



The commercial sexual exploitation of children in Recife: How young people experience support services

A summary briefing of young people’s experiences of accessing support services following adverse childhood experience, including commercial sexual exploitation, in northeast Brazil.¹

This briefing contains a discussion of factors that young people valued when accessing support services for survivors or those at risk of commercial sexual exploitation of children (CSEC) in Brazil. Within, we highlight key factors that services should consider to better meet the needs of young people following adverse childhood experience, and to prevent commercial sexual exploitation by working with those most at risk.

Key findings

- Young people who accessed CSEC services in northeast Brazil had often been through multiple and intersecting Adverse Childhood Experiences (ACEs), and various factors within their daily lives put them at potential risk of CSEC.
- Young people identified a range of factors that were important to them when accessing services. These included:
 - *Being comfortable in engaging with service providers and being attended by appropriate staff.*
 - *Having information about what was happening to them, and their options.*
 - *Having access to the basics, including food, and being physically comfortable.*
 - *Being accepted by service providers, and not judged for their experiences or identity.*
 - *The availability of appropriate services and being able to access them.*
- The concept of safety emerged as a significant factor that young people valued when accessing services. Building trust and establishing control were identified as key building-blocks of safety.
- Within this context, trust was characterised as young people’s relationship with other people in their lives, including service providers, and control as their sense of self and self-determination.

Why is this important?

CSEC is a form of sexual violence against children that involves exploitation for the financial or commercial benefit of a third party (Gattás et al., 2012; ILO, 2019). CSEC can include activities such as tourism for the purposes of child sexual exploitation, the commercial production of child sexual exploitation materials, and the online transmission (including livestreaming) of children engaged in sexual activity (GFEMS, n.d.).

Brazil is currently undergoing a critical phase of review to develop new state and national plans to address CSEC. There are three key existing public policy planning processes that underpin the country’s response to CSEC at the national level, and specifically within the state of Pernambuco, which are going through phases of reformulation.

In this briefing, we document 20 adolescents’ experiences of accessing various governmental and non-governmental services that are available to support and aid the recovery of those who have experienced CSEC, and which work to help prevent those considered at high risk of CSEC from falling victim to it. Using ACEs as a lens through which to understand these experiences, our results focus on young people’s own perspectives of services, and factors that contribute to their recovery and wellbeing.

Previous work indicates that young people who have experienced ACEs, sexual violence, periods of homelessness, have run away, or who are LGBTQ+, may be disproportionately at risk of CSEC (Ducak et al., 2022; Estes

& Weiner, 2005). In Brazil specifically, prior research has signposted poverty, dysfunctional family environments, previous exposure to physical and sexual abuse, child labour, being missing from home, and homelessness as significant potential CSEC vulnerability factors (Gattás et al., 2012).

Non-clinical interventions and trauma-informed living environments can play an important role in assisting young people to heal and recover from traumatic events (Bath, 2008; Muraya & Fry, 2016). However, research relating to young people accessing services following CSEC typically does not centre the experiences and voices of young people themselves (with the notable exception of Hallett et al., 2019). We attempt to address this gap through our study.

Methods

We conducted 20 interviews with adolescent participants in northeast Brazil. Participants were sampled from several specialised child protection institutions in the region and invited to reflect on their experiences of different support services. After introducing our study and its aims, we gave participants freedom to draw upon experiences they felt were important. Participants drew upon a range of topics, including their own experiences of exploitation, abuse, and harm, specialist support services, community initiatives, their family lives, and issues that affected their local communities more broadly. We coded and analysed interview transcripts using a constructivist grounded theory approach (Charmaz, 2014).

Adverse childhood experiences

It was not an explicit objective of the study to ask participants about their experience of CSEC or other ACEs. However, many participants did choose to reflect on the context of how they came to encounter different services, and why. These included CSEC, various forms of interpersonal violence, substance misuse, and forced labour.

CSEC. It was not possible from our research to discern whether individual interview participants had definitively experienced CSEC. However, several offered reflections on how it was being experienced by others. Notably, some participants positioned CSEC as a voluntary activity. For example, one participant offered that young people engage in CSEC because they 'like it' or as a response to dependant drug use. However, other participants expressed that children and adolescents who experience CSEC often lack agency. Others highlighted money as a driver, noting that CSEC involvement and exploitation can be a response to the impoverished living conditions of young people and their families, or as a mechanism to sustain a particular lifestyle.

