Human Trafficking: A Global Health Emergency

Perspectives from Nursing, Criminal Justice, and the Social Sciences

Mary de Chesnay
Donna Sabella

Editors

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For Dr. Barbara Anderson, nurse midwife, prolific author, and great friend who travels the world helping women to have easier, more-fulfilling lives.
MdC

To my dear children Arlyn Andrew and Austin, my mentors Doris, Marye, Kathy and Gloria, and to all of those who fight their own private fights against the exploitation and victimization they endure every day.
DS

Foreword

The past 20 years has witnessed a dramatic increase in public awareness of trafficking in human beings (THB). However, this awareness tends to be specific and limited in scope, leading to misconceptions around the nature and extent of THB, and false assumptions about those at risk for exploitation. Much attention has been paid to the trafficking of girls and women for commercial sexual exploitation, with relatively little attention given to labor and other forms of THB, or the victimization of males and non-binary individuals. Public misconceptions abound regarding the "typical victim," as well as the geographic distribution of THB, with many assuming that it only occurs in other countries, other regions, and/or in other cities. They may assume that any individuals who experience trafficking locally must necessarily be from foreign countries, failing to recognize vulnerability in their fellow citizens. Such misconceptions can prevent recognition of vulnerable individuals and preclude opportunities to offer assistance. Misconceptions may stem from and contribute to harmful biases and discrimination, further traumatizing children and adults exposed to THB. We cannot hope to eradicate THB without thoroughly understanding its scope, dynamics, and impact, basing our knowledge on rigorous scientific inquiry, rather than preconceived notions and assumptions.

The traditional response to human trafficking has focused on the investigation and prosecution of alleged offenders, rather than the prevention of THB, and the protection and healing of those experiencing exploitation. Addressing THB through a criminal justice lens tends to minimize the importance of multidisciplinary collaboration to prevent exploitation and to serve the needs of individuals who have experienced THB. Professionals outside the criminal justice system may assume that they have no role in preventing and responding to THB, neglect to prioritize training on the phenomenon, and miss critical opportunities to recognize vulnerable children and adults. Important interactions between those experiencing THB and those in a position to help are missed when professionals fail to understand their role and responsibility in the response to exploitation. A strict focus on law enforcement when addressing THB may diminish resources directed to victim-serving organizations and limit communication and collaboration between stakeholders to address the holistic needs of vulnerable individuals, with the result that persons experiencing THB may fail to obtain critical services, and/or may experience significant stress and re-traumatization as they attempt to identify services on their own.

An effective response to THB requires viewing the problem through a public health lens, in addition to employing the traditional criminal justice approach. The editors emphasize this need, acknowledging the importance of thoroughly understanding risks and vulnerabilities of individuals and populations, channeling resources into primary prevention initiatives, studying the dynamics of *all* types of THB, appreciating the frequent co-existence of multiple forms of trafficking, and adopting a comprehensive holistic approach to the care of those persons who experience THB. The inclusion of authors from the fields of health and mental health, social work, law and public policy ensures that readers are provided with a well-rounded view of the complex field of THB. The editorial decision to design the text to address the needs of students and professionals from a variety of child/adult-serving professions strengthens the message that multidisciplinary collaboration is a critical component of any effective strategies to eradicate THB.

While THB occurring in different countries may share many similarities, it is critical to be aware of regional differences in vulnerability, trafficking dynamics, and societal responses. Cultural variations in attitudes and practices must be considered, including differing societal views on sexuality, gender identity, religion, race, ethnicity, and other factors. Cultural views on social hierarchy, collectivistic vs individualistic views of interpersonal relationships, and on child rights strongly influence societal understanding of, and response to THB. The editors acknowledge the global diversity in THB by including chapters addressing exploitation in a variety of countries and cultures, emphasizing the importance of considering perspectives and conditions very different from our own.

Professionals in active practice, researchers and those preparing to enter child/adult-serving professions need to be aware of THB in all of its forms and complexity. They need to understand the need for, and benefits of multidisciplinary collaboration and a global, public health approach to exploitation. This text provides a first step in this process, giving trainees and professionals alike a comprehensive, thoughtful, and insightful view of a harmful but preventable global phenomenon.

International Centre for Missing and Exploited Children   Jordan Greenbaum
Alexandria, VA, USA

Preface

As nurses who have worked with survivors of the sex trade for several decades, we have seen the dehumanizing effects of exploitation and been both saddened and angered that slavery not only still exists, but that modern forms are growing. Both editors have extensive experience as clinicians and teachers of courses in human trafficking. We produced this book to help other educators provide information to students in their disciplines. No single text can be comprehensive in covering all the information emerging about the extent of human trafficking around the world, but we provide enough of an overview for scholars in many disciplines to explore topics most relevant to their interests.

Sabella taught one of the first—if not the first—courses in human trafficking and continues to focus attention on human trafficking as a co-founder and associate editor of the *Journal of Human Trafficking* as well as in her role as Executive Director of Delaware's Anti-Trafficking Action Council. She also was a co-founder and the first program director for Dawn's Place, a residential program in Philadelphia for trafficked and prostituted women.

As a clinician, de Chesnay's practice was originally with child sexual abuse and incest survivors, but many of these girls had been tricked or coerced into the sex trade by their relatives or boyfriends. Later, she focused on helping survivors overcome the trauma of sex trafficking. She prepared a clinical guide for nurses and other health care providers to assist in identifying and treating survivors.

Designed as a text for courses in human trafficking, this book is not specific to any one discipline, but presents an overview of the subject from contributors who are clinicians, educators, and researchers in the health sciences of nursing and medicine, social sciences, and criminal justice. Contributors were invited from different regions and countries of origin to provide a world view and to emphasize that human trafficking is a global emergency. The book is comprehensive in that there is information about all forms of human trafficking to teach readers to look beyond the usual types of sex trafficking and forced labor. We include non-consensual marriage of adults and children, organ trafficking, baby trafficking in the form of black-market adoptions, and child soldiers. All types of human trafficking have in common the elements of force and exploitation for the financial benefit of the traffickers.

In North America, there is growing attention to the plight of missing and murdered indigenous women and girls. Experts believe some of these women are

taken for the sex trade, but no reliable numbers are available. As activist groups continue their public education campaigns, we can expect to see more pressure on local police to investigate disappearances of indigenous women more thoroughly.

The 2022 invasion of Ukraine resulted in refugees fleeing their country, and most of these are women and children. Their vulnerable status places them at risk of unscrupulous individuals who take advantage of them by promising to transport them to safety while selling them to human traffickers. In their effort to find safety, they are not always able to distinguish between the many true aid workers and the cunning traffickers.

Human traffickers exploit the sadness and discouragement of individuals or couples who are not able to conceive a child of their own by selling the babies of women they prostitute or those of poor women who have too many mouths to feed and cannot access effective birth control. Baby farms are a relic of early America but thrive today in poor regions of Africa and the Middle East producing black-market babies for the affluent.

While some child soldiers voluntarily join their groups, others are kidnapped from their villages as their families are killed by the rebels. Young girls are taken as "brides" for the soldiers, and serve as domestics, but some do carry guns and fight alongside the boys.

In the United States, child marriage is legal in all but a few states. Recent efforts to outlaw abortion with no exceptions for rape and incest are expected to increase rates of child marriage in conservative families who force the child to marry her rapist.

The extent of human trafficking is likely severely under-reported due to the secrecy of traffickers and intimidation of victims, but it is clear that it is a growing problem. All disciplines must ensure that their students understand the nature of the forms of trafficking and effects on their own societies. This book is designed to give instructors of courses a way to focus for their own disciplines by providing a sense of the scope of the problem.

Kennesaw, GA   Mary de Chesnay
Wilmington, DE   Donna Sabella

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Part I

Background and Significance

The Nature and Extent of Human Trafficking

Mary de Chesnay

1 Introduction

Human trafficking has emerged as a trendy topic in the public arena, the professional literature, and the arts. Scholars and practitioners in every discipline see the results of human trafficking in their fields and study the ramifications for their disciplines. Films portray the suffering of survivors and, while the institution of slavery has a long history in every culture, exploitation of human beings for profit reaches new heights of depravity in modern times. Historically in America, the trans-Atlantic slave trade was based on race, but modern traffickers do not distinguish their victims by race. In early America, Caucasians could not legally be slaves, though they could be indentured servants, a condition much like slavery, but perhaps lacking or at least minimizing the institutionalized cruelty of race-based slavery.

There is a long-standing relationship between exploitation of others for profit and globalization. After Columbus arrived in America, the world suddenly expanded to link Europe with the Americas, facilitating the trans-Atlantic slave trade to develop the New World for the benefit of Europe [1]. The new global economy created a demand for ever-increasing sources of cheap labor, and Africans were most vulnerable.

As slave uprisings occurred and a strengthening abolitionist movement took hold, England and America abolished slavery in the nineteenth century, legally if not in spirit. The laws abolishing slavery did nothing to prevent continued exploitation of the vulnerable to feed the power and economic needs of the ruling class and those who aspired to wealth and power. Exploitation of others to achieve wealth and power seems to be a universal and continuing phenomenon. Thus, the evolution of modern slavery.

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This book is intended as a basic text for any discipline by providing students with an overview of human trafficking in all its modern forms. Chapter 1 provides an introduction to the forms with subsequent chapters delving into the specifics of what they look like and how to address them from the point of view of disciplines in health care, mental health care, economics, the social sciences, law, and criminal justice. The case examples that follow as examples of modern types of human trafficking are fictional and represent only a small sample of stories told by real survivors.

2   Definition of Human Trafficking

2.1   Palermo Protocol

In 2000, the United Nations adopted the resolution entitled: Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention Against Transactional Organized Crime. Among other features, the Protocol defines human trafficking and requires member states to adopt legislation to prosecute violators [2]. The definition is noteworthy in that it covers a variety of roles. For example, limousine drivers who meet clients at the airport and transport them to hotels for sex with children can be prosecuted as traffickers (Table 1).

Although the protocol was originally hailed as a women's rights victory for addressing the sex trafficking epidemic, it also had some significant limitations. The definition and subsequent actions by countries which were signatories to the protocol focused on the effects of trafficking after it occurred and the perpetrators who were characterized as evil predators. The result was an emphasis on services and criminalization of trafficking rather than the roots of modern slavery. While it was critically important to address how to help the survivors and punish the traffickers, there was minimal attention to the underlying causes: poverty, lack of education (particularly for women), and discrimination from social inequality [3].

Table 1 United Nations definition of human trafficking

Recruitment	Threat	Labor exploitation
Transportation	Coercion	Sexual exploitation
Transfer	Abduction	Servitude
Harboring	Fraud	Removal of organs
Receipt	Deception	
	Abuse of power	

3 Scope of Human Trafficking

Attempts by researchers to describe the scope of human trafficking are weak estimates at best given the secrecy with which transactions are conducted and the under-reporting of criminal behavior. The victims themselves are often kept in conditions in which they cannot access available services or they need the work so badly they do not try to escape or seek help. Sex trafficking victims might be drugged or suffering Stockholm syndrome, in which they are in love with their pimps and believe they are better off with them than without them.

In 2012, Bales published the third edition of his landmark book in which he estimated that there were 35.8 million slaves [4]. The International Labour Organization (ILO) produces an annual report in which they estimate current demographics on forced labor and forced marriage. In the 2022 report, the ILO estimates that 50 million people are currently modern slaves-28 million in forced labor and 22 million in forced marriage The ILO includes sex trafficking in forced labor and estimates that 63% of forced labor is for sex. About 3.3% of forced labor slaves are children, and children are involved in both labor and sex trafficking [5].

The International Labor Organization tracks data worldwide and in its most recent report found that
1. Almost 50 million people currently live in slavery. This number is conservative since no way has been developed to identify all victims. The number does not account for all the forms of human trafficking discussed in this book, e.g., child soldiers, baby trafficking, nonconsensual marriage.
2. Forced labor accounts for 27.6 million people—17.3 in the private sector and 3.9 million by the state. Commercial sex exploitation accounts for 6.3 million and almost five million are women and girls.
3. The highest number in forced labor are in Asia and the Pacific region.

4 Types of Human Trafficking

4.1 Sex Trafficking

Sex trafficking facts according to the United Nations Office on Drugs and Crime [6] are as follows
1. Sexual exploitation is reported as the most frequent crime, and 79% of victims are women and girls.
2. Surprisingly, women traffickers are dominant in many countries.
3. The second most common form of trafficking is forced labor −18%.
4. Worldwide, almost 20% of victims are children, though in some parts of Africa, the majority are children.
5. Domestic trafficking is most common, though victims are moved to and through other countries.

4.1.1 Case Example

Sherri is an 18 y/o recent high school graduate planning to attend college in the Fall, but looking forward to a European vacation with her aunt who is training German employees at an international bank in Frankfort. Sherri and her aunt plan to explore Europe during her aunt's vacation. Sherri arrives in New York from her home in Iowa to catch her flight to Frankfort but learns it is delayed. Since she will need to spend several hours in the airport, she finds a quiet place to read and pass the time. A young woman sits next to her and they chat. Sherri finds that the young woman is interesting and they have much in common. The flight is finally canceled, and the airline offers hotel vouchers, but the woman encourages Sherri to stay at her apartment near the airport and they will both return in the morning. Sherri arrives at the apartment, is locked in a room and repeatedly raped by several men until she is "broken in." She is told that if she tries to escape she will be killed and her little sister will take her place.

4.2 Domestic Minor Sex Trafficking (DMST)

4.2.1 DMST

According to the United States Department of Justice [7] occurs both in the United States and abroad
1. Pimps target vulnerable children and manipulate them in a variety of ways.
2. They use physical, emotional, and psychological abuse to keep their victims in line.
3. They disguise children and move them around away from their families.
4. Children are easily found though the internet.
5. Law enforcement does not always recognize them as victims, so they are arrested and prosecuted.
6. There is market for sex tourism in which pedophiles travel for the purpose of having sex with children.

4.2.2 Case Example

Kira is a 12 y/o girl whose grades are poor and who comes to school dirty and exhausted. She lives with her mother and stepfather in a large Southern city in the US in a poor neighborhood known for gangs and drugs. Having been raped by her father and then stepfather almost every night since she was 9, Kira joins a gang in the hopes of being protected by her gang boyfriend. She soon learns that she has traded her stepfather for the gang members who pimp her out to older men in the city.

4.3 Sex Tourism

4.3.1 Sex Tourism

Sex tourism involves travel for the purpose of engaging in sex, and a large part of sex tourism is traveled to have sex with children. Just as travel is on the rise after COVID-19 restrictions have been eliminated, so is sex tourism. However, it is a

misnomer to call sex with children tourism because the sexual exploitation of children is a crime, so rather than call these people sex tourists, they should be simply called criminals [8]. According to ECPAT:

1. Offenders can be domestic or international tourists.
2. When the crime is committed overseas, offenders are rarely punished at home.
3. In Thailand, tourism is a major income stream and approximately 14 million visitors per year come, any to have sex with children.
4. Law enforcement in many developing countries is weak and poverty forces children into survival sex.
5. U.S. passports issued to convicted sex offenders contain a unique identifier and can be revoked if a tourist is found to be engaging in sex with children abroad [9] (US Dept. of State, 2023).

4.3.2 Case Example

Randall is a married company CEO who travels abroad extensively for business. He is also a pedophile. He invents excuses to travel to countries noted for sex tourism with children so that he can indulge his desires. Although prostitution is legal in several countries, the US State Department can revoke passports and prosecute extraterritorial child sex abuse with imprisonment up to 30 years. On his way home from one of these excursions, he waits for his flight in the gate area and reviews child pornography photos on his phone, but fails to notice an airline employee sitting nearby. The airline is a signatory to the Code of Conduct for the Protection of Children from Sexual Exploitation in Travel and Tourism [.] and the employee has received special training to identify and report people involved in human trafficking. Randall is arrested, prosecuted and when evidence of his years of extensive travel to places known for child sex trafficking, he is sentenced to 30 years in prison.

5 Forced Labor

5.1 Forced Labor

Forced labor has risen steadily and according to the ILO 2021 data 27.6 million people are in forced labor at any given time [5]

1. Women and girls comprise 11.8 million.
2. More than 3.3 million are children.
3. Forced by far the largest number are in Asia and the Pacific, with Europe and Central Asia second.
4. When expressed as a proportion of the population, forced labor is most prevalent in the Arab states.
5. Most occurs in the private sector and numbers can be confusing because sometimes forced labor includes forced commercial × exploitation and sometimes not. Some occurs by state such as abuse of prison labor.
6. During the COVID-19 pandemic, millions were made more vulnerable to exploitation due to job cutbacks.

7. More than half of forced labor occurs in upper-income countries and touches all aspects of the economy, especially domestic work, agriculture, and manufacturing.
8. Men account for the most victims in forced labor except in the sex trade, though they are victims there as well.
9. One-fifth of people in forced labor are in debt bondage—a condition of manipulation in which traffickers keep people in debt for years by inventing new tasks or claiming increases in expenses.

5.2 Case Example

Carlos is a 30 y/o man with a wife and 3 kids in Honduras. He sees an ad for a company recruiting workers for a factory in the US and applies through a local man who promises him a salary of 12/h, triple what he makes at home. They ask for a year-long commitment with a promise to bring his family at the end of the year. He is only asked for $500 US to pay his airfare to Miami. When he arrives, he is driven to a "factory" in the Everglades, where he packages illegal drugs. The manager holds his passport and explains all the deductions from his salary for "unexpected expenses-food, shelter, clothes" so that he quickly enters into debt bondage and has no extra to send to his wife. The workers are housed together in a locked bunk room, fed simple rations, and their families threatened if they try to leave.

6 Organ Trafficking

6.1 Organ Trafficking

In a comprehensive report on the organ trade, the Canadian Parliament [10] found that

1. Techniques in organ transplant surgery have improved to the extent that demand far outweighs supply, leading to a thriving black market in organs.
2. Where there is a supply deficit, there is lucrative criminal activity. Though organ trafficking is illegal in most countries, as many as 10% organ transplants involve black-market organs.
3. Illegal profits are about $840 million to $1.7 billion US annually.
4. The range for organs is $50,000–$120,000 US but little of that goes to the donor.
5. Donors come from poor communities and may be tricked or coerced, but extreme poverty creates desperation to the extent that some donors willingly enter into the "contract."

In her report for The Exodus Road, [11] Maginn noted that kidneys are the most common organ for the black market followed by livers and corneas. Emerging markets exist for human eggs, skin, human embryos, and blood plasma.

6.2 Case Example

Hamza is a 30-year-old healthy but poor man from a remote area of Pakistan. He has no prospects to make a living on his own but his friend will train him to repair automobiles if he buys a stake in his business for $1000 US. The friend directs him to someone in the city to sell a kidney where he is paid $1000 US. He begins to suffer terrible abdominal pain and is disabled. He never knows his kidney was resold by the traffickers for $250,000 for a patient in Europe.

7 Nonconsensual (Forced) Marriage

7.1 Children

According to the United Nations Human Rights Commission [12]
1. Child marriage is marriage of anyone under the age of 18.
2. One in five girls is married as a child more than 650 million today.
3. Education of girls and public awareness have prevented an estimated 25 million child marriages globally in the past decade.
4. No region is on track to eliminate child marriage by 2030 as set out in the Agenda for Sustainable Development.
5. COVID-19 with its concurrent economic effects increased the risk of child marriage.

According to the World Economic Forum [13]
1. Every 2 s a girl becomes a child bride.
2. Married girls in developing countries account for 90% of adolescent pregnancies.
3. If child marriage and pregnancies were eliminated, we could cut the gender education gap in half.
4. Poverty accounts for almost twice as many child marriages as affluence.
5. The international community has committed to ending child marriage but even though many countries set the minimum age at 18, social norms allow exceptions.

