

# INVISIBLE VICTIMS: COMMERCIAL SEXUAL EXPLOITATION OF A BOY



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## SUMMARY

*Background and Aims:* Child sexual exploitation (CSE), particularly in its commercial forms (CSEC), constitutes a severe developmental and interpersonal trauma with long-term psychological and relational consequences. Contemporary research conceptualises exploitation as a relational process shaped by attachment disruption, coercive control, and social vulnerability. Despite strengthened institutional responses, exploitation remains largely hidden, with boys still under-recognised in research and professional practice. This study examines the psychological dynamics and institutional visibility of CSEC in Hungary, positioning exploitation as a developmental and relational process shaped by both individual vulnerability and institutional recognition. It aims to support a trauma-informed applied psychology understanding, and to improve professional recognition and intervention.

*Methods:* The study adopts a mixed-method design combining international epidemiological estimates, official Hungarian crime statistics, and qualitative clinical case analysis. The case vignette was based on clinical assessment, psycho-diagnostic evaluation, and an institutional document review within developmental trauma and attachment-based frameworks.

*Results:* Comparison of epidemiological estimates and official statistics revealed a clear gap between the expected prevalence and the cases registered, indicating substantial latent victimisation. Male victimisation appeared consistently but remained less visible, likely due to stigma and gender-related barriers to disclosure. The clinical case illustrates how cumulative developmental adversity and repeated exploitation may lead to severe psychiatric decompensation, while also demonstrating recovery potential through trauma-informed multidisciplinary intervention.

*Discussion:* CSE should be understood as a developmental and relational trauma process rather than a single event. Effective prevention and intervention require trauma-informed practice, improved institutional recognition, interdisciplinary cooperation, and stigma reduction to facilitate early identification and long-term recovery, particularly among male victims, who often remain hidden.

*Keywords:* child prostitution, minor victims, child protection, criminal statistics, prevention

## INTRODUCTION

Child sexual exploitation (CSE), particularly in its commercial forms (CSEC), typically occurs during developmentally sensitive periods when several core psychological capacities are still forming (Franchino-Olsen et al., 2022). Exploitation rarely affects single psychological domain; instead, it tends to disrupt multiple processes simultaneously, which include attachment patterns, emotional regulation, identity development, and interpersonal trust. Exposure to coercion, manipulation, or relational betrayal often leaves enduring psychological traces that extend well into adulthood, manifesting in unstable self-image, relational difficulties, and heightened vulnerability to mental health problems (Ford & Courtois, 2020). For this reason, CSE is increasingly approached not only as a legal or child-protection issue but also as a developmental and relational phenomenon that requires psychological interpretation alongside institutional responses (Josenhans et al., 2020; Franchino-Olsen et al., 2022).

Over roughly the last two decades, the conceptual framing of CSE has gradually shifted. Earlier approaches were strongly influenced by legal definitions and policy frameworks, focusing primarily on regulation and classification. Increasingly, more recent work has interpreted exploitation as a relational process unfolding within

developmental vulnerability (Winterdyk & Jones, 2020). From this perspective, the impact of exploitation often becomes visible later, through clinical symptoms or relational disturbances, rather than through immediate criminal justice identification. Psychological analysis therefore cannot be separated from the legal and institutional environments in which exploitation is recognised and managed (ECPAT International; UNICEF; UNODC). Despite strengthened international conventions following the Palermo Protocol, exploitation continues to remain largely hidden. In practice, institutional detection often occurs only when barriers to disclosure—such as shame, dependency, or fear of judgement – are temporarily reduced or disrupted.

European legal frameworks define exploitation broadly, including prostitution and other sexual activities performed in exchange for material or financial gain (ECPAT, 2022). At the same time, empirical studies suggest that exploitation frequently relies less on overt physical violence than on manipulation, coercive control, and the exploitation of developmental vulnerability. Technological changes have further transformed these dynamics. Online grooming, live-streamed abuse, and coerced content production have become increasingly prominent components of contemporary exploitation patterns (UNODC, 2020). During the

COVID-19 pandemic, these risks intensified as social isolation increased and young people spent more time in digital environments, which expanded opportunities for exploitative contact (Europol, 2020; Erdélyi, 2021).

