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#### Abstract

Professional school counselors in Texas responded to a questionnaire about training received and their needs concerning preparedness to identify and work with youth exposed to child sex trafficking (CST). The study utilized a convergent parallel mixed methods design. Quantitative results indicated many participants did not find that their graduate degree program prepared them to work with CST and less than half felt their school and/or district provided adequate training opportunities. In addition, thematic analysis revealed two themes characterizing Texas school counselors' needs to identify and work with CST: (a) concerning preparedness: "so much going on" and (b) "specific training": a comprehensive review of CST. This article concludes with implications and recommendations for practice and future research.

#### **Keywords**

child sex trafficking, school counselor, training, school counselor preparedness, at-risk youth

# Child Sex Trafficking and Professional School Counselor Preparedness in Texas

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#### **Abstract**

Professional school counselors in Texas responded to a questionnaire about training received and their needs concerning preparedness to identify and work with youth exposed to child sex trafficking (CST). The study utilized a convergent parallel mixed methods design. Quantitative results indicated many participants did not find that their graduate degree program prepared them to work with CST and less than half felt their school and/or district provided adequate training opportunities. In addition, thematic analysis revealed two themes characterizing Texas school counselors' needs to identify and work with CST: (a) concerning preparedness: "so much going on" and (b) "specific training": a comprehensive review of CST. This article concludes with implications and recommendations for practice and future research.

### Significance to the Public

Insert public significance statement here. Single-spaced, Arial font, size 9.

Keywords: child sex trafficking, school counselor, training, school counselor preparedness, at-risk youth

No child is immune to child sex trafficking (CST), regardless of the child's race, age, socioeconomic status, or location, and every child involved in this form of exploitation is a victim (U. S. Department of State, 2022). CST, defined by the Victims of Trafficking and Violence Protection Act (Pub. L. No. 106-386, § 103) as any commercial sex act induced by force, fraud, or coercion on a person who has not attained 18 years of age, continues to rise in all countries including the United States. The 2022 trafficking profile for the United States listed the United States among the top three countries of origin of victims along with Mexico and Honduras (U. S. Department of State, 2022). In 2021, the Polaris-operated National Human Trafficking Hotline identified 11.278 victims and survivors involved in sex trafficking through phone, webchats, web forms, text, and email reports, a

majority of whom were minors when first entering trafficking (Polaris, 2021). Relevant to the current study, as one of the largest hubs for sex trafficking, Texas has been found to contain around 25% of all trafficked persons in the United States at any given time (Busch-Armendariz et al., 2016). In 2016, it was estimated that approximately 79,000 minor and youth victims of sex trafficking were in Texas (Busch-Armendariz et al., 2016). Although some statistics exist from federally reported cases (U. S. Department of State, 2022) and human trafficking hotlines (Polaris, 2021), it is estimated that less than 1% of survivors of trafficking cases across the world are ever identified (Bedbible Research Center, 2023).

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For youth in school settings who are vulnerable or have experienced sex trafficking, professional school counselors (PSCs) can serve as first responders. In Texas, PSCs' roles and responsibilities as well as how services to students are delivered are defined and described in the Texas Model for Comprehensive School Counseling Program (Texas Education Agency, 2018), a statutory curriculum for Texas PSCs. At present, this resource (Texas Education Agency, 2018) does not reference human trafficking or CST. As mandated reporters, PSCs can report any suspected child abuse and/or neglect to proper authorities under the Child Abuse Prevention and Treatment Act (CAPTA) of 1974. However, the appropriate tools and supports must be in place to ensure the fidelity of the intervention and follow up. PSCs must understand procedures to follow if a student impacted by trafficking is identified. Domoney and colleagues (2015) conducted a qualitative study about counselors' experiences working with survivors of human trafficking and found that many counselors expressed not feeling adequately prepared to provide the types of services survivors needed. Blum et al. (2018) suggested that counselors require comprehensive training curricula to engage with CST victims. Interiano-Shiverdecker et al. (2024) found that counselors working with survivors of sex trafficking require additional competencies, such as recognizing the signs of sex trafficking, vulnerable population, trafficking and recruitment methods, and how to assess and treat the symptoms that persist after this event has happened. Moreover, movement restrictions and school closures due to the COVID-19 pandemic threatened PSCs' ability to identify and work with vulnerable populations, while also increasing access to online recruitment and exploitation (United Nations Office on Drugs and Crime, n.d.). The aftermath of the pandemic posed a new consideration for how PSCs work with this population. Yet, PSCs' perception of CST training remains unknown. An exploration of this kind can help assess the degree of PSCs' preparedness to tackle this social phenomenon that continues to grow and affect youth in the United States.

