues reported by the others. The team's findings are fully summarized in Table 3 and Table 4.
7. Finally, survivors were given the opportunity to review their direct quotes and their personal narrative charts prior to final submission and publication to ensure the accuracy of the content.

3.4. Data analysis

A descriptive phenomenological approach (Giorgi, 1997; Matua & Van Der Wal, 2015) including narrative inquiry (Clandinin & Connelly, 2000) was used to record and understand the experiences of the 10 survivors in order to reveal in-depth details of their recollections and perspectives on CSA/CSEA through interviews, surveys and questionnaires. Narrative inquiry helped dictate interactions with participants and was used to *"collaborate between the researcher and the participants over time"* (Clandinin & Connelly, 2000, p. 20) in order to *"ethically move-slow in relationship and co-create a research space"* (Lessard & Schaefer, 2016, p. 6), and was guided by relational ethics (Caine, Estefan, & Clandinin, 2020, p. 6; Clandinin & Connelly, 1988; Clandinin & Connelly, 2000). Data provided by the survivors revealed a progression from CSA/incest committed by the family which later led to the trafficking of the male child by his familial exploiters to non-familial abusers for CSEA. The survivors' transcripts were firstly coded by hand and then by Nvivo qualitative data analysis computer software in order to reveal additional patterns and themes. The analysis of the interview transcripts applied narrative inquiry to identify commonalities and differences.

Additionally, some external verification from seven of the survivors' accounts was provided through police reports, FBI case reports, medical reports, and media stories of their abuse. When possible, the research team triangulated data from in-depth individual

interviews with information from other sources in order to test data validity through the convergence of various data sources (Carter, Bryant-Lukosius, DiCenso, Blythe, & Neville, 2014; Denzin, 1978; Denzin, 2012; Patton, 2002).

3.5. Ethics

The study methodology underwent an ethical review by a research ethics board. The UNIAP Guiding Principles on Ethics and Human Rights in Counter-Trafficking were used as a reference with the “do no harm” principle, in addition to relational ethics (Caine et al., 2020, p. 6; Clandinin & Connelly, 1988; Clandinin & Connelly, 2000; Surtees & Brunovskis, 2015; United Nations Inter-Agency Project on Human Trafficking (UNIAP), 2008). The personal safety of each participant was prioritized in order to minimize re-traumatization. Written informed consent without coercion was obtained from all the participants following a thorough explanation of the research. Trauma-informed approaches and survivor-centric practices were used throughout the study to provide a safe space for the survivors to disclose. In addition to the selection criteria, participants had a support system in place and received ongoing mental health support throughout the research process. This was done to limit the effects of re-traumatization and psychological triggers from the research interview questions. For example, questioning would cease if a participant said, “I can’t go beyond this point,” or continue if they said “please feel free to ask more questions about this” even if it was uncomfortable for them. Participants were repeatedly given the opportunity to take breaks, seek counseling, or schedule follow-up interviews to talk over new memories unlocked by the research questions. For every interaction the participants had the opportunity to not disclose and explanations from the primary researcher as to how the data would be used while ensuring confidentiality and anonymity. Additionally, the research team had supervision from a senior researcher specialized in male survivors of CSEA and trafficking. This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

3.6. Limitations

The study’s limitations begin with survivor bias, meaning we can only learn from the experiences of those who survived being trafficked. While a small sample size of 10 individuals is not enough to be representative, in-depth interviews provide deeper knowledge into why and how intrafamilial CSEA and trafficking occur. In addition, survivors’ accounts were limited by how comfortable and ready each survivor was to disclose certain aspects of their CSEA and trafficking experiences. Some experiences were not included in the study if survivors disclosed them to the primary researcher but were not ready to share them more broadly.

3.7. Participant characteristics

Figure 1a below provides a brief overview of the 10 participants’ ethnicities, sexual orientation, gender identities as well as the location where their CSEA occurred.

Figure 1b below specifies the current age ranges of the 10 participants as well as the amount of time which has elapsed since their last CSEA incident.

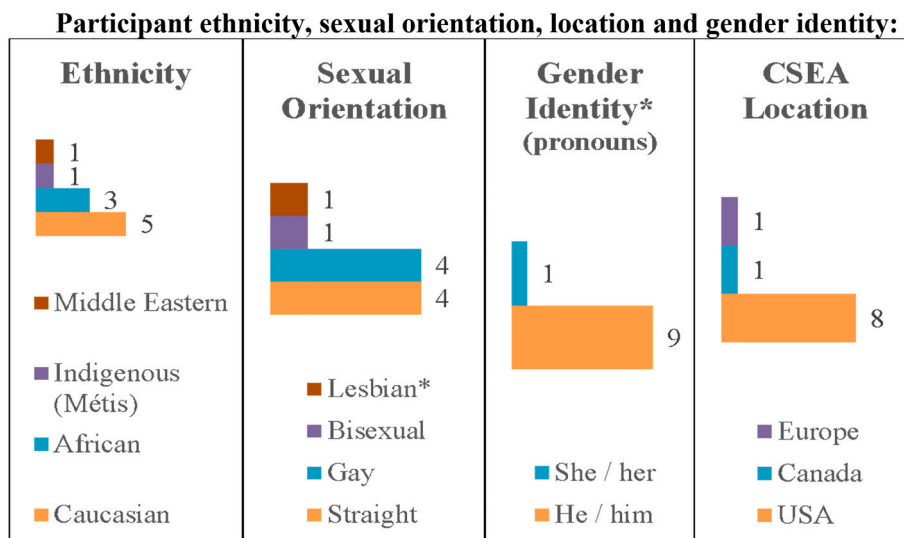


Fig. 1a. Participant ethnicity, sexual orientation, location and gender identity:

*All 10 participants were born as biological males, one of them now identifies as female/non-conforming.

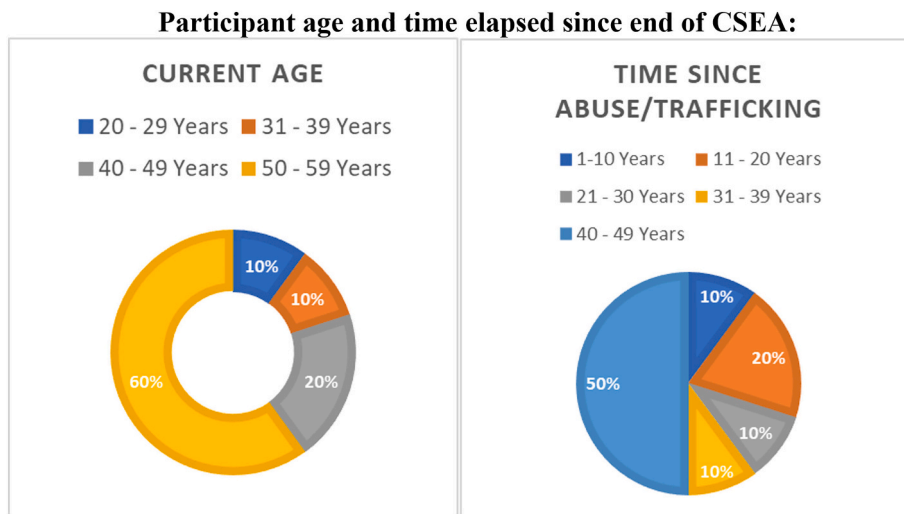


Fig. 1b. Participant age and time elapsed since end of CSEA.

4. Narrative findings

Familial trafficking for CSEA is “not bound by ethnicity, social class, or demographics, and often begins when the child is at a young age through forms of abuse” (U.S. Department of State, 2021). Within familial CSEA trafficking cases, there are “typically generational patterns...of polyvictimization and oppression” (U.S. Department of State, 2021). The use of grooming tactics by familial perpetrators may commence during a child’s early development stage (Salter, 2012a, pp. 128–130), prior to cognitive development and verbal communication (U.S. Department of State, 2021). Parents involved in familial CSEA and trafficking exploit the parent-child relationship, as abuser parents may operationalize their positions of trust and authority in the raising and caring for their children (Bunting, 2007, p. 264; Salter, 2012a, pp. 35–36; Shengold, 1979, p. 539) to coerce, manipulate and create a fear-induced trauma bond with their child. As a child relies on their family for their basic needs, complying with their familial abusers and traffickers can be forced upon them more easily (U.S. Department of State, 2021; Shengold, 1979).

My mother died of complications at birth, and my dad never let me forget that I “murdered” my mom. That was instrumental in the grooming process, thinking I had killed my mom. I felt guilt and shame, and that I had to make up for it. The first time my dad raped me at age 6, he said “you deserve this pain; you murdered someone.” It wasn’t hard to believe it, [as] it was my dad telling me this (Kabili).

When the primary abuser and trafficker of a boy is a family member, the child can perform their regular daily behaviors, and events which may be perceived as “routine family activities” by bystanders can actually serve as vectors and pretexts for trafficking (for example: camping, road trips and family holidays). For the boy, the transition from being sexually abused by family to being trafficked to non-familial abusers can be rapid, as victims may have already been groomed to see themselves as sexual objects, and they may already perceive sexual acts as a way through which they can support their families or receive positive emotional reinforcement (Cole, Sprang, Lee, & Cohen, 2016). Whereas refusals by a boy to comply with their familial abusers may result in the use of shaming and manipulation through emotional and psychological abuse to assert control over the victim, a well-known tactic employed by traffickers in general (Greenbaum, 2018, p. 58).

I felt that I could not go through it anymore; I told Mom that I was not going. She pressed me to put my coat on and get into the awaiting car – I refused. She finally asked why. I told her that he had touched me inappropriately. I thought something was going to happen and this nightmare would end. But she slapped me across the face and said, “It isn’t nice to make up lies about people. He is a professional and very prominent. He is helping you ... and the family. You have to do your part. If anything happened, it must have been your fault” (Lucas).

4.1. The Transition from Familial CSA (Incest) into CSEA (Trafficking)

The findings from the survivor interviews consistently identified several factors in the process through which familial incest transitioned into trafficking (Itzin, 1997, p. 102): 1) the sexual gratification of their familial abusers, 2) the realization by familial perpetrators that they could benefit financially (or receive in-kind benefits) by exchanging/selling boys with external perpetrators, 3) the exchanging of trafficked child victims as tradable commodities, and 4) the creation of CSAM for exchange with other abusers.

4.1.1. Sexual gratification

All 10 interview participants suggested that their first familial abusers commenced the incest and sexual abuse in order to gratify their “taboo” sexual desires and fantasies. Findings suggested that after this first step, familial abusers may escalate the CSA by introducing the boy victim to other sexually abusive family members, then to abusers who are close family friends, and finally to CSEA

Table 1

CSEA narratives as reported by the 10 study participants.