In the present study, CSE is approached as a broad concept encompassing situations in which a minor is drawn into sexual activity through coercion, manipulation, or various forms of exchange (material, financial, or symbolic). Within this framework, CSEC refers more specifically to cases where material or financial gain is involved. In the Hungarian legal and statistical context, however, these concepts do not appear as single, clearly defined categories. Instead, relevant cases are captured under a range of criminal offences, including prostitution involving minors, trafficking in human beings, and other forms of sexual exploitation defined in the Criminal Code and as recorded in the ENYÜBS system of criminal statistics. For analytical purposes, the study therefore brings together these legally distinct categories under a common conceptual framework. This alignment remains necessarily imperfect, and differences between international research definitions and national legal classifications need to be considered when interpreting the data. These differences are likely to contribute to the gap between epidemiological estimates and officially recorded cases.

Although the literature on CSE has grown significantly, the psychological dynamic of exploitation among boys remains comparatively underexplored, especially in intrafamilial contexts and within Central and Eastern Europe. The present study therefore examines how exploitation becomes both psychologically and institutionally visible by integrating quantitative statistical analysis with qualitative clinical interpretation.

A more nuanced understanding of these processes may support earlier identification, more accurate assessment, and more effective prevention within the Hungarian child protection system.

## INSTITUTIONAL AND RESEARCH DEVELOPMENTS

Recent international initiatives have illustrated both progress in the identification of victims but also the continuing difficulties involved in detection. During Operation 17 – a coordinated action involving Europol, Interpol, and experts from 22 countries – 51 sexually abused children were identified (Europol, 2025). While such operations demonstrate the potential in international cooperation, they also reveal how resource-intensive and complex identification remains, suggesting that many victims inevitably remain outside of formal institutional awareness.

Legal responses to child sexual exploitation have developed considerably over the past decades. The United Nations Palermo Protocol established an overarching global framework to prevent trafficking and protect vulnerable populations, particularly women and children (United Nations, 2000). At the European level, the Council of Europe Lanzarote Convention further defined child sexual exploitation and abuse as being serious violations of children's rights that required integrated preventive and protective responses (Council of Europe, 2007). Within the European Union, Directive 2011/36/EU reinforced these developments by emphasising victim-centred identification, interdisciplinary cooperation, and enhanced safeguards for minors. Collectively, these

frameworks have gradually shifted professional perspectives away from exclusively criminal justice approaches toward models that increasingly incorporate developmental and psychological understanding.

CSEC encompasses a heterogeneous range of practices, including child prostitution, child sexual abuse material, trafficking for sexual exploitation, online coercion, live-streamed abuse, exploitation associated with travel and tourism, forced marriage involving sexual abuse, intrafamilial exploitation, and digitally mediated transactional relationships. Digital communication platforms now frequently serve as entry points for offender–victim contact. Exploitation often develops through relational influence rather than explicit force, as perpetrators may gradually establish trust and emotional dependency, blurring boundaries between attachment and exploitation and complicating recognition for both victims and professionals.

Digital environments further heighten vulnerability through their enablement of anonymity, repeated targeting, and cross-border coordination while reducing opportunities for external intervention. The creation and potential redistribution of exploitative material may create an enduring psychological burden, as victims commonly report persistent fear, shame, and a sense of lost control regarding future exposure. These dynamics intersect with developmental characteristics typical of adolescence, including increased sensitivity to reward and ongoing identity exploration (Crone & Dahl, 2012).

International monitoring systems and legal frameworks have also stimulated substantial interdisciplinary research. Contemporary scholarship increasingly combines developmental psychology, trauma research, criminology, and public health approaches,

which allows for a more systematic exploration of vulnerability pathways, grooming mechanisms, and offender strategies (Franchino-Olsen et al., 2022; UNODC, 2022; Wyles et al., 2025).

