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Sex Trafficking of Transgender and Gender Nonconforming Youth in the United States

Meaghan Tomasiewicz

Loyola University Chicago, mtomasiewicz@luc.edu

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Sex Trafficking of Transgender and Gender Nonconforming Youth in the United States

Meaghan L. Tomasiewicz

KEY TERMS AND CONCEPTS

There are many terms used to describe members of the transgender and gender nonconforming (GNC) community. The majority of terms have fluid, relative meanings depending upon one’s identity, definition, geography, age, language, and/or racial-ethnic culture, which makes them challenging to define. Despite this challenge, there are a few terms which are foundational to discussions around gender identity and expression in the US context.

CISGENDER is a term that is used to describe an individual whose gender identity reflects the sex they were assigned at birth. For example, a child that was assigned “male” at birth still identifies as a ‘male,’ ‘boy,’ ‘brother,’ ‘son,’ and uses pronouns including ‘he, him, his.’

GENDER AFFIRMATION SURGERIES Top surgery can be performed to enhance the breasts or remove the breast tissue. Bottom surgery can transform and reconstruct the genitalia. Facial feminization surgery can make the face appear more feminine to assist some individuals with “passing”¹. These surgeries can be critical to treating gender dysphoria for some transgender and GNC individuals.²

GENDER EXPRESSION is a person’s physical characteristics and/or mannerisms that may be perceived as masculine, feminine, or something neither masculine nor feminine. Examples would include dress,

appearance, speech patterns, and social interactions.³

GENDER IDENTITY is one’s internal experience and/or naming of one’s gender.⁴ This could mean feeling and/or identifying as man, woman, or a gender nonconforming identity. Gender identity is neither dependent on the gender or sex a person is assigned at birth nor is it correlated with a particular gender expression.

GENDER NONCONFORMING

is an umbrella term referring to individuals that may not fit into normative gender categories such as “man” or “woman.” GNC can also be an identity and is most commonly used as an adjective. It is important to note that not all GNC individuals identify as transgender and not all transgender individuals identify as GNC.⁵

HORMONE THERAPY (HT) HT is prescribed by a medical provider and either gives a person hormones their body does not make or blocks hormones their body does make.⁶ The use of estrogen can result

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¹**Passing:** “Passing” refers to one’s ability to conform to the cisgender-based standards for gender society places upon individuals (Begun & Kattari, 2016). This is often viewed as the goal for transgender and gender nonconforming individuals, regardless of whether they personally desire to “pass” (Begun & Kattari, 2016).

in diminishing body hair, softer skin, loss of muscle tone, redistribution of fat, reduction of testosterone production, shrinking of the testes and prostate (if applicable), and several other short term and long term changes. For those taking testosterone, results include vocal chords harden and the voice becomes deeper, facial hair growth, increased musculature, the cessation of menses (if applicable), the enlargement of the clitoris (if applicable), and several other short term and long term changes.

LGBT AND LGBTQ the acronyms LGBTQ and LGBT are used interchangeably within this research brief to reflect the terms used in the study(ies) from which the information was accessed.

INTERSEX is an umbrella term that refers to people who are born with any of a wide range of features or characteristics that may not fit dominant narratives about male or female bodies.⁷ This brief does not identify the circumstances of intersex youth who are trafficked because there is a dearth of available research on the topic.

PASSING refers to one's ability to conform to the cisgender-based standards for gender society places upon individuals.⁸ This is often viewed as the goal for transgender and gender nonconforming individuals, regardless of whether they personally desire to "pass".⁹

TRANSGENDER is an umbrella term that is used to describe individuals whose gender identity, gender expression, and/or sex is different from the gender and/or sex they were assigned at birth.¹⁰

TWO-SPIRIT[†] is an umbrella term used in the European Western-Centric context to refer to individuals of indigenous or pan-Native American descent who identify outside of the Western gender binary due to cultural influences, religious practice, or self-identification[‡]. The term is not universally used within indigenous communities.