Summary	Age	Perpetrators
<p>1. Wayson experienced incest by his stepfather and mother. The incest/CSA continued with aunts, uncles, cousins and grandparents. After hearing concern about Wayson's safety from his friend's parents, Wayson's parents gave him to his neighbors – an elderly couple – who sexually abused and trafficked him. Wayson was tortured, caged, drugged, and trafficked in exchange for the elderly couple's grandchild. The grandchild had previously been kidnapped and–trafficked for CSEA “boy for a boy” swaps, and Wayson was given to the traffickers in exchange for the return of the neighbors' grandchild. Child sexual abuse and exploitation materials (CSAM) were created, distributed and exchanged by Wayson's aunt and uncle (local dentists) and their dental assistant. Wayson's family received money and drugs by trafficking him. His mother continued the sexual abuse (incest/CSA) after the trafficking had ended. Wayson's CSEA and trafficking ended when he went to college and separated himself from his family.</p>	<p>Abuse: 3–6 years Trafficking: 7–17 years 2nd Abuse: 17–18 years</p>	<p>Abusers (initial): Mother, stepfather, aunt, uncle, cousins, grandparents Facilitators into trafficking: Mother, stepfather, elderly neighbors Abusers (buyers): family friends, school principal, neighbors, dentists, strangers Gender of perpetrators: Male & female Typology: Community pedophile ring and child sex trafficking and exploitation within Canadian province</p>
<p>2. Nick endured incest by his father as a child. Abuse progressed to trafficking for sexual exploitation (CSEA) at “boy swap” events, organized by a national CSEA ring. A few dozen boys were trafficked at these events, drugged, sedated and raped. CSAM was created and distributed and exchanged at events. At age 8, Nick's father left and his mother remarried and moved to another town, ending his CSEA and trafficking. Nick was then sexually assaulted by a clergy member in a religious institution as an adult.</p>	<p>Abuse: 7 months – 5 years Trafficking: 5–8 years Sexual assault: 20 years</p>	<p>Abuser (initial): Father Facilitator into trafficking: Father Abusers (buyers): Strangers at boy swap events Gender of perpetrators: Male Typology: Boy swap events for CSEA and trafficking of male children in the United States Adulthood abuser: Clergy member</p>
<p>3. Lucas experienced incest by his father. During athletics training season – as a teenager – the team's lawyer began grooming the mother to allow for Lucas to be trafficked. CSEA was committed by his coach, sports medicine team, and team lawyers. Lucas was also trafficked for CSEA by “elite abusers (buyers)” associated with national/international athletics competitions. In exchange for Lucas's trafficking, his family earned money, received paid medical procedures for a family member as in-kind compensation, expensive gifts, and increased their social status. CSAM was created, distributed and exchanged by elite abusers. Lucas's CSEA and trafficking ended when he went to college away from his family. In adulthood, Lucas experienced numerous instances of sexual assault throughout his acting career.</p>	<p>Abuse: 3–18 years Trafficking: 15–18 years Sexual Assaults: 19–32 years</p>	<p>Abuser (initial): Father, mother Facilitators into trafficking: Mother, team lawyer, coach, sports medicine team Abusers (buyers): Members of elite, secret men's social club (six-figure income required for membership nomination) Gender of perpetrators: Male & female Typology: “Elite” trafficking ring on national and international level Adulthood abusers: Casting directors, managers, and producers.</p>
<p>4. Fernando experienced incest by his father. CSA progressed into “family sharing” events where families would exchange children for CSEA. CSEA progressed to non-familial trafficking where events created by a national youth organization would be used as a pretext for the CSEA. In these “boy exchanges,” numerous boys were gathered at a national youth organization's campground where they were sedated and sexually abused. CSAM was created, distributed and exchanged by the fathers. At the age of 16, Fernando's trafficking ended as he was considered “too old” for his father's “buyers” (abusers). Fernando was then sexually assaulted numerous times by his doctor as an adult.</p>	<p>Abuse: 6–12 years Trafficking: 8–15 years Sexual assault: 19–22 years</p>	<p>Abuser (initial): Father, mother Facilitator into trafficking: Father, other fathers that were a part of a national youth organization using “boy exchanges” Abusers (trafficking): Other families in the community, strangers, fathers at national youth organized events – “boy exchanges” Gender of perpetrators: Male & female Typology: Community pedophile ring, “boy exchange” events for CSEA and trafficking of boys through a national youth organization and its state/municipal-level affiliates Adulthood abuser: Family doctor</p>
<p>5. Daphenne experienced violent incest and torture by her* father and was later sexually abused by other family members. She was then trafficked by her parents and brother for CSEA and forced to wear makeup and girls' clothing for abusers from the age of 3. Daphenne was tortured, drugged, and beaten repeatedly. CSAM was created, distributed and exchanged by her father and older brother. Daphenne was given to non-familial traffickers who continued her trafficking from age 10–19. From age 10–19, she was specifically trafficked to female sex offenders. Daphenne was able to exit trafficking after completing her high school degree in the years that followed, and later joined the military.</p>	<p>Abuse: 2–13 years Trafficking: 3–19 years</p>	<p>Abusers (initial): Father, mother, older brother, male cousin, female cousin, aunt Facilitator into trafficking: Parents and older brother, then non-familial traffickers Abusers (buyers): Strangers, police officer, high school teacher, national youth organization leader, neighbors in community and neighboring communities. Abusers in other states. Gender of Perpetrators: Male & female Typology: Community pedophile ring, trafficking and CSEA at the state and national level</p>

* Born male, but now identifies as female / non-conforming.

(continued on next page)

Table 1 (continued)

Summary	Age	Perpetrators
<p>6. Darren experienced incest by his grandfather, who produced online live-streamed CSEA to create, collect and distribute CSAM. Darren was later sold by his grandfather into trafficking for CSEA. He was transported by freight truck, alongside other kidnapped children, to CSEA “brothels” across Europe. He was forced to dance and wear dresses for abusers (buyers) and was tortured and caged. He escaped captivity but was soon found by his traffickers and beaten severely afterward. Law enforcement officials found Darren in a coma with major disabilities due to the physical trauma caused by the beating. Online (live-streamed) and physical CSAM was created, distributed and exchanged by his grandfather and the traffickers.</p>	<p>Abuse: 2–9 years Trafficking: 9–17 years</p>	<p>Abusers (initial): Grandfather Facilitator into trafficking: Grandfather and his friends Abusers (buyers): Strangers Gender of Perpetrators: Male & female Typology: International pedophile ring and CSEA/trafficking at the international level</p>
<p>7. Joe experienced incest by his mother and grandfather. This progressed into the creation of CSAM. He was then trafficked within the neighborhood. Joe’s family benefited financially and received drugs as compensation for Joe’s trafficking. His family created, distributed and exchanged digital and physical CSAM. The CSEA and trafficking stopped when his mother was admitted to a psychiatric hospital for an extended period of time. Later, in high school, Joe was groomed and sexually assaulted numerous times by his high school teacher once he turned 18, which continued for six months.</p>	<p>Abuse: 3–7 years Trafficking: 5–12 years Sexual assault: 18 years</p>	<p>Abusers (initial): Grandfather and mother Facilitator into trafficking: Mother Abusers (buyers): Community neighbors and strangers Gender of Perpetrators: Male & female Typology: Community pedophile ring and child sex trafficking and exploitation at the state level. Adulthood abuser: Male high school teacher</p>
<p>8. Colin was targeted by a man who would become his stepfather, and who proceeded to abuse him sexually (CSA) and groomed his mother to allow the CSEA. The stepfather was part of a nationwide pedophile network trafficking boys for CSEA. Colin was later trafficked by the “boy lovers’ network.” Colin was forced to wear makeup, wigs, and costumes for abusers’ (buyers’) fantasies. Colin was tortured, caged, drugged, and physically harmed until finally attempting suicide. He regained consciousness in a hospital, where someone (unknown) had brought him. A nurse advocated for Colin and helped him escape from trafficking. CSAM was created, distributed and exchanged by his exploiters. From the age of 12 onwards, Colin was in sexually exploitative “relationships” with multiple older women.</p>	<p>Abuse: 2–3 years Trafficking: 3–12 years Exploitation: 12–25 years</p>	<p>Abusers (initial): Stepfather Facilitator into trafficking: Stepfather Abusers (buyers): Elite/white-collar child sex offenders including judges, politicians, lawyers, doctors and accountants, blue-collar abusers Gender of Perpetrators: Male & female Typology: Trafficking ring on the national and international level, including “elite” white collar abusers</p>
<p>9. Kabili experienced incest by his father. He was later trafficked for CSEA by his father, who received financial benefits and drugs. Kabili was then sold by his father into trafficking for CSEA committed by non-familial women and men. CSAM was created, distributed, and exchanged by his father. Kabili’s CSEA and trafficking ended when his father went to prison for a drug-related crime, and he went to live with his aunt until age 18. In adulthood, Kabili was homeless and went into “survival” sex trafficking for basic needs.</p>	<p>Abuse: 6–14 years Trafficking: 6–15 years “Survival” Trafficking: 23–24 years</p>	<p>Abusers (initial): Father Facilitator into trafficking: Father Abusers (buyers): Father’s friends, and strangers, a police officer. Gender of Perpetrators: Male & female Typology: Community pedophile ring and CSEA and trafficking on a state level.</p>
<p>10. William experienced incest by his father and mother. He was then trafficked for CSEA within “ritual” events (Creighton, 1993; Salter, 2012a,b). Rituals included: a cult-like atmosphere and practices, costumes worn by perpetrators and theatrical scenery/stage settings. Violence, sadism, masochism, and instances of murder occurred during rituals. William was tortured, caged, and violently sexually abused numerous times. CSAM was created, distributed and exchanged by his father and the other cult members.</p>	<p>Abuse: 2 years – no data* Trafficking: 5 years – no data* *Dissociation; no memories past age 6.</p>	<p>Abusers (initial): Father, mother Facilitator into trafficking: Father Buyers: Male and female participants in rituals Gender of Perpetrators: Male & female Typology: “Ritual trafficking” and CSEA on the state level.</p>

trafficking rings for reasons other than their personal sexual gratification (such as drugs or other forms of compensation).

4.1.2. Financial benefits

Nine of the 10 participants reported that economic benefits appeared to incentivize the decision by their families to subject them to CSEA by non-familial abusers linked to trafficking rings (the only participant who did not report this could not remember any details past the age of 6 due to dissociation reportedly caused by his trauma). The reported economic benefits were sometimes exclusively financial (cash or another form of monetary payment), but participants also reported the exchange of non-monetary goods with their families such as: drugs (Sprang & Cole, 2018), medical procedures, and introductions to networks of high-net-worth offenders, as was also reported by numerous participants in Salter’s study (Salter, 2012a, p. 119).

I overheard my parents discussing how much certain buyers were willing to pay for me. I also took notice of money being exchanged whenever I was sold... I believe the main reason my brother trafficked me was to ensure he had the money for college (Daphenne).

4.1.3. Boys as tradable commodities

Nine of 10 reported the trade of children for CSEA as an additional medium of exchange for familial and non-familial traffickers/abusers at CSEA gatherings (Salter, 2012a, p. 125). Some participants described that “attendance fees” could be charged to any abuser who did not bring a boy to be abused by other perpetrators, thus providing further economic incentives for the familial trafficking of boys for CSEA.

4.1.4. Creation and exchange of CSAM

All 10 survivors reported the widespread creation of CSAM by their familial abusers for eventual distribution among CSEA communities with non-familial perpetrators (Lanning & Burgess, 1984; Burgess et al., 1984; Itzin, 2001; Salter et al., 2021; Seto et al., 2018). Some participants added that their familial abusers would also keep the CSAM as “trophy” in their “collections,” a behavior reported in other CSEA studies (FBI & Lanning, 1992, p. 23–27). The exchange and consumption of CSAM within CSEA communities may provide abusers with a sense of social validation, thus justifying their actions and desires to themselves and potentially reinforcing their future inclinations to continue offending despite the elevated level of legal and social risks (FBI & Lanning, 1992, p. 28; Malamuth, 2018).

As far as I know, my grandfather always intended to groom me, to use me for his child porn ring. He was a member of a vast pedophile network. His abuse of me was a lead-in to the porn movies he did with me, his friends, men and women participated equally and brought children to his house as well. Those were exchange parties (Darren).

Previous literature suggested that CSEA events facilitate the creation, filming, photographing, distribution, and trade of copies of CSAM. “Many members transport young boys interstate for purposes of sex, and that many take photographs of their boys in the nude or having sexual acts and send them through the U.S. Mail with letters to each other” (FBI, 2008, p. 130). With the rise of the Internet, however, communities of child sex offenders moved their activities to online forums and the darknet, where they have proliferated ever since (NCMEC, 2021b; WeProtect Global Alliance, 2021). Members of these communities exchange CSAM to gain access to encrypted CSEA chat rooms. By creating and sharing new CSAM with members through peer-to-peer (P2P) networks, a familial or non-familial abuser can achieve a higher ranking within the online community, which gives the abuser access to CSAM depicting higher COPINE levels of abuse, such as live-streamed assault and torture filmed in a pay-for-play format (Child Rescue Coalition, 2021; ECPAT & INTERPOL, 2018; Quayle, 2008).