## Child Sex Trafficking

CST risk factors include a history of abuse and violence in childhood and adolescence, witnessing family violence (Franchino-Olsen, 2019), running away (Clawson et al., 2009), involvement with foster care and juvenile systems (Moore et al., 2020), drug use, homelessness, and history of depression (Ulloa et al., 2016). Although females typically represent many CST cases, recent studies emphasized the prevalence of CST among cisgender males and gender minority children (e.g., transgender, gender nonconforming, gender binary; Franchino-Olsen et al., 2022; Roe-Sepowitz et al., 2019). Minors who live in impoverished areas also experience a greater risk for sex trafficking, with racial and ethnic minorities more vulnerable to CST. Scholars rooted in social service organizations unequivocally show disproportionate sex trafficking victimization by race/ethnicity, particularly of Black women and girls (Farrell et al., 2016; Gibbs et al., 2019; Snyder & Mulako-Wangota, 2014; Turner et al., 2014). Poverty or low socioeconomic status is also connected to trafficking risk (Lutnick, 2016; Martin et al., 2021; Murphy, 2017). Although any child is vulnerable to sex trafficking, traffickers identify and prey on children's vulnerabilities by promising to meet their daily needs (e.g., food, shelter; Lutnik, 2016), offering safety, love, and protection (United States Department of Justice, n.d.), and/or utilizing force, fraud, coercion, and manipulative behaviors (i.e., trauma bonding; Bruhns et al., 2018).

As a result, CST can include loss of basic human rights, loss of one's childhood, disruption in families, death threats, abuse, and extortion. Exposure to numerous traumatic events lead many children to develop severe mental health consequences, including but not limited to anxiety disorders, complex post-traumatic stress disorder, Stockholm syndrome, major depressive disorder, suicidal ideation, and substance abuse (Banu et al., 2021; Cole et al., 2016; O'Brien et al., 2017). Youth may also present with increased hypervigilance, antisocial behaviors, deviance, lack of

concentration, and academic difficulties (Cecchet & Thoburn, 2014; Oram et al., 2012)

Due to the mental health consequences attributed to CST, all counselors have an important role to play in the identification, referral, and management of CST. PSCs are in a unique position to prevent or disrupt the cycle of abuse by having daily access to several at-risk youth (Interiano-Shiverdecker et al., 2024; Litam & Lam, 2021; Thompson & Haley, 2018). Scholars (Interiano-Shiverdecker et al., 2024) found that specialized training on CST is critical to best prepare counselors in their ability to identify and effectively work with clients who have been trafficked. Yet little is known about PSCs' overall preparedness to identify and work with youth exposed to CST.

## School Counselors' Sex Trafficking Experience and Training

Through the American School Counselor Association (ASCA, 2016), PSCs have a responsibility to find ways to better aid children in recognizing and preventing sexual abuse. PSCs are in the unique position to see children in an observable environment for the school week; and awareness of the signs and symptoms of sex trafficking would help identify potential victims. As a response, in 2019, Texas Governor Greg Abbott signed House Bill No. 111 which proposed training for school employees on the prevention of sexual abuse, sex trafficking, and other maltreatment of children.