I. INTRODUCTION

The Trafficking Victims Protection Act (TVPA) and subsequent reauthorizations (TVPRA) defines sex trafficking as the "recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act" by means of "force, fraud, or coercion"[§] unless the person has not yet turned 18.¹¹ For someone who has not reached the age of 18, sex trafficking can be understood as exchanging "any sex act on account of which anything of value is given to or received by any person."¹² Anything of value includes, but is not limited to, money, shelter, food, and/or drugs. This includes survival sex for youth, that is the selling of sex in order to meet one's subsistence needs such as money, food, shelter, or drugs.¹³

[†] This research brief does not address the circumstances of two-spirit youth who are trafficked. While there is a growing body of literature documenting the experiences of Native youth who experience sex trafficking, there is a dearth of research on transgender and gender nonconforming Native persons (Pierce, 2012; Koeplinger, 2008).

[‡] Definition provided via personal communication by Camaxtli Gallegos and Adrian Sibaja.

[§] The crime of human trafficking includes both labor and sex trafficking statutes under the TVPA and TVPRA, but this brief focuses exclusively on sex trafficking.

Much of the available research about the sex trafficking of youth focus on cisgender females, despite the literature indicating cisgender males, transgender females, transgender males, and gender nonconforming (GNC) youth are among those who are trafficked. This research brief outlines the present state of research related to the unique pathways to sex trafficking taken by transgender and GNC youth in the United States. It prioritizes available peer-reviewed literature from the fields of health, medicine, social work, gay and lesbian studies, queer theory, and law, Non-Governmental Organization (NGO) reports and other available research. This research brief also identifies knowledge gaps in current research, population-specific health and safety considerations for victims of sex trafficking, and recommendations for further research and policy considerations.

It is important to note that there is a legal distinction between sex trafficking and the commercial sexual exploitation of children (CSEC). CSEC can include a broader range of sexual crimes against a child, which may include child pornography and/or forced marriage. For the purpose of this research brief, the focus will be narrowed to refer to acts that meet the definition of sex trafficking under the federal Trafficking Victims Protection Act (TVPA) and its subsequent reauthorizations (TVPRA).^{14, 15} State anti-trafficking and CSEC laws also vary and may include “sexually explicit performances” and other forms of CSEC under their sex trafficking laws. Most studies in the social sciences, however, refer to commercial sexual exploitation of children more broadly. When

there is an absence in the literature specific to sex trafficking, research referring to the larger community of commercially sexually exploited youth will be used and clearly distinguished.

II. THE OVER-REPRESENTATION OF TRANSGENDER AND GENDER NONCONFORMING YOUTH IN COMPARISON TO CISGENDER PEERS

Research shows the lesbian, gay, bisexual, transgender, and queer (LGBTQ) population is three times more likely to engage in survival sex, when compared to their cisgender and heterosexual peers.^{16, 17} This statistic demonstrates a disproportionate representation of the LGBTQ community among potential victims¹ of sex trafficking. It is critical to acknowledge there may be significant differences between risk factors that impact marginalized sexual orientations when compared to risk factors impacting marginalized gender identities and gender expressions. The experiences of lesbian, gay, and bisexual youth can be drastically different than those of transgender and GNC youth, which has implications at all stages of response including prevention, identification, and service provision. There is a limited body of research that explicitly differentiates these populations.

Within the LGBTQ community, transgender and GNC youth are often among the most marginalized. Their representation among those who are trafficked for sex is no exception. A New York based study revealed that 16% of LGBTQ youth, Young Men

¹ The phrase “victims of sex trafficking” is used in this brief to refer to youth who meet the criteria outlined by the TVPA.

