

Testimony of Vera Institute of Justice
Submitted to the Maine Legislature's Health and Human Services Committee on
LD 1092 An Act to Prevent the Commercial Sexual Exploitation of Children in the State
March 27, 2023

Good morning. My name is Hannah Green, and I am a program manager at the Vera Institute of Justice's Initiative to End Girls Incarceration (EGI). Thank you, Health and Human Services Committee for holding this important hearing. Thank you also to Representative Holly Stover for introducing LD 1092 and to the bill's numerous co-sponsors. LD 1092 will help Maine better prevent and respond to commercial sexual exploitation of children (CSEC), and I am pleased to offer this testimony in support of it.

The Vera Institute is a 60-year-old national nonprofit that works to end mass incarceration, protect immigrants' rights, ensure dignity for people behind bars, and build safe, thriving communities. Vera's Initiative to End Girls Incarceration (EGI) works to end the incarceration of girls and gender expansive youth in our country by 2030. Through partnerships in jurisdictions across several states, including Maine, we aim to create reforms and programs that will better support the well-being of young people in their communities, address the root causes of their incarceration, and permanently close the doors to girls' juvenile detention and placement facilities. From 2018 to 2020, Vera worked with the Maine Department of Corrections (DOC) to advance a gender-responsive, youth development approach to ending girls' incarceration statewide, giving us a view into the awful effects of CSEC in Maine.

Maine has many dedicated providers who work tirelessly to support youth who experience CSEC and their families, but the current resources are simply not enough to meet the need. Experts estimate that hundreds of individuals survive sex trafficking in Maine each year.ⁱ We also know that 12.1 percent of high school girls and 9.8 percent of middle school girls in Maine report that they have been physically forced to have sexual intercourse. The same is true for 4.9 percent of high school boys and 2.3 percent middle school boys, according to the 2021 Maine Integrated Youth Health Survey.ⁱⁱ Without trauma-informed care, coordinated services, a greater understanding of how and why youth experience CSEC in Maine, and new strategies to prevent it, we will continue to see girls with complex, unmet needs, many of whom will end up in the youth justice system, and/or accessing homelessness or behavioral health services, at great cost to the state.

Sexual exploitation has lifelong consequences. Youth who experience CSEC may experience depression, anxiety, anger, and PTSD, and may engage in self-harming behavior. Physically, they may experience severe injuries, sexually transmitted and other infections, and may not receive care for chronic conditions such as asthma or diabetes.ⁱⁱⁱ In our work in Maine, as in many other communities across the country, we have seen that child-serving systems often struggle to support their most vulnerable and marginalized girls and gender-expansive youth, many of whom are entangled in multiple systems (child welfare, juvenile justice, etc.) and are managing complex trauma across multiple facets of their lives.

Too many of these young people end up in the juvenile justice system, which compounds the harms they have experienced. Most incarcerated girls have experienced some combination of commercial sexual exploitation, family violence, sexual violence, substance use, and homelessness from a young age. Most have had touchpoints with multiple child-serving systems. In our work in Maine, specifically, our casefile review of girls admitted to Long Creek between 2014 and 2019 found that 60 percent of the girls

experienced multiple instances of sexual assault and 48 percent had concerning evidence suggesting or actual confirmation that they had been commercially sexually exploited.^{iv} Youth incarceration is associated with poorer physical and mental health as adults, worse education outcomes, and higher recidivism rates.^v

In order to prevent these negative outcomes, Maine needs to develop an array of resources across multiple child-serving systems (what is often referred to as a “continuum of care”). This range of resources would provide trauma-informed, coordinated, holistic services targeted at the unique needs of the girls and gender-expansive youth with the most complex needs. LD 1092 would support Maine in achieving this by helping to strengthen Maine’s continuum of care for youth experiencing or at risk of CSEC, identify gaps in the current continuum of care, and enable systems to work together to ensure that youth can access and benefit from current programming.

LD 1092 is an important step towards improving the Department of Health and Human Services’ ability to prevent CSEC throughout Maine and to better support youth who do experience it. The workforce expansions it supports, and the programming and advisory functions included, will move Maine towards a more coordinated and comprehensive continuum of care for youth at risk of or experiencing CSEC, immeasurably improving the lives of these young people.

Thank you for the opportunity to provide testimony. Please do not hesitate to contact me if the Vera Institute of Justice may provide further support to you all.

ⁱ Hornby Zeller Associates, Inc., *Maine Human Trafficking Needs* (Augusta, ME: Maine Coalition Against Sexual Assault, 2015), 16-20, perma.cc/GMU7-VNVC.

ⁱⁱ Maine Integrated Youth Health Survey, *2021 MIYHS High School Report* (August, ME: Maine Department of Health and Human Service and Main Department of Education, 2022), 89, perma.cc/6MYQ-HPDS; and Maine Integrated Youth Health Survey, *2021 MIYHS Middle School Report* (August, ME: Maine Department of Health and Human Service and Main Department of Education, 2022), 45, <https://perma.cc/Y77E-9DN8>.

ⁱⁱⁱ Roya Ijadi-Maghsoodi, Mekeila Cook, and Elizabeth S. Barnert, et al., “Understanding and Responding to the Needs of Commercially Sexually Exploited Youth: Recommendations for the Mental Health Provider,” *Child and Adolescent Psychiatric Clinics of North America* 25, no. 1 (2016), 107-22, perma.cc/83DE-4JY8.

^{iv} Vera’s EGI team and NYU research partners conducted a case file review of girls admitted to Long Creek in 2018 and 2019. Through our casefile analysis, we reviewed and coded files for 25 girls who had been admitted to Long Creek between the years of 2014 and 2019, although the majority of files were for girls with recent admissions. The 25 girls accounted for a total of 49 admissions. For an overview, see Vera EGI, *Care, Not Confinement: A Better Solution for Maine’s Girls* (New York: Vera, 2021), perma.cc/TV8V-96JQ. The full results, including the figures cited in this testimony were provided to the Maine Department of Correction as *Initiative to End Girls’ Incarceration in Maine- Recommendations on Diversion Strategies*. For any questions, contact Hannah Green, hgreen@vera.org.

^v For physical and mental health, see Elizabeth S. Barnert, Rebecca Dudovitz, Bergen B. Nelson, et al., “How Does Incarcerating Young People Affect Their Adult Health Outcomes?” *Pediatrics* 139, no. 2 (2017), perma.cc/5S7X-ACSM. For education outcomes and recidivism, see Anna Aizer and Joseph J. Doyle, Jr., “Juvenile Incarceration, Human Capital, and Future Crime: Evidence from Randomly Assigned Judges,” *The Quarterly Journal of Economics* 130, no. 2 (2015), 759–803, doi.org/10.1093/qje/qjv003; and Samantha Harvell, Chloe Warnberg, Andreea Matei, et al., *Closing Youth Prisons: Lessons from Agency Administrators* (Washington, DC: Urban Institute, 2020),

perma.cc/S6Y9-D24T. For youth recidivism in Maine specifically, Robyn Dumont and Erica King, *Youth Recidivism: Diversion to Discharge in Maine's Juvenile Justice System* (Portland, ME: University of Southern Maine, 2017), 3, perma.cc/L8EB-QGDT ("Between time of commitment and community reintegration, overall youth risks scores decreased by 6.7 points. However, those youth who were initially measured as low-risk averaged a 1.2 point increase in risk score.").