The Needs and Stories of Male Survivors of Child Sexual Abuse, Exploitation and Human Trafficking

by

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COMMITTEE APPROVAL

The members of Ena Lucia Mariaca Pacheco's Thesis Committee certify that they have read the thesis titled The Needs and Stories of Male Survivors of Child Sexual Abuse, Exploitation and Human Trafficking and recommend that it be accepted as fulfilling the thesis requirements for the Degree of Master of Arts in Human Security and Peacebuilding.

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Abstract

The process of identifying a male victim of child sexual abuse and exploitation (CSEA) is difficult for both the survivor and frontline professionals. Boys and men face multiple barriers to disclosure of their childhood sexual abuse and exploitation and experience various negative and detrimental effects that can cause re-traumatization and stop a male victim from finding and accessing support. This exploratory research interviewed first-hand accounts of 40 male survivors of child sexual abuse and exploitation, and 30 field experts specializing in male child sexual abuse and human trafficking. This study uncovers and identifies the social interactions that harm and aid male survivor recovery and healing, as well as further exploring the barriers that hinder disclosure. In addition, it identifies several indicators and long-term consequences of child sexual abuse and exploitation seen within male children and in adulthood. This study also explores various modus operandi of male victimization from the starting age of their first instance of abuse and length of abuse for male victims. This paper also examines the roles played by female CSEA perpetrators, including the characteristics of female abusers, traffickers, and buyers (exploiters and abusers). Furthermore, it discusses the methodologies which drive cyber-enabled CSEA and the creation of online child sexual abuse materials (CSAM). This research highlights the importance of trauma-informed training, personal reflection on potential biases that could harm male survivors, and the importance of increasing frontline service providers' knowledge on male sexual violence symptomology, to better support male victims and survivors towards post-traumatic growth and healing.

Keywords: Male victims, male survivors, LGBTIQIA2S+, human trafficking, child sexual abuse, sexual exploitation, trauma-informed training, biases.

Statement of Originality

This is to certify that to the best of my knowledge the content of this thesis is my own work. This thesis has not been submitted for any degree or other purposes.

I certify that the intellectual content of this thesis is the product of my own work and that all the assistance received in preparing this thesis and sources have been acknowledged.

Ena Lucia Mariaca Pacheco

Preface

This paper is 12 years in the making, and it aims to fill in gaps in academia by learning from male victims and survivors of child sexual abuse and exploitation through trafficking. This journey began when I was introduced to the world of slavery - I was 16 years old when I saw Love146's (2013) video on the human sex trafficking of children - breaking my heart and leading me to want to know more, to do more. I first witnessed evidence of human trafficking during a humanitarian aid mission to Cambodia several years ago. Our team identified several karaoke bars in Phnom Penh, which openly sold sexual "services" with children. Small menus written in black marker listed many forms of abuse and exploitation on sale for only a few dollars. The kids sat closely together on dirty couches, and each of their shirts was marked with a number to help 'customers' (Transnational Child Sex Offenders) select their preferred victims. Our Cambodian contacts then told us that there was nothing we could do to stop these crimes at that time. This terrifying experience marked the moment where I decided to dedicate myself to the fight against the sexual exploitation and trafficking of children. After this trip, I decided to do a Master of Arts in Human Security and focus on human trafficking; however, it was not until speaking to former member of the Canadian Parliament Joy Smith about what was needed and missing that I decided to focus on male victims of this crime. Moving forward two years, I began my internship at INTERPOL and discovered a report on online-facilitated child sexual abuse (INTERPOL, 2018), which highlighted how the youngest male victims were among those who received the harshest forms of abuse and torture. All these moments lead me on the journey to writing this Master thesis and igniting a passion to help raise up voices that have been silenced.

Ethics Approval

This thesis is an original work by Ena Lucia Mariaca Pacheco. The research project received ethics approval from the Royal Roads University Research Ethics Board (RRU REB) for the research project previously known as *The Forgotten Statistic: The needs and stories of male trafficking survivors in North America* – new title: *The Needs and Stories of Male Survivors of Child Sexual Abuse, Exploitation & Human Trafficking*, in accordance with TCPS 2 (2018) Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans and RRU Research Ethics Policy.

Approval was granted on March 22, 2020, with a review of amendments occurring on November 29, 2020. Final revisions were recorded with the RRU REB on February 12, 2021.

Recruitment of RRU student participants at Royal Roads University was approved by the Academic and Provost Dr. Veronica Thompson and endorsed by Mary Bernard, Research Ethics Board Chair on March 15, 2021.

Please see Appendix 12 for Ethics Approval Documentation.

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I would like to thank MaleSurvivor.org for promoting this research and for allowing me to recruit participants through their social media and website chat forums. I would also like to thank MatrixMen for assisting in this research by sharing this project with other survivors and providing me information on victimology and its effects on health. I would also like to thank The Hard Place Community for aiding in this research, as well as 1in6, Men's Story Project, and MenHealing for providing a platform for men to

share their stories of healing in the public storytelling series on Zoom. It was an honor to attend and support survivors, especially participants in this research project.

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To my partner: I would like to thank Andrés Eduardo Buenaventura for all his unconditional love and incredible support. You are my partner in every sense of the word.

To all my friends and family: Thank you for your support, interest, and belief in this project.

To the woman that inspired me and took a chance: Thank you to Joy Smith. Thank you for taking me on as your researcher during your years as a Member of the Canadian Parliament in the House of Commons. Those projects not only taught me the skills needed for this project but inspired me to continue following the path of anti-trafficking. Thank you for the phone call, brainstorming topics to research, and ultimately telling me about male victims. I wish you all the best with the Joy Smith Foundation. May we work together again in the future.

To my university: I would like to thank Sarah Chettleburgh for her constant advice and support. I would also like to thank the Royal Roads University Ethics Board for its continuous support and dedication over the years, enabling me to use the firsthand accounts of survivors in this research. Finally, a thank you to the Royal Roads University School of Humanitarian Studies and all my professors that supported and trained me to do this research project.

Land Acknowledgement

Hay'sxw'qa si'em nakwilia

I acknowledge that the university in which I received this Master of Arts Degree is on the Traditional Lands of the Xwsepsum (Esquimalt) and Lekwungen (Songhees) ancestors and families.

With gratitude, I learned here where the past, present, and future of Indigenous and non-Indigenous students, faculty, and staff come together.

Thank you

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Trigger Warning

This entire thesis discusses multiple forms of sexual violence towards male children, including incest, sexual exploitation through trafficking, and online-facilitated child sexual abuse. It is suggested that you take this into consideration before and as your read this research paper. If any of this content becomes overwhelming emotionally triggering, it is recommended to seek support.

"…… I was just a kid.

I was 2 years old when the sexual abuse began.

I was 3 years old when I was trafficked.

I was 1 month old.	I was 6 months old.	I was 7 months old.
I was 2 years old.	I was 2 years old.	I was 2 years old.
I was 3 years old.	I was 3 years old.	I was 3 years old.
I was 4 years old.	I was 4 years old.	I was 4 years old.
I was 4 years old.	I was 4 years old.	I was 5 years old.
I was 5 years old.	I was 6 years old.	I was 6 years old.
I was 6 years old.	I was 6 years old.	I was 6 years old.
I was 6 years old.	I was 7 years old.	I was 7 years old.
I was 7 years old.	I was 8 years old.	I was 8 years old.
I was 8 years old.	I was 8 years old.	I was 9 years old.
I was 10 years old.	I was 10.5 years old.	I was 11 years old.
I was 12 years old.	I was 12 years old.	I was 17 years old.

And it happened more than once. This went on for years.

It was my mom.

It was my dad.

It was my grandmother.

It was my grandfather.

It was my aunt.

It was my cousin.

It was my neighborhood aunty.

It was someone I thought was my friend.

It was my teacher.

It was my doctor.

It was my camp counselor.

It was my Boy Scout leader.

It was the priest at my church.

It was my parent's friends.

I was abducted and it was for strangers.

It was for businessmen, lawyers, and political figures.

It was Hollywood-casting directors.

It was an Olympic coach and his staff.

I have been so scared to tell anyone this story.

It feels like no one ever cared to know.

I feel like no one would ever believe me.

No one wanted to listen to me."

- Quotes taken from the male survivor participants from this research.

Chapter I - Introduction

"Survivors are the real experts; their lived experience and their perspectives can help inform our policies and our legislation and make them more effective. Survivor engagement is important in building effective victim-centered trauma-informed anti-trafficking strategies that address prevention and protection, including reducing demand, assisting victims, and promoting more effective prosecution of the perpetrators."

– US Congressman Christopher Smith (Smith, 2021, 4:00)

Child sexual abuse and exploitation (CSEA) of boys has been mostly ignored and deliberately unacknowledged by society (Desai, 2001, p. 4). Child sexual abuse (CSA) is not merely an instance of touching a child inappropriately, in fact it is often entangled with other forms of abuse, whether it is physical or verbal attacks, emotional manipulation, or gaslighting a child to believe that their reality of the abuse is not actually what has happened (Franchino-Olsen, 2021; Mitchell et al., 2017; Nasjleti, 1980). However, child sexual abuse (CSA) can also intersect with sexual exploitation, human trafficking, torture, violent assault, and even death (Dietz et al., 1990; Goodwin, 1993; Salter, 2012).

Article 34 of the United Nation's Convention on the Rights of the Child states that children shall be protected "against all forms of sexual exploitation and sexual abuse", and Article 35 continues, "all appropriate measures should be taken to prevent the abduction of, the sale of or traffic in children for any purpose or in any form" (OHCHR, 1990). According to the United States State Department, in 2019 there were over 24.9 million people trafficked globally (US Trafficking in Persons Report, 2019). Based on statistics from the International Labor Organization (2017),

71% of trafficked victims are women and girls, 29% are men and boys, with 15.4 million victims (75%) aged 18 or older, and 5.5 million (25%) aged below 18 years (International Labor Organization, 2017). However, after COVID-19, it is estimated that 49.6 million people are now living in modern slavery, of which 27.6 million are in forced labour (International Labor Organization, 2022). Of the 27.6 million people in forced labour, 6.3 million are trafficked and forced into commercial sexual exploitation. This is a clear indication that that human trafficking and slavery are increasing.

However, the statistical numbers in human trafficking cases face a survivor bias, only counting those that come forth, seek help, and are believed to be victims by frontline professions such as law enforcement; therefore, statistics will always be under-reported (Goodey, 2008). Additionally, survivors face multiple barriers to be considered a victim, including societal biases against them, especially if they are male victims of sexual violence (Doychak & Raghavan, 2018; Hill & Diaz, 2021; Hlavka, 2017; Josenhans et al., 2020, Palfy, 2016). Child sexual abuse and exploitation through human trafficking has focused primarily on female victimization and male perpetration. (Mitchell et al., 2017; Nasjleti, 1980; Procopio, 2018). According to Hebert (2016), human trafficking has a gender-bias, which has been reinforced by the social narrative that males are perpetrators and females are victims (Hebert, 2016, p. 282), thus, creating preconceptions against males that are sexually victimized, and a socially established ‘blinder’ for female perpetrators that are abusers, traffickers, and buyers (Herbert, 2016).

In 1886 the first reference to the term sadism was found in ‘*Psychopathia Sexualis’* a phenomenon described by scholarly inquiries into the pathological human sexual behavior; and associated with sexual pathology included the sexual exploitation of underage boys by adults

(Krafft-Ebing, 1894). Social cognitive biases (Janoff-Bulman et al., 1985) are contrary to the academic study of CSA of boys by adult perpetrators which has been described by scholarly inquiries of human sexual behavior over a hundred years ago (Krafft-Ebing, 1894). These narrow social concepts have led to an inaccurate representation of the current realities of child sexual abuse and exploitation (CSEA) of male victims; and has influenced the extent of academic inquiry into a deeper understanding of sexual violence towards males, which continues to be relatively unknown and poorly understood in comparison to the study of the sexual abuse and sexual violence perpetrated on women and female children (Hlavka, 2017; Josenhans et al., 2020; Michell et al., 2017; Salter, 2012; Todres, 2015).

A consequence of this narrow focus is demonstrated by professionals on the frontlines; when confronted with a male victim of CSA or CSEA frontline professionals and service providers are less likely to examine a boy's welfare and safety even if they are showing indicators of the most severe forms of sexual violence (Hill & Diaz, 2021; Procopio, 2018), as girls are more likely to be considered victims (Hill & Diaz, 2021; McNaughton Nicholls et al., 2014a). The idea that 'boys are strong, can look after themselves, and do not need help in the same way as girls', are socially created gender stereotypes that may impede professional judgement when a service provider is faced with a male child victim (Berelowitz et al., 2013; Cockbain et al., 2017; Hill & Diaz, 2021; Josenhans et al., 2020; McNaughton Nicholls et al., 2014a; Procopio, 2018). Common assumptions of a boy's behavior, their presumed resilience, and their sexuality can hinder a person's ability to recognize indicators of child sexual abuse and/or exploitation (Hamilton, 2021; Hill & Diaz, 2021; McNaughton Nicholls et al., 2014a; McNaughton Nicholls et al., 2014b; Mitchell et al., 2017; Zack, 2018); which has led to inadequate recognition and response for boy

victims and survivors of child sexual abuse and exploitation (Berelowitz et al., 2013; Cockbain et al., 2017; Hill & Diaz, 2021; Josenhans et al., 2020; McNaughton Nicholls et al., 2014a).

In recent years reporting on male sexual abuse has increased, yet the time between the initial CSA and disclosure of the sexual abuse and/or exploitation can be decades, leading to mass under-reporting (O'Leary & Barber, 2008, Palfy, 2016; Sorsoli et al., 2008). Male victims face numerous complex barriers to disclosure, such as vulnerability which are incompatible with the dominant narratives on heteronormative masculinity, (Hill et al., 2021; Hlavka, 2017; Josenhans et al., 2020; Mayer, 1992), in addition to physiological and psychological barriers to disclosure, such as dissociation and locked-memories, and avoidant behaviours based on fear, shame, guilt, and aggressive behavioral manifestations (Palfy, 2016 p. 2; Price-Robertson, 2012; van der Kolk et al., 2007).

The research question of this study aimed at understanding and describing the needs and stories of male victims and survivors of child sexual abuse, and human trafficking for sexual exploitation. The exploratory study further investigates internal and external factors that contribute to non-disclosure of CSEA, in addition to factors that have both negatively and positively influenced the survivor participants in their healing journey. The purpose of understanding the survivor participant's needs and their stories are to inform frontline professionals on protective measures, policies, practices, and rehabilitation processes for that positively impact victims and survivors. Additionally, for this study, the definition of the term 'victim' refers to someone that has recently been affected by sexual violence or is currently being victimized. 'Survivor' will refer to someone who has undergone or is going through a recovery and healing process.

This research has identified that there is a large gap in the understanding of how and why male child victims of child sexual abuse, and human trafficking for sexual exploitation seek (or do not seek) support. Through actively listening to male survivors, new indicators of CSA/CSEA were identified, to provide a deeper understanding of the signs shown by CSA and CSEA victims in childhood and adulthood. This paper highlights that there is a need for continued focus on trauma-informed and survivor-centric practices to help facilitate disclosure (Palfy, 2016, p. 2), in order to increase earlier identification and responsiveness with the aim of aiding in post-traumatic growth (Calhoun & Tedeschi, 2014; Tedeschi & Calhoun, 2004) rather than potential re-victimization and re-traumatization of a male victim or survivor.

In this thesis, the following will be covered: Chapter II will examine the academic literature on male child sexual abuse, human trafficking for sexual exploitation, followed by a review of indicators, an examination of global-south reports, cyber-exploitation, female offenders, and physiological barriers. Chapter III will outline the transformative social justice framework and exploratory design of the research methodology that was used to conduct this research, in addition to the ethical practices needed to conduct research on this vulnerable group. Chapter IV features the narratives of participants and the research findings. Chapter V focuses on a discussion of this research within the larger body of academic literature. Chapter VI discusses the recommendations for future research, personal reflections of the research process and the conclusion.

Chapter II - Literature Review

This literature review consists of peer-reviewed academic articles and grey literature from policy and law enforcement documents, international databases, international and regional non-governmental organizations (NGOs) research projects and papers, and front-line reports by experts which focused on male child sexual abuse (CSA) and child sexual exploitation through human trafficking (CSEA). The rationale for reviewing both CSA and CSEA is the connection which all CSEA survivors had in common, i.e., earlier reports of CSA that progressed into exploitation. This review will describe how societal biases against male victims have led to their 'invisibility' within the social justice system, which increases their vulnerability and risk for exploitation, and re-victimization when seeking support and help during and after their CSEA.

Gender biases and the invisibility of male victims

Victims and perpetrators of sexual abuse or trafficking often follow a pre-set typology that has been socially constructed. This social construction has remained throughout the decades, as seen within the theorists mentioned below. Christie (1986) theorizes the ideal victim of a crime. He explains how the personal characteristic of a victim and their offender, as well as the circumstances of the crime, play a strong role in influencing society's ability to understand, empathize, and accept people who have experienced abuse as victims. In Christie's article, the 'ideal' victim also intersects with the cultural ideals of victimhood, which manifests as "weak – elderly, sick, or very young" (Christie, 1986, p. 17). According to Christie, the victim must also be engaged in a respectable activity that is characterized by innocence and remains unknown to the perpetrator (Christie, 1986, p. 18). Consequently, the victim has not precipitated their own victimization, and is therefore seen as not deserving of the crime" (Christie, 1986, p. 19). In

Christie's article, the victim is also referred to as 'she', aligning with assumed feminine traits of a victim (Christie, 1986; Long, 2021, pp. 349-350). Assumptions of victimhood also incorporate ethnic bias, for instance, Long (2021) suggests,

> When Black people report being a victim of crime they are often treated as a suspect. This is manifested in the failure of the police to take the complaint seriously, particularly when the offender is White and, most significantly, when the perpetrator is a white female (Long, 2021, p. 348).

In parallel, the socially constructed 'ideal' of how an offender is defined, is also based on 'who' is not considered as an offender, and their 'ideal' characteristics, as Christie posits 'the ideal offender differs from the victim' (Christie, 1986, p.25). Both Christie and Long highlight that femininity is associated with victimhood and is not associated with the construct of the 'ideal offender' (Christie, 1986, pp. 25-26; Long, 2021, p. 353). The degree of gender bias varies by the type of criminal offence that can result in public sympathies or misperception (Christie, 1986; Zack et al., 2018). Thus, an 'ideal' victim is assumed to possess the characteristics of 'innocence, weakness, blamelessness, and being female', undeniably dismissing the victimhood status of male victims (Christie, 1986).

Dennis (2008) argues that academic literature created the "ideal type" of victim by authors who discuss sex work without collecting their own field observation data or first-hand testimony through interviews (Dennis, 2008, p. 17). This has created a one-sided point of view in which sex workers have been assumed to be female, resulting in this form of typification to be reductive (Dennis, 2008, p. 17). Edlund and Korn (2002, p. 181) defined prostitution as "low-skill, labor-intensive, female, and well paid". Edlund and Korn suggested that prostitution is a form of

reproductive domination, socially controlled by men, and done to women through “heterosexual prostitution” (Edlund & Korn, 2002, p. 184). This definition omits the male experience and illustrates the viewpoint of numerous scholars, political actors, and the media in their portrayal of women and sexual exploitation. However, these theoretical roots of thinking, may also be seen as anti-feminist (i.e., women are too fragile to be perpetrators), resulting in female victims of female perpetrators also not being acknowledged.

These theories about the ideal victim, seen through this lens, alter the perception of the crime of child sexual abuse and human trafficking for sexual exploitation, and provide a deeper understanding of the invisibility of male victims (Smiragina, 2015, p. 240). Smiragina (2015) details how “human trafficking has been defined in national and international law from the gendered ways in which victimhood is understood and experienced” (Smiragina, 2015, p. 7). Smiragina demonstrates how male victims have become invisible in this discourse, rendering their victimhood impossible. The conception of ‘victim’ in the minds of frontline professional are “interactionally constructed and largely dismisses the possibility of men attaining victimhood status as a result of human trafficking” (Smiragina, 2015, p. 240). Smiragina identifies and proves in her work that the continuous misidentification of male victims is “reproduced in policy and advocacy and is mirrored in the practices of care in assisting trafficked men” (Smiragina, 2015, p. 7). The above authors illustrate the this ‘invisibility’ that sexual violence on male victims has within society prevents victims from being identified as such; however, the significance of these arguments give insight into why male victims and survivors may choose to not disclose, or additionally, not even know themselves that they are victims of sexual violence as society rejects their vulnerability.

Another example of failing to recognize male victimization can be seen within the proceedings of the United Nations 4th World Conference on Women (WCW) in Beijing, China in September 1995, where there was a specific focus on the 'girl child' during talks of action for equality, development, and peace (United Nations Organization Women Watch, 1995, Art. 259-285). UN Article 269 from the *Report of the Fourth World Conference on Women* states:

> Sexual violence and sexually transmitted diseases, including HIV/AIDS, have a devastating effect on children's health, *and girls are more vulnerable than boys* to the consequences of unprotected and premature sexual relations. Girls often face pressures to engage in sexual activity. Due to such factors as their youth, social pressures, lack of protective laws, or failure to enforce laws, *girls are more vulnerable to all kinds of violence, particularly sexual violence, including rape, sexual abuse, sexual exploitation, trafficking, possibly the sale of their organs and tissues, and forced labor* (United Nations, 1995, p.111).

In 2021, the United Nations Office of the United Nations High Commissioner for Human Rights (OHCHR) presented a report to the General Assembly, Resolution A/76/144, *Gender dimension of the sexual exploitation of children and the importance of integrating a child-centred and gender-inclusive approach to combating and eradicating it*, which recalled the Beijing Declaration and Platform for Action (OHCHR, 2021, p. 2), however, the new resolution still only mentioned boys three times, for example, within armed conflict situations stating: "violence against children, acknowledging that sexual violence in these situations disproportionately affects girls, but that boys are also targets" (OHCHR, 2021, p. 13), yet, emphasizing segments on violence against girls, on topics such as rape, sexual violence, sexual

abuse (OHCHR, 2021, pp. 5-6). Yet, it is not evident that one gender over another is not more vulnerable to *all* kinds of violence, as stated by the United Nations. The *2030 Agenda for Sustainable Development Goals* developed by the United Nations General Assembly in 2016 saw the adoption of gender equality in their policy and a focus on the empowerment of women. In the *2030 Agenda for Sustainable Development*, their 5th goal is to "achieve gender equality and empower all women and girls" (United Nations General Assembly, 2015, p.14), however, subsection 5.2 states that the sub-goal is to "eliminate all forms of violence against *all women and girls* in the public and private spheres, including trafficking and sexual and other types of exploitation" (United Nations General Assembly, 2015, p.18). This framework to eliminate all forms of sexual violence, such as human trafficking for sexual exploitation towards women and girls, with the goal to achieve gender equality, in some arenas could be construed as a form of gender inequality itself. For a widely known international body to not fully accept male victimhood in terms of sexual violence it may demonstrate why numerous male victims globally are not counted as such or self-identify as victims.

Currently, the way a victim is identified is through a female-centered abuse model (Procopio, 2018). This model portrays men as perpetrators and not as victims, and females are rarely considered sexual abusers. As a result, male victims may find themselves unable to seek support or to self-identify as victims of CSA or CSEA. Data from the National Human Trafficking Training and Technical Assistance Center (Procopio, 2018) finds that men often take twenty to thirty years after their last experience of CSA/CSEA to identify themselves as survivors of sexual abuse. Male victims often do not identify themselves as victims if they feel that they gave their 'consent', even if giving their 'consent' was done as an action for survival,

such as to obtain shelter or food, under threat or coercive control, or they were groomed (Procopio, 2018). Thus, many individuals regardless of gender may find it difficult to identify as a victim if they believe they gave their consent for sexual acts.

Faraldo-Cabana (2021) argues that in the past twenty-years, international and European legislators have implemented mechanisms and tools to protect victims and punish offenders (Faraldo-Cabana, 2021, p. 228). At the international level, the most relevant document is the *Protocol to Prevent, Suppress, and Punish Trafficking in Persons Especially Women and Children*, supplementing the *United Nations Convention against Transnational Organized Crime*, of 2000, also known as the *Palermo Protocol*. At the European level, the Council of Europe adopted the *Convention on Action against Trafficking in Human Beings* in 2005. Furthermore, the European Union first passed *Council Framework Decision 2002/629/JHA* on 19 July 2002 to combat trafficking of human beings. This instrument was later replaced by *Directive 2011/36/EU* of the European Parliament and of the Council of 5 April 2011 on preventing and combating the trafficking of human beings and protecting its victims as an anti-trafficking directive (Faraldo-Cabana, 2021, p. 228). It was unanimously recognized that signatory states had unevenly implemented the requirements imposed by these instruments, particularly regarding the gender dimension of trafficking in human beings (Faraldo-Cabana, 2021, p. 228).

Within the document *Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children,* supplementing the *United Nations Convention against Transnational Organized Crime*, a keyword search was done on the words “male”, “man”, “men” and “boy” resulted in zero search hits, in comparison to “women”, “woman”, “female”

and “girl” reaching eight search hits (UNODC, 2003). Even though the term “child” refers to any gender under eighteen years of age, the inference is that the child is a ‘girl’ (UNODC, 2003). Due to the additional layer of structural violence experienced by females (Flynn et al., 2018; Montesanti & Thurston, 2015; Sinha et al., 2017; Williams et al., 2018), it was seen and still is critical to focus on women and girls (Flynn et al., 2018; Montesanti & Thurston, 2015; Sinha et al., 2017; Williams et al., 2018). However, in parallel, the omission of male victims is problematizing, as victimhood of women is explicitly stated in the above Protocol, which became a foundational template for the international definitions of human trafficking (Smiragina, 2015, p. 142).

Many international and national legislations complied with the above legal frameworks, yet governmental action has been primarily focused on the forms of violence against women and girls (Alvarez & Alessi, 2012). Even though there was an inclusion of male victimization into legal anti-trafficking frameworks in the *Council of Europe Convention* (2005) and the *EU Directive* (2011) its implementation and realization of services for male victims have become fused with the image of the vulnerable girl (Smiragina, 2015, p. 142). According to the author, this ‘ideal’ victim has created a ‘hierarchy of victimhood’ in terms of provision of services (Smiragina, 2015, p. 143), where women and children (girls) can be seen as potential victims of sexual exploitation and trafficking, while males are almost completely ignored and systematically neglected within the implementation of anti-trafficking measures (Smiragina, 2015).

An example of how this may influence data collection can be seen in international human rights organizations and agencies in the years following, after the above legal frameworks were

disseminated widely. For example, International Justice Mission who "investigate and document cases of sex trafficking of women and children" (Shaw, 2013, pp. 8-9) deployed numerous country assessments globally on CSEA. Shaw's report (2013) the *Commercial sexual exploitation of children in Cambodia,* gives the impression that boys, as well as girls are included under the term 'children'. However, upon conducting a term search within their *Crime Prevalence Study* in Cambodia (2013), the term 'boys' is only mentioned twice, the report stated that "the focus on establishments also limited the number of boys included in this study as boys are primarily exploited and trafficked on the streets or through community-based networks" (Shaw, 2013, p. 31). Thus, the research into 'youth', 'minors', and 'children' only depicted female victims (Shaw, 2013, p. 31). This can cause a problematic scope within research as donors or databases may assume 'child' or 'minor' depict both genders, and therefore leave the sexual abuse and exploitation of male children understudied.

In a review of 651 legal cases of human trafficking within academic literature, Hebert (2016) suggested that the news media, activist campaigns, and academic scholarship have narrowed the framework of human trafficking as gender specific to female sex trafficking (Herbert, 2016). This social narrative of victimhood has led to the misidentification and misbelief of countless male victims, holding serious consequences for the victim. This focus on gender has influenced the identification of those who can be seen as a victim, as well as the availability of services and legal protection for male survivors (Berelowitz et al., 2013; Cockbain et al., 2017; Hill & Diaz, 2021; Josenhans et al., 2020; McNaughton Nicholls et al., 2014a; Procopio, 2018). This lack of victim status results in not holding access to justice, legal intervention, police cooperation, safe home accommodations, psychological assistance, or access

to affordable care on a global scale, leaving minimal services for male survivors (Smiragina, 2015, p. 247). Arguing for resource distribution for male victims and survivors does not suggest taking away resources or focus from women and girls yet suggests that proportionate resources should be provided for all of those impacted by sexual violence. In a constant comparison with female victimization, male victims may find themselves unknowingly comparing their stories to female victimhood and the associated terminology, for example that of rape, sexual assault, and sexual abuse. By not self-identifying with the terminology many male victims or survivors may face the situation where they may not understand how to describe their own situations to others and therefore resulting in non-disclosure, as this thesis will reveal.

The Neglect of Male Vulnerability within Society

In a baseline longitudinal project focused on street-working boys experiencing CSEA, the researchers found that the sexual exploitation of male victims is commonly ignored by society (Davis & Miles, 2014 p. 5; Miles et al., 2021). Davis and Miles argue that "a key reason for this is that social and cultural norms often assume men and boys to be inherently strong and/or invulnerable to sexual exploitation" (Davis & Miles, 2015, p. 5). Cultural perspectives on child sexual abuse and rape also illustrate how policy and programs within the region tailor to who is believed to be a victim (Davis & Miles, 2014, 2015; Davis, 2016; Franchino-Olsen, 2021; Miles et al., 2021). A Cambodian proverb states, "a girl is like a piece of fine linen; if it is stained then it is spoiled forever, but a boy is like a piece of pure gold; if it is dropped in the mud then it can easily be washed clean again" (Davis & Miles, 2014). In Cambodia the lives of girls are seen as vulnerable and ruined because of sexual abuse and exploitation, yet boys are seen as resilient and not vulnerable (Davis & Miles, 2014). Boys and men in Cambodia are told to 'brush away any

discomfort from abuse' (Davis & Miles, 2015, p. 5) which leads to a societal disregard of serious forms of abuse, regardless of the large numbers of victims in 'plain sight'. This illustration does not appear to be bound to one country or region; viewing men as strong, immune to weakness or vulnerability has become universally integrated in most cultures around the world (Davis & Miles, 2014, 2015; Davis, 2016; Franchino-Olsen, 2021; Miles et al., 2021).

According to ECPAT's Boys Initiative studies in Hungary, Korea, Pakistan and Sri Lanka, gender norms greatly impacted a male victim's agency to ask and receive support (ECPAT International, 2021a). In Sri Lanka, frontline workers downplayed the seriousness of boys' victimisation, often holding the misconception that boys are 'willing participants' in their exploitation and asking for help would emasculate them (ECPAT International, 2021b). In South Korea, the sexual abuse and exploitation of males are perceived as lower in severity in comparison to female victimization, leading to a lack of social services for boys and men (ECPAT International, 2021c). Additionally, social norms and a fear of being blamed, punished, or mocked perpetrate the forced silencing of boys (ECPAT International, 2021c). In Hungary, boys would often not disclose, to not be seen as weak if their familial sexual abuse was perpetrated inside 'safe' environments, additionally fearing damaging the family's reputation (ECPAT International, 2021d). Furthermore, in Pakistan, society holds a rigid definitions of gender norms, leading boys to suppress and minimize their emotional pain, with anger as one of the few socially acceptable emotion to display (ECPAT International, 2021e). As described by the authors above, there are numerous external factors that prevent disclosure or seeking help by a victim of sexual abuse or exploitation. These external factors increase the vulnerability of a

male child, as they may experience continuous sexual abuse without society noticing their victimization, and instead only punish them for their outbursts of internal pain.