Who Have Sex with Men (YMSM), and Young Women Who Have Sex with Women (YWSW) who engage in survival sex in New York City identify as transgender male, transgender female, or “transgender other” (androgynous, femme, gender nonconforming, genderless).¹⁸ The literature estimates transgender youth to be approximately 5.6 times as likely as their cisgender peers to engage in survival sex.¹⁹ It further reveals transfeminine individuals to be twice as likely as transmasculine individuals to participate in the sex trade generally.²⁰

Disproportionate representation further exists at the intersection of race and gender identity/gender expression. Transgender and GNC youth of color are at a particularly high risk for sex trafficking,²¹ and homeless transgender youth of color are significantly more likely to engage in survival sex than White transgender, homeless youth.²² A Chicago-based study of 51 transgender female youth of color found 59% of their sample to have a history of exchanging sex for resources.²³

The representation of transgender and GNC youth engaged in survival sex is incommensurate to the demographics of the general population. Despite this knowledge, there is very little research exploring the pathways, experiences, and necessary service provisions unique to transgender and GNC youth.

III. PATHWAYS

A history of homelessness, child welfare system involvement, inpatient program residency, substance use, lack of high school diploma, and history of discrimination are all characteristics found to be risk

factors for the sex trafficking of transgender and GNC youth.²⁴ Each of these characteristics will be explored, in detail, in the following sections.

HOMELESSNESS AND HOUSING DISCRIMINATION

Homelessness is one of the most direct contributors to the sex trafficking of minors.^{25,26} According to a New York City based study, over 23% percent of homeless youth in the city traded sex at some point for money, drugs, shelter, or other necessities.²⁷ In a study of ten cities in the U.S. and Canada, 14% of homeless youth were identified as victims of sex trafficking according to the TVPA.²⁸ LGBTQ homeless youth are seven times as likely as straight and cisgender youth to engage in commercial sex.²⁹ This reality exists outside of New York City. A Chicago-based study similarly reveals a correlation between homelessness, poverty, sexual orientation, gender identity and the sex trafficking of youth.³⁰ Black homeless youth, LGBTQ homeless youth, and HIV positive homeless youth are all more likely to engage in survival sex than their peers.³¹

Among homeless youth, lesbian, gay, bisexual, and transgender youth are generally overrepresented.³² 30% - 43% of youth served by drop-in centers, housing programs, and outreach programs identify as LGBT. 55% of lesbian, gay, bisexual, and queer homeless youth report being forced out by parents or running away from home due to their sexual orientation or gender identity and expression (SOGIE).³³ This number increases to 67% for transgender youth.³⁴ Other major contributors are family issues, family poverty, physical, emotional, and/or sexual abuse, and being forced out/running away, for non-SOGIE related issues.³⁵ Many transgender youth report instability in

housing or homelessness due to familial rejection or dropping out of school in response to harassment.³⁶ Among adults, race is also reported as a significant factor. American Indian/Alaskan Native, Black/African-American, and biracial/multiracial adults report requiring temporary housing arrangements at higher rates than their White peers.³⁷ According to the 2010 Census Special Reports, American Indian/Alaskan Native individuals make up .9% of the population and 2.2% of emergency and transitional housing populations, Black/African-American individuals make up 12.6% of the population and 40.8% of emergency and transitional housing populations, biracial/multiracial adults make up 2.9% of the population and 4.2% of emergency and transitional housing populations, and White individuals make up 72.4% of the population and only 44.8% of emergency and transitional housing populations.³⁸

CHILD WELFARE SYSTEM INVOLVEMENT

LGBTQ youth are overrepresented in the child welfare system^{39,40} where they are more likely to have negative experiences and less likely to achieve permanency than their heterosexual and cisgender peers.⁴¹ The literature also shows a disproportionate percentage of youth who are currently in foster care are victims of sex trafficking and that youth who have aged out of foster care are at a higher risk for homelessness and vulnerability to sex trafficking.^{42,43} Although there is a dearth of research when it comes to the experiences of transgender and GNC youth with a history of child welfare involvement, one can imagine the compounding factors may make them more vulnerable to sex trafficking.