4.2. Concealment of CSEA and trafficking by familial perpetrators

The study revealed numerous methods employed by familial perpetrators to conceal their illicit activities, dissuade victim disclosures and limit the opportunities for authorities to intervene.

4.2.1. Terminology

Participants reported that the concealment tactics began with the grooming practices employed by their familial abusers, who used deliberately misleading words and phrases (such as “playtime”, “family time”, and “showing love”) to refer to the CSEA around the victim boys. This practice helped minimize suspicion of their activities and engineered plausible explanations to discredit any attempts at disclosure by the victims to others.

I was always told [by my familial abusers] that I/we were “having a dream.” ... Whenever I would tell someone else about the events that took place and describe what a family member and I would do – making sure to describe the sexual content – I would always start by claiming that I/we were “having a dream.” As a result, due to my young age, the fact that my biological family appeared “normal” to the outside world, and the fact that I was claiming that I had a dream, I would instantly be dismissed (Wayson).

This was consistent with Salter’s findings, as his participants similarly reported being told by their familial abusers that “a recollection of abuse was a ‘bad dream’” (Salter, 2012a, p. 123).

4.2.2. Cooperation with trafficking rings

Familial abusers may also either be members of CSEA trafficking communities/organizations or cooperate with them to prevent the discovery of their activities. For example, FBI records suggest that NAMBLA coaxed exploitative parents to impede the progress of criminal investigations into the CSEA endured by their children. “Parents had been paid to keep the children from testifying or to not make them available to investigators for interviews.” (FBI, 2008, p. 310). Additionally, traffickers often used fake identities to stifle law enforcement investigations (FBI, 2008, p. 304). Colin reported that the traffickers and his stepfather (a member of the trafficking ring) went to the local courthouse and found a birth certificate for a deceased baby who would have been around the same age as Colin. His stepfather and the traffickers then used that certificate to obtain a legally valid, yet fraudulent identity – including a Social Security number – for Colin to use with “clients” (child sex offenders). Several survivors reported that their familial abusers and traffickers forced them to avoid frontline professionals and service providers and threatened them to never disclose the CSEA to anyone, a tactic similarly described in other studies (Hlavka, 2017; Salter, 2017a,b).

4.2.3. Use of “routine” family activities as pretexts

The study participants all reported the use of normally routine activities (such as going for a car ride, going to the park, camping, or family trips) as pretexts by their familial abusers and traffickers to bring the boys to CSEA trafficking events. Much of the literature on CSEA and trafficking communities corroborates the participants’ accounts. NAMBLA’s “conferences,” which were boy swap events popular in CSEA communities during the 1970s to 1990s, were promoted as “father-son weekends.” These events could see two to three dozen boys aged from 5 to 8 years gathered at a campsite alongside three dozen “dads” (DeYoung, 1989; FBI, 2008, pp. 18, 19, 28, 130) for CSEA. The entrance motto stated, “Bring a child, or pay double as a cover charge to participate,” and the boys were forcibly sedated to prevent them from running away (DeYoung, 1989; FBI, 2008, pp. 18, 19, 28, 130).

My father would take me on ‘camping trips,’ but these were actually ‘boy swap’ events with other pedophiles. That gave him the freedom to abuse multiple other boys while the other men in attendance had the freedom to abuse me however they wished ... Once the weekend event was concluded I was washed with bleach, reclothed, and brought back home (Nick).

4.2.4. Women as exploiters, abusers and traffickers

The misguided belief that women, including female family members, are always nurturing individuals who can be trusted with children has engineered the notion that they are less likely to commit sexual crimes against a child in comparison to men (Hamilton, 2021, p. 88). Yet in nine of this study’s 10 cases of familial CSEA and trafficking, participants reported the presence of female abusers, “buyers” and/or traffickers (familial and non-familial). Women abusers and exploiters present a unique criminological challenge because sexually abusive woman-to-boy relationships can be difficult to identify (Bunting, 2007, p. 256; Turton, 2010, p. 285), as female offenders usually hold a dominant or authority status over the child as mothers, teachers or caregivers (Elliott & Peterson, 1993, p. 169; Hamilton, 2021, p. 91). Women in these positions can thus “dress, bathe, change, examine, and touch children with little suspicion” (FBI & Lanning, 1992, p. 13). Female perpetrators receive significantly lighter criminal sentencing for CSEA-related crimes compared to men (Hamilton, 2021, p. 88, 90; Zack et al., 2018), and they also present unique challenges related to disclosures, as their boy victims may perceive the sex acts as enjoyable or as a “rite of passage” into manhood (Cashmore & Shackel, 2014, p. 77). This limits boys’ ability to perceive themselves as victims and subsequently disclose their exploitation (Mayer, 1992, pp. 49–50) as “female-perpetrated victimization disrupts traditional victimization paradigms” (Hlavka, 2017, p. 490).

4.2.5. Manipulation of mental health professionals and educators

The physiological and psychological manifestations typically exhibited by CSEA and trafficking victims can also help familial perpetrators conceal their activities. Survivor participants reported that they were often characterized by their familial perpetrators as “hyperactive” to their teachers and mental health professionals, and so their exploiters convinced medical professionals that the manifestations of the traumatic stress (such as hyperactivity) needed to be “managed” using psychiatric medication. The participants added that the prescribed medications helped partly conceal indicators (such as depression and correlated low energy levels) of the CSEA and trafficking. Mental health professionals may be particularly vulnerable to manipulation by perpetrators because traumatic stress endured by a victim can cause them to have difficulty concentrating and learning, exhibit dissociative disorders, or become easily distracted, disorganized, hyperactive, anxious, and hypervigilant (Blanco et al., 2015; Center for Substance Abuse Treatment, 2014; Szymanski, Sapanski, & Conway, 2011). The boy may consequently appear unfocused in a classroom setting, especially as the symptomatology of traumatic stress can be behaviorally similar to attention deficit hyperactivity disorder (ADHD), as it affects the same areas of the brain, particularly the prefrontal and temporal cortexes that control emotions, impulses and decision-making (Blanco et al., 2015; Center for Substance Abuse Treatment, 2014; Szymanski et al., 2011; Twardosz & Lutzker, 2010).

My family had to do a lot of damage control [to protect themselves] because, once in a while, someone did speak up for me. When the elementary school noticed my distress, my family succeeded at making me appear to be the problem by calling me “hyperactive” and “highly imaginative,” labeling me as a “problem child,” and [a medical health professional] prescribed [ADHD] behavior modification along with medication (Daphenne).

4.3. Barriers to familial CSEA disclosure

There are several deep-rooted and complex barriers to the disclosure of familial CSEA by victims. These barriers can be physical (confinement/isolation), psychological, emotional, and spiritual (Nasijeti, 1980; Palfy, 2016). Palfy argues that even though a boy may verbally disclose that they are being sexually abused, their claims may not be taken seriously even if they exhibit numerous behavioral, physical, emotional, and psychological manifestations and indicators of CSEA (Palfy, 2016). Upon disclosure, victims may face violence or be threatened by their abusers or traffickers, and they may feel unsafe, judged, or rejected by the person(s) they disclose to (Palfy, 2016, p. 130). This highlights the need for frontline professionals and service providers to not only identify CSEA victims, but also to employ trauma-informed and victim-centric practices that help facilitate disclosure and address their post-disclosure needs (Palfy, 2016).

4.3.1. Trauma bonding

Trauma bonds – or the loyalty felt by a victim for a person who has hurt them repeatedly (Casassa, Knight, & Mengo, 2021) – present a significant barrier to disclosure as these bonds may occur even more frequently between CSEA victims and their familial traffickers. Trauma bonds allow perpetrators to more easily manipulate and coerce trafficked boys despite their instinctual fearfulness, even driving victims to the point of protecting their abuser or trafficker (Lanning & Burgess, 1984, p. 14; Casassa et al., 2021). Several

participants reported that their traffickers exploited their trauma bonds effectively and forcefully by threatening violence against the very same family members who initially subjected them to CSEA.

I found myself defending the actions of my parents as something other than any form of abuse or trafficking. I did that because – even though I was not getting the support I needed from them, and the disappointment I felt that they gave me away – they were still my parents (Lucas).

A child victim's deep-seated trauma bond with a familial abuser may cause the abused child to distort their perception of the abuser-to-victim relationship, as they may feel a disproportionate degree of gratitude for each emotionally nurturing interaction (such as a hug or compliment) with their abusers, while becoming dependent on these positive memories to override the negative emotions created or worsened by the abuse, such as fear, anger, self-hatred, sadness, shame and disgust (Casassa et al., 2021; Doychak & Raghavan, 2018; Palfy, 2016).

I was also terrified of being separated from my mother because she tried to protect me as best she could, I think. Feeling that bond with my mother while being tortured by my father created an immense amount of conflict and a constant feeling of hopelessness (Daphenne).

4.3.2. Exploitation of bonds typical in a parent-child or familial relationship

In any parent-child relationship there is a natural imbalance of power favoring the parents (or other adult family members) over the child. Consequently, familial abusers and traffickers appear to be in an advantaged position – compared to non-familial perpetrators – as they can utilize this socially accepted imbalance of power within a family to manipulate, coerce and finally exploit the boy. “*I have felt deeply ashamed to even talk to people about the abuse with my family members because incest is so taboo. That’s especially so with my mom*” (Joe). Familial perpetrators are also able to more easily exploit the natural emotional attachments a child would normally develop through positive memories and shared experiences with adult family members; they may groom a child by engineering positive experiences where they treat their victim with empathy, care and love, only to later coerce, manipulate, gaslight or threaten them into compliance thereby dissuading disclosures (Salter, 2012a). For example, perpetrators may explain to the child that the CSEA is “in their best interests” or that it is necessary to “provide for their future” and to “support the family” (Casassa et al., 2021). Furthermore, several participants reported that non-familial traffickers sometimes sensed that their boy victims had been subjected to emotional neglect by their families. These non-familial traffickers then attempted to “mimic” parent-to-child bonds with the boys in order to emotionally manipulate and exploit them more easily.

It felt like he [non-familial trafficker] was my dad when he would teach me things, which left me confused. I was dependent on him and was so terrified of him. I felt like I lost my will and could only do what he told me to do. I loved him and hated him all at the same time (Fernando).

4.3.3. Denials by the family

Familial perpetrators of CSEA and trafficking can engineer a barrier to disclosure by denying their involvement to the victim themselves. The family may distort the victim's reality through manipulation, gaslighting and deception (Ullman, 2007). “*I lost friends to suicide. They desperately wanted acknowledgement of their abuse by their families but were never listened to (Colin).*” Several participants reported that incidents where their families denied the existence of CSEA – or their involvement in the trafficking – discouraged them from disclosing again until adulthood. For example, Lucas disclosed the CSEA to his mother, but unknown to him at the time was the degree of her involvement in his trafficking. Lucas cited his mother's denials as a cause of his suppression of the traumatic memories and negative emotions associated with the CSEA. He said his mother's denials also led to repeated bouts of self-revictimization, where he minimized the extent of his abuse to himself, placed blame on himself for not stopping the CSEA, and attempted to deny its existence altogether in his own mind. “*I realized that if my mother would not believe me, no one would*” (Lucas). Several participants reported that the repeated denials by their families led them to question the accuracy of their recollections and even their own sanity, further suggesting that familial denials may discourage victim disclosures.