In *Women Are Victims, Men Make Choices,* Dennis reviewed 166 scholarly articles on the global sex industry, in which 84% of articles exclusively discussed female sex workers with no mention of male victims (Dennis, 2008, pp. 11-12), and when males were mentioned, they were presumed to have significantly more agency than females (Dennis, 2008). Jones (2010) suggests that "to some extent, men and boys have become the victims of this media-driven, socially constructed conception of maleness. Indeed, the notion that males can be oppressed or systematically victimized strikes some as ludicrous" (Jones, 2010, p. 1145). Similar conclusions of male sexual vulnerability in contrast to the social disbelief of their victimhood have been found by several other researchers (Kia-Keating et al., 2005; Hilton, 2008; Russell et al., 2010) and suggest that these biases and lack of assistance harm male survivors attempting to reach out for support.

In many countries around the world, the association with labels such as 'gay' or 'homosexual', causes fears of threats, or punishments if found to be homosexual or associated with homosexual acts (Miles & Blanch, 2011, p. 9; Gouyon, 2022; Walker-Said, 2022). While not all male victims are homosexual, assumptions persist leaving males at further risk of homophobic attacks. For example, in many Middle Eastern and African countries homosexuality is illegal, and a male victim of sexual exploitation or assault may not find legal representation for their case (Miles & Blanch, 2011, pp. 9-11). As a result, in many countries male victims of sexual violence are less likely to report being sexually abused in comparison to their female counterparts (Miles & Blanch, 2011). Miles and Blanch suggest another external factor that

influences non-disclosure by boys and men, even if the victim is not gay, their social identity from their child sexual abuse and/or exploitation may label them by association. This leads to an increase in their vulnerability as their lives may be under threat if they disclose or seek support. As this thesis will argue, external factors that increase vulnerability significantly prevents male victims from self-identifying and choosing to stay silent, with the following section further elaborating on the internal factors that increase a victim decision to not disclosure their CSEA.

When male victims stay silent:

Palfy (2016) notes there are numerous complex barriers to disclosure that influence the decision for survivors to stay silent (Palfy, 2016). Her findings, which are based on in-depth qualitative interviews, suggest that the survivors in her study did not disclose due to physical, physiological, emotional, rational and/or fear-based reasons (Palfy, 2016, p. 130). According to the author, several of her participants recognized that "their abuse had a profound effect on their nature, character, social development, and functioning" (Palfy, 2016, p.140). Non-disclosure was also increased and impacted by an individual's natural survival response to trauma (Palfy, 2016, p. 130). Additionally, if the participants felt as if they would be unsafe, judged, or rejected they would choose to not disclose (Palfy, 2016, p. 131). Research with the Butterfly Project in Cambodia (Davis et al., 2021) included interviews with over 100 victims of sex trafficking including 19 boys and it also found that it took many years for boys to feel safe enough to open about their experiences. These two sources demonstrate the need for a safe and supportive environment to encourage disclosure of CSA and CSEA, or an individual may begin showing exaggerated signs or indicators tied to their abuse and exploitation to try to create an

environment where another individual would notice and then compassionately ask about their personal wellbeing.

In South Korea, conversations with boy survivors of CSA revealed that they would often act out in extreme mannerisms to be noticed (ECPAT International, 2021c, p. 27). Similarly, Alaggia (2005) conducted thirty in-depth interviews with adult survivors and found that the general trend was to delay disclosure, however, those that choose to disclose in childhood did so indirectly or were encouraged to disclose once someone noticed behavioral changes (Alaggia, 2005). The male survivors interviewed also identified that part of their self-worth, the internal sense of being good enough or worthy of love and belonging, was associated with their ability to handle a stressful situation, however trauma caused by emotional disorientation altered their sense of self-worth (Alaggia, 2005). Alaggia's study suggests that the emotional response of boys and men are impacted by their perception of themselves, and if their physiological reactions to traumatic situations overpowers their ability to self-soothe then these emotions are internalized as 'not being good enough', or not being 'man' enough. Nasjleti (1980) explains that a male's inability to express their feelings of helplessness and vulnerably is a factor that impacts their continued silence, as expressing their feelings would be considered 'unmanly' for not being able to protect themselves from the abuse (Alaggia, 2005, ECPAT International 2021a; Nasjleti, 1980, Palfy, 2016). The fear of labels, such as 'homosexual' or 'unmanly', is a barrier to disclosure (ECPAT International, 2021a; Nasjleti, 1980; Palfy, 2016; van der Kolk, 2007). The stigmatization of male victims in relation to their sexual orientation has led to victims not self-identifying as victims or being aware of their victimization until decades after their victimization (Procopio, 2018).

Another barrier of non-disclosure are the internal struggles faced by victims, either that of acting out or losing the memories of the CSEA. Survivors of CSA and CSEA can also struggle to relate to the average person in society, as they may suffer from heightened levels of anger, addiction, suicidal ideation, and other interpersonal difficulties (Alaggia & Millington, 2008; Fradkin, 2012; Lew, 2004, Palfy, 2016). Survivors can also experience an involuntary loss of memory and dissociation which are common responses to trauma (Rothchild, 2000; Levine & Kline, 2006, Palfy, 2016), further limiting reporting. Within Palfy's research, the participants believed that their "memory loss occurred as an adaptive physiological response to the trauma they experienced, one their body used to cope with life-events that would have otherwise been intolerable" (Palfy, 2016, p. 132). As survivors face internal barriers to disclosure and external barriers of disbelief or disregard, these factors impact the rate of disclosure (OCEHT, 2016, p. 9). Moreover, survivors may not re-disclose for many years after experiencing a negative interaction or reaction to their disclosure (Procopio, 2018).

Risk Factors and Behavioral Indicators

Children, regardless of gender, face similar risk markers that increase their vulnerability to being exploited and show similar behavioral indicators once they are sexually exploited (Procopio, 2018, p. 7). Four or more forms of complex traumas (as listed in Table 1) have been identified by Procopio (2018) as indicators for potential future victimization in sexual exploitation for survival purposes (Procopio, 2018, p.7).

Table 1. High Risk of Victimization Indicators [1]

Prior sexual abuse	War / Ethnic Cleansing
Physical abuse	Oppression
Emotional abuse	Terrorism
Verbal abuse	Rape
Dating violence	Assault
Witness to a murder	Custodial interference
Loss through violent death	Gang violence
Family abduction	Street violence
Stranger abduction	Robbery

A child that shows signs of high-risk behavioral indicators (as listed in Table 2) may increase a child's vulnerability to being sexually exploited. These indicators may also be used to identify a child at risk or currently in an exploitative situation (NCMEC, 2021; Procopio, 2018, p. 7).

Table 2. High Risk Behavioral Indicators of CSEA [2]

History of runaway behavior	Fire setting
Current runaway behavior	Gang involvement

[1] Data from: Procopio, 2018

[2] Data from: NCMEC, 2021; Procopio, 2018

Homelessness	Tattoos or branding (related to ownership) that the child is unwilling to explain
Multiple foster placements	Multiple sexual transmitted diseases
Parentified child	Traveling to other cities or staying at hotels when they 'run away'
Parents with substance abuse issues	Signs of current physical abuse
Feels of helplessness	Presence of, or communication with a controlling older boyfriend or girlfriend
Feels of depression	Multiple texting apps on their phones
Anxiety	Unexplained hotel keys
Social Isolation	Large amounts of cash
Frequent truant	Social Media Accounts tailored to sexual content: Onlyfans, FanCentro, ManyVids, Mygirlfund, AVN Stars, Justforfans, Ismygirl, Loyalfans, Patreon, Pornhub, etc.
Suicidal ideation	Extreme avoidance of showing what they have on their phones or computers
Oppositional Behavior Disorder	Acquired high priced items: clothing, jewelry, tech items

Additional risks for vulnerable groups

Vulnerable groups such as ethnic minorities, those that identify in the LGBTQIA2S+[3] community, and those that have disabilities face an increased risk of exploitation as they can be targeted based of their vulnerability, and they can face a barrier to disclosure based on cultural biases or physical disabilities (Cochran et al. 2002; Friedman et al. 2011; Rosario et al., 2011; Dank et al. 2016; Sawrikar & Katz, 2017; Sawrikar & Katz, 2018; Wyatt 1990).

Ethnic Minorities:

In numerous countries and regions around the world, sexual violence may be seen as a dishonor to the family, further discouraging disclosure for female and male victims, including within Latin American, Asian, and African communities (Sawrikar & Katz, 2017; Sawrikar & Katz 2018; Wyatt 1990). The social narrative instilled in these communities around the idea of 'saving face' highly affects victims, as mental health support is seen as unneeded or stigmatizing. Cultural bias then creates a barrier to disclosing and seeking support after a traumatic incident such as sexual abuse (Sawrikar & Katz, 2017; Sawrikar & Katz 2018; Wyatt 1990).

LGBTQIA2S+:

Those that identify as LGBTQIA2S+ or non-binary face a greater vulnerability than those who identify as cisgender. The Office of the United Nations High Commissioner for Human Rights (2017) fact sheet on homophobic and transphobic violence describes violence against the LGBTQIA2S+ community or individuals as "a form of gender-based violence, motivated by a

[3] LGBTQIA2S+ is an acronym for Lesbian, Gay, Bisexual, Transgender, Queer and/or Questioning, Intersex, Asexual, and Two-Spirit, based on how people choose to self-identify.

desire to punish those seen as challenging gender norms" (OHCHR, 2017, p. 9; Dolan, 2014). Violence against the LGBTQIA2S+ community can be seen in all regions around the world, ranging from familial discrimination and rejection, familial dysfunction, aggression, psychological bullying, physical harm, torture, kidnappings, and even targeting killings (OHCHR, 2017). With sexual violence used as a punitive form of punishment or as a 'cure' for homosexuality (OHCHR, 2017). Youth that identify as LGBTQIA2S+ are at a greater risk of facing homelessness, in comparison to youth that do not identify as LGBTQIA2S+ (Cochran et al., 2002; Dank et al., 2016, p. 5). LGBTQIA2S+ youth are also at a greater risk for developing poor physical (Aleshire et al., 2021; Kassing et al, 2021; Ormiston, 2022), mental (Fish, 2020; Fulginiti et al., 2021; Rhoades et al., 2018) and sexual health such as sexually transmitted infections (STIs) and HIV (Aleshire et al., 2019; CDC, 2011; Dank et al. 2016, p. 6; Gower et al., 2018; Newcomb et al., 2018; Roberts et al., 2022). Studies have found that LGBTQIA2S+ youth are more susceptible to substance abuse issues, and those who experienced homelessness had an increased likelihood to have substance abuse issues with drugs, alcohol, and cigarettes (Cochran et al. 2002; Friedman et al. 2011; Rosario et al., 2011; Dank et al. 2016, p. 49). Those that identify as LGBTQIA2S+ can face an increased vulnerability when engaging in survival sex to address their needs for clothing, food, shelter, and hygiene; as once involved, their vulnerabilities greatly increase their risk of being sexually exploited by traffickers (Dank et al. 2016, p.37). This intensifies as LGBTQIA2S+ youth face barriers to accessing services, short-term housing, shelter, food, or gender-affirming health care. These barriers include high rates of service denial, breaches of confidentiality, and discriminatory treatment (Dank et al., 2016). Condom usage and general awareness of sexual health is low amongst heterosexual males, as

internalized homophobia often keeps these groups from accessing LGBTQIA2+ oriented services (Davis & Miles, 2014). Further, young men who identify as heterosexual, but work in the sex industry servicing female and male clients may face discrimination or feel unwelcomed from social services such as medical or legal support that aim to assist gay men (Davis & Miles, 2021).

Disabilities:

According to Handicap International and Save the Children (2011), children with disabilities are among the most marginalized in the world and are often excluded from society. The project reviewed 89 cases, 16 of which were male survivors of sexual violence (Handicap International et al, 2011, p.12). Handicap International disclosed within their research that "the few cases of male victims, did not necessarily mean that relatively few boys are victims of sexual violence; it is generally felt that boys are even less likely than girls to report sexual violence or be willing to speak about it" (Handicap International et al, 2011, p.12). Many children face difficulties accessing basic services, education, and support. Children with disabilities around the world can suffer from sexual violence, including rape, sexual assault, sexual exploitation, and verbal sexual abuse (Handicap International et al, 2011, p. 7). It is estimated that there are 200 million children that live with disabilities, with 80% living in developing nations (Handicap International et al, 2011, p. 9). Children with disabilities have increased vulnerability in situations of child sexual abuse and trafficking. A child may experience sexual exploitation and not have the capability to express that they are being or have been abused due to mental or physical disabilities that impedes them from having their voice heard. They may even be unaware of their rights and unable to speak out about sexual abuse against them. This allows for perpetrators of child sexual

abuse or trafficking to act out with almost total impunity. A study conducted in the United States by Sullivan and Knutson (2000), discovered that out of the 50,000 children enrolled in the epidemiological study (Sullivan & Knutson, 2000), found 30% of the children were abused, verified by law enforcement records. Children with disabilities were also found to be three to four times more likely to experience abuse than non-disabled children (Handicap International, 2011, p. 11; Sullivan et al., 2000). Sexual violence was also significantly higher within institutional facilities (Handicap International, 2011, p. 11). Children with disabilities also face barriers when reporting abuse or trying to access legal justice; if they manage to report their cases, they often are ignored or mismanaged (Handicap International, 2011, p. 16). There is also limited knowledge on how to support a child with disabilities as a witness, often leading to distrust in the child's statement (Handicap International, 2011, p. 16). These factors help to clarify the vulnerability and a lack of data on children with disabilities who are sexually abused or trafficked for sexual exploitation.

Cyber-Enabled Online Child Sexual Abuse and Exploitation

Globalization has led to human trafficking the second most lucrative and fast-growing crime worldwide after the drug trade and tied with the illegal arms industry (Hill & Rodriguez, 2011; U.S. Department of Homeland Security, 2022; Truong, 2003, p. 67). The United Nations Office of Drugs and Crime stated, "worldwide, almost 20% of all trafficking victims are children… However, in some parts of Africa and the Mekong region (Southeast Asia), children are the majority" (UNODC, 2009). Human trafficking has evolved with the demand of child sexual offenders (buyers). With the rapid rise in online sexual abuse and cyber-enabled child sexual abuse materials (CSAM), children are now on demand virtually for both local and

international buyers (Davis, 2018; INTERPOL, 2018). This type of crime is not fixed to a single location but has been occurring worldwide. Online-facilitated child sexual abuse, webcam exploitation and the buying of children on both darknet sites has been growing annually (Ali et al., 2021; Bullock, 2022; Harris et al., 2021), with Covid-19 only causing greater vulnerabilities increasing cases globally (Ali et al., 2021; Bullock, 2022; Harris et al., 2021).

A 2018 study of more than one 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 sexual abuse, and live-streamed assault and torture associated with high COPINE levels (6-10). The COPINE (Combating Pedophile Information Networks in Europe) Level provides an indication of the severity of abuse on a scale of 1-10, with corresponding levels 6 – explicit erotic posing, 7 - explicit sexual activity, 8 - assault, 9 - gross assault, and 10 - sadism/bestiality, of the scale (ECPAT, 2018; INTERPOL, 2018). In 84.2% of the sample of images were classified as level 6 or above, “and when the victim was younger, or a boy the COPINE rating was likely to be a seven or above” (ECPAT, 2018, p.5). Additionally, 31.1% depicted male children, and when boys were depicted in the abuse, it was more likely to be severe or involve paraphilic themes such as bestiality, sadism, humiliation, and necrophilia (American Psychiatric Association, 2000, p. 566; ECPAT, 2018, p. 5). In a second 2018 study analyzing two datasets containing 4,049 cases of CSAM distributed online (Seto et al., 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.

Darknet Grooming Manuals:

The non-profit organization Child Rescue Coalition (CRC) that monitors millions of CSAM sites, highlighted the organization of child sexual abusers and transnational child sexual offenders by investigating a predatory publication entitled, *Abuse by the book: pedophiles share grooming manuals and learn to prey on children* (Child Rescue Coalition, 2021). Manuals like this are a step-by-step guide for child sex offenders on how to trade CSAM photos, videos, and documents in "decentralized and unregulated file sharing networks and chat rooms" (Child Rescue Coalition, 2021). Grooming manuals are distributed and are traded "over 100,000 times" on the darknet (Child Rescue Coalition, 2021). Perpetrators use these manuals to educate themselves on how to avoid law enforcement, and how to sexually abuse a child. In the manual shared by CRC, the perpetrators share common locations on where to find and pick up children, such as the types of communities where children can be targeted (Child Rescue Coalition, 2021). According to CRC "85% of individuals who view child sexual abuse material are already hands-on abusers" (Child Rescue Coalition, 2021). It is vital to understand the complexity and organization of these crimes. A child is not sexually abused or trafficked for sexual exploitation without the intentional purpose of being groomed for sex.

Perpetrator Tactics to commit CSA and CSEA

Grooming by Non-Familial Abusers:

The first step for any individual interested in sexually abusing a child is the act of grooming. This is a process of choosing a vulnerable target and over time gaining their trust to

sexually harm them. A child sexual offender may first go online for information, such as on darknet sites, or visit places where children frequently go or are located, for example, schools, playgrounds, shopping centers, camps, or orphanages (Logan, 2010; Palfy, 2021). The next phase is to establish a relationship with their target, to gain the trust of the community, parents, or the child. “Although offenders often target disadvantaged children, the reality is any child may be abused, even those in healthy families” (Palfy, 2021). Children of young ages may not have learned about CSA or that there are child sexual offenders, especially if the perpetrators are those responsible for caring for that child, such as a parent, their family, or family friend.

The history of the United States’ FBI profiling was developed to understand and identify offenders, which still stands to this day (FBI & Lanning, 1992). Many perpetrators may present as charming, understanding, and supportive (FBI & Lanning, 1992; Logan, 2010). Some methods of luring may include: falsely disclosing a hard situation to a child in an attempt to gain empathy, offering to play their favorite game, buying treats or gifts as tokens of their friendship, offering rides, offering drugs or alcohol, offering to be their friend or even boyfriend or girlfriend (Logan, 2010; Palfy 2021). If a child has experienced emotional or mental abuse, the perpetrator may use words like “I will take care of you, I love you, I am here for you” (Logan, 2010). During this process of enchantment, secrecy is stressed “don’t tell _____ " , and a perpetrator will often add an additional phrase of a threat if they feel threatened with exposure, “don’t tell ____, or _____”. This may be a threat of physical violence or come as emotional manipulation to cause shame or guilt in the child, for example, “don’t tell your mom, or I will hurt her; don’t tell your mom, or she will be so ashamed of you or hate you”. This may even progress to “I will kill you if you ever tell anyone”. If the perpetrator is a family member the

phrases stressed may heavily involve gaslighting, emotional manipulation, or stating that others will not believe their claim if they disclose (Palfy, 2010, 2021). The trauma-bond established throughout the grooming process often leads to physical contact. The act of grooming is a tactic to lower a child's defenses and increase their willingness to accept physical touch (FBI & Lanning, 1992; Logan, 2010; Palfy, 2021). The first acts may also be non-sexual; however, it is used to begin to desensitize the child with the ultimate goal to begin sexual touching. A perpetrator may also inquire about their present knowledge about sex, and/or introduce them to pornographic images and videos (Palfy, 2021). The next step is sexual touching by teaching masturbation or offering to perform on the child to 'teach them' (Palfy, 2021). Once a child is aware of the situation or made uncomfortable by what is occurring, they are often confused, as they may have come to believe they love their perpetrator (Palfy, 2021). Perpetrators may engage in grooming which can take months or years to establish themselves in a community as trusted individuals, when in fact all the roles, careers, or hobbies are chosen to be closer to children.

Familial CSA:

In Palfy's (2016) study, all the initial non-familial perpetrators identified were known to their victim's parent(s). Most had befriended their parent(s), then offered support to the child through friendship, and then abused them (Palfy, 2016, p. 133). Palfy found many of the participants were abused by family members, with half of them being violated by a biological parent. In addition, the other participants were abused by a female or male cousin or uncle, with the remainder abused by someone considered very close to the family. However, no one in the study was abused by a stranger for their first instance of sexual abuse (Palfy, 2016, p. 142). In a similar study, McDonald and Tijerino (2013), revealed that almost all (n=53) of the participants

(n=57) were abused by a family member or trusted family friend (McDonald et al., 2013, p. 9). This study also showed the ages of participants at their first victimization, with 20% (n=8) aged 1-3, 20% (n=8,) aged 4-5, 70% (n=28) aged 6-10, 30% (n=12) aged 11-14, and only one participant older than age 15 years old. This study (McDonald et al., 2013) shows how infants and young children are being sexually victimized by family and those closest to the child.

Organized CSEA Rings:

An initial incident of sexual abuse of a child may progress into frequent instances of sexual abuse, or into the sexual exploitation of the child through sex rings and trafficking. The FBI followed multiple child sex rings as undercover agents revealed the modus operandi of offenders at the time (FBI & Lanning, 1992). These ‘sex rings’ may be run by multiple offenders at locations such as daycare centers (FBI & Lanning, 1992, p. 11), camps, after-school clubs. The FBI and Lanning (1992) found that pedophile groups such as North American Man-Boy Love Association (NAMBLA), the Lewis Carroll Collector’s Guild, and other groups often used directories containing information on where to locate children and how to avoid police. These organizations published newsletters and bulletins that were distributed widely among pedophile groups (FBI & Lanning, 1992, p. 27). Even though NAMBLA was ‘dismantled’ in 1990, organized groups morphed in to decentralized online communities. The development of the Internet led these kinds of groups to progress from in-person distribution of hard copy magazines to exchanging CSAM in darknet chat rooms (Ali et al., 2021; Bullock, 2022; ECPAT & INTERPOL, 2018, Harris et al., 2021).

Closing Statement on the Academic Literature:

The academic literature on child sexual abuse and exploitation of boys demonstrate that victimhood is prevalent for boys, as it is for girls. However, the literature also shows how socially constructed generalizations about victimhood and offender profiles have impacted society's understanding of male CSA/CSEA (Beech et al., 2018, p. 6; Franchino-Olsen, 2021, p. 101; Josenhans et al., 2020, p. 6; Long, 2021, pp. 349-350, 353; Mitchell et al., 2017, p. 147). Academia has raised the need for a deeper understanding of male CSA/CSEA stories through qualitative research, in addition to investigating new indicators of abuse and exploitation that may aid in the identification of victims. Finally, the academic literature indicates a need for understanding the needs of male victims and how to better support male survivors of child sexual abuse and exploitation. This exploratory study aims to uncover these gaps in the literature and support the discovery of indicators to assist in earlier age victim identification, in addition to revealing the needs of survivors based on their first-hand accounts through in-depth interviews.

Chapter III - Methodology Overview

The theoretical framework and methodology of this research were interwoven with its purpose of understanding the needs and stories of each participant. This study sought to discover the insights of adult male survivors and frontline experts to improve earlier identification, protective measures, and rehabilitation for victims and survivors. This research aimed to uncover what prevented the survivor participants from identifying (or being identified) as victims of sexual abuse, exploitation, and trafficking in childhood, in addition to barriers to seeking help in adulthood. This included the rationale behind the decision-making process to aid the development of practical recommendations for frontline professionals.

The core research question was: what are the needs and stories of male victims and survivors of child sexual abuse, and human trafficking for sexual exploitation?

The following sub-questions lead this inquiry:

1. What insight do male victims and survivors have to share about their experience and journey that can inform better protective measures (policies, practices) and rehabilitation processes for victims and survivors of child sexual exploitation and trafficking for sexual exploitation?
2. What insights do experts, and front-line workers have that can better inform practice, policies, and the process for victims and survivors of child sexual exploitation and trafficking for sexual exploitation?
3. What is preventing male victims from identifying as a victim of child sexual abuse or human trafficking for sexual exploitation, and seeking out help?

4. What has been detrimental to a male survivor's journey, and what has been the most helpful?

The descriptive nature of the questions was formulated to actively listen and describe the experiences of male survivors. These questions reflected the exploratory methodology to uncover the gaps that were previously described in literature, along with the Transformative Social Justice theoretical framework to focus the data collection, analysis, and findings towards social action upon completion of this work.

Exploratory Methodology

The exploratory research methodology sets to investigate questions that have not been previously studied in depth (Reiter, 2013). The exploratory approach was used in order to uncover a deeper understanding into the sexual abuse and exploitation of boys and men. This approach differs from confirmatory research as it demands more from both the research and its participants as it continuously engages in critical and honest self-reflection (Reiter, 2013). This approach was articulated within an epistemological framework (the social justice transformative framework) and a comprehensive methodological framework to achieve validity and become foundational for future research inquiries into male victimology of sexual violence.

The study utilized a holistic, survivor-centered, and trauma-informed approach to guide the exploratory design mixed methods research (Creswell, 2013). Primary source data was collected through interviews, transcribed narratives, and mixed- method questionnaires. Partnerships with regional and international male survivor-focused non-governmental organizations (MaleSurvivor, 1in6, MenHealing, Men’s Story Project, MatrixMen, the Hard Places Community) were established before and during the study through various forms of online

outreach to recruit participants and provide them with support when needed. The methodology used was designed to limit re-traumatization or potential triggering of the survivors undergoing the research process (CDC, 2020; SOAR, 2021; Surtees, 2015; UNIAP, 2008). This research used criterion and purposeful sampling method to select participants that met the predetermined criteria (Palinkas et al., 2015; Patton, 2015). Both narrative inquiry and a descriptive phenomenological approach (Giorgi, 1997; Matua et al., 2015) were used to record and understand the experiences of 40 adult male survivors. Narrative inquiry is guided by relational ethics (Caine et al., 2020, p. 6; Clandinin & Connelly, 1988, 2000) and helped dictate interactions with participants throughout the study. This also allowed for the data to be understood within its thematic categories (Denzin & Lincoln, 2011; Riessman, 2008, p.12; Wells, 2011, pp. 7, 11). The data collected was coded by analyzing printed interview transcripts and field notes first by hand, and then by using qualitative software NVIVO to analyze the relationships and themes of different responses. Secondary source data was collected from academic literature and grey literature to verify participant stories and understand the wider body of knowledge of male sexual violence. In addition, open-source intelligence (OSINT) and secondary dark web analysis provided by interviewed experts provided insight on current online trends of online male CSA/CSEA and CSAM.

Transformative Framework in Mixed Methods

A transformative mixed methods design framework was used to complement, further investigate, and strengthen the methodology throughout the process of data collection, analysis and interpretation (Mertens, 2007, 2010, 2012; Sweetman et al., 2010). The Transformative Social Justice Design is centered on the experiences of marginalized or underrepresented

communities, with the research findings bringing forth a call to action with advocacy (Farias et al., 2017; Mertens, 2007, 2010, 2012; Sweetman et al., 2010). This framework influenced each step of the decision making process throughout the study. The choice of using this framework focused the primary researcher's perspectives, values, assumptions, and interpretations to facilitate a deeper understanding and engagement with the participants and data. In line with this, the transformative framework facilitated the recognition of the moral responsibility and commitment to the participants. This framework aimed to work with the male survivor community in a respectful manner, building towards active participation from both field experts and survivors, with the final objective to work toward greater equity in society for male victims.

This framework was used to promote social justice and survivor empowerment in each stage of the research process. The Transformative Social Justice Design examined how the qualitative findings provide an enhanced understanding of the quantitative results to explore inequalities, social injustice, and the lived experience of victims (Creswell, 2013, p.44). This allowed for distinct and various perspectives of the challenges and obstacles victims face as children and adults after their sexual abuse and exploitation.

Figure 1. Transformative Mixed Methods Design Framework for Research [4]

Methods and Design in the Literature that influenced this Research

The majority of research on male victimization of CSA or CSEA can be found within the South–South cooperation (United Nation Office for South-South Cooperation, 1978). Whereas western academia has primarily focused CSA and human trafficking in the context of developing nations and not within their own domestic spaces. Thus, it was important to replicate and adapt certain research practices that have shown success with male victims and survivors from the global south and implement them within this study (Davis & Miles, 2014, 2015; Dolan & Onen, 2013; Miles et al., 2021; Refugee Law Project, 2020).

An example of this is found in Cambodia by the non-profit organization, Chab Dai, as they developed a Butterfly Longitudinal Research Project lasting 10 years and ending in 2020 (Davis et al., 2021). The Butterfly project used a mixed methods approach with survey tools that combined both open and closed-ended questions (Davis & Miles, 2014; Davis & Miles, 2016; Davis & Miles, 2019; Miles & Davis 2021; Miles et al., 2021; Davis et al., 2021). Through the connections within Chab Dai, the research team including Davis and Miles built rapport and trust

[4] Source: The methodology design figure was adapted for this research model using inspiration from Farias et al., 2017; Mertens, 2007, 2010, 2012; Sweetman et al., 2010.

within local communities and with partnering NGOs to build an extensive network to collect data on numerous regions in Southeast Asia.

Davis and Miles used the learning from the Butterfly project in their other research projects with males in the sex industry and with street children (Davis & Miles, 2014; Davis & Miles, 2016; Davis & Miles, 2019; Miles & Davis 2021; Miles et al., 2021; Davis et al., 2021). Beginning with quantitative methods, their research methodology shifted towards a greater focus on a qualitative approach from first-hand accounts and interviews (Davis, 2016, p.6) to understand the stories, lives, and perspectives of victims of trafficking. Their teams were aware of the high risks and ethical issues involved in interviewing and observing victims of trafficking; however, they found that the greater ethical dilemma would be to not conduct research solely because they were vulnerable groups of children about which there was very little knowledge. Within their mixed methods, they carefully constructed questions to minimize re-victimization and partnered with local NGOs to ensure prior relationships were established with victims of trafficking prior to engaging in research to provide support and minimize the risk (Davis & Miles, 2014, p.15). Prior to an interview, a team of social workers were trained in research methods, including ethics training using the *2009 UNIAP Ethical Guidelines for Human-Trafficking Research* (Davis & Miles, 2015, p.18). By using the snowballing sampling method interviewers were able to reach a greater number of participants at the convenience of those participating (Davis & Miles, 2015, p.19). The way in which these studies were conducted allowed for transparency, anonymity of participants, appropriate ethical methods, and validity throughout their research. Upon reviewing their data, Davis and Miles revealed several gaps

within the male cohort and they focused their subsequent research on a deeper exploration of male narratives and contextual data (Davis, 2016, p.6).

Previous qualitative research methods in this area had focused on semi-structured open-ended questioning; however, it was highlighted that there was a challenge in developing open-ended questions that were sensitive to the emotional needs of children who are in or were in CSEA situations (Davis, 2016, p.31). To overcome emotional barriers, participants and interviewers had utilized art within their sessions to allow an outlet for emotional distress if a question became too emotionally charged (Schwalbe & Wolkormir, 2001, p.55). In keeping with these findings, while not central to the methodology, within this study, participants were able to share poems, short stories, or other forms of visual arts with the primary researcher. The sharing of art allowed participants to share deeply emotionally charged material that aided them in sharing their story of abuse and exploitation. This enabled the researcher to have a deeper understanding of their thoughts and feelings of their narratives.

In previous studies conducted by Davis and Miles (2014, 2015, 2016) the research team incorporated Article 12 and 13 of the UN Convention on the Rights of the Child, (12) “to be heard” and (13) to have the “right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds…” (OHCHR, 1989). Every child that has experienced child sexual abuse and exploitation may benefit from exercising their rights to express themselves and to be heard (Amann & Sleigh, 2021, p. 715). After reviewing other studies within South-East Asia conducted by local NGOs and other researchers in the field of CSA and CSEA, this research utilized the successful tools developed within their research. An important step was advocating for survivor inclusion within the thesis proposal, to hear from

first-hand account. All the survivors in this study faced being forcibly silenced and not believed during childhood when attempting to disclose their abuse and exploitation. Their ‘inner child’, an unconscious subpersonality based in childhood that is based within mental and emotional memories and beliefs, became an important part of their complex-trauma and surviving their experiences (Androutsopoulou, & Viou, 2019; Brown, 2021; Gerdes, 2020; Carr & Hancock. 2017; Swadener, 2019). Therefore, by incorporating Article 12 and 13 in interviewing adult male survivors of child sexual abuse and exploitation, participants were able to have their inner child freely speak and be heard (Androutsopoulou, & Viou, 2019; Brown, 2021; Gerdes, 2020; Carr & Hancock. 2017; Swadener, 2019). Additional tools were used to build community partnerships to gain participants, a focus on building rapport and trust, integrating trauma-informed training and UNIAP methods, tailored questions to limit re-victimization, and to allow for the use of art for participants to express themselves when they were unable to verbally at the time.