## PSYCHOLOGICAL CONSEQUENCES

Recent psychological research has increasingly highlighted groups that were historically underrepresented in the literature on CSE, particularly boys, transgender individuals, and gender-diverse youth. These groups may face additional barriers to disclosure related to stigma, gender norms, or institutional expectations, which can delay recognition and access to support (Josenhans et al., 2020). In minors, developmental immaturity and pronounced power asymmetries further complicate questions of consent, since neuropsychological systems responsible for impulse control, long-term planning, and risk evaluation are being developed throughout adolescence (Shulman et al., 2016).

Clinical descriptions of CSE often refer to relational contexts in which perceived agency gradually diminishes rather than abruptly disappearing. Exploitation may unfold through dependency, emotional influence, or progressive manipulation rather than overt force alone. Grooming processes typically include gradual desensitisation, isolation from supportive relationships, emotional conditioning, and intermittent reinforcement, which may contribute to the internalisation of exploitative relational dynamics (Herman, 1992). Within such contexts, emotional regulation, interpersonal trust, and identity development may be disrupted, thereby increasing vulnerability to later revictimisation.

A range of vulnerability factors has been repeatedly identified in the literature, including socioeconomic adversity, family dysfunction, emotional neglect, and insecure attachment histories (Ford & Courtois, 2020). Clinically, survivors rarely present with isolated or clearly bounded symptom profiles; psychological responses tend instead to be complex, overlapping, and strongly shaped by developmental timing. These reactions may be particularly pronounced during adolescence, a period characterised by heightened social sensitivity existing alongside still-maturing executive control systems (Crone & Dahl, 2012).

## PREVALENCE AND EPIDEMIOLOGICAL CONTEXT

### International epidemiological evidence

Commercial sexual exploitation of children is widely recognised as a major, albeit only partially observable, child-protection and public-health concern. International monitoring systems consistently indicate that children represent a substantial proportion of identified trafficking victims worldwide, with sexual exploitation among the most frequently reported forms (UNODC, 2022). At the same time, such figures require careful interpretation. Official statistics reflect cases that reach institutional awareness rather than the underlying prevalence of victimisation, and are therefore shaped by legal definitions, reporting practices, and professional detection capacities.

From a broader public-health perspective, exposure to violence during childhood appears far more widespread than

exploitation statistics alone would suggest. Global estimates indicate that up to one billion children experience some form of violence each year (WHO, 2020). Although this category includes diverse forms of harm, the figure highlights the extent to which child victimisation may remain outside formal protection structures. Reports produced by UNICEF and ECPAT similarly emphasise that disclosure is frequently constrained by shame, dependency, fear of social consequences, and limited trust in institutions. These barriers may be particularly relevant in the case of boys and gender-diverse youth, whose victimisation has historically received less recognition both within research and professional practice.

Methodological limitations further complicate epidemiological assessment. Hidden populations, inconsistent operational definitions, and the covert nature of exploitation restrict comparability across studies and hinder the precise estimation of prevalence (Franchino-Olsen et al., 2022). Nevertheless, certain patterns emerge repeatedly across contexts. Elevated vulnerability is consistently documented among children living in residential care, homeless youth, and adolescents involved in juvenile justice systems (Reid et al., 2021), which suggests that developmental adversity and structural marginalisation interact in shaping exposure risk.

Clinical research complements these epidemiological observations. Studies across different settings report recurring psychological difficulties among exploited minors, including symptoms of post-traumatic stress, depressive states, dissociation, substance-related issues, and disturbances in interpersonal functioning (Cloitre et al., 2018; Ottisova et al., 2016). Importantly, such

consequences often become visible only after prolonged exposure or secondary crises, further widening the gap between lived experience and institutional recognition.

Taken together, evidence garnered internationally points to a persistent visibility paradox: while epidemiological and clinical findings indicate a substantial burden of harm, official statistics capture only a limited subset of affected children. For this reason, national datasets should be interpreted less as direct indicators of prevalence and more as reflections of institutional visibility shaped by specific legal, professional, and sociocultural conditions. The Hungarian data presented below are examined from this perspective, with particular attention on the way gender and developmental factors influence which cases become visible and which remain unrecognised.

