

## **Early Childhood and Trauma Informed Resources**

### **Center on the Developing Child at Harvard University**

<http://developingchild.harvard.edu/>

#### ***InBrief Series from Center on the Developing Child at Harvard University***

- InBrief: Executive Function: Essential Skills for Life and Learning
- InBrief: The Foundations of Lifelong Health
- InBrief: The Science of Early Childhood Development
- InBrief: The Impact of Early Adversity on Children's Development
- InBrief: Early Childhood Program Effectiveness

[http://developingchild.harvard.edu/resources/briefs/inbrief\\_series/](http://developingchild.harvard.edu/resources/briefs/inbrief_series/)

#### ***Working Paper Series***

- #1: Young Children Develop in an Environment of Relationships
- #2: Children's Emotional Development Is Built into the Architecture of their Brains
- #3: Excessive Stress Disrupts the Architecture of the Developing Brain
- #4: Early Exposure to Toxic Substances Damages Brain Architecture
- #5: The Timing and Quality of Early Experiences Combine to Shape Brain Architecture
- #6: Mental Health Problems in Early Childhood Can Impair Learning and Behavior for Life
- #7: Workforce Development, Welfare Reform, and Child Well-Being
- #8: Maternal Depression Can Undermine the Development of Young Children
- #9: Persistent Fear and Anxiety Can Affect Young Children's Learning and Development
- #10: Early Experiences Can Alter Gene Expression and Affect Long-Term Development
- #11: Building the Brain's "Air Traffic Control" System: How Early Experiences Shape the Development of Executive Function

[http://developingchild.harvard.edu/resources/reports\\_and\\_working\\_papers/working\\_papers/](http://developingchild.harvard.edu/resources/reports_and_working_papers/working_papers/)

### **SAMHSA**

#### ***Supporting Infants, Toddlers and Families Impacted by Caregiver Mental health problems, Substance Abuse and Trauma***

<http://store.samhsa.gov/product/Supporting-Infants-Toddlers-and-Families-Impacted-by-Caregiver-Mental-Health-Problems-Substance-Abuse-and-Trauma/SMA12-4726>

### **Minnesota Communities Caring for Children**

<http://pcamn709.wix.com/minncommcarechildren#!home/mainPage>

### **The Adverse Childhood Experiences (ACES) Study**

<http://acestudy.org/>

### **Wilder Research Reports**

<http://www.wilder.org/Wilder-Research/Publications/Pages/default.aspx>

- ***Promoting the Healthy Development of African American Babies***
- ***African American Babies in Minneapolis and St Paul***



*Anchorage*

# BJA / OVC Human Trafficking Task Forces (40)



**Key Numbers to Call -  
Human Trafficking and Related Tips, Referrals, and Reports**

**9-1-1 – Local Emergency Number**

- Will dispatch a patrol officer from your local police department to the scene (Note: may not be trained on responding to the specific needs of trafficking cases, but best for immediate emergency situations that require an urgent law enforcement response).

**U.S. Department of Health and Human Services (HHS) National Human Trafficking Resource Center (Operated by Polaris Project)**

- 1-888-3737-888
- Toll-free; National in scope
- Non-law enforcement
- 24-hour capacity
- Call to report a potential case of human trafficking; connect with anti-trafficking services in your area; or to request training, technical assistance, or general information on human trafficking.

**U.S. Department of Justice (DOJ) Trafficking in Persons and Worker Exploitation Task Force Line**

- 1-888-428-7581
- Toll-free; National in scope
- Only operates on weekdays, 9am-5pm EST
- Call to report a potential case of human trafficking. This is a direct call to Federal law enforcement.

**National Domestic Violence Hotline**

- 1-800-799-7233
- Toll-free; National in scope
- 24-hour capacity
- Ability to make local referrals to crisis shelters in cities and towns across the U.S.
- <http://www.ndvh.org/>

**Rape, Abuse & Incest National Network (RAINN)**

- 1-800-656-HOPE (4673)
- Toll-free; National in scope
- 24-hour capacity
- <http://www.rainn.org/>

**National Runaway Switchboard**

- 1-800-RUNAWAY (786-2929)
- Toll-free; National in scope
- 24-hour capacity

**Covenant House NineLine**

- 1-800-999-9999
- Toll-free; National in scope
- 24-hour capacity
- For youth and runaway/homeless teens

**National Center for Missing and Exploited Children (NCMEC) National Hotline**

- 1-800-THE-LOST (843-5678)
- [www.cybertipline.com](http://www.cybertipline.com)
- Toll-free; National in scope
- 24-hour capacity
- Report a missing child or cases of child sexual exploitation.



This wheel was adapted from the Domestic Abuse Intervention Project's Duluth Model Power and Control Wheel, available at [www.theduluthmodel.org](http://www.theduluthmodel.org)

Polaris Project | P.O. Box 53315, Washington, DC 20009 | Tel: 202.745.1001 | [www.PolarisProject.org](http://www.PolarisProject.org) | [Info@PolarisProject.org](mailto:Info@PolarisProject.org)

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targeting gender, age, and message relevance have been used to guide development of health marketing design. Self-socialization theory and gender schema theory support these principles and suggest that effective advertisements display images of similar age, same gender, and relevant message to that of target population. Further study is needed in methods of analysis to enhance the development of future health marketing. The purpose of this study was to evaluate, through a marketing theoretical framework, marketing messages that were recalled by college freshman females.