Methods

The methods used were chosen for their capabilities to support the exploratory approach and transformative framework. This study could not use sampling methods to choose randomized individuals as the questions were directed to those with lived experience and expertise, which influenced the recruitment and inclusion criteria to participate in this study. The methods to collect data included in depth interviews, questionnaires, and secondary data analysis. The research questions aimed to understand stories, therefore narrative inquiry was used to study the experiences of the stories, the particular perspectives, and the meaning related to the human experience (Wells, 2011). Descriptive phenomenological approach was also used to understand the subjective experiences and gain insights into the motivation and actions of the participants

(Giorgi, 2003). For example, to understand the barrier to disclosure for male victims, there is a need to understand the factors that led them not to, or to disclose, in addition to the consequences of disclosing. By understanding these different aspects of the participant's stories their needs are highlighted more clearly, allowing for analysis towards action for improved measures to support victims and survivors.

Sampling Methods:

The research used non-probabilistic sampling methods (Creswell et al., 2018) including purposive and snowball sampling (Creswell et al., 2018). Non-probabilistic sampling was first used to identify organizations with a large male victim and survivor audience. This was chosen first to be able to pick a population that is typically difficult to reach and unique due to their expertise and experiences (Neuman & Robson, 2009). With NGO partnerships and endorsements, the purposive sampling technique was then used to gain access to a particular group that is not publicly listed and to gain access to more individuals. Snowball sampling was then implemented as participants encouraged others to participate. The same method was used for the recruitment of expert participants, which was done through networking and word of mouth.

Inclusion Criteria:

The inclusion criteria for participation were as follows:

<u>Survivors:</u>

1) To be biologically male;

2) To be an adult (over 18 years of age);

3) To have experience at least one incident of sexual abuse as a child; and/or

4) To have experienced human trafficking for the purpose of sexual exploitation as a child;

5) To be willing to participate in a semi-structured interview.

Full disclosure of details of their CSA/CSEA was not compulsory.

Experts:

1) To have a minimum of three years working with male victims or survivors of CSA and/or CSEA; and

2) To be a frontline worker in contact with male victims and/or survivors (through research, NGOs, social work, counselling, therapy, healthcare, hospital care, legal aid, police services, safe homes, rehabilitation, religious and spiritual guidance).

Recruitment:

The primary form of recruitment for field experts and frontline workers was through the Internet, social media platforms, and word of mouth. An advertisement poster (see Appendix 2) was uploaded and shared via social media sites, including Facebook, Instagram, LinkedIn, and Twitter, in addition to being "shared" by others. The poster included a brief abstract of the study and requirements, as well as the researcher's contact information. Interested participants were encouraged to reach out via email or social media. Recruitment expanded through partnerships with key organizations that supported male survivors, such as MatrixMen, up! International, The Hard Place Community, and MaleSurvivor. An example of the recruitment poster is shown in Appendix 2. The process to be approved to post the research poster by MaleSurvivor entailed a full review of the research proposal, ethics documentation, the research questionnaires, and the selection criteria, as well as how the interviews would be conducted. MaleSurvivor then shared the research poster and called for participants on their website chat forum and on their social

media platforms. This granted over 15,000 members in over 200 countries the ability to participate. Participants could contact the researcher if they were interested in being interviewed. This allowed for each survivor participant to have control over the research experience, if they wanted to participate, as well as ending participation with no repercussions and complete anonymity. From the chat forum, survivors encouraged each other to participate, which also aided in building trust between the community and research project.[5]

In addition to NGOs, Royal Roads University (RRU) promoted the research on their Student Engagement Student Services Newsletter with the approval of the RRU Ethics Board and Academic and Provost. The call for research participants involving RRU students resulted in one student of RRU participating.

Participants:

The initial sample size was primarily aimed low with 6-10 field experts, and 6-10 CSEA survivors. This conservative aim was due to potential access restrictions to the sample. The ideal would be to have an equal or greater number of survivors to highlight their experiences and needs, and then to triangulate the data with field expert interviews and secondary source material.

The first introductory talks highlighted two main issues,

1) The participants minimized their trafficking and exploitation experiences, leading to trafficking survivors not knowing they were trafficked.

2) Numerous participants were unaware of the terminology to describe their experiences.

[5] The recruitment poster can be seen on the forum: https://forum.malesurvivor.org/threads/call-for-participants-the-needs-and-stories-of-male-victims-and-survivors.81132/

Words such as rape, sexual assault, sexual abuse, trafficking, were seen as words to describe the female experience.

This resulted in needing a larger scope, the research originally focused solely on trafficking cases, however, by including early adverse childhood experiences, such as child sexual abuse into the scope, it would encourage more participants and increased the sample size. The final sample size was concluded with 40 adult male survivors in total (28 survivors of CSA and 12 survivors of CSEA) and 30 field experts with a minimum of three years working experience with male victims of CSA and/or CSEA.

The data from the sample was reviewed, analyzed, and summarised in a victimization classification chart which was broken down by the typology of abuse, their ages during the abuse, and the perpetrator profiles (in relation to the child and their gender). Please see appendix 8 (CSEA) and 9 (CSA) for the chart narrative summaries. In reviewing the data and using the definitions specified in, Article 3a-d of the *Palermo Protocol on Trafficking in Persons* (see Appendix 1 for relevant concepts and definitions), it was apparent four participants minimized their experience and did not identify themselves as trafficking survivors, only identifying primarily as CSA survivors. Following recommendations from Dr. Glenn Miles, a thesis committee member and expert on male CSEA, after a discussion of the cases (keeping the participants details anonymous) it was recommended to compassionately disclose to the participants the rationale and criteria behind their experience's classification as CSEA, instead of CSA. The explanation of human trafficking was done sensitively with the participants who had not identified themselves as CSEA survivors, using a breakdown of the use of exploitation, grooming, and the indicators that they had identified during their interviews. This process

allowed for those survivors to have a greater self-awareness of their case and was followed up with support by partnering organizations. The findings reflect the experiences of these participants and cannot be generalized to all male CSA and CSEA survivors. Nevertheless, the findings of this study will aid in better understanding the perspectives of male survivors of child sexual abuse and human trafficking for sexual exploitation.

Demographics Survivor Participants:

Fifty male survivors reached out to learn about the research, with 40 completing the entire study. The participants represent an international group of 25 different nationalities, and hold a variety of ethnic, cultural, and religious backgrounds. The ages ranged from participants in their early 20s to their late 70s. Participants' religious beliefs varied from Agnostic, Atheist, Catholic, Christian, or Buddhist. Survivor Participants also had varying levels of education from less than grade 12, to doctorate levels of education.

Figure 2. Survivor Participant Demographics: Sexual Orientation & Gender Identity

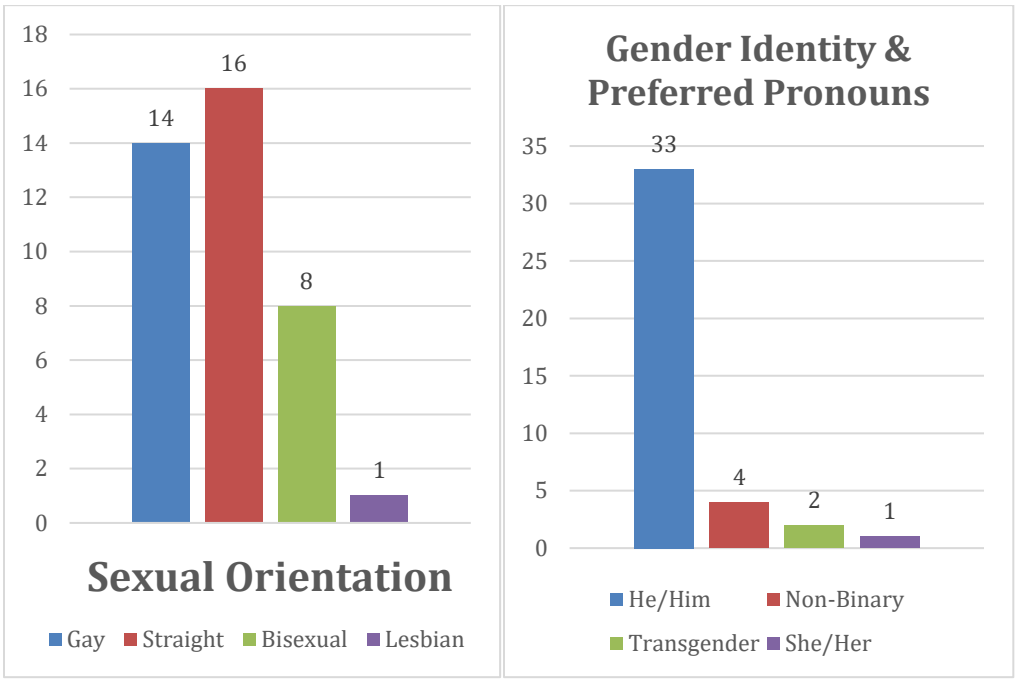


Figure 3. Survivor Participant Demographics: Current Age Ranges

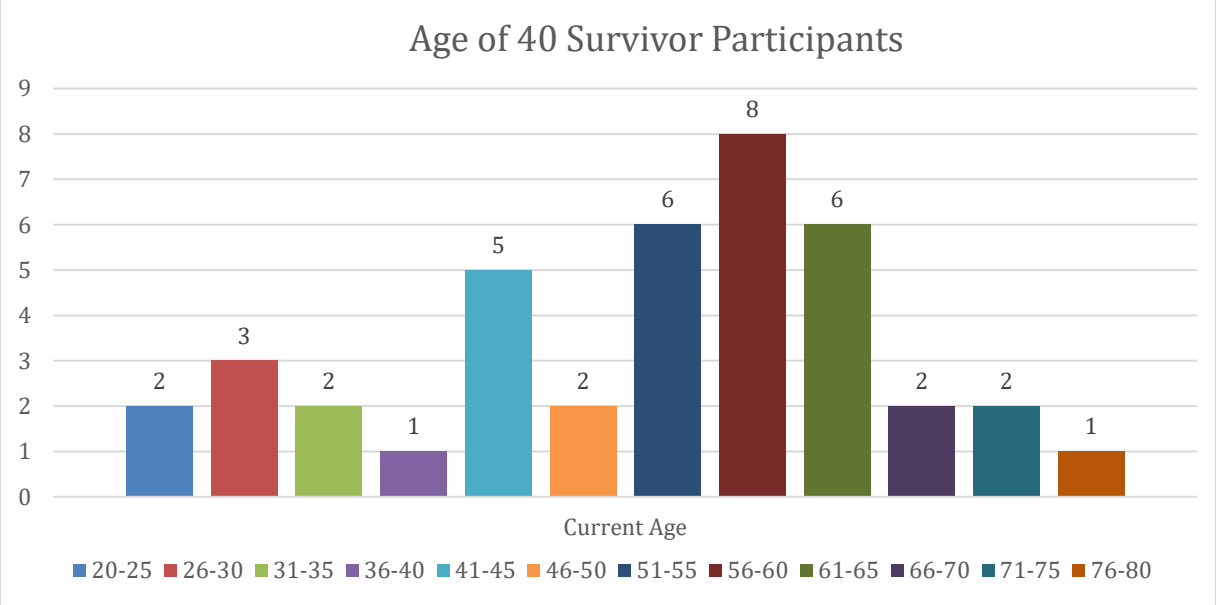


Figure 4. Survivor Participants Demographics: Ethnicity Groups

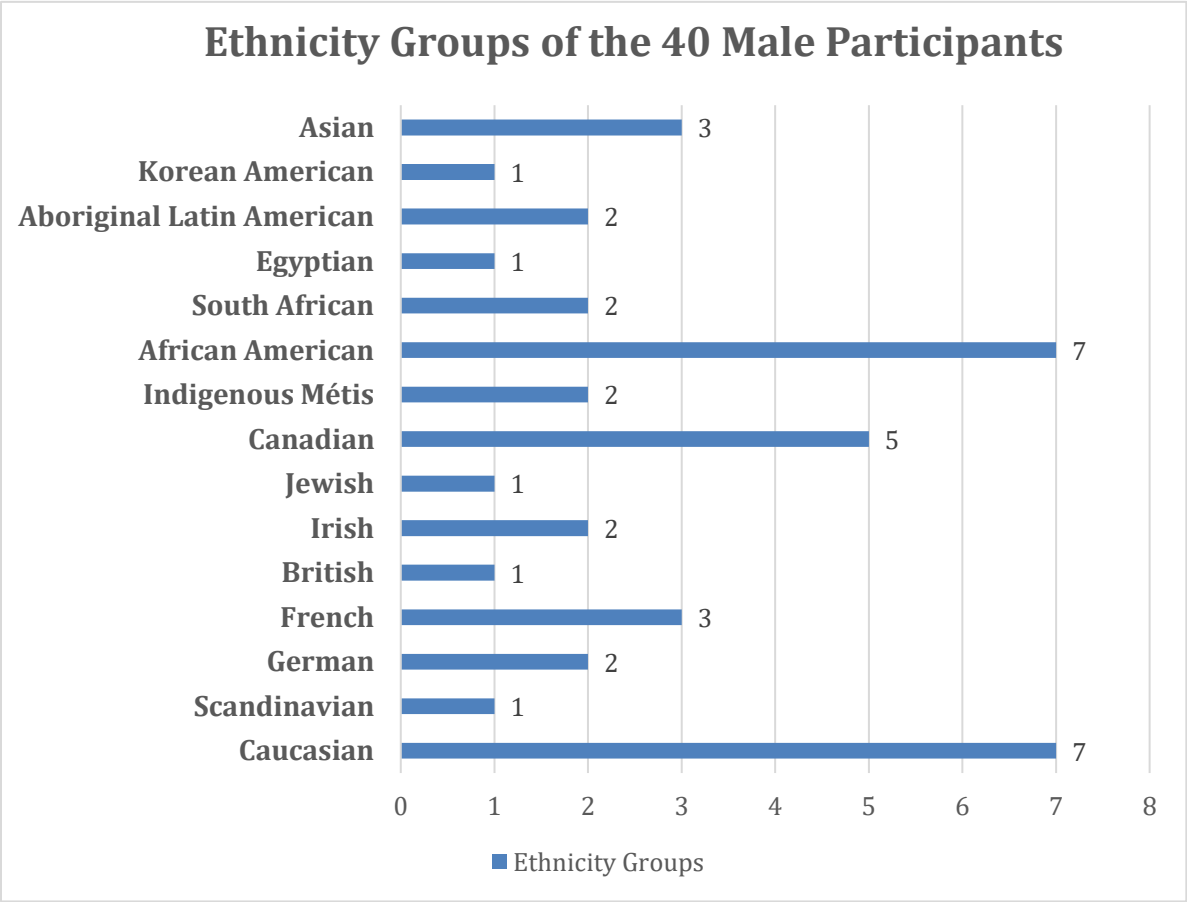
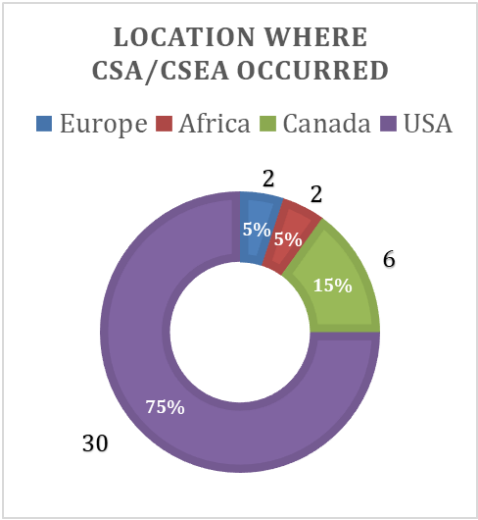


Figure 5. Survivor Participant Demographics: Location where CSA/CSEA occurred



The demographics of the survivor participants shown above illustrate the diverse inclusion within this study. This study originally was framed for North America as this region's research into human trafficking for sexual exploitation of male victims was limited. After partnering with NGO MaleSurvivor, the study became globally accessible to their fifteen thousand members. During the data collection phase, the majority of participants were located in North America where their CSEA occurred, resulting in the study remaining close to the original regional scope.

Demographics: Field Experts:

The total number of field expert participants that began this study were 36, with 30 completing the interviews. The professions of the frontline experts ranged widely, from psychologists, researchers, law enforcement officers, social workers, and non-profit workers. The experience ranged from 3-26+ years, with the majority of participants having between 11 and 15 years of experience. There were 19 male (63%) and 11 (34%) female participants interviewed. One male field expert also identified as a former human sex trafficker and provided lived-experience knowledge and his story.

Please see Appendix 3 for Profile of Experts & Years of Experience

Figure 6. Average Years of Experience of the Field Experts

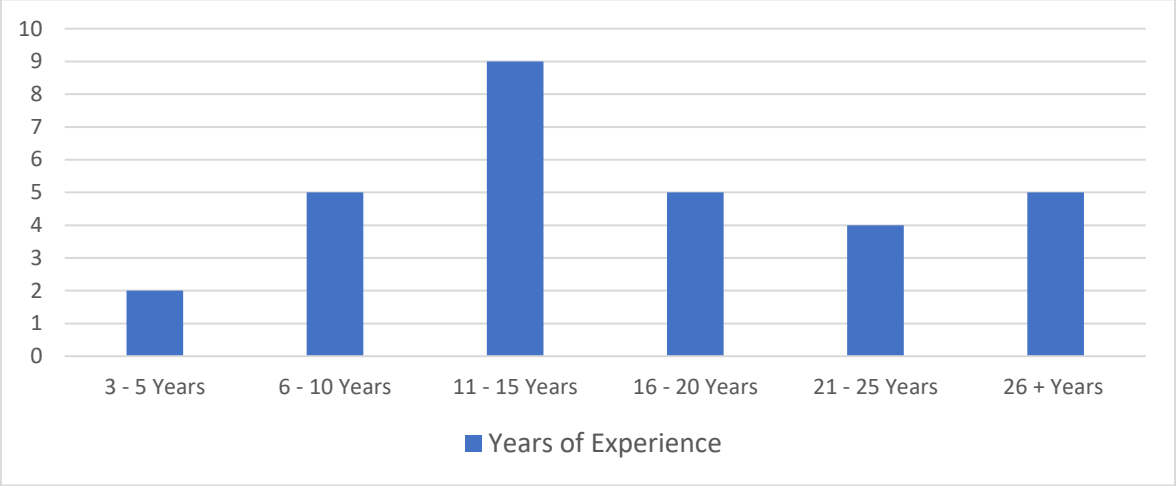


Table 3. Breakdown of Each Sector from Field Expert Participants

Frontline service professionals [6]	
Mental health	Psychologist, Councillor, Therapist, Psychotherapist
Security	Law Enforcement Officer, Criminal Intelligence Officer, OSINT Investigator, Police Officer, Criminal Intelligence Analyst
Education	Researcher, Specialist in Learning and Development, Professor, Prevention Education Specialist,
Social services	Social Worker, Non-Profit Worker, Youth Worker, Prison Chaplain, Trainer, NGO Founder, NGO Director,
Health services	Nurse, Hospital Worker, Doctor
Policy	Government Policy, Public Health Consultant, Anti- Trafficking Consultant, Civil Servant in an International Organization
Lived-Expert	Survivor of CSA, Survivor of CSEA, Former-human trafficker for sexual exploitation (USA)

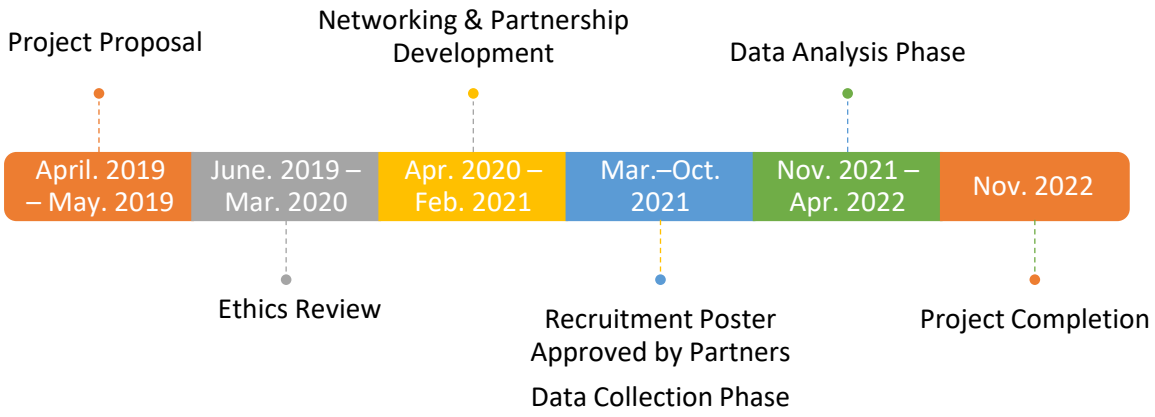
[6] See Appendix 3 for the profiles of each field expert participant and their years of experience. Additionally, to note: a profile could hold numerous different roles, for example: A police officer and a psychologist.

Data Collection

The exploratory process was constantly reviewed and adapted to the participants and the needs of the research, moreover, the data collection and analysis happened concurrently and iteratively throughout the research process.

Time Frame:

Figure 7. Timeline of Research



The timeframe for this research project took approximately two and a half years. The first year was dedicated to an extensive ethics review that resulted in the approval to involve vulnerable participants to be interviewed. Upon approval for the project, partnerships with NGOs were established to reach the sample and survivor participants, and networking for field experts. The sample size increased with the expansion of the data collection phase. The longer timeline for interviews and questionnaires to be answered accounted for questions that could trigger

individuals and allowed for their personal therapy sessions to go alongside the research process. This allowed for the participants to have control over the pace that was comfortable for them, allowing them to feel in control over should they be triggered or experience a dissociative episode. The data collection phase for survivor participants resulted in forty interviews completed, with twelve of the cases related to trafficking.

COVID-19 Impact on the Research Methods:

The initial proposed methodology was planned for in-person interviewing. However, due to the closure of international borders because of COVID-19 pandemic restrictions, the research was adapted to use online interviewing methods, which turned out to be of benefit. The use of online interviews for survivors was vital not only for safety and comfort of participants but it allowed for a greater diversity of participants. In this way, Covid-19 safety precautions were ensured as no physical contact was involved, and this kept both parties safe. In addition, each survivor participant could stay in their home, car, or location of choice, as well as decide on the best time of day that worked for their schedule, meaning that no participant needed to take time off work to participate. By staying within their routine, survivors could participate without fear of their family knowing, if they had not yet disclosed their CSA/CSEA. The survivor participants also had access to their items of comfort that could be used during interviews. Survivor participants had the freedom to express their emotions, such as crying throughout their interviews without feeling judged. They also had breaks, food, or water whenever needed. Staying within these safe areas allowed for additional safety measures, especially for those going through judicial processes for their cases, and/or those still under threat from their abusers or traffickers.

Primary Data Collection:

The primary data collection phase consisted of four steps that engaged trauma-informed methods, as well as survivor-led phases. At each stage the participants had the opportunity to stop their engagement with the research, decide how they wanted to be interviewed, as well as choosing not to answer questions. This approach granted choice, autonomy, and control of the process to the survivors. By including choice as a tool within research, empowerment and healing can occur especially after childhood sexual violence which had taken away their choice (Dennis, 2014; Ross, 2017).

1. The first step was an introductory meeting in which the researcher was able to build rapport and trust with the participant. In this meeting the survivor participant was given the opportunity to share what they wanted. Some chose to share their experiences of CSA and/or CSEA. The original questionnaire did not specifically target questions related to their CSA and CSEA stories to limit re-traumatization. The researcher did not require survivor participants to share their full CSA/CSEA narrative account, however, some participants specifically asked to share their full story during the introductory session. This resulted in a slight modification to the research methodology incorporating the time for sharing, increasing the original time frame of 15-30 minutes to one to four hours, depending on the participants' needs. This time was used to elaborate on the research question, any concerns or questions the participant had, were addressed, and this allowed for a safe space for the survivor participants to share any part of their story in more detail if they chose. These meetings were not video or audio-recorded to ensure that the participant felt safe. Prior to notetaking, consent from the participants was obtained, and the researcher emphasised what

notes were being taken while the individual shared their experience. This was done to minimize the anxiety for participants. In addition, survivors who wanted to share their stories, but could not do so verbally, or go into detail, requested to share poems about their CSA/CSEA, third-person stories, and different art forms. This provided the researcher with an additional opportunity to grasp a better understanding of their experiences. The introductory session with field expert participants remained as described in the research proposal, i.e., an opportunity to learn about the research and ask any questions about the research project.

2. The second step involved emailing written interview questionnaires. This was gathered either in writing via email or verbally during a Zoom meeting lasting a few hours. Each participant had the choice of how they wanted to participate. This step lasted six months to collect all the interviews. A participant, both field experts and survivors, could take these six months to complete the 31 questions at their own pace. This accounted for COVID-19 stressors, triggering questions needing therapy, health issues, and unexpected circumstances. It was important that in a study concerning vulnerable persons that the interviewer accommodate and empathize with each participant. Every few weeks participants would receive an email to check-in with the status of their interview questions and were given the opportunity to switch to an audio/video interview. These emails also asked if the participant was triggered by the questions and if they needed any additional resources to continue with the study. This open communication was important in acknowledging the risk of re-victimization, and the strength of each participant to continue with the research.

3. Once initial coding was done, follow-up interview questions were used to elaborate short answers. This was done over a Zoom meeting or by email. This permitted the researcher to have a deeper knowledge of certain topics and themes.
4. Triangulation of data – The interview data was compiled into datapoints and compared with international datasets of child sexual abuse and human trafficking, as well as law enforcement and media reports. This process provided an important means for data triangulation and offered both background information and evidence in numerous cases.

Data Analysis

Narrative inquiry was used to record and understand the experiences of participants to reveal in-depth details of their lived-experience and perspectives on CSA/CSEA, through interviews and questionnaires. This approach is a "collaboration between a researcher and the participants over time" (Clandinin & Connelly 2000, p. 20) and is guided by relational ethics (Caine et al., 2020, p. 6; Clandinin & Connelly, 1988, 2000). Narrative inquiry helped dictate interactions with participants and was consistently used throughout the study (Denzin & Lincoln, 2011; Riessman, 2008, p.12; Wells, 2011, pp. 7, 11).

The interviews were divided into three main categories for analysis:

1) Child sexual abuse survivors;

2) Child sexual abuse survivors and survivors of human trafficking for sexual exploitation; and

3) Field experts.

The data from the interviews and questionnaires were first analysed by hand and coded to familiarize the researcher with the data sets. An identification chart was created to differentiate

between male survivors of CSA and those that had also experienced trafficking. This chart included the details of the CSA/CSEA, the ages when CSA/CSEA occurred, perpetrators profiles (Tables 4-8), and demographic information (Figures 2-5). This allowed for simplified identification of the participants who had experienced trafficking based on the *United Nations' Palermo Protocol,* Article 3, paragraph (a) that defines Human Trafficking (see Appendix 1).

This analysis was initially coded by hand and then NVivo qualitative data analysis computer software was used to reveal additional patterns and themes. Recurring responses (quotes) were shortened and inserted into cells which demonstrated the categories listed by participants and then developed into charts. The analysis of the interview transcripts applied narrative inquiry to identify commonalities and differences. The themes (Braun & Clarke, 2006) identified for this study were 1) Disclosure and non-disclosure, 2) The evolution of CSA to CSEA, and 3) Gender stereotypes and biases. Within the sub-themes, the modus operandi of concealment was identified, in addition to indicators shared among participants. The two questionnaires included pre-set thematic ideas that guided the research. For example, the theme of Disclosure: "What is keeping men from disclosing their abuse" was developed through the questions 8, 10, 11, 12. Questions such as, "what types of services were least helpful" and "what is most difficult about identifying as a victim" allowed for pre-determined codes to be naturally developed through direct answers. Additional codes emerged throughout the three separate categories as seen above, based on coding for individual answers and group commonality.

The quantitative data collected was used to understand the Modis Operandi of CSEA (See Appendix 8 and 9 Narrative Case Summaries). The narrative summaries of each case reviewed the ages of CSA and CSEA, the perpetrator gender, the perpetrator's relationship to the

child, the location of the CSA/CSEA, and the type of CSA/CSEA. These quantitative data points were then compared to the literature and analysed to create visual data tables and charts.

Ethical Considerations

The study underwent an ethical review by the Royal Roads University's Research Ethics Board (REB) to adhere to Canada's *Tri-Council Ethical Policy on ethical conduct for research involving humans*. All committee members on this research team have over fifty years of combined experience in the field of academia and/or expertise on conducting research with survivors of human trafficking. Due to the research involving vulnerable participants, the primary researcher underwent a police background check. Also reviewed by the Ethics Committee was the interview questions for experts, survivors, and perpetrators, opening email dialogues, and the consent form for survivors, experts, and perpetrators. Furthermore, the United Nations Inter-Agency Project on Human Trafficking *Guiding Principles on Ethics and Human Rights in Counter-Trafficking*, the 'do no harm' principle, and relational ethics as reference guidelines were used to guide this research (Caine et al., 2020, p. 6; Clandinin & Connelly, 1988; 2000; Surtees, 2015; UNIAP, 2008). This ensured that ethical guidelines were adhered to throughout the research process.

In preparation for this study, the primary researcher received training on "Human Trafficking on the Front Line: Concepts, Perspectives & Responses" by the organization, Ottawa Coalition to End Human Trafficking, which was conducted in 2018. This training covered: how to conduct research with vulnerable participants, LGBTQIA2S+ Identities & Vulnerabilities; the Indigenous Reality and Building Allyship; Sexual Victimization of Males; Trauma and the Brain; Suicide Alertness; Addictions; Boundaries of Client Care, and Compassion Fatigue and

Self-Care. By doing this training, the researcher was able to incorporate trauma-informed practices and a victim-centric approach into the research.

During the research process all participants were informed about the purpose of the study and received the full interview questions before giving consent to participate. All participants were informed prior to engaging in interviews that they could choose to not answer any questions and could choose to stop at any time without any repercussions. There was no pressure on participants to sign the consent forms or to participate. The most important aspect of the research was to establish a rapport and trust with participants throughout the research process. All interviews were kept confidential to ensure respect, confidentiality, and safety for those involved. Survivor participant names were replaced with pseudonyms, chosen by participants, to ensure anonymity through the duration of the project. Similarly, field expert participant's names were replaced by numbers. The survivor participants were given the opportunity to choose a pseudonym for themselves for the researcher to use to identify them throughout the study, to empower themselves. This was purposefully done as many of the CSEA survivors had their names stripped away from them during their sexual abuse and exploitation. All participants were treated equally and with human dignity. The form of data and how it would be collected and used was transparent. There were no conflicts of interest or power relationships between researchers and those participating. Additionally, participants were informed that there would be no negative impacts or consequences on the participants if they chose to drop out of the study.

Consent Form:

When a participant expressed interest in the study, they received both the consent form and questions to review to ensure they could mentally and emotionally go through with the study.

