

Sexually Exploited Boys:

What We Know and What We Don't

A Systematic Review



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Executive Summary

Research and services focused on sexually exploited children and adolescents often target girls and leave out boys. However, research shows that boys often report similar rates of sexual exploitation as girls (10, 19, 27). This suggests that boys may experience more sexual exploitation than is commonly realized, while also facing greater barriers to what few services may exist for them. To better understand the sexual exploitation of boys, we did a broad literature search to identify and evaluate research on this topic. We looked at articles that were on topic, in English, written between 1990-2015, and published in academic journals.

In our initial search, we found over 11,000 articles. Ultimately, we narrowed this down to 33 articles that met our criteria. This included studies from Sweden, the United States, South Africa, Brazil, Canada and the United Kingdom amongst other places. Children and adolescents were sampled from a wide variety of contexts including schools and small non-governmental organizations. Prevalence rates of boys being sexually

exploited ranged from 1.7% to 4.8% in school-based studies (5, 7, 29) and up to 16.1% in studies of street-involved and homeless youth (20, 21). Boys were sexually exploited in a range of locations including drainage tunnels, hotels and over the Internet. Sex was traded for things like money, food, gifts, shelter and drugs. Sexually exploited boys reported a range of unmet needs. However, little research exists on the specific health care and social services needed and accessed by this population. More research and additional services are needed to better understand and support the needs of sexually exploited boys.

Introduction

Sexual exploitation is a harmful and widespread phenomenon that affects children and adolescents internationally. This form of exploitation carries serious physical, mental health and social consequences. However, it remains a far too often forgotten about form of child abuse especially amongst boys. Although we know through research that both boys and girls report similar rates of sexual exploitation, boys continue to be overlooked.

In this review, we defined ‘sexual exploitation’ as sexual abuse through trading or exchanging sex or sexual activities (i.e. stripping, exotic dancing, pornographic videoing) for drugs, food, shelter, protection, other basics needs, and/or for money. We used the term ‘boys’ to refer to male children and adolescents. We defined ‘children and adolescents’ as any person under the age of 18 years old. This definition is aligned with the United Nations Convention on the Rights of the Child, which is an influential international treaty. This treaty recognizes the basic rights of all children and was adopted by the United Nations General Assembly in 1989. It is important to note, however, that the age of majority or age at which a person legally transitions from ‘child’ to ‘adult’ varies by location. For example, in British Columbia, Canada, the age of majority is defined as 19 years old. We also want to acknowledge that sexual exploitation affects older adolescent and young adult populations as well, although addressing these populations was beyond the scope of this review

The purpose of this systematic review was to answer the question, “What is the state of the research on sexually exploited boys internationally?” We also addressed three additional questions:

- What factors, if any, predict sexual exploitation for boys?
- In what context are boys sexually exploited (e.g., who are the boys and the exploiters and where is the exploitation taking place)?
- What physical, mental, and social outcomes are associated with the sexual exploitation of boys? And, what services can address these needs?

Methods

In April of 2015 we searched for articles in 5 academic databases using search terms that fell into one of three categories as detailed below:

SEXUAL EXPLOITATION	AGE	GENDER
Child abuse (sexual)	Child	Male
Prostitution	Adolescent	Boy
Human/sex trafficking	Minors	
Sex Work	Young Adult	
Sexual exploitation	Young person	
Trading/selling sex	Teen	
Survival sex	Youth	
Transactional sex		
Sex industry		

From the initial 11,829 articles that we found, we removed duplicates and articles that did not meet our criteria (e.g. off-topic based on the title/abstract; published in books/conference proceedings; retrospective studies; not written in English; not from peer reviewed journals; published before 1990). We then read the methods sections of each of the remaining 1,924 articles. A total of 217 articles were assessed for eligibility at the 'full text screening' stage, to arrive at our final selection of 33 articles. See Figure 1 to the right for more details.