### **Hungarian context and institutional visibility**

In addition to international epidemiological evidence and estimates produced by non-governmental organisations, the analysis draws on official Hungarian crime statistics derived from the Ministry of the Interior's ENYÜBS database. The dataset covers recorded offences involving minor victims between 2019 and 2025.

Prior to analysis, the data were reviewed to remove duplicate entries across reporting units, exclude cases with missing age or gender information, and organise offences into analytically coherent categories. For the purposes of this study, legally defined offences were grouped into broader analytical clusters,

including prostitution-related offences involving minors, trafficking for sexual exploitation, and other forms of sexual exploitation reflected in the criminal statistics.

Given the absence of reliable population-level denominators, and the well-documented hidden nature of exploitation, the analysis relies on absolute case counts rather than calculated rates. The results are therefore interpreted as reflecting patterns of institutional detection and recording practices, rather than underlying prevalence. *Figure 1* shows the institutional visibility of minors who have fallen victim to registered CSEC in Hungary. The dataset contains cases registered between 2019 and 2025, broken down by age and gender (children aged 0–13 and young people aged 14–17).

According to ECPAT (2022), as many as 500 minors may be involved in prostitution in Hungary, whereas BM statistics record substantially lower annual numbers. This discrepancy reflects a typical visibility paradox: official criminal statistics capture institutional detection rather than actual prevalence. Adolescent girls (14–17 years) constitute the largest registered victim group, while boys remain consistently present but less visible, which suggests under-detection rather than absence. The pattern indicates that male victimisation becomes most visible during adolescence, potentially reflecting delayed disclosure related to stigma and gender norms (Villeneuve et al., 2024). Overall, statistical data represent a filtered institutional view of exploitation. They cannot capture grooming processes, attachment disruptions, or developmental vulnerabilities that shape disclosure dynamics.

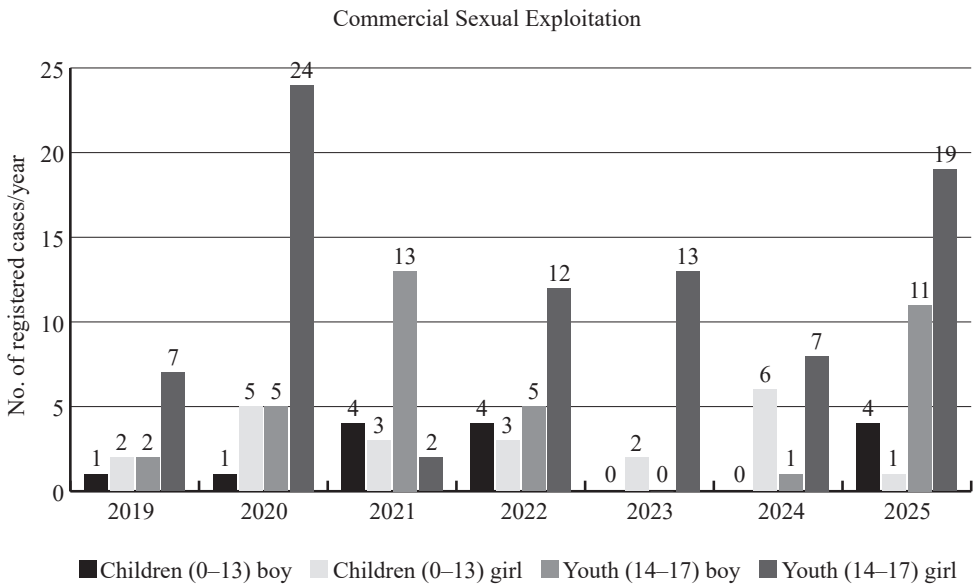


Figure 1. Registered cases of commercial sexual exploitation of children in Hungary (2019–2025)