Each participant was informed of the nature and purpose of the study, the role of the researcher, the duty to report if a participant expressed suicidal intentions or harm of another person, their rights to anonymity and confidentiality, the approximate time required to finish the questions and the length of time allotted, as well as any additional resources available to them to complete the study. See Appendix 4 & 6 for the consent forms of survivors and field experts. Once rapport was established with a participant and they had signed the consent form, it indicated the beginning of the interview process. See the Appendix 5 and 7 for the survivor and field expert interview questions.

Anonymity & Confidentiality:

To ensure participant anonymity and confidentiality only the researcher knew the research participants. The thesis committee did not have access to the participant list, nor identifiable information of any participant. All identifying information collected went through a de-classification process and was used for charts and graphs. Demographics were also used for pattern analysis, and names were taken out immediately during the data collection phase and replaced with a number and pseudonym. Any names used in this research paper are pseudonyms created by the survivors. The data was stored on a password-protected laptop, and all paper documents associated with the research were locked away in a locked safe, under sole control of the researcher. There were no audio or visual recordings of this research for the safety and comfort of all participants.

Accounting for additional safety measures:

There were strict guidelines for disclosing information (Creswell & Creswell, 2018, p.133) and measures to ensure the safety and anonymity of the participants. Most interviews took place

through a video conferencing software, Zoom, however, some participants preferred to interact through email, either for their comfort or due to a disability. The choice of being off or on camera was given, allowing survivors to also keep complete anonymity if they choose to do so. As some survivor participants are currently going through their own judicial court cases and were advised by legal counsel to not appear on camera, this respected their rights and allowed for participation. Survivor participants were reassured that no interaction was recorded by audio or visual devices and only notes were taken by the researcher highlighting the main ideas of what was being shared. In the case of an audit of the research, participants were reassured that any identifiable markers went through the de-identification process to create narrative case summaries, patterns, and common themes, and therefore nothing would be released leading back to them that would potentially endanger their safety and wellbeing.

Accounting for disabilities:

The research was accessible to all participants by adding the choice of conducting the interviews and questionnaires either verbally or in writing. Seven participants with disabilities could more easily participate because the questions were read to them by the primary researcher and they dictated their answers verbally, or in writing if they were unable to verbally communicate.

Validity and Reliability

To ensure validity and reliability, the research attended to the following areas:

1. Verification: External verification was not required, however, some participants asked to share external verification of their narratives, for example: police case reports, medical files, and media stories about their abuse.

2. Triangulation: Triangulation through in-depth individualized interviews in combination with different data sources were used to examine the evidence, for example academic and grey literature, law enforcement reports, international databases (Carter et al., 2014; Creswell & Creswell, 2018, p. 251; Denzin, 1978, 2012; Patton, 2002).
3. Participants verification: Throughout the research there were follow-up interviews with survivors and experts to ensure the research accurately depicted their true meaning. In addition, meetings with experts ensured accuracy and cross-referenced different forms of human trafficking datapoints. Charts and quotes were also reviewed by the participants for accuracy (Creswell & Creswell, 2018, p. 251).
4. Self-reflection and personal bias: As outlined in this chapter, transparency of process was key to the methodology chosen, data collection and analysis process, and the rationale behind the choices made in the research. As well, different perspectives were included to avoid narrative bias. When examining the data, the researcher engaged in personal reflection and consistently challenged their own biases, especially when data conflicted with their preconceived notion of criminal typologies and perpetrators (such as the discovery of female perpetration as primary abusers and traffickers). Through the writing and editing process, the thesis committee also encouraged the researcher to reflect on personal biases (Creswell & Creswell, 2018, p. 252).
5. External Reviewer: After the writing phase, a reviewer and an editor assessed the final report. This was done by someone unfamiliar with the research to provide an objective assessment, and copyedits (Creswell & Creswell, 2018, p. 252).

6. Terminology: Through the data collection, analysis, and reporting process the terminology used adhered to the Luxemburg terminology guidelines (Doek & Greijer, 2016) for the protection of children from sexual exploitation and sexual abuse, as well as United Nation's terminology on human trafficking, the Palermo Protocols (United Nations Human Rights Office of High Commissioner, 2000), and ECPAT's definition of commercial sexual exploitation (Doek & Greijer, 2016).
7. Survivors were given the opportunity to member check allowing them to review their direct quotes and their personal narrative charts prior to the final report to ensure the accuracy of the content.

Reflectivity and the Role of Researcher

The role of the researcher was to be the primary instrument of implementing the methodology, sampling, data collection and analysis (Creswell, 2013). The potential for bias that could most influence the research was the lack of personal experience with male victims and survivors, as well as the researcher holding a liberal feminist stance on sexual violence. For over ten years the researcher volunteered and worked within the humanitarian aid sector focusing on human trafficking victims and survivors, specifically for women and girls. However, in filling the gaps within academia this study challenged the researcher to reconsider a primary attention on female victimization. This study challenged the researcher's cognitive biases and opinions on males as perpetrators, and males as victims. It was from this new perspective that the researcher hoped to argue for gender equality in analyzing sexual violence, and to give a platform for the voices of males who are victims and survivors. The personal biases were further challenged by the discovery of multiple female perpetrators in over half of the cases in this research. This

challenged the researcher's personal narrative of gender roles in relation to sexual violence, including assumptions of motherhood. However, through active listening and triangulating facts, the researcher believed in each survivor's first-hand account.

Nevertheless, the researcher's knowledge within the field of human trafficking and the networks, which were previously established aided the research in all aspects of data collection, analysis, and understanding of the phenomena. The development of a network supported the researcher during all stages of the research, both academically and emotionally. The researcher kept field notes of online interactions of survivor testimonies through events supporting survivors, a 'thoughts' journal for instances of vicarious trauma and secondary-post traumatic stress disorder (PTSD), and memos to document the process, thoughts, and feelings during all stages of the research. This aided in noticing and responding to any emerging bias in the research.

Due to the horrific and sensitive nature of the content of the research, the researcher kept records of any need for psychological or emotional support that emerged due to the material being documented and potential secondary trauma from hours of listening to stories of childhood sexual abuse and human trafficking in great detail. This preventative action went alongside working weekly with an online counsellor to help debrief without disclosing any of the survivor details. This allowed continuous progress forward in the research without significant secondary-PTSD. There was also open dialogue with the thesis committee members who are experts in the field of human trafficking and male victimization. They helped guide the research when needed and allowed for open discussion on different forms of trafficking without disclosure of the identity of the participants. In addition, the engagement of trauma-informed victim-centric

training in child sexual abuse and human trafficking prior to starting the study aided to prepare the researcher for this project.

Limitations

Sample Restrictions:

Children did not participate in this study, despite being the targeted demographic of the study. This was purposeful, as children would have needed numerous additional established safety precautions and a specialized research design for a study with children. This also would have required more time, resources, and safeguarding tools than is allotted in a Master of Arts thesis. An additional limitation would have been that children who disclosed CSA/CSEA to the researcher would be needed to be reported to police of child endangerment and sexual exploitation. Children that have been liberated or escaped their exploitation and had access to therapy and rehabilitation would be needed first to aid in the risk mitigation of re-traumatization. Therefore, the sample was limited to adults over 18. The participants in this research have created safety measures for themselves or had access to them through this study's NGO network, such as seeing a therapist if triggered by questions. Also, according to frontline workers (Davis & Miles, 2014, 2015; Palfy, 2018; Procopio, 2018), the majority of male victims do not identify or seek support for several years, if not decades after their CSA/CSEA, therefore, adult participants offer the ability to reflect over past experiences and therefore align best with the scope of the study.

Yet, it is still recommended for research be done with child victims of trafficking in future studies as they also hold perspectives and knowledge on the topic of human trafficking for commercial sexual exploitation that cannot be gained from any other age group.

Sample Size:

While a sample size is not enough to be representative, in-depth interviews provide deeper knowledge into their experience, and knowledge of how and why CSA and CSEA occur. This also represents a large sample for a largely qualitative study.

Large dataset:

As an exploratory study, the primary goal was to receive as much data as possible to be able to create connections between survivor stories and their needs. Two of the major risks of the study were 1) not finding participants, and 2) participants not completing the study. This risk was mitigated through multiple partnerships with NGOs to develop a safe and trusting environment, which resulted in a rapid and enthusiastic participation, which resulted in many participants. To account for those that would be unable to complete their interviews and drop-out of the study, additional interviews were conducted. From the 50 initial participants, 40 participants completed the entire interview process. However, this resulted in a large dataset and information that is beyond the scope of a Master of Arts thesis study. Therefore, the answers that directly fit with the research questions were further developed, and additional data collected will be used in future research reports, papers, and presentations.

Diversity:

This study aimed to be diverse, however, there were a limited number of minority groups represented, such as from the Black, Hispanic, Indigenous, and Asian communities. The majority of participants were located in North America, with only a few from Africa and Europe. This was addressed and advertised (see Appendix 2 for poster) however, due to the time constraints of a Master of Arts thesis no more participants could be included after June 30, 2021. Though the

primary focus is on Canada and the United States, there are very few experts of male sexual violence located within North America, thus, the study was open to global participation.

Offender Interview:

As this research aimed to have a holistic view it also included research questions and a consent form for a male child sex offender. These questions were approved by the RRU Research Ethics Board. The offender's participation was also approved by participating survivors. However, the male offender of transnational child sexual offenses decided not to participate, and the data was not included in the study, in alignment with ethical guidelines. However, future research on buyers and perpetrators is important to understand the motivations and modus operandi of the crime to better protect children around the world.

Chapter IV - Research Findings

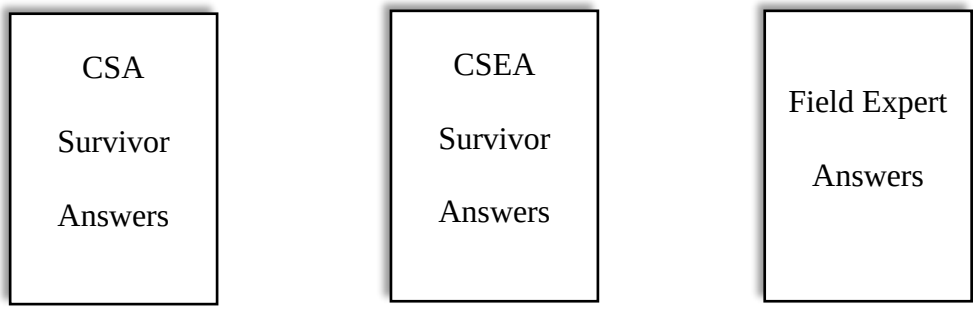
This exploratory study into sexual violence perpetrated on male victims revealed numerous data points, and examined the insights that 40 male survivors and 30 field experts had for improved protective measures and rehabilitation practices for male victims and survivors of CSA and CSEA. In addition, insights and themes emerged on what has prevented frontline professionals from identifying male victims, and survivors from self-identifying. Finally, this study draws attention to what has been detrimental to a male survivor's journey, and what has been the most helpful in a male survivor's journey to recover and thrive. Based on participant stories, rich data was analysed, categorized, and organized to reflect not only each survivor participant's experience, but also the common experiences of the 40 survivor participants, which were enhanced by the 30 field expert participant's answers.

This chapter highlights what participants explained when answering the main research question: 'What are the needs and stories of male victims and survivors of child sexual abuse, and human trafficking for sexual exploitation', as well as the sub-research questions, as follow:

1. What insight do male victims and survivors have to share about their experience and journey that can inform better protective measures (policies, practices) and rehabilitation processes for victims and survivors of child sexual exploitation and trafficking for sexual exploitation?
2. What insights do experts, and front-line workers have that can better inform practice, policies, and the process for victims and survivors of child sexual exploitation and trafficking for sexual exploitation?

3. What is preventing male victims from identifying as victim of child sexual abuse or human trafficking for sexual exploitation, and seeking help?
4. What has been detrimental to a male survivor's journey, and what has been the most helpful?

Figure 8. Visual Representation of Data Analysis of Group Type



Each questionnaire was categorized and separated by group type (CSA Survivor, CSEA Survivor, and Field Expert), organized by question, and placed within one of the three larger documents. This was done to compare and contrast each question per section. With the collection of interviews placed within three main documents, these answers were then compared and contrasted with the answers provided in the other two documents. The CSEA participants who were identified as trafficking survivors and as being both sexually abused by their families and trafficked were given an additional nine-question questionnaire related to the modus operandi, victim identification indicators, and familial perpetrators. These questions can be found in the Appendix 10. The answers from the field experts were cross examined with survivor answers to compare and contrast with what is known in academic literature, on the frontlines, and with the real situations of survivors when they come in contact with frontline professionals. The research

findings were divided into three main categories, and a brief analysis of each is given, which is augmented by charts, tables, and findings.

1. **Modus Operandi of Male Victimization and Preparator Typology:** This section provides a quantitative statistical breakdown of 1) the ages the child sexual abuse began, 2) the average length of the sexual abuse in years, 3) an examination of the gender of the perpetrators (sexual abusers, traffickers, and buyers) and, 4) a breakdown on the type of perpetrators.
2. **Male Victim Identifiers:** This section reviews the qualitative sub-themes of internal and external factors that minimize disclosures. In addition to Table 9, 10 and 11 that show behavioral, emotional, psychological, and physical indicator identifiers of child sexual abuse and exploitation in both childhood and adulthood.
3. **A Survivor's Journey after Child Sexual Abuse and Exploitation:** This section presents the findings based on the interviews of what was perceived as most detrimental to a survivor's healing journey. Table 12 is divided into the top responses by survivors, which is compared to experts' responses. Table 13 shows the findings of what was perceived by survivors as most helpful on their journey to healing and recovery. This is illustrated through four stages:

   1) The beginning stage where an individual self-examines their experience and begins to search for answers.

   2) The survivor reaches out to peers and is supported by a male-survivor community and begins to share their story.

   3) Resources identified by survivors that were significant to their healing process.

4) Growth, both mentally and emotionally by the survivor to reintegrate into society.

The findings provide insight into disclosures and indicators of CSA/CSEA, and what prevents a child and adult from disclosing their abuse. It also highlights grooming and concealment tactics by perpetrators, uncommon perpetrator profiles, such as family and female perpetrators, and finally interactions with mental health professionals and law enforcement professionals that show a lack of trauma-informed training and a gender bias.

The quotes used in this paper are unaltered excerpts from the interviews with survivor and field expert participants.

Modus Operandi of Male Victimization and Perpetrator Typology

This section explores the narratives of the 40 survivors by outlining the perpetrator typologies, perpetrators' gender profile, a review of the starting age of CSA and the length of the abuse. Within Appendix 8 and 9, there is a further breakdown of each category per case narrative. Table 4 below shows the average length of the abuse of participants was 6 years, with the longest being 22 years. Additionally, Table 5 shows the starting age of when the CSA began. The largest age group of 31 survivor participants (77.50%) reported their abuse began before the age of 9.

Table 4. Average Length in Years of CSA & CSEA

Length of CSA & CSEA (In years, *n* = 40)	
Mean	**6.0725**
Medium	4
Mode	1
Range	21

Minimum	1
Maximum	22
Count *n*	40
Sum	242.9

Table 5. Age in Years of the First Incident of CSA

Ages of CSA	Number of cases (*n* = 40)	%
1 month to 4 years old	*n* = 16	40 %
5 years old to 8 years old	*n* = 15	37.50 %
9 years old to 11 years old	*n* = 4	10 %
12 years old to 17 years old	*n* = 3	7.50 %
18 years and above	*n* = 2	5 %
8 years and below	***n* = 31**	**87.50 %**

Victim Typology:

The majority of victims within this study (see Table 4 above) were younger than 11 years old (n=35, 87.50%). Additionally, the average length of time participants experienced CSA/CSEA (n=40) was 6 years, with 37 of the 40 participants reporting multiple instances of CSA over multiple years. Seven CSA participants and nine CSEA participants reported their abuse continued into adulthood. Within this study (see Table 5 above) the average age of the start of CSA followed similar patterns of CSA/CSEA compared to the Counter-Trafficking Data

Collaborative (CTDC)[7]. Compared to an analysis of the CTDC indicating that 25.29%, or approximately 39,530 cases on all forms of trafficking included male victims (CTDC, 2022). Their dataset on 'men and boys trafficked into sexual exploitation' show that male children subjected to sexual exploitation represent 52.95% (20,931) of the total cases with male victims (CTDC, 2022). When comparing male victimology in terms of age, a fifth of all male victims trafficked into sexual exploitation were under the age of 11 (20.43%) and 37.39% were under 14 years old (CTDC, 2022). This study and the CTDC show similarities when looking at the ages of first sexual exploitation, the CTDC shows 3.33% of victims were under the age of 11, and 9.03% were below the age of 14 (CTDC, 2022). These results may demonstrate that the age of first sexual victimization for males is significantly earlier in age, than their female counterparts where their first victimizations largely start around 11-14 years of age and higher. This illustrates that there are varying trafficking patterns for female and male victims of sexual exploitation (CTDC, 2022; Human Rights First, 2017). It is important to acknowledge that there is an increased vulnerability for women and girls in society in general, particularly in lower socioeconomic strata (Montesanti & Thurston, 2015; Sinha et al., 2017; Williams et al., 2018), however, these datasets also highlight male vulnerability to sexual exploitation. This does not undermine the impact that violence has on female victims. Therefore, all genders that are sexually exploited should be fairly considered, and appropriate safety protective measures and rehabilitation services should be tailored to each gender as their typologies and experiences differ.

[7] Counter-Trafficking Data Collaborative (CTDC), is a centralized database with 156,330 cases of all forms of human trafficking from 189 countries and territories, with 187 nationalities represented.

Perpetrator Typology:

Based on the sample, this study revealed that the most common perpetrators of child sexual abuse and exploitation of boys were abusers that were close and known to the child. Table 6 (below) *Types of Perpetrators*, highlights the frequency of abusers within each case, showing the most common perpetrators in order as Mother (*n*=13, 32.50%), family friend (*n*=13, 3=.50%) and Father (*n*=11, 27.50%). This sample identified male perpetrators as abusers, traffickers, or buyers/clients in 32 (75%) of the 40 cases, and female perpetrators as abusers, traffickers, or buyers/clients in 24 (60%) of the 40 cases.

Table 6. Gender of Perpetrators in the 40 Cases as Reported by Survivor Participants

(*n* = 40)		
Male	32	**75 %**
Female	24	**60 %**

Table 7. Perpetrators Type in the 40 Cases as Reported by Survivor Participants [8]

Types of Perpetrators in the 40 cases		
Mother	13	**32.50 %**
Family Friend [9]	13	**32.50 %**
Father	11	**27.50 %**
Older Child	8	20 %
Stranger	8	20 %
Neighbour	6	15 %
Grandfather	6	15 %
Doctor or Dentist	5	12.50 %
School Staff: Teacher/Principle	5	12.50 %
Camp Councillor/Boy Scouts Leader	4	10%
Law Enforcement Officers/Police	4	10 %
Cousin	4	10 %
Aunt	3	7.50 %
Religious leader/Clergy member	3	7.50 %
Politician	3	7.50 %
Siblings	2	5 %
Babysitter	2	5 %
Stepfather	2	5 %
Sports Coach	2	5 %
Legal: Lawyer/Judge	2	5 %
Uncle	1	2.50 %
Grandmother	1	2.50 %
Mother's Partner	1	2.50 %
Film Director	1	2.50 %
Landlord	1	2.50 %

[8] A case can have multiple types of perpetrators.
[9] Gender of family friend was not specified by participants.

Table 8. Perpetrators Type by Group

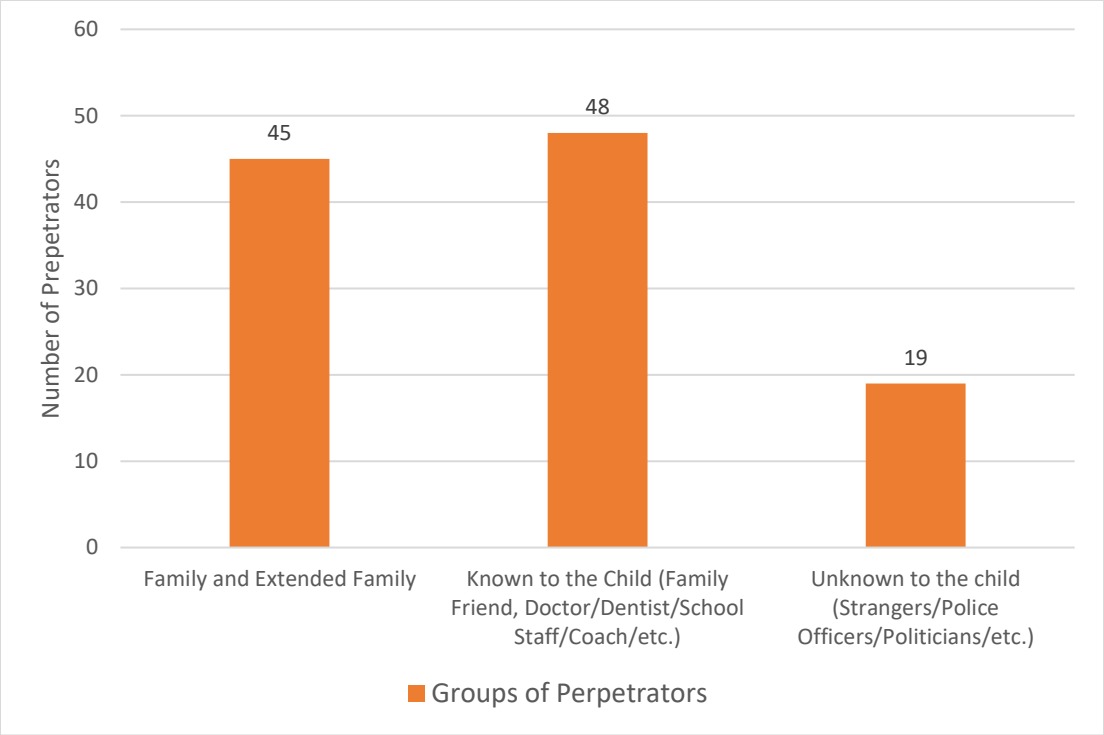


Table 7 and 8 demonstrates categories of perpetrators, as familial, known to the child, and stranger. This shows that for the case study of 40 survivors, the majority of perpetrators were known to the child, or were in the immediate or extended family of the male child.

Cyber tactics and data from experts on recent trends:

Ten of the twelve CSEA trafficking survivors interviewed revealed that there was CSAM created through photography or film which was distributed or exchanged through physical copies of the CSAM or online. According to seven interviews with expert participants specialized in online CSAM, the latest trends using Open-source intelligence (OSINT) collection and analysis of data gathered, in addition to darknet investigation, show an increase in the use of social media

platforms used for grooming, and high COPINE levels on darknet CSAM cases. According to one of the field expert participants':

> There is a massive trend toward boys self-producing sexual context, which is accessed via a monthly subscription (i.e., Onlyfans.com). While there are global monitoring platforms for Child Sexual Abuse Material, these areas easily pass most of these monitoring platforms. Self-production and streamed-live CSA, can by-pass the AI and web crawling monitoring platforms, meaning that it never gets reported. – Field Expert Participant

There has also been an increase in male LGBTQIA2S+ social media platforms for grooming. For example:

> Male predators are using Grindr to engage in sex with young men and boys, and on with other platforms such as Kik, Snapchat, Omegle, Whisper, Yik Yak, Burn Note, Line, Skype, Bigo Live, YouTube, and Tik Tok. There has been an increase in boys being groomed through numerous gaming platforms, such as AK2, Rules of Survival, and PUBG. – Field Expert Participant.

According to a field expert participant specialized in OSINT dark web crawling:

> Accessing the Darknet as a perpetrator requires multiple steps (such as using Tails operating systems, and TOR) to safeguard their anonymity. The Darknetmarket (DNM) bible for buyers is highly organized with recommendations on how to avoid algorithms tracing a perpetrator's searches. A direct quote from the Darnetmarket Bible states: *"Before you start: So, you are about to read how to commit felonies and reduce the risk of getting caught*". Accessing the darknet, chatrooms, purchases, and researching can

only be done through precision and actively searching to find categories of child abuse materials. Darknet sites dedicated to selling drugs, illegal weapons, and illicit goods even mention that child abuse material is not allowed on their sites and ban child abuse material and flag categories such as ‘child torture/rape/child porn’. Therefore, accessing the darknet and entering specific websites and chatrooms for CSAM follows a strict methodology and guidelines in order to remain undetected, while interacting with others online, and exchanging CSAM. For example, one manual on the darkweb breaks down each step – “Where do I find a child?”, then the subheadings go into “single parents and moms with kids; babysitting, daycares and schools; survey, approach and create a relationship.” Then it breaks it down more into steps “First contact, second physical contact, exploring the child’s genitals, exploiting the adult’s genitals, etc.”. These manuals are very methodical. As law enforcement we need to remember that these perpetrators can appear as praised individuals in the community, but the reality is that they spend years if not decades focused on how to abuse children.

–Field Expert Participant

It has been found that on the darknet, COPINE levels have increased towards level 6 for sexual activity containing CSAM of boys, with an increase in the availability of CSAM Explicit Sexual Posing of boys. Additionally, level 7-10 on peer-to-peer networks on the darknet have increased with CSAM of younger boys, ages as low as two years old, however, on average between eight to twelve years old have become the most

> common, with an increase in rape, sadistic rituals, and sexual exploitative snuff films* of boys. – Field Expert Participant

Participants in this study reported elevated levels of physical and sexual violence, of both genders, forcing upon them acts of extreme forms of bondage, discipline, bestiality, cult-like rituals (Salter, 2012; Sarson & Macdonald, 2008), dominance and submission, sadomasochism, and even homicide of other children. A snuff film, thought to be myth, is a pornographic film or video recording of a real murder, can be an extreme part of sadistic abuse (Dietz et al. 1990; Krafft-Ebing, 1894; Salter, 2013; Shengold, 1989). It was reported by 12 CSA and CSEA participants that they had witnessed the killing of another child during their sexual abuse and exploitation, with 5 of these accounts being video recorded at the time.

Male Victim Identifiers

The third research question aimed to explore, ‘what had been preventing male victims from identifying as a victim of CSA and/or CSEA and seeking out help’. This question is investigated through common themes from both survivor and expert interviews. A review of all the 40 survivor interviews revealed unique answers to this question and are summarized in Table 12. The key sub-themes identified in exploring male victim identifiers included: internal factors that minimize disclosure; and external factors that minimize disclosure. In addition, the exploratory study revealed indicators and tools that could help frontline service providers identify and assess male CSA and CSEA at an early stage.

Internal factors that minimize or stop disclosure include

The Internalization of the Grooming Process: Firstly, through the grooming process survivors of both CSA and CSEA experience negative core emotions that involve emotions of embarrassment, shame, fear, and guilt. These core emotions are intensified through the grooming of a victim and suppress disclosures. Numerous survivors reported having perpetrators that were sexually abusing them that were their family or close friends of their families. Additionally, survivor participants reported that they had trauma-bonds which were exacerbated by the use of emotional abuse tactics such as manipulation and gaslighting that weaponized affection. For example, mothers could use crying to make their child feel obliged to endure sexual abuse.

> The shame and guilt have made me feel inferior and the only use I am, is to be used by others. I have a hard time speaking up or feeling like I have a right to do even simple things. – CSA Survivor Participant

> I internalized the guilt and blame, feeling totally responsible for all that was happening. I knew, if discovered, the blame would be put on me, and that knowledge was more than I could bare. In the third grade, at the age of 9, the level of the abuse changed, and I was raped. It was after that encounter that I felt the need to guard the secret with all my soul, and if the secret became known, that I would need to commit suicide. - CSA Survivor Participant

Masculine Scripts: Male victims in the study suggested they faced internal conflict with heteronormative masculinity, where a child's perception of masculinity encompasses the notions of not showing emotion or weakness. When faced with male-on-male abuse the victim may also

suffer from internalized fear or resentment towards homosexual behavior and be fearful of being labeled gay.

> Shame is what stopped me from disclosing…. Fear that people would think I was gay. It is all nonsense. I was a child. And so, what if I am or was gay… I was a little boy. I did not even know what sex was. I was raped by men and by my own mother. – CSA Survivor Participant

> When speaking about my experience to people, I have been told or asked if I was weak, gay, unmanly, whether I had any part in what happened. - CSA Survivor Participant

Denial and Minimization: Male victims shared that they may also face internalized denial or minimization of their CSA/CSEA, justifying to themselves that they do not need support or to disclose.

> Denial... For so long as whatever happened was just a one-time event, I wasn't a victim like the women I read about who suffered horrific ongoing domestic violence. In my view, there was no need to call it abuse. - CSA Survivor Participant

Psychological Factors: Additionally, many male survivors in this research described experiencing dissociation and complex-PTSD. Many survivors experienced a complete loss of memory which is the brain's way of protecting itself from the trauma. The field experts suggested many survivors could go decades without any memory of their victimization.

> The shame. They convince you that it is all your fault somehow and that you will be in trouble if you tell anyone. I also disassociated a lot. I spent years not believing my memories and thought I must be making it up. But I found out they abused other boys. So, my memories are probably true. - CSA Survivor Participant

> Throughout my entire life, there's been a struggle with anxiety, depression, depersonalization, and other forms of dissociation. – CSEA Survivor Participant

External factors that minimize or stop disclosure include:

All 40 participants reported a form of consequence that would follow a disclosure or an attempted disclosure. For example, participants reported being disregarded, not believed, shamed, emotionally abused, physically harmed, as well as experiencing other forms of concealment of their CSA/CSEA by adults grooming their communities and making up excuses for the child's actions or verbal disclosures. Additionally, CSEA participants experienced being physically moved or trafficked to another community.

Denial and Dissociation: Most participants reported that once they began to show indicators of their CSA, and/or began to disclose their experience, their perpetrators would use grooming techniques by using the trauma-bond to emotionally manipulate and gaslight them to stop any future disclosures. Numerous survivors experienced dissociation without any or minimal memories of their CSA/CSEA.

> My biological mother would always tell me that I was safe and to stop talking about it, for if the police or anyone were to find out, they would take me from her and put me back into care. She then would ask me, "You don't want that now do you?' Being alone as a child, this was my biggest fear. This is why I kept my mouth shut and mentally buried these traumatic life experiences for so long. – CSEA Survivor Participant

Threats: The grooming process for many survivors included the formation of a trauma-bond. This trauma-bond created by family or those in close contact with a child influenced disclosures,

as these adults' used tactics of guilt and shame towards the child to stop future disclosures. These tactics may include the use of threats and blame towards a child to create fear over the victim's personal safety, or the safety of their close family members (even if it was the family committing the abuse and threats).

> They use scare tactics on me by threating me with extensive torture. –CSEA Survivor Participant
>
> She verbally threatened me, and would hit me, telling me to keep my mouth shut and that no one would believe me. – CSA Survivor Participant

Disbelief in Childhood: Survivors also recounted facing not being believed when they disclosed. All 40 survivors stated they had attempted to tell family, friends, and frontline professionals and were not believed.

> I would say my community and society in general made my journey more difficult and frustrating because of the lack of trust, the lack of belief, and the stigma of being labeled a "problem" due to not fitting into the norms. – CSA Survivor Participant

Disbelief in Adulthood: Numerous survivor participants also reported feeling disbelieved by frontline service providers when seeking help. These experiences may have reinforced the idea that law enforcement and hospital staff, and mental health professionals will cause re-traumatization. For example, once a CSEA survivor participant's memories began coming back in adulthood, he checked himself into a hospital and disclosed his story to the hospital staff. However, he shared that this resulted in being placed under an involuntary hold for four weeks and being heavily medicated. In order to be released this participant felt he needed to recant his testimony despite him sharing his real lived experience.

> As a male survivor of human trafficking, I never felt as if anyone ever had my back. Not only did the mental health community attempt to put a Band-Aid over a bullet wound instead of trying to help me work through my past traumatic life experiences, but with what felt to be a lack of empathy and compassion that I was given, I felt as though I was on my own. – CSEA Survivor Participant

Additionally, some survivors recounted experiencing a lack of trauma-informed training and a gender bias when disclosing to law enforcement personnel.