I tried opening up a little to my mother in the years that followed, and though not much was said, she would gaslight my memories. But, I could see in her face that she knew I was remembering ... When she passed away, and when my parents' belongings were being packed so the house could be sold, the camera my father had used to take pornographic photos of me and my female cousin was found. I claimed it, and having it in my hands brought the final walls down that were holding back my deepest traumas (Daphenne).

4.3.4. Spiritual barriers

The act of pairing spiritual abuse (Oakley, Kinmond, & Humphreys, 2018) with sexual abuse distorts the child victim's ability to develop their own personal morality and religious beliefs. A familial abuser with ties to a religious institution can weaponize the child victim's relative lack of knowledge in religious texts and practices to groom and coerce them through psychological abuse exhibiting religious ideology (Lanning & Burgess, 1984; Oakley et al., 2018). Familial perpetrators can thus force the victim's compliance in the CSEA and trafficking through the “weaponization” of real (Oakley et al., 2018) or fabricated religious practices to induce fear, shame and guilt.

I was spiritually abused by my grandfather, who always said he was the “hand of God,” and everything he did to me was because I was a sinner. During the rapes, he whispered Bible quotes in my ear... These occasions also did emotional, psychological, mental, and physical damage. You cannot treat those separately (Darren).

While a child victim subjugated through religious fear and shame may experience guilt for their forced participation in the CSEA,

familial perpetrators may – paradoxically – also attempt to shame the child for not wanting the CSEA to continue. Furthermore, if male perpetrators commit CSEA and spiritual abuse within the context of a religion or culture that perceives homosexuality as forbidden or immoral, it exacerbates a boy victim's shame, guilt and fear which may lead to further non-disclosure of their abuse (Nasjleti, 1980; Palfy, 2016). *"I thought because my body reacted, then I must be gay, and if I am gay, I must be bad and God doesn't love me. I couldn't tell anyone about my abuse because they would hate me for being gay"* (Kabili).

4.4. Institutional shortcomings for victim disclosures

The participants reported consistently negative experiences in their multiple engagements with institutional systems of support, particularly their interactions with medical staff, law enforcement and mental health professionals. Several participants reported that these negative experiences caused them to fear institutional service providers. This fear can lead to harmful, traumatic experiences while engaging with support institutions that alter how survivors perceive frontline and support professionals or cause re-victimization incidents (Richie-Zavaleta, Baranik, Mersch, Ataiants, & Rhodes, 2020). *"I wasn't equipped to keep re-telling my story to many different people when I was telling my statement. My mind wasn't okay"* (Kabili). Below are several examples of institutional shortcomings reported by the survivors.

4.4.1. Medical staff

After a violent trafficking rape by a "client" (child sex offender), Colin reported being brought to the emergency room by his trafficker with visible cuts and bruises. His non-familial trafficker explained to the doctor that Colin was "accident-prone." Colin disclosed to the doctor that he needed help; however, the doctor then told the trafficker what Colin had said, and finally returned him into the custody of the trafficker. Colin reported being beaten again by his trafficker shortly afterward as retaliation for his disclosure and as an effort by his trafficker to deter any future attempts to disclose.

4.4.2. Law enforcement

Wayson reported escaping captivity and running away, unclothed, along a main road when he was found by a police officer. The officer brought him to a police station to be questioned. After Wayson's disclosure, the first officer realized that one of the perpetrator traffickers was the father of another police officer at the station, who was also on duty. In order to protect the second officer's father, both officers threatened Wayson not to disclose, beat him, and finally brought Wayson back to the trafficker he had escaped from.

Fernando, Colin, Wayson and Kabili stated that their disclosures of familial CSEA and trafficking to police were met with skepticism and disbelief, a lack of understanding of grooming tactics (trauma bonds), and the presence of overt gender biases whereby the officers explicitly dismissed the existence of male victimhood (and - in some cases - female culpability) to the survivors, ultimately resulting in the police taking no actions on their behalf.

4.4.3. Mental health professionals

As reported by Wayson, after unlocking repressed memories of familial CSEA and trafficking during his adulthood, he checked himself into a hospital and disclosed the incidents he had recalled to mental health professionals there. Wayson said none of the mental health staff believed his recollections, and instead placed him involuntarily under a 4-week psychiatric hold where he was also forcibly medicated. In order to be released from the institution, Wayson had to recant his disclosures of the CSEA and trafficking to hospital staff, even if that meant being forced to deny his real, lived traumatic experiences.

4.5. Consequences of familial CSEA and trafficking reported by survivors

All of the study participants reported considerable physiological and psychological complications associated with the familial CSEA and trafficking they endured in addition to the generally abusive home environments they were subject to by their families. All 10 survivor accounts consistently exhibited a broad variety of CSEA indicators during their childhood and into their adulthood. Furthermore, they scored highly on an index used to assess the degree to which their family lives as minors were marred by adverse childhood experiences, which are correlated with the presence of a variety of mental, physical and emotional afflictions later in life.

4.5.1. Adverse Childhood Experience (ACEs) scores

ACEs questionnaires are used as an index to measure a person's recollection of the different forms of abuse, neglect, and other traumatic childhood experiences they may have endured from their parents, other family members or another person in their household (Centers for Disease Control and Prevention (CDC), 2020; Oram et al., 2016). Scores can range from one to 10, and there is a significant correlation between high reported ACEs scores (four or higher) and the presence of psychological and physiological ailments which may negatively impact an individual's quality of life, ability to form healthy relationships, future earning potential, and their ability to get an education or maintain gainful employment (Casassa et al., 2021; Centers for Disease Control and Prevention (CDC), 2020; Murase, Simons, & Simons, 2021). ACEs studies on adult CSEA and trafficking survivors show elevated indicators for anxiety, depression, complex PTSD, chronic physical health issues, mental illnesses, substance abuse in adulthood, and lasting injuries or disabilities from their sexual exploitation (Centers for Disease Control and Prevention (CDC), 2020; Downing et al., 2021; Iglesias-Rios et al., 2018; Oram et al., 2016). All 10 participants scored more than four in the ACEs questionnaires, with nine participants scoring seven or more. See Table 2 below for an overview.

Table 2

ACEs questionnaire scores as reported by participants.

Nick	Joe	William	Fernando	Daphenne	Darren	Lucas	Wayson	Colin	Kabili
5	7	8	8	8	8	8	9	10	10

4.5.2. Non-verbal indicators

Survivors also reported exhibiting a variety of non-verbal indicators of CSEA and trafficking. These included traditional CSEA indicators such as: runaway behavior, oppositional behavior, fire setting, helplessness, depression, anxiety, social isolation, acquired high-priced items, cuts and bruises, multiple sexually transmitted infections (STIs), and branding tattoos (Franchino-Olsen, 2021; NCMEC, 2021a, b; Pate, Anderson, Kulig, Wilkes, & Sullivan, 2021; Procopio, 2018; Rambhatla et al., 2021). However, participants also reported additional non-verbal indicators found within the study's interviews and questionnaires, which are listed in Table 3 below.

Table 3

Non-verbal CSEA indicators reported by participants.

Physical	<i>n</i> =	Behavioral	<i>n</i> =
Constant throat and mouth infections / bruising in the mouth	10	Nervousness and rigidity when being touched reassuringly (e.g. hand on arm, hand on shoulder)	10
Acute pain in the genital area (even days/weeks after abuse/exploitation)	10	Attempts to disclose CSEA/trafficking through drawings, writing "help" in school homework, or during emergency room/medical examinations through body movements and expressions	9
Bruising on the throat (fingermark bruising around the neck from choking, or wearing dog collars, ropes, or ties)	10	Bedwetting (as a child/teenager)	9
"Unexplained" pain on areas of trauma – neck, back, arms (where memories are associated with abuse)	10	Sudden increase in aggression when the neck is touched	9
Significant blood alcohol levels (as an infant/toddler/teen)	9	Negative emotional response to light flashes/ withdrawn behavior after being photographed	9
Needle marks around arm injection sites (sedation/drugs)	9	Poor hygiene (unbathed and/or wearing the same clothing for multiple days) – deliberately avoiding regular bathing or personal hygiene	8
Drugs in bloodstream such as heroin or MDMA (as an infant/toddler/teen)	9	Obsessive cleanliness (multiple showers a day)	7
Pain in wrists and ankles from being restrained	9	Sudden disinterest in hobbies or activities especially if associated with where (or by whom) the abuse took place.	7
Bleeding from anal area and painful defecation	9	Sudden use of oversized, baggy clothing or sudden change in clothing style (to avoid displaying their body to perpetrators)	7
Bruising on larger areas of the body (blood pooling on sides of the body when confined to a cage/chest continuously for hours)	6	Inability to play with other male children (isolation or showing aggression) especially if other children are behaving aggressively	7
Bruising on hands, palms and knees (from being forced to "walk like a dog")	6	Uncontrollable urination in public	6
Emotional	<i>n</i> =	Psychological	<i>n</i> =
Complex PTSD	10	Strong trauma bond formed with familial abusers and traffickers	10
Repeated self-revictimization	10	Presence of dissociative disorders	9
Fear of people's hands or objects near face/mouth	10	Excessive deference and compliance when being given instructions	9
Fear of male children, male teenagers, and male adults (especially when showing signs of aggression or violence in children, and normal demeanor in adults)	9	PTSD after witnessing a death during sexual abuse or trafficking event	7
Internalized denial of CSEA or trafficking, and/or the extent and severity of CSEA	9	Non-epileptic seizures (seizures caused by trauma memory)	7

Table 4

Long-term health effects of CSEA throughout adulthood reported by participants.

Physical	n =	Psychological	n =
Chronic physical pain and headaches	10	Insomnia	10
Weakened immune system	10	Memory loss/ suppression	10
Inflammation in the body (fibromyalgia)	9	Complex PTSD	10
Difficulty swallowing due to damage from strangulation and torture	8	Dissociative disorders / Depersonalization (even during intimacy)	10
Ongoing pain/sensitivity in anal area / painful defecation	8	Abandonment issues	10
Sexually transmitted infections	7	Frequent nightmares	10
Traumatic brain injury (from physical trauma hit or strangulation)	6	Fear of men	9
Permanent disabilities	5	Claustrophobia	7

Emotional	n =	Behavioral	n =
Anxiety and panic attacks	10	Unhealthy attachment styles	10
Suicidal thoughts / behaviors	10	Difficulty with and/or fear of physical intimacy	10
Depression	10	Drug addiction	9
Self-revictimization	10	Alcohol addiction	9
Hypervigilance	10	High-risk sexual activities	9
Sudden aggression or shutting down when triggered	10	Over-working	9
Emotionally avoidant behaviors	10	Eating disorders	8
Social isolation	10		

4.5.3. Long-term health consequences

Sexually exploited children of all genders face serious immediate and long-term physical, mental, emotional, and social health consequences (Edwards, Iritani, & Hallfors, 2006; Mitchell, Finkelhor, & Wolak, 2010; Mitchell et al., 2017, p. 142). All interview participants reported mental and emotional health issues, physical ailments, or lifelong disabilities attributed to their trauma (see Table 4). Survivors reported that their dissociative disorders, complex PTSD, and memory loss led them to question their reality, their sanity and their memories. The participants reported that many long-term health issues in their childhoods caused by their CSEA and trafficking continued into their adulthood, with physical scars serving as daily reminders of their trauma.

Physically I suffered from constant throat infections, causing doctors to remove my tonsils at 3 years old - no one suspected STIs. Or if they did, they kept silent and just prescribed antibiotics, which I was always taking. I was also often treated for gastrointestinal and rectal issues. My ability to swallow and digest was affected by the strangulations and the poisoning [by my father] (Daphenne).