Source: Authors' own compilation based on BM/ENYÜBS data; accessed 18 February 2026

### MALE VICTIMS AND GENDERED INSTITUTIONAL VISIBILITY

The statistical tendencies observed in the Hungarian ENYÜBS dataset suggest that male victimisation is consistently present yet remains less visible within institutional systems than female victimisation. This pattern is not unique to the Hungarian context; rather, it reflects a broader international phenomenon in which low official numbers are more likely to signal pathways of delayed disclosure and uneven institutional recognition than any genuine rarity (Depraetere et al., 2018). For decades, both research and professional intervention models were largely built around female victim trajectories, gradually shaping implicit assumptions about who is recognised as a 'typical' victim. Emerging

empirical work increasingly challenges this framework, indicating that boys represent a substantial – though frequently under-recognised – subgroup among exploited minors (Josenhans et al., 2020). Cultural expectations surrounding masculinity, self-reliance, and assumptions about male sexual agency may further reduce both self-identification as a victim and willingness to disclose exploitation experiences (Magugliani, 2021).

Research also suggests that boys may interpret exploitative experiences differently from girls, particularly where coercion is embedded in grooming, emotional dependency, or relational manipulation rather than overt force. Adolescence adds further complexity: identity exploration and heightened sensitivity to peer evaluation may render

exploitative interactions ambiguous from the victim's perspective, delaying recognition and naming of harm (Magugliani, 2021). Disclosure therefore often occurs only after prolonged exposure, frequently triggered by secondary crises – deterioration in behaviour, psychiatric destabilisation, or institutional intervention. This pattern has been described as a gendered disclosure gap, where psychological barriers (e.g., shame, fear of stigma, uncertainty regarding sexual identity) intersect with professional blind spots and institutional expectations (Cole et al., 2016; Villeneuve et al., 2024). In practice, service systems may continue to rely on victim profiles historically derived from female trajectories, inadvertently delaying referral in male cases. Consequently, male victimisation may remain statistically underrepresented despite comparable exposure to exploitation-related harm (Depraetere et al., 2018).

Male survivors often present with psychological consequences similar in severity to those described among girls, including post-traumatic symptoms, depressive states, emotional dysregulation, and identity-related distress (Villeneuve et al., 2024). Differences may lie more in expression than in underlying burden. Externalising behaviour, risk-taking, aggression, or emotional withdrawal may obscure underlying distress and reduce opportunities for early identification across educational, social, or healthcare settings (Nyúl et al., 2018). From a developmental perspective, the interaction of attachment disruption, trauma-related secrecy, and socially reinforced masculine norms may contribute to these issues manifesting in a latent manner within institutions. The adolescent peak seen in Hungarian data is therefore best interpreted not solely as a

demographic pattern but as an indicator of gendered mechanisms shaping recognition and reporting. Understanding the victimisation of males is thus essential in order to bridge the gap between epidemiological estimates and official statistics. The following case offers a clinical illustration of how exploitation processes may remain concealed until severe psychological decompensation renders them visible.

### Case vignette

Child and adolescent sexual exploitation, particularly when commercial coercion is involved, represents a severe form of developmental trauma capable of producing profound psychiatric and psychological consequences (Farkas, 2012). Clinical presentations may involve complex constellations of post-traumatic symptoms: dissociation, attachment disturbances, suicidality, and, in some cases, transient psychotic phenomena (Kuritárné et al., 2018). Management therefore requires an integrative and multidisciplinary approach that combines psychiatric stabilisation with trauma-focused psychological intervention.

The present analysis is based on clinical interviews, diagnostic evaluation, and institutional document review. The case concerns a boy living in residential child protection care who required emergency child psychiatric admission following acute suicidal ideation accompanied by psychotic symptoms in the context of repeated exploitation. Beyond the individual presentation, the case illustrates how cumulative developmental adversity, disrupted attachment processes, and exploitation-related coercion may interact over time to produce severe psychopathology.