> She was questioning my story and details. She claimed that due to there being multiple females that were involved in my abuse during the time when I was trafficked, that it didn't seem to fit the norm in terms of the statistics which have been historically collected by law enforcement. The female detective continuously challenged me on my story, inquiring why if there were so many females involved in my abuse, why after thirty years hadn't at least one of them came forward to confess. I was completely and utterly dumbfounded. The female detective went on to tell me that historically speaking, women are not normally involved in that type of abuse and the ones who are, seemingly always end up coming forward. I was so disgusted with the way in which the detective was interviewing me, along with how she was making assumptions based on previous statistics, rather than treating me like a fellow human being and showing me compassion, that after I got home from the police station, I immediately called her and advised her that I did not want to proceed with a criminal investigation. – CSEA Survivor Participant

Limited Services of Male CSA/CSEA: Participants shared that there were minimal support services tailored to male survivors, which stopped disclosures as there would be a need for follow-up support.

> Our social services here are really limited, so we don't even try to use them, its just far too complicated and the waiting times are incredibly long. – CSA Survivor Participant

> In short, lack of services is what prevents a male from seeking help. Even if a male wanted help in secret, to protect himself from society or those close to him, there are extremely limited options. The further a person is from a major city, the less chance there is for him to receive the care he needs. – CSA Survivor Participant

Fear of being labeled an Abuser: Participants shared that abused boys are fearful to disclose experiences of abuse or trafficking due to fears that they will be seen as future abusers.

> I found a danger in telling people. In the past decades if you are a male and have been abused, you are expected to be an abuser, that is what everyone says, that is what everyone feels. They never said that about women – if a woman is abused, how awful, if a male is abused, oh better watch out for them. – CSA Survivor Participant

The research interview questions and the narratives of the 40 survivor participants also revealed patterns in common indicators and symptomology for a male child victim and an adult male survivor. These indicators and symptomatology can be found in Table 9, 10 and 11 below.

Table 9. Childhood Indicators (Emotional and Psychological) as Reported by Participants

Emotional	Psychological
Complex PTSD	Presence of dissociative disorders
Repeated self-revictimization	Non-epileptic seizures (seizures caused by trauma memory)
Internal denial of CSA or CSEA, and/or the extent of it	PTSD after witnessing a death during CSA or CSEA event
Fear of male children, teenagers, and adults (especially when showing signs of aggression or violence in children, and normal demeanor in adults)	Stockholm Syndrome and strong trauma bond formed with abuser/trafficker
Fear of people or objects near face and mouth	Excessive deference and compliance when given instructions

Table 10. Childhood Indicators (Physical and Behavioral) as Reported by Participants

Physical	Behavioral
Significant blood alcohol levels (infant/toddler/teen)	Attempts to disclose CSEA/trafficking through drawings, writing “help” in school homework, or during emergency room/medical examinations through body movements and expressions
Constant throat and mouth infections / bruising in the mouth	Bedwetting (as a child/teenager)

Acute pain in the genital area (even days/weeks after abuse/exploitation)	Obsessive cleanliness (multiple showers a day)
Bruising on the throat (fingermark bruising around the neck from choking, or wearing dog collars, ropes, or ties)	Poor hygiene (unbathed and/or wearing the same clothing for multiple days) – deliberately avoiding regular bathing or personal hygiene
Needle marks around arm injection sites (sedation/drugs)	Sudden increase in aggression when the neck is touched
Drugs in bloodstream (infant/toddler/teen)	Sudden disinterest in hobbies or activities especially if associated with where (or by whom) the abuse took place.
"Unexplained" pain on areas of trauma – neck, back, arms (where memories are associated with abuse)	Uncontrollable urination in public
Bruising on larger areas of the body (blood pooling on sides of the body when confined to a cage/chest continuously for hours)	Sudden use of oversized, baggy clothing or sudden change in clothing style (to avoid displaying their body to perpetrators)
Bruising on hands, palms and knees (being forced to "walk like a dog")	Inability to play with other male children (isolation or showing aggression) (especially is child is showing signs of aggression or violence)
Pain in wrists and ankles from being restrained	Negative emotional response to light flashes/ withdrawn behavior after being photographed
Bleeding from anal area and painful defecation	Nervousness and rigidity when being touched reassuringly (e.g., hand on arm, hand on shoulder)

Table 11. Adulthood Indicators (Symptomology of CSA/CSEA) Reported by Participants

Behavioral	Emotional	Psychological	Physical
Unhealthy attachment styles	Anxiety and panic attacks	Insomnia	Chronic physical pain and headaches
Drug Addiction	Suicidal thoughts / behaviors	Memory loss/ suppression	Inflammation in the body (fibromyalgia)
Alcohol Addition	Depression	Complex PTSD	Weakened immune system
Engaging in high-risk sexual activities	Sudden aggression or shutting down when triggered	Dissociative disorders / Depersonalization (even during intimacy)	Difficulty swallowing due to damage from strangulation and torture
Eating disorders	Hypervigilance	Abandonment issues	Permanent disabilities
Over-working	Self-revictimization	Frequent nightmares	Sexually transmitted infections
Difficulty with physical intimacy (sexual contact)	Emotionally avoidant behaviors	Fear of men	Traumatic brain injury (from physical trauma hit or strangulation)

Engaging in high-risk activities	Social isolation	Claustrophobia	Ongoing pain/sensitivity in anal area.

A Survivor's Journey after Child Sexual Abuse and Exploitation

All the survivor participants faced numerous circumstances during their healing journeys, including barriers to disclosure, and numerous repercussions once they disclosed.

> The times I had sought help, I felt more victimized and that it was my fault. – CSA Survivor Participant
>
> I kept my secret for decades, but that does not mean I did not try to share. I saw therapists for marriage, social workers in hospitals during surgeries, clergy in counsel or a hospital setting, doctors for numerous medical needs. The issue I found when I tried to share my story was that it seemed the times were not prepared to hear it. It felt as if my story was "sad" this happened to me, or even tragic, but not worthy of help or care. – CSA Survivor Participant
>
> Around age 13, I spoke to a counselor, and he refused to help since he felt unqualified and instead offered me a referral which would have forced me to disclose to my mother, who was my abuser…I discovered I had no guarantee of confidentiality, nor any safe place to get help. – CSA Survivor Participant
>
> I had a colleague say that they couldn't work with men because they feared their potential reactions in a therapy session. This surprised me because I have been working with men for over 10 years. If you give a man a safe space, he will finally let his guard down and

then you can help him communicate his needs and traumas, co-leading through the session with dignity and respect. The fear comes with lack of training and knowledge. – Field Expert Participant

A comparative analysis of the 40 survivor participants and the 30 expert participants interviews revealed recurring answers to, 'what has been detrimental to a male survivor's journey', revealing what has harmed the survivors most when disclosing, seeking support, or what deterred them from reaching out for support. Table 12 is organized by frequency of answers per group, with the most common answers at the top. The answers are stated in Table 12 below. When a comparison is done on the top answers by survivors and experts on what has been most detrimental, the top answers do not fully align. For experts the top answer (number 1) was being untrained, however for survivors the similar answer is ranked at number 13. The survivor's top answers described experiencing denials by the perpetrators committing the crimes, unbelief, having their pain minimized, feeling fear, disrespected, re-traumatized. Therefore, even though experts may want a solution of training first, field experts need to remember that victims and survivors are people, with human needs, for example: being listened to, feeling respect, and regaining a sense of dignity. These core human rights are needed to be placed first, before addressing the problem.

Table 12. What has been detrimental to a male survivor's journey

CSA/CSEA Survivor Participant Top Responses	Expert Participant Top Responses
1. Familial denial of their involvement of CSA/CSEA	1. Untrained law enforcement and frontline professionals; 2. Mental health professionals with minimal to no training;

2. Close family or friends' denial of abuse, unbelief, minimizing pain and experiences of CSA/CSEA; 3. Gender biases against male victimization; 4. Toxic constructs around masculinity when interacting with society and frontline services; 5. The feeling of "resistance on every front" 6. "Teachers/peers/friends who "couldn't handle it" after disclosure; 7. Re-traumatization after asking for support; 8. Fear of getting someone else in trouble (if perpetrator was family or had a good reputation in the community); 9. Frontline support workers being disrespectful; 10. Lack or low degrees of empathy and understanding. 11. Discriminatory practices and negative treatment by law enforcement and / or service providers; 12. Service providers lack of transparency or lying; 13. Service providers with a lack of knowledge and training of male sexual victimization; 14. Mental health professionals with minimal to no training "blind leading the blind in session"; 15. Medical professions ignoring or unaware of indicators of CSA/CSEA 16. Institutional racism against men of color or minority groups;	3. NGOs and Frontline professionals working in silos and not sharing information; 4. Services that are not evidence based, and with a one-size fits all approach; 5. Prejudice and systematic bias against male victims; 6. Female-centric policies and procedures; 7. Lack of support from a multidisciplinary group of providers; 8. Lack of gender-inclusive screening tools and / or protocols; 9. Lawmakers and Frontline Professions that seek over-simplified solutions to complex problems; 10. Males minimize their victimization in treatment; 11. Disclosure without safety planning, which increases lethality and cause harm towards the survivor; 12. Males seek treatment (usually) only in crisis; 13. Males frequently abandon treatment when crisis abates; 14. Fear of working with male victims due to the unknown.

17. Difficulty accessing support, especially with disabilities from the CSEA trauma 18. Only seeing female (visuals) representations for sexual violence campaigns. 19. Lack of gender-inclusive or male-centric services / community resources; 20. Lack of knowledge about community resources; 21. Fear of withdrawal from substances and / or alcohol abuse; 22. Multiple misdiagnoses which avoid emotional trauma; 23. Lack of male survivor mentoring/victim advocate; 24. Church ill equipped to help people with trauma; 25. Suicide hotline waiting times; 26. Fear of being arrested.	

Post-Traumatic Growth:

The disclosure rate among the 40 participants varied widely, with some participants reporting this study to be their first instance of disclosure, to others who have spoken openly about their CSE/CSEA experiences after years of support. In addition, the survivor participants reported varying degrees of self-recognized healing, with participants beginning their journey and learning about support, and others having experienced community support and recovery, leading to them focusing on supporting other survivors through a similar journey to healing.

A comparative analysis of the 40 survivor 30 field expert participants interviews revealed recurring answers to the question, ‘what has been the most helpful to a male survivor’s journey. The answers are stated in Table 13 below. These answers were divided into four categories: individual, community, resources, and growth. Individual refers to the starting phase and activities that were stated as beneficial to survivors when they began their healing journeys. Community outreach focuses on the expansion of the self into a community that accepts, believes, and empowers the survivor. Resources are what survivors accessed and proved to be beneficial to their unique healing path. Finally, growth is used in their journey towards a state of thriving, as described as living life again. These four categories are also interchangeable in order and thriving was found when survivors used multiple different resources over the course of their lives, with positive support that promotes post-traumatic growth.

Table 13. What has been the most helpful to a male survivor’s journey

Individual	Community	Resources	Growth
To be treated with dignity and respect, with the autonomy over choice by others and themselves. Minimizing self-blaming and self-	Finding a trusted individual and sharing part of the full story for the first time, who actively listens, supports, and asks what the needs of the survivor are.	Access to rape crisis centers (even if female focused, some crisis centers accept male victims) and access to safe homes for male survivors with emergency needs.	Collaboration of different treatments for different aspects of trauma – treatment for addictions, complex-PTSD, dissociation, etc. These all touch upon the

denial that the CSA/CSEA occurred, and/or the severity. Realizing it was not your fault, self-acceptance of victimhood, and minimizing self-sabotaging actions. Journaling thoughts and memories. Realizing that not everyone wishes to publicly identify as a victim, and survivors are not forced to share their stories.	Sharing story with more safe individuals who actively listen and support survivor growth. Sharing story with a larger group of individuals to feel empowerment and community. Recovery support groups based on the needs of the survivor, etc.: Faith-based, LGBTQAI2S+, Alcoholic/Drugs/Sex anonymous groups with 12 step programs, online anonymous support groups, such as	Finding content and support from NGOs that are focused on male child or adult male survivors of childhood sexual abuse. Receiving counselling or therapy by a trained trauma-informed individual with specialized training in trauma and child abuse survivors. Seeing male representation as victims of sexual violence. Access to Female frontline service providers (for those who are triggered by and fearful of men). Access to mental health support with similar values,	consequences of trauma: alcohol and drug abuse, relationship building, health care, mental health support, etc. Experimenting with different forms of healing through creative arts and writing, art therapy, to express their feelings and story through other mediums. Safe Therapeutic massage with constant consent.

However, there is a need to accept help for physical and mental health long-term consequences of CSA/CSEA. Conducting research via: Internet searches, and reading books on child sexual abuse, trauma, PTDS, and sex trafficking. Starting as an external observer to anonymous group chats online on topics of male CSA/CSEA on	those on MaleSurvivor. Attending Abuse survivors healing retreat weekends, either co-op with women, or all males done through NGOs like MenHealing. Mending relationships, if there is supportive family or friends, sharing parts or the whole story and apologizing for self-sabotaging actions triggered by abuse towards loved ones.	etc.: LGBTQ+ friendly, male friendly, faith-based. Access to specialized mental health treatments and services, such as Interactive psychotherapy techniques, Eye movement desensitization and reprocessing (EMDR), Psychotherapy, Somatic treatment, Neurofeedback, and Talk therapy. Suggesting therapists investigate Palgrave handbook of male psychology and mental health, for solution action language and how to create a male friendly environment within sessions. Tools for (self) identification, such as the Patrick Carnes Post Traumatic Stress Index (PTSI) Test, Adverse	Advocating for self when in contact with frontline professionals. Asking to be mentored or guided by survivor or survivor-led/ focused organization Learning how to re-work coping mechanisms once in a healthy environment. Creating boundaries or cutting off abusive individual(s).

forums such as MaleSurvivor. Watching and listening to other survivors tell their stories, such as on 1in6, MenHealing). This will aid in the reassurance that they are not alone.		childhood experiences (ACEs) questionnaire. Access to different forms of mental health aids, such as appropriate medications for proper sleep and targeted emotional and mental support, for PTSD, depression, anxiety disorders, etc.	Reflecting on personal triggers to trauma and how to avoid or minimize triggering during every-day life situations. Finding activities or hobbies that cultivate joy.

According to the 40 survivor answers, to go forward into healing a survivor needs to first recognize that a trauma experience happened, not minimize their story to themselves or continue to suppress any emotions, thoughts, or memories of their exploitation. After they begin the process to understand more about what happened, they can start to make community with trusted peers that support them, eventually leading to mental and emotional support from trained professionals. Finally, treating various aspects of their trauma, such as addictions and complex-PTSD. This healing can then allow for relationship building, and seeking what brings them joy, these last steps allow for the survivor to live in greater freedom and happiness.

The first positive interactions in which they felt believed and accepted was when many survivors reported their journey to healing began. Trauma-informed, survivor-centric, and trained professionals that did not discriminate against them based on their gender or ethnicity. Participants reported that their healing journey started with their own research to find support, then reaching out for support, and feeling understood and listened to by a trained and trauma-informed mental health professional. To be treated with dignity and respect was a key step in this journey. Once experiencing a safe space to disclose and feeling acceptance and believed, survivors suggested they continued to engage in male-survivor community story sharing events.

> Why was he able to provide me with the best one-on-one therapy to date? It's because he was "real". You could feel he genuinely cared about the person he was speaking with. Rather than assigning me a number and an hour-long appointment, he treated me as an equal, as a fellow human being. – CSA Survivor Participant

> Being believed today has helped inspire me and provide me with a small sense of closure and peace. However, today was merely the tip of the iceberg for this new chapter of my life. It feels like the more you share, the more you realize that we are not alone and it's not our fault. It's not only possible for adult survivors of sexual abuse, sexual exploitation and or human trafficking to make a tremendous impact to enhance the work of advocacy, research, frontline work, and services for others who have been victimized, it's a must. – CSEA Survivor Participant

The research findings highlight the need for tailored support for male survivors of sexual violence. Strategies that incorporate visual representation of what CSA and CSEA indicators are for men and boys and services available allows for victims to self-identify and reach out for

support. Field experts and survivors both identified numerous detrimental gaps in support, from inadequate training, biases, and fear towards working with male victims. However, with proper trauma-informed approaches to training and interactions with male survivors, frontline professionals may see more success in their support for male survivors, limiting instances of re-traumatization. Additional trauma-informed, victim-centric, and survivor-led non-governmental organizations and individuals can be seen within Appendix 13 – Support for Male Survivors Handout.

Chapter V - Discussion

"*We must learn first how to identify male victims, and then find the most effective way to provide restorative services and afford male victims justice*" (Tien, 2013, p.221).

This research project aimed to address several previously identified gaps in the academic literature on child sexual abuse and exploitation of boys (Franchino-Olsen, 2021; Kia-Keating et al., 2010; O'Leary et al., 2017; Shon, 2021; Palfy, 2016; Procopio, 2018) and build upon earlier mixed methods research, through interviews with first-hand accounts of male survivors of CSA/CSEA and field experts. This study focused on both the needs and stories of male survivors of child sexual abuse and exploitation through trafficking. The interviews with all 70 participants revealed the needs of survivors in their healing journeys, as well as detrimental situations, which re-traumatized and re-victimized them, which align with the broader literature on child sexual abuse (Greenbaum, 2018; Kenny et al., 2019; Rafferty, 2018; Richie-Zavaleta et al., 2020). The survivor participants' accounts provided explanations and evidence that supports earlier research on disclosure behaviour (Goodman-Brown et al., 2003; Palfy, 2018). In addition, this research identified indicators in childhood and long-term consequences in adulthood that could aid in earlier identification practices, which expand upon earlier research on indicators of CSA (Black & DeBlassie, 1993; Procopio, 2018; Sebold, 1987; UNODC, 2008).

Age of Abuse and Exploitation:

The Rapid Evidence Assessment (2014) includes searches of ten major databases (NCJRS, PsycINFO, Scopus, Web of Knowledge, Westlaw UK, LexisNexis, MEDLINE, EMBASE, CINAHL, and Google Scholar) and included reviews of 522 papers on the sexual

exploitation of boys and young men. The literature review incorporated academic studies, and grey literature, including NGO, practitioner's reports, government reports, and policy documents. It concluded that there was no fixed age at which childhood sexual abuse is most likely to occur, and there was no average duration common for CSA (Brayley et al., 2014, p.11). The factors which affected the length of abuse included the "abuse-type, pre-abuse relationships between offender and victim, and victim ability to disclose" (Brayley et al., 2014, p.11). Even though the typology of abuse has no fixed age of beginning, it is a factor that differentiates between male and female victims. As described by the CTDC (2022), boys were primarily victimized at young ages beginning in infancy. As seen in this thesis, the majority of sexual abuse cases began at age eight and younger (n=31) at 87.50%, with similarities to CTDC in early infancy at 40% with cases under the ages of 4. Survivor participants elaborated on their reasoning to why they thought they were targeted at a young age, stating that younger males were easier to manipulate and control, however, it also enables perpetrators to mold a victim to their preferences.

> I was trafficked in a foreign country, transported there in a container together with other children. I was nine, the younger ones perhaps three, four years of age. Many didn't survive the journey. The younger you start the more pliable you are. – CSEA Survivor Participant.
>
> Most have their victimization before they turn 12 years old, because younger boys are seen as equivalent to young girls by perpetrators. Boys can be 'gender neutral' before puberty and easily made to look like girls. This is based on personal experience where I was made to wear a girl's wig and dressed in girl clothing, at times wearing cosmetics.

– CSEA Survivor Participant.

I heard a lot of my sexual abusers say, “sex before 8 or it’s to late”. – CSA Survivor Participant

Within this thesis, expert participants also agreed that age was a factor that increased vulnerability. As stated above within the Findings section Victim Typology, it was highlighted that there should be a tailored approach to all genders as there are varying exploitation patterns. However, as this thesis revealed, these findings are consistent with recent studies (CTDC, 2022, INTERPOL, 2018, Seto et al., 2018), male victims are being targeted at significantly young ages. Therefore, frontline professionals, elementary schools, and families should pay closer attention to potential indicators of CSEA shown before the age of eight.

Short- and Long-Term Consequences of CSA/CSEA

Adding to existing behavioural indicators for boys and young men (National Center for Missing and Exploited Children, 2021; Proccopio, 2018), Tables 9 and 10 show new health consequences derived from their trauma. Also, the survivor participants within this thesis experienced barriers that hindered or delayed their disclosures, and for those that tried to disclose in childhood, their attempts were often made in behavioral or indirect verbal ways (Alaggia, 2005). These indicators and symptoms of trauma can be used by frontline professionals to support identification of a victim of CSA/CSEA, but also aid in their recovery and healing journey by understanding that a long-term health consequence in adulthood may be linked to early child sexual abuse and exploitation (Table 11).

Romano et al. (2019, p. 221), described how the “greater the delay in disclosure predicted a greater number of internal and externalized behaviors and health consequences”. This was

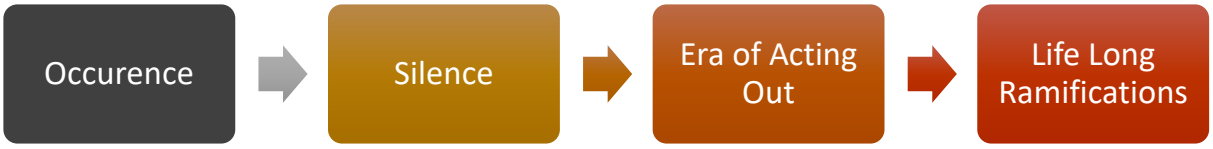
similarly found within this thesis, where all 40 survivor participants faced both internal and externalized barriers to disclosure, in addition to long-term health consequences. Similarly, according to Oram et al. (2016), the data collected from the cross-sectional survey of 150 men and women in England who were in contact with post-trafficking support services revealed ongoing injuries from their exploitation. The study indicated that 21% of men had ongoing injuries, 8% were diagnosed with sexually transmitted infections, and 40% reported high levels of anxiety, depression, and post-traumatic stress disorder symptoms (PTSD). The study concluded that psychological intervention was urgently needed for the population of people who had experienced trafficking (Oram et al, 2016). Another impact survey conducted in the United States by Downing et al. (2021) collected data from 10,624 participants, 10% of whom had experienced child sexual abuse and reported having a poor health-related quality of life. In comparison to the non-exposed population sample, those that had been exposed to CSA reported their general health as poor (as defined as having 14 or more physically and mentally unhealthy days per month and feeling actively limited by their health). Those that experienced enforced intercourse as a child reported a lower level of health-related quality of life compared to those who reported being forced to touch or be touched sexually (Downing, 2021). Similar results have been shown in the Adverse Childhood Experiences (ACEs) research, which are traumatic events that occur in childhood. ACEs have been shown to be correlated with short- and long-term impacts on health, such as chronic health problems, mental illness, and substance use problems in adulthood. ACEs can also have negative impacts on an individual's attempt to further their education, hold employment, and future earning potential (CDC, 2020). All 40 survivor participants in this thesis faced social, emotional, physical, and mental consequences of their

CSA/CSEA and likely had experienced multiple ACEs. This highlights a need for identification tools which could lead to earlier intervention and support. This might include tools such as the Hopkins Symptoms Checklist (HSCL-25), the Harvard Trauma Questionnaire (HTQ), the Patrick Carnes Post Traumatic Stress Index (PTSI) Test, Adverse childhood experiences (ACEs) questionnaire for earlier identification of victims or assessing the degree of services needed for each case.

Social Reintegration

In Southeast Asia, a comparable study was conducted measuring the mental health of trafficking survivors after facing violence and psychological coercion (Iglesias-Rios et al., 2018). The cross-sectional study of 1015 female and male survivors who received post-trafficking assistance were assessed by the Hopkins Symptoms Checklist (HSCL-25) and the Harvard Trauma Questionnaire (HTQ) revealing strong indicators of anxiety, depression, and PTSD. The conclusion of the study revealed that mental health services must be integrated into part of the service provided post-rescue for proper reintegration into society (Iglesias-Rios et al., 2018). According to Procopio (2018) males that have been sexual victimized go through the following four stages:

Figure 9. Four stages of male sexual victimization and consequences [10]



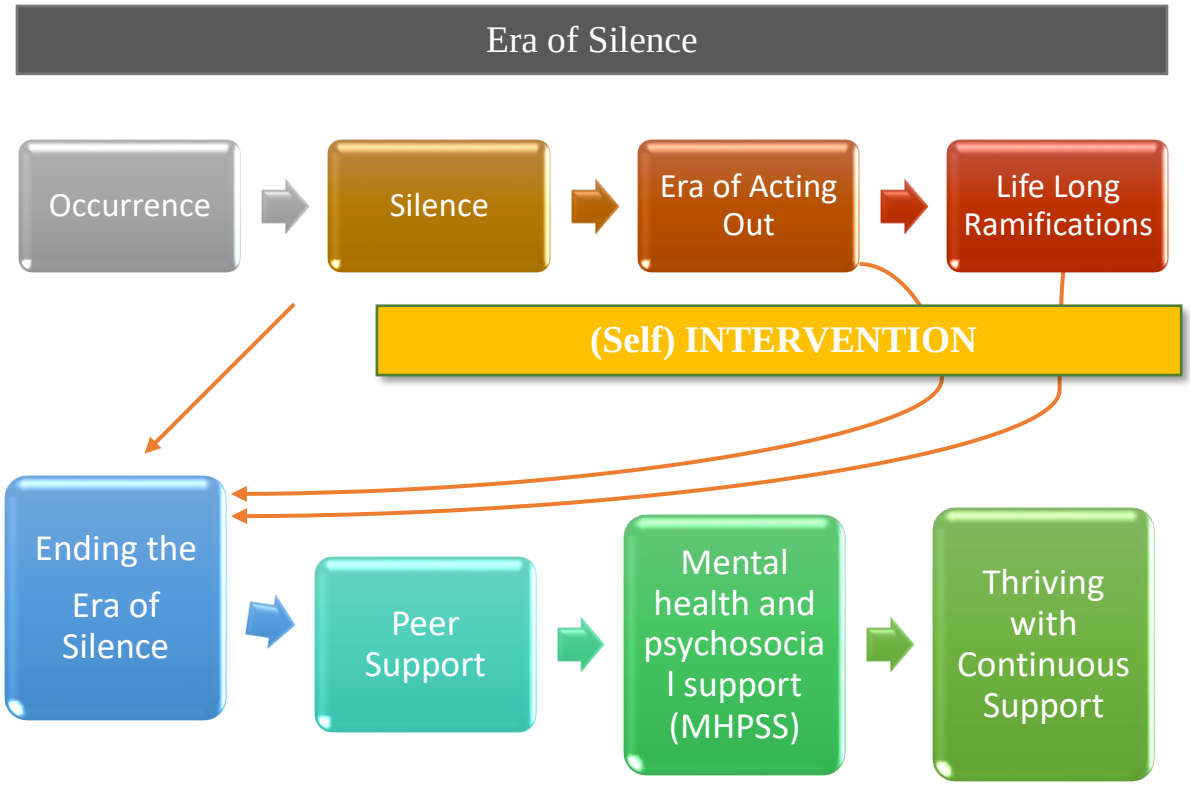
1. Occurrence – When the abuse happened.
2. Era of silence – This is the inner struggle to not disclose. This is where a victim questions their sexual identity, and if they were the cause of the CSA and brought it on themselves.
3. Era of acting out – This is characterized by actions taken caused by the trauma, for example, seclusion drug abuse, alcoholism, failed relationships, violence towards others. If there is no intervention in form of therapy, counselling, or peer-support then the victim continues onto stage 4.
4. Lifelong ramifications – Many men may face many consequences of continuous failed relationships, divorces, lack of contact with their children, alcoholism, drug addiction, sex addiction, depression, long-term health consequences, and suicide attempts.

The results from this thesis suggest that intervention in the in the form of personal actions towards inquiring about support and services are foundational for healing. In addition to establishing community is essential in disrupting the cycle of silence and begin social reintegration and inner healing. The findings demonstrate the importance for survivors to break their silence and begin the healing process. By ending the era of silence and working towards

[10] Credit: Procopio, 2018

continuous forms of support, a survivor has a higher chance of recovery, as seen below in Figure 10. The four blue and green blocks further broken down by survivors on what they did at each stage can be found in Table 13.

Figure 10. Research Findings – Breaking the cycle [11]



Aftercare is another challenge many survivors face (i.e., how they are reintegrated) (Berelowitz et al., 2013; Cockbain et al., 2017; Hill & Diaz, 2021; Josenhans et al., 2020; McNaughton Nicholls et al., 2014a; Procopio, 2018).

[11] This chart is a combination of the work of Procopio, 2018 and the findings from this research.

> Survivors commonly hear is “you are rescued now; you can finally move on with your life.” This is not correct, as it takes away their agency, imposing a power dynamic and a false sense of altruism onto the victim by the frontline provider. It also does not aid the victim in their next steps, which are critical to healing. It is like putting a band-aid on a bullet-hole and letting them go on their own, into a world with social rules they may have never experienced before.” – Field Expert Participant.

Survivors are removed from a situation that was normal to them, an environment in which their trauma responses have become habitual. Therefore, when a victim is moved back into a society with different social rules they can struggle to adapt. For example, a CSEA Survivor Participant, faced this situation after exiting trafficking:

> I was used to being abused and sold from age 2 to 17. That was my normal situation. Everything I wanted or needed had to be negotiated. Food, clothes, ballet tuition. It came with a price. Sex, often violent sex. When I came back and woke up (I was in a coma for months), I approached health care workers sexually because that's how I was conditioned. Their disgust confused me greatly. - CSEA Survivor Participant

Therefore, services provided need to be holistic in addressing the immediate needs of a survivor (e.g., safety, shelter, nutrition, health check), however, they should also address the survivor’s social and emotional needs to rebuild their lives (Berelowitz et al., 2013; Cockbain et al., 2017; Hill & Diaz, 2021; Josenhans et al., 2020). Holistic trauma-informed and survivor-centered training is therefore also needed for frontline service providers in:

1) How to identify victims of CSA/CSEA;

2) How to aid victims post-CSA/CSEA while limited re-traumatization.

Evaluation of current support methods for male victims of CSA

Law enforcement organizations, according to field expert participants, struggle with the identification of victims of any form of exploitation. According to field expert participants, the police do not always actively seek out male brothels even where potential victims may be discovered. Police agencies over-rely on self-identification before pursuing active investigation. According to the field expert interviews of the six law enforcement officers in this study, police do not have the training, experience, or skills to identify victims, especially when resources are also an issue. Additionally, there is unconscious bias held both individually and organizationally.

> There was a cultural fear in the police of tackling male prostitution and male sex offences. Male brothels exist but the police are discouraged from policing them. When I was investigating an offense, the outcome was that I was called before a senior officer and threatened with internal discipline for conducting unauthorised operations. I had no training in human trafficking and neither did any other officers in the 30,000 strong force. In one case, I was directed not to investigate trafficking simply to prosecute the owner and close the premises of the brothel. There were no interviews with the male prostitutes undertaken. No support services were offered to the male victims. One major aspect for foreign national victims is their illegal status and fear of identification by the authorities leading to potential prosecution and deportation, instead of support. – Field Expert Participant

Frontline professionals in mental health support services also face a lack of training and gender biases according to seven field expert participants. A review of the literature suggests

there is an assumption by case workers, managers, and support services that the majority of the victims are female and therefore they fail to recognize or question male victimization of sexual violence. Little is known about this issue, as there has been little research to challenge beliefs, and acknowledge that CSA/CSEA also happens to boys and men.