EMPLOYMENT DISCRIMINATION

Workplace discrimination is a key factor that may contribute to one's engagement in survival sex.⁴⁴ Transgender and GNC people are at increased risk for employment discrimination across workplace settings (e.g. for-profit, non-profit, white collar, blue collar, etc). 61% of a Chicago-based sample of transgender female youth of color reported employment difficulties.⁴⁵ Transgender women who may not always "pass" report transgender-related discrimination prevents them from obtaining gainful employment.⁴⁶ Perhaps the negative consequences of failing to "pass," whether by choice or in accordance with society's standards, combined with one's status as a minor can elevate the challenge of finding employment and therefore maintaining meaningful economic security. These disparate statistics are reflective of the lack of legal protections available to transgender and GNC people as well as lesbian, gay, bisexual, and queer people more generally.

The Civil Rights Act of 1964 does not extend protections related to gender expression or sexual orientation in the workplace.⁴⁷ This leaves the protection of transgender workers up to states. Only nineteen states have clear protections for employees when it comes to discrimination based on gender identity and/or sexual orientation.⁴⁸ Another three states have sexual orientation and sex protections only.⁴⁹ Finally, 28 states have protections against sex-based discrimination only.⁵⁰ It is critical to note anti-discrimination laws that prohibit discrimination based on sexual orientation and sex do not necessarily protect transgender and GNC people. One of the first cases to address the term "sex" of the Civil Rights

Act (1964) in a transgender context was *Holloway v. Arthur Andersen & Co.*⁵¹

*Ramona Holloway, a trans woman, was fired from Arthur Andersen & Co. shortly after requesting her employee records to be changed to reflect her most current first name. She subsequently sued the company, claiming she was discriminated against because of her sex under Title VII. Holloway lost her case for reasons cited by the court which conflate sexual orientation and gender identity. The court recognized she was fired based on her gender expression but cited Title VII as a policy intended to protect a "traditional meaning" of sex. The ambiguous word choice, nonetheless communicates the court's belief that the Title VII protections should solely extend to cisgender individuals.*⁵²

Holloway's 1977 case set a precedent for the next several similar cases, all of which failed to protect transgender individuals under Title VII.⁵³ There have, however, been exceptions, over the past twenty years, due to a precedent set by a 1989 Supreme Court case: *Price Waterhouse v. Hopkins* (1989).

*Hopkins, a cisgender woman, was denied a promotion to partnership at her accounting firm. The district court determined the denial was made, in part, based on stereotypes of how a woman should act. For example, one partner suggested Hopkins would have made a better candidate had she acted more femininely. Ultimately, she won the case, which took sex discrimination to include not only anatomy, but also expression: physical appearance, behavior, language, and other characteristics.*⁵⁴

The *Price Waterhouse v. Hopkins* ruling debunked the definition of sex determined by *Holloway*. Despite this, it took another several cases for a transgender individual to win by citing Title VII. The first to do so, was Crystal Schwenk in *Schwenk v. Hartford* (2000) following the precedent set by *Hopkins*.⁵⁵ Ultimately, employment protections for transgender and GNC individuals continue to be an uphill battle, and a critical conversation when discussing the population's high unemployment rates, homelessness rates, and engagement in survival sex.

DISCRIMINATION AT SCHOOL

Title IX** makes sex discrimination illegal in the majority of schools.⁵⁶ In the recent past, Title IX has extended to sex stereotypes and gender identity.⁵⁷ These protections have entitled transgender and GNC students to have their name and pronouns respected, be free from harassment, and use the restrooms and locker rooms that match their gender identity among other rights.⁵⁸ Despite these protections, 75% of transgender students report feeling unsafe at school due to their gender expression, 70% state they avoid bathrooms because they feel unsafe, and 60% are required to use a bathroom inconsistent with their gender identity.⁵⁹

Among transgender victims of sex trafficking who expressed their true gender while attending grades K-12, over three-quarters reported harassment, over half reported physical assault, and over half reportedly left school due to harassment compared to 10.8%