### Medical history

The patient was referred from a specialised children's home in Hungary. On admission, he was attending seventh grade and initially appeared to adapt reasonably well to institutional life. Early developmental history, however, revealed marked relational instability. His mother had been involved in prostitution; his father was unknown; and after his mother's imprisonment he was primarily raised by his grandmother. Initial contact with child protection services occurred at age 13 due to recurrent school absenteeism, although no formally documented high-risk circumstances were identified at that stage. Educational reports described impulsivity, integration difficulties, and sexually provocative behaviour associated with peer conflict.

At age 14, authorities initiated an investigation after allegations emerged that his grandmother had coerced him into prostitution, including cross-dressing and participation in sexual acts for financial gains. He was subsequently transferred to specialised residential care. The patient repeatedly absconded and returned to family members, during which he reported further episodes of coercion into prostitution. Social media facilitated contact with clients, eventually leading to exploitation abroad. He was later apprehended in Germany while engaged in coerced commercial sexual exploitation and was returned to the Hungarian authorities. Overall, the developmental trajectory reflects escalating exploitation unfolding against a background of attachment instability and limited protective containment.

### Clinical findings

The patient presented with severe psychological decompensation. He reported repeated episodes of non-suicidal self-injury accompanied by a subjective loss of control. Trauma-related auditory command hallucinations urging self-harm contributed to intense anxiety, insomnia, and pervasive fear. Recurrent nightmares and intrusive trauma memories were accompanied by pronounced affective arousal. Diagnostic assessment suggested preserved baseline coping capacities but marked disturbances in emotional integration and reality testing. The clinical picture included emotional constriction, internal emptiness, reduced reflective capacity, and narrowed experiential range. Depressive functioning, sexual trauma indicators, and attachment-related disturbances were prominent. Ego-function weaknesses emerged in the form of diminished self-confidence, anxiety, interpersonal withdrawal, and acting-out behaviours. Importantly, psychotic-like experiences appeared closely linked to trauma activation and affective overload, suggesting trauma-related destabilisation rather than primary psychotic organisation.

### Treatment and therapeutic interventions

Initial intervention focused on crisis stabilisation and risk reduction. Pharmacotherapy (haloperidol and clonazepam) was introduced to reduce hallucinations, anxiety, and sleep disturbance. Psychological treatment combined trauma-focused

intervention, emotion regulation work, and attachment-oriented approaches within a structured inpatient environment. Over the course of treatment, psychotic-like symptoms gradually subsided, suicidal ideation decreased, and affective stabilisation was achieved. Follow-up assessment indicated improved reality testing and significant reduction in acute symptom severity. The patient was discharged with continued outpatient psychiatric and psychological follow-up.

Currently, he is completing two school years simultaneously and demonstrates increased future orientation. Foster placement is planned, and he reports vocational aspirations. A criminal investigation remains ongoing. Clinically, the case illustrates how trauma-related deterioration in reality testing may resemble primary psychosis in severely exploited adolescents.

## DISCUSSION

In the present case, exploitation did not appear as a discrete event but unfolded gradually within persistently unstable attachment relationships. From a developmental clinical perspective, repeated relational violations may become progressively internalised, contributing to self-directed aggression and dissociative coping processes (Herman, 1992; Courtois & Ford, 2013). Early relational trauma, emotional neglect, and repeated exploitation appear central in understanding the observed psychiatric decompensation. The coexistence of suicidality, trauma-related psychotic symptoms, and severe emotional dysregulation reflects the complex interaction between developmental adversity and disrupted attachment processes.

Clinical evidence consistently indicates that prolonged interpersonal trauma in childhood may result in enduring functional impairment extending beyond diagnostic symptom categories. Sexual exploitation is associated with psychological, somatic, and social consequences that may shape developmental trajectories over time. Gender differences have been described, with male survivors often presenting more externalising patterns, while female survivors more frequently exhibit substance misuse or continued exploitation trajectories.