7.2 Case Example

Grace is a 30-year-old woman with a master's degree in counseling and works with survivors of child marriage in a small Midwestern town. As a survivor herself, she struggles daily to overcome her own trauma. Raised in a Christian home in a small town, she was trained to be respectful and obedient to all adults and was involved with many church activities under the supervision of a church youth counselor—a 35-year-old single man who took a particular interest in Grace. He seduced her before she understood what was happening and she became pregnant age 12. Scandalized, her parents insisted she marry the man, who was eager to oblige. His kindness turned to brutality once they married. When Grace told her

parents, they insisted she was over-reacting and she just needed to be a better wife. She endured the marriage for 10 years and became a widow with 3 children at the age of 22 at which time she moved away and started a new life with help from an activist teacher.

7.3   Adults

1. According to the [14] as many as 22 million people were living in forced marriage—14.9 million are women and girls.
2. Estimates are conservative since there are no reliable numbers on child marriage globally.
3. Although many countries have outlawed child marriage, all forced marriage is on the rise. Explanations are that poverty, lack of education, the pandemic, conflicts, climate change and distress migration make people more vulnerable.
4. In conflict regions, women and girls are sold into marriage to fighters, where they endure lives of abuse.
5. The Arab states account for the highest rates of forced marriage.
6. Prevalence is higher for females than males in every region.
7. Two in five were children when married.
8. Families play a big role in forcing women and girls to marry to cancel debts, resolve feuds, or simply to receive payment.
9. Long-standing patriarchal structures that devalue women and are present in fundamentalist regions account for the continuance of forced marriage.
10. Coerced takes the forms of violence—either physical or sexual or both—to physical restraint or emotional pressure.
11. When married, they are further exploited in many ways both inside and outside the home.

7.4   Case Example

Damsa is an Afghani woman aged 25 married to a British citizen originally from the same village in Afghanistan. Her husband, Aazar, is severely disabled, and his parents convinced Damsa's parents to marry her to their son with the expectation she would take care of him. Neither Damsa nor her parents were told the truth about Aazar's severe learning disability. She and her husband were married without meeting each other, and she was shipped off to London to live far away from her family. Once married, she is treated like a servant-forced to cook and clean for the family, deprived of her passport and money, and expected to submit regularly to her husband's clumsy sexual attempts in order to produce grandchildren.

8 Child Soldiers

8.1 Child Soldiers

According to UNICEF [15]
1. Between 2005 and 2020, more than 93,000 children were verified as recruited into armed conflicts but this is a conservative estimate.
2. Referred to as soldiers, these children suffer extensive forms of exploitation and abuse and are used not only as fighters, but as scouts, cooks, porters, guards, messengers, and more. Girls are often subjected to rape and forced to "marry fighters."
3. Children are recruited by force, trickery, manipulation and are driven by poverty and survival.
4. Subjected to many forms of violence, they may be required to participate in harrowing training or initiation ceremonies, to undergo dangerous work, or to engage in combat—with great risk of death, chronic injury, and disability. They may also witness, suffer or be forced to take part in torture and killings.
5. They are deprived of proper food and living conditions and might be given drugs.

8.2 Case Example

Jelani and Safiya are 12-year-old brother-sister twins from West Africa. Their village was torched, and they saw their parents murdered by rebel forces. The twins were kidnapped and taken to the rebel camp where Jelani was trained to be a "soldier" and Safiya was "married" to the leader. The boys were forced under penalty of their own deaths to raid villages, rape the women, and murder the older men. Girls who resisted were tortured and killed as a deterrent to others. The young boys and girls were kidnapped where they suffered the same fate as the twins. Jelani was lucky to be rescued and placed in a rehabilitation camp, but Safiya died giving birth to a stillborn baby.

9 Black-Market Adoptions

9.1 Baby Trafficking

The term baby factory is used interchangeably with "baby farms" or "baby harvesting" and refers to children from birth to 1 year found in factories or farms. Baby factories refer to all acts involved in the transfer, sail or receipt of babies within national or across international borders through stealing or false adoption, fraud or deception for the profit of the traffickers [16]. Historically baby farms were places where unwed mothers could deliver in privacy, give up their babies and return to their previous homes, no one the wiser. The babies were then adopted on the black market. However, the practice has evolved into a situation where women are

impregnated in order to produce babies to sell. For example, prostituted women who become pregnant and are not allowed to keep the child are sent away so that the traffickers gain a profit from selling the children.

9.2   Case Example

Katya is a 20-year-old prostituted woman from Moldova working in France. She becomes pregnant and asks to have an abortion but her trafficker also deals in black-market adoptions so he makes her work until the week before she is due, then sends her to a "baby farm" in the country where she gives birth to a little blonde-haired, blue-eyed baby boy. She knows he will be taken from her but begs to hold him for just a moment. The caretaker does not allow any bonding. The child is removed at once and given to a local woman who is paid to breastfeed him until old enough to be sold to a German couple who are told his parents were killed in a car crash in Amsterdam. Katya is returned to the city where she goes back to work immediately.

Sunny is an 18-year-old college student who earns tuition money as an escort. She works for a high-end escort agency. She becomes pregnant and the agency owner offers to give her baby to an "adoption agency" run by her brother, a lawyer. She is paid $10,000 for "expenses" and the agency sells her baby to a couple not approved by a reputable agency for $100,000.

10   Resources

The table describes some resources available to address some of the issues in human trafficking. No attempt is made here to list all resources because the number is increasing as public officials and professionals pay more attention to human trafficking (Table 2).

In addition to these resources, the book contains appendices with additional materials that might be helpful to study, teach, and conduct research on human trafficking.

10.1   Films

Appendix A is a list of films on human trafficking. No attempt is made to critique them, but they provide diverse perspectives on the various types of human trafficking.

10.2   Policies

Although policies and procedures to guide organizations in addressing human trafficking are scarce and underdeveloped, some groups have attempted to help

Table 2 Resources for human trafficking

Resource	Description
ECPAT International	An international organization to end child sex trafficking, ECPAT has 124 civil organization members in 104 countries. In the US, prominent members in tourism and travel include major hotels and airlines, among them Hilton, Hyatt, and Marriott and Delta and American Airlines. Training of flight crews and ground support staff focuses on recognizing signs of human trafficking such as adult and child passengers traveling together but not behaving normally: child not allowed to interact with others and child seems subdued or frightened. Training is a small part of the efforts of ECPAT [ecpat.org]
Polaris project	Operates the national hotline number for the United States (888-373-7888.) Also provides many teaching materials for professionals and the general public
State of Georgia task force on human trafficking	In 2011, Governor Nathan Deal called a summit that pulled together professional from criminal justice, health and social services, and others interested in ending human trafficking in Georgia [www.justice.gov]. This meeting resulted in a task force which was the first state-wide response to human trafficking. It currently functions as a major component of the state under the direction of the Criminal Justice Coordinating Council [cjcc.georgia.gov]
City of Phoenix, Arizona	In 2013, the city council decided to make Phoenix a model city to address human trafficking. They created the Compass Plan, a 5-year strategic plan involving resources from a variety of agencies. With the help of experts in human trafficking, they created Starfish Place. The city had bought a 15-unit housing building consisting of two and three-bedroom apartments and renovated it to provide housing and services to victims of human trafficking. Their web site contains training materials for medical, social services, and law enforcement professional as well as information for parents and children [phoenix.gov.]
Shelters for survivors	Many individuals and organizations have opened shelters to provide a safe place for victims of sex trafficking to live until they are able to plan their futures. Some examples are churches, survivors, and people who simply care about this vulnerable population. Some are faith-based, not to proselytize, but simply to provide an ethical and hopeful frame of reference in a safe environment that reinforces the idea that the victims are worthy of respect and can transform from victims to survivors. In Appendix Y, a chart of shelters for sex trafficking survivors around the world represents a small sample of available resources. Some have government support but most were started by individuals touched by the plight of victims forced into a hopeless life of exploitation

employees identify, treat, and refer victims who come to them. Appendix B is a list of these beginning attempts.

10.3   Syllabus

This book is designed as a basic text in human trafficking and is relevant to all disciplines. A survey of courses resulted in the discovery that most courses at this writing focus mostly on forced labor and sex trafficking. The editors believe students

should be knowledgeable about all forms. A sample syllabus in Appendix C provides a broad overview and can be adapted to the needs of any discipline. The syllabus includes a bibliography if classic and more recent books on human trafficking.

10.4   Missing and Murdered Indigenous Women

This topic is only beginning to be acknowledged by the law enforcement and social service communities as a result of indigenous activists. A chart with a variety of web sites on the topic is provided in Appendix D.

10.5   Human Trafficking Grants

A sampling of grants available for services and research in human trafficking is available in Appendix E. Additional resources might be found in specific communities that have task forces for human trafficking.

10.6   Reintegration of Child Soldiers

Efforts are ongoing to assist child soldiers overcome the trauma they experienced in order to be reintegrated into supportive communities. Some resources are found in Appendix F.

10.7   Shelters for Sex Trafficking Survivors

Churches, individuals, couples, survivors, and local governments have taken on the task of providing safe housing for survivors once they leave their traffickers. Appendix G lists some but this table is by no means exhaustive. Readers are urged to look in their own communities for resources for survivors.

11   Special Considerations

The United States and Canada have seen an increase over the years of missing and murdered indigenous women. Young women and girls go missing on the reservations and when they travel to the cities to find work or visit family. In North America, indigenous people come from many tribes and are scattered across all regions. Exact numbers are not known, but, according to the Federal Bureau of Investigation (FBI) at least 68 women of 183 native people I the United States have been reported missing by their families. The average is 25 when reported missing. Some end up in the sex trade, some remains are discovered, but most are not found [17].

Secondly, in the ongoing Russian invasion of Ukraine there are numerous reports of sexual assault of Ukraine citizens by Russian soldiers who use rape as a weapon of war. Rape, gang rape, and torture are not confined to women and girls. Men and boys are also subjected to such violence. The refugees are mostly women and children whom opportunists view as a new source of victims. Citizens of the neighboring Poland, for example, flood the crossings with food, clothing, and necessities to aid the refugees and most are generous, well-meaning humanitarians. However, there is limited screening so traffickers can blend in and offer rides to refugees to their next destination. Not all make it safely. Special attention to the increased risk of human trafficking of refugees from Ukraine is ongoing by the UN and member nations, particularly in bordering countries such as Poland [18].

12   Summary

As an introduction to a complex, global, and increasing social issue, this chapter is a brief introduction. Some facts were presented to provide a sense of the extent of this global emergency. Case studies were written to illustrate the types of human trafficking and to give readers a personal connection to the experience of people who have been enslaved in modern times.

Discussion Questions
- Reviewing the definition of human trafficking, identify the characters who could be prosecuted in each case study.
- For each case study, identify possible sources of support for the trafficked person.
- Compare and contrast the methods of recruitment used by a variety of traffickers.

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A Cauldron of Tears: Cultural Factors and Vulnerability in Human Trafficking

Susan M. Schwartz

1   Introduction

Human trafficking is a criminal industry that occurs, and at times, operates on a global scale, impacting tens of millions of people of all ages, genders, and races. As an industry, trafficking is extremely lucrative, which is made more attractive by an appalling lack of convictions [1]. Operating with immense impunity, the abuse and exploitation of trafficked persons span a multitude of practices that prey on those who are especially vulnerable, desperate, fleeing, or trying to protect loved ones.

We live in an interconnected world that becomes more global every day. This globalization brings new opportunities, new priorities, and new complexities. The global scale of human trafficking presents a challenge to us all, whether we are professionally responsible for treating victims of trafficking, or unwitting participants in a global system of inequities and oppression that devalues people and perpetuates violence. This chapter discusses the cultural factors that create vulnerability to human trafficking and the factors on which human trafficking relies. Perhaps, if we can understand the pillars upon which trafficking stands, we can begin to dismantle the structure; not at a local or regional level and not by focusing on a specific population or crime, but instead by addressing the root causes of human trafficking, a wildly profitable industry that relies on oppression, vulnerabilities, inequities, violence, and the exploitation of people who are denied their human rights, dignity, and freedom.

The scope of the problem is profound. No population, no region, perhaps no one, is truly safe from either the potential tragedy of victimization through trafficking, nor of the responsibility as a global citizen to understand and redress this crisis.

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Human trafficking takes numerous forms and cuts across multiple industries. This chapter considers the cultural factors influencing and promoting human trafficking, including sexual exploitation, forced labor, domestic work, child soldiers, mail order brides, and "black market" babies born in Nigerian baby factories. Indeed, it is a significant undertaking to examine the broader trends of trafficking of humans in the countless communities, cultures, and states in which trafficking operates, and then identify the common factors that facilitate this expansive industry.

The guiding framework for this chapter is the socioecological model ("SEM"), developed for the World Health Organization and used extensively in public health [2]. This model is specifically suited for examining the numerous sociocultural factors behind human trafficking and how these factors facilitate and interact, or intersect, with individual and population vulnerability in ways that place people at risk for trafficking. The model presents four interrelated spheres: individual, interpersonal, community, and societal. However, these spheres do not operate in isolation; it is the intersection of factors across the spheres that creates vulnerability to trafficking.

The SEM allows us to identify, connect, and address the expanding reach and scope of human trafficking. By disrupting the interplay of these factors, we can increase opportunities to mitigate vulnerability and intercept the trajectory of violence and despair associated with human trafficking.

2   Individual Sphere

The first sphere of the SEM identifies factors that increase the vulnerability of individuals to potential trafficking situations such as biological and demographic characteristics [2]. Among the many factors noted, three are strongly associated with victimization: age, gender, and poverty. For example, children comprise approximately 34% of victims worldwide, and more than half of victims in low-income countries; perceived as easy targets, they are trafficked primarily for sexual exploitation (72% of girls) and forced labor (66% of boys) [1]. Female gender itself is a risk factor, with approximately 70% of victims of all ages identifying as female.

Children can be especially vulnerable to trafficking for numerous reasons, including socioeconomic status, level of education, ethnicity, religious beliefs, fear, feelings of shame, views about family responsibility, and previous abuse; these factors can (and do) intersect and increase vulnerability.

Socioeconomic status and low educational attainment are inextricably tied to vulnerability to trafficking when cultural factors intersect. Along with a lack of employment opportunities, poverty is a major factor in the trafficking of people of all ages and genders [3–5] and noted as being the primary factor in many cases [6]. Economic factors are cited as one of the root cause for boys trafficked into forced labor in Afghanistan [7], the soaring numbers (in the tens of millions) of commercial prostitutes in India [8], an increased risk for child marriage [9], forced marriage and

bride trafficking [10], sexual exploitation of boys and young men in Cambodia [11], and bonded labor in India [12].

In a system known as *criadazgo* in Paraguay, children as young as age 5 from impoverished families are sent to live with wealthy families as domestic servants, cleaning, cooking, and babysitting in exchange for room and board [5]. This historically embedded, colonial era practice is considered a culturally acceptable way for poor parents to provide a better upbringing for their children. The reality, however, is that *criados* live as slaves, not as children raised by loving, well-to-do parents. Often living in squalid conditions, *criados* are denied an education, may be sexually exploited and physically abused [5] in ways that are potentially serious enough to result in death [13]. Children who escape to return to their families find that they are no longer welcomed in their birth homes due to continued poverty [5]. Not surprisingly, *criados* are at a high risk of re-trafficking for sexual exploitation, as is frequently the case for domestic workers [14]. In 2017 alone, approximately 47,000 children, primarily girls, are known to have worked in domestic servitude in Paraguay [13].

In Nigeria, there is a significant association with large family size and becoming a victim of trafficking [15]. While the socioeconomic factor is evident, a deeper exploration of the cultural impetus for a large family size provides context. For example, among the Igbo of Nigeria, a fertility rite known as *igbu ewu ukwu'* honors and elevates the status of a woman on the birth of her tenth child [16]; the honor remains with the birth mother, as children from these large families are more likely to be given to traffickers [15].

Low educational attainment and low literacy are strongly associated with trafficked victims. In sub-Saharan Africa, 80% of trafficked women are impoverished and lack a basic education [17]. In India, more than 75% of bonded laborers are illiterate, and less than 7% have completed primary school [12]. While a attaining a basic education is critical for economic stability, those who lack the ability to read are also vulnerable to signing contracts that commit them to lifelong debt peonage, domestic servitude, and all of the harbingers of a lifetime of destitution.

3   Relationship Sphere

The second sphere of the SEM considers the impact of relationships with peers, partners, and family members. The relationship sphere includes a wide range of factors including culturally defined family roles and expectations, domestic abuse, family instability and dysfunction, and peer luring. The impact of these factors varies and will therefore differ in the way they contribute to the risk of trafficking.

The impact of family relationships can be seen, for example, in Nigeria's "baby factories," which are covert operations that sell babies to parents desperate for a child, particularly a boy. While many of the teens held at these factories were lured from a distance by traffickers promising domestic work for pay, others enter due to family stressors. Girls and young women coming from families long impoverished (intergenerational poverty) are pressed into becoming literal breeders to help

support the family [18]. Intergenerational poverty and family pressure intersect with a market for these babies, a valuable commodity for childless Nigerian parents due to the social prestige of having children, who are also viewed as providing a safety net in their old age. The situation is further exacerbated by a legal system that prevents girls from inheriting property, siphoning away family assets if they do not have a son. The resulting market for babies, boys in particular, is technically illegal; however, law enforcement is noted to be corrupt, arresting the proprietors of these "factories" and then promptly releasing them [18].

Another example of the impact of family relationships on trafficking is the forced marriage of children, which occur with alarming frequency on a global scale. Not to be confused with arranged marriages, in a forced marriage, one or even both of the parties are married against their will. Family members can have a significant influence on the marriage choices of their children, often exerting control over their lives. The selection of a spouse is often seen as a decision that impacts the entire family. As such, families may consider their daughters property that can be bartered to gain status. However, families experiencing extreme poverty may believe that they are actually protecting their children [9]. Children who resist can be subjected to abuse from their own families, as well as from the family they marry into. Approximately 12 million girls under the age of 18 are married each year; in the least developed nations, approximately 40% of girls are married while underage, and 12% are under the age of 15 [19].

As seen in these examples, the effects of the relationship sphere can be far reaching and deeply embedded (as with intergenerational poverty) such that these effects should be considered carefully in the assessment as to the acceptance of human trafficking within a community.

4   Community Sphere

Community factors are the third sphere that, together with the other spheres, create potential for human trafficking. The community sphere includes factors such as the existence of conflict, the use of child soldiers, and the commonality of migrants moving through the community.

Conflicts, whether international wars, revolutions, or ongoing civil unrest, share the common thread of being a breeding ground in which crime often thrives amidst the ongoing chaos [20]. That crime very much includes human trafficking and exploitation which often follows forced displacement due to the conflict. Conflict zones around the world have extremely high scores on vulnerability models in the global slavery index [9]. Border crossings in conflict zones are especially fraught with crime and trafficking. Amidst the tumult, armed forces may exploit civilian women, "enlist" child soldiers into their ranks and allow forced marriages. We can see a vivid example of this as arising in the Democratic Republic of Congo ("DRC") with the marginalization of women. In the DRC, it is not uncommon for soldiers to hold women and girls at gunpoint during raids then force them to be their wives.

The women are kept and controlled by threats of violence to be used and exploited as prostitutes and laborers.