**In 2017, the Department of Education and the Department of Justice retracted the explicit protection of gender identity under Title IX. This does not leave transgender and gender nonconforming youth without protections under Title IX, but the Department of Education may be less likely to investigate. The following resources explain how one might file an anonymous complaint with the Department of Education: National Center for Transgender Equality. (2017). "What are my rights at school?" Retrieved from <https://www.transequality.org/know-your-rights/schools>.

of those who were not victims of trafficking.⁶⁰ In accordance with the high rates of discrimination reported by transgender individuals, connections may be made between such discrimination experiences and the fact that the majority of transgender individuals have less than a high school diploma.⁶¹

In recent years, the experiences of transgender and GNC youth in schools has attracted increased attention. This was particularly true regarding bathroom access following two letters from the Departments of Justice and Education. In May 2016, the Department of Justice and Department of Education released a letter of guidance to U.S. schools outlining the ways in which they are to support transgender students. The letter stated gender identity was protected under Title IX.⁶² In February, 2017 under the Trump Administration, the Department of Justice and Department of Education withdrew the 2016 letter. The most recent letter retracted the original statement, and no longer maintained students have the right to access school restrooms and locker rooms aligned with their gender identity.⁶³ Although there continue to be protections in place for transgender and GNC youth at some schools and in some states, there continue to be significant barriers to supportive and affirming educational environments.

MENTAL HEALTH AND SUBSTANCE USE

Homelessness is associated with an increased rate of substance abuse,⁶⁴ a reality correlated with additional challenges including mental illness and traumatic experiences including domestic violence, physical assault, and sexual assault.^{65,66} Over 90% of a

sample of transgender female youth reported using substances including alcohol (88%), marijuana (63%), ecstasy (32%), cocaine (30%), and methamphetamine (30%) at some point in their lives (Wilson et al., 2009). The addictive nature of many of these drugs may contribute to a minor's engagement in survival sex in order to obtain the substance. Further research must be conducted to identify the frequency by which transgender and GNC youth trade sex for drugs and/or alcohol.

CONDITIONS OF COMMERCIAL SEXUAL EXPLOITATION OF TRANSGENDER YOUTH

Research shows transgender females are significantly less likely to work with a pimp or "manager" (98% reported rarely or never working with a pimp) than cisgender females and cisgender males.⁶⁷ Furthermore, transgender females are significantly more likely to recruit customers on the streets or through the internet than their cisgender female peers.⁶⁸ Much of the existing literature and policies around trafficking of youth revolve around a narrative of a third party exploiter recruiting, grooming, and exploiting youth for their own commercial gain. Knowing transgender females are more likely to engage in survival sex without a third party exploiter has significant implications for youth trafficked for sex, including, but not limited to, identification, social, health, and legal services, education, and criminal justice responses.

IV. EQUITY IN SERVICE PROVISIONS FOR TRANSGENDER AND GENDER NONCONFORMING YOUTH

Not only is it important to identify the unique pathways transgender and GNC youth follow related to sex trafficking, but also to identify the unique needs and services victims/survivors may require of service providers. This section attempts to tackle the following question: What must be done for transgender and GNC youth to receive equitable treatment and services by service providers and law enforcement?

First, the term *equitable* must be discussed.

A common misconception among service providers is that equity and equality are congruent terms. Equality aspires to *treat every person the same* whereas equity aspires to *give everyone what they need*. When it comes to service provision for the transgender and GNC community, such services and programs must be affirming and population-specific. In other words, such services may be different than those typically provided for cisgender youth in similar circumstances. Consider the following example:

"I walked into work at a residential facility one morning to find an unfamiliar resident being discharged against her wishes. Sarah^{††}, a 17 year old transgender girl, had entered the program the night before. There was a mandatory outing that morning, and she refused to leave the residential facility without a new weave. At this particular facility, participation in all facility activities is mandatory. Sarah, in her strict demand, for what felt like an elective cosmetic item, was viewed as non-compliant."