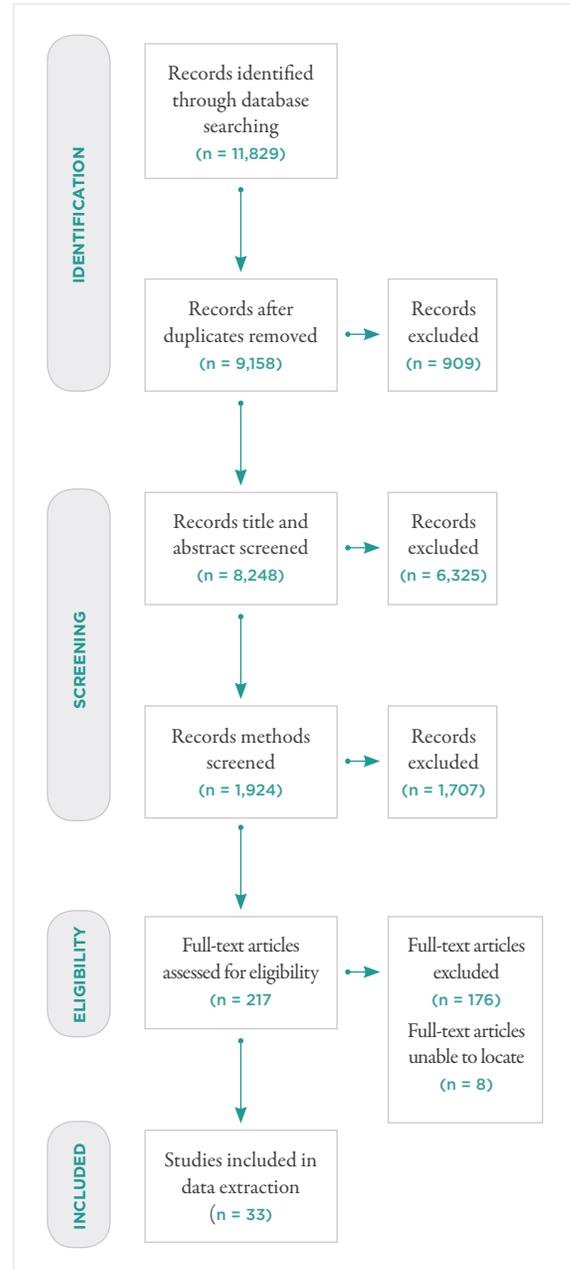


Figure 1. Prisma diagram

About the Studies

CATEGORIES OF STUDIES

Most of the studies were descriptive, observational, or exploratory. While three studies employed mixed methods and one was qualitative, the majority were quantitative surveys conducted in schools or through service-based organizations.

SAMPLING STRATEGIES

A wide variety of sampling strategies were used across the 33 studies. We have categorized the sampling strategies based on where the participants were recruited. It should be noted that some of the studies recruited participants in partnership with services that worked exclusively with children and adolescents living in poverty (e.g. services that offered shelter, health care, social and legal support). Meanwhile, the school-based studies were largely set in higher income countries like the United States, Sweden and Canada,

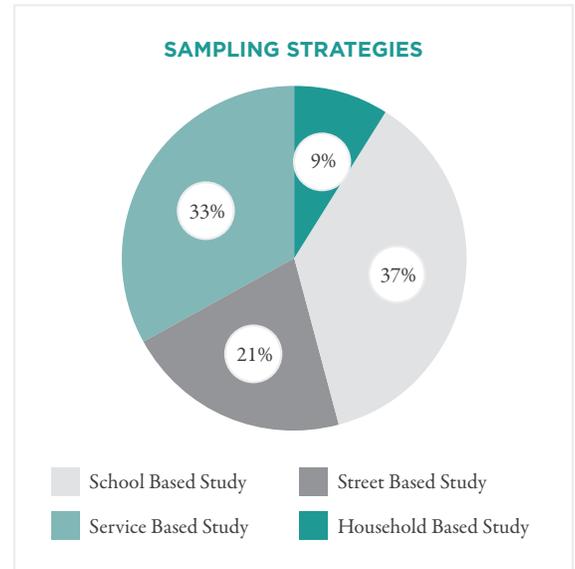


Figure 2. Sampling strategies

GEOGRAPHICAL LOCATIONS

The table below shows the geographical locations where studies were conducted. Sweden and the United States of America hosted the greatest number of studies.