The conscription of child soldiers is another example of the influence of the community sphere. Most child soldiers are from the poorest, least educated, and disenfranchised communities in conflict zones [9]. The children are abducted (at times, after witnessing the murder of their parents), abused, and forced to witness public displays of violence [21]. Since many of the children are young when they become soldiers, they develop loyalty to the movement as a family substitute, a trait that is further exploited by the armed groups. For example, in Sudan, the Lord's Resistance Army is organized around a military familial unit. The commander is the "father" with his senior wife the "mother." Through this, the young child soldiers grow up and into this military familial unit, with their loyalty ascribed to this family as well as the violence associated with it.

Finally, in the community sphere of factors, we encounter refugees and migrants, both considered a vulnerable population worldwide. People migrate within and across borders for numerous reasons, including socioeconomic pressures, ethnic violence and conflict, environmental disasters, and political upheaval. Some leave forcibly and some of their own accord. Situations of mass displacement, such as what occurred in Ukraine starting in February 2022 with the invasion by Russia, constitute a particularly fraught situation for displaced persons. When mass displacement occurs along with the breakdown of a community's resources (such as law enforcement and health care systems), refugees and migrants become more vulnerable to trafficking; displaced children are the most vulnerable due to the potential of being separated from their families [20]. Common to refugees and migrants is their lack of basic protections, support networks, and access to information, especially when there is a language barrier. Even staying within a country's own borders does not protect a refugee; those living in camps for internally displaced persons are also vulnerable [7].

Understandably, poverty, limited economic opportunities, and low educational attainment can intersect in a way that drives people to look for work outside of their home communities. Geographic areas with limited law enforcement or government regulation may give rise to factories, farms, and mines that benefit from trafficked or forced labor. Migrants seeking domestic labor are particularly vulnerable as the trafficking into the privacy of a home removes them from the public eye.

Due to deep-rooted racial and ethnic intolerance, migrant workers are often subjected to discrimination, with members of law enforcement and law-making bodies potentially prejudiced against and less likely to protect them. This climate of xenophobia can lead to the passage of discriminatory laws and unequal treatment. The legal system can further exacerbate the situation for migrant laborers; when there are barriers to legal migration, this may push laborers further underground, which in turn increases their vulnerability, whether it be due to their reliance on smugglers or abuses in the detention system [9].

In sum, these factors in the community sphere combine with others to create a situation of vulnerability. Rather than providing law and order, safety and welcome,

the community may disenfranchise and disengage members, while distending the already bloated human trafficking industry.

5   Societal Sphere

With the understanding of how the previous three spheres intersect as cultural factors facilitating human trafficking, we now turn to the fourth sphere, which are the broader cultural and societal factors. Not surprisingly, these broader factors heavily impact the extent of, and tolerance for, human trafficking. Norms such as gender inequities that reinforce male dominance, entrenched systems of class and caste, racial and ethnic conflict, religious beliefs and practices, acceptance of child labor, the normalization of violence and social policies serve to shape and maintain the broader cultural context in which trafficking occurs. When these factors combine with elements from each of the other factors, the result is once again, very fertile ground for trafficking. Sociocultural factors have enormous influence on the behaviors of individuals, relationships, and communities and are inextricably linked with human trafficking. As such, we will explore several of the factors in greater detail.

5.1   Religion

The interplay of traditional religious belief with other elements of the four spheres illustrates the importance of understanding how various factors intersect with the person and environment to foster trafficking.

An example of this is seen in India with the *Devadasi* system, which is a form of ritual servitude. *Devadasi* is a culturally embedded and traditionally sacred practice whereby young, prepubescent girls, primarily from the lowest levels of caste society (the *Dalit*) are dedicated to temples to serve as cooks, cleaners, and helpers for the priests in return for blessings on the family. Upon reaching puberty, the *Devadasi* girls also become sexual slaves to the priests and are prostituted to men from the dominant caste [12]. Looking at this system from the perspective of the SEM, it is clear that poverty is often the main cause of families "dedicating" their young daughters to a temple; however, the religious connection provides justification and legitimacy for the practice, with the girls considered public property and subjected to social exclusion, stigma, and discrimination [8]. Furthermore, entrenched gender inequities and discrimination against the lowest caste Dalits create little incentive for the community or government to address the problem. The cycle is often perpetuated, with a family history of *Devadasi* all but condemning these girls to a lifetime of abuse and stigma. Children born to *Devadasi* are also subjected to discrimination with limited opportunities as they have no legal father and are potentially confined to the same fate as their mother: being trafficked [8]. Indeed, serving as a *Devadasi* is one of the main links to trafficking girls for sexual

exploitation [8]. The *Devadasi* system truly exemplifies how gender oppression, poverty, religion, and caste discrimination intersect to foster trafficking.

A similar system of ritual servitude, *trokosi*, is found in West Africa, where traditional religious and spiritual beliefs permeate the culture. *Trokosi* are enslaved girls (as young as the age of 5) sent by their families to live as servants to the gods as compensation for a crime committed by a family member [22]. It is believed that the family will suffer significant misfortune, such as disease or death, if they fail to sacrifice a virgin daughter to the *trokosi* system. For crimes such as homicide, families may be required to sacrifice several generations of girls. The priests require that the girl is a virgin to become a "wife of the gods." Once there, the *trokosi* girls are forced to work long days as domestic servants, providing hard labor on the farms, and submitting to the sexual demands of the priests, who have full ownership of the child [23]. *Trokosi* are denied an education, health care, food and are subjected to beatings. Servitude can last for the remainder of their lives; upon death, the family may even have to send a replacement daughter.

In Edo State, located in southern Nigeria, young women who want to escape from the poverty and extremely limited economic opportunities may find themselves looking to a local madam to sponsor them for employment oversees. The price is years of servitude until their expenses have been paid, as dictated in the "contracts" signed by these young women [24]. The contracts are then sealed in a ceremony performed by a priest who binds the woman to the contract through a ritual of *juju*, during which the woman drinks a mixture containing fragments of hair, fingernails, and blood. The message is clear: the contract is effectively signed and sealed in their blood, with a spiritual curse that traps women into sexual slavery with threats of harm or death to their family [25]. Even when presented with the option of rescue, Edo women are often too terrified to escape and suffer the consequences of breaking a pact sealed by a priest with *juju*. In 2018, Edo's traditional leader, Oba Ewuare II, set out to address the practice using his power over other priests [26]. He first released all those bound by *juju*, then cursed anyone participating in human trafficking within his kingdom.

5.2   Gender

Cultural beliefs surrounding gender and gender roles are a major factor in human trafficking industries. Gender inequality is a key risk factor for trafficking; countries with structural gender inequality (where the inequality is codified into law) have higher rates of human trafficking [27]. Gendered roles shape, and are shaped by, power dynamics that impact the ability of women to have agency over their own lives, most especially in trafficking situations. Furthermore, specific facets of gender discrimination and oppression are significantly associated with trafficking, including norms that consider women the property of males, male privilege, and violence against women, particularly rape [28]. The intersection of gender with religion can have a significant impact (especially when religion reinforces beliefs in male superiority and privilege) providing legitimacy and acceptance [24].

As previously noted, 70% of trafficked victims are female; of those over the age of 18, 77% have been trafficked for sexual exploitation, compared to 72% of girls under the age of 18. These startling numbers indicate that cultural norms can significantly reinforce gender inequality and shape attitudes about male privilege and male superiority, placing less value on girls and women. Indeed, gender inequality is noted as a major factor for trafficking worldwide: in Latin America, where it can occur in the form of *machismo*, which treats girls and women as subservient [5]; in parts of India, where gender bias views women as possessions and denies them a voice [3, 4]; and in Southeast Asia, China, and Africa where a higher value is placed on male children [4, 29]. Of particular note is the gender imbalance created by a cultural preference for sons in a male dominated society, such as China, that contributes to the acceptance of bride trafficking [29]. The one-child policy in China has created a situation in which there are 30–40 million more males than females, resulting in a deficit of women available to be married. Arguably, this deficit (driven by a preference for sons) is a significant cause of bride trafficking [30], with the gender imbalance intersecting with cultural pressure on men to marry for status, career advancement, and continuation of the family lineage [10]. Men then engage in the "purchase" of women from families and traffickers in neighboring countries such as North Korea, Myanmar, Cambodia, and Vietnam. The very fact that the women can be purchased reveals the perception and power associated with claiming women as property: once married, these brides are considered property by their husbands, with the rights of ownership extending to significant control over the women's movements, sexuality, and labor [30]. Ownership of a girl's or woman's sexuality is also found in the practice of forced prostitution of daughters in family brothels and the prostituting of wives to other family members [4].

Sexual exploitation of women is a global problem and not solely limited to societies with significant gender imbalances. However, the intersection of sexual stereotypes, exploitation, and objectification of women with gender inequalities is a powerful risk factor for sexual violence [24, 31]. Sexual stereotypes are even more damaging when racialized, such as the portrayal of women and girls of color as more sexually available and promiscuous [32]. Pornography depicting females of color is more likely to be violent and depict the females as receptive to erotic pain. Sexual stereotypes that objectify women are reinforced in the media, through pornography, and through rape myths that justify male aggression [24]. Sexual violence against women may be both culturally acceptable and condoned by the family [33]. *Machismo*, a culture of "toxic masculinity" pervasive in traditional Latin American societies, is understood, through the sexualization of females from a young age, to normalize sexual exploitation and violence [34]. The *machismo* driven high tolerance for violence against women is a large factor in Latin America's highest rates of gender-based violence in the world [35].

In parts of Africa, women are considered second class citizens, where they earn less money and have greater limitations to educational and economic resources [22]. Combining these elements (devalued and unequal access to education) with traditional practices, we then see the acceptance of the *Wahaya* (or the "fifth wife"). Practiced mostly in Niger, a Muslim country that allows polygamy up to four wives,

some husbands purchase a fifth wife who is "unofficial" and serves a slave to the other four wives and the husband [22]. The *Wahaya* performs domestic chores, watches the children, cares for livestock, and is subjected to rape and abuse. Eighty three percent of these "fifth" wives are under the age of 15 when they are first "married" and are typically the daughters of other slaves, including *Wahaya*. It is through the selling of the daughters of slaves that we see the cycle and culture of slavery passing through generations. These cycles may continue in ways that at times seem both literally and metaphorically unbreakable.

Culturally dictated gender inequities and roles both underpin and legitimize various practices of subjugation. Taken to an extreme form such as that found in Afghanistan, these gender roles may be significantly redefined. For example, the tribal organization of Afghani culture emphasizes both segregation and seclusion of females from society, excluding them from participating in public life and interactions such as dancing and celebrating. The impact of these cultural beliefs about gender roles, the relative value of males versus females, and the subordination of women have normalized and legitimized a practice known as *bacha bazi* in Afghanistan [36]. The tradition of *bacha bazi*, translated as "boy play," is rooted in Central Asian history and culture. Under this practice, young boys around the age of 10–13 are sold (by their impoverished families), kidnapped or lured, into a life of feminization, entertainment, and sexual abuse by powerful men. The gender roles are redefined, with women confined to the purpose of "having children" while boys are "for having fun" [37]. The boys, or *bacha*, are connected to an adult male who keeps them for physical as well as sexual entertainment; dressed in bells and makeup, the young boys are taught to dance like women and then used as entertainment at weddings and social events before being forced into sex with their owner and/or other men [36]. In addition to being feminized and raped, the boys are often subjected to physical abuse and forced labor. Owning one, or more, *bacha* serves as a status symbol among tribes, allowing for the open flaunting of the practice [37]. Law enforcement not only looks the other way, but is known to attend and participate in the performances. Once a boy grows a beard, he is no longer considered a *bacha*, and faces the stigma of reintegrating into society. Sadly, many of the former *bacha* themselves aspire to owning their own *bacha*, perpetuating the cycle of violence, trafficking, and slavery.

5.3 Caste

Groups that are marginalized across a society experience significant cultural oppression, often to the extent that they are dehumanized through racial and ethnic stereotypes [32]. This cultural oppression results in the denial of opportunities and resources based on race, ethnicity, caste, or class. The practice of "othering," or distinguishing between self (human) and others, allows for dehumanization and the subsequent acceptance of exploitation and violence [17]. Oppression based on caste is at the root of bonded labor in India, where 80–90% or more of the victims come from the lowest social group, or *Dalit*, also called the "untouchables" [12]. Deep,

intergenerational poverty intersects with caste-based discrimination to create a situation of extreme oppression and social injustice, with the *Dalit* deprived of basic resources and protections, including safe housing, education, living wages, and legal protection. Both a cause and consequence of this oppression, bonded labor is a system that relies on a creditor-debtor relationship, with high exit costs that were not part of an original agreement but extend, potentially, for an indefinite period. In some cases, the bonded individual is actually charged for not working, increasing their debt until it is insurmountable. *Dalit* children are particularly vulnerable and may be bonded to satisfy their parents' debts, spending their lives in slavery.

The intersection of caste and gender is exemplified in the practice of manual scavenging, a form of forced labor that involves cleaning human waste from latrines, sewers, and septic tanks by hand, broom or scraper, and hauling away the waste [38]. Women constitute the majority of community and private latrine cleaners, while men perform even more physically demanding and dangerous jobs like the cleaning of sewers and septic tanks. Working under abusive and threatening conditions, manual scavengers are at risk for numerous diseases such as cholera, hepatitis, and meningitis, as well as asphyxiation from methane gasses [39]. Sadly, the very work of manual scavengers—cleaning human excrement—reinforces the idea of being "untouchable," further stigmatizing and oppressing these millions of enslaved individuals. Manual scavenging is a hereditary form of forced labor, with children of scavengers continuing their parents' work, often beginning with the cleaning of school toilets [39].

6   Culturally Competent Care

Healthcare professionals are often uncertain about how to effectively respond to the unique and complex needs of individuals who have been trafficked. The process of cultural competence, or the ability of health care professionals to understand, respect, and effectively work with victims and survivors from diverse cultures, is critically important when planning and delivering care. Cultural competence emphasizes developing cultural humility and cultural awareness to provide culturally responsive care [40]. Cultural humility refers to acknowledging, respecting, and valuing different cultural perspectives, even when they conflict with your own [41]. Cultural awareness is the process of becoming knowledgeable about, and sensitive to, a client's cultural background, including their beliefs, customs, and values, and approaching care in a way that is respectful of these differences [42]. Cultural awareness also includes self-awareness, understanding how one's own background influences their perspectives and behaviors, and, importantly, how this awareness impacts interactions with people from other cultures. Culturally competent health care professionals recognize and respect cultural differences, while remaining cognizant of personal and structural biases.

Research on caring for trafficking victims in the United States is limited; even less is known about the needs of foreign-born victims. Engaging in cultural competence empowers health care professionals to offer care that is sensitive,

individualized, appropriate, and responsive to the client's needs. Health care providers can use their communication skills to begin developing a therapeutic relationship. Building trust with the client is vital, serving to normalize and validate the client's emotions, address barriers to treatment, and ensure the client's safety. Since victims may have intense feelings of betrayal, guilt, shame, and self-blame, they may be fearful or hesitant to disclose their situation or history [43]. Traffickers often manipulate victims to depend on them, distorting their views of and interactions with health professionals and undermining what could otherwise be a trustworthy relationship. This mistrust may be exacerbated by fear of deportation, discovery by traffickers or law enforcement, or being returned to an abusive home or situation. Health professionals need to take extreme care to use sensitive, non-judgmental language and body language to demonstrate empathy and acceptance, acknowledge the client's fears, and ensure that they are fully informed about confidentiality and safety.

Effective cross-cultural communication is essential; providers must actively listen, be attuned to nonverbal or hidden messages, and avoid stigmatizing language. Language barriers can make it difficult for victims and survivors to access resources as they may not speak the language of the country in which they are seeking care, and interpreters may be required. Interpreters can also assist with facilitating the disclosure of victims' experiences, building trust, and supporting them in navigating health services. However, finding qualified interpreters who are both experienced in providing trauma-informed services and fluent in the victim's preferred language and dialect can be challenging [40]. Cultural brokers, or individuals who share the same customs and language as the victim, may help provide social and cultural contexts. However, it is important to avoid using individuals from the same village or local community, as this may hinder the victim's willingness to speak freely due to shame, stigmatization, or even fear.

It should be no surprise that the psychological effects of human trafficking can be severe, with victims often losing basic life assumptions, including feelings of safety and self-worth. Victims often experience mental health disorders such as posttraumatic stress disorder (PTSD), anxiety, depression, and dissociative disorders. PTSD is common and may intersect with physical or somatic symptoms, leading to a more complicated clinical presentation. Symptoms of PTSD may include feelings of stigma, shame, anxiety, hopelessness and fear, panic attacks, hypervigilance, sleep disturbances, dissociative disorders, and suicidal ideation. Treating these conditions can be especially challenging due to the cultural, linguistic, and social barriers victims may face when interacting with health care providers [44].

Culturally responsive health professionals are aware that individuals from different cultures will experience, and express, illness in diverse ways [40]. For example, there are cultural differences in attitudes toward health, particularly mental health, where Westernized approaches such as talk therapy, or counseling, may not be acceptable or appropriate to a client's cultural views of health care and treatment [45]. Victims of trafficking need to be offered treatments that align with their cultural beliefs and practices, such as acupuncture, storytelling [46], folk remedies, or healing rituals [45].

Cultural factors impact how a person responds to being trafficked. In many cultures, psychological, emotional, and spiritual responses are not differentiated from physical reactions, and the impact of trauma is viewed as affecting the person as a whole. Combining cultural competence with trauma-informed care is one approach to treating victims and survivors. Trauma-informed care creates a safe and trusting environment, incorporates social and peer support when appropriate, empowers the individual to make their own choices, and is mindful of any social biases or structural inequities that may affect a client's care. Rather than assuming that all victims from a particular culture or trafficking situation will have similar experiences, trauma-informed care seeks to draw out information from each individual about their specific experiences, perspectives, and needs. Victims and survivors are then empowered to create their own narrative, exploring the impact of intersecting factors and experiences on their lives.

7 Summary

The socially unjust, yet extremely lucrative human trafficking industry impacts millions of individuals on a global scale. In this chapter, the cultural factors at the roots of human trafficking were examined through the lens of the SEM, with a focus on overlapping spheres and the intersectionality of factors. Individual, relationship, community, and societal factors intersect in ways that increase a person's vulnerability to trafficking, helping to drive an industry ready to exploit them. Poverty, gender roles and inequities, religion, discrimination, oppression, lack of education and job opportunities, and a lack of legal protection are the primary factors that contribute to the vulnerability of individuals to human trafficking.

The tragedy of human trafficking is made all the more tragic because it is continuous and cyclically pervasive among many generations and cultures. This profound stain on humanity is, as shown above, a by-product of the different spheres of sociocultural factors, and how they intersect to produce a persistent flow of victimized tears. The veritable cauldron in which those tears land cries out for action. Understanding how, when, and why trafficking exists (and is implicitly tolerated or explicitly allowed) can help address and potentially eliminate it at the root level.

Discussion Questions
- Why is it important to understand the multiple spheres of cultural factors that lead to trafficking?
- How do cultural factors intersect to increase vulnerability to trafficking?
- What are some of the vulnerabilities of children that can be exploited by traffickers? What about women? Migrants? People experiencing poverty?
- In what ways did this chapter enhance your understanding of human trafficking? Is there anything that you found surprising? If so, why?
- What can you do with what you learned from this chapter?

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Violence Against Women and Girls as a Systemic Global Problem

Donna Sabella

1 Introduction

The phenomenon of violence is literally as old as mankind itself, both literally and figuratively. speaking. It is probably safe to say that since the beginning of time there exists no one who has not been impacted by some form of violence either directly or indirectly through violence perpetrated upon family members, loved ones, friends, community, or a nation. Indirect exposure in today's day and age can include being harassed via social media, witnessing acts of violence via news media coverage or witnessing numerous other scenes that the public is exposed to on a daily basis, regardless of geographical location. Indeed, violence is acknowledged as a global and public health issue and crisis.