4.6. Comparison of intrafamilial exploitation and non-familial exploitation

Although the sample size is small, so it is difficult to make substantive claims, the study revealed several ways in which survivors' experiences differed between intrafamilial and non-familial CSA and CSEA. For example, participants reported that when CSA (incest) was committed by a familial perpetrator of any gender, it was easier for them to mentally escape the situation through dissociation (Salter, 2013, pp. 107–108). With non-familial CSEA abusers, however, dissociation was not always possible as participants reported that they were told to be “alert” and “attentive” to their abusers' sexual demands, which were often sadistic in nature (Dietz, Hazelwood, & Warren, 1990, p. 165; Goodwin, 1993; Krafft-Ebing, 1894, p. 57; Salter, 2012a, p. 135; Shengold, 1979). Sadistic impulses also appeared to worsen over time, as nine of the 10 study participants reported experiencing a gradual increase in the severity of sadistic sexual violence they endured. Baumeister and Campbell's study suggests that opponent-process theory (Solomon, 1980) may explain why this occurs. During an abuser's first sadistic acts of abuse, any initial feelings of guilt or remorse they experience when hurting another person may overshadow their perceived sexual pleasure. However, the guilt and remorse diminish during each subsequent incident (Baumeister & Campbell, 1999, pp. 213–214) and eventually an abuser may experience virtually nothing other than sexual pleasure from inflicting acute pain and suffering onto a victim.

Participants reported consistently elevated levels of violence by non-familial abusers of any gender, whose demands included extreme forms of bondage, discipline, bestiality, cult-like rituals (Salter, 2012a,b; Sarson & Macdonald, 2008), dominance and submission, sadomasochism, and even homicide of other children. Seven of the 10 survivors reported witnessing the killing of another child by non-familial perpetrators during their trafficking; seven of them also reported being severely beaten by non-familial abusers to the point where they lost consciousness.

After we were raped by multiple men, I saw him fall to the ground bleeding and crying. I held him in my arms as he closed his eyes. He was my only friend. He was only 8 years old when he died (Fernando).

4.6.1. Familial female perpetrators (abusers/traffickers)

The study interviews demonstrated that a perpetrating mother may choose to exploit her role as the primary caregiver (Bunting, 2007, p. 264) of her son by blending nurturing behavior, acts of physical and verbal abuse, and grooming techniques interchangeably

to gradually manipulate the child into CSA, and later on into trafficking for sexual exploitation. In six of the 10 cases, participants reported that their mothers played a key role in the CSEA they suffered and/or their trafficking. Lucas reported that his mother would say he needed to see “clients” (child sex offenders) to better position his athletic career in pursuit of their shared Olympic dream. Wayson said his mother combined physical affection with emotional manipulation (such as crying when he resisted sexual advances) prior to sexually abusing him.

4.6.2. Non-familial female perpetrators (abusers/buyers/traffickers)

Non-familial CSEA through trafficking committed by female perpetrators against the participants was reportedly diverse in its severity. *“Women on the other hand were absolutely relentless. It seemed the more I cried and tried to plead with them the more it would turn them on and the more abuse I would suffer”* (Wayson). While some female abusers were sadistic and physically violent - seeking to torture their victims - several participants reported conversely that some women abused them in an intimate manner, seeking to create emotional connections.

I did also experience female perpetrators. Some took part in the physical abuse while others took part in the mind manipulations, using mother-like compassion to make me feel safe when they were really prepping me to be used again (William).

4.6.3. Degradation and violence by familial and non-familial males

The study participants reported that the common denominators for most of the male perpetrators of CSEA they encountered – whether familial or non-familial – were elevated levels of violence, rage, degradation, sadism and dehumanizing abuse. Male perpetrators of all kinds also reportedly exhibited a distinct interest in exploiting power imbalances between themselves and their victims engineered through the trafficking, such as by taking full physical control over a boy through the use of restraints or by caging them.

I feel like the abuse from my mother was a very confused way of showing affection, but still very wrong. But what my father did, what he allowed to be done, and what he made me available for were far darker, painful, and violent – physically, emotionally, and psychologically (William).

4.6.4. Characteristics of non-familial males (abusers/traffickers)

Participants reported that while male perpetrators often committed physical and verbal abuse, the key difference between familial and non-familial male perpetrators was the degree of violence employed by non-familial males. Survivors consistently reported that once they encountered a non-familial male perpetrator, the CSEA endured was generally far more extreme, physically painful and violent. Torture, threats, and harm inflicted upon a child within the context of CSEA can cause an intense fear towards the perpetrators’ gender (Van der Kolk et al., 2007). Nine participants reported immense fear of male children and adults that continued into adulthood. Survivors also reported being hospitalized as children due to injuries sustained after non-familial male “clients” (child sex offenders) subjected them to rape, torture, bondage and strangulation.

I called one of the “clients” my dad brought “the strangler.” This person took a lot of enjoyment out of strangling me while he would molest me with his hands. The thrill was to see me trying to resist (Kabili).

Survivors further reported that their non-familial male abusers made much fewer attempts to create emotional bonds with their victims, something which the participants said was more common with familial male abusers. Non-familial male abusers thus treated the survivors as objects to be used solely for sexual gratification; boys were compelled to work around the clock to comprehensively satisfy their non-familial male abusers’ exploitative desires.

I was told that I needed to please each man, or I would be harmed, so rather than just dissociating as I did with my family members, I had to be aware enough to know if the client was getting what he wanted (Joe).

5. Discussion

This study aimed to address several previously identified gaps in CSEA and trafficking literature by collecting data from the first-hand accounts and experiences of male survivors and exploring their recollections of the exploitation (Franchino-Olsen, 2021, p. 101; Shon & Tewksbury, 2021, p. 340), its physical and psychological impacts on their lives (Josenhans et al., 2020, p. 9), as well as the ways in which service providers either helped them effectively or failed to do so (Mitchell et al., 2017, p. 147; Moynihan et al., 2018, p. 449).

While this study builds upon earlier qualitative research focused on male CSA survivors (Kia-Keating, Sorsoli, & Grossman, 2010; O’Leary, Easton, & Gould, 2017) its scope differs by honing in on the particularities of intrafamilial exploitation and by interviewing survivors whose families not only abused, but also trafficked their victims. This study similarly explored the long-term effects of CSEA and identified several commonalities such as sexual difficulties, the avoidance of sexual intimacy, impaired trust in other people and feelings of social isolation (Kia-Keating et al., 2010, pp. 671–672; O’Leary et al., 2017, p. 433). In addition, while the abuse scale developed by O’Leary et al. may be a useful instrument in identifying adult male victims (similar to other question-based screening tools), our findings suggest that an ACEs questionnaire is a complementary, simple and straightforward tool that can help frontline professionals and educators identify potential male victims. All 10 survivors in this study exhibited high ACEs scores indicating abusive childhood environments, which is widely cited as the most significant risk factor for CSEA (Franchino-Olsen, 2021; Josenhans et al.,

2020; Reid et al., 2017; Sprang & Cole, 2018).

Additional findings in this study align with much of the broader literature on CSEA, as participants all reported first being child victims of incest (Salter, 2012a, p. 34), and later being trafficked by their families and exploited by non-familial perpetrators in exchange for various forms of compensation (Salter, 2012a, p. 118). This process - as reported by the participants - is consistent with Itzin's diagram of the transition from familial to non-familial CSEA (Itzin, 1997, p. 102). The participants' eventual exploitation by non-familial abusers was unsurprising, as multiple studies suggest that boys are more likely to experience non-familial CSEA (Cashmore & Shackel, 2014; Cockbain et al., 2017; Finkelhor, 1990). Additionally, the use of illicit drugs as a medium of exchange was commonplace (60 %, $n = 6$), consistent with the findings by Sprang and Cole (Sprang & Cole, 2018, p. 189). A distinctive factor in this study, however, was the comparison by the participants of their differing experiences between familial and non-familial CSEA, notably the greater degree of violence and sadistic abuse reportedly committed by non-familial perpetrators, who also made much fewer attempts to establish emotional bonds with their victims, unlike the familial perpetrators.

The interviews consistently described the methods by which familial CSEA perpetrators were able to conceal their activities and construct barriers to victim disclosure. The use of gaslighting techniques to cast doubt on victims' memories was commonplace, as was the use of ostensibly "routine" family activities as pretexts to disguise organized CSEA and trafficking of boys to non-familial perpetrators. Participants consistently reported feeling deep trauma bonds with their familial abusers, who repeatedly employed threats, emotional manipulation and spiritually abusive tactics to further dissuade them from disclosing. The participants' accounts provide explanations and evidence that support earlier research suggesting that victims are least likely to disclose when their abusers are family members (Goodman-Brown, Edelstein, Goodman, Jones, & Gordon, 2003). Service providers, therefore, should possess current knowledge on CSEA indicators and familial perpetration in order to better detect male victims. Accordingly - and despite this study's small sample size - the 32 non-verbal CSEA indicators reported by the participants expand upon earlier indicator research (Black & DeBlasie, 1993; Procopio, 2018; Sebold, 1987; UNODC, 2008) and reflect patterns of victim behavior that could potentially help frontline professionals identify other boys being sexually exploited by their families.

While it is well-established that females are a minority of the total number of CSEA perpetrators (Bunting, 2007, p. 253), their incidence rate has proven to be difficult to determine, with studies estimating that females commit CSEA in anywhere from 5 % to more than 20 % of cases (Finkelhor, 1994, p. 46; Turton, 2010, p. 283; McLeod, 2015, pp. 101–102). Unexpectedly, the presence of female perpetrators was nearly universal in this study, with 9 of the 10 participants reporting that women either trafficked or abused them sexually, and 6 participants reporting that their mothers were leading perpetrators. These findings are consistent with two recent studies on intrafamilial trafficking where most perpetrators in both studies were mothers (Allert, 2022 p. 215; Sprang & Cole, 2018, p. 189). Furthermore, the participants widely reported active involvement by female perpetrators in exploitative sexual activities, including sadistic sexual abuse, paying to exploit boys sexually and trafficking them to other CSEA perpetrators. These findings contrast with the cases described in Salter's 2012 study, where women were involved in the CSA mostly as supporting actors coerced by their abuser husbands, though Salter does acknowledge that women can and do commit severe sexual abuse against children (Salter, 2012a, pp. 112–113). In contrast, earlier studies by Itzin posited that "*all child sexual abuse is an abuse of adult male power*" (Itzin, 2001, p. 41) and described women's involvement in CSEA as "*more passive*" and characterized by women's failure to protect child victims or by their aiding and abetting of male abusers (Itzin, 1997, p. 97) as opposed to active and direct involvement in the sexual abuse and exploitation of children – assertions which are strikingly inconsistent with this study's findings.

The potential impacts of traditional gender norms and stereotypes quickly became apparent during the participants' recollections. Their accounts detailed a common internalized hesitancy in disclosing their exploitation to others, as they reportedly did not want to be stigmatized by their peers for appearing weak, vulnerable, unable to manage their problems, or for being perceived as homosexual - traits which are incompatible with traditional, dominant and heteronormative representations of masculinity (Cashmore & Shackel, 2014; Hill & Diaz, 2021; Hlavka, 2017; Josenhans et al., 2020; Mayer, 1992; Palfy, 2016; Price-Robertson, 2012; Van der Kolk et al., 2007). The survivors' fear of stigmatization and the resulting delays in their disclosures are consistent with much of the literature suggesting that boys often wait years or decades (Romano, Moorman, Ressel, & Lyons, 2019) after enduring CSEA to disclose their exploitation, or avoid disclosing it at all (Burgess et al., 1984; Cashmore & Shackel, 2014; Cockbain et al., 2017; Goodman-Brown et al., 2003; Josenhans et al., 2020; McNaughton Nicholls, Harvey, & Paskell, 2014). Furthermore, the survivors' accounts detailed systemic institutional failures during their attempts to disclose their exploitation and gain the support of frontline professionals. Participants widely reported being disbelieved by medical staff, mental health professionals and law enforcement officers and experiencing explicitly biased reactions characterized by overt skepticism of male victimization and familial (especially female) perpetrators. This finding is consistent with earlier studies suggesting that biases driven by gender stereotypes may inhibit the detection and acknowledgement of CSEA targeting males (Beech et al., 2018; Berelowitz et al., 2013; Lanning & Burgess, 1984; Cashmore & Shackel, 2014; Cockbain et al., 2017; Hill & Diaz, 2021; Holmes & Offen, 1996; McNaughton Nicholls, Harvey, & Paskell, 2014; Turton, 2010) and consequently impair the degree of support provided to victimized boys. For decades, survivors' recollections of CSA/CSEA have often been dismissed by the skepticism of journalists, scholars, criminal courts, and frontline professionals (Everson & Boat, 1989, p. 235; Salter, 2012a,b, p. 441; Salter, 2017a, pp. 4–5; Shiu, 2008, p. 661). This study, alongside other victim-centric research, illustrates the need to confront and overcome the disbelief of CSEA survivors' disclosures.