**Methods:** Female focus groups were recruited by convenience sample at a large Midwestern university, as part of ongoing research evaluating health-marketing messages. Focus groups were tape-recorded and led by a trained female facilitator and all data was transcribed. Participants were asked to recall health marketing messages that focused on the impacts of alcohol consumption. Health marketing ads recalled by participants were identified by consensus of three reviewers. Two reviewers with marketing backgrounds evaluated the ads using the Center for Media Literacy media deconstruction framework, traditional marketing principles, self-socialization theory, and gender schema theory. Consensus on analysis was achieved by both reviewers through an iterative process.

**Results:** A total of 26 female college students participated in 6 focus groups. Focus group participants overwhelmingly recalled the Over the Limit, Under Arrest, health marketing campaign, which was promoted in Wisconsin in 2010. Participants recalled seeing this campaign through television ads. Analysis of these television ads revealed three findings. First, ads featured only male actors. Second, male actors in the ads appeared to be greater than 30 years of age. Last, these ads featured messages that focused on sobriety checkpoints.

**Conclusions:** The Over the Limit, Under Arrest, campaign was clearly recalled by college-aged females in this study. All results derived from theoretical and analysis techniques suggested these ads should not have appealed to this population. It is possible that placing this type of advertisement on television, a media infrequently used for college health marketing but having a high viewership by college students, increased recall. Our study did not assess ad influence to alcohol consumption. Further study should analyze appeals and influence these ads may have had on this population to aid in the development of further prevention messages.

**Sources of Support:** The work described was supported by award K12HD055894 from the Eunice Kennedy Shriver Child Health, Behavior and Development Institute and by a grant from the Center for Democracy in Action.

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#### IDENTIFYING EFFECTIVE OUTREACH STRATEGIES FOR SEXUALLY EXPLOITED YOUTH

*Beth Holger-Ambrose, MA<sup>2</sup>, Cheree Langmade, BSN<sup>3</sup>, Laurel Edinburgh, MSN<sup>1</sup>. <sup>1</sup>Children's Hospitals and Clinics of Minnesota <sup>2</sup>Minnesota Department of Human Services <sup>3</sup>The Bridge for Youth*

**Purpose:** To explore sexually-exploited youths' perspectives of how street outreach workers can most effectively connect them to health care, shelter, and mental health care.

**Methods:** Focused ethnography using semi-structured interviews with 12 female and 1 transgender key informants, 14 to 22 years, about their experiences of sexual exploitation, homelessness, and health care utilization. Detailed interview field notes were analyzed along domains of experience and meaning of sexual exploitation practices, coping strategies, and health care.

**Results:** All the youth experienced multiple types of sexual exploitation in venues ranging from private homes, spas, strip clubs, hotels, brothels, and street prostitution. Nearly all (12/13) of the youth identified that they had or were currently working with a pimp which many referred to as their "friend" or "boyfriend". Most youth or their pimp used the Internet to advertise sexual services in addition to their involvement in other venues: "Internet provides more access to find men that want to hook up. It makes it faster to meet someone online". Most (12/13) youth reported that exploitation co-occurred with homelessness and running away. One youth stated, "I started at age 14 because I was kicked out of the house and homeless and was friends with a female pimp who said she could show me an easy way to make money". All youth identified substance use involvement; some viewed it as a business tool to increase sex drive, lessen inhibitions, and generate more sex exchanges "...when stripping or escorting, women use thizzle or coke to loosen up and pimps will use heroin and weed to control the girls. ... these drugs can be used for coping as well." Most youth received health care within the past year but care was accessed from multiple different clinic sites or emergency departments without any continuity of care. Youth shared that effective outreach strategies would involve "not lecturing girls because they will get offended. . .When you approach a girl introduce yourself as a person by your name and not your program. Show interest in the girls as an individual and do not make assumptions". Informants felt street outreach supplies should include survival supplies such as "nutritious snacks," "wet wipes," "lube," "tampons," "underwear," and "socks."

**Conclusions:** Sexual exploitation appears to begin at young ages and occurs in a variety of venues. Therefore, street outreach also needs to occur in multiple venues, including cyberspace engagement. Health care providers need to work with street outreach services to address homelessness, substance abuse, and health issues of sexually exploited youth.

**Sources of Support:** MN Children's Hospital Association, Dept. of Public Safety, and Canadian Institutes of Health Research (Stigma and Resilience, Among Vulnerable Youth Consortium).

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#### FUN WITH FACEBOOK: THE IMPACT OF FOCUS GROUPS ON THE DEVELOPMENT OF AWARENESS CAMPAIGNS FOR ADOLESCENT HEALTH

*Helen Sanematsu, MFA. Indiana University, Herron School of Art and Design, and Indiana University School of Medicine*

**Purpose:** Efforts at improving adolescent health through mass communication are frequently undertaken by corporate design firms using traditional design development methods. While such methods may create work that is aesthetically