Historically speaking, we know that violence directed toward women is also as old as time, being accepted and even condoned—and that compared to women, men behave more violently. Roman law granted husbands life and death authority over their wives, and English law allowed husbands to discipline their wives and children with an object no wider than their thumbs. Part of the propensity for violence against women (as well as toward men) according to some biologists is that men have the male hormone testosterone, which can facilitate aggressive behaviors. Other believe that the male oriented and patriarchal society that exists universally helps to create a culture that encourages male dominance—even rewarding it at times—where women are seen as inferior and with limited, if any, human rights [1].

Whatever the reasons behind this phenomenon of violence directed toward women and girls, this chapter provides examples of the harms that befall women and girls everywhere. We begin with a discussion of gender-based and intimate partner violence.

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2   Gender-Based and Intimate Partner Violence

Gender-based violence (GVB) is a term used to define violence directed toward any individual based on their gender, and therefore violence directed toward females—including women and girls—is considered a form of GBV. According to the European Commission [2], while men and boys can be target of violence, women and girls are the main victims of GBV, which can include physical, sexual, and psychological violence. Regardless of the form that GBV takes, it is recognized as a violation of human rights. Violence toward women knows no social, economic, or geographical boundaries and is considered a global pandemic. According to the World Bank [3], globally 35% of women have experienced either sexual or physical violence, up to 38% of women have been murdered by an intimate partner, and 200 million women have undergone female genital mutilation (FGM).

We also know that LGBTQ and non-conforming individuals are at higher risk of being on the receiving end of a variety of acts of violence, which is especially true for trans women who experience a high rate of GBV [4]. The American Civil Liberties Union (ACLU) notes that murder rates against the trans population in the United States is on the rise, especially for trans women of color [5], a fact supported as well by the National Association for the Advancement of Colored people (NAACP) [6]. The above figures are for the US. Worldwide, in some countries, people can be arrested or even killed for being gay [7].

According to the World Health Organization (WHO), violence toward women is a major public health problem as well as a violation of women's rights. The problem is universal and occurs worldwide to about 30% of the female population, with intimate partner violence (IPV), which includes physical and/or sexual abuse, or non-partner sexual violence, ranked as the more frequent types of violence perpetrated upon women. In a 2018 analysis of data taken from 161 countries and areas from 2000 to 2018, the WHO reported the following percentages regarding the likelihood of a woman being victimized: "… prevalence estimates of lifetime intimate partner violence range from 20% in the Western Pacific, 22% in high-income countries and Europe, and 25% in the WHO Regions of the Americas, to 33% in the WHO African region, 31% in the WHO Eastern Mediterranean region, and 33% in the WHO South-East Asia region" [8]. Further, they estimate that approximately 38% of women who are murdered are killed by intimate partners. More recently, the United Nations Office on Drugs and Crime (UNODC) reported that in 2020 approximately 47,000 women and girls worldwide were killed by either their partners or other family members—leading them to conclude that on average, a woman or girl is killed by someone in her own family every 11 min. They further state that with an estimated 18,600 victims, Asia is the region with the highest number of victims in absolute terms, while Africa is the region with the highest level relative to the size of its female population [9].

As concerning as these figures are on their own, the pandemic has increased the incidence of domestic and IPV globally including in the United States. *The American Journal of Emergency Medicine* [10] and the University of Alabama News [11] reported that in 2020, the global rate of domestic violence increased between 25 and

30%. Of course, while the largest number of victims who report are women, domestic violence does occur to men, transgender, and non-conforming individuals, and those involved in same-sex relationships. The increase related to the pandemic is not surprising as it is believed that the situation made worse many of the risk factors associated with IPV such as increased drug and alcohol use, increased levels of anxiety and depression, and being isolated with a partner. Unfortunately, IPV is not the only form of violence directed toward women as the examples below show.

3   Global Examples of Violence

Throughout the world women and girls are subjected to various forms of violence and exploitation as indicated below. In September 2021, a woman in Mumbai, India was assaulted and raped, allegedly with a metal rod. She was found unconscious on a minibus. Only 34 years old, the victim was taken to a local hospital where she later died of her injuries. The suspect was eventually captured and confessed to having committed the assault and rape. Unfortunately, the victim is just one of many women in India who are victims of violence against girls and women. In 2021 among those raped and murdered included victims that were 9, 19, and 50 years old, the latter victim being attacked and gang-raped by a Hindu priest and two of his followers [12]. According to India's National Crimes Records Bureau, more than 32,000 reports of alleged rape of women occurred in 2019 [13].

In 2013 in Afghanistan, a young married mother of 2 was shot and killed in public in front of a crowd of approximately 300 people by her father for dishonoring her family. The woman had run away with a male cousin while her husband was out of town, but the couple returned 10 days later. The father had consulted with the town's religious leaders about what to do regarding his daughter's actions. Several of the leaders delivered the edict that the woman be killed publicly, which she was on April 22 [14].

Lest we think such violence against women occurs far from the Western world, we need only to look at what occurs in Latin America and the Caribbean. In a report issued by the Economic Commission for Latin America and the Caribbean (ECLAC), it was estimated that over 4000 women were the victims of femicide in 2020, a situation which the United Nations has referred to as a pandemic [15]. And while exact numbers are hard to come by as the definition and reporting of what constitutes femicide can vary, it is safe to say that femicide occurs everywhere, including, for example, in the Central African Republic, Jamaica, and South Africa [16].

And it is not just women who are assaulted and violated. Girls in many countries are not immune to various injustices and forms of violence. In Nigeria, for example, child marriages are not uncommon. According to Human Rights Watch, girls there are still being forced into child marriages against their will. Although the age to marry there is 18, there are numerous cases where girls well under that age are married off to in some cases very older men after which they are then abused. In some states and areas of Nigeria, the girls are forced into marriage at times by their families and are denied rights and access to education, and safe housing. They often

become victims of violence and have limited to no access to healthcare. Among the many examples supplied by Human Rights Watch is the story of a 15-year-old girl impregnated by her 60-year-old teacher in her school. Kicked out by her parents, she was forced to move into the man's house where his first wife, who also lived in the house, tormented the girl. Upon the first wife's death, the girl reported that she was psychologically and verbally abused by the husband [17]. According to World Vision, child marriage is not unique to Nigeria as it also exists in many other countries including but not limited to Niger, Chad, Mali Mozambique, India, and Mali [18]. Among the consequences for girls forced to marry as children include having their physical and mental health endangered, having limited or no access to education, realizing limited opportunity to economic independence, and experiencing an increased risk of being subjected to physical and domestic violence [19].

Forced child marriage is not the only form of violence and abuse visited upon young girls. Some countries, for example India and China—among indigenous as well as sophisticated cultures-, have a history of practicing female infanticide, although efforts have been made to outlaw such practices. While infanticide includes the killing of both male and female babies, female infanticide is more common than male infanticide. The causes for the higher rates of female infanticide are most often rooted in a culture or society's biased views against women. Such views include the belief that women are inferior to men and therefore female babies are inferior to male babies. This is closely associated with economic beliefs and practices in a given culture with the view that men are better earners and more likely to be able to support a family than are women. A married woman heads to the household and family of her new husband, leaving her family of origin at risk of losing whatever income the daughter may have been able to provide as well as someone to care for them in their old age. If a family has no daughters to raise then there are no dowries that need to be paid out, thus saving a family with limited economic resources from putting their own finances at risk. And the caste system factors in when it places females at a lower standing in the world than females [20, 21].

As we look at the violence toward women that occurs around the world, it is important to note that the United States is not immune to gender-based violence toward women and girls. Women and girls of all ages and from various backgrounds—ethnic, racial, religious, and/or economic—can become victims of sexual, physical, emotional, domestic, and dating violence. In addition, girls and women can be stalked and/or trafficked [22, 23].

While we know that women are often most at risk in their own homes at the hands of their partners or family members, or social customs and beliefs, the simple act of traveling alone can put women at risk of violence. Journalists Asher and Lyric Fergusson [24] put together a list of the 50 worst and safest countries for women to travel alone to and in. Based on 8 categories (among them safe to walk alone at night, IPV rates, gender inequality gap, and attitudes related to violence against women), South Africa and Brazil took the first and second spots, respectively, as the most dangerous. Among the safest countries were Austria, Ireland, Singapore, and Spain. The United States was ranked in the 19th spot.

4 Treatment of Women Throughout History

The above provide examples of modern time abuses committed against women, but such treatment and instances of violence and misogyny go far back in time. However, and interestingly, at various times in history, women could be exalted or debased. There is no one experience unique to all women throughout time. In some cultures and nations, women were seen as powerful—as capable of leading nations and as serving in important roles, while in other cultures, women were viewed as being weak and inferior to men—and existed to serve the men around them. Some cultures intentionally practiced femicide on female infants as female babies were considered inferior to male babies. During ancient times, in Greco-Roman cultures where women were expected to stay at home and tend to domestic duties, in the Celtic cultures women served in combat. During the Middle Ages, women were regarded as being prone to hysteria, and as being weak and prone to temptation. For decades in many cultures, women were unable to vote, attend school, and own property (although they themselves were considered to be property, a situation which sadly continues in some places today [25]. In more modern times, some women continue to live in extremely restrictive circumstances. According to Human Rights Watch [26], women in Saudi Arabia lived under the male guardianship system which meant that a male controlled many aspects of their life. Until recently, without the consent of their guardian, women were unable to get a passport or travel and needed their guardian's consent to marry whom they wished. They were also exposed to domestic violence, and if they fled from such a situation they could be arrested and returned to the abuser. More recently, a number of changes to make things less prohibitive for women were initiated by Crown Prince Mohammed bin Sakman, but some argue that things have not changed all that much [27]. And Saudi Arabian women are not the only women who live with such restrictions as other countries as well, including those in the Middle East, employ a guardianship system. We need only to consider how the women under Taliban rule in Afghanistan have had many of their rights and opportunities taken from them [28], including needing to completely cover their faces when in public, being told not to go out of their home unless absolutely necessary, not having access to education for girls after the sixth grade, and women being prohibited from working most jobs outside the home.

Violence does not need to be found at the other end of a weapon or through a physical assault. Intimidation, restrictions, obstruction, and or denial of human rights are also very real acts of violence against girls and women. Most recently, in June 2022, the US Supreme Court overturned *Roe v. Wade* and eliminated the nationwide right of women to have an abortion, leaving the decision as to when and under what circumstances abortions could be performed up to individual states [29]. Furthermore, a number of states now forbid abortion under any circumstances including the health of the mother, and rape and/or incest, and make it a criminal act for anyone helping any individual to terminate a pregnancy. Gone is the right to choose and make a personal decision regarding one's right to reproductive freedom [30].

5   Specific Examples of Violence

5.1   Stalking

As demonstrated above, violence against women—and girls—has many manifestations. The most common form is considered IPV—domestic violence toward a woman at the hands of either a current or former partner with whom she had or currently has a relationship. IPV can take the form of physical, emotional, financial, verbal or sexual abuse—or any combination thereof. It can also include stalking, which involves a repeated pattern of the stalker following the woman, calling her repeatedly, making threats, monitoring the target's coming and goings, destroying their property, or sending unwanted gifts or emails, among other things, to instill fear in the person being stalked. Depending on the location where the stalking occurs, it can be considered a crime. It is considered as such in all 50 states and can result in violence to the victim [31].

5.2   Forced Marriage

As discussed above, forced child marriage is a form of violence against children, usually girls, and a severe violation of their human rights. However, adult women can also find themselves being forced into marriages that they do not consent to, often resulting in their being bought, abused, violated, and reduced to little more than unwilling victims of sexual assault by their "husbands" and unpaid and exploited domestic and farm laborers. It is recognized as a phenomenon of global concern and one that McCabe and Eglen [32] liken to a form of modern slavery with the forced "bride," be she a girl or a woman, viewed as nothing more than another piece of property owned by the husband—and at times owned by his family as well. Their work highlights the narratives of both girls and women forced into marriage against their will.

5.3   Honor Killings

Honor killings are another form of femicide and violence directed toward women. The term is used to describe what is considered a means of restoring honor, respect, and dignity to a family or individual—often male whose female relative they think has behaved in such a way as to bring shame and dishonor upon them or their family [33]. So harmful is the woman or girl's behavior perceived to be to the family that killing her is seen as the only way to restore honor to the family. According to Amnesty International [34], these killings are rooted in the cultural belief that women are objects and commodities, and that their bodies, controlled by the family and male relatives, serve as repositories for family honor. Adding insult to injury is that in many countries' punishment for carrying out honor killings is either nonexistent or inadequate. Where laws against this do exist, they are often not

enforced. Current figures are difficult to come by as the crime often goes unreported—but it has been estimated that the number is approximately 5000 cases a year [35].

5.4   Female Genital Mutilation

Another form of violence directed toward girls and women involves the mutilation of female genitalia. Known as female genital mutilation, or FGM for short, the procedure involves removing part or all of the external female genitalia of a girl or woman—or other injury to the female genital organs—for non-medical and non-health reasons. Non-medical reasons to practice FGM include ensuring that girls and women will not be tempted by sexual desires, thus maintaining virginity and fidelity in relationships; to keep girls and women clean by removing "dirty" body parts; to conform to traditional norms; and to enhance the chances of being married in a culture that expects the potential bride to have undergone the procedure [36]. There are 4 types of FGM, each characterized by what is done and removed [36] (see Female genital mutilation (who.int) for details of each type). However, regardless of type, complications are not uncommon and any number of consequences, be they short or long term, often occur including infections, fevers, death, urinary problems, and bleeding. Aside from the physical and medical problems, psychological issues can occur. Regardless of the reason, FGM is viewed as a violation of human rights again girls and women [36].

5.5   Human Trafficking

No accounting of violence toward women and girls would be complete without consideration of human trafficking (HT) which is considered a global public health crisis occurring worldwide. While exact figures are hard to come by, according to statistics from the International Labor Office, in 2016 40.3 million people were victims of modern slavery or human trafficking [37]. While no one, regardless of race, gender, sexual orientation, socioeconomic background, or religion, among other demographics, is safe from being trafficked [38], women and girls are often target for all forms of human trafficking. The two major categories of human trafficking include labor trafficking and sex trafficking. While the former involves forcing people to conduct or carry out some type of work in various labor settings such as farms, factories, hotels, fishing industries, or even as domestic servants in individuals' homes, the latter, sex trafficking, involves forcing people to engage in various sex acts in exchange for money or some other exchange of goods. Both categories do share a number of commonalities. Both can involve force, fraud, and/or coercion and force those who are trafficked to do things against their will. Further, aside from being exploited and not being paid or paid adequately for their efforts, victims can be held against their will, threatened with harm, and at times tortured. While women and girls can be and are labor trafficked—such as being forced to be

housekeepers, work in hotels as cleaning women, work in nail salons and harvest crops on a farm, women and girls are especially targeted for sex trafficking [39] and are often under the control of a pimp or trafficker.

According to the International Labour Organization (ILO), in 2016, there were an estimated million sex trafficking victims, of those, 3.8 million were adults and the remaining one million were children. Of the millions trafficked for sex, globally 99% of the victims were women and girls [40]. Again, while male victims of HT are exposed to all forms of violence, women and girls are often subjected to physical and sexual violence, torture, psychological abuse, imprisonment and isolation by their traffickers, poor living and working conditions, deprivation of food and medical care, and at times they are killed. The result is that victims experience a number of psychological and mental health problems such as PTSD, depression, suicidal ideation, anxiety, and substance use. Medical and physical consequences of their victimization include sexually transmitted disorders, neurological problems, traumatic brain injuries, and urogenital problems [41]. Trafficked women can present with broken bones, cigarette burns, scars, bite marks, and bruises. In one case, a woman I worked with reported having her eyelids glued shut, and another had been purposely run over by trafficker resulting in extensive damage to her right leg. Yet another woman reported that she was required to wear a dog collar around her neck all day while awake and was timed while eating. When the buzzer went off, her food was taken away.

6   Policies and Laws

While it is doubtful that violence in general and violence directed toward women everywhere will ever be completely eliminated, there are some directives and policies developed to stem the tide and decrease the percentage of violence directed toward women across the globe-albeit each country and region handles the problem differently—some better than others and some not at all. The following are some examples of legislation or policies that have been enacted in an attempt to lessen violence against women and provide justice to those who have been violated and victimized.

Safe Harbor Legislation: While not focused on violence, women and girls forced into illegal operations and activities would be viewed as victims, and not criminals. Safe Harbor laws advocate for reducing attempts to criminalize the actions of minors who have been victims of sex trafficking [42]. In Latin America, which has a high rate of violence against women, laws have been enacted in various countries making femicide a crime [43]. Other countries such as Canada and South Africa as well as some European countries have also enacted laws against femicide [16]. While not directly related to violence against women, the Sustainable Development Goals gender snapshot report looks at how women are held back through achieving gender equality through such barriers as among other things, little access to education, poverty, hunger, and no access to safe abortion [44].

While addressing the issue of gun violence against women in the US, gun violence toward women everywhere is not uncommon. Many of the suggestions to reduce gun-related violence toward women, such as disarming domestic abusers, closing the gender wage gap so that victims can leave abusive relationships if they are financially sound, preventing convicted stalkers from owning weapons, and preventing those against whom there is a temporary restraining order from being able to purchase firearms would be well-advised in any country and are applicable beyond borders [45].

While it is beyond the scope of this chapter to address the various laws and policies on the books globally, the National Resource Center on domestic violence in association with VAWnet offers an overview of a number of international laws and policies to prevent and intervene in violence against women [46]. Of concern is that if and where a law or policy exists it is not always enforced to the fullest extent possible and consequences for harmful behavior directed toward women and girls can be severely lacking and minimal at times.

7   Discussion

Undoubtedly while some of the statistics, information, and examples provided here may be new content to some readers, the fact that worldwide women and girls are subjected to various forms of violence is undoubtedly not news. In the past while whatever happened to women and girls in a given location often did not go beyond that location, in today's world owing to the ease with which acts of violence and oppression can make it around the world in seconds owing to the internet and social media, it is no longer possible to be unaware of what is characterized by many as a global and systemic pandemic. While in some cases, the violence is self-directed such as when women commit suicide or cause self-harm to themselves, there are also interpersonal and collective factors at play-factors which often overlap.

Violence, abuse, oppression, and exploitation at the hands of family members, partners, and/or community-interpersonal factors are common occurrences and include IPV, human trafficking, GBV, stalking, and acid attacks. On a larger scale, often the violence, abuse, oppression, and exploitation derive from social, political, and economic factors. Society universally has long perceived women as second-class citizens and property, with limited rights. A woman who has been sexually assaulted can often be made to feel like it was her fault for the assault if she went to seek justice. It was and still continues to be accepted for society to see women as sex objects.

One needs only to think of how in the US Halloween costumes portray nurses as sex-starved healthcare professionals or how women are at times judged on their shape, breast size, and attractiveness. Traditional wedding vows in the past and at times even presently direct a wife to love, honor, and obey her husband. Often as a girl a woman was warned to act like a lady to be considered a "nice girl," and woe unto the girl or woman who does not behave in what is perceived by others as honorably, as her punishment could be death—under the guise of an honor killing.

Not that long ago until such practice was banned, a widow in India was expected to sit atop her dead husband's funeral pyre.