Participants in our study sometimes conflated CSEC with voluntary participation in sex work. This was echoed by several young people who offered moralising accounts of others participation in sex-work, referring to it as 'naughty' behaviour. Other participants indicated that their families would also hold a moralising view if it was revealed that they had been sexually harmed.

Interpersonal violence (IPV)

Half of our interview participants spoke of IPV, noting the impact of drug trafficking and gang violence in their neighbourhoods. Others referenced experiencing violence from drug dependant adult family members, and the police. Within this context, one participant insinuated that the risk of sexual violence was endemic to women, and that for many these and other forms of IPV were just a part of daily life.

Substance misuse

Six participants referred to substance misuse and dependence, often within the context of losing control over their lives and increasing their vulnerability to CSEC. Negative experiences resulting from substance misuse by family members were also discussed by some participants.

Forced labour

Several participants were in contact with services as they were regarded as experiencing child labour, including selling paintings on the beach, and working in bars. While some participants expressed these experiences in positive terms, and as a voluntary and empowering endeavour, professionals are wary that these settings expose children and young people to risks of secondary harm, such as violence or trafficking (Kenny, 2007). Labour is prohibited for children under 14 years of age in Brazil.

Intersectional risk

Within the study, it was often difficult to separate participants' experiences of CSEC from other forms of ACE, particularly other forms of sexual harm. We offer three reflections on the intersectionality of the harms experienced by the young people in our study:

- 1 ACEs were often experienced alongside one another. Cases where participants did *not* make links between types of harm were also those where participants, understandably, chose not to discuss their negative experiences in detail.
- 2 Different harmful experiences were interwoven within the daily lives of young people. For example, one participant shared how she was accessing multiple services to recover from both drug dependence and depression. Another noted that logistical challenges made it difficult to attend all the necessary services to address different issues.
- 3 Some harms were regarded as preferable to others, but this varied across our participants. For example, some participants appeared to normalise CSEC, considering it as a voluntary activity and a route of poverty. For others, the stigmatization associated with CSEC meant that begging or going hungry were seen to be preferable.

Experience of services

Participants reported varying experiences of different services. Our results suggest that the extent to which their experiences were either positive or negative typically hinged on five factors:

- 1 The extent to which they felt comfortable while in the presence of service providers. This included being attended by appropriate staff members (e.g., female staff attending to girls who had suffered abuse or harm by men).
- 2 Being kept informed and given access to information about interventions, where they were being referred, what was happening to them, their options, and other elements of the services they were accessing.
- 3 Having access to the basics, such as food, and being physically comfortable while accessing services.
- 4 Being accepted (having the opportunity to discuss, or not, their experiences, and not being judged for it).
- 5 The availability of appropriate services, and access to them (including travel and transport considerations).

Safety, trust, and control

Throughout the interviews, safety emerged as a central theme of participants' experiences, echoing other research in this area (see Barrow et al., 2021; Gibbs et al., 215).

Participants often spoke of their experiences within the context of safety. Their exposure to CSEC and other ACEs represented a state of unsafety, where trust and control were lacking. If the objective of the services themselves was to enhance safety, the concepts of trust (the relationship between young people and others in their lives, including services) and control (young people's sense of self and self-determination) emerged as key values in the achievement of safety.

We suggest that the concepts of 'trust' and 'control' can be a significant contributor for services in instilling a sense of safety for their service users and can determine the extent to which young people derive benefit from services. To foster this, we propose that services focus on strengthening the above five factors of comfort, information, the basics, acceptance, and service availability, in order to increase their capacity to effectively intervene with young people.

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Notes

¹ This summary briefing was prepared by Zoe Robinson, Dr. Ben Brewster, and Dr. Katarina Schwarz (University of Nottingham Rights Lab) with contributions from researchers from the Federal University of Pernambuco and The Freedom Fund. The project "Approaching Commercial and Sexual Exploitation of Children and Adolescents in Brazil" is funded by the Arts and Humanities Research Council (AH/V01336X/1).

Funded by



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