> There is little or no evidence to create a foundation of understanding to be able to develop services, strategies etc. There are only a few dedicated services that exist for boys, and those that do have low visibility. Most boys understand all too well that there is little to gain from seeking help – they know they will be judged, marginalize, and be treated with suspicion perhaps. – Field Expert Participant

Services providers have limited training, experience, and capacity to work with males (Herbert, 2016; Jones, 2010; Kenny et al., 2019)—and many outrightly do not accept them in services for victims of sexual violence (Faraldo-Cabana, 2021; Franchino-Olsen, 2021; Gagnier & Collin-Vézina, 2016). Further, males are often unforthcoming in research and in health settlings (Affleck, et al., 2020). Many victims will initially refuse help because they have been stigmatized or ostracized by underfunded services before or have been hurt by social workers who have not been trained in how to work with male survivors, or they have only been trained to identify males as perpetrators and aggressors, which can greatly impact the rapport built between social worker and client (Affleck, et al., 2020).

Gender Analysis

> I do not speak much about it because even at this time of the "me too" movement, I do not think that what happened with her [female child sexual abuser] would be construed as abusive by others. – Survivor Participant

Gender stereotypes and biases play a large role in survivor disclosure, including in how survivors self-identified during their abuse, the tools for concealment used by perpetrators, and the importance of female frontline professionals and service providers.

Gender Bias and survivor disclosure:

The underreporting of male victims and survivors of CSA and CSEA may be partially explained by gendered stereotypes of heteronormative masculinity and a fear of being labeled as homosexual (Alaggia, 2005; Dorahy & Clearwater, 2012; Easton, 2014; Romano & De Luca, 2014; Romano et al., 2019; Weiss, 2010). Participants in this thesis reported having difficulty disclosing their CSA and CSEA as disclosing made them feel paralyzed and unable to speak about their abuse or show emotions tied to fear, weakness, and hopelessness. Like previous studies (Palfy, 2016; Romano et al., 2019; van der Kolk et al., 2007), many men expressed an inability to express feelings of helplessness and vulnerability for many years. This was a continuing factor in their choice to stay silent, as to express their feelings would be considered 'unmanly' for not being able to protect themselves from abuse (Palfy, 2016; van der Kolk et al., 2007). This thesis's findings are consistent with past qualitative research findings on male disclosure (Gagnier & Collin-Vézina, 2016; Palfy, 2016; Romano et al., 2019; Sorsoli et al., 2008). Romano et al. (2019) found that men that did disclose their CSA often "waited an average of 15.4 years before sharing their experience" (Romano et al., 2019, p. 218). While most (64.4%) of the men in that study (Romano et al., 2019, p. 218) reported receiving positive support after disclosure, 90% of participants (*n*=36) in this thesis men also reported experiencing a negative response, such as being blamed, ignored, made to feel guilty, experiencing gaslighting, not being

believed, and/or experiencing physical violence. The negative responses during childhood by family, friends, frontline professionals led to numerous participants (*n*=30, 75%) delaying disclosure for years, and up to decades. The research findings within this thesis are not consistent with Easton's (2013) qualitative research which showed most positive disclosure reactions by the first contact point of spouses and close friends. These reactions documented by Easton (2013) differs from this thesis as first disclosure usually involved closer relations to the perpetrators (e.g., mother, father, extended family, neighbours, etc.) where there was more incentive to negatively react to the child or adult survivor to deter further examination into the CSA/CSEA.

Self-Identity and Gender Stereotypes:

Many male survivors of CSA/CSEA struggle with gender role conflicts (Easton, 2014; Lew, 2004; Spataro et al., 2001) often leading to stoicism and/or survival-adaptive hypermasculine persona to avoid discussions of their sexual abuse (Dorais, 2002; Easton, 2014; Kia-Keating, et al., 2005). The social construct of gender stereotypes and biases greatly impacts CSA male victims and survivors as they navigate society as children and in adulthood (Hill et al., 2021; McNaughton Nicholls et al., 2014a; McNaughton Nicholls et al., 2014b). The forced manipulation of gender identity can create confusion for the child and harm the child's sense of identity and how they relate to others (Twardosz & Lutzker, 2010; van der Kolk et al., 2007). Torture, threats, and harm within CSEA to a child can cause an intense fear towards the gender inflicting the pain (van der Kolk et al., 2007). Numerous survivor participants within the thesis faced immense fear of male children and adults that continued into adulthood. This was particularly acute within trafficking situations, as demonstrated by Davies et al. (1992), similarly six of the survivor participants in this thesis reported experiencing a dichotomous split in their

egos through dissociation after being forced into feminine roles during their experience of CSEA. Survivor participants also reported ‘clients/buyers’ (child sex offenders) that brought costumes or clothing, make up, and forced the child to recite certain lines that followed the offenders’ sexual fantasies.

> The first nine years of my life I believed I was a girl. My grandfather told me I was a girl and raised me as such…. During the child porn creation, I was dressed in white lace and treated as a girl. I was addressed as such by his friends as well. This confusion remains with me to this day. It is not confusion about sexuality, but gender confusion. – CSEA Survivor Participant

> In some cases, the clothes were feminine, and the pedophile would make the male child wear wigs and makeup to make them feel less demented about abusing the same sex. My own experience of being raised in an extremely “blue-collar” family structure sent me into a lifelong cascade of searching for my identity as a male. My abuse began as an infant and forms a mosaic of cracks in my ego that have taken a lifetime to repair. – CSEA Survivor Participant

A cisgender, non-binary, or transgendered child forcibly dressed in a gender-stereotyped manner before being sexually abused may greatly impact their mental state and cause decompensation and it may develop into internalized negative and confused core beliefs (van der Kolk, 2007; Palfy, 2016). The abuse may have a profound effect on an individual’s character, social development, and brain function (Blanco et al., 2015; Twardosz & Lutzker, 2010) and is only exacerbated when their gender identity conflicts with the nature of their social interactions linked to the CSEA and their abusers. Van der Kolk (2007) discusses how multiple interpersonal

violent experiences such as sexual abuse linked to complex-PTSD may result in ‘deformations of personality and profoundly impact the stability of relationships’ over the lifespan of survivors (Van der Kolk, 2007). Similarly, survivor participants in this thesis self-reported unhealthy attachment styles, difficulty with and/or fear with physical intimacy, emotionally avoidant behaviors, complex-PTSD, and depersonalization/dissociative disorders.

Additionally, if a boy is feminized ritualistically within his abuse this presents a dilemma with the identification of children in online CSAM, as boys posed and dressed in costumes at a young age could be mistakenly identified as female. If the genitalia of a male child are hidden while within these forms of CSEA, it may potentially result in lower classification, numbers, and statistics of boys in online CSEA when frontline investigators identify, analyze, and take down CSAM.

Gender Bias as a tool for Concealment - Women as Child Sexual Abusers and Traffickers:

There is a common misguided belief that all females fall into nurturing societal roles, such as teachers, nurses, babysitters, and female family members, and therefore that they can be trusted with children and are less likely to commit sexual crimes against children, in comparison to men (Hamilton, 2021, p. 88). There is a denial of women’s involvement in sex crimes that has resulted in stereotypes surrounding traditional gender roles (Hamilton, 2021). Similarly, to the McDonald and Tijerino (2013) study, familial perpetrators were the most common type of perpetrator within this thesis. Within this study 24 out of the 40 cases (60%) represent familial and non-familial female perpetrators, sexual abusers, traffickers, and child sexual offenders (buyers). The thesis findings revealed that mothers represented the highest number of perpetrators within this thesis in 13 of the 40 cases (32.50%). Within the trafficking cases 10 of

the 12 participants reported that women either trafficked or abused them sexually, and 6 survivor participants reporting that their mothers were leading perpetrators in their trafficking. These findings are consistent with two recent studies on intrafamilial trafficking where the most common perpetrator were mothers (Allert, 2022 p. 215; Sprang & Cole, 2018, p. 189).

> My mom looks like this sweet, tiny Asian woman, who is a deacon of the church and heavily involved with Sunday School. If I ever get to a point where I speak publicly about my abuse, I suspect some people won't believe me and that's very sad. – CSA Survivor Participant

Female perpetrators pose a difficult challenge to frontline professionals, as these relationships are difficult to identify as female offenders usually hold a dominant or authority status over the child, as a mother, teacher, etc. (Hamilton, 2021, p. 91). Within our society females are the primary caregivers, they can "dress, bathe, change, examine, and touch children with little suspicion" (FBI & Lanning, 1992, p. 13). Sexual abuse by an older female may not always be considered molestation, child sexual abuse, or rape but a 'rite of passage' (Zack et. al, 2018) for adolescent males. As a result, female sex offenders generally serve shorter jail sentences for the same sex crimes that males commit, this is due to the underlying gender bias (Hamilton, 2021, p. 88, 90; Zack et. al, 2018).

> Females are just as abusive and manipulative as male predators. Many times, they are even more so because they are less likely to be prosecuted. Society does not want to look at a female as a perpetrator, especially if she is attractive. The old fantasy of the sexy teacher keeping her male student after school is embedded in our male-dominated society. We had a female substitute teacher engage in sexual relationships with three

> sophomore male students. An investigation was brought against the female teacher because several female students overheard the males bragging. The boy's parents wrote letters in her defense because she helped make the boys into men. The substitute teacher had to pay a fine and was released. – CSEA Survivor participant

A longitudinal study over nine years by Wijkman et al. (2010) surveyed 111 adult female sex offenders and revealed that in 66% of the cases women were co-offenders with a male partner. (Wijkman et al. 2010, pp. 137-138). Similarly, in this thesis, women were co-perpetrators with men, however, in numerous cases they were either the sole perpetrators or the lead perpetrators. Women were also involved in 60% of the total cases; however, female abusers played an active role in the sexual abuse of a child, their exploitation, and leading their trafficking. Additionally, numerous cases included female perpetrators that led acts of sadism.

> Women 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. Women would do such things to me as put me on a dog lease, harness me with a shock collar, call me names and be verbally abusive by telling me no one loved me, making me bark rather than talk and even physically hit me. - CSEA Survivor Participant

A study done through Saint Mary's Sexual Assault Referral Centre involving a forensic medical examination on child survivors who were abused by female offenders, revealed that younger children were primarily chosen, and the abuse usually took place within the child's home. However, the study also indicated that there are still a lot of unknowns about female perpetrators of child sexual abuse (Majeed-Ariss et al., 2021). Comparably, the findings of this thesis, found that 31 of the survivors (77.50%) were eight years and younger for their first case

of sexual abuse. Additionally, numerous accounts took place at the child's home. This thesis expands on previous knowledge of female perpetrators and challenges previous gender stereotypes. It clarifies the role women played in leading sadistic roles as abusers, traffickers, and buyers.

Additionally, perpetrators (buyers) of CSA and CSEA have been profiled through behavioral analysis into three main categories: Situational, Preferential, and Polymorphous Perverse (FBI & Lanning, 1992, pp. 6-9, Koning et al., 2017, Logan, 2010). These three categories can be seen in Appendix 11. Initially targeting male offenders through a law enforcement lens, these categories viewed child sex offenders as adult male offenders (Logan, 2010). Even though most offenders are men, women who offended transnationally search for "romance scenarios" (Hawke & Raphael, 2016, p. 54; Koning, 2017, p. 19). Regardless of how a female offender is portrayed, their 'romance' is still the sexual abuse of a child; furthermore, this image has increasingly been challenged by current research on female offenders (Bauer, 2014; Koning, 2017).

> I have been researching female sexual predators for 10 years. There is a significant amount of female sex tourism to East and West Africa. The profile is white middle-aged women from the UK and Europe travelling to African coastal resorts where they pay for a 'beach boy' to spend time with them for the holiday. – Field Expert Participant
>
> Particularly in the online environment, we are seeing increasing numbers of women as facilitators of abuse. – Field Expert Participant

This thesis highlights how female offenders are facilitators and can commit acts of sadistic abuse towards male children, rather than just as bystanders to the abuse. These findings

contrast with the cases described in Salter's work (Salter, 2012, pp. 112–113), where women who were involved due to coercion by their abuser husbands. Additionally, earlier studies by Itzin described women's involvement as "more passive" without an active or direct involvement in the sexual abuse of the children (Itzin, 1997, p. 97). These new findings within the thesis highlight the strikingly contrasts with other studies' findings and show that women were reported to display a diverse range of severity in violence.

Gender as a Tool for Healing - The importance of female frontline professionals:

Although the thesis identified a higher level of severity of sexual violence than has been commonly reported elsewhere, male violence was seen as more extreme. The study participants reported that the common denominators of most of the male perpetrators of CSA and CSEA they encountered included elevated levels of violence, rage, degradation, sadism, and dehumanizing abuse. According to participants, the CSA and CSEA endured by male perpetrators was generally far more extreme, physically painful, and violent than of most female perpetrators; with numerous participants reporting being hospitalized as children due to injuries sustained after a child sex offender subjected them to rape, torture, bondage and strangulation. Due to this, the torture, threats, and harm within sexual abuse and exploitation can cause an intense fear towards the gender inflicting the pain (van der Kolk et al., 2007). Most of the participants within the thesis faced immense fear of male children and adults that continued into adulthood.

> In my preschool trafficking experiences, one of the men involved who raped me at gunpoint was an off duty police officer.…due to my circumstances of severe trauma mostly by males, and tendencies to be triggered when attempting to receive any services by a male service provider, I ask for females…I am triggered by police presence unless

> the officer is female…also, my primary care physician is female, and I've found it much less stress with receiving general healthcare services by insisting on female providers.– CSEA Survivor Participant
>
> I contacted a local battered women's shelter and asked if they could help me. They said yes. This place affected me positively, because of the counselor at the women's center. She was extremely kind and open and non-threatening. I was very closed off to her until she shared her childhood sexual abuse. Then I was able to begin opening up. I thought to myself, "she already knows what I am talking about, she won't judge me, she will just help me. It was no longer about gender; we understood each others pain. – CSA Survivor Participant

A common theme found within the thesis was the want and need for female service providers and frontline workers. For numerous participants, male frontline professionals (law enforcement, mental health professionals, and medical staff) that hold gender biases were especially damaging to the young boy victims when trying to disclose their CSA, but also to adult survivors in their attempt to ask for and receive help. Therefore, numerous survivor participants in this thesis reported the need for more female service providers and frontline workers for male survivors that have complex-PTSD due to male-on-male sexual violence. When interacting with female service providers that were trauma-informed and survivor-centered, participants felt empowered, listened to, and cared for which aided in their recovery process.

> It is a false narrative to continue sharing the statement, "Men do not report." This statement avoids the responsibility to provide services for men who have experienced

sexual abuse. There are many men who have shared their story and seek out mental health services, therefore, the responsibility is on society to increase the availability of specialized services. When men know they will be heard, not judged, and respected, they will report. While some men will report to a man, I have collected feedback from clients stating they are more comfortable talking to me because I am a woman. As a female coach, I find my clients benefit from talking to a woman, because I do not represent the man who hurt them, and I can represent the nurture and mother figure they did not receive. I would not call it reparenting, I would say it is a nurturing of the inner child and the encouraging female figure. – Field Expert Participant

Chapter VI - Concluding Remarks

Considerations for Future Research

The body of academic literature on child sexual abuse and exploitation through sex trafficking would benefit from further qualitative research that follows the recovery of boys and men through a longitudinal approach. This would enable researchers to compare retrospective studies conducted in shorter timeframes. Also, research using collaborative approaches among practitioners, researchers and male survivors would be beneficial to produce survivor-focused trauma-informed holistic research on CSA/CSEA. Quantitative research using the indicators of CSA/CSEA in childhood and long-term consequences in adulthood should be further developed, alongside the additional tools mentioned in this study to test and implement earlier identification practices. Additional research is also needed into how and why female perpetrators abuse, as well as the degree to which women commit CSA/CSEA against boys.

This study highlighted that having a female research lead was highly beneficial for disclosures for men with intense fears of males. Therefore, it may be beneficial for future studies to consider the option of having a female researcher, or a researcher who is a survivor with lived-experience leading interviews with male survivors. This would allow survivors to choose their preferred gender for interviewing.

Covid-19's lockdown measures and the rapid technological change presents opportunities for traffickers to adapt their modus operand (ICAT, 2022, p. 1), therefore, more research focused on recent and upcoming trends in sexual violence against boys is needed. Additionally, more collaboration between anti-human trafficking researchers and cybertechnology stakeholders are

needed to ensure national legislations are enhanced to address the quickly evolving problem of cyber-enabled CSEA and CSAM (ICAT, 2022, p. 2).

Reflections

This study differed in its methods to traditional qualitative research, which included a longer-term research safe space for participants to further elaborate on their interview questions. When interviewing vulnerable communities, Lessard and Schaefer referred to this process as "to ethically move-slow in relationship and co-create a research space" (Lessard & Schaefer 2016, p. 6). This research process was inspired by the approach of Dr. Glenn Miles and the Chab-dai Coalition in the 10-year Butterfly Longitudinal Research Project in Cambodia (Miles et.al. 2021). The relationships developed between participants and researchers were key to its success.

This study ensured mental health breaks and sessions with psychologists when triggered by questions which resulted in memories resurfacing and filling in gaps in the survivor's knowledge of their own abuse which led to a deeper knowledge of their stories and needs. The research also had to adapt to the needs of the participants, for example, there was no requirement for participants to share their CSA/CSEA stories, however, it became apparent that survivor participants were eager and wanted to share upon experiencing a safe space to disclose without judgement or bias. By providing the survivor participants with autonomy of choice throughout the research, reflected by continuously asking for their consent, and allowing them to be part of the research process in reviewing their stories it allowed for numerous survivors to experience "healing through research", as attested by the following quotes:

> Thank you for letting me review this first! It means a great to me to be as accurate as humanly possible when disclosing my experiences. Again, I'm deeply honored to be a part of this. – CSEA Survivor Participant
>
> I'm glad I was able to be of assistance with the continuation of your research. Though it was painful to disclose as much as I did, and more memories were stirred by my participation, I truly am grateful. If I wasn't ready to tell anyone as much as I did, it wouldn't have happened. Your work has empowered me to take on deeper levels of healing and piecing the details of my early life together. This kind of intense reflection and brutal honesty is essential for me to move forward. – CSA Survivor Participant
>
> The approach to this research was beneficial. There were back and forth communication from the questionnaire, email, and zoom. The process provided me a chance to uncover my story at a pace that was comfortable for me. This also created a safe environment to explore and unpack buried memories. When I started the research, I remember that I was aware about the abuse from the coach and the professionals. What I was resistant about was my parents' involvement in the trafficking process, especially my mother. But as we continued to explore, and I shared writings from my journal and re-told my story, we discovered that there were missing parts. We recognized over the research time that my mother had been very instrumental in helping the professionals get access to me and keeping the secret. – CSEA Survivor Participant

This collaboration with survivors impacted the way the researcher understood research methodology. It allowed for a wider understanding of qualitative methods as a tool to unravel and explore a deep understanding alongside vulnerable subjects. Firstly, the importance of

building partnerships not only allowed for a greater reach for building a research sample, but also provided the needed support for those subjects throughout the study. Secondly, the creation of a safe space, building rapport and trust with participants, and being transparent allowed for an open environment for both researcher and participant to grow in the knowledge of child sexual abuse and exploitation together. This not only highlighted the need for trauma-informed survivor-center research, but also a collaborative longitudinal approach to research. Lastly, an important measure was to ensure my own constant mental health and emotional support throughout the research process to minimize vicarious trauma of secondary PTSD and burn-out from listening and analysing 40 accounts of sexual violence and trauma.

Conclusion

This study reveals the various ways in which male survivor of child sexual abuse and exploitation attempt to disclose their CSA/CSEA while facing numerous internal and external barriers that stop disclosures. This research also uncovered the detrimental experiences male survivors face when attempting to seek support, from a lack of male representation in social campaigns and media, the lack of training and knowledge of male victimization, re-traumatization through biases, and a lack of support and services. This research highlighted the impacts of what has aided survivors throughout their journeys from individual self-help techniques and tools, towards searching for external support and resources, experience community support and empowerment towards post-traumatic growth towards a state of thriving. Male survivors in this study emphasized the need for belonging and helping others. For many survivor participants helping other survivors heal and thrive was their key motivator in their participation in this research project. By finding safe relationship, learning key skills on how to

manage boundaries, anger, and trust, were critical aspects of their recovery (Kia-Keating et al., 2010, pp. 676-77), and resulted in positive-growth and relational recovery (Kia-Keating et al., 2010, p. 670) from CSA and CSEA. The participants' accounts revealed the importance of being self-aware of dismissive body language, and hurtful words dismissing their claims. Therefore, when assisting male survivors of CSA/CSEA alongside their journeys to recovery there should always incorporate a self-reflection on any gender, social norms, or biases that they may hold that may impact how they engage and aid male victims or survivors. Therefore, this research may provide insights for primary, secondary, and tertiary sectors - from researchers, professionals in health care, mental health, education, child protection and law enforcement who are dealing with a sexually exploited boy or adult male survivor of CSA and CSEA on their needs for recovery and how to not re-victimize them in the process of support them. This study highlights the importance of trauma-informed training, victim-centric and survivor-informed approaches (U.S. Department of State, 2022, pp. 7, 20, 22) for frontline professionals when faced with a potential male victim (OSCE, 2022; OHCHR, 2021). Additionally, specialized training and raising awareness that also that address gender and deeply rooted gender stereotypes and bias (OSCE, 2022; UNCHR, 2021), may help support professionals to remain objective during interactions with boys who exhibit child sexual abuse and exploitation indicators and/or disclose their experiences. Finally, this study revealed the need to incorporate survivors into future research to understand their experiences in-depth, allowing them to guide what is needed above what we think is needed for them.

Closing Statement

We need to look at the long-term effects of sexual abuse and trafficking as two separate entities: 1) The event(s) itself, and 2) the meanings survivors place on the events, feelings, and emotions. The event is traumatic and extorted from an exterior presence, but the inner meaning we attach to understand and comprehend why it happened can be even more detrimental. Since the experience, survivors struggle every day battling against the internal negative self-talk to appear and function as normally as possible based on the stigmas our society bestows on us. In hindsight, I realized that I punished myself through shame, guilt, embarrassment, and negative self-talk. As survivors pursue their healing journey, they are never very far from being triggered by outside influences that will rapidly return their psyche to the exact moment of the event, even if they have perfected the numbing and distancing strategies to protect them. And since each survivor is unique, their healing journey needs to be individually devised for optimum success. Sharing our stories helps others while providing ourselves the critical insight to heal. I want people to understand that healing is a life-long journey. – CSEA Survivor Participant

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Appendix 1 - Relevant Concepts and Definitions

For the definition of '**male'**, this study will refer to male victims by their 'sex' biologically at birth. The word 'male' in this study does not refer to gender, gender roles, gender identity, gender expression, or sexual preference. This focus on biology at birth does not seek to undermine or diminish gender or sexual identity. This was done to be able to study male victimization in the specific context of male sexual abuse and trafficking for sexual exploitation. For this study, the definition of the term '**victim**' refers to someone that has recently been affected by sexual violence, or is currently being victimized. '**Survivor**' will refer to someone who has undergone or is going through a recovery process.

According to the United Nations Palermo Protocol, [A/RES/55/25], Article 3, paragraph (a) of the Protocol to Prevent, Suppress and Punish Trafficking in Persons defines **Human Trafficking** as:

> the recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payment or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Consent is not necessary where exploitation, fraud, deception, and abuse of vulnerability have been involved.

In the case of trafficking children, *the Protocol to Prevent, Suppress and Punish Trafficking in Persons* elaborates the vulnerable status of children which makes it impossible for them to

consent regardless of whether any improper means set forth in subparagraph (a) or article 3, paragraph (c). Also, "**Child**" shall mean any person under eighteen. Article 3, paragraph (d). The Trafficking Victims Protection Act of 2000, section 108 and 110(b), allows that 'a victim does not need to be physically transported from one location to another for the crime to fall within the definition of human trafficking' (TIP, 2019, pp.5, 514-517).

According to the *Terminology Guidelines for the Protection of Children from Sexual Exploitation and Sexual Abuse* adopted by the Interagency Working Group in Luxembourg on 28 January 2016, the guidelines define the terms used in this research report as:

Child sexual abuse (CSA): This is a form of abuse where a perpetrator engages in sexual activities with a child, and may use force, coercion, manipulation, or grooming tactics to do so (Doek & Greijer, 2016, p. 18).

Incest: This term refers to a subset of CSA which specifically concerns sexual activity between a child victim and a closely related family member, such as a parent, grandparent, aunt, uncle, and/or sibling (Doek & Greijer, 2016, p. 20).

Child sexual exploitation (Trafficking): This occurs when a child is forced to perform a sexual act on behalf of their trafficker(s) in exchange for something of value (money, drugs, business opportunities, social status, etc.). The traffickers receive compensation for the child's exploitation (Doek & Greijer, 2016, p. 29).

Child sexual exploitation and abuse (CSEA): This term is widely used throughout the study to encompass all activities under CSA and exploitation, because "abuse" evolves into

"exploitation" once primary abusers begin trafficking a child for financial gain or other forms of compensation (Itzin, 1997, pp. 101-102; INTERPOL, 2020, pp. 4-5).

Child sexual abuse material (CSAM): Audiovisual materials (for example: polaroid photos or digital images and video recordings) depicting CSA, such as a child victim posing with or without clothing, and/or focusing on the genitalia of the child (Doek & Greijer, 2016, p. 40). This material can also be used by perpetrators to extort a child into compliance (Burgess et al., 1984; Hunt & Baird, 1990; Salter, 2013).

Grooming (online/offline) for sexual purposes: The act of preparing or training a child for the particular purpose of sexual activity. It is the solicitation of children for sexual purposes. "Grooming/online grooming" refers to the process of establishing and building a relationship with a child either in person or using the Internet or other digital technologies to facilitate either online or offline sexual contact with the child (Doek & Greijer, 2016, p.51).

Online-facilitated child sexual abuse: Sexual abuse of a child that is facilitated by Information and Communications Technology (ICTs), such as by using online grooming techniques to sexually abuse children, with the potential goal of sharing CSAM online through images and videos – at this point, it becomes online child sexual exploitation and CSAM. (Doek & Greijer, 2016, p. 40).

Online child sexual exploitation: Sexual exploitation that is carried out while the victim is online, such as manipulation, enticing, or threatening a child into performing a sexual act in front of a webcam. This also refers to the distribution, dissemination, importing, exporting, offering, selling, possession of, or knowingly obtaining access to child sexual abuse material CSAM (Doek & Greijer, 2016, p.27).

COPINE Scale: This is a rating system to categorize the severity of images of child sex abuse, and or a person's collection of child abuse material (Taylor et al., 2001, p.176; Quayle, 2008).

Perpetrators - Child Sexual Offenders/Abusers

Child Sex Offender/Abuser (Buyer): An "abuser" is any person who pursues sexual activities with children, including family members. Prior, during, and after sexual abuse, the abuser may treat the child violently or cruelly, and this may include repeated acts of sexual assault and violence, and they may act in a 'caring' manner to further develop the trauma-bond (Doek & Greijer, 2016, p. 83). A "buyer" seeks out and pays to engage in sexual activities with children in exchange for money, drugs, in-kind goods, or by providing access to other children for sexual exploitation.

Trafficker (Facilitator): An individual who facilitates, or otherwise aids and abets, the commission of sexual offences against a child by making the child available for sexual exploitation. This individual also receives the benefits or payments in exchange for the sexual exploitation of a child by an abuser (Doek & Greijer, 2016, p. 83).

Perpetrator: In this study, the term "perpetrator" will include those who commit sexual offenses against children, including abusers, offenders, traffickers and 'buyers'. The individual that has allegedly committed or has been convicted of committing sexual offenses against children (Doek & Greijer, 2016, p.83). According to the American Psychiatric Association, these are the subgroups of Perpetrators of sexual crimes against children:

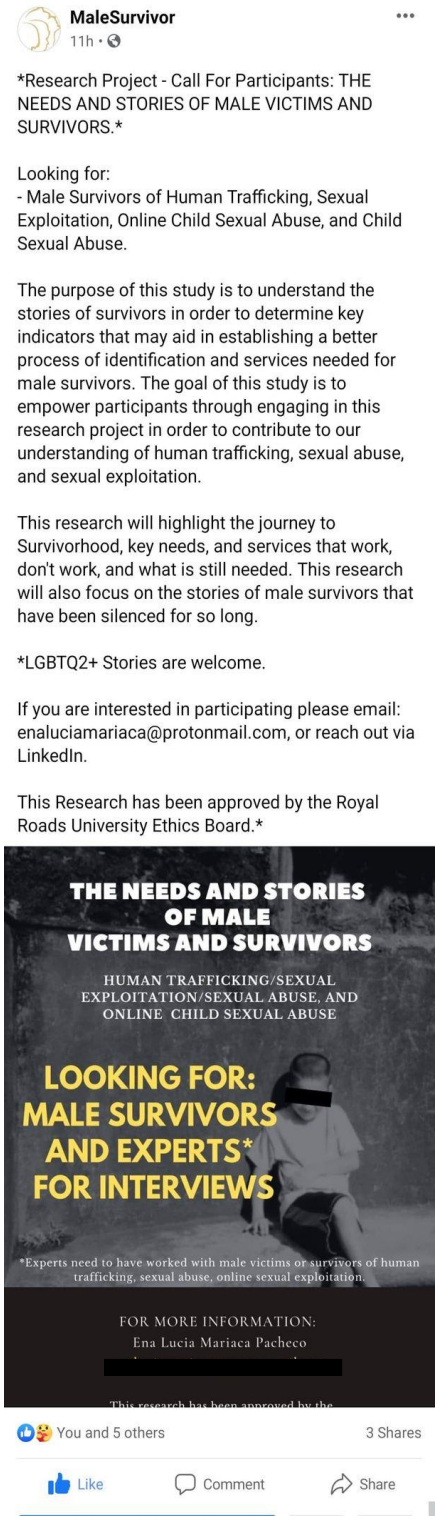
> **Infantophilia**: This term is used for individuals with a sexual preference for children under the age of five, especially infants and toddlers (Greenberg et al., 1995, p.66).

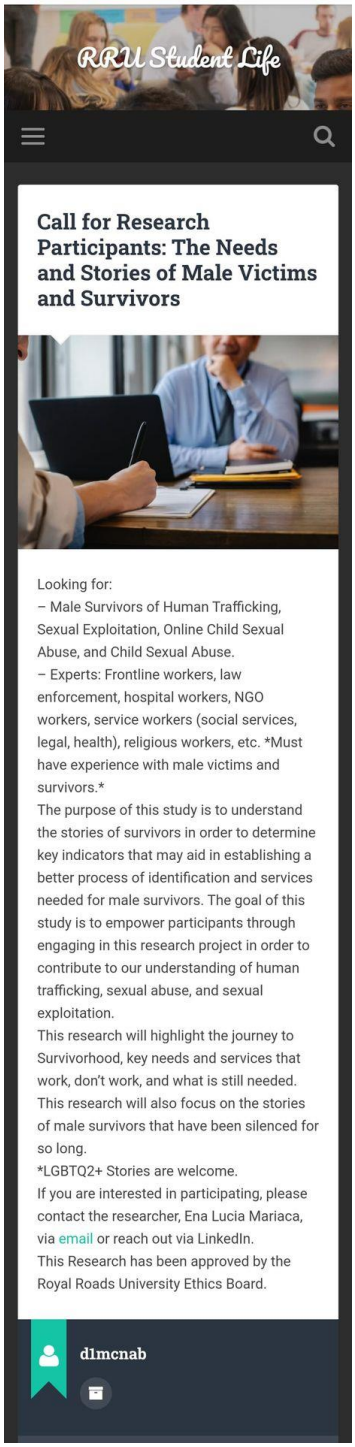
Pedophilia: This term is used for individuals with a primary or exclusive sexual interest in prepubescent children aged 13 or younger (Hall & Hall, 2009; Doek & Greijer, 2016, p. 85).