Education—dictated by societal expectations—in many countries is still reserved for boys and it was not all that long ago in the US, for example, that girls and women were not admitted to certain university programs. Politically, women were denied the right to vote, and except for a few exceptions, until recently played only minor roles in government in many countries. Even today in the US, it is still cause for attention and newsworthy that more women are running for office and being elected. Having the first women serve as Vice President in the US was extremely newsworthy and in the UK not that long ago it was only the sons, not the daughters, of future monarchs who had a right to the throne.

Another barrier to equal rights is how women worldwide fare economically. In the US, for example, we know that women earn less than men do-often in the same or similar position, and in the US women are more likely to live in poverty than are men [47], a state of affairs similar to women worldwide [48]. Often times, in domestic violence situations women remain in such relationships as they have little or no means to support themselves or their children should they leave. While the above do not constitute what is considered physical violence, they all clearly serve to systemically oppress and abuse girls and women in ways other than physical harm.

Women and girls everywhere are unfortunately part of a system that on multiple levels has restricted their rights to being all that they could be, to live a life filled with opportunity, free from the threat of or actual violence, and to be considered equal to men.

8   Conclusion

As this chapter is being written, women and girls around the world continue to be subjected to violence and/or having their liberties restricted and/or violated in one form or another. For example, as recently as December of 2022, Afghanistan's minister of higher education banned women from attending universities there. Since the Taliban has taken over they have banned girls from middle school and high school, not allowed women to enter certain fields of employment and required them to be covered from head to toe when in public. In addition, women and girls are prohibited from going to parks and gyms [49].

The content presented above is but a small snapshot of the horrors and brutality of gender-based violence that confronts women, girls and female transgender populations globally on a daily basis. Aside from human trafficking, IPV, forced marriage, and FGM, acid attacks can be added to the list of violent crimes committed mostly against women and girls. While these attacks—in which acid is thrown onto the face and body of a woman—are believed to go mostly unreported because of fear of retaliation, it is estimated that approximately 1500 such attacks occur annually, mostly in South Asian countries [50–52].

Each new instance of brutality and violence, which at times can be fatal, is unfortunately replaced by the next occurrence and headline about the next victim. Until

our global society can adequately address what women and girls can do to protect themselves, how the world can become a safer place for women and girls and what more can society do to provide consequences for perpetrators, there will never be an end to the potential harm and violence that awaits its next victim.

Discussion Questions
- According to the Council of Europe (https://www.coe.int/en/web/gender-matters/what-causes-gender-based-violence), there is no single factor that causes GBV. Rather, there are several at play. Of the four factors they discuss—cultural, economic, legal, and political—which one or ones would you say are most responsible for causing GVB to women.
- While violence against women happens everywhere, it is often the case that certain forms of violence are more common than others depending on where one lives. Think about your location and community. What type of violence toward women tends to occur most often where you live and what are some things that could be done to prevent or reduce that particular form of violence in your community.
- The Office on Women's Health (https://www.womenshealth.gov/relationships-and-safety/help-end-violence) provides suggestions of some things that can be done to help combat violence against women. Review their suggestions and discuss those that you feel you could do and provide other ideas you think would also be helpful in preventing or reducing violence to women.
- You have been asked to develop a 3-h training session on violence against women to inform the audience about what it is and how women can protect themselves and other women from being victims as well as what their options are if they are being victimized. What content would you include and why?

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Analyzing the Social Cost of Human Trafficking: An Economic Framework

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"An effective integration of moral argument into economic analysis can be expected to proceed rather painstakingly, because the relevant moral consideration will vary considerably from topic to topic." Albert O. Hirschman—Morality and the Social Sciences: A Durable Tension, 1980.[1]

1 Economic Perspective on Human Trafficking

In this chapter, we engage human trafficking through the lens of economics to focus on the social burdens that result from trafficking.[2] To analyze these burdens, we address a variety of harms that result from human trafficking, but the economic perspective we employ is broader than an accounting of harms. Collectively, these burdens comprise the social cost of human trafficking. Human trafficking is objectively a fundamental violation of human rights. An economic analysis may

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[1] Hirschman, Albert O. (2013). Morality and the social sciences: A durable tension. Frank E. Seidman Lecture—Memphis, Tennessee, 1980. In Jeremy Adelman, Editor, *The Essential Hirschman* (pp. 341–344).

[2] An economic approach could also explore the incentives and behaviors of participants in the market. Although we touch on these issues, they are not our central concern.

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seem to minimize or objectify these harms, but that is not our intent. Rather, we believe an economic framework provides another lens through which to understand the impact of trafficking on individuals and society at large.

Two points need clarification in developing the economic point of view. First, cost includes expenditures as well as many impacts beyond expenditures. Expenditures are readily measured in monetary terms, but what they actually represent are real resources allocated to a particular purpose. Some elements of cost are burdens other than resource use. The goal of our framework is to extend measurement in monetary terms to all types of costs associated with human trafficking, using a monetary metric to assign value. Second, in assessing *social* cost, we intend a comprehensive accounting of costs across all members of a society in all of their social roles, including perpetrators and victims of trafficking, taxpayers through the agency of government, private sector advocacy organizations that seek to diminish human trafficking and to ameliorate its impacts, and the general public.

Calculating these costs is surprisingly elusive. Both conceptual ambiguity and insufficient data require multiple assumptions in order to derive specific results. Rigorously defensible valuation may not be feasible for certain types of cost. Nonetheless, we argue that such costs should be recognized and brought under review even when not included in a measured "bottom line." In particular, we examine the cost of injustice as a way to include a moral imperative against human trafficking in a scientifically objective framework. This chapter offers a way of thinking about social costs tied to human trafficking, rather than a full accounting estimate. The framework is informed by previous analyses of the social cost of crime considered more broadly [1–3]. In keeping with this tradition, we constructed our framework within existing policy responses to trafficking. Under alternative responses, the nature and extent of social costs would be different.

Sensible policy proposals to address human trafficking must compare benefits and costs of different approaches, with reduction of harms understood as the central benefit to be achieved. Our limited intent is to provide a framework for objective economic analysis of social cost associated with human trafficking in its contemporary manifestation, grounding our analysis in empirical evidence. Thus, we do not consider anti-trafficking policy details beyond a cursory examination of their costs. A full consideration of policies in a benefit–cost framework requires also analyzing policy effectiveness, which depends on details surrounding the incentives and behaviors of participants in human trafficking. That is beyond our scope.

In the remainder of this section, we describe the economic perspective in greater detail to establish our approach to the analysis. In the next section, we develop a cost accounting framework at an abstracted level that provides structure for examining specific details of harms to individuals and communities, and other burdens that societies face with respect to human trafficking. In "Harms Resulting from Human Trafficking—C_V," we investigate details of harms that result from human trafficking and sketch out what would be required to translate descriptions of harms into monetary valuations of them, a requisite for benefit–cost analysis. "Costs of Trafficking Efforts and Anti-trafficking Interventions" examines two other burdens of human trafficking: resources used by traffickers and by policy responses. Two

surplus value measures associated with human trafficking—profit and social surplus—are discussed in "Summarizing the Social Accounts of Human Trafficking", which is followed by a summary of the chapter.

1.1 Clarifying Human Trafficking in a Market Context—Coercion, Deception, and Force

With the exceptions of organ harvesting and forced pregnancy, human trafficking occurs in the context of labor markets, including markets that are criminalized. In this chapter, we restrict our attention to these markets and do not examine human trafficking for forced pregnancy and organ harvesting, which have distinctive features. Definitions of human trafficking often distinguish trafficking for commercial sexual exploitation from other forms of labor, but we do not distinguish them in our economic framework.

Although markets utilizing trafficked labor have distinctive features, fundamentally they are similar to other labor markets. Workers supply labor toward the production of goods or services through the mediation of administrative organizations referred to in economics as enterprises. Enterprises may be simple in structure, having a single individual as entrepreneur and manager, or they may be complex with individuals tied through horizontal and/or vertical linkages. Trafficked labor is sometimes used to produce goods or services that are legal (e.g., fish or construction work), while in other instances, the goods or services are criminalized (e.g., drugs or sex). Whether legitimate or criminal, the enterprises give rise to a demand for trafficked labor through their willingness to incur costs to acquire the effort of workers. We address the role of intermediary organizations that facilitate supply of trafficked labor to enterprises at the end of this section.

A precise, widely accepted definition of human trafficking is not evident in the extensive literature [4–6]. Certain concepts are frequently invoked, such as exploitation; the use of force, fraud, and coercion in relation to victims; and the lack of choice by victims caught up in trafficking. The United States' criminal code cites the use of fraud, force, or coercion "for the subjection to involuntary servitude, peonage, debt-bondage, or slavery" [7]. Keywords are used inconsistently and often without clear meaning. Exploitation implies unfair treatment, but this must be compared to fair treatment, which is typically not identified in the discourse.

Exploitation is not the same as coercion. Force is one instrument of coercion among others, and fraud may or may not result in victims being "trapped" in an undesirable work environment. Albanese et al. [8] argue that evidence on interactions between agents considered to be traffickers and victims suggests their relationships are often fluid and uncertain. They contend that essential elements to consider are consent ("freely given agreement" p. 4), fraud, and coercion. However, they argue that the degree of "voluntariness" in consent is often not clear.

Because we intend our framework to be used to establish specific cost estimates, we believe it crucial to seek clarity here. For the purpose of our analysis, we adopt

an essential distinction between "normal" labor markets and those where human trafficking is practiced. In our conception of trafficking, workers either face *coercion* as an inducement to engage in work for an enterprise or are subject to a *high transaction cost* to extricate themselves from a work environment they willingly engaged in under fraudulent representation. Sometimes both conditions may be present. Yet neither condition completely removes victims' agency. In the latter case, workers made a decision based on false information. Even without coercive pressure, once actual work conditions are revealed, a person may work because returning to their *status quo ante* is very costly. They are stuck in a form of "path dependence." In the case of coercion, a coercive actor exercises social power or violence to restrict the set of choice options faced by a victim. Under successful coercion, victims cooperate and work, but only under duress. We believe the two circumstances should be distinguished because the behavior of traffickers, and possibly the harms experienced by victims, may be qualitatively different. While traffickers may exploit high transaction cost faced by defrauded victims, even when the trafficker has no role in creating that cost, this is different from explicit coercion.

These features of the interaction between workers and enterprise managers[3] (hereafter simply "managers") are clearly present in some situations, but may be ambiguous in others. Low compensation to workers and exploitative practices are not *necessarily* trafficking. We see the use of force as one of several coercive mechanisms, so it need not be considered separately. Similarly, fraud may help coercive actors to manipulate victims' choice options, but does not itself constitute coercion. Fraud alone does not lead to trafficked labor, a qualification noted in both U.S. Federal Code and the Palermo Protocol. The following abstract description of interactions between managers and workers clarifies our conception of coercion.

Through the lens of economics, we begin by comparing a position offered by a manager, captured in a vector of attributes, W, with a worker's reservation alternative, W_R, a similar vector that represents a worker's best option outside the proposed work arrangement. Both of these vectors capture conditions of work that comprise incentives and disincentives to workers. Actual wages may be a part, but conditions also include other benefits and negative attributes, e.g., provision of goods or services like shelter and intangible features like occupational risk, degree of stress, social status, and work satisfaction. In the case of sex trafficking, for example, victims face a variety of hazards and may find the work itself repugnant. These attributes are captured as part of W.

Without coercion, a worker will not cooperate with the manager if the worker's assessment of the reservation alternative, W_R, exceeds his/her assessment of what is offered by the manager. In order for managers to induce cooperation without improving W, they can issue a threat, T, to inflict a punishment, P, on workers. Capability to issue threats and inflict punishments conveys social power that managers can employ to restrict workers' choice sets to options less desirable than W_R. While punishment and threat are intimately tied, they are logically and

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[3] Enterprises may have administrative structures with managers at multiple levels. Our intended use of "manager" designates an individual with social power who interacts with trafficked workers to induce them to engage in whatever productive activity the enterprise is pursuing.

practically distinct. Punishment is an act that somehow harms a worker, such as beatings or deprivation, or harms a worker's loved ones or friends. A threat, which can be implicit or explicit, precedes punishment and includes a probability that punishment will be inflicted if the worker resists demands of the manager. Essentially, $T = \pi \times P$ where π represents the probability that punishment will be inflicted. Successful threats involve no punishment. Generally, managers would prefer to induce cooperation of workers by threat alone, because inflicting punishment is costly to them. However, managers may view punishment as useful if inflicting punishment on a worker raises the credibility of threats issued in the future or to other workers.

When a worker's assessment of the combination of W and P falls short of their assessment of W alone, and the worker perceives the threat as sufficiently credible (a high probability that punishment will be inflicted), the worker will follow the demands of the manager in response to the threat. Their ex ante outside option of W_R is no longer available to them because the manager has diminished the worker's opportunity set, which may have been severely constrained to begin with. It is possible for the compensatory elements of W to be set at zero, so that the only reason a worker cooperates with the manager is to avoid punishment.

Two additional features merit comment. First, the ability of a manager to inflict punishment is dependent on the social environment as structured by prevailing social institutions, both formal and informal. In modern economies, workers in legal industries generally have recognized rights protecting against such punishments, but this was not always true historically and is not true in some contemporary societies. Moreover, labor laws that protect workers may not apply in criminalized markets. Where social institutions do protect workers from punishment, managers may be able to evade detection by enforcement authorities or, if they are detected, to avoid consequences by means of corruption. It is important to recognize that compensation, threatened punishments, and evading enforcement are all costs to managers of acquiring and controlling trafficked labor that are partly determined by the prevailing institutional environment.

Second, managers often recruit by deception through false claims about work conditions. This amounts to an overstatement of W, but at some point the actual work conditions may be revealed as less desirable than a worker's reservation alternative, W_R. If they can withdraw from the agreement without punishment or high transaction cost, they have not been trafficked. But effective deception may facilitate credible threats of punishment, placing the worker in a vulnerable circumstance. For example, traffickers sometimes relocate workers to a new country where they lack protection from threatened punishment. Similarly, effective deception may result in workers facing a transaction cost sufficiently large to dissuade them from returning to their *status quo ante*.

Defining human trafficking as we do may be considered too narrow by some. This is fine; we do not seek to impose our particular viewpoint, although we think it has merit. Rather, we are simply clarifying the conceptual basis that underpins the analysis we present below.

While we treat empirical details of human trafficking in later sections, it is useful at this stage of our analysis to consider two features relevant to social costs. First,

the particular means by which traffickers coerce workers is a key determinant of the nature and extent of harms inflicted. Second, our level of abstraction avoids consideration of institutional linkages in the supply of coerced workers. While the fundamental market connection in human trafficking is between a population of vulnerable workers (labor supply) and a production enterprise that exploits them (labor demand), trafficking often involves intermediaries who connect them.

Where this is the case, trafficking is not conducted by a single individual or organization, but rather through a network, one that requires cooperation between intermediate actors and production enterprises. This is especially relevant where trafficking requires relocation of workers. Two types of intermediaries are *recruiters*, who are the first point of contact with vulnerable workers, and *transporters*, who facilitate movement of workers from their home locations to locations where they perform work. These intermediaries may or may not know that they are supplying labor for trafficking, although these stages of supply chains for labor are where the use of fraud is especially prominent.

Human trafficking is a diverse phenomenon, and not all circumstances require geographic movement or rely on intermediaries. The presence of such supply chains, however, is relevant to considering two types of associated social cost: resources expended by human traffickers, and the nature and extent of harms inflicted on victims. Thus, application of our framework to specific cases should bring under review the actors and practices involved in labor supply chains.

1.2   Opportunity Cost, Harms, and Social Cost

Standard economic discourse conceives of "cost" in the sense of opportunity cost: an alternative benefit sacrificed when deploying a resource for a particular purpose. One desirable goal is traded off in order to reach another one. This conception is relevant to some of our analysis; however, a significant part of the social burden of human trafficking is manifested in harms to victims. These damages do not neatly fit the opportunity cost framework, although to the extent that resources are used to ameliorate harms, opportunity cost applies. Thus, we identify two broad classes of costs that can be estimated using a monetary metric: opportunity costs and un-ameliorated harms. Together they constitute the full social cost of human trafficking.

Consider first opportunity costs. Alternative uses of resources devoted to opposing and promoting human trafficking are opportunities forgone and thus constitute opportunity costs. For example, labor resources devoted to law enforcement efforts against trafficking could have been used in other ways. Similarly, transportation resources used by human traffickers could have been deployed for other purposes. Medical services to ameliorate harms experienced by victims are not available for other ends. These alternative purposes constitute opportunity costs.

Typically, economists measure opportunity costs by expenditures on resources deployed, which are taken to be a close approximation of the value of the alternative

goal forgone. Expenditures on resources used by traffickers to transport and coerce victims represent an explicit cost of using trafficked labor and constitute a part of private cost. There may also be implicit private costs incurred by traffickers, such as time devoted by managers to running the trafficking enterprise that is compensated by profit. Here, there is no expenditure on the managers' time, yet this time still represents an opportunity forgone and so is a cost.

Expenditures associated with efforts against trafficking, whether made by governmental agencies (public cost) or non-governmental organizations (NGOs), private citizens, and businesses (private cost), represent opportunity costs of using resources for anti-trafficking goals. Similarly, spending to ameliorate harms experienced by victims represents opportunity cost, which may be public or private. Trafficking activity, whether by employing enterprises or intermediaries, may impose significant implicit opportunity costs, but resources used in anti-trafficking efforts or amelioration of harms are closely represented by expenditures.

Harms associated with human trafficking are not opportunities forgone in the same sense, yet they are social burdens that reduce well-being and so constitute costs. In considering criminal victimization, Cohen [3] refers to such impacts as "external costs." Responses to harms can, to some degree, ameliorate harms inflicted on victims. This transforms part of the cost of victimization into an opportunity cost represented by expenditure on amelioration. Moreover, to the extent that governments provide amelioration, private cost of victimization is shifted into public cost. However, amelioration does not eliminate effects of trafficking on victims. Pain and suffering associated with harms, both physical and psychic, are experienced by victims despite the assistance that they might receive. These types of cost have no direct expenditure associated with them that can serve as a metric. However, economists have developed techniques to calculate imputed values that can serve as rough estimates.

While the main burden of harms falls on victims of human trafficking, families of victims may also experience harms. This occurs through emotional stress when loved ones are harmed, but also when families lose productive labor because trafficking prevents a victim from participating in household production. We also note, however, that trafficking is sometimes intra-familial, a detail needing consideration in accounting for social cost. Trafficking may also impose a diffuse burden on an entire community, which is not the aggregation of harms on community members, but a harm that may emerge in addition to that aggregation.

Full social cost combines burdens on all members of society in all of their social roles, i.e., as victims, traffickers, the families and communities of victims, taxpayers, and social activists. Considering harms, ameliorative expenditures, resources used by traffickers, and resources used in anti-trafficking efforts, social cost is the simple sum of the public and private burdens. Anderson [2] uses a similar framework in his analysis of the aggregate burden of crime, noting that public and private costs are often substitutes for each other. Thus, a withdrawal of publicly provided medical treatment for victims would reduce public cost but increase private cost. Moreover, such a substitution does not necessarily imply that spending by victims for

self-amelioration would replace public spending withdrawn. Victims may simply suffer more from harms incurred by being trafficked.

In evaluating costs, we consider time in two ways. First, we use a flow concept that unfolds across a period of time with estimates reported on an annual basis. Second, some harms may have consequences that persist across many years, which requires expressing their cost in present value terms. The full present value would be reported as a cost in the year when the harm was inflicted, even though its full effect extends into future years.