At the residential facility referred to in the vignette, cosmetic items were disbursed on a regular basis. Weaves, extensions, and other hair and makeup products were available within a few days after initial intake. Cosmetics were viewed as secondary to the health and safety needs outlined in the services and needs plan. For the majority of cisgender youth, this hierarchy of necessities makes sense and may ultimately meet their needs. For many transgender youth, this is not the case, as cosmetics may help to ensure their physical safety and positively impact mental health. The following sections will explore the unique physical health and mental health considerations that those who serve transgender and GNC youth must consider.

PHYSICAL HEALTH AND MEDICAL PROCEDURES

Transgender and GNC youth face unique medical risks that require specialized services. The transgender youth population has higher rates of HIV/AIDS and other sexually transmitted diseases (STDs).⁶⁹ 6% of transgender female youth without a history of engagement in commercial sex, and 23% of transgender female youth with a history of engagement in commercial sex, reported an HIV positive status.⁷⁰ Further research must be conducted to determine the rates of HIV/AIDS and other STDs among youth with gender non-conforming identities.

For many transgender youth, maintaining medical health may include gender affirmation surgery, hormone therapy, electrolysis, and other cosmetic

^{††}The youth's name has been changed to protect her identity..

procedures. Not all transgender and GNC people want or need such procedures, but the high costs and inaccessibility can pose further barriers for some transgender and GNC youth. For example, a youth might choose to access and administer hormones without medical supervision.⁷¹

The real, or perceived, inaccessibility of gender affirming care, in this case, could lead to severe health risks associated with self-administered, or do-it-yourself (DIY), hormones.^{72,73}

MENTAL HEALTH AND GENDER EXPRESSION

When transgender youth were interviewed in one study, they strongly expressed a lack of resources available to meet their mental health needs.⁷⁴ To ensure these resources, a specialized understanding of transgender GNC youth populations may be required. For example, for many transgender females, an emphasis can be put on “passing,” sometimes to avoid gender identity-based violence. This can mean something as simple as wearing the right clothes, makeup, hair, or in Sarah’s case, a weave. For some, it can require surgical, medical, and/or cosmetic procedures. Passing is both determined by the transgender/GNC individual as well as the expectations placed on the transgender/GNC individuals by society. In any case, access to these basic cosmetics and procedures should be considered a mental health and/or violence prevention measure for some transgender and GNC community members.⁷⁵

Appropriate and affirming mental health services are especially critical for transgender and GNC youth. Overall, this population suffers from mental health

issues disproportionately due to stigma, oppression, and discrimination among other factors.^{76,77} One clear indication of the community’s need for improved services and accommodations is the rate of death by suicide. Results from the National Transgender Discrimination Survey found that 60.4% of those interviewed in the sex trade self-reported making a suicide attempt.⁷⁸ The number is quite high when compared to the suicide attempt rate of transgender individuals who were not involved in survival sex, which was 38.2%.⁷⁹ There are programs which prioritize the mental health of LGBTQ youth given their elevated risk for suicide ideation, death by suicide, and other obstacles related to mental health.^{80,81} Any organizations providing services to transgender and GNC youth who have experienced sex trafficking must similarly prioritize this aspect of mental health.

VIOLENCE

LGBT homeless youth face higher rates of physical and sexual victimization than their cisgender contemporaries, and transgender youth are particularly vulnerable to violent victimization.⁸² Transgender youth report experiencing all forms of dating violence at higher rates than their cisgender male and cisgender female peers,⁸³ they experience high levels of gender-based sexual and physical victimization at shelters,⁸⁴ and are at an elevated risk for experiencing anti-transgender hate crimes.^{85,86,87}

Transgender females, particularly transgender women of color, are faced with an elevated risk of dying by murder. In 2016, 23 transgender individuals were killed by anti-trans violence in the United States alone.⁸⁸ In 2017, the number grew to 26, a statistic

which includes 17 year-old minors Ally Lee Steinfeld and Ava Le'Ray Barrin, as well as 18 year-old, Jaquarius Holland.⁸⁹ Some of the murders demonstrated a clear anti-transgender bias, while others revealed the increased risk factors faced by transgender females including a history of unemployment, difficulty securing housing, and healthcare discrimination.⁹⁰ Transgender youth, particularly homeless transgender youth and transgender youth of color, are among the most marginalized and targeted populations.