Several scholars have discussed the required elements for sex trafficking training for counselors (Browne-James et al., 2021; Interiano-Shiverdecker et al., 2022b; Litam, 2017; Thompson & Haley, 2018). A Delphi study completed with 19 experts on sex trafficking across the nation indicated that counselors should also have an awareness of the signs of CST such as frequent traveling to other cities, signs of anxiety, depression, or fear, bruising on the child, unnatural or rehearsed responses when asked questions, older boyfriends/girlfriends, and unexplained finances (Interiano-Shiverdecker et al.,

2022b). Training for professionals should also include information regarding legal protection; methods and means of how coercion, fraud, and control transpire; information about traffickers; and cultural competence (Interiano-Shiverdecker et al., 2022b; Thompson & Haley, 2018). In a study by Litam and Lam (2021), results also showed that PSCs could improve their knowledge and attitude through training related to sex trafficking. Interiano-Shiverdecker et al. (2024) interviewed 10 counselors with experience working with sex trafficking who shared that despite having significant experience with trauma, providing services to survivors of sex trafficking was a steep learning curve requiring additional knowledge and skills. Findings like this suggest the need to further understand PSCs' beliefs regarding their CST training. Thompson and Haley (2018) suggested that training can increase counselor self-efficacy and competence when working with survivors of human trafficking. Moreover, school environments are complicated systems with multiple layers and, therefore, may require additional considerations.

The current study seeks to expand the understanding of the training received and the needs of PSCs to recognize and/or provide service and care to youth who may be experiencing or at-risk for sex trafficking in Texas. The guiding research questions for this study required both quantitative and qualitative approaches: (a) Do PSCs believe that they have received adequate training to work with students who are experiencing or are at-risk for CST? (b) How do PSCs rate their perceived ability with CST? and (c) What are the self-reported needs of PSC's concerning preparedness to identify and work with youth exposed to CST?

## Method

We utilized a convergent parallel mixed methods design to concurrently conduct quantitative and qualitative elements in the research process, weigh the methods equally while analyzing them independently, and interpret the results simultaneously (Creswell, 2013). This research design was well suited to facilitate a deeper understanding of PSCs' training, perceived ability,

and their needs concerning preparedness to identify and work with CST by comparing and corroborating quantitative and qualitative findings together.

## Research Team

The research team consisted of three counselor educators (Dr. Devon E. Romero, Dr. Claudia G. Interiano-Shiverdecker, and Dr. Brenda Jones) and a doctoral candidate in Counselor Education and Supervision (at the time of the study), all within a CACREP-accredited program. Romero and Interiano-Shiverdecker have recent CST publications and experience working with at-risk youth in community and school settings. Katherine E. McVay has experience working as a social-emotional wellness counselor at a private school, while Jones is a professional school counselor with over 30 years of experience in the public school system.

## **Participants**

The present study included data from a total of 93 PSCs ranging in age from 28 to 61 (M = 43.18, SD = 9.05) with 89.2% (n = 83) of participants self-reporting as female, 7.5% (n = 7) self-reporting as male, and 3.2% (n = 3) who preferred not to respond. The self-reported racial and ethnic composition of the sample was 57% (n = 53) White, 25.8% (n = 24) Hispanic, 7.5% (n = 7) Black or African American, 2.2% (n = 2) multiracial, 1.1% (n = 1) American Indian or Alaska Native, and 6.5% (n = 6) chose unlisted or prefer not to respond.

Participants described their counseling education as a 36-hour (n = 20; 21.5%), 48-hour (n = 35; 37.6%), 60-hour (n = 24; 25.8%), 61-plus-hour (n = 13; 14%), and doctoral (n = 1; 1.1%) degree with approximately 64% of the sample graduating from a CACREP-accredited counseling program. Tenure as a school counselor for the sample ranged from less than 1 year to 35 years (M = 8.1; SD = 6.95) with an average of 6.8 years (SD = 6.31; range: less than 1-32 years) working at their current setting and a mean of 10 years (SD = 6.57; range: less than 1-34 years) teaching experience. Most participants (n = 1.5)