1.3   Production from Trafficked Labor

We believe it is important to recognize that many goods and services produced by trafficked labor convey benefits to communities (e.g., cheaper food or shoes for consumers). In this sense, the narrow *economic* logic of a market for trafficked labor is similar to that of other labor markets: a means of coordinating productive effort toward output of goods and services that meet the needs of consumers or that are inputs into a supply chain. Whether victims of trafficking share in this social value, as workers do in "normal" labor markets, is another matter, albeit one that is crucial in a wholistic analysis of value, which we address in detail below.

There are some contrary cases. When children are coerced into rebel armies whose output is destroying opposing forces or murdering civilians, or when victims are coerced into certain other criminal activities, nothing of value is created by this trafficked labor. The social value of commercial sexual services is a contested case. But when outputs are fish caught, crops harvested, or garments sewn, the product of trafficked labor is beneficial in a social sense to consumers. In production regimes that do not use trafficked labor, there is no question about the beneficial social value of such outputs.

To be clear, we are not suggesting that useful output with social benefits justifies trafficked labor in an economic sense. However, consideration of benefits is crucial for understanding the social accounting problem of *net benefit*, which we discuss below in Sect. 5. From the perspective of traffickers, net benefit constitutes profit and is the primary driver of their behavior. (In some instances, traffickers might pursue other goals such as domination over victims. We recognize this possibility but focus our analysis on profit). From the perspective of society as a whole, net benefit is conceived as social surplus, which embraces categories of cost that are not part of profit calculation. This broader embrace of costs results in a negative social surplus even while profit is positive.

2   A Cost Accounting Framework for Human Trafficking

In this section, we outline a conceptual framework for accounting social costs associated with human trafficking and introduce mathematical notation to represent the concepts developed. Further details fill out this framework in Sect. 3, where we consider specific types of harm that result from human trafficking.

2.1   Harms and Ameliorative Expenditures

While we include other types of social cost associated with human trafficking, policy makers and anti-trafficking activists are most concerned with negative consequences experienced by victims, their families and their communities. We refer to these consequences as harms, which include loss of economic resources (primarily victims' time), physical pain, emotional distress, poor health outcomes, loss of trust, and deterioration of community cohesion. In our framework, these are victimization costs, which we represent in the aggregate as C_V. This total includes four specific types of cost: stolen labor (C_L), unalleviated suffering (C_S), ameliorative support (C_A), and harms to families and communities (C_F).

Stolen labor time results when workers caught up in human trafficking are not available for work in legitimate venues or in their families' households. We represent the value of this time as C_L. There are three aspects to this stolen work time. First, wages that would have been earned by the victims represent a private victimization cost. Second, the value of household production the victims would have contributed to their families are another private victimization cost. Third, from a social perspective these costs are represented in goods and services not produced in legitimate labor markets and in household production. We could also consider loss of leisure time as a part of C_L, but this is not needed if we assume that the best alternative uses of time for victims are either earning wages or engaging in household production.

While ameliorative support reduces suffering of victims, it does not alleviate consequences fully. Victims will always bear a substantial burden from harms experienced, but it is important to distinguish when they face harms alone and when they receive assistance. A full accounting of costs evaluates both ameliorative spending and residual suffering. While it is difficult to establish a monetary measure for unalleviated suffering, we include it in the framework, denoting it as C_S. It is relatively straightforward to estimate ameliorative spending, represented as C_A, which would include spending from several sources: governments, NGOs, victims themselves, and perhaps other individuals. Harms experienced by families of victims and victims' communities require a separate accounting, and we denote these burdens as C_F.

To summarize, the full victimization cost of human trafficking would be the sum of the four elements identified in this subsection: $C_V = C_L + C_S + C_A + C_F$. While this

conceptual accounting is simple, calculating defensible estimates of the elements is not straightforward. Data to estimate C_A could be derived from public budgets and reports of NGOs. However, the intangible elements are particularly challenging, and there is very little empirical evidence available that would be required to estimate the other components of victimization cost.

2.2   Resources Used by Human Traffickers and in Anti-trafficking Efforts

Trafficking organizations and enterprises that exploit trafficked labor must expend resources of several types to facilitate a supply of trafficked workers and to manage their labor efforts. This includes knowledge and skill in coercion as well as additional inputs such as transportation services, illicit identity documents, and clandestine shelter. These resources could have been used for purposes other than trafficking, and those purposes represent the opportunity cost of trafficking efforts. For example, skilled labor used to manage a trafficked workforce could have been employed in a legitimate business. This perspective is well established in the literature on the economics of crime [2], and we denote the cost to traffickers, as C_T.

It is crucial to distinguish the recruitment and management of trafficked labor from production processes in which the labor is utilized. Consider, for example, crews of trafficked workers employed in fishing or agriculture. Resources required to support general labor in these productive activities are not part of the human trafficking cost because they would be required without the use of trafficked labor. The cost component of concern for us is limited to resources specific to recruiting and controlling workers under conditions of coercion. In theory, identifying and measuring these costs are relatively straightforward and supported by empirical studies of specific trafficking circumstances. In practice, evidence needed to estimate these costs is currently very limited and would require detailed forensic accounting to acquire.

Human trafficking is generally a criminal offense, and to the extent that a community's justice system expends resources to deter and prosecute traffickers, these expenditures for law enforcement constitute a cost of human trafficking. A private component of this class of cost accounts for resources devoted to anti-trafficking efforts by businesses and NGOs. Moreover, the labor of individuals incarcerated for human trafficking is lost to the economy, and an imputed value of this should be included as private component of anti-trafficking cost. We represent the costs of law enforcement and other anti-trafficking efforts as C_E.

2.3   Injustice as a Social Cost

Societies devote considerable resources to defend individuals' rights. Where rights are violated, governments, individuals, and NGOs often take action to punish violators, to restore the rights of victims and to establish deterrence against future

rights violations. This constitutes pursuit of justice, and public willingness to engage in these efforts implies that justice has collective social value. Communities achieve higher standards of well-being when citizens perceive that their fellow citizens are treated fairly, and that their rights are respected [9, 10]. It follows logically that injustice imposes a kind of social cost that is experienced collectively. By treating injustice as a specific form of social cost, the framework incorporates a moral imperative against human trafficking.

Like individual harms, injustice that results from trafficking is typically not fully ameliorated by corrective actions to restore rights and punish violators. Political pressure to establish anti-trafficking policies and activities of anti-trafficking organizations are expressions of concern not just for the individuals who are harmed, but also in some degree for the particular way in which the harms have been visited on the victims. Natural disasters also have victims who receive collective attention, but they are not seen as victims of rights violations.

That this collective cost is intangible does not make it less real, although it does present problems in establishing a defensible estimate of its monetary value. Perhaps even more than the intangible harms inflicted on individual victims of human trafficking, establishing a reasonable methodology and a defensible estimate of this cost is problematic. Yet this does not mean it should be ignored as a component of the overall social cost of human trafficking. We denote this component, the cost of justice, as C_J. Ethical judgments present methodological challenges to any economic analysis where they play an important role. To resolve the issue fully would take us well beyond the scope of this chapter, so we have restricted our treatment to simply noting that injustice is a particular element of the overall social cost of human trafficking.

2.4 Summing Up

Conceptually, the full social cost of human trafficking is the sum of the several components that we have identified: $C = C_V + C_T + C_E + C_J$. Moreover, the victimization component of this expression itself has four subcomponents: $C_V = C_L + C_S + C_A + C_F$. As noted previously, components and aggregates represent flow variables, typically expressed in annual terms and containing present value estimates where appropriate. While these quantified concepts are easy to express, calculating estimates of them presents tough challenges. This empirical work will require assumptions and must recognize degrees of error in specific results. For many of these components, there is currently no empirical data available. In the next section, we address some of the challenges and suggest potential solutions to estimate the cost of some harms.

A comprehensive estimate of the social cost of human trafficking will prove elusive, largely because the required data will not be available. However, our framework can be applied in a less sweeping way. For example, researchers might use it to estimate costs of particular components of human trafficking systems, or perhaps apply it to a limited jurisdiction that has been well studied in empirical work.

3　　Harms Resulting from Human Trafficking—C_V

In the previous section, we identified harms suffered by victims as a major part of the social cost of human trafficking. In this section, we delineate specific forms of harm experienced and suggest how estimates of the associated costs can be calculated. Application of our framework to concrete examples of human trafficking will require contextual adaptation. Because we cannot know these specifics in advance, we do not provide actual estimates of the cost of harms. Rather, we provide general guidance for practitioners who may undertake such projects.

3.1　　Harms to Individuals—C_L, C_S, and C_A

Were they not coerced or deceived into a trafficked labor force, victims would have their time to use in alternative productive activities, of which there are three main types: working for wages, operating small enterprises as entrepreneurs, and household production for direct consumption, such as care of children or elderly parents, household chores, and subsistence agriculture. The value of this stolen time represents the cost of this harm. A first order estimate of the cost can be calculated as the product of the total hours worked in coerced conditions and wages prevailing in legitimate labor markets where victims might have been employed. This is a very close measure for lost income that would have been earned working for wages; it is less satisfactory as estimates for lost profit from small enterprises and the value of lost household production. However, the calculation of forgone wages provides lower bound estimates for cost of time lost to these other activities.

A more precise calculation of the cost of stolen time would require evidence of profit opportunities and the value of household production, which are considerably more challenging to assess than wages prevailing in labor markets. Our view is that the estimate from assuming all trafficking victims would have earned wages in a legitimate market is a reasonable approximation; improvement in precision is not worth the additional research effort that would be required. Estimating forgone wages in alternative employment may present devilish problems in uncovering the amounts, but the method is standard accounting.

Adverse impacts on physical health emerge in most human trafficking situations. These range from minor injuries to debilitating illnesses, trauma, and even death. Proximate causes include infliction of punishments tied directly to the coercive aspects of trafficking as well as work conditions that can result in injuries and diseases. In particular, victims trafficked into sexual exploitation face harms such as sexual assault, violence from sex buyers, sexually transmitted infections, reproductive damage, unwanted pregnancies, and abortions. Occupational hazards are not unique to trafficked labor, but where social controls are unable to prevent violation of basic individual rights, they are likely not to be effective at keeping workplaces safe. With regard to these hazards, careful research should seek to delineate "standard" working conditions in comparison to conditions for coerced

labor before assigning a causal impact to trafficking. In practice, this distinction may be difficult to discern.

Psychological harms to victims of human trafficking are common. Although physical trauma may also cause mental trauma, adverse mental health impacts may emerge even when physical mistreatment does not occur. A state of constant threat results in emotional stress. Trafficked workers who witness physical punishment of co-workers will also be negatively affected. Special attention to psychological harms should be paid for victims of sex trafficking. Because of the intimate physical nature of forced sex and social morals surrounding sexuality, psychological harms and stigma may be more significant compared to the experiences of workers trafficked into other labor markets. However, data on psychological impacts of labor trafficking are limited, so it is hard to compare.

As noted above, victims of human trafficking sometimes receive assistance from both public and private sources to ameliorate physical and mental harms. A complicating feature sometimes arises when such assistance is conditional. For example, housing for victims can come with restrictions on movement or behaviors and curfews, which victims may find onerous or disrespectful. To the extent that such conditions reduce or inhibit the use of services, a reduction in the amelioration is experienced. Expenditures on such assistance could provide a way to determine a monetary metric. However, this would not provide a complete accounting.

There are two kinds of challenges to measurement of suffering in monetary terms. First, to what extent have harms been relieved by amelioration? This would require clinical evaluation by health care specialists. Specific clinical case studies could provide standards that could be applied more widely. Second, how can we place a monetary value on subjective suffering that is ongoing? Regarding this second challenge, economists have developed approaches based on analogous circumstances in health economics and criminal victimization research, relying on non-market valuation techniques to estimate costs of intangible impacts [3]. None is fully satisfying methodologically and provides only crude approximations. Yet they should be included in a full cost accounting with appropriate caution about their uncertainty as estimates.

Studies in the economics of crime and environmental economics have developed techniques for estimating values of such intangibles, which are known as *implicit* or *shadow prices*. McCallister, French and Fang's work [11] is representative of such studies. They report pain-and-suffering cost components for three types of crime: rape/sexual assault—$198,212; aggravated assault—$13,435; robbery—$4967 (table 4, p. 104). Cohen [12] pioneered the use of jury awards to calculate monetary costs for pain and suffering on which these estimates are based. A particular shadow price known as the value of a statistical life (*VSL*) represents the cost of a premature death. This has been extensively studied, with recent estimates in the range of $8–$11 million ([13], p. 468).

Applying shadow prices to calculate monetary equivalents of intangible costs involves significant uncertainty, which can be reduced by using shadow prices derived from environments that closely match the circumstances of a particular

human trafficking context. For example, the cited estimates for *VSL* are derived from United States' data. These might be reasonable estimates to use for the U.S. or Western Europe, but they should be adjusted for application elsewhere such as Latin America or India. Again, these valuations are not wholly satisfying, but they do offer a method for including these important intangible harms within an economic framework.

3.2 Harms to Families and Communities—C_F

Harms also befall families of trafficking victims. One is the lost labor time that would have been used in household production, which was treated in the previous subsection. But there are other consequences as well. First, intersecting emotional lives and love among family members mean that harms experienced by victims cause psychological distress for members of the victims' families. Of course, not all families are alike, and in cases of familial trafficking, this may or may not be experienced as a harm. Second, if trafficking victims are parents or siblings of young children, removal of the victim from the family setting may reduce investment in human capital formation of children. This is a potentially long run negative consequence that is challenging to evaluate in a precise sense, but it is no less real for that.

We also consider harm at the community level, effects that are distinct from the harms experienced by individual victims and the harm of injustice, which we treat separately. We see two mechanisms through which community-level harms may emerge. First, when a victim is removed from a local economy, any social surplus they may have contributed to the community is lost. Second, victims may have played roles in social connections of a community that they can no longer support; they can no longer maintain ties that previously bound them to other members of the community. Essentially, this represents a loss of social capital, in the sense of Coleman [14]. Research on mass incarceration in the U.S. has identified an analogous effect [15]. If the prevalence of victimization is relatively low, community cohesion may be able to withstand these gaps without significant deterioration. However, beyond some boundary of resilience, the functioning of communities becomes compromised. While community-level effects should be recognized as among the costs of human trafficking, estimating their monetary value would be difficult and involve a high degree of speculation.

4 Costs of Trafficking Efforts and Anti-trafficking Interventions

In this section, we address two types of social cost that are separate from harms caused by human trafficking: resources used by traffickers to procure and manage their victims, and resources expended by governments and NGOs to reduce the

extent of human trafficking. In both cases, the concept of opportunity cost applies, and market valuation of the resources provides an estimate of the monetary measure of these costs.

4.1 Estimating Value of Resources Used by Human Traffickers—C_T

Our conception of human trafficking is based primarily on coerced labor, so this element of social cost amounts to resources used to recruit, deploy, and control victims. Essentially these resources are business costs of enterprises that engage in these activities. In a simple circumstance of trafficking, a single enterprise might perform all three functions, and examination of its business expenditures would provide good estimates of this cost, which should be expanded to include any implicit opportunity costs tied to entrepreneurs. Actual circumstances of trafficking, however, are complicated by two features.

First, there may be multiple steps in a supply chain for coerced labor that are performed by distinct enterprises who engage each other in arms–length transactions. If multiple enterprises are involved, expenditures and opportunity costs at each step in the supply chain would be relevant for the cost calculation. However, expenditures made by enterprises at a later stage in the chain to those at earlier stages should be excluded so as not to double count the value of resources used. For example, if a manager of a coerced agricultural crew paid a recruiter to deliver workers, that expenditure would be represented in the costs of the recruiter. Only the costs of controlling the crew should be combined with the recruiter costs; including the payment made by the manager to the recruiter would double count some of the costs.

Second, enterprises that supply or use coerced labor are typically clandestine, and thus information about their expenditures is not readily available. To uncover the required data is difficult because they may not keep accounting records and are averse to researchers probing their business affairs.

A first step in estimating the business costs of trafficking enterprises will be to gain an understanding of their scale. How many trafficked workers are recruited and managed? How many people are required to perform these tasks? A second step is to delineate the methods by which workers are recruited, moved, and controlled. How are workers recruited and how far are they moved? What methods of coercion are used? Are the people engaged in trafficking paid employees, or are they part of an entrepreneurial team that is compensated by profit? Answers require understanding the operations of the trafficking enterprises, which would reveal the types of resources they require. Once these fundamentals of scale and operations are understood, researchers can estimate costs using imputed values based on cost studies of analogous enterprises that are not illicit. Clearly, there will be a degree of error in this procedure, but it would provide a defensible estimate of this type of cost.

4.2 Estimating Value of Resources Used in Intervention and Anti-trafficking Advocacy—C_E

Societies require resources to address problems raised by human trafficking. Expenditures on these resources provide a good approximation of the opportunity cost of using them for both intervening in actual trafficking circumstances and engaging in activities to limit the scope and scale of human trafficking. Such expenditures are sometimes offered as international aid transfers from developed to developing countries [16]. We exclude assistance to victims in this category of cost; ameliorative expenditures are included in victimization cost.

A significant part of current intervention cost is represented in public expenditures made by criminal justice authorities in investigating circumstances of trafficking and prosecuting identified offenders. Estimating this cost requires access to budgets for criminal justice institutions as well as an understanding of the extent to which administrators expend their resources on human trafficking cases. This is not a simple accounting problem, because budgets for criminal justice agencies typically do not specify amounts spent on particular types of offenses. If a division within a criminal justice system were wholly devoted to addressing human trafficking, that division's budget would constitute a valid measure of this component of social cost. In most instances, however, researchers will have to estimate what proportion of an overall budget is related to countering human trafficking.

Intervention is sometimes undertaken by NGOs, who also advocate against human trafficking by supporting research, legislation, and public awareness campaigns. Expenditures on these efforts represent resources used for their activities. To the extent that NGOs receive government grants to fund their anti-trafficking activities, these costs are public rather than private. Nonetheless, it is useful to distinguish these expenditures from those of criminal justice systems because relevant data will be found in different places. Because these NGOs typically have anti-trafficking efforts as their sole activity, and because their accounts are generally publicly available, using their budgets to calculate the value of resources they use is a reliable way to compute this part of social cost.

Ucnikova [16] and Nwogu [17] illustrate the kind of empirical research needed to derive estimates for C_E. These articles also demonstrate the challenges of untangling budgetary data in order to accurately match them to the conceptual cost concepts we have delineated. Although Ucnikova provides a specific estimate of $124 million annual aid transfers for anti-trafficking efforts, she qualifies her conclusion by noting that sources of her data define human trafficking differently and that pulling specific categories of spending from aggregate budgets is a fraught process requiring several assumptions. Moreover, the estimate of spending that she reports contains only foreign aid to counter human trafficking that a limited group of developed countries provides to less developed countries. Domestic spending on anti-trafficking efforts is not included.

5   Summarizing the Social Accounts of Human Trafficking

Although our central concern lies in estimating the social cost of human trafficking, we believe it is useful to examine benefits derived from the output of trafficked labor in relation to costs in order to derive measures of surplus value. Two types of surplus value can be calculated by subtracting costs from benefits: profit to enterprises that use trafficked labor and social surplus to the broad society. Analysis of profit provides insight into the motivation of traffickers and possibly into policies that might reduce incentives for trafficking. Consideration of social surplus reveals the extent to which human trafficking degrades social well-being.

Our attention here is on instances of human trafficking where output of trafficked labor is sold in markets. Benefits accrue to both the society that consumes the products and to trafficking enterprises that earn revenue from their sale. The exceptional case where enterprises use trafficked labor to "produce" a non-marketed output, such as the violence noted in "Production from Trafficked Labor", requires different accounting. Table 1 provides a conceptual summary of the social accounting problem that we address.