6. Recommendations

These 10 accounts are written historical reconstructions of the survivors' familial CSEA and trafficking, events that occurred 5–40 years ago. However, their insights and recommendations may still be applicable today. Participants aged 40 and older reported that services for male survivors and Internet access to support groups were non-existent or limited at the time of their abuse/trafficking,

when they most required support services. While today there is some social awareness of male victimization, there are still minimal support services offered to male survivors around the world (Richie-Zavaleta et al., 2020). In addition, frontline professionals receive minimal training on human trafficking – especially of males – and possess insufficient understanding of CSEA (Kenny, Helpingstine, Long, Perez, & Harrington, 2019; Richie-Zavaleta et al., 2020). Therefore, the experiences of these survivors who had few resources to turn to for support may not be dissimilar to those of boys enduring CSEA and trafficking today. Below are a series of recommendations for researchers, frontline professionals, medical and mental health service providers, child protection specialists, education professionals and male survivors of all forms of CSEA and trafficking.

6.1. Trauma-informed support is key

Survivors reported experiencing significantly better support when disclosing to trained, trauma-informed persons who knew how to better recognize and support CSEA victims (Centers for Disease Control and Prevention (CDC), 2020; Center for Substance Abuse Treatment, 2014; Greenbaum, 2018; Kenny et al., 2019; Rafferty, 2018; SOAR, 2021; U.S. Department of Justice, 2020). These individuals advocated for the survivors' health and wellbeing, believed their disclosures, recognized the physical and behavioral CSEA indicators they exhibited, helped them escape their traffickers, and supported their recovery. For example: After enduring many years of CSEA and trafficking, Colin attempted suicide by deliberately overdosing on prescription drugs and lost consciousness, but was later revived in a hospital emergency room. His nurse recognized CSEA indicators and insisted with senior medical staff to refer him to other local authorities as a likely victim of abuse or trafficking. The nurse's actions directly facilitated Colin's eventual escape from trafficking, and this example demonstrates the importance of trauma-informed practices and of health professionals receiving training in how to better recognize CSEA and advocate for victims. Even if a child attends school, participates in extracurricular activities and returns home to their families every day, they may still exhibit physical, emotional, psychological or behavioral CSEA indicators. In such a case, a trauma-informed health care, mental health, child protection, education or law enforcement professional would be in a better position to recognize the indicators and identify the need to further examine the child's wellbeing and safety (Greenbaum, 2018).

6.2. Services for male CSEA and trafficking survivors

The limited availability of support services (Rafferty, 2018; Richie-Zavaleta et al., 2020) – such as specialized mental health counseling for survivors' post-trafficking recovery, remedial educational institutions for male trafficking survivors, grants and scholarships for male survivors applying to universities, or support groups for male survivors led by trauma-informed professionals – impedes survivors' ability to recover from their trauma and transition into adulthood, educate themselves and become gainfully employed. NGOs such as MaleSurvivor, MenHealing, 1in6, and the Men's Story Project (among others) provide community-based online platforms to support survivors at any point in their journeys to recovery. All 10 survivors reported feeling supported and experiencing a degree of healing when disclosing their abuse and trafficking experiences to other male CSEA and trafficking survivors in online and in-person support forums and events, a finding consistent with earlier research on survivor recovery processes (Kia-Keating et al., 2010, pp. 670, 672, 674). “Sharing our stories helps others while providing ourselves the critical insight to heal” (Lucas). The participants also reported that in-person support services provided by NGOs (for example: MatrixMen, The Hard Places Community, Kristi House, Giant Slayer Consulting, The B.U.D.D.Y. House, Bob's House of Hope, EMMAUS, among others), such as free counseling from trauma-informed professionals, the provision of safe temporary housing, and the organization of professional/life skill training programs helped them advance their healing.

6.3. Training for frontline professionals and service providers

Frontline professionals, educators and service providers in regular contact with children may benefit from receiving trauma-informed training on detecting intrafamilial CSEA (Kenny et al., 2019, p. 421; Salter et al., 2021, p. 15) - including content specific to boy victims - and supporting the recovery of male survivors of CSEA. Furthermore, the development of the curricula for these training courses may also be led by or co-produced with survivors, whose first-person experiences may provide unique insights for the course contents and further enrich the learning methodologies employed by instructors. Participants highlighted the need to train additional trauma-informed female service providers to accommodate male victims of CSEA and trafficking who may have become fearful of male service providers.

Due to my circumstances of severe trauma mostly by males ... I wish there had been female police officers I could have talked to. I didn't trust the men ... There have been times throughout my life when I was able to have good rapport with certain officers or detectives, but generally I am triggered by police presence unless the officer is female (Daphenne).

Numerous disclosures by the participants were dismissed and met with disbelief by medical staff, mental health professionals and law enforcement officers, whose skepticism and inability to properly detect their victimization suggests that all frontline professionals and service providers in close contact with boys should be cognizant of the societal and unconscious, internalized gender biases that may cause them to overlook male victimization and female criminality in CSEA cases. Training to raise awareness of such biases may help support professionals to remain objective during interactions with boys who exhibit significant CSEA indicators and/or disclose CSEA and trafficking experiences. More broadly, anti-trafficking initiatives by the public sector, private industry, NGOs and international organizations should also address familial CSEA perpetration.

6.4. Outreach to boy victims of familial CSEA and trafficking

Efforts to help potential victims identify themselves may be bolstered through tailored outreach initiatives conducted on social media platforms for children, children's television programs and school curriculums (elementary to high school). The messaging should include some tailored content specifically designed to target boys victimized by their families or by persons known to them. This outreach may use targeted online advertisements, television programming, or in-class discussions exhibiting language simple enough to help young boys enduring CSEA and trafficking to self-identify as victims, become aware of their rights and seek support through CSEA-specific phone helplines or civil society initiatives, such as ECPAT International's "Bill of Rights" project (ECPAT, 2021).

6.5. Further research

The body of literature on familial CSEA and trafficking would benefit from further research using co-productive approaches among practitioners, researchers and male survivors. More insight is needed into how and why mothers and female relatives become CSEA and trafficking perpetrators, as well as the degree to which women commit CSEA and trafficking crimes against boys. Finally, additional qualitative research into the processes and drivers through which boy victims transition from familial CSA into non-familial CSEA and trafficking would provide greater understanding of the diverse *modus operandi* employed by familial perpetrators to target, groom, and exploit boys for profit. Finally, it may be beneficial for future studies to consider - as was done in this study - using female researchers as the lead interviewers of male survivors, particularly those with intense fear of men.

6.6. Co-productive methodologies

The co-productive approach implemented by the research team in this study provided the survivors with the opportunity to voice their experiences, share first-person narratives or insights that influenced the questions asked in later rounds of interviews, and consent to the manner in which these experiences were summarized and described. Participants repeatedly expressed gratitude in being consulted and informed about all of the different phases in the research process and for being given the chance to confirm the accuracy of their statements prior to the study's final submission and publication. It may be beneficial for other researchers working with CSEA and trafficking survivors to build rapport with study participants by adopting similar co-productive approaches. Several participants reported experiencing therapeutic benefits by speaking out on their experiences and going through the co-productive process, knowing that the information could help advocates, professionals and children in the future.

7. Conclusion

This study reaffirmed the potentially life-long, detrimental psychological and physiological consequences of familial CSEA and trafficking for the survivors. The participants' accounts revealed numerous advantages for familial perpetrators of CSEA and trafficking of boys which help them conceal their activities and engineer barriers that dissuade disclosures by their victims. Findings underscored the importance of trauma-informed training on gender biases, familial CSEA and its indicators for educators, law enforcement officers, mental health professionals, child protection specialists and medical staff who may be in a position to identify boys being sexually exploited by their families.

Data availability

The data that has been used is confidential.

Acknowledgements

The authors would like to thank the 10 survivors for their bravery and commitment during this research project.

References

- Allert, J. L. (2022). Justice professionals' lens on familial trafficking cases. *Criminal Justice Review*, 47(2), 208–224. <https://doi.org/10.1177/07340168211024719>
- Amann, J., & Sleigh, J. (2021). Too vulnerable to involve? Challenges of engaging vulnerable groups in the co-production of public services through research. *International Journal of Public Administration*, 44(9), 715–727. <https://doi.org/10.1080/01900692.2021.1912089>. <https://bit.ly/3qfTPXj>
- Baker, A. W., & Duncan, S. P. (1985). Child sexual abuse: A study of prevalence in Great Britain. *Child Abuse & Neglect*, 9(4), 457–467. <https://bit.ly/3MP9WYq>.
- Baumeister, R. F., & Campbell, W. K. (1999). The intrinsic appeal of evil: Sadism, sensational thrills, and threatened egotism. *Personality and Social Psychology Review*, 3(3), 210–221. <https://bit.ly/3xKmEDA>.
- Beech, A., Hooper, B., Lewington, K., Marcarian, R., Phillips, R., & Mathews, P. (2018). *Boys 2. Development of tools and resources to better identify and engage 'young males' at risk of child sexual exploitation and child sexual abuse*. Home Office and Barnardo's. <https://bit.ly/3xOOg9w>.
- Berelowitz, S., Clifton, J., Firimin, C., Gulyurtlu, S., & Edwards, G. (2013). *If only someone had listened: Office of the Children's Commissioner's inquiry into child sexual exploitation in gangs and groups*. London: Office of the Children's Commissioner. <https://bit.ly/39kJ8St>.
- Black, C. A., & DeBlassie, R. R. (1993). Sexual abuse in male children and adolescents: Indicators, effects, and treatments. *Adolescence*, 28(109), 123–133. <https://bit.ly/3NjVaZZ>.
- Blanco, L., Nydegger, L. A., Camarillo, G., Trinidad, D. R., Schramm, E., & Ames, S. L. (2015). Neurological changes in brain structure and functions among individuals with a history of childhood sexual abuse: A review. *Neuroscience & Biobehavioral Reviews*, 57, 63–69. <https://bit.ly/3zU4HCd>.