68; 73.1%) described their current work setting as Title 1. Participants, except for one, reported working in elementary (n = 23; 24.7%), middle (n = 29; 31.2%), or high (n = 40; 43%) school settings, in which 42 (45.2%) were from suburban, 25 (26.9%) urban, and 25 (26.9%) rural schools. Finally, 30 (32.6%) PSCs reported working with students they suspected were exposed to or experienced CST and on a scale of 1 (*Strongly disagree*) to 5 (*Strongly agree*), 98% of PSCs agreed that CST is an area that "school counselors should receive training in" (M = 4.81, SD = 0.50). In addition, 99% of PSCs agreed that they "would attend training on child sex-trafficking if it were available" (M = 4.70, SD = .59).

#### Measures

The questionnaire utilized in the current study consisted of four sections. The first section inquired about participants' demographic characteristics such as age, gender identity, race and ethnicity, educational background, and characteristics of their employed school setting (e.g., school level, type of setting, socioeconomic status). The second section included questions about participants' training experiences with regard to CST. The third section included items essential for evaluating PSCs perceived ability. This section included 10-items developed for use in the present study. Items measured perceptions of ability to (a) recognize indicators, symptoms, and vulnerability, (b) consult with teachers and parents, (c) screen and/or assess for at-risk youth, (d) provide individual and group counseling services, (e) develop and teach curriculum on child sextrafficking, and (f) work effectively with child victims of sex-trafficking. Participants rated items on a 5-point scale (1 = strongly disagree to 5 = strongly agree). Example items include: "I believe that I have the ability to recognize youth who are vulnerable and at-risk of child sextrafficking," and "I believe that I have the ability to develop and teach curriculum units on child sextrafficking identification and prevention to teachers and other school personnel." The Perception of Ability Scale demonstrated a Cronbach's alpha of

.92 for the current sample with an inter-item correlation mean of .58. We analyzed the construct validity of the instrument by conducting Pearson's correlations which revealed that all items presented a statistically significant correlation at the 0.01 level with at least one other item. Finally, to answer research question 3, the demographic and background questionnaire included one open-ended question requesting participants written responses regarding resources needed to recognize and work with CST.

## **Procedures**

After receiving Institutional Review Board approval and in compliance with the American Counseling Association's *ACA Code of Ethics* (2014), we contacted 636 PSCs from over 250 Texas schools by email for the study. Of the total sample contacted for the study, 264 agreed to participate; however, 93 completed the survey (15% return rate and 35% response rate). Participants completed the anonymous survey using Qualtrics. We transferred deidentified survey responses to Excel for data cleaning, transformation, and organization for importing into SPSS and NVivo.

## **Quantitative Analysis**

For data analysis, we transferred survey responses to Excel for data cleaning, transformation, and organization for importing into SPSS. This descriptive non-experimental research design by means of survey research methods used the Statistical Package for Social Sciences (SPSS; Version 25) to calculate descriptive statistics in response to the first two research questions.

## **Qualitative Analysis**

In response to our third research question, we utilized Braun and Clarke's (2013) six-phase approach to reflexive thematic analysis to analyze participant's typed responses. Thematic analysis was best suited for the purpose of this study for it provides "a method for identifying, analyzing, and reporting patterns (themes) within data" (Braun & Clarke, 2013, p. 79). After the first step, transcription, Romero and McVay familiarized themselves with the data (second step) and

completed independent line-by-line coding (third step) with the third research question in mind. After independent coding, they merged both files to compare codes and discuss using NVIVO, a software program used for qualitative data analysis. This step also provided consistency and transparency during the coding process. Continuing to use NVIVO, Interiano-Shiverdecker engaged in the fourth step (searching for themes) by organizing codes into broader categories that captured patterns or ideas. Then Romero and Interiano-Shiverdecker reviewed, modified, and developed preliminary themes that accurately reflected the data as the fifth step. During the sixth phase, Romero and Interiano-Shiverdecker defined and named themes and finalized the analysis. Jones served as a peer debriefer, as recommended by Lincoln and Guba (1985), who reviewed the final codebook and presentation of themes to serve as the sounding board as the only PSC on the research team. Interiano-Shiverdecker suggested a certain reorganization of the codebook, moving some codes from the first theme to the second. The first coding team agreed. Finally, once we agreed on the final codebook, we constructed a concise, coherent, logical, nonrepetitive, and interesting account of the data.