Symptoms observed among survivors commonly include post-traumatic stress reactions, depression, dissociation, self-injury, and substance misuse (Nyúl et al., 2018). Kuritárné Szabó and Merza (2017) similarly described elevated rates of depressive disorders, suicidality, and sleep disturbance among sexually abused individuals, findings that closely correspond to the current presentation. Early sexual victimisation has also been associated with later borderline personality organisation characterised by emotional instability and relational disturbance. Commercial sexual exploitation typically involves prolonged coercion and repeated relational betrayal, contributing to gradual psychological and social decline. Emotional and sexual abuse may additionally manifest in psychosomatic symptoms, underlining the importance of multidisciplinary care that is capable of identifying victimisation before severe psychiatric deterioration takes place (Farkas, 2012). The case supports understanding exploitation as a cumulative relational process rather than a singular traumatic event. The interaction of attachment disruption, trauma-related psychopathology, and institutional blind spots

underscore the need for integrated psychiatric and psychological treatment alongside improved early detection and prevention strategies. The findings suggest that the primary challenge in addressing CSE lies not only in prevalence but in the mechanisms that regulate its visibility within institutional systems.

### LIMITATIONS

The interpretation of the findings requires a number of cautionary considerations. Official crime statistics capture only those cases that come to the attention of institutions, which means that a substantial proportion of exploitation is likely to remain unrecorded, particularly in more hidden or socially stigmatised contexts. Accordingly, the data presented here should not be understood as reflecting the actual prevalence of CSE or CSEC, but rather as indicating patterns of institutional visibility shaped by legal frameworks, reporting practices, and professional recognition. In addition, the analysis draws on a single clinical case, which allows for a detailed exploration of psychological processes but inevitably limits the scope for generalisation. The case is therefore used as an illustrative lens on developmental and relational dynamics rather than as representative evidence. Finally, the comparison between international research and Hungarian data is constrained by differences in conceptual and legal classifications, which complicates direct alignment across contexts. Future research would benefit from integrating longitudinal designs and multi-source data to better capture the temporal dynamics and hidden dimensions of exploitation.

### CONCLUSION

Commercial sexual exploitation of children remains characterised by profound social invisibility and delayed institutional recognition. Epidemiological estimates and clinical experience indicate that official statistics reflect only a limited segment of the actual victimisation, a discrepancy particularly evident among boys, whose experiences frequently remain outside formal detection pathways. Reducing the gap between estimated prevalence and recorded cases therefore requires the integration of quantitative monitoring with psychologically informed qualitative approaches that are capable of capturing developmental and relational dynamics invisible in statistical data alone.

The Hungarian findings presented here align with wider international observations, demonstrating that stigma, gender norms, and social taboos continue to hinder disclosure and access to support (Tamási, 2013). Survivors often describe fear of misunderstanding or disbelief, factors that may delay help-seeking and prolong exploitation (Windt, 2021; 2022). From a clinical perspective, such barriers reinforce secrecy and increase vulnerability to long-term psychological difficulties. Effective intervention must therefore extend beyond criminal justice frameworks and include psychologically informed assessment and institutional cultures supportive of early recognition.

ECPAT reports further highlight persistent gaps in access to specialised psychological and psychiatric care, despite the availability of evidence-based interventions such as EMDR for trauma-related conditions (Szigeti, 2018). Prevention should include developmentally adapted sensitisation programmes together

with strengthened collaboration among mental health services, child protection, education, and law enforcement. Continued national research and systematic data collection remain essential, particularly regarding male victims and intrafamilial exploitation, where institutional visibility remains limited. Several organisations are currently involved in prevention, professional training, and awareness-raising activities related to child sexual exploitation in Hungary:

- The International Red Cross has implemented training activities within its PGI (Protection, Gender, and Inclusion) programme.
- UNICEF has offered sensitisation courses for social workers at Eötvös Loránd University since 2018.
- The Directorate-General for Social and Child Protection organises continuing professional training aimed at reducing child prostitution and improving victim identification.
- The Hungarian National Police Headquarters promotes prevention and awareness through the “*Kiálllok érted!*” [I Stand Up for You!] educational theatre programme and police sensitisation initiatives.
- In addition, a Professional Forum against Child Trafficking is currently being established to strengthen interdisciplinary cooperation and coordinated responses.