COUNTRIES WHERE STUDIES WERE CONDUCTED	NUMBER OF STUDIES CONDUCTED PER COUNTRY
Sweden	5
United States of America	5
South Africa	4
Brazil	3
Canada	2
United Kingdom	2
China, Denmark, Egypt, Ethiopia, Kenya, Liberia, Norway, Pakistan, Russia, Sri Lanka, Sudan, Thailand	1

Table 1. Geographic locations where research occurred

WHEN ARTICLES WERE PUBLISHED

Researchers are increasingly publishing on the topic of sexual exploitation in general. Figure 3 shows the number of studies that we identified, grouped by their year of publication. Of the studies included in our review, at least one was published each year since 2005 with the most studies having been published in 2012.

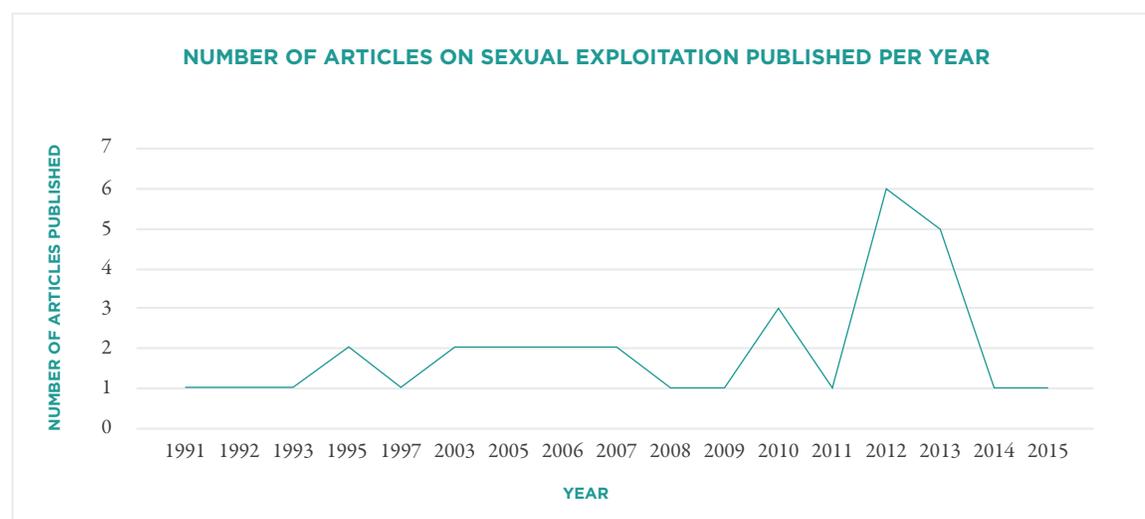


Figure 3. Number of articles on sexual exploitation published per year

Findings

PREVALENCE

Two Swedish studies and one American study reported the prevalence of boys who were sexually exploited within high school populations ranged from 1.7% to 4.8% (5, 7, 29). Not surprisingly, studies of boys sampled in street communities reported higher rates of sexual exploitation. A Brazilian study reported that 16.1% of boys on the street reported being sexually exploited (20, 21). Also, while school-based surveys identified equal or nearly equal rates of sexual exploitation amongst boys and girls, other studies reported vastly different findings (5, 7, 20, 21, 29).

CONTEXT

Two articles discussed the physical locations where boys were sexually exploited. One study reported boys living on the streets in Sudan were sexually exploited in drainage tunnels (14). Another study reported that boys living in impoverished communities in Thailand were sexually exploited in hotels or family homes (17). In addition to physical locations, one study analyzing law enforcement records stated the Internet was used by boys and their exploiters to arrange exchanges (33).