## Strategies for Trustworthiness

Due to previous conceptual pieces on counselors' work with human trafficking (Litam, 2017; Thompson & Haley, 2018) and works completed by Interiano-Shiverdecker et al. (2022b, 2024), we were not surprised that PSCs reported limited adequate training to work with students who are victims or at-risk for CST. To establish trustworthiness, we conducted ongoing weekly debriefing meetings for six weeks through data analysis to bracket preconceived values and assumptions and ground our data in the participants' perspectives. The use of peer debriefing meetings and triangulation of researchers provided credibility, confirmability, and authenticity of our data (Hays & Singh, 2012). Interacting with the data differently (i.e., Romero and McVay coded data, Interiano-Shiverdecker organized codes into themes, Jones served as a peer debriefer) helped

reduce researcher bias through openly challenging each other and ourselves concerning any conclusions. Finally, we utilized an external auditor who reviewed our final coding document and written representation of our findings. The external auditor was a counselor educator with training development expertise and previous experience analyzing mixed methods approaches using thematic analyses. She confirmed our findings providing feedback to change the second theme name to accurately represent our findings and provide context for the COVID-19 pandemic. We edited the manuscript to reflect this feedback. Therefore, the final codebook and written illustration resulted from discussion, negotiation, and consensus building. We collected quantitative data to triangulate the data to further establish trustworthiness. Triangulation of data methods refers to using multiple methods to illustrate themes. Often using multiple methods of data collection and analysis yields various findings (Hays & Singh, 2012).

## Results

### Research Question 1

In response to the first research question, (Do professional school counselors believe that they have received adequate training to work with students who are experiencing or at-risk for CST?), the research team conducted descriptive statistics

analyses to evaluate PSCs feelings regarding the adequacy of training received. For the first item, "I feel that I received adequate training during my graduate degree program to work with students who are victims or at-risk for child sex-trafficking," 67% (n = 62) disagreed, 20% (n = 19) agreed, and 13% (n = 12) responded neutral (M = 2.28, SD = 1.26). In addition, 45% (n = 42) agreed that their school and/or district provided adequate training opportunities (e.g., workshops, conferences) on the topic of CST (M = 3.12, SD = 1.34) compared to the 41% (n = 38) who disagreed and 14% (n = 13) who responded neutral.

## Research Question 2

Similar to the first research question, we utilized descriptive statistics to evaluate how PSCs rate their perceived ability with CST. On the Perception of Ability Scale, participants' overall average indicated that they neither agreed nor disagreed with their abilities with CST (M = 2.82, SD = 0.93, range = 1-5). Participants were most confident in their ability to recognize youth who are vulnerable and at-risk of CST (M = 3.54, SD = 1.03) and recognize the indicators and symptoms of CST (M = 3.33, SD = 1.19). Participants reported feeling the least confident with their abilities to provide comprehensive screening and/or assessment for students at-risk or exposed to CST (M = 2.18, SD =1.18). Table 1 includes a summary of participant responses to the 10 scale items.