Ultimately, prevention and recovery depend on coordinated action across clinical, institutional, and societal levels. Without supportive and non-stigmatising environments, disclosure remains unlikely and exploitation may persist even after institutional contact. The present case demonstrates

not only the severe psychological consequences of exploitation but also the potential for stabilisation when timely clinical intervention and supportive institutional responses are successfully combined.

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### **Conflict of interest statement**

The authors declare no conflict of interest.

### **Ethical statement**

The study was conducted in accordance with relevant ethical standards and the principles of the Declaration of Helsinki (1964, and its later amendments). The case study was included only after obtaining informed consent from the legal guardian. All personal data were anonymised, and procedures followed ethical requirements concerning participant protection, confidentiality, and responsible handling of sensitive information.

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## ÖSSZEFOGLALÓ

### LÁTHATATLAN ÁLDOZATOK: EGY FIÚ PROSTITÚCIÓS CÉLÚ KIZSÁKMÁNYOLÁSA

*Háttér és célkitűzések:* A gyermekek szexuális kizsákmányolása (CSE), különösen annak kereskedelmi formái (CSEC), súlyos fejlődési és interperszonális traumaformát jelentenek, amelyek hosszútávú pszichológiai és kapcsolati következményekkel járnak. A kortárs kutatások a kizsákmányolást egyre inkább olyan kapcsolati folyamatként *értelmezik*, amelyet kötődési zavarok, kényszerítő kontroll és társadalmi sérülékenység alakít. Bár az intézményi válaszok erősödtek, a jelenség továbbra is nagyrészt rejtve marad, és a fiú *áldozatok* a kutatásban és a szakmai gyakorlatban is alulreprezentáltak. A tanulmány a kiskorúak kereskedelmi szexuális kizsákmányolásának pszichológiai dinamikáját és intézményi láthatóságát vizsgálja Magyarországon, különös tekintettel az intrafamiális kizsákmányolásra és a fiú *áldozatokra*. Célja a trauma-informált alkalmazott pszichológiai megközelítés támogatása, valamint a szakmai felismerés és intervenció fejlesztése.

*Módszer:* Vegyes módszertanú kutatási design került alkalmazásra, amely nemzetközi epidemiológiai eredmények, magyar hivatalos bűnügyi statisztikák és kvalitatív klinikai esetelemzés integrálásán alapult. Az esettanulmány klinikai vizsgálatokra, pszichodiagnosztikai *értékelésre* és intézményi dokumentumelemzésre *épült*, fejlődési trauma- és kötődéseméleti keretben.

*Eredmények:* Az epidemiológiai becslések és a hivatalos statisztikák *összevetése* jelentős eltérést mutatott a várható prevalencia és a regisztrált esetek között, ami kiterjedt látenciára utal. A fiú *áldozatok* jelenléte következetes, de kevésbé látható, feltehetően a stigmatizáció és a nemi szerepekkel *összefüggő* feltárási akadályok miatt. A klinikai eset bemutatja, hogy a halmozódó fejlődési *ártalmak* és az ismételt kizsákmányolás súlyos pszichiátriai dekompenzációhoz vezethetnek, ugyanakkor a traumainformált multidiszciplináris beavatkozás a felépülés lehetőségét is jelzi.

*Következtetések:* A gyermekek szexuális kizsákmányolása fejlődési és kapcsolati traumafolyamatként *értelmezendő*, nem pedig egyszeri eseményként. A hatékony prevenció és intervenció trauma-informált gyakorlatot, az intézményi felismerés javítását, interdiszciplináris együttműködést és a stigmatizáció csökkentését igényli a korai azonosítás és a hosszútávú felépülés elősegítése *érdekében*, különösen a gyakran rejtve maradó fiú *áldozatok* esetében.

*Kulcsszavak:* gyermek prostitúció, fiatalos, áldozat, gyermekvédelem, kriminálstatisztika, megelőzés

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