AN IMPORTANT NOTE FOR SERVICE PROVIDERS

Of the literature that includes youth responses to their own experiences being trafficked for sex and engaging in survival sex, transgender youth emphasize they may not explicitly want to, or feel they can stop their sex work practices.⁹¹ Moreover, independence is a critical value for many youth.⁹² To effectively engage these youth, service providers must offer an empowering and affirming environment which is free from personal biases and judgement.⁹³

V. CONCLUSION

There is a growing body of research from a variety of disciplines highlighting the overrepresentation of LGBTQ identified individuals among sex trafficked and commercially sexually exploited (CSE) youth.^{94, 95, 96} A much smaller subset of this research specifically focuses on transgender female youth.^{97, 98} Transgender male, GNC, and intersex youth are largely excluded from the available literature. The issues and obstacles faced by the transgender and GNC communities

require specialized services that are not necessarily applicable to the LGBTQ community as a whole due to population-specific healthcare, mental health, and safety factors in addition to employment discrimination, housing discrimination, and familial rejection. By separating transgender and GNC youth from the larger LGBTQ community in studies addressing youth sex trafficking, researchers will be better prepared to identify appropriate methods for prevention, identification, and service provision.

It is some of the most marginalized populations that are disproportionately represented among victims of sex trafficking. This reality reveals the systemic issues at play and consequently puts a mandatory responsibility on the public to take preventative measures. Protecting gender identity under anti-discrimination laws, providing accessible and available housing opportunities, and making gender affirming health care and service provision the norm can be considered minimum protections for U.S. transgender and GNC youth.

RECOMMENDATIONS FOR FURTHER RESEARCH AND ACTION

The recommendations listed below are intended to focus on research that will: (1) ensure the protection of transgender and GNC youth who are potential victims of sex trafficking and CSE by gaining a more thorough understanding of their unique experiences and needs; and (2) work toward preventing transgender and GNC youth from being trafficked in the first place.

Further research should be conducted which:

1. Separates transgender and GNC youth from the larger LGBTQ community
2. Includes intersex individuals in population samples
3. Identifies transgender youth who have been trafficked for labor according to the TVPA (2000)
4. Measures the frequency with which transgender and GNC youth exchange sex for substances, housing, money and identifies the pathways to each
5. Locates differential experiences faced by transgender youth who work with pimps or managers vs. transgender youth who do not
6. Identifies familial interventions for transgender youth facing discrimination at home and measures success through longitudinal studies
7. Suggests new ways to locate transgender youth who are potential victims of sex trafficking and further documents occasions when transgender and GNC youth are engaged as victim witnesses against a pimp or manager
8. Specifies best practices for resource provisions for transgender and GNC youth
9. Identifies the prevalence of two-spirit youth and other transgender and GNC Native American youth who are trafficked in comparison to cisgender and heterosexual Native American youth as well as non-Native youth.

AUTHOR BIO

Meaghan Tomasiewicz is the Children's Rights Graduate Scholar at the Center for the Human Rights of Children (2017-18) and is concurrently pursuing a Masters in Social Work and Masters of Arts in Women's Studies and Gender Studies at Loyola University Chicago. They became invested in this field after working directly with youth impacted by commercial sexual exploitation. Meaghan continues to co-facilitate workshops for nonprofit organizations on the topic of including and affirming people with transgender and gender nonconforming identities. mtomasiewicz@luc.edu

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