**Table 1**Perception of Ability Scale

Item	n	M	SD
1. Recognize the indicators and symptoms of child sex-trafficking.	93	3.33	1.19
2. Recognize youth who are vulnerable and at-risk of child sex-trafficking.	93	3.54	1.03
3. Consult with teachers about child sex-trafficking.	91	3.24	1.21
4. Consult with parents about child sex-trafficking.	93	2.94	1.16
5. Provide comprehensive screening and/or assessment for students atrisk or exposed to child sex-trafficking.	93	2.18	1.18

6. Provide individual counseling interventions to students at-risk or exposed to child sex-trafficking.	93	2.67	1.26
7. Provide group counseling interventions to students at-risk or exposed to child sex-trafficking.	93	2.58	1.25
8. Develop and teach curriculum units on child sex-trafficking prevention to students in the classroom.	93	2.38	1.26
9. Develop and teach curriculum units on child sex-trafficking identification and prevention to teachers and other school personnel.	93	2.37	1.21
10. Work effectively with students who are victims of child sex-trafficking in my school.	92	2.97	1.29
Total	93	2.82	0.93

## Research Question 3

Ninety-one participants answered the open-ended question regarding PSCs self-reported needs concerning preparedness to identify and work with youth exposed to CST. The research team categorized participant responses into two main themes: (a) concerning preparedness: "so much going on" and (b) "specific training": a comprehensive review of CST.

# Concerning Preparedness: "So much going on"

Most PSCs (n = 79; 86.8%) provided context for their needs related to CST that impeded their preparedness to identify and work with youth exposed to CST. Among them, PSCs spoke of several limitations to their work, including the impact of COVID-19, plus limited training about CST. We organize their concerns in two subthemes (a) *limitations at work* and (b) *inadequate amount of CST training*, for clarification.

Limitations at Work. PSCs stated that they are "mostly providing responsive services" with "overwhelming caseloads" and "limited resources and time constraints preventing us from reaching the normal amount of students we do on a daily basis." One PSC reported "general fatigue." Another PSC expressed, "because there is so much going on with everything in the world, I can see myself struggling with transference." We assessed PSCs during the onset of the COVID-19 pandemic. As such, many PSCs reported additional struggles such as "online learning has definitely been a huge

factor in identifying those students who are facing adversity in their lives." "This also affects how support can be offered," explained another PSC. A PSC also explained, "not being able to see students face-to-face makes it extremely difficult to be able to identify students who are in a high-need situation." "The lack of face-to-face interaction checking in on children has decreased the opportunity for adults and advocates to recognize the symptoms of trafficking," explained another PSC. The necessary consideration to ensure safety during the COVID-19 pandemic also seemed to lead to "little access to our students who are virtual and do not provide valid working contact numbers and, in some cases, valid addresses." To this, one PSC stated that there were "too many risks which make it harder to do a good job." PSCs explained that "limited resources and time constraints are preventing us from reaching the normal amount of students we do on a daily basis."

Inadequate Amount of CST Training. Among these limited resources PSCs inadequate amount of training to address sex trafficking "to recognize or provide services" was mentioned by several PSCs. "I am not even sure where to begin," summed up one PSC. I think I don't know enough about the signs/symptoms to be able to recognize and provide service/care. (Not necessarily having anything to do with COVID)" expressed another PSC. PSCs expressed that their "minute understanding of this type of situation" affected their ability to do something if they suspected any possible CST. PSCs desired more training that allowed them to "identify concerns" and "provide services for

students that have been victimized." One PSC felt that due to their limited training they "were at a major handicap." One PSC connected how limited training and access to students due to the COVID-19 pandemic made it harder to identify children at risk, "with less access to students in person, it is more difficult to identify or notice signs or provide service as many students (and their parents) who are learning from home do not respond to school communication." Yet many PSCs felt that their amount of work made "less time for training." "I am not sure when I will be able to attend training or provide training," explained one PSC.

# "Specific Training": A Comprehensive Review of CST

As a result, 80 PSCs (87.9%) discussed their desires regarding CST training content, format, and providers. For clarification we divided their suggestions into (a) CST training content and (b) CST training format and desired providers.