- Bunting, L. (2007). Dealing with a problem that doesn't exist? Professional responses to female perpetrated child sexual abuse. *Child Abuse Review: Journal of the British Association for the Study and Prevention of Child Abuse and Neglect*, 16(4), 252–267. <https://bit.ly/3txEMyI>.
- Burgess, A. W., Hartman, C. R., McCausland, M. P., & Powers, P. (1984). Response patterns in children and adolescents exploited through sex rings and pornography. *The American Journal of Psychiatry*, 141(5), 656–662. <https://bit.ly/3QmaSGG>.
- Caine, V., Estefan, A., & Clandinin, D. J. (2020). In P. Atkinson, S. Delamont, A. Cernat, J. W. Sakshaug, & R. A. Williams (Eds.), *Ser. Narrative research* Narrative inquiry. SAGE Publications. <https://bit.ly/3yhSiZy>.
- Carter, N., Bryant-Lukosius, D., DiCenso, A., Blythe, J., & Neville, A. J. (2014). The use of triangulation in qualitative research. *Oncology Nursing Forum*, 41(5), 545–547. <https://bit.ly/3u1leT3>.
- Casassa, K., Knight, L., & Mengo, C. (2021). Trauma bonding perspectives from service providers and survivors of sex trafficking: A scoping review. *Trauma, Violence, & Abuse*, 23(3), 969–984. <https://bit.ly/3xiF3Gg>.
- Cashmore, J., & Shackel, R. (2014). Gender differences in the context and consequences of child sexual abuse. *Current Issues in Criminal Justice*, 26(1), 75–104. <https://bit.ly/3NSz4iC>.
- Center for Substance Abuse Treatment. (2014). In *Trauma-informed care in behavioral health services: Understanding the impact of trauma*. Substance Abuse and Mental Health Services Administration, Treatment Improvement Protocol (p. 57). <https://bit.ly/3HgjoZe>.
- Centers for Disease Control and Prevention (CDC). (2020). 6 guiding principles to a trauma-informed approach. <https://bit.ly/3qwSILR>.
- Child Rescue Coalition. (2021). Abuse by the book: Pedophiles share grooming manuals and learn to prey on children. <https://bit.ly/3sDEW7x>.
- Clandinin, D. J., & Connelly, F. M. (1988). Studying teachers knowledge of classrooms: Collaborative research, ethics, and the negotiations of narrative. *The Journal of Educational Thought*, 2, 269–282.
- Clandinin, D. J., & Connelly, F. M. (2000). *Narrative inquiry: Experience and story in qualitative research*. San Francisco, CA: Jossey-Bass.
- Cockbain, E., Ashby, M., & Brayley, H. (2017). Immateral boys? A large-scale exploration of gender-based differences in child sexual exploitation service users. *Sexual Abuse*, 29(7), 658–684. <https://bit.ly/3zRhHKX>.
- Cole, J., Sprang, G., Lee, R., & Cohen, J. (2016). The trauma of commercial sexual exploitation of youth: A comparison of CSE victims to sexual abuse victims in a clinical sample. *Journal of Interpersonal Violence*, 31(1), 122–146. <https://bit.ly/3OefCwg>.
- Counter-Trafficking Data Collaborative (CTDC). (2021). Global data hub on human trafficking. <https://bit.ly/3mFZacP>.
- Creighton, S. J. (1993). Organized abuse: NSPPC experience. *Child Abuse Review*, 2, 232–242. <https://bit.ly/3xL8Qsw>.
- Creswell, J. W., & Creswell, J. D. (2018). *Research design: Qualitative, quantitative, and mixed methods approaches*. Thousand Oaks, CA: Sage.
- Deliver Fund. (2021). Know the signs of human trafficking. <https://bit.ly/3pzlOW6>.
- Denzin, N. K. (1978). *The research act: A theoretical introduction to sociological methods* (2nd ed.).
- Denzin, N. K. (2012). Triangulation 2.0. *Journal of Mixed Methods Research*, 6, 80–88.
- DeYoung, M. (1989). World according to NAMBLA: Accounting for deviance. *Journal of Sociology and Social Welfare*, 16(1), 111–126. <https://bit.ly/33YwaXj>.
- Dietz, P., Hazelwood, R., & Warren, J. (1990). The sexually sadistic criminal and his offences. *The Bulletin of the American Academy of Psychiatry and the Law*, 18, 163–178. <https://bit.ly/3ObGsoN>.
- Downing, N. R., Akinlotan, M., & Thornhill, C. W. (2021). The impact of childhood sexual abuse and adverse childhood experiences on adult health related quality of life. *Child Abuse & Neglect*, 120(105181), 1–11.
- Doychak, K., & Raghavan, C. (2018). "No voice or vote:" Trauma-coerced attachment in victims of sex trafficking. *Journal of Human Trafficking*, 6(3), 339–357. <https://doi.org/10.1080/23322705.2018.1518625>. <https://bit.ly/3ECCBMe>
- ECPAT. (2021). *Bill of rights*. ECPAT International. <https://bit.ly/3nJ3yZc>.
- ECPAT, & INTERPOL. (2018). Towards a global indicator on unidentified victims in child sexual exploitation material. Technical report. <https://bit.ly/3155vHd>.
- Edwards, J. M., Iritani, B. J., & Hallfors, D. D. (2006). Prevalence and correlates of exchanging sex for drugs or money among adolescents in the United States. *Sexually Transmitted Infections*, 82(5), 354–358. <https://bit.ly/3NQX0mr>.
- Elliott, A. J., & Peterson, L. W. (1993). Maternal sexual abuse of male children: When to suspect and how to uncover it. *Postgraduate Medicine*, 94(1), 169–180. <https://bit.ly/3bmTu4N>.
- Everson, M. D., & Boat, B. W. (1989). False allegations of sexual abuse by children and adolescents. *Journal of the American Academy of Child & Adolescent Psychiatry*, 28(2), 230–235. <https://bit.ly/3Oopu75>.
- FBI. (2008). Extract of Federal Bureau of Information (FBI) files on North American Man/Boy Love Association (NAMBLA), 1979 - 1986. <https://bit.ly/3JpvWsp>.
- FBI, & Lanning, K. (1992). *Child molesters: A behavioral analysis for law enforcement officers investigating cases of child sexual exploitation*. National Center for Missing & Exploited Children. <https://bit.ly/3EHvPoQ>.
- Finkelhor, D. (1990). Early and long-term effects of child sexual abuse: An update. *Professional Psychology: Research and Practice*, 21(5), 325–330. <https://bit.ly/3mKtCIQ>.
- Finkelhor, D. (1994). Current information on the scope and nature of child sexual abuse. *The Future of Children*, 4(2), 31–53. <https://bit.ly/3aTEJGM>.
- Franchino-Olsen, H. (2021). Vulnerabilities relevant for commercial sexual exploitation of children/domestic minor sex trafficking: A systematic review of risk factors. *Trauma, Violence, & Abuse*, 22(1), 99–111. <https://bit.ly/3n1Y8bb>.
- Giorgi, A. (1997). The theory, practice, and evaluation of the phenomenological method as a qualitative research procedure. *Phenomenological Psychology*, 28(2), 235–260.
- Goodman-Brown, T. B., Edelstein, R. S., Goodman, G. S., Jones, D. P., & Gordon, D. S. (2003). Why children tell: A model of children's disclosure of sexual abuse. *Child Abuse & Neglect*, 27(5), 525–540. <https://bit.ly/3zCjGm2>.
- Goodwin, J. M. (1993). Sadistic abuse: Definition, recognition, and treatment. *Dissociation: Progress in the Dissociative Disorders*, 6(2–3), 181–187. <https://bit.ly/3zATOag>.
- Greenbaum, J. (2018). Child sex trafficking and commercial sexual exploitation. *Advances in Pediatrics*, 65(1), 55–70. <https://bit.ly/3Qit4RG>.
- Hamilton, N. (2021). Redefining sex offenders: The fight to break the bias of female sex offenders. *Journal of Race, Gender, and Ethnicity*, 10, 88–97.
- Hill, L., & Diaz, C. (2021). An exploration of how gender stereotypes influence how practitioners identify and respond to victims (or those at risk) of child sexual exploitation. *Child & Family Social Work*, 26(4), 642–651. <https://bit.ly/3ttyIXt>.
- Hlavka, H. R. (2017). Speaking of stigma and the silence of shame: Young men and sexual victimization. SAGE Publications *Men and Masculinities*, 20(4), 482–505. <https://bit.ly/3xr3SzN>.
- Holmes, G., & Offen, L. (1996). Clinicians' hypotheses regarding clients' problems: Are they less likely to hypothesize sexual abuse in male compared to female clients? *Child Abuse & Neglect*, 20(6), 493–501. <https://bit.ly/3OHRgLO>.
- Iglesias-Rios, L., Harlow, S. D., Burgard, S. A., Kiss, L., & Zimmerman, C. (2018). A cross-sectional study. *Mental health, violence and psychological coercion among female and male trafficking survivors in the greater Mekong sub-region: A cross-sectional study*. <https://bit.ly/3wjXPgT>.
- Inter-agency Working Group on Sexual Exploitation of Children. (2016). Terminology guidelines for the protection of children from sexual exploitation and sexual abuse adopted by the Interagency Working Group in Luxembourg. <https://bit.ly/3z4fOIl>.
- INTERPOL. (2020). *Threats and trends child sexual exploitation and abuse: COVID-19 impact*. INTERPOL. <https://bit.ly/3HIdv2N>.
- Itzin, C. (1997). Pornography and the organization of intrafamilial and extrafamilial child sexual abuse: Developing a conceptual model. *Child Abuse Review*, 6, 94–106. <https://bit.ly/3O9IY03>.
- Itzin, C. (2001). Incest, paedophilia, pornography and prostitution: Making familial abusers more visible as the abusers. *Child Abuse Review*, 10, 35–48. <https://bit.ly/3aXRM9W>.
- Josenhans, V., Kavenagh, M., Smith, S., & Wekerle, C. (2020). Gender, rights and responsibilities: The need for a global analysis of the sexual exploitation of boys. *Child Abuse & Neglect*, 110(Pt 1), 104291–104291. <https://bit.ly/3mKdMaJ>.
- Kenny, M., Helpingstine, C., Long, H., Perez, L., & Harrington, M. C. (2019). Increasing child serving professionals' awareness and understanding of the commercial sexual exploitation of children. *Journal of Child Sexual Abuse*, 28(4), 417–434. <https://bit.ly/3xK8jqW>.