Hebephilia: This term is used to describe the primary sexual interest in pubescent children who are in early adolescence, typically ages 11–14, and showing Tanner stages 2 to 3 of physical development (Blanchard, 2008, p.336, Doek & Greijer, 2016, p. 86).

Ephebophilia: This term is used to describe the primary sexual interest in mid-to-late adolescents, generally ages 15 to 19 (Blanchard, 2008, p.336, Doek & Greijer, 2016, p. 85).

Appendix 2 - Call for Participation - from MaleSurvivor and RRU





Appendix 3 - Profile of Field Experts & Years of Experience

Expert ID Number	Years of experience	Sector(s) of Experience
1.	16-20 years	Psychologist working with male survivors, Researcher, and Law Enforcement Officer
2.	+26 years	Social Worker, Researcher, Non-profit Worker, Specialist in Learning and Development.
3.	16-20 years	Youth Worker, Non-profit Worker, Frontline working with victims and survivors on the streets and Lived-Expert. This expert is a former human trafficker.
4.	11-15 years	In Policy and Government, and a Prison Chaplain to those holding sexual offense charges.
5.	+26 years	Researcher in the field of male victimization in human sex trafficking and Non-Profit Worker
6.	11-15 years	Researcher in online CSAM and Non-Profit Worker
7.	+26 years	Licensed Mental Health Counselor, Board Certified Expert in Traumatic Stress, Professor
8.	3-5 years	Researcher and Non-Profit Worker
9.	6-10 years	Non- Profit Worker and Public Health Consultant on Human Trafficking
10.	16-20 years	Councillor and Psychotherapist
11.	11- 15 years	Law Enforcement Officer, Criminal Intelligence Officer specialized in crimes against children and CSAM
12.	11-15 years	Social Worker, Consultant, Trainer, and Therapist specialized in male victims
13.	21-25 years	OSINT Investigator for the National Child Protection Task Force. Certified Digital Evidence Investigator, Certified Cryptocurrency Investigator.
14.	3-5 years	Researcher, Non-profit worker, and Hospital Worker
15	6-10 years	Researcher at research center specialized on child's rights
16.	26+ years	Retired police officer and anti-trafficking consultant and expert

17.	16-20 years	NGO Founder, criminal intelligence analyst and victim rescue operations
18.	11-15 years	Prevention Education Specialist, Frontline worker with victims and survivors on the streets, NGO worker, Youth Worker, and Researcher.
19.	6-10 years	Non-profit Worker, and Survivor Leader – Africa
20.	21-25 years	Non-profit Director, victim rescue, trafficker convictions – Africa & Middle East
21.	21-25 years	Non-profit Director of victim rescue in North America
22.	6– 10 years	Non- profit worker with male survivors of human trafficking in Cambodia
23.	26+	Founder of NGO for human trafficking victim rehabilitation programs in Southeast Asia
24.	6-10 years	Non-profit worker for issues on human trafficking and child sacrifices in Uganda.
25.	11- 15 years	Law Enforcement Officer, Criminal Intelligence Officer specialized in crimes against children and CSAM
26.	11- 15 years	Law Enforcement Officer, Criminal Intelligence Officer specialized in crimes against children and CSAM
27.	6- 10 years	Law Enforcement Officer, Criminal Intelligence Officer specialized in crimes against children and CSAM
28.	21-25 years	Researcher, Non-profit worker, and Hospital ER Doctor
29.	11-15 years	Psychologist and Researcher working with male survivors.
30.	11-15 years	Civil servant in an International Organization unit on human trafficking

Appendix 4 - Informed Consent Form for Experts

THE NEEDS AND STORIES OF MALE VICTIMS AND SURVIVORS

INFORMED CONSENT FOR EXPERTS AND FRONT LINE WORKERS
OF HUMAN TRAFFICKING/SEXUAL EXPLOITATION/ONLINE AND OFFLINE CHILD SEXUAL ABUSE

PRINCIPAL RESEARCH	**THESIS SUPERVISORS**
Ena Lucia Mariaca Masters Student: Human Security and Peacebuilding Royal Roads University **Personal information taken off for thesis submission.**	Dr. Kathleen Manion, Associate Professor Program Head, BA Justice Studies Royal Roads University **Personal information taken off for thesis submission.** Dr. Glenn Miles Senior Researcher, up! International **Personal information taken off for thesis submission.**
Study conducted with Royal Roads University for completion of Master of Arts Thesis.	

First, regardless of your participation, we want to thank you for your time.

PURPOSE OF STUDY

You are being asked to take part in a research study on male victims & survivor of human trafficking sexual abuse, and sexual exploitation. Before you decide to participate in this study, it is important that you understand why the research is being done and what it will involve. Please read the following information carefully. The purpose of this study is to understand the stories of survivors to determine key indicators that may aid in establishing a better process of identification and services needed for male survivors. The goal of this study is to empower participants through engaging in this research project to contribute to our understanding of human trafficking, sexual abuse, and sexual exploitation.

STUDY PROCEDURES

Participants who choose to be involved in all aspects of the project can expect to spend approximately **2-5 hours** over a **2 month period** on the research.

The project involves:

1) **A short introduction meeting via online video chat, audio chat forum, or by email**. This will take approximately **15-30 minutes** to introduce the study, and for both individuals to get to know each other. This meeting will not be recorded.
2) **An Email interview**. This should take approximately **1-4 hours** of your time over the course of a **month.** It will be done over email to ensure flexibility for the participant and allows for enough time to do the written interview without time pressures or needing to dedicate a certain block of time.
3) Any possible **follow up** questions or quotation reviews will take around **30 minutes**.

THE NATURE OF THE QUESTIONS TO BE ASKED: You will be asked questions related to your experience and expertise of males involved in the commercial sex exploitation, thoughts of human trafficking, and online child sexual exploitation. There will be a specific focus on your opinions and advice on how to support a male victim, survivors of human trafficking, and commercial sexual exploitation. **CONFIDENTIALITY** & **ANONYMITY** Your safety is my top priority. The introduction video or call will not be recorded. Please indicate which one you prefer on the last page: **- Video Call on Zoom/Skype- Phone Call- Email** The Interview will be done by email. The interview itself will be kept over the course of one year after the study is completed to follow the Ethics Research Board's guidelines and for any potential audits of the research process – however your personal identification will be stripped out of the data and your name replaced with a number. All emails sent to you will be done through: **Personal information taken off for thesis submission.** ProtonMail is widely regarded as one of the best email providers for encryption and security. The servers of ProtonMail are based in Switzerland, a

country with very strict privacy laws, which means your data is safe from government agencies. Any quotes collected will be reviewed by you, however, within the research these quotes will stay anonymous, for example any quotes will state 'according to an expert participant,' unless you have given permission otherwise. Participant data will be kept confidential except in cases where the researcher is legally obligated to report specific incidents. These incidents include, but not limited to, for example, suicide risk or a high risk of harm to the participant, agency/NGO/organizations, or the researcher. You may choose to stop or withdraw at any time without prejudice. There will be no repercussions to you, and it will have no effect on any existing or future relationship with the researcher or with Royal Roads University.

VOLUNTARY-PARTICIPATION: Your participation throughout this study is completely voluntary. Even after signing the consent form if you wish to withdraw at any time, you may, and you also do not need to give a reason. If you wish to withdraw you can either let the researcher keep the data collected to that point, or If you withdraw from the study before the data collection is completed, all your data will be either destroyed or returned to you if you wish to have it. If you withdraw after all the data and analysis has been collected and anonymized, we will not be able to take out your data as it will be converted into code of trends and patterns, but please note that your personal information will be made anonymous. After interviews this will take approximately 3 weeks. Please let the researcher know in that timeframe. Afterwards it will not be possible to delete your information.

RISKS: There should be no risks involved with participating with this study.

BENEFITS: The direct benefit you will have through participating in this study is being able to share your experience, knowledge, and having it be a part of research that we hope will aid other victims and survivors of human trafficking and sexual exploitation. Over the longer term we hope that the results from this study will inform services, policy and practice on how to improve the needs for sexual exploited males, and how to better support and empower male victims, and survivors during the recovery process.

COMPENSATION: For participating in the study there is no financial compensation. However, you will receive a small token gift for your involvement. I want to personally thank you for sharing your time, your experience, and your knowledge.

HOW THE RESEARCH RESULTS WILL BE USED, PUBLISHED, AND HOW WILL PARTICIPANTS BE INFORMED OF THE RESULTS OF THE RESEARCH: Information collected during this study will be primarily used for the research study on male victims and survivors. This will be published as my thesis report by the Royal Roads University. Findings may be shared in academic or professional reports or presentations. You will be given the final research report in PDF format.

CONTACT INFORMATION: If you have any questions or concerns at any time during this study, or if you experience any adverse effects because of your participation, you may contact any of the researchers provided on the first page. If you have any questions regarding your rights or if any problems come up during the study that you do not want to disclose to the research team, please feel free to contact the Research Ethics Board at ethicalreview@royalroads.ca. You may also contact my supervisors at any time should you have questions or concerns about the study or my role as a researcher.

CONSENT I have read, and I understand the information provided. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving a reason and without cost. I voluntarily agree to take part in this study. If you agree, please email back with your confirmed agreement Please print, sign, scan and send this page back; or you may simply type the information within the box above and send back by email.

Thank you again for your time and consideration.

This research has been approved by the Royal Roads University Research Ethics Board

Name of participant: _____

Date: _____

[ ] I agree to be interviewed and participate in this research.
[ ] I do not agree to be interviewed.
Introductory Meeting:
Please indicate which one you prefer:
[ ] Video Call on Zoom/Skype
[ ] Phone Call
[ ] Email
Researchers' signature _____ Date _____

Appendix 5 - Interview Questions for Experts:

THE NEEDS AND STORIES OF MALE VICTIMS AND SURVIVORS
INTERVIEW FOR EXPERTS AND FRONTLINE WORKERS
MALE HUMAN TRAFFICKING, SEXUAL EXPLOIATION, CHILD ABUSE, TRANSNATIONAL CHILD SEXUAL ABUSE, ONLINE CHILD SEXUAL ABUSE AND EXPLOITATION

PRINCIPAL RESEARCH Ena Lucia Mariaca Masters Student: Human Security and Peacebuilding Royal Roads University **Personal information taken off for thesis submission.** Study conducted with Royal Roads University for completion of Master of Arts Thesis.	**THESIS SUPERVISORS** Dr. Kathleen Manion, Associate Professor Program Head, BA Justice Studies Royal Roads University **Personal information taken off for thesis submission.** Dr. Glenn Miles Senior Researcher, up! International **Personal information taken off for thesis submission.**

First, regardless of your participation, I want to thank you for your time.

Please know that we are sensitive to the journey of victims, survivors, frontline workers, and experts in this field; and your participation in this study is completely voluntary and you have the right to stop this interview at any time with no obligation to continue. Similarly, you may withdraw from this study at any time and the information you share will be removed from the data up to the point at which all data is anonymized and combined, after which it will be impossible to identify what is your information and what is someone else's. If you choose to stop or withdraw there will be no repercussions to you, and it will have no effect on any existing or future relationship with the researcher or with Royal Roads University.

PART I.- **INSTRUCTIONS:** Hello, my name is Ena Lucia Mariaca. I am a Master of Arts Student at Royal Roads University for Human Security and Peacebuilding. I am focusing my thesis on male victims and survivors of human trafficking, sexual abuse, and sexual exploitation. These stories are very important but represents a large gap within the research of male victimization. Thank you for being apart of this important research. This interview will be about your experiences and thoughts on human trafficking, sexual abuse,

and sexual exploitation involving male victims and survivors. The purpose of this study is to understand the key indicators to aid in establishing a better process of identification, and services needed for male victims and survivors. The goal of this study is to empower participants through engaging in this research project to contribute to our understanding of human trafficking, sexual abuse, and sexual exploitation. You have been selected for these interviews based on your experience, career, research, relationship with front-line workers, or your relationship with the community that raises awareness for human trafficking. At this point, we would like to invite you to participate in this interview. Please know that there is no right, wrong, desirable, or undesirable answers. I would like you to feel comfortable saying what you really think and feel. There is no word count limit, please just note that the more information that is provided allows for more in-depth research. If possible, please answer all or as many questions as possible. If you do not know the answer to a question or if it is not applicable, please write "N/A" and move on to the next question. Also, please highlight all answers that apply to you. **Please make sure you have agreed to the consent form by signing your name with the date before you begin.** Thank you, and let's begin. Please type answers and email them back when you are finished. Please start your answers to the questions on Page 3.

Part II. Interview identifying and exploring the journey

This study hopes to gain insights on your journey to Survivor hood to develop better informed protective measures and practices. Your expertise in this area will give insight and an understanding of identification practices for males, needs, access, and services.

1. **What sector have you/ or do you work in – in relation to human trafficking, sexual exploitation or child abuse? Highlight all that apply.**
   a) **Social worker**
   b) **Youth worker**
   c) **Police Officer**
   d) **Researcher**

e) **Non-profit worker**

f) **Frontlines working with victims and survivors on the streets**

g) **Hospital worker**

h) **Lawyer or working with the law**

i) **Policy and Government**

j) **Other: _____**

2. **How many years of experience do you have in the field of to human trafficking, sexual exploitation or child abuse? Please Highlight.**

a) **Less than 1 year**

b) **1-2 years**

c) **3-5 years**

d) **7- 10 years**

e) **11-15 years**

f) **16-20 years**

g) **21-25 years**

h) **+ 26 years**

Victim Identification:

Research suggests, male victims often do not share their experiences due to a feeling of guilt, shame, no access to services, or the culture around them. These questions are structured to identify suggestions on how to improve identification and support for victims. Please answer these to the best of your knowledge.

3. **What do you think <u>prevents a male victim from identifying</u> as a victim of sexual trafficking/abuse/exploitation?**

4. **What do you think prevents a male victim from seeking help after sexual trafficking/abuse/exploitation?**
5. **Do you think other people should be involved in helping someone self-identify as a victim after sexual trafficking/abuse/exploitation? Why or why not?**
6. **What do you think is the best way a friend can help a male victim that has experienced trafficking/abuse/exploitation?**
7. **In supporting male victims, what should front line workers know about helping and identifying a victim who has experienced sexual abuse, exploitation, or trafficking?**
8. **What should police know about helping and identifying a male victim who has experienced sexual abuse, exploitation, or trafficking?**
9. **What should policy makers know about making laws that target victims who have experienced sexual abuse, exploitation, or trafficking?**
10. **What advice would you give a responsible adult/parents/teachers about keeping a male child safe from trafficking/abuse/exploitation?**

Access to Services:

Services: a form of aid provided: such as through social work, counselling, healthcare, hospital care, legal aid, police services, safe homes, rehabilitation, religious and spiritual guidance.

11. **What kinds of strategies do you recommend for male child survivors wanting or trying to get help or stay safe?**
12. **What did you wish you had access to, to help victims/survivors on their journey to recovery?**

LGBTQ+

13. **What strategies or advice do you have for male victims that also identify as LGBTQ2+ that want to access services?**

Minority Groups

14. **What strategies or advice do you have for a male victim that also identify as Black/Latino/Native American/Asian/people with disabilities that want to access services?**

Services:

Services: a form of aid provided: such as through social work, counselling, healthcare, hospital care, legal aid, police services, safe homes, rehabilitation, religious and spiritual guidance.

15. **From your experience, what services (social work, healthcare, legal services, police, etc.) have you seen have best help victims or survivors (human trafficking, sexual abuse, online sexual exploitation)?**
16. **From your experience, what services (social work, healthcare, legal services, police, etc.) have you seen have been the least helpful for victims or survivors (human trafficking, sexual abuse, online sexual exploitation)?**

Interactions:

Currently organizations, NGOs, and volunteers go through the process of getting a police check before starting their work with children.

17. **In what ways do you think police checks and screening volunteers/ workers (in close contact with children) could be improved?**

Victimology

By understanding the interactions between both sides of victims and perpetrators, the study can better understand how male children are chosen, and for what reasons, as well as the interaction that takes place to facilitate the meeting. Please answer these to the best of your knowledge.

18. **Why do you think a male child is chosen for the purpose of sexual abuse, exploitation, trafficking?**

19. **Do you think age is a factor in why a male child is chosen for sexual exploitation, human trafficking, or sexual interactions? If so, what are the reasons for this?**

Personal Refection

Please only answer these questions if you feel comfortable. These specific questions (20-23) will be put into pattern data to see if there is a trend of survivors helping survivors – to counteract the current "cycle of abuse- abused/abuser" narrative.

20. **Have you personally experienced child sexual abuse, sexual exploitation or human trafficking?**
    a) **Yes**
    b) **No**
    c) **I prefer not to comment**
21. **Has someone close to you experienced child sexual abuse, sexual exploitation or human trafficking?**
    a) **Yes**
    b) **No**
    c) **I prefer not to comment**
22. **If you, or someone close to you has experienced child abuse, sexual exploitation, or human trafficking in the past, has this experience impacted you?**
    a) **Yes**
    b) **No**
    c) **I prefer not to comment**
23. **If yes, did this experience lead you into your work combatting human trafficking or sexual exploitation? If so, could you provide more details about how you believe this impacts your work? If no, can you share what compelled you to do this work?**

Female perpetrator:

24. **In your opinion, what should be known or studied about female perpetrators?**

Male perpetrator:

25. **In your opinion, what should be known or studied about male perpetrators?**

Cybertechnology

Cybertechnology has radically increased global communications and has been found to be one of the main facilitators for purchased sexual interactions with children around the world. These questions aid in identifying how, what, and where these interactions take place. Please answer these to the best of your knowledge.

26. **What trends or patterns are you seeing in online platforms (opensource/dark web) that relate to male victims?**
27. **For those that know the COPINE/SAP Scale[12] – what patterns for male victims have you noticed?**

Covid-19:

28. **How has Covid-19 impacted the vulnerability of male victims/survivors of human trafficking, sexual abuse and exploitation?**

Survivor hood:

29. **In your opinion – How can an adult survivor of childhood sexual abuse, sexual exploitation, or human trafficking enhance the work of advocacy, research, frontline work, and services for other victims?**

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[12] The COPINE (Combating Paedophile Information Networks in Europe) Scale is a rating system to categorise the severity of images of child sex abuse. 1. Indicative, 2. Nudist, 3. Erotic, 4. Posing, 5. Erotic Posing, 6. Explicit Sexual Posing, 7. Explicit Sexual Activity, 8. Assault, 9. Gross Assault, 10. Sadistic/Bestiality

Last Question: Is there anything else you wanted to share that was not covered?

PART IV.

CLOSING

THANK YOU FOR SHARING YOUR JOURNEY, INSIGHT AND TIME.

PLEASE REMEMBER THAT YOUR STORY AND JOURNEY WILL HELP OTHERS IN THE FUTURE.

If I had any further questions or clarifying questions, may I follow up and contact you?

[ ] yes [ ] no

Thank you for sharing your knowledge, insight, and time.

Please remember that this will help others in the future.

Your answers will be kept anonymous and confidential.

Thank you again for your time and participation. This research has been approved by the Royal Roads University Research Ethics Board

Appendix 6 - Consent form for Survivor Participants

THE NEEDS AND STORIES OF MALE VICTIMS AND SURVIVORS

INFORMED CONSENT FOR SURVIVORS

HUMAN TRAFFICKING, SEXUAL EXPLOITATION: CHILD ABUSE, ONLINE AND OFFLINE SEXUAL EXPLITATION AND ABUSE

PRINCIPAL RESEARCH	**THESIS SUPERVISORS**
Ena Lucia Mariaca Masters Student: Human Security and Peacebuilding Royal Roads University **Personal information taken off for thesis submission.** Study conducted with Royal Roads University for completion of Master of Arts Thesis.	Dr. Kathleen Manion, Associate Professor Program Head, BA Justice Studies Royal Roads University **Personal information taken off for thesis submission.** Dr. Glenn Miles Senior Researcher, up! International **Personal information taken off for thesis submission.**

First, regardless of your participation, we want to thank you for your time. Please know that we are sensitive to the journey of victims and survivors, and your participation in this study is completely voluntary. You have the right to stop this interview at any time with no obligation to continue. Similarly, you may withdraw from this study at any time and the information you share will be removed from the data up to the point at which all data is anonymized and combined, after which it will be impossible to identify what is your information and what is someone else's. If you choose to stop or withdraw there will be no repercussions for you, and it will have no effect on any existing or future relationship with the researcher or with Royal Roads University.

PURPOSE OF STUDY: You are being asked to take part in a research study on male victims & survivors of human trafficking, sexual abuse, and sexual exploitation. Before you decide to participate in this study, it is important that you understand why the research is being done and what it will involve. Please read the

following information carefully. Please ask the researcher if there is anything that is not clear or if you need more information. The purpose of this study is to understand the stories of survivors to determine key indicators that may aid in establishing a better process of identification and services needed for male survivors. The goal of this study is to empower participants through engaging in this research project to contribute to our understanding of human trafficking, sexual abuse, and sexual exploitation. You have been selected for these survivor interviews based on your personal experience, relationship with front-line workers, or your relationship with the community that raises awareness for human trafficking, sexual abuse, or sexual exploitation.

STUDY PROCEDURES: Participants who choose to be involved in all aspects of the project can expect to spend approximately **2-5 hours** over a **2 month period** on the research.

The project involves:

1) **A short introduction meeting via online video chat, audio chat forum, or by email**. This will take approximately **15-30 minutes** to introduce the study, and for both individuals to get to know each other. This meeting will not be recorded.
2) **An Email interview**. This should take approximately **1-4 hours** of your time over the course of a **month.** It will be done over email to ensure flexibility for the participant and allows for enough time to do the written interview without time pressures or needing to dedicate a certain block of time.
3) Any possible **follow up** questions or quotation reviews will take around **30 minutes**.

The nature of the questions to be asked: You will be asked questions related to your experience and journey with childhood sexual abuse, online sexual abuse, experience with survival sex, sexual exploitation, and human trafficking. However, the specific focus will be on the journey into Survivor hood: how and when you self- identified as a victim, your journey, and what services were used, if any. We understand

this is a very difficult subject to talk about, and please know that at any point the interview can be stopped. You are not obligated to continue.

CONFIDENTIALITY & **ANONYMITY** Your safety is my top priority. The introduction video or call will not be recorded. Please indicate which one you prefer on the last page: **- Video Call on Zoom/Skype/Phone Call- Email** The Interview will be done by email. The interview itself will be kept over the course of one year after the study is completed to follow the Ethics Research Board's guidelines and for any potential audits of the research process – however your personal identification will be stripped out of the data and your name replaced with a number. All emails sent to you will be done through: **Personal information taken off for thesis submission.** ProtonMail is widely regarded as one of the best email providers for encryption and security. The servers of ProtonMail are based in Switzerland, a country with very strict privacy laws, which means your data is safe from government agencies. Any quotes collected will be reviewed by you, however, within the research these quotes will stay anonymous, for example any quotes will state 'according to *Lived Experience Expert of (Ex: trafficking)*'.Your responses to this interview will be anonymous and confidential. Your real name or a nickname will not be used to communicate during interviews, instead a number will be used. This data will be kept on a password protected computer or data key while the research is being analyzed and written up. The raw data will be destroyed one year after the completion of the research. Notes, interview transcriptions, and any other identifying participant information will be kept on a password protected drive. When traveling internationally, the content of the interviews will be placed on a password protected USB drive. Participant data will be kept confidential except in cases where the researcher is legally obligated to report specific incidents. These incidents include, but not limited to, for example, suicide risk or a high risk of harm to the participant, agency/NGO/organizations, or the researcher. You may choose to stop or withdraw at any time without prejudice. There will be no repercussions to you, and it will have no effect on any existing or future relationship with the researcher or with Royal Roads University.

VOLUNTARY-PARTICIPATION: Your participation throughout this study is completely voluntary. Even after signing the consent form if you wish to withdraw at any time, you may, and you also do not need to give a reason. If you wish to withdraw you can either let the researcher keep the data collected to that point, or, if you withdraw from the study before the data collection is completed, all your data will be either destroyed or returned to you if you wish to have it. If you withdraw after all the data and analysis has been collected and anonymized, we will not be able to take out your data as it will be converted into code of trends and patterns, but please note that your personal information will be made anonymous. After interviews this will take approximately 3 weeks. Please let the researcher know in that timeframe. Afterwards it will not be possible to delete your information. **RISKS:** We understand that human trafficking victims and survivors may still have personal safety risks from their current or former connections to human trafficking, sexual abuse, and sexual exploitation. Therefore, it was chosen to do interviews online so that it minimizes the risk, or knowledge to others of your participation within the study. At any point in this study, if needed, we can provide you with a list of (counselling/social/legal/health/etc.) services for victims and survivors of trafficking, sexual abuse, or sexual exploitation. **BENEFITS**: The direct benefit you will have through participating in this study is being able to tell your story, being heard, and having it be a part of research that we hope will aid other victims and survivors of human trafficking, sexual abuse, and sexual exploitation. Over the longer term we hope that the results from this study will inform services, policy and practice on how to improve the needs for sexual exploited males, and how to better support and empower male victims, and survivors during the recovery process.

COMPENSATION: As a part of this study, you will receive a small token gift for your involvement, even if you withdraw from the study prior to its completion. I want to personally thank you for sharing your time, your life, and your story.

HOW THE RESEARCH RESULTS WILL BE PUBLISHED, AND HOW PARTICIPANTS WILL BE INFORMED OF THE RESULTS OF THE RESEARCH: Information collected during this study will be primarily used for the research study on male victims and survivors. This will be published as my thesis report by the Royal Roads University. Findings may be shared in academic or professional reports or presentations. You will be given the final research report in PDF format.

CONTACT INFORMATION: If you have any questions or concerns at any time during this study, or if you experience any adverse effects because of your participation, you may contact any of the researchers provided on the first page. If you have any questions regarding your rights or if any problems come up during the study that you do not want to disclose to the research team, please feel free to contact the Research Ethics Board at ethicalreview@royalroads.ca. You may also contact my supervisors at any time should you have questions or concerns about the study or my role as a researcher. **CONSENT:** I have read and I understand the information provided. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving a reason and without cost. I voluntarily agree to take part in this study. If you agree, please email back with your confirmed agreement. Please print, sign, scan and send this page back; or you may simply type the information within the box above and send it back by email.

Name of participant: _____

Date: _____

[ ] I agree to be interviewed and participate in this research.

[ ] I do not agree to be interviewed.

Introductory Meeting:

Please indicate which one you prefer:[ ] Video Call on Zoom/Skype[ ] Phone Call [ ] Email

Researchers' signature _____ Date _____

Thank you again for your time and consideration.

This research has been approved by the Royal Roads University Research Ethics Board

Appendix 7- Interview Questions for Survivor Participants

THE NEEDS AND STORIES OF MALE VICTIMS AND SURVIVORS

INTERVIEW FOR VICTIMS & SURIVORS

MALE HUMAN TRAFFICKING, SEXUAL EXPLOIATION, CHILD ABUSE, TRANSNATIONAL CHILD SEXUAL ABUSE, ONLINE CHILD SEXUAL ABUSE AND EXPLOITATION

PRINCIPAL RESEARCH	**THESIS SUPERVISORS**
Ena Lucia Mariaca Masters Student: Human Security and Peacebuilding Royal Roads University **Personal information taken off for thesis submission.** Study conducted with Royal Roads University for completion of Master of Arts Thesis.	Dr. Kathleen Manion, Associate Professor Program Head, BA Justice Studies Royal Roads University **Personal information taken off for thesis submission.** Dr. Glenn Miles Senior Researcher, up! International **Personal information taken off for thesis submission.**

First, regardless of your participation, I want to thank you for your time. Please know that we are sensitive to the journey of victims and survivors, and your participation in this study is completely voluntary and you have the right to stop this interview at any time with no obligation to continue. Similarly, you may withdraw from this study at any time and the information you share will be removed from the data up to the point at which all data is anonymized and combined, after which it will be impossible to identify what is your information and what is someone else's. If you choose to stop or withdraw there will be no repercussions to you, and it will have no effect on any existing or future relationship with the researcher or with Royal Roads University.

PART I.**INSTRUCTIONS** :Hello, my name is Ena Lucia Mariaca. I am a Master of Arts Student at Royal Roads University for Human Security and Peacebuilding. I am focusing my thesis on male victims

and survivors of human trafficking, sexual abuse, and sexual exploitation. These stories are very important but represents a large gap within the research of male victimization. Thank you for being apart of this important research. This interview will be about your experiences and thoughts on human trafficking, sexual abuse, and sexual exploitation involving male victims and survivors. The purpose of this study is to understand the key indicators to aid in establishing a better process of identification, and services needed for male victims and survivors. The goal of this study is to empower participants through engaging in this research project to contribute to our understanding of human trafficking, sexual abuse, and sexual exploitation. You have been selected for these survivor interviews based on your personal experience, relationship with front-line workers, or your relationship with the community that raises awareness for human trafficking, sexual abuse, or sexual exploitation. At this point, I would like to invite you to participate in this interview. Please know that there is no right, wrong, desirable, or undesirable answers. I would like you to feel comfortable saying what you really think and feel. There is no word count limit, please just note that the more information that is provided allows for more in-depth research. If possible, please answer all or as many questions as possible. If you do not know the answer to a question or if it is not applicable, please write "N/A" and move on to the next question. Also, please highlight all answers that apply to you. **Please make sure you have agreed to the consent form by signing your name with the date before you begin.** Thank you, and let's begin. Please type answers and email them back when you are finished. Please start your answers to the questions on Page 3.

Part II. Interview

IDENTIFYING AND EXPLORING THE JOURNEY

This study hopes to gain insights on your journey to Survivorhood to develop better informed protective measures and practices. Your expertise in this area will give insight and an understanding of identification practices for males, needs, access, and services.

Demographics:

1. **What is your ethnicity?**
2. **How do you self-identify? (Examples: Him, Her, They, Straight, Cisgender, Trans, Gay, etc.)**
3. **How old are you now?**
4. **What country do you live in now?**

Services:

Services: a form of aid provided to you: such as through social work, counselling, healthcare, hospital care, legal aid, police services, safe homes, rehabilitation, religious and spiritual guidance.

5. **What services (social work, healthcare, legal services, police, etc.) have <u>best helped</u> you on your journey to Survivorhood so far?**
6. **How did you learn about the service(s) you mentioned above?**
7. **What <u>motived</u> you to get involved or reach out to the service mentioned above?**
8. **What services (social work, healthcare, legal services, police, etc.) have been the <u>least</u> helpful for you?**
9. **What has been the <u>most powerful</u> or <u>positive part</u> of your journey in healing after abuse, exploitation, trafficking?**

Victim Identification

Research suggests, male victims often do not share their experiences due to a feeling of guilt, shame, no access to services, or the culture around them. These questions are structured to identify recommendations on how to improve identification and support services for victims. Please answer these to the best of your knowledge.