The majority of boys who were sexually exploited in a Swedish study stated they had traded sex between two to five times (7), while most boys in an American study had traded sex only once (5). A street-based study looking at American young offenders stated that they had traded sex between one and 200 times (11). Boys most frequently traded sex for money (18, 23, 27) but drugs (11, 14, 18, 23, 30) and gifts, material goods, food, or shelter were also used as compensation for sexual ser-

vices (17, 20, 22, 27, 30, 31). Compensation sometimes varied depending on the buyer. For example, in Sudan, sexually exploited boys reported they were more likely to receive money from adults and drugs from other boys on the street. In Thailand, boys living in poverty were more often compensated with in-kind gifts, such as rebuilding the family house (17).

CHARACTERISTICS OF SEXUALLY EXPLOITED BOYS

Family life impacted boys' likelihood of being sexually exploited. Two Swedish studies found that boys with mothers who were unemployed were more likely to be sexually exploited (7, 27), while a Norwegian study found that boys who had experienced a parental break-up, or who had exposure to alcohol and less exposure to books were more likely to have been sexually exploited (19). On the other hand, a South African study found that boys whose primary caregiver was female were less likely to be sexually exploited (3). There were conflicting reports on whether being an orphan increased likelihood of being sexually exploited. One study from western Kenya found no relationship between being an orphan and being sexually exploited (12). Whereas a South African study of black children and adolescents reported boys who were orphans were slightly more likely to have been sexually exploited than their non-orphan peers (32).

In addition to family life, some studies reported other characteristics of boys who were sexually exploited. A South African study reported that older boys were more

likely to be sexually exploited (3). A Swedish study reported that boys who identified as homosexual or bisexual were more likely to report being sexually exploited (27). The same study also found that second-generation newcomers and boys born outside of the country were more likely to have been sexually exploited (27). Finally, in a Canadian study, boys who were sexually exploited reported higher impulsivity (10).

RISK EXPOSURES

The very nature of sexual exploitation exposes boys to a range of health and other risks. For example, a South African study found that instead of paying for the agreed upon sexual activity, some male exploiters ‘just hit the boys’ and left without paying (22). A later report from the same study indicated the most vulnerable boys (those living on the streets) “probably have the least bargaining power of all in sexual encounters” (30). The authors reported that none of the 141 boys aged 11 to 18 reported regular condom use (30). Rather, these boys actively rejected the idea of using condoms. As one boy said, “If you wear one you appear to have AIDS, because there is no need to use a condom if you behave correctly” (30). Such findings seem to suggest that boys in these contexts lack both the ‘bargaining power’ and knowledge needed to keep themselves safer. This being said, it is important to recognize that all forms of sexual exploitation are inherently abuse and therefore, expectations should not be placed on victims to ‘bargain for’ their own right to safety.

School-based population surveys in Norway (19) and Sweden (27) identified that sexually exploited boys reported being younger at the time of their first intercourse experience as compared to non-sexually exploited boys. They also reported increased rates of violent victimization, more sexual partners, and more exposure

to particularly violent and/or illegal pornography (e.g., depicting bestiality and child abuse). It is unknown whether these experiences occurred before or after the sexually exploitative experiences.

PERPETUATING FACTORS

Very few of the studies identified factors that perpetuate sexual exploitation; that is, what keeps boys trapped in sexually exploitative contexts. Some studies reported very negative attitudes amongst adults towards boys who are sexually exploited. A police officer in an Ethiopian study said, “They (boys) don’t want to stop this life. I mean, they would like to continue having sex with men as the money earned from men-to-men sex enables them to mitigate their day-to-day problems. The other reason is that they become hooked by a homosexual lifestyle” (31). The authors of this study also suggested that a lack of parental awareness about sexual exploitation of boys as compared to girls leaves boys particularly vulnerable (31). A Thai study found sexually exploited boys ‘took pride in their work as prostitutes’ as it brought money into their families (17). This same study found that the boys were often the second or third-generation in their family to participate in the survival sex trade (17). Notably, all of these interpretations are problematic as they present the exploitation as a ‘choice’ rather than a form of victimization.