Start with profit, which is usually defined as revenue that accrues from the sale of output less costs of production. Because we focus on the problem of human trafficking and its associated profit, we first define a *net revenue* variable (R) which is gross revenue from sales less all production costs other than the cost of trafficked labor. Subtracting costs that fall on production enterprises due to human trafficking activity (C_T) from this net revenue results in enterprises' profit: Π.

Computing social surplus employs broader concepts of benefit and cost. We use B to represent *net aggregate use value* of production that results from human

Table 1   Summary of social costs and surplus values for human trafficking

Type of cost or benefit	Variable
Victimization cost	C_V
Of which	
Lost earnings and household production	C_L
Individuals' suffering	C_S
Ameliorative support	C_A
Family and community costs	C_F
Injustice	C_J
Resources expended by traffickers	C_T
Resources expended on anti-trafficking	C_E
Total social cost	$C = C_V + C_J + C_T + C_E$
Net use value from goods and services	B
Net revenue to enterprises	R
Profit to enterprises	$\Pi = R - C_T$
Social surplus	$SS = B - C$

trafficking. Like the net revenue concept for enterprises, this subtracts costs of production other than the cost of trafficked labor from gross aggregate use value. Subtracting social costs associated with trafficking (C) from B results in the social surplus created by the trafficked labor. Although the net revenue to enterprises (R) may fall far short of the net use value to society (B), it is also the case that the social costs of trafficking (C) are larger than the limited part of these costs that fall on production enterprises that use trafficked labor (C_T). Thus positive profit for enterprises is entirely consistent with a negative social surplus. Because the social cost of injustice is a part of C, if society places a sufficiently high value on justice, production that relies on trafficked labor will always result in a negative social surplus. This is more forcefully the case if outputs of trafficked labor are detrimental to society, such as the violence noted in "Production from Trafficked Labor" or other criminal conduct. Effectively, these outputs impose a negative value for B.

As noted above, the empirical evidence needed to estimate the values represented in Table 1 is not currently available, and such data are challenging to collect. However, enumerating and describing these costs within an economic framework are necessary steps to set the stage for future research. We also believe that our framework reveals heretofore unexplored harms and raises a vexing challenge when the broader public benefits in some ways from trafficking.

6   Summary

A full understanding of human trafficking involves assessment of its economic dimensions. Development of effective anti-trafficking policies requires balancing the costs and benefits implied by policy proposals. In this chapter, we have developed a framework based in economic theory to calculate associated costs, which can support both of these goals. The core idea is to delineate various components of the full burden that human trafficking imposes on a society, i.e., the social cost.

Our perspective analyzes human trafficking in the context of labor markets in which workers are coerced into supplying labor for the production of goods and services or face extraordinary transaction costs to extricate themselves from fraudulent employment offers. We provide a clarification of coercion that is consistent with the general notion of forced labor, which informs our consideration of one of the main types of social cost: harms inflicted on individual victims, their families and their communities. This includes consideration of injustice as a type of intangible cost imposed on communities affected by human trafficking. Inclusion of injustice as a category of social cost highlights a moral imperative against trafficking within a scientifically objective framework.

A second broad class of social costs consists of resources expended in three types of activities related to human trafficking: providing ameliorative support to victims (which we include as part of victimization cost); the practices of traffickers in procuring and controlling coerced workers; and attempts by criminal justice authorities and private advocacy organizations to suppress human trafficking. Broadly speaking, if human trafficking did not exist, these resources could be

deployed to other beneficial purposes, and the harms would be fully relieved. The burden on a society would be removed.

Our economic framework surfaces a recognition of social benefits that flow from human trafficking in the form of useful goods and services produced by trafficked labor. We do not believe that these useful goods and services justify the practice of human trafficking, but it is important to understand this feature in order to develop sensible anti-trafficking policies. In the context of the market, if the benefits are sufficiently high, then production with non-trafficked labor could be profitable and consistent with a positive social surplus. If profit cannot be achieved without coerced labor, then production should not be undertaken because its social cost outweighs its social benefit and would result in a negative social surplus. Recognizing this is a challenge to societies that consume products produced with trafficked labor.

While some of the types of cost we have identified could be readily measured using a monetary metric, others—such as the pain and suffering of victims and the cost of injustice—elude precise quantification in monetary terms. Yet, these harms are real, and inclusion in the framework is essential to understanding the full social cost of human trafficking. Our discussion of empirical challenges provides guidance to researchers who would seek to apply our framework to assess the social cost of particular instances of human trafficking.

Discussion Questions
- How does human trafficking compare to practices in legal labor markets?
- What are the main categories of social cost associated with human trafficking?
- What individual harms are relevant to account for the social cost of human trafficking?
- What are the methodological challenges for estimating the social cost of human trafficking?
- What are the empirical challenges to estimating the social cost of human trafficking?

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The Current Landscape of Human Trafficking Law

Christopher Collins

1   Introduction

Slavery should be the best term. But it carries still-fresh imagery in the collective memory that does not cover the full spectrum of slavery's contemporary manifestations. Human trafficking is slavery, but its definition goes beyond the conventional sense of owning humans as property. It requires neither movement nor ownership nor commerce, and while it might be more accurate to retain the word "slavery," human trafficking is coerced exploitation in all forms [1]. Human trafficking is, most generally, the taking control of people and forcing them into labor or sexual servitude [1].

Like most legal fields in this country, there is no unitary "law of human trafficking." Laws are patchworks that may or may not apply everywhere, depending on which body creates them. Federal laws might apply everywhere, but state law is not so conveniently uniform. Further complicating the patchwork is that even though federal law may apply everywhere, courts do not always interpret laws uniformly across the country. This chapter attempts to provide a brief background on the structure of law generally in the United States with an overview of the various legal schema fighting human trafficking. It is important to remain aware that legal questions are not easily answered. The contents of this chapter are an informational introduction to a broad and complex field of law, and therefore cannot be relied on as legal advice.

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2   Content

2.1   Three Branches on Two Levels

First, it is important to clarify what "law" refers to here. For many, "the law" means the statutes enacted by elected representatives in Congress or state legislatures. For others, "the law" refers to the policing and prosecution required to enforce statutes. Another conception is that law is what happens in courts, and justice may be its goal. They all count as "law." Those essential facets side law's broader definition as "[t]he regime that orders human activities and relations through systematic application of … force" [2].

In two levels, federal and state, the great force of law splits into three powers. One power *creates* laws, a second power *enforces* those laws, and a third power *interprets* the laws when questions arise. These powers (and the branches that take their names from them) are the legislative, executive, and judicial powers, respectively. It is important to differentiate these branches of government because one cannot understand a field of law like human trafficking without understanding that each branch has a different role in combating it—a President cannot change Congress's laws, just as amending a law will not cure lax enforcement. By the end of this chapter, the reader will understand that the three roles work together (and separately) to combat human trafficking.

Another important theme is that the power of law in the United States also splits into at least two levels: state and federal. On the one hand, the Constitution states that federal law is the "supreme law of the land" [3]. On the other, states (or "the people"), by default, hold any power that the Constitution does not specifically grant the federal government [4]. It can be an ordeal determining when federal law takes precedence over state law, but readers should know at least that human trafficking laws exist in both federal and state spheres. There is not enough room to detail each state's legal framework to combat human trafficking, but the reader should know that states play large and varied roles in combatting human trafficking. All states have some degree of human trafficking laws. Some are more comprehensive than others.

3   Anglo Law Inheritance

When the American colonies won their independence from England, they also won sovereignty over their laws. At the same time, the former colonies inherited a body of law that they were not entirely sure they wanted to keep [5], one that had evolved over hundreds of years in English courts. The system, called common law, relied, and continues to rely, on law developed by judges to fill in the blanks left by a lack of written legislation (first from the Crown, then from Parliament, and now from Congress and state legislatures).

Absolute prohibitions on human trafficking are relatively recent. History has been rife with it, and there have long been laws governing the treatment of slaves [6]. By

the ninth century, an early restriction on the slave trade in England banned selling Christian slaves abroad [7]. But neither the Crown nor Parliament had made any formal attempt to end slavery by the time the early English colonists arrived in the Americas. By the time English courts declared slavery abolished in England, slavery had already taken root in the American colonies, and its illegality in England did not apply to the colonies [8]. By the eve of American independence, English courts had taken the approach that, since slavery had never been formally legalized, it could not technically be legal without Parliament explicitly saying so [9]. When the UK Parliament did finally address the issue, it abolished slavery in nearly the entire empire, but that was 50 years after the end of the American Revolution and therefore 50 years too late [10]. As a result, the United States would face bitter infighting that would culminate in a gruesome war before it could finally abolish slavery.

4 Constitutional Background

The Thirteenth Amendment to the United States Constitution is the foundation of federal law prohibiting human trafficking [11]. Its 1865 ratification abolished slavery and involuntary servitude, following the Civil War's end, and authorized Congress to pass enforcement laws. Before that, the Constitution, reflecting a series of compromises between slavers and abolitionists, provided varying degrees of protection to what we now call human trafficking.

The Constitution originally barred Congress, until 1808, from banning slave importation from abroad [12]. Congress did ban importing slaves in 1808 [13], but many states continued to allow slavery itself, as well as domestic slave markets. Another of the Constitution's sections granted slaveowners the right to reclaim runaway slaves or indentured servants from states that had prohibited slavery [14].

The Constitution, however, was very limited in scope before the Civil War. It was not a document to centralize authority. Instead it was, for the most part, a narrow grant of authority to the new federal entity and a restraint on its potential growth. States continued, as they do today, as the prime lawmakers for activity within their borders. So, while the system of black slavery was banned by constitutional amendment in 1865 [11], other forms of involuntary servitude persisted under state laws.

5 Legislation/Statutes

5.1 Federal Law

While involuntary servitude has plagued humanity throughout its history, the first comprehensive human trafficking legislation in the United States would not come until the year 2000. Still, between the Thirteenth Amendment and the start of the twenty-first century, the United States Code (USC) has gradually built a framework for punishing the full scope of what we now call human trafficking. The USC can be accessed, free of charge, through the Office of the Law Revision Counsel of the

United States House of Representatives' website [15]. The USC's Title 18 is the criminal code. Its 77th chapter is *Peonage, Slavery, and Trafficking in Persons*, and it represents the core of current human trafficking law, (so, to a lesser extent, does its 117th chapter—*Transportation for Illegal Sexual Activity and Related Crimes*) [16]. This section describes how this core came into being and how other laws have accreted around it in recent years.

Despite having to wait until 1808 to ban importing slaves [13], Congress could, and did, ban *exporting* slaves in 1794 [17]. By 1820, Congress began deeming ship crews dealing in slaves to be pirates, which carried a death sentence if convicted [18]. Congress banned buying or selling slaves in the District of Columbia in 1850 [19]. It took limited action to further restrict the trafficking of humans during the Civil War. One example was the 1862 ban on Americans participating in the "the Coolie Trade," a system of involuntary servitude involving Chinese laborers [20]. Congress also waited until 1862 to free the District of Columbia's slaves [21], shortly after doing so in the territories that had not yet become states [22].

After the Civil War, the United States ratified the Thirteenth Amendment abolishing slavery. Congress soon began passing laws providing for abolition's enforcement [23]. In the wake of the Thirteenth Amendment's ratification, Congress passed one of its first laws banning involuntary servitude under a name other than slavery: peonage—i.e., debt bondage [24]. In doing so, it indirectly recognized that involuntary servitude was not limited to the South's plantation system of black slavery. In peonage's case, the statute initially targeted the race-neutral system found in the former Spanish territory that would become the state of New Mexico. This system allowed people to fall through debt into what the Spanish called *peonaje* (peonage) [25]. While initially targeting peonage in New Mexico, the Act's language was broad enough to eventually extend to debt bondage throughout the United States [26]. Despite its illegality, peonage would continue and grow. Several years later, Congress would target another group of traffickers called *padrones* who imported Italian children into involuntary servitude in the United States [27]. By the 1870s, these provisions had become codified into Titles 70 (Crimes) and 71 (The Slave-Trade) of the Revised Statutes of the United States, a precursor to the United States Code [28].

In the 1880s, a new term began circulating in the press: "white slavery" [29]. Through a mix of truth and newspaper sensationalism, the public began awakening to the idea that prostitution might not be merely an immoral choice made by immoral women. Despite the damning racial implications baked into the term "white slavery," the rhetoric opened a dialog that had an important effect in furthering the development of federal anti-trafficking law. This next step, which would come in 1910, was the Mann Act, officially titled the White-Slave Traffic Act [30].

The Mann Act, at its most basic, prohibited the moving of women across state lines "for the purpose of prostitution[,] … debauchery, or any other immoral purpose" [31]. A reasonable question might be why Congress required the crossing of state lines to trigger Mann Act enforcement. The answer to this is based on the fact that Congress may only legislate on topics the Constitution has granted it [32].

Instead of basing the Act on the Thirteenth Amendment's specific grant of power to enforce slavery's abolition, Congress based its power to legislate the Mann Act on the Constitution's Commerce Clause. The Commerce Clause grants Congress the ability "to regulate Commerce … among the several States" [33], which, in 1910, meant commerce that crossed state lines [34]. As a result, many federal statutes are framed around targeting conduct "involving interstate commerce."

5.2   Trafficking Victims Protection Act of 2000 (TVPA)

Toward the end of the twentieth century, gaps in the law of human trafficking began showing that required a more robust legal framework. The core human trafficking laws had been on the books for a long time—many of them since the early 1800s. The problem was not one of archaic laws in a modern world—much of the core laws remain even today remarkably similar to how they first appeared in legislation. The problem was that traffickers were successfully operating in gray areas on the fringes of what the core laws covered. These more insidious methods required that the gaps be filled with legislation, and that legislation would become the Trafficking Victims Protection Act of 2000 (TVPA) [35]. The TVPA has been amended and strengthened multiple times since the original legislation became law [36, 37–43, 44], and it is still developing.

One of the TVPA's most potent measures was an addition to Chapter 77 extending the scope of what constitutes coercive force. A new section to Chapter 77 criminalized coerced "labor or services" through insinuations that someone, whether the victim or anyone else, "would suffer serious harm or physical restraint" [45, 46]. The addition also extends punishment to people who, without directly participating, gain from human trafficking when they either know or should know that it's happening [47]. Those two facets of the new section removed much of traffickers' ability to skirt the intent of slavery's prohibition. First, the new section meant that those using psychological coercion could be prosecuted. Second, criminals—especially in organized crime—find ways to distance themselves from their crimes by using intermediaries. This can make it hard to pin a crime on someone who ordered the crime but did not directly commit it. Chapter 77's new section allowed prosecutors to tackle criminals responsible for human trafficking that did not actively do the deed. The vast majority of human trafficking prosecutions fall under that section or another TVPA addition, Section 1591 [48].

Section 1591 criminalizes two types of sex trafficking [49]. First, it bans sex trafficking using force, fraud, or coercion. Second, it bans sex trafficking *of children* by any means whatsoever, not just by force, fraud, or coercion. This second aspect removes the burden from prosecutors to prove that someone used force, fraud, or coercion when children are involved. So anyone who "recruits, entices, harbors, transports, provides, obtains, or maintains" someone in order "to engage in a commercial sex act" will be automatically afoul of the law when the victim is under 18. With adult victims, there must be force, fraud, or coercion. The section also

punishes those who benefit from this kind of sex trafficking when they know or should know that it is occurring. So between Section 1591's treatment of sex trafficking and Section 1589's treatment of forced labor, there is a huge range of conduct that essentially includes most of the conduct in Chapter 77's older provisions and expands its coverage. Other additions included a separate crime for traffickers who take victims' passports or immigration documents as well as a requirement that traffickers pay restitution to their victims [50]. Victims even have the ability to file civil suits against their traffickers [51]. These additions have provided valuable padding to Chapter 77's core provisions.

Punishing criminals is only one of three fundamental facets to human trafficking legislation. The other two involve protecting victims and preventing trafficking in the first place [52]. The original TVPA provided the beginnings of a framework for caring for victims. The most concrete provisions were for for immigrants, since they are especially vulnerable to trafficking, and could have faced deportation before the TVPA. After the TVPA, immigrant victims of severe forms of trafficking are able to remain in the country and remain eligible for government benefits in a status that is effectively the same as refugee status [53]. Not only did this remove a way that victims have been punished, it also incentivized victim cooperation in the efforts to prosecute traffickers. This section, as expanded over the past 20 years, provides for long-term assistance for children, grants for victim care and housing, protections for victims in custody, training for government officials, and information for victims [54].

Prevention finds the widest spread of statutory law, and its measures touch on everything from foreign relations to public health to immigration to domestic security. The prevention side seeks to stop human trafficking before it happens and break the patterns that lead to exploitation. Legislation aimed at preventing human trafficking includes the deterrent measures found in Chapter 77's criminal provisions, but also focuses on helping inform and empower those vulnerable to trafficking. Its measures primarily seek to inform the public, train government officials, and strengthen vulnerable communities.

5.3   State Laws

It would take an entire chapter to provide even a basic overview of state laws combatting human trafficking [55]. Each state presents its own legal system, its own problems, and its own legislature. As a result, there are 50 different systems that approach this problem in ways that have a lot of overlap, but also many differences. While this is not the place to detail each state's laws, readers living in the United States should be aware that federal law is not the only law of human trafficking. States are, after all, the primary law enforcement entities. They possess what is known in constitutional law as "the police power," under which they remain the primary legal force except where the Constitution expressly delegates power to Congress [32]. There are attempts, though, at crafting uniform laws, as well generally as toward human trafficking specifically.

5.4   Attempts at Uniform State Human Trafficking Laws

State law can be an irregular patchwork of conflicting—or at least incongruous—laws [56]. But states often base legislation on what they have seen work in other states. Many of those laws, too, are based on wording created by the Uniform Law Commission (ULC), a non-profit and non-partisan organization that has provided language for huge amounts of state legislation [57]. In 2013, the ULC released its model human trafficking legislation, the Prevention of and Remedies for Human Trafficking Act (PRHTA). As of early 2022 nine states plus one territory (the U.S. Virgin Islands) have adopted it in some form [58].

The PRHTA is important for the same reason the Palermo Protocol (discussed below) is important. It provides a framework for consistent punishment of traffickers, protection for victims, and efforts at prevention that include public awareness and interstate partnerships. Like the Palermo Protocol, it is aspirational, in that its provisions are merely recommendations until a legislative body enacts them. Most importantly, it is a foundation to build upon. Considering how slow the process can be to change the law, it is impressive that those nine states have enacted the PRHTA in the short amount of time since its release. That number will likely grow in coming years.

6   Enforcement Through Federal Administrative Agencies

The executive branch enforces Congress's laws. This power to execute laws is vested in the President, but delegated to various administrative agencies either through Congress's explicit directions or through the President's prerogative. Having a feel for Congress's laws only shows part of a picture that is incomplete without an idea of how the executive branch enforces those laws.

The President, like any executive, will have to conduct operations without being told all of the details on how to conduct them. When Congress passes a law, for example, it is up to the President (and the administrative agencies under the President), to decide how best to execute the law. Sometimes Congress will order the head of an agency to issue rules that clarify how the law will be executed. These rules end up in the Code of Federal Regulations, which is vast, but available online and becoming easier to search and browse as the government modernizes its publicly available legal information [59].