- Kia-Keating, M., Sorsoli, L., & Grossman, F. K. (2010). Relational challenges and recovery processes in male survivors of childhood sexual abuse. *Journal of Interpersonal Violence*, 25(4), 666–683. <https://bit.ly/3NQYr4j>.
- Krafft-Ebing, R.v. (1894). *Psychopathia Sexualis, with especial reference to contrary sexual instinct; A medico-legal study*. F.A Davis Co. Publishers. <https://bit.ly/39icfph>.
- Lanning, K. V., & Burgess, A. W. (1984). *Child pornography and sex rings*. Federal Bureau of Investigation, U.S. Dept. of Justice. <https://bit.ly/3aNnsyw>.
- Lessard, S., & Schaefer, L. (2016). Final report: A narrative inquiry into the experiences of urban Aboriginal youth and their families outside of school places. *The Urban Aboriginal Knowledge Network: Prairie Resource Centre*, 10(2), 271–285. <https://bit.ly/39jlshf>.
- Long, L. J. (2021). The ideal victim: A critical race theory (CRT) approach. *International Review of Victimology*, 27(3), 344–362. <https://bit.ly/3quJfze>.
- Malamuth, N. M. (2018). “Adding fuel to the fire”? Does exposure to non-consenting adult or to child pornography increase risk of sexual aggression? *Aggression and Violent Behavior*, 41, 74–89. <https://bit.ly/3FFCZ2W>.
- Matua, G. A., & Van Der Wal, D. M. (2015). Differentiating between descriptive and interpretive phenomenological research approaches. *Nurse Researcher*, 22(6), 22–27. <https://bit.ly/3sGbyxx>.
- Mayer, A. (1992). *Women sex offenders: Treatment and dynamics*. Holmes Beach, FL: Learning Publications. <https://bit.ly/3Oa1Uuq>.
- McLeod, D. A. (2015). Female offenders in child sexual abuse cases: A national picture. *Journal of Child Sexual Abuse*, 24(1), 97–114. <https://bit.ly/3ObH0Ln>.
- McNaughton Nicholls, C., Cockbain, E., Brayley, H., Harvey, S., & Fox, C. (2014). *Research on the sexual exploitation of boys and young men: A UK scoping study: Summary of findings*. Essex: Bernardos. <https://bit.ly/3aNrTt8>.
- McNaughton Nicholls, C., Harvey, S., & Paskell, C. (2014). *Gendered perceptions: What professionals say about the sexual exploitation of boys and young men in the UK*. Essex.
- Mitchell, K., Moynihan, M., Pitcher, C., Francis, A., English, A., & Saewyc, E. (2017). Rethinking research on sexual exploitation of boys: Methodological challenges and recommendations to optimize future knowledge generation. *Child Abuse & Neglect*, 66, 142–151. <https://bit.ly/3xMpCHJ>.
- Mitchell, K. J., Finkelhor, D., & Wolak, J. (2010). Conceptualizing juvenile prostitution as child maltreatment: Findings from the National Juvenile Prostitution Study. *Child Maltreatment*, 15(1), 18–36. <https://bit.ly/3zx6Oh2>.
- Moynihan, M., Mitchell, K., Pitcher, C., Havaei, F., Ferguson, M., & Saewyc, E. (2018). A systematic review of the state of the literature on sexually exploited boys internationally. *Child Abuse & Neglect*, 76, 440–451. <https://bit.ly/3NQuuB9>.
- Murase, H., Simons, R. M., & Simons, J. S. (2021). Distinct paths to alcohol problems: Impacts of childhood maltreatment, attachment insecurity, and interpersonal problems. *Addictive Behaviors*, 115. <https://doi.org/10.1016/j.addbeh.2020.106780> <https://bit.ly/3Hgs48>.
- Nasjleti, M. (1980). Suffering in silence: The male incest victim. *Child Welfare*, 59(5), 269–279. <https://bit.ly/3qvCmOj>.
- NCMEC. (2021a). National Center for Missing Exploited Children: Child sex trafficking. <https://bit.ly/3FBRFvb>.
- NCMEC. (2021b). By the numbers. <https://bit.ly/3g05KKK>.
- O’Leary, P., Easton, S. D., & Gould, N. (2017). The effect of child sexual abuse on men: Toward a male sensitive measure. *Journal of Interpersonal Violence*, 32(3), 423–445. <https://bit.ly/3txn4L4>.
- Oakley, L., Kinmond, K., & Humphreys, J. (2018). Spiritual abuse in Christian faith settings: Definition, policy and practice guidance. *The Journal of Adult Protection*, 20(3/4), 144–154. <https://bit.ly/3aUBVsK>.
- Office of the United Nations High Commissioner for Human Rights (OHCHR). (1989). Convention on the Rights of the Child. <https://bit.ly/3151lms>.
- Oram, S., Abas, M., Bick, D., French, R., Jakobowitz, S., & Zimmerman, C. (2016). Human trafficking and health: A survey of male and female survivors in England. *American Journal of Public Health*, 106(6), 1073–1078.
- Palfy, K. (2016). *Antecedents of non-disclosing among adult male survivors of sexual abuse*. Department of Educational Psychology. University of Alberta.
- Palinkas, L. A., Horwitz, S. M., Green, C. A., Wisdom, J. P., Duan, N., & Hoagwood, K. (2015). Purposeful sampling for qualitative data collection and analysis in mixed method implementation research. *Administration and Policy in Mental Health*, 42(5), 533–544. <https://bit.ly/3tz5OVS>.
- Pate, S. S., Anderson, V. R., Kulig, T. C., Wilkes, N., & Sullivan, C. J. (2021). Learning from child welfare case narratives: A directed content analysis of indicators for human trafficking. *Children and Youth Services Review*, 121. <https://doi.org/10.1016/j.childyouth.2020.105838>. <https://bit.ly/3JoAWNY>.
- Patton, M. Q. (2002). *Qualitative research and evaluation methods* (3rd ed.). Thousand Oaks, CA: Sage.
- Patton, M. Q. (2015). *Qualitative research & evaluation methods: Integrating theory and practice: The definitive text of qualitative inquiry frameworks and options*. Thousand Oaks, CA: SAGE Publications.
- Price-Robertson, R. (2012). Child sexual abuse, masculinity and fatherhood. *Journal of Family Studies*, 18(2–3), 130–142. <https://bit.ly/3O3joIW>.
- Procopio, S. (2018). Big boys don’t cry: The sexual victimization of males. *Human Trafficking Task Force*.
- Quayle, E. (2008). The COPINE project. *Irish Probation Journal*, 5, 65–83. <https://bit.ly/3HnOpVY>.
- Rafferty, Y. (2018). Mental health services as a vital component of psychosocial recovery for victims of child trafficking for commercial sexual exploitation. *American Journal of Orthopsychiatry*, 88(3), 249–260. <https://bit.ly/3xMr2C3>.
- Rambhatla, R., Jamgochian, M., Ricco, C., Shah, R., Ghani, H., Silence, C., & Kourosh, A. S. (2021). Identification of skin signs in human-trafficking survivors. *International Journal of Womens Dermatology*, 7(5), 677–682. <https://doi.org/10.1016/j.ijwd.2021.09.011>. <https://bit.ly/3qy3jko>.
- Reid, J. A., Baglivio, M. T., Piquero, A. R., Greenwald, M. A., & Epps, N. (2017). Human trafficking of minors and childhood adversity in Florida. *American Journal of Public Health*, 107(2), 306–311. <https://bit.ly/3xMHK4s>.
- Richie-Zavaleta, A. C., Baranik, S., Mersch, S., Ataiants, J., & Rhodes, S. M. (2020). From victimization to restoration: Multi-disciplinary collaborative approaches to care and support victims and survivors of human trafficking. *Journal of Human Trafficking*, 7(3), 291–307. <https://doi.org/10.1080/23322705.2020.1730132>. <https://bit.ly/32HZOzk>.
- Romano, E., Moorman, J., Ressel, M., & Lyons, J. (2019). Men with childhood sexual abuse histories: Disclosure experiences and links with mental health. *Child Abuse & Neglect*, 89, 212–224. <https://bit.ly/3A1tXbJ>.
- Royal Canadian Mounted Police Government of Canada (RCMP). (2021). Recognizing human trafficking victims. <https://bit.ly/3FG6Kf6>.
- Salter, M. (2012a). *Organised sexual abuse*. Routledge. <https://bit.ly/3HrCy9m>.
- Salter, M. (2012b). The role of ritual in the organised abuse of children. *Child Abuse Review*, 21(6), 440–451. <https://bit.ly/3QmyivC>.
- Salter, M. (2017a). Organized child sexual abuse in the media. *Oxford Research Encyclopedia of Criminology and Criminal Justice*. <https://bit.ly/3OaEMvH>.
- Salter, M. (2017b). Organized abuse in adulthood: Survivor and professional perspectives. *Journal of Trauma & Dissociation*, 18(3), 441–453. <https://doi.org/10.1080/15299732.2017.1295426>. <https://bit.ly/3O4Qc4R>.
- Salter, M., Wong, W. T., Breckenridge, J., Scott, S., Cooper, S., & Peleg, N. (2021). Production and distribution of child sexual abuse material by parental figures. *Trends and Issues in Crime and Criminal Justice*, 616, 1–17. <https://bit.ly/3MNkd2D>.
- Sarson, J., & Macdonald, L. (2008). Ritual abuse-torture within families/groups. *Journal of Aggression, Maltreatment & Trauma*, 16(4), 419–438. <https://doi.org/10.1080/10926770801926146>. <https://bit.ly/3eyHueJ>.
- Sebold, J. (1987). Indicators of child sexual abuse in males. *Social Casework*, 68(2), 75–80. <https://bit.ly/3bw1LUd>.
- Seto, M., Buckman, C., Dwyer, R., & Quayle, E. (2018). *Production and active trading of child sexual exploitation images depicting identified victims*. Virginia: NCMEC.
- Shengold, L. L. (1979). Child abuse and deprivation: Soul murder. *Journal of the American Psychoanalytic Association*, 27(3), 533–559. <https://bit.ly/3tANziN>.
- Shiu, M. H. (2008). Unwarranted skepticism: The federal courts’ treatment of child sexual abuse accommodations syndrome. *Southern California Interdisciplinary Law Journal*, 18, 651. <https://bit.ly/3xWLF74>.
- Shon, L., & Tewksbury, R. (2021). Constructing a typology of male-on-male child molestation: A qualitative analysis of victims’ narratives within the Boy Scouts of America. *The Journal of Sexual Aggression*, 27(3), 338–352. <https://bit.ly/3zB4ndL>.
- Smiragina-Ingelstrom, P. (2020). *Human Trafficking of Men: A Gendered Perspective on Victimhood*. <https://bit.ly/3CD0BBV>.
- SOAR. (2021). Providing trauma-informed care: National Human Trafficking Training and Technical Assistance Center. <https://bit.ly/3z3kT3y>.
- Solomon, R. L. (1980). The opponent-process theory of acquired motivation: The costs of pleasure and the benefits of pain. *American Psychologist*, 35(8), 691–712.
- Sprang, G., & Cole, J. (2018). Familial sex trafficking of minors: Trafficking conditions, clinical presentation, and system involvement. *Journal of Family Violence*, 33(3), 185–195. <https://bit.ly/3z5dktd>.

- Surtees, R., & Brunovskis, A. (2015). Doing no harm—ethical challenges in research with trafficked persons. *Studies of Organized Crime*, 137–154. <https://bit.ly/39olmoE>.
- Szymanski, K., Sapanski, L., & Conway, F. (2011). Trauma and ADHD – Association or diagnostic confusion? A clinical perspective. *Journal of Infant, Child, and Adolescent Psychotherapy*, 10(1), 51–59. <https://bit.ly/33hYjZl>.
- Todres, J. (2015). Human trafficking and film: How popular portrayals influence law and public perception. *Georgia State University College of Law*, 101, 1–22. <https://bit.ly/3sKwWBB>.
- Turton, J. (2010). Female sexual abusers: Assessing the risk. *International Journal of Law, Crime and Justice*, 38(4), 279–293. <https://bit.ly/3tzIeYW>.
- Twardosz, S., & Lutzker, J. R. (2010). Child maltreatment and the developing brain: A review of neuroscience perspectives. *Aggression and Violent Behavior*, 15(1), 59–68. <https://bit.ly/3n21meN>.
- U.S. Department of Justice. (2020). Trauma-informed care for survivors of human trafficking. A state of the field in 2019. <https://bit.ly/3EBi7DF>.
- U.S. Department of State. (2021). *Navigating the unique complexities in familial trafficking*. United States Department of State. <https://bit.ly/32La36h>.
- Ullman, S. E. (2007). Relationship to perpetrator, disclosure, social reactions, and PTSD symptoms in child sexual abuse survivors. *Journal of Child Sexual Abuse*, 16(1), 19–36. https://doi.org/10.1300/J070v16n01_02. <https://bit.ly/319i6JC>.
- United Nations Inter-Agency Project on Human Trafficking (UNIAP). (2008). Guide to ethics and human rights in counter- trafficking. <https://bit.ly/39paR4l>.
- UNODC. (2008). *Human trafficking indicators*. United Nations Office of Drugs and Crime. <https://bit.ly/3HS9XtY>.
- Van der Kolk, B., McFarlane, A. C., & Weisæth, L. (2007). *Traumatic stress: The effects of overwhelming experience on mind, body, and society*. Guilford Press.
- WeProtect Global Alliance. (2021). *Global threat assessment 2021*. WeProtect Global Alliance. <https://bit.ly/3o6ipgC>.
- Wild, N. J., & Wynne, J. M. (1986). Child sex rings. *The British Medical Journal*, 293, 183–185. <https://bit.ly/3mGQnar>.
- Zack, E., Lang, J. T., & Dirks, D. (2018). “It must be great being a female pedophile!”: The nature of public perceptions about female teacher sex offenders. *Crime, Media, Culture*, 14(1), 61–79. <https://bit.ly/3FDulwS>.