HEALTH COMPROMISING BEHAVIOURS

Research has shown sexually exploited boys report engaging in a range of health compromising behaviors. A Norwegian school-based survey found that boys who were sexually exploited reported more behaviour problems and alcohol and drug abuse than boys who had not been sexually exploited (19). In this study, 32.8% of boys who were sexually exploited had used heroin, com-

pared to only 1.4% of boys who had not been sexually exploited (19). Another school-based survey in Sweden reported similar findings (27). Similarly, a study of Thai boys and girls who had sold sex found that up to 80% had sniffed glue regularly (17).

A British study looked at sexually exploited children and adolescents ages 18 years old and under who had also been charged with committing a criminal offence (4). This study found that boys committed more ‘offences’ than girls (4). Over half of the sexually exploited boys were considered ‘prolific offenders’ (10+ offences on record) with the most ‘prolific’ offender reporting 53 ‘offences’. This study also noted that less than a third (27.5%) of sexually exploited boys had been referred to a child sexual exploitation specialist at the time of their first ‘offence’ and only one fifth (20.7%) before that time (4). The researchers suggested this reflects that boys were too often seen as offenders first and victims second (if their victimization was seen at all.) This study did not, however, clearly establish a timeline of when the boys’ exploitation began versus when their criminal behaviours began. As such, it is challenging based on these findings alone to determine which came first (exploitation or involvement with the law). Regardless, these findings draw the reader’s attention to how health care and social service providers may incorrectly focus on the punishment of youth rather than the reason behind them being charged with criminal offences.

PHYSICAL HEALTH ASSOCIATIONS

Very few of the studies in this review addressed physical health and sexual exploitation looking specifically at boys. As such, there are very limited findings to report in this area. One school-based study found it was more common for sexually exploited boys to be told they had

a Sexually Transmitted Infection (STI) as compared to their non-sexually exploited peers (5).

MENTAL HEALTH ASSOCIATIONS

A Swedish high school-based survey found no significant difference in the mental health scores between boys who were sexually exploited and those who were not (27). However, the same study reported that boys who had been sexually exploited reported more self-perceived mental health problems as compared to boys who were not sexually exploited (27). For example, over twice as many boys who had been sexually exploited reported feeling like ‘everything was a struggle’, feeling ‘tied up’ or tense and feeling helplessness towards the future (27). Two other school-based surveys, one from rural Canada and one from urban Norway, found that sexually exploited boys reported higher rates of hopelessness (10), depression/anxiety (19), and loneliness (19) as compared to boys who were not sexually exploited. Again, these studies were not able to say whether these differences preceded or followed the exploitation.

SOCIAL SUPPORTS AND ASSETS

Very few of the studies in this review addressed what social supports and assets existed (or were lacking) amongst sexually exploited boys. One school-based study in Sweden found sexually exploited boys reported poorer parent-child relationships compared to boys who were not sexually exploited (7). Similarly, significantly poorer family connectedness was found amongst Canadian boys who were sexually exploited (10). In contrast, no significant relationships between sexual exploitation and friend connectedness, school connectedness, or social involvement were found (10).

SERVICES ACCESSED

Only one Swedish school-based study looked at help-seeking behaviours among children and adolescents comparing those who had been sexually exploited with those who had not. They found that more sexually exploited boys than non-sexually exploited boys reported seeking help for variety of issues including: problems with parents; questions about sexual identification; exposure to emotional, physical, and sexual abuse; exposing others to sexual abuse; mental health concerns; internet related problems; and other issues.

Final Words

SUMMARY OF FINDINGS

The findings in this review covered a range of topics. The quality and depth of these findings varied significantly from one study to the next and very few of the results, if any, could be generalized to other groups. For example, findings from studies that included boys living in poverty in Thailand or South Africa could not be compared to other groups such as those living in Canada and vice versa. It was often challenging to summarize the findings in a succinct manner given the variability in study design, location and context. For example, the prevalence rates reported ranged from 1.7% to 4.8% of boys reporting sexual exploitation in some school-based studies (5, 7, 29) to other studies of street-involved and homeless children and adolescents reporting prevalence rates over 16.1% (20, 21). Studies reported that sexual exploitation occurs in places as varied as storm drainage tunnels (14) to hotels (12) to the Internet (33). Sex was exchanged for different types of compensation including money, drugs, gifts, food, shelter and other items. Regardless of the context of sexual exploitation, the boys in the studies reported being exposed to a range of risks and dangers, both while being exploited and at other times in their lives. Finally, very few of the studies identified which services, if any, boys accessed to address their physical, mental and social health needs.