10. **How old were you when the sexual abuse, sexual exploitation and or trafficking started?**
11. **What did you find most difficult about identifying yourself as a victim of sexual abuse, human trafficking and or sexual exploitation?**

12. **How do you think your past trauma affected or changed you?**
13. **In what ways do you think society, or your community affected your journey into Survivorhood?**
14. **What do you think prevents a male victim from identifying as a victim of sexual trafficking/abuse/exploitation?**
15. **What do you think prevents a male victim from seeking help after experiencing sexual trafficking/abuse/exploitation?**
16. **Do you think other people should be involved in helping someone self-identify as a victim after sexual trafficking/abuse/exploitation? Why or why not?**
17. **What do you think is the best way a friend can help a male victim that has experienced trafficking/abuse/exploitation?**
18. **In supporting male victims, what should front line workers know about helping and identifying a victim who has experienced sexual abuse, exploitation, or trafficking?**
19. **What should police know about helping and identifying a male victim who has experienced sexual abuse, exploitation, or trafficking?**
20. **What should policy makers know about making laws that target victims who have experienced sexual abuse, exploitation, or trafficking?**
21. **What advice would you give a responsible adult/parents/teachers about keeping a male child safe from trafficking/abuse/exploitation?**

Access to Services:

22. **What do you wish you had access to on your journey to becoming a survivor, after being a victim?**
23. **What kinds of strategies do you recommend for male child victims wanting or trying to get help or stay safe?**

LGBTQ+

24. **What strategies or advice do you have for a male victim that also identify as LGBTQ2+ that want to access services?**

Minority Groups

25. **What strategies or advice do you have for a male victim that also identifies as Black/Latino/Native American/Asian/people with disabilities that want to access services?**

Victimology

By understanding the interactions between both sides of victims and perpetrators, the study can better understand how male children are chosen, and for what reasons, as well as the interaction that takes place to facilitate the meeting. Please answer these to the best of your knowledge.

26. **Why do you think a male child is chosen for the purpose of sexual abuse, exploitation, trafficking?**
27. **Do you think age is a factor in why a male child is chosen for sexual exploitation, human trafficking, or sexual interactions? If so, what are the reasons for this?**

Female perpetrators:

28. **If you have experience with a female perpetrator, what do you wish was known to frontline workers, police, or those helping victims/survivors about the experience involving female perpetrators?**

Male perpetrator:

29. **If you have experience with a male perpetrator, what do you wish was known to frontline workers, police, or those helping victims/survivors about the experience involving a male perpetrator?**

Cybertechnology:

If you have experience online child sexual abuse or exploitation, what do you wish was known to frontline workers, police, or those helping survivors about the experience involving online abuse/exploitation.

Covid-19:

30. In what ways has Covid-19 impacted your vulnerability or other male victims/survivors' vulnerability?

Survivorhood:

31. **In your opinion – How can an adult survivor of childhood sexual abuse, sexual exploitation, or human trafficking enhance the work of advocacy, research, frontline work, and services for other victims?**

Last Question:

32. Is there anything else you wanted to share that was not covered?

PART IV.

Closing

THANK YOU FOR SHARING YOUR JOURNEY, INSIGHT AND TIME.

PLEASE REMEMBER THAT YOUR STORY AND JOURNEY WILL HELP OTHERS IN THE FUTURE.

If I had any further questions or clarifying questions, may I follow up and contact you?

[ ] yes [ ] no

Thank you for sharing your knowledge, insight, and time.

Please remember that this will help others in the future.

Your answers will be kept anonymous and confidential.

Thank you again for your time and participation.

This research has been approved by the Royal Roads University Research Ethics Board

Appendix 8 - CSEA narratives as reported by the 12 study participants (Trafficking)

The narrative summaries were taken from the orally stories and questionnaires. Disclosure of past sexual abuse and exploitation incidences were not required for this research. The length of each narrative depended on the amount of information given by each participant. Participants could choose to not disclose or skip questionnaire questions related to their CSA/CSEA if triggered.

SUMMARY	**AGE** (Start of abuse)	**PERPETRATORS**
1. He experienced sexual abuse (incest) by his stepfather and mother. Incest continued with aunts, uncles, cousins, and grandparents. After hearing concern about his safety from his friend's parents, his parents gave him to his neighbors - an elderly couple - who abused and trafficked him. He 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 he was given to the traffickers in exchange for the return of the neighbors' grandchild. His family received money and drugs by trafficking him. His mother continued the sexual abuse after the trafficking had ended. Child sexual abuse materials (CSAM) and child sexual exploitation materials (CSEM) were created, distributed, and exchanged by his aunt and uncle (local dentists) and their dental assistant. The CSEA and trafficking ended when he went to college and separated himself from his family.	Abuse: **3 - 6 years** Trafficking: **7 - 17 years** 2nd Abuse: **17-18 years**	**Intrafamilial CSEA and trafficking** **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.

2. He experienced sexual abuse and incest by his father. Abuse progressed to trafficking for sexual exploitation at "boy swap" events, like those organized by NAMBLA (Northern American Man/Boy Love Association). A few dozen boys were trafficked at these events, drugged, sedated, and raped. CSAM/CSEM were created and distributed and exchanged at events. At age 8, his father left, and his mother remarried and moved to another town, ending his CSEA and trafficking. He was then sexually assaulted by clergy in the United Methodist Church as an adult.	Abuse: **7 months - 5 years** Trafficking: **5 - 8 years** Sexual assault: **20 years**	**Intrafamilial CSEA and trafficking** **Abuser (initial):** Father **Facilitator in 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 in the United Methodist Church
3. He experienced sexual abuse and incest by his father. During athletics training season - as a teenager - the team's lawyer began grooming the mother to allow him to be trafficked. CSEA was committed by his coach, sports medicine team, and team lawyers. He was also trafficked for CSEA by "elite abusers (buyers)" associated with national/international athletics competitions. In exchange for his 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/CSEM were created, distributed, and exchanged by elite abusers. His CSEA and trafficking ended when he went to college away from his family. In adulthood, he experienced numerous instances of sexual assault throughout his acting career.	Abuse: **3 - 18 years** Trafficking: **15 - 18 years** Sexual Assaults: **19- 32 years**	**Intrafamilial CSEA and trafficking** **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.
4. He experienced child sexual abuse and incest by his father. CSEA progressed into "family sharing" events where families would exchange children for CSEA. CSEA progressed to non-familial trafficking where Boy Scouts of America events would be used as a pretext for the CSEA. In these "boy exchanges," numerous boys were gathered at Boy Scouts campgrounds where they were sedated and sexually abused. CSAM/CSEM were created, distributed, and exchanged by the fathers. At the age of 16, his trafficking ended as he was considered "too old" for his father's "buyers" (abusers). He was then sexually assaulted numerous times by his doctor as an adult.	Abuse: **6 - 12 years** Trafficking: **8 - 15 years** Sexual assault: **19 - 22 years**	**Intrafamilial CSEA and trafficking** **Abuser (initial):** Father, mother **Facilitator in trafficking:** Father, other fathers at Boy Scouts "boy exchanges" **Abusers (trafficking):** Other families in the community, strangers, fathers at Boy Scouts "boy exchanges" **Gender of perpetrators:** Male & female **Typology:** Community pedophile ring, "boy exchange" events for CSEA and trafficking of boys through national Boy Scouts organization and its state/municipal-level affiliates **Adulthood abuser:** Family doctor
5. She experienced violent sexual abuse and torture by her* father and was later sexually abused by other family	Abuse: **2 - 13 years**	**Intrafamilial CSEA and trafficking**

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. She was tortured, drugged, and beaten repeatedly. CSAM/CSEM were created, distributed, and exchanged by her father and older brother. She 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. She was able to exit trafficking after completing her high school degree in the years that followed, and later joined the military. * Born male, but now identifies as female / non-conforming.	Trafficking: **3 - 19 years**	**Abusers (initial):** Father, mother, older brother, male cousin, female cousin, aunt **Facilitator in trafficking:** Parents and older brother, then non-familiar traffickers **Abusers (buyers):** Strangers, police officer, high school teacher and Boy Scouts 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
6. He experienced incest by his grandfather, who produced online live-streamed CSEA to create, collect and distribute CSAM/CSEM. He 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 traffickers and beaten severely afterward. Law enforcement officials found him in a coma with major disabilities due to the physical trauma caused by the beating. Online (live-streamed) and physical CSAM/CSEM were created,	Abuse: **2 - 9 years** Trafficking: **9 - 17 years**	**Intrafamilial CSEA and trafficking** **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

distributed, and exchanged by his grandfather and the traffickers.		
7. He experienced sexual abuse and incest by his mother and grandfather. This progressed into the creation of CSEM. He was then trafficked within the neighborhood. His family benefited financially and received drugs as compensation for his trafficking. Online and physical CSAM/CSEM were created, distributed, and exchanged by his family. The CSEA and trafficking stopped when his mother was admitted to a psychiatric hospital for an extended period. Later, in high school, he was groomed and sexually assaulted numerous times by his high school teacher once he turned 18, which continued for six months.	Abuse: **3 - 7 years** Trafficking: **5 - 12 years** Sexual assault: **18 years**	**Intrafamilial CSEA and trafficking** **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
8. He was targeted by a man who would become his stepfather, and who proceeded to abuse him sexually and groomed his mother to allow the CSEA. The stepfather was part of a nationwide pedophile network trafficking boys for CSEA. He was later trafficked by the "boy lovers' network." He was forced to wear makeup, wigs, and costumes for abusers' (buyers') fantasies. He was tortured, caged, drugged, and physically harmed until finally attempting suicide. He regained consciousness in a hospital, where someone (unknown) had taken him. A nurse advocated for him and helped him escape from trafficking. CSAM/CSEM were created, distributed, and exchanged by his exploiters. From the age of 12 onwards,	Abuse: **2 - 3 years** Trafficking: **3 - 12 years** Exploitation **12 - 25 years**	**Intrafamilial CSEA and trafficking** **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

he was in sexually exploitative "relationships" with multiple older women.		**Typology:** Trafficking ring on the national and international level, including "elite" white collar abusers
9. He experienced sexual abuse and incest by his father. He was later trafficked for CSEA by his father, who received financial benefits and drugs. He was then sold by his father into trafficking for CSEA committed by women and men. CSAM/CSEM were created, distributed, and exchanged by his father. His CSEA and trafficking ended when his father went to prison, and he went to live with his family until adulthood. In adulthood, he experienced homelessness and went into "survival" sex trafficking for basic needs.	Abuse: **6 - 14 years** Trafficking: **6 - 15 years** Trafficking: **23 - 24 years**	**Intrafamilial CSEA and trafficking** **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.
10. He experienced sexual abuse and incest by his father and mother. He was then trafficked for CSEA within "ritual" events. 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. He was tortured, caged, and violently sexually abused numerous times. CSAM/CSEM were created, distributed, and exchanged by his father and the other cult members.	Abuse: **2 years - no data*** Trafficking: **5 years - no data*** ***Dissociation; no memories past age 6.**	**Intrafamilial CSEA and trafficking** **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.

11. He was first sexually assaulted in kindergarten by another student during recess in front of other children. By junior high, he developed a passion for theater and was then groomed by his theater teacher. During this time, he was also coming out as gay for the first time. One night he was unable to get him back home from the theater, and he let his parents know he would stay at the school theater overnight. Later that night the teacher brought him into a room where he saw another boy tied and gagged. He ran away and locked himself into another room, however, woke up to being sexual assaulted by the teacher. He then ran the 6 miles home. In the following months and struggling internally with being gay in a religious community, he decided to hitchhike to Atlantic city to see a "gay gathering party". During this time, he met a man who would later become his abuser and trafficker. The man invited him to come live with him in New York, however, once he arrived the man drugged, raped, and trafficked him through an escort service for several male buyers. He faced strangulation and was violently sexually abused numerous times. He managed to run away back to his hometown, however he was unwelcomed when he returned home.	Sexual Assault: **5 years old** (First incident) **13 years old** (Second incident) Trafficking: **14-15 years old**	**CSEA and trafficking** **Abusers (initial):** Student (child of similar age), Theater teacher (35-year-old male), Elite members of society in New York City. **Facilitator into trafficking:** Elite members of society in New York city. **Buyers:** New York socialites, dentist, and strangers **Gender of Perpetrators:** Male **Typology:** "Boyfriend-tactic" for trafficking (Romeo-pimp).
12. He went to a bus depot to return home, when he was immediately encountered by an older man who offered to give him a ride and a meal. The man laced the drink and transported him, who was unconscious to a building run by traffickers auctioning the children they had abducted. He was groomed and drugged orally by a female trafficker. Upon beginning repeated sexual assaults by buyers, he was injected with heroin. After numerous hours, he began to become more conscious and refused to cooperate,	Trafficking: **17 years old (14 hours)**	**Abduction for trafficking purposes** **Abusers (initial):** Stranger abductor **Facilitator into trafficking:** stranger abductor **Buyers:** Strangers **Gender of Perpetrators:** Male and female

resulting in an intentional overdose injection to leave him to die. In the following hours he regained consciousness and ran away to safety. He had no prior abuse incidences before trafficking.		**Typology:** Transportation stop /motel trafficking Ring

Appendix 9 - CSA narrative summaries as reported by the 28 study participants

The narrative summaries were taken from the oral stories and responses to the questionnaires. Disclosure of past sexual abuse and exploitation incidences were not required for this research. The length of each narrative depended on the amount of information given by each participant. Participants could choose to not disclose or skip questions related to their CSA/CSEA if triggered.

TYPOLOGY OF ABUSE	AGE	PERPETRATORS
13. Childhood sexual abuse incident	**6 years old**	**Abusers (initial):** Did not disclose **Gender of perpetrators:** Male
14. First rape incident: Interfamilial (incest) child sexual abuse by cousin. Forced to witness father sexually assaulting another boy. Second rape incident: Brutal and violent rape during camping trip. Sexual assault incident by female friend of family. Third rape incident with cousin.	**4 years old** **10 years old** **11 years old** (Over two days) **16 years old** **19 years old**	**Abusers (initial):** Cousin **Abusers:** Interfamilial, and family friends **Gender of perpetrators:** Male and female
15. Childhood sexual abuse and rape by elementary school doctor during routine medical physical examinations. He was raped again at age 21 by a doctor during a physical examination (required examination to become a police officer), and then sexually assaulted and harassed at age 61 by staff at clinic (during urology follow- up after cancer treatment). His disability of Multiple Sclerosis later in life increased his vulnerability to	**6-12 years old** **21 years old** **61 years old**	**Abusers (initial):** Elementary school doctor **Abusers:** School doctor, family doctor, doctor for evaluation, and urology clinic staff **Gender of perpetrators:** Male and female

sexual violence, in addition added another barrier to verbal disclosures of abuse.		
16. Interfamilial (incest) child sexual abuse/rape by stepcousin.	**8 years old**	**Abusers (initial):** Stepcousin **Gender of perpetrators:** Male
17. Childhood sexual abuse incidents by teenage babysitter and the babysitter's brother. When he was 14, he began a "relationship" with an older woman (22 years old), received several unwanted sexual advances, and was sexually abused.	**7-8 years old** **14-16 years old**	**Abusers (initial):** Babysitter **Abusers:** Babysitters, and older "girlfriend" **Gender of perpetrators:** Male and female
18. Interfamilial (incest) child sexual abuse by mother. His mother to her friends facilitated further sexual abuse. The mother would bring him to the locations where he would be sexually abused and raped by her friends. At age 5, he was raped alongside his brother and grandmother by a group of men at the park, facilitated by his mother.	**3-4 years old** **5 years old**	**Abusers (initial):** Mother **Abusers:** Mother and family friends **Gender of perpetrators:** Male and female
19. Interfamilial (incest) child sexual abuse committed by grandfather. CSAM/CSEM were created, distributed, sold, and exchanged by his grandfather.	**6 months – 2 years old**	**Abusers (initial):** Grandfather **Abusers**: Buyers of CSAM/CSEM **Gender of perpetrators:** Male
20. Interfamilial child sexual abuse by mother's partner.	**5-15 years old**	**Abusers (initial):** Mother's partner **Gender of perpetrators:** Male

21. Interfamilial (incest) child sexual abuse by mother during infancy. At age 3, neighborhood boys who had also been abused introduced him to their family where he experienced sexual abuse and raped at age 7 by this family.	**1 month – 2 years old** **3 years old** **7 years old**	**Abusers (initial):** Mother **Abusers:** Mother, A multigenerational sexually abusive family: Father, grandfather, and older boys, Neighbors **Gender of perpetrators:** Male and female
22. Multiple instances of interfamilial (incest) child sexual abuse by mother.	**6 years old**	**Abusers (initial):** Mother **Gender of perpetrators:** Female
23. First rape incident by a "friend" who overpowered him and forcibly assaulted him. Second sexual abuse and rape incidents: During paper route, he was invited inside a neighbor's house, sedated with drugs, and then sexually abused. The perpetrator was a known pedophile and caught during police sting operation ending the abuse. He was later in a "relationship" with an adult female who was emotionally, verbally, and sexually abusive.	**12 years old** **14 years old** (Over 3 months) **16-18 years old**	**Abusers (initial):** Friend **Abusers:** Friend (known child abuser by police), adult "girlfriend" **Gender of perpetrators:** Male and female
24. Multiple instances of interfamilial (incest) child sexual abuse and rape by father.	**10 years old**	**Abusers (initial):** Father **Gender of perpetrators:** Male
25. Multiple instances of interfamilial (incest) child sexual abuse by mother. At age 12, during a holiday an older woman sexually assaulted him. Multiple women in the village (aunties) would sexually abuse him from age 5-13.	**4-10 years old** **12 years old** **13-19 years old**	**Abusers (initial):** Mother **Abusers:** Mother, Aunty, neighborhood women, extended family, family friend.

From age 13-19, he was groomed and kept enslaved by a man who sexually abused and assaulted him.		**Gender of perpetrators:** Male and female
26. Interfamilial (incest) and multi-generational child sexual abuse by mother and grandfather (first time at age 7, then again from age 10-14).	**6-12 years old** **7 years old** **10-14 years old**	**Abusers (initial):** Mother **Abusers:** Mother, Grandfather, Grandfather's friends **Gender of perpetrators:** Male and female
27. Multiple instances of child sexual abuse done by another child.	**4 years old – 12 years old**	**Abusers (initial):** Another child aged 6 **Gender of perpetrators:** Male
28. Multiple instances (400+ times) of child sexual abuse and assault done by little league baseball coach.	**11-14 years old**	**Abusers (initial):** Baseball Coach **Gender of perpetrators:** Male
29. Multiple instances of child sexual abuse done by mother.	**8-13 years old**	**Abusers (initial):** Mother **Gender of perpetrators:** female
30. Incidences of child sexual abuse and assault by camp councilors over multiple summers by different camp leaders.	**10.5 years old** **14-16 years old**	**Abusers (initial):** Camp Councilors **Gender of perpetrators:** Male
31. Interfamilial (incest) child sexual abuse and rape by aunt.	**4-7 years old**	**Abusers (initial):** Aunt **Gender of perpetrators:** female
32. Multiple instances of child sexual abuse done by a church parishioner in the Catholic Church. The sexual abuse increased in frequency when two priests sexually assaulted him as well.	**12-13.5 years old**	**Abusers (initial):** Church Parishioner

		Abusers: Church Parishioner and two priests **Gender of perpetrators:** Male
33. Childhood sexual abuse and assault by female teenage babysitter and the babysitter's boyfriend.	**9-9.5 years old**	**Abusers (initial):** Babysitter **Abusers:** Babysitter and her boyfriend **Gender of perpetrators:** Male and female
34. Childhood sexual abuse during a routine physical examination and annual check-up by family doctor.	**7-8 years old**	**Abusers (initial):** Doctor **Gender of perpetrators:** Male
35. Childhood sexual abuse and violent sexual assault by female teacher.	**8-9 years old**	**Abusers (initial):** School teacher **Gender of perpetrators:** Female
36. Multiple instances of interfamilial (incest) child sexual abuse and rape by father. This continued into Boy Scouts, when his father became a scout leader, and he continued to be violently raped by his Boy Scout leaders during events. At age 15, an older child and his brother sexually assaulted him. A classmate then sexually assaulted him again in college.	**8-12 years old** **15 years old** **20 years old**	**Abusers (initial):** Father **Abusers:** Father, Boy Scout Fathers, older boy and his brother, classmate **Gender of perpetrators:** Male
37. Multiple instances of interfamilial (incest) child sexual abuse and rape by father and mother.	**4-8 years old**	**Abusers (initial):** Father **Abusers:** Father, Mother **Gender of perpetrators:** Male and female

38 Multiple instances childhood sexual abuse and violent sexual assault by adult female family friend.	**7 years old** **11 years old** **13 years old**	**Abusers (initial):** "Friend" (adult family friend) **Gender of perpetrators:** Female
39. Gang-raped by Hollywood film director and casting team.	**18-19 years old**	**Abusers (initial):** Hollywood film director **Abusers:** Film director and casting team **Gender of perpetrators:** Male
40. Rental Landlord placed hidden cameras around his home to record sexual activity/voyager. A person he thought was his friend later sexually assaulted him during a camping trip.	**23-24 years old** **25 years old**	**Abusers (initial):** Rental landlord **Abuser:** "Friend" **Gender of perpetrators:** Male

Appendix 10 - Additional Questions for CSEA Trafficking Survivor Participants

1. Did you experience gender identity confusion (feeling female or effeminized) during/after the sexual abuse and exploitation? If so, how?

2. What struggles (emotionally, mentally, psychologically, spiritually, physically) did you experience when your abuser/trafficker was a family member?

3. In what ways were the family member(s) able to hide the sexual abuse/exploitation from the rest of the family and community? If it was not hidden, please explain how this was done.

4. How did your family go from sexual abuse to trafficking? How was this done?

5. What were the similarities you experienced from sexual abuse and exploitation done within the family, and non-family members (family friend, someone you knew, strangers, etc.).

6. What were the differences you experienced from sexual abuse and exploitation done within the family, and non-family members (family friend, someone you knew, strangers, etc.).

7. Did your family hinder your journey to recovery? If so, how?

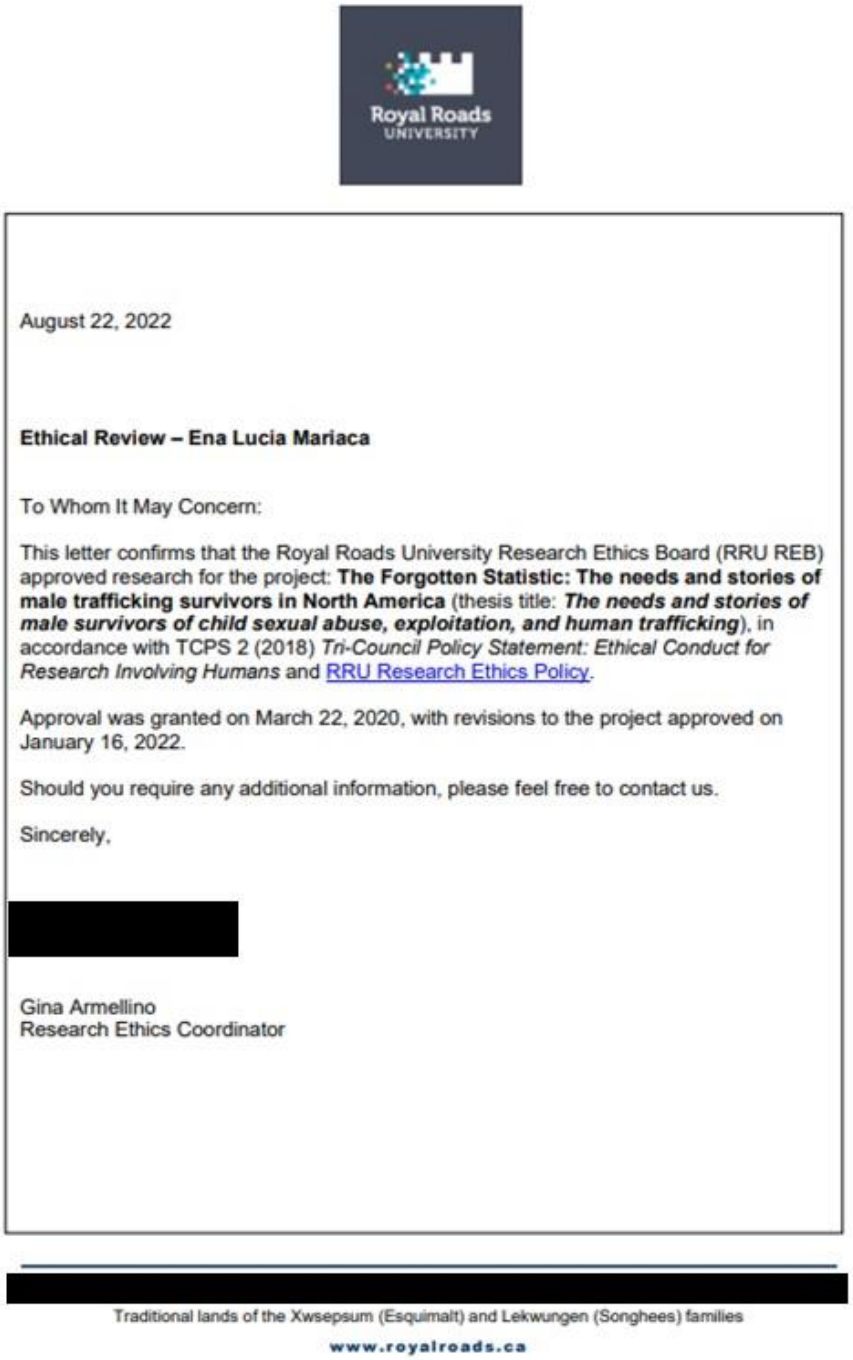
8. Anything else you would like to add or comment on:

Appendix 11- Common Perpetrator of CSA/CSEA Profiles

Situational	Preferential	Polymorphous Perverse
▪ This individual if presented with the opportunity to offend will take it, however before the first offence may not be actively looking to sexual abuse a child. ▪ Often indiscriminate; will sexually assault male and female children. ▪ Can hold psychopathic tendencies. ▪ Craves satisfaction and stimulation through variety and experimentation. ▪ May collect pornography, with	▪ This is the most common type of offender. ▪ This individual may actively search for a child to abuse and holds a preferred type of victim. ▪ Children are the preferred "sexual object". ▪ Has a long-term and persistent pattern of behavior, including well-developed grooming techniques. For example, going overseas as an NGO volunteer building the communities trust to establish themselves to later start the abuse. ▪ May lure by using force or manipulation and grooming techniques.	▪ This individual shows deviant behavior in their childhood or adolescence, examples such as sadism, psychopathy, bestiality. ▪ This individual displays a variety of deviant sexual interests. ▪ This individual will likely incorporate higher levels of sexual abuse and sadism into the rape of a child. ▪ There is a need to inflict pain.

child sexual abuse material comprising a part of the entire collection. ▪ There is likely to be a wide variety of sexual perversion with a higher level of sadism. ▪ May lure by using force or manipulation. ▪ Example: A tourist in a country where child sexual abuse and trafficking for sexual exploitation is ramped is presented with the opportunity to have sex with a child and proceeds to doing so.	▪ Pedophilia (desiring children sexually) is most often diagnosed within this group. ▪ Behavior is ritualistic—actively collects child sexual abuse material. The collection of CSAM feeds the internal fantasy. ▪ Some individuals may collect CSAM without acting out their fantasies, however, most cases reveal that this step before actively committing a sexual crime against a child, as child sexual abuse & rape.	▪ Example excerpt from Dr. Logan's article: "*The 18-year-old offender had begun molesting children and animals at age 11. He admitted to sexual intercourse with five different animals and the sadistic sexual killing of a young dog. His interest in children and infants as sexual objects would likely have likely superseded his arousal to adult women or men*." (Logan, 2010)

Appendix 12 – Ethics Approval



Royal Roads
UNIVERSITY

August 22, 2022

Ethical Review – Ena Lucia Mariaca

To Whom It May Concern:

This letter confirms that the Royal Roads University Research Ethics Board (RRU REB) approved research for the project: **The Forgotten Statistic: The needs and stories of male trafficking survivors in North America** (thesis title: ***The needs and stories of male survivors of child sexual abuse, exploitation, and human trafficking***), in accordance with TCPS 2 (2018) *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans* and RRU Research Ethics Policy.

Approval was granted on March 22, 2020, with revisions to the project approved on January 16, 2022.

Should you require any additional information, please feel free to contact us.

Sincerely,

[redacted]

Gina Armellino
Research Ethics Coordinator

[redacted]

Traditional lands of the Xwsepsum (Esquimalt) and Lekwungen (Songhees) families

www.royalroads.ca

Appendix 13 – Support for Male Survivors Handout

(The following lists and text were developed by Ena Lucia Mariaca Pacheco)

Are you a survivor? Do you know a survivor of child sexual abuse, sexual exploitation, or trafficking?

- When they are ready to talk, listen to understand, and believe them. You can say "How can I help you?"

  Do not cut off your relationship - treat them as a human being with kindness and respect– don't just see them as a victim.

N E X T S T E P S

- Find a community of fellow male survivors.
- Start sharing your story – once you feel ready.
- Find a trauma-informed therapist/councillor with experience in child sexual abuse.

The organizations provided in this document will give you access to an international community of male survivors, online chat forums to safety interact with other male survivors anonymously, online and in person healing retreats, online educational webinars, YouTube videos on past events, live events for story sharing, mental health professionals, and links to the survivors and their own initiatives.

List of services for male survivors:

- MaleSurvivor: https://malesurvivor.org/
- MatrixMen: https://www.matrixmen.org/
- 1in6: https://1in6.org/
- MenHealing: https://menhealing.org/
- The Men's Story Project: https://www.mensstoryproject.org/
- Men & Healing: https://menandhealing.ca/
- Hard Places Community: http://thehardplaces.org/punlok-thmey-men/
- The South-South Institute on Sexual Violence: https://www.facebook.com/SouthSouthInstitute
- EMMAUS: https://streets.org/
- Valley Oasis: http://www.valleyoasis.org/about.html
- FORGE- Trans & LGBTQ+: https://forge-forward.org/
- Giant Slayer: https://www.giantslayer.us/
- Voice of Men 360: https://www.voiceofmen360.org/

Immediate support:

- RAINN: https://www.rainn.org/
- National Human Trafficking Hotline (USA): https://humantraffickinghotline.org/
- National Suicide Prevention Lifeline (USA): http://suicidepreventionlifeline.org/
- Canadian Human Trafficking Hotline: https://www.canadianhumantraffickinghotline.ca/
- Global Crisis Hotline: https://www.crisistextline.org/

For children:

- Child Help lines International: https://www.childhelplineinternational.org/child-helplines/child-helpline-network/
- ECPAT – Child - know your rights: https://www.ecpat.org/what-we-do/bill-of-rights/#/en
- Love146: https://love146.org/

MENTAL HEALTH SERVICES FOR MEN AND BOYS

Steven L. Procopio

Consultant, Trainer, Therapist: Male Survivors of Sexual Trauma & Trafficking at Procopio Consultant

www.stevenlprocopio.com

Phil Mitchell

Male Sexual Abuse Specialist providing Counselling, Psychotherapy, Supervision, Training and Public Speaking.

https://counsellorinleeds.co.uk/

Dr. Kelli Palfy

Author: Men Too: Unspoken Truths About Male Sexual Abuse.

Speaker & Registered Psychologist at Peaks & Valleys Psychology.

https://kellipalfy.com/

Dr. Laura Streyffeler

Licensed Mental Health Counselor and a Board-Certified Expert in Traumatic Stress

https://drlauracounseling.com/

Debra Warner

Forensic Psychologist, Professor, Trauma Expert, Speaker, Author, Speaker

Training- A survival guild for spouses of male survivors: https://listenandloveuniversity.thinkific.com/courses/his-history-her-story-male-survivor-trauma-and-relationships

Andrea Palmer

Men's Coach: specialized in sexual abuse to resolve ongoing challenges.

https://linktr.ee/andreacpalmer

Caring for the Heart Ministries

Christian trauma informed counselling, resources, and training to help with personal and marital problems.

https://caringfortheheart.com/

Ranch Hands Rescue

A mental health counseling services that specializes in treating more complex trauma cases and partners with rescued farm animals that have experienced abuse and neglect with clients in deep psychotherapy counseling sessions.

https://www.ranchhandsrescue.com/

Bob's House of Hope

Upcoming: First shelter in the United States that will house sexually abused men between the ages of 18-24.

https://www.ranchhandsrescue.com/sex-trafficking/