**CST Training Content.** As for content, PSCs shared that receiving an "introduction" that presented "new/developing information" on the signs and indicators of CST, "terms used by traffickers and victims to identify trafficking," "physical characteristics," "continued updates," and local and national statistics would be helpful. One PSC also mentioned "specific training with the guide as to what steps to take." "Articles that would help identify what to look for, prevalence among certain groups, how to proceed with it if it is suspected" stated a PSC. Yet PSCs mentioned the need to know what to do beyond contacting law enforcement." Other PSCs added, "a training session with usable checklists" and "specific questions to ask." "A specific protocol that is outlined by the state or the district that details what indicators and symptoms need to be reported and who to report these indicators and symptoms to," explained one PSC. PSCs in general requested community resources on "supportive services," "legal resources," particularly "law enforcement and child crimes detective information session," or any other important information that can be "shared with students or families." One PSCs felt that

resources could "help create awareness with parents and the community." PSCs also recognized the important of developing rapport and a safe environment. As a result, one PSC mentioned the importance of learning "tools to help students feel comfortable speaking."

## **CST Training Format and Desired Providers.**

The preferred format for ST training varied. Some PSCs desired "professional development sessions" in-person while others mentioned "webinars." "Workshops," "conferences," and even "at least a FULL day of training" were other responses. At least three PSCs mentioned wanting "monthly update seminars/podcasts with new/developing information." Regardless, PSCs mentioned the importance of training that was "free to our school/district" and "regional specific." Finally, PSCs recognized the importance of learning from real-life case scenarios. One PSC mentioned wanting to "study/review case studies of survivors." Another PSC also desired "personal relevant experiences from those who have experienced it." Participants also valued professional development from a counselor, including "other counselors' training/experiences" and "training from people out in the field who see this on a daily basis."

## Discussion

The present study sought to examine training and the perceived ability of PSCs to recognize and/or provide service and care to youth who may be experiencing or at-risk for sex trafficking in Texas. The findings shed new light on PSCs' training needs regarding CST. Regarding our first research question, although all PSCs agreed that CST is an area that school counselors should receive training, many participants did not find that their graduate degree program prepared them to work with CST. These findings align with Blum et al.'s (2018) suggestion for counselors to receive comprehensive training curricula to engage with individuals who have experienced CST. Institutional and state efforts through ASCA (2016) and the Texas Education Agency (n.d.) to best prepare PSCs on the prevention, identification, and treatment of all

sexual maltreatment of children foment the need to ensure proper training for CST.

Our second research question sought to explore how PSCs rated their perceived ability regarding CST. Almost all participants indicated that they neither agreed nor disagreed with their abilities to work with CST. Although an average score is more promising than a low score, PSCs do not seem to report confidence in their ability to work with this population. Our findings add to a body of literature expressing concern with counselors' overall unpreparedness to provide the types of services CST survivors need (Domoney et al., 2015; Interiano-Shiverdecker et al., 2024: Thompson & Haley, 2018). We believe that with the increasing prevalence of sex trafficking among minors, it is imperative for PSCs to learn the appropriate skills (e.g., guidelines to create trust, safety), interventions (e.g., assessments), and knowledge (e.g., indicators, risk factors) indicated by participants to best support any child exposed or atrisk of CST (Interiano-Shiverdecker et al., 2022b).

Qualitative findings provided further context to understand PSCs self-reported needs concerning preparedness to identify and work with youth exposed to CST. The first theme highlighted that PSCs preparedness is affected by numerous obstacles, including limited training. PSCs were not only handling large caseloads, a common overload for this population, but the onset of the COVID-19 pandemic brought a new set of struggles that impacted the identification and support of minors exposed or at-risk of CST. Although we did not intentionally seek out to examine the impact of the COVID-19 pandemic, we believe that this finding provides an important context to PSCs' current needs. As we move forward, considerations for training may need to factor in how to work with students attending school virtually. Adding to this issue, inadequate training left PSCs unprepared to recognize the signs of CST and provide care. The second theme indicated what PSCs desired regarding CST training. Our participant's demands for training align with several recommendations for counselors discussed by scholars in the literature (Browne-James et al., 2021; Litam, 2017;

Thompson & Haley, 2018), including the desire for specific counseling competencies such as what to look for (i.e., signs of CST) and what to do when identification of CST occurred (Interiano-Shiverdecker et al., 2022b). Resources, particularly community resources and statistics, seemed to be another significant need. Similar to Thompson and Haley's (2018) recommendations and competencies established by experts (Interiano-Shiverdecker et al., 2022b), PSCs also desired resources on legal protection and information about traffickers. Therefore, our findings indicated that although PSCs may feel unprepared to identify and work with CST, their recommendations and desire for specialized training is supported and well aligned with current literature on this topic.