LIMITATIONS AND KNOWLEDGE GAPS

We remain unsure why certain groups of boys were more likely to have been sexually exploited and caution readers against making generalizations around the links between populations and sexual exploitations. None of the literature that we reviewed provided reasons why certain groups of boys were more likely to be sexually exploited than others. To maintain the project's feasibility, we only searched peer-reviewed material, and may have therefore missed important references. We acknowledge the value of the non-peer reviewed grey literature, including publications from governmental services, non-governmental organizations, and professional bodies. Exclusively English language articles were reviewed, further limiting the articles that we could review.

RECOMMENDATIONS

- Research is needed to develop a more thorough understanding of the pathways to sexual exploitation and the contexts within which it occurs (e.g. what leads to sexual exploitation? What does sexual exploitation ‘look like’ when it occurs?).
- More research is needed to identify the physical, mental and social service, and support needs of sexually exploited boys.
- More health care and social services are needed that specifically target sexually exploited boys.
- Existing services for sexually exploited children and adolescents ought to reflect on how they do (or do not) engage boys and girls considering emerging research that boys and girls report equal rates of sexual exploitation.
- Boys should be able to access trauma-informed care to increase trust with the health care system.
- Researchers must pursue relationships with front-line health care and social service providers and vice versa to ensure existing documentation of programs for sexually exploited boys can be translated from community friendly reports, organizations’ websites, etc. into peer-reviewed academic literature.

Conclusion

Research on the sexual exploitation of boys has been increasing over the past several years. However, much remains unknown when it comes to sexually exploited boys' health and their circumstances. To adequately meet the needs of this population, building bridges and fostering communication between front-line health care and social service providers, policy makers, researchers, law enforcement and legal professionals is essential. Through such interdisciplinary partnerships, more can be understood about the sexual exploitation of boys, and how to design interventions for prevention as well

as targeted support services. Additionally, from a public health perspective, more can be done to bring awareness to this issue and to shine a light on those programs and services that do currently exist to support this population. While great strides have been made towards preventing sexual exploitation in general and providing support to children and adolescents being impacted, more can be done, and this work must include a focus on sexually exploited boys.

References

1. Atwood, K. A., Kennedy, S. B., Shamblen, S., Taylor, C. H., Quaqua, M., Bee, E. M., Gobeh, M. E., Woods, D. V., & Dennis, B. (2012). Reducing sexual risk taking behaviors among adolescents who engage in transactional sex in post-conflict Liberia. *Vulnerable Children and Youth Studies*, 7(1), 55-65. doi: 10.1080/17450128.2011.647773
2. Chan, K. L., Yan, E., Brownridge, D. A., & Ip, P. (2013). Associating child sexual abuse with child victimization in China. *The Journal of Pediatrics*, 162(5), 1028-1034. doi:10.1016/j.jpeds.2012.10.054
3. Cluver, L., Boyes, M., Orkin, M., Pantelic, M., Molwena, T., & Sherr, L. (2013). Child-focused state cash transfers and adolescent risk of HIV infection in South Africa: A propensity-score-matched case-control study. *Lancet Global Health*, 1(6), e362-e370. doi:10.1016/S2214-109X(13)70115-3
4. Cockbain, E., & Brayley, H. (2012). Child sexual exploitation and youth offending: A research note. *European Journal of Criminology*, 9(6), 689-700. doi:10.1177/1477370812453401
5. Edwards, J. M., Iritani, B. J., & Hallfors, D. D. (2006). Prevalence and correlates of exchanging sex for drugs or money among adolescents in the United States. *Sexually Transmitted Infections*, 82(5), 354-358. doi: 10.1136/sti.2006.02069
6. Farmer, E., & Pollock, S. (2003). Managing sexually abused and/or abusing children in substitute care. *Child & Family Social Work*, 8(2), 101-112. doi:10.1046/j.1365-2206.2003.00271.x
7. Fredlund, C., Svensson, F., Svedin, C. G., Priebe, G., & Wadsby, M. (2013). Adolescents' lifetime experience of selling sex: development over five years. *Journal of Child Sexual Abuse*, 22(3), 312-325. doi: 10.1080/10538712.2013.743950
8. Helweg-Larsen, K., Schütt, N., & Larsen, H. B. (2012). Predictors and protective factors for adolescent internet victimization: Results from a 2008 nationwide Danish youth survey. *Acta Paediatrica*, 101(5), 533-539. doi:10.1111/j.1651-2227.2011.02587.x
9. Hohendorff, J. V., Costa, L. S., Habigzang, L. F., & Koller, S. H. (2014). Documentary analysis of cases of sexual violence against boys reported in Porto Alegre. *Paidéia (Ribeirão Preto)*, 24(58), 187-196. doi:10.1590/1982-43272458201406

10. Homma, Y., Nicholson, D., & Saewyc, E. M. (2012). Profile of high school students in rural Canada who exchange sex for substances. *The Canadian Journal of Human Sexuality*, 21(1), 29-40.
11. Inciardi, J. A., Pottieger, A. E., Forney, M. A., Chitwood, D. D., & McBride, D. C. (1991). Prostitution, IV drug use, and sex-for-crack exchanges among serious delinquents: Risks for HIV infection. *Criminology*, 29(2), 221.
12. Juma, M., Alaii, J., Bartholomew, L. K., Askew, I., & Van den Borne, B. (2013). Risky sexual behavior among orphan and non-orphan adolescents in Nyanza Province, western Kenya. *AIDS and Behavior*, 17(3), 951-960. doi:10.1007/s10461-012-0336-5
13. Kastbom, Å. A., Sydsjö, G., Bladh, M., Priebe, G., & Svedin, CG. (2015). Sexual debut before the age of 14 leads to poorer psychosocial health and risky behaviour in later life. *Acta Paediatrica*, 104(1), 91-100. doi:10.1111/apa.12803
14. Kudrati, M., Plummer, M. L., & Yousif, N. D. H. (2008). Children of the sug: A study of the daily lives of street children in Khartoum, Sudan, with intervention recommendations. *Child Abuse & Neglect*, 32(4), 439-448. doi:10.1016/j.chiabu.2007.07.009
15. Lavoie, F., Thibodeau, C., Gagné, M., & Hébert, M. (2010). Buying and selling sex in Québec adolescents: A study of risk and protective factors. *Archives of Sexual Behavior*, 39(5), 1147-1160. doi:10.1007/s10508-010-9605-4
16. Mitchell, K. J., Finkelhor, D., & Wolak, J. (2010). Conceptualizing juvenile prostitution as child maltreatment: findings from the National Juvenile Prostitution Study. *Child Maltreatment*, 15(1), 18-36. doi: 10.1177/1077559509349443
17. Montgomery, H. (2007). Working with child prostitutes in Thailand: Problems of practice and interpretation. *Childhood*, 14(4), 415-430. doi:10.1177/0907568207081849
18. Nada, K. H., & Suliman, E. D. A. (2010). Violence, abuse, alcohol and drug use, and sexual behaviors in street children of greater Cairo and Alexandria, Egypt. *AIDS (London, England)*, 24(Suppl 2), S39-S44. doi:10.1097/01.aids.0000386732.02425.d1
19. Pedersen, W., & Hegna, K. (2003). Children and adolescents who sell sex: A community study. *Social Science & Medicine*, 56(1), 135-147. doi: 10.1016/S0277-9536(02)00015-1