## Implications for School Counselors

Both the quantitative and qualitative data from our study demonstrated a need for more training and preparation for PSCs regarding CST. PSCs have not only a responsibility as mandatory reporters to report child abuse, but also the ethical responsibility to demonstrate competence to recognize the signs and indicators of abuse and provide appropriate services (ASCA, 2016). Thus, the findings from our study provide implications for counselor education and continuing education. PSCs' roles can play a very critical part in sex trafficked youths' identification and recovery. As counselor educators are preparing graduate students to enter the school system, integrating this subject matter into curricula is beneficial. For example, when covering risk and trauma assessments, educators may consider integrating sex trafficking instruments such as those presented in Romero et al. (2021) systematic review of CST instruments to introduce students to sex trafficking signs and indicators (See Interiano-Shiverdecker et al., 2022a for additional review). An online search of counseling curricula indicated that human trafficking was slightly included in trauma and assessment courses (i.e., a lecture on human trafficking, human trafficking assessment included in a lecture) but there is no aggregated data exploring how human trafficking training is generally discussed in counseling curriculum, which calls for an area of future research.

There was an overwhelming amount of agreement among participants regarding the need for sex trafficking training and participant interest in attending such trainings. Yet as we searched for such training programs, there was limited opportunities specific for school counselors and their context. PSCs and other counseling scholars with experience working with sex trafficking youth should consider facilitating these workshops and conference programs. Training facilitators should consider integrating case studies of survivors and professional experiences from the field. Specific counseling guidelines or competencies to work with sex trafficking seem pertinent to personalize CST training for all counseling professionals. Participants also stated they would be interested in monthly updates, full day trainings, and trainings that are not only accessible, but free. PSCs and their local university programs can work collaboratively to organize and provide accessible workshops for students and practitioners in their communities. Finally, PSCs can work collaboratively with administrators to encourage the inclusion of sex trafficking related prevention during school inservice time.

## Limitations and Future Directions

Interpretation of the study's results requires consideration of several limitations. Although the sample consists of a diverse pool of 93 PSCs, our sample is a small representation of all PSCs in the state of Texas. We also recognize that data focused on Texas may experience limited generalizability to PSCs in other states. Additionally, all results were derived from self-report responses from a survey developed specifically for this study.

A larger sample size that is more representative of all Texas regions could provide a more sophisticated analysis of PSCs preparedness to identify and work with CST. We also recommend future research to examine the perceived preparedness to work CST among PSCs in other states. We also evaluated training received, perceived ability, and their needs concerning preparedness to identify and work with CST on self-report measures. Objective measures such as observations and third-party feedback (i.e., clients,

supervisors) may triangulate our findings and provide multiple perspectives to PSCs overall preparedness to identify and work with CST. Finally, qualitative research designs that facilitate a more in-depth exploration of CST within schools from the perspective of staff (e.g., directors of guidance), PSCs, and students is warranted.

## **Conclusion**

The purpose of this study was to gain an understanding of the training received and the needs of PSCs to recognize and/or provide service and care to youth who may be experiencing or at-risk for sex trafficking in Texas. Despite the alarming numbers of individuals who have experienced sex trafficking in the United States, professional school counselors report feeling underprepared to work with this population. PSCs desire foundational knowledge of sex trafficking (e.g., introductory profile of the trafficker, survivor, terms). This study touches on an important, yet neglected topic, and supports the need for specialized training for PSCs on CST.

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