20. Raffaelli, M., Campos, R., Merritt, A. P., Siqueira, E., Antunes, C. M., Parker, R., Greco, M., Greco, D., Halsey, N., & the Street Youth Study Group. (1993). Sexual practices and attitudes of street youth in Belo Horizonte, Brazil. *Social Science & Medicine*, 37(5), 661-670. doi:10.1016/0277-9536(93)90105-D
21. Raffaelli, M., Siqueira, E., Payne-Merritt, A., Campos, R., Ude, W., Greco, M., Greco, D., Ruff, A., Halsey, N., & the Street Youth Study Group. (1995). HIV-related knowledge and risk behaviors of street youth in Belo Horizonte, Brazil. *AIDS Education and Prevention*, 7(4), 287-297.
22. Richter, L. M., & Swart-Kruger, J. (1995). AIDS-risk among street children and youth: Implications for intervention. *South African Journal of Psychology*, 25(1), 31-38.
23. Rotheram-Borus, M. J., Meyer-Bahlburge, H. F. L., Koopman, C., Rosario, M., Exner, T. M., Henderson, R., Matthieu, M., & Gruen, R. S. (1992). Lifetime sexual behaviors among runaway males and females. *The Journal of Sex Research*, 29(1), 15-29. doi: 10.1080/00224499209551631
24. Senaratna, B. C. V., & Wijewardana, B. V. N. (2012). Risk behaviour of street children in Colombo. *The Ceylon Medical Journal*, 57(3), 106-111. doi: 10.4038/cmj.v57i3.4047
25. Shakarishvili, A., Dubovskaya, L. K., Zohrabyan, L. S., St Lawrence, J. S., Aral, S. O., Dugasheva, L. G., Okan, S. A., Jewis, J. S., Parker, K. A., Ryan, C. A., & the LIBRA Project Investigation Team. (2005). Sex work, drug use, HIV infection, and spread of sexually transmitted infections in Moscow, Russian Federation. *The Lancet*, 366(9479), 57-60. doi:10.1016/S0140-6736(05)66828-6
26. Sherman, S. S., Plitt, S., Hassan, S. U., Cheng, Y., & Zafar, S. T. (2005). Drug use, street survival, and risk behaviors among street children in Lahore, Pakistan. *Journal of Urban Health*, 82(S4), iv113-iv124. doi:10.1093/jurban/jti113
27. Svedin, C. G., & Priebe, G. (2007). Selling sex in a population-based study of high school seniors in Sweden: Demographic and psychosocial correlates. *Archives of Sexual Behavior*, 36(1), 21-32. doi: 10.1007/s10508-006-9083-x
28. Svedin, C. G., Åkerman, I., & Priebe, G. (2011). Frequent users of pornography. A population based epidemiological study of Swedish male adolescents. *Journal of Adolescence*, 34(4), 779-88. doi: 10.1016/j.adolescence.2010.04.010
29. Svensson, F., Fredlund, C., Svedin, C. G., Priebe, G., & Wadsby, M. (2013). Adolescents selling sex: Exposure to abuse, mental health, self-harm behaviour and the need for help and support—a study of a Swedish national sample. *Nordic Journal of Psychiatry*, 67(2), 81-88. doi: 10.3109/08039488.2012.679968

30. Swart-Kruger, J., & Richter, L. M. (1997). AIDS-related knowledge, attitudes and behaviour among South African street youth: Reflections on power, sexuality and the autonomous self. *Social Science & Medicine*, 45(6), 957-966. doi:10.1016/S0277-9536(96)00417-0
31. Tadele, G. (2009). 'Unrecognized victims': Sexual abuse against male street children in Merkato area, Addis Ababa. *The Ethiopian Journal of Health Development*, 23(3), 174-182. doi: 10.4314/ejhd.v23i3.53238
32. Thurman, T. R., Brown, L., Richter, L., Maharaj, P., & Magnani, R. (2006). Sexual risk behaviour among South African adolescents: Is orphan status a factor? *AIDS and Behavior*, 10(6), 627-635. doi: 10.1007/s10461-006-9104-8
33. Wells, M., Mitchell, K. J., & Ji, K. (2012). Exploring the role of the internet in juvenile prostitution cases coming to the attention of law enforcement. *Journal of Child Sexual Abuse*, 21(3), 327-342. doi: 10.1080/10538712.2012.669823