In addition to the rulemaking the TVPA would require from the executive branch, Congress also ordered the President to assemble an interagency task force to monitor and fight human trafficking [60]. The Secretary of State heads the task force, and it must include the heads of several named departments, and the President has discretion to name other officials to the task force [60]. Congress expects this task force to come up with ways to coordinate among the various federal agencies, state entities, and international bodies to bring forth the law's intent. As touched on above, this is an example of the degree of discretion that the executive branch has in implementing Congress's laws.

The section sets out several responsibilities for the task force that include what kind of record keeping and reports it will issue as well as the goals for a separate Office to Monitor and Combat Trafficking [60]. Knowing what the statute says is one thing, though. Knowing how the executive branch brings it to fruition is another. The agencies assembled into the task force give a hint into how they fit together to prosecute criminals, protect victims, and prevent human trafficking. Some, like the Department of Justice, will heavily play the prosecution role [61]. Others, like the Department of Health and Human Services, play more of a victim protection role [62]. One might expect the Department of Education [63] and the Department of Labor [64] to focus more on prevention. At the same time, each department's role reinforces the others.

A concrete example of the executive branch giving life to Congress's TVPA directions is the National Human Trafficking Hotline. The Hotline is an interesting example of how an otherwise vague legal mandate for agencies to cooperate to protect victims became, through administration enforcement, a tangible resource. The TVPA called for grants to be given to organizations that would help the broader goal of victim protection. It did not say who should get the grant money or what, specifically, the recipients should do with it, but the Department of Health and Human Services (HHS) had a vision of what it wanted. One of the grants it made led to an organization called the Polaris Project establishing the National Human Trafficking Hotline [65, 66]. While the HHS funds the Hotline, Congress has the final say over the details or existence of that funding, or the way that the Hotline is publicized [36, 67]. Any time Congress makes a law, administrative agencies must do their best to give meaning to those laws through enforcement, just as the judicial branches must make sense of them through interpretation.

7 Judicial Approaches

Judges have two essential functions relevant to the operation of human trafficking law—and law in general. First, judges must interpret what the laws mean and what laws apply when the answers are not always clear. Second, judges will apply the law to the facts of whatever cases are before them. Sometimes, in the case of some civil trials or when criminal defendants waive the right to a jury trial, judges will also determine facts and decide guilt; but that is generally a jury's role.

7.1 Interpretation

If legislation were always clear, there would be little need for professional judges or lawyers. Interpretations can vary over time and have lasting effects on all facets of life. In the case of human trafficking, one such interpretation led to some of the legal gaps that Congress sought to remedy in passing the TVPA. This 1988 case, United States v. Kozminski [68], dealt with Chapter 77's involuntary servitude statute. The case dealt with a couple who operated a farm. They had two mentally handicapped

men working there in terrible conditions. The couple kept the men working there through psychological coercion, and prosecutors asked the Court to consider this involuntary servitude.

After a jury found the Kozminskis guilty, they appealed and the case worked its way up to the United States Supreme Court. Government lawyers, wanting to preserve as many tools as possible to fight involuntary servitude, urge a broad interpretation of the term that would include "compulsion of services by any means" [68, p. 950]. The Court felt this proposed interpretation would include "psychological coercion as well as almost any other type of speech … to persuade a reluctant person to work" [68, p. 950]. The Court was not comfortable extending the law that far (that is Congress's job, after all), and it felt that "the risk of arbitrary or discriminatory prosecution" inherent to broad legislation was too great [68, p. 950]. So it adopted a narrow interpretation of involuntary servitude that required, for adults at least, that the coercion be by actual or threatened physical force (putting them in chains, say) [68].

That single visit to the Supreme Court led to an immediate and drastic reduction in the scope of what could be punished under Chapter 77's ban on involuntary servitude. But it also planted a seed that would grow into the will to enact the TVPA, and Congress called out the case by name as part of the TVPA's purpose [69]. It is not just the fate of a defendant that can turn on a court's interpretation of a single word—entire fields of law can change.

7.2   Sentencing

When a law's interpretation has been settled, a court will have to apply it. In a criminal case, it will generally be the jury's role to apply the law to the facts of the case to determine guilt. Once a defendant is found (or pleads) guilty, it falls upon a judge to sentence the guilty party. To assist judges in that effort, the United States Sentencing Commission issues sentencing guidelines [70]. These guidelines are not mandatory [71], but they have starting point for judges weighing sentences [72]. In practical terms, this means that judges have a great deal of discretion when choosing how long to sentence convicted traffickers. While there is a lot that goes into calculating the guidelines' sentence ranges, anyone can access the materials and see what is considered.

8   International Efforts

Human trafficking knows no borders, and combatting it requires multi-national cooperation. The tricky part about international law is that each country is responsible for enforcing it. No international entity forces countries to abide by treaties—only diplomacy or war can do that. Still, countries normally find it beneficial to do what they say they will do after signing a pact—otherwise other countries won't bother cooperating with them.

In the United States, there are essentially two things that can happen with a treaty. In both, the President will have signed an agreement with another country or countries. But for it to become binding law, the Senate must ratify the treaty by a two-thirds majority [73]. Without Congress ratifying it, U.S. cooperation is merely at the whim of whoever is President at any given time.

The earliest U.S. treaties operated in a world of ubiquitous slavery; therefore, many early treaties covered one country's treatment or return of slaves to another [74]. Some of the earliest U.S. treaties negotiated provisions banning the enslavement of U.S. citizens [75]. At the same time, the United States negotiated many treaties even before its own abolition of slavery that aimed at either limiting the growth of, or ending altogether, slavery. The 1814 Treaty of Ghent between the United States and Britain, for example, which ended the War of 1812, declared the slave trade "irreconcilable with the principles of humanity and [j]ustice" [76]. The two countries pledged their desire "to promote its entire abolition" [76]. Even after the Thirteenth Amendment's abolition of slavery, numerous treaties into the twentieth century reflect ongoing efforts to extinguish slavery [77, 78]. So rather than considering slavery to have ended with the U.S. Civil War only to resurge in the late twentieth century, it is important to recognize that slavery has never disappeared.

The United States signed an early multilateral anti-human-trafficking agreement in the twentieth century's early years [79]. The 1904 agreement sought cooperation for identifying and preventing international traffic in women "intended for debauchery" [79]. The 1926 Slavery Convention showed further awareness that slavery could be more insidious than had previously been accounted for. The Convention recognized situations "analogous to slavery," though the original text still limited its definition of slavery to cases where someone exercised "rights of ownership" over another [80]. The Convention's definition would eventually expand to include debt bondage, serfdom, forced marriage, and child labor [81].

The same legal gaps, however, that led to the Congress's enactment of the TVPA also led the international community to revamp its treatment of human trafficking. The vehicle for this new attempt to modernize international human trafficking efforts would become known as the Palermo Protocol [82], and the Senate would approve it in 2004. The Palermo Protocol is a supplement to the 2001 United Nations Convention Against Transnational Organized Crime [83]. Its most important function is an attempt at standardizing the definition and language of human trafficking. Its third article sets that definition. First, there must be the act of "recruitment, transportation, transfer, harbouring or receipt of persons." Second, the act must include the use or threat of "force or other forms of coercion," abduction, fraud, deception, abuse of power, abuse of someone vulnerable, or the exchange of "payments or benefits to achieve the consent of a person having control over another person." Third, the goal of the act must be exploitation, which is defined broadly. The broad scope of exploitation includes "sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs" [82].

It's important to note that the Palermo Protocol itself does not change or dictate any country's laws. A country adopting the Protocol is making a commitment to conform its laws to the Palermo Protocol's spirit and function. It is the country's

responsibility to act on that commitment as it sees fit, and the degree to which countries match the Protocol's provisions reflects their collective wills. There may be diplomatic pressure to reform law, but it is up to the participating countries themselves to do it.

9 Conclusion

The law of human trafficking is not simple, and this chapter is only a superficial introduction to the legal framework currently in place. The general theme of all human trafficking laws worldwide is that they seek to prosecute offenders, protect victims, and prevent trafficking, before it starts, through public awareness and partnerships. These laws target the purposeful exploitation of vulnerable individuals through force, threats, or coercion by certain acts which reduce them to or maintain them in a state of servitude. The reader should now be familiar with how these laws came into being and how they currently relate to each other.

This basic understanding of the law of human trafficking will leave readers better able to identify potential victims of human trafficking and help them. Readers should have the vocabulary to make meaningful contributions to organizational policies, especially those measures aimed at protecting the victims of human trafficking. What the reader will not be, however, is an expert on the law, and it is crucial to seek legal counsel when important questions arise.

Discussion Questions

- Look up the law for the state in which you live.
- State the definition of human trafficking according to the Palermo Protocol.
- Identify the protections afforded to victims of human trafficking in the U.S.

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Part II

Types

Is There Trafficking in Your Neighborhood?

Rosemary Donley and Jayna Moceri-Brooks

1   Introduction and Background

Although there are 24.9 million victims of trafficking worldwide, trafficking is understudied [1, 2]. Zimmerman and Kiss [3] note that globally 25 million people are being trafficked, 16 million (64%) for labor, 4.8 million (19%) for sex work, and 4.1 million (17%) for forced labor in the construction, manufacturing, mining, or in the domestic and hospitality industries [4]. The Asia-pacific region accounts for the largest number of forced laborers: 15.4 million (62%). Africa reported 5.7 million (23%), followed by Europe and Central Asia with 2.2 million (9%). The Americas account for 1.2 million (5%) and the Arab States account for 1% of all victims. Human trafficking is not restricted to one or two continents. Human trafficking may involve travel: 2.2 million (14%) of forced labor victims move internally and internationally, while 3.5 million (74%) of the victims of sexual exploitation no longer live in their own countries [5]. Trafficking generates 32 billion dollars in tax-free revenue each year [6].

2   Profile of the Person Who Is Trafficked

The global profile of the person who is trafficked differs. Traffickers attract their victims without consideration of race, ethnicity, gender, education, or socio-economic status. The American victim is usually a young woman between 18 and 24 [7]. She is recruited for sex work, childcare, domestic work, or for the hospitality industry by a boyfriend or a person whom she knows. Roommates, friends, employers, drug dealers, and strangers are also identified as recruiters. Young boys

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are commonly recruited into sex trafficking by family members [8, 9]. This may explain why male sex trafficking victims tend to be younger than their female counterparts [9]. Young men are recruited for farm work and the fishing industry. Children, especially young boys between ages 11 and 14, are primarily recruited for pornography. Some victims lead an apparently "normal lives," living at home and going to school.

The International Labor Organization estimates that 15.4 (40%) of young women are forced into early marriages by their parents. The reasons are bridal price, debt cancelations, or the settling of disputes. Adolescents may be forced into early marriages where there is a significant difference in age been the young bride and her husband [10]. In parts of Asia and South and Central America, a young girl may be sold to a trafficker by parents who need money to support other members of the family. Sometimes parents or the young woman herself are lured by the offer of a job or education and a better life in a big city. However, jobs and school are false promises which young women painfully learn when they reach their final destination.

In the United States and abroad, usually persons who are trafficked are not free to come and go as they wish. They become distrustful and cool in their interactions with others. They avoid eye contact and do not initiate conversations. Their physical appearance is disheveled; they may appear malnourished and show signs of physical abuse. Often, they have a tattoo and/or a number that marks them as belonging to someone. They have few clothes and limited possessions. It is not uncommon for traffickers to take passports, licenses, cell phones, and other identifying information. Possession of valued identification and other documents by their traffickers is another form of entrapment.

Victims of trafficking live in crowded and cluttered spaces. Sometimes these living spaces are also their workplaces. They have no money although they work long hours in dangerous situations. If they leave their living or workplaces, they are accompanied by someone who controls where they go and what they say. If the trafficked victim does not speak English, the trafficker serves as a translator [11]. In the United States, the proportion of persons recruited for sexual versus labor trafficking has changed significantly. In 2004, 60% of victims were trafficked for labor, and 40% for sex; in 2019, 84% of victims were recruited for sex work and 16% for labor [9]. Over 40% of trafficked women and men have secondary (technical or college/post-graduate) degrees. Researchers [12] who studied over 11,000 individuals who were trafficked reported that a high percentage of women and men were married; 50% were single. Most trafficked individuals come from low-income families and the majority had parents and siblings [12]. Ironically men who were abused as children were likely to become sexual perpetrators, supportive of the notion of a victim-to-victimizer cycle. Females victimized as children do not exhibit this pattern [13].

Females were twice as likely to experience physical and sexual violence than males, especially between the ages of 18 and 29. Incidences of violence toward females decreased with age. Sexual violence is most prevalent among women who work in domestic or hospitality jobs. Young males below 18 are more likely to experience sexual violence. Individuals who were from high socio-economic

families were also twice as likely to experience violence than person from lower socio-economic status. Trafficked men and women, who either crossed one border or were using forged documents, reported fewer violent experiences. Overall, although only half of trafficked victims experienced physical or sexual violence, they did receive threats of violence.

3   Trafficking of Young People

In the United States and Canada, rural youth are more often trafficked by family members than urban youth. Youth living in group homes, the intellectually challenged, people who live in homeless shelters, or runaways are identified and recruited into trafficking. There are also "hot spots" where trafficking commonly occurs; hotels/motels with easy access to the parking lot door, truck stops, cities with large, popular sporting events, and major highways. Some European, Asian and South American countries, Germany, Spain, the Netherlands, Thailand, Malaysia, the Philippines, Kenya, the Dominican Republic, and South America are well known centers of sex tourism. Amsterdam and some major cities in Spain have well-known red light districts where women sit at windows and advertise sex [14, 15].

Young people are lured into trafficking on social media platforms and multi-player video games. Places of employment, malls, homeless shelters, juvenile detention centers, and poor neighborhoods are also recruitment sites. Traffickers commonly use "Romeo pimping" to entrap their victims. These "Romeos" or "boy-friends" often groom their victims by showering them with "love," attention, expensive gifts, money, and/or drugs, promising them a fairy-tale life. Eventually the trafficker's behavior shifts to manipulating the victim by asking them to have sex with their friend "this one time" to make money. Then they blackmail or coerce the victim to continue selling sex. Other traffickers shift from being "Romeo" to suddenly using abusive force to force their partner to sell sex [8].

Another common entrapment is through new friends (other girls who are trafficked). They describe themselves as "in the life," and they become role models who normalize selling sex. Family members use family or parental authority to either groom their children (through sexual abuse) or force their children into the sex trade. Some traffickers take a more forceful approach from the start, abducting, raping, blackmailing, torturing, or threatening young women and men and forcing them to have sex [8]. Migrants are lured into the trade by perceived job opportunities. They soon discover that they have been trapped in prostitution or forced labor [16].

4   Behavior of Traffickers

All traffickers use common controlling techniques, psychological abuse, and threats. Other common means of control, in addition to sexual and physical abuse, is restricting movement, and/or making victims dependent on drugs [8, 9]. Drugs are

a powerful motivator. Persons with addictions will do anything to gain access to drugs, especially as their need for higher and/or more frequent doses increases [15].

As noted, psychological abuse often leads to a "trauma bond" between the trafficker and the victim; some victims believe that their traffickers care for them. They, in turn, care about the well-being of their traffickers. Traffickers also use guilt, shame, blackmail, and social isolation to control their victims. As mentioned earlier in this chapter, traffickers withhold money, identification cards, and phones from their victims as a form of control. They also re-locate their victims, moving to different motels and/or different states [8]. Frequent re-location keeps victims disoriented, vulnerable, and socially isolated. Further, traffickers entrap their victims through pregnancy. These women are told that because they cannot work, they must rely on the trafficker to provide for them and their child's basic needs (food, clothes, shelter). Sometimes victims think that staying in their trafficked situation is the only way to survive because they have no money to pay off their debt, or care for their baby, or no family members that can assist them. Some young victims have difficulty leaving the sex trade because they feel loved by their traffickers and have a deep need for love.

Finally, victims of trafficking work in agriculture, forestry, fishing, construction, domestic work, the hospitality and manufacturing industries, food service, beauty services, traveling sales, housekeeping, and commercial sex work [12, 17]. In these industries, trafficking victims are frequently injured. They are bruised, burned, experience fractures, or are infected with sexually transmitted diseases [18].

5   Health Status of People Who Are Trafficked

During the pandemic, trafficked victims contracted COVID-19. There are no data about the COVID-19 infection rate among persons who are trafficked [18]. Their limited access to health care and their invisibility in the community put them at high risk for contracting COVID-19. Persons who were trafficked faced unusual barriers in accessing tests, vaccines, treatment, and healthcare. Globally, victims of trafficking were stigmatized as carriers or spreaders of the virus.

The pandemic offered a unique opportunity to look at deeply entrenched inequalities in our economic and health systems that feed marginalization, gender-based violence, exploitation, homelessness, poor health, and human trafficking. Persons who had been trafficked were also at risk of violence from their traffickers because their infections made them too sick to fish, work in the fields, care for children, engage in sex work or participate in the hospitality or domestic services. Further, masking and social distancing made it is easier for traffickers to hide their operations, making victims less visible.

The pandemic had a significant economic impact on the trafficked community. This was most evident in the hospitality, farming and fishing industries. During the pandemic, there were very few large social events or banquets in hotels. Hotels laid off staff and some hotels closed. Beauty parlors and nail salons were closed. There were no crowds at sporting events. Migrant farm workers were unable to enter the

country or follow the crops. Meat packing companies were closed as more workers became ill with COVID-19. Empty grocery shelves reflected problems in the supply chain. Fishing companies found it difficult to sell their fish because of closed hotels, restaurants, supermarkets, and grocery stores.

Another way to understand COVID-19's impact on the trafficked community is to examine three groups of trafficked persons: persons who escaped trafficking, persons currently being trafficked and those at risk. During the epidemic, many persons who had escaped trafficking lost their lost their jobs, their housing, and their social mobility. Survivors of trafficking sold cars, cell phones, and other valued possessions to purchase food and avoid homelessness. Battered spouses, runaways, and adolescents found that poverty, harassment, illness and abuse, factors that contributed to their being recruited into trafficking in the first place, made them more susceptible to pressure by former traffickers to return to them [19].

Even in ordinary times, victims of trafficking do not receive routine and preventative care. They suffer from poor mental and physical health, depression, occupational injuries, homelessness, and sexually transmitted diseases. They do not visit health care providers unless they become very ill because of mistrust of health care providers, exhaustion, fear of deportation, fear of judgment from health care providers, or uncertainty about where to get help [20]. They do not receive adequate treatment for infections or illnesses that affect their current and future states of health. The COVID-19 pandemic exacerbated their health issues because clinics were closed and low-acuity medical care shifted to a virtual environment. These changes in health care delivery were especially problematic during the pandemic because victims of sex trafficking no longer had the opportunity to speak privately to a health care provider. Virtual visits are not private.

Trafficking is a lucrative worldwide business. Vulnerable people provide free labor that supports traffickers, organizations, and cartels. Anyone who attempts to interfere or close down the business faces opposition and possible death. Because trafficking is hidden, most people are surprised that trafficking occurs not just in second rate hotels and motels, but in their neighborhoods. Their first clue that trafficking exists comes when the police raid the house next door.

Nurses in Emergency Rooms (ERs) and mobile clinics see persons who are trafficked. However, in these busy settings, patients' identities may be missed. More in-service education is needed to remind nurses and all health professionals that clues about their patient's forced occupation are subtle. Their presenting history may not match their injuries or symptoms; the person accompanying the patient may speak for the patient and refuse to leave the patient's side, the patient may seem in a hurry to leave the health care setting and will refuse to be admitted. The need for public and professional education about trafficking is particularly important for hotel and motel workers and guests, for residents in communities near major freeways, and in cities that are centers for major sport or recreational events. In Pittsburgh, a group of Catholic nuns taught hotel/motel maids how to recognize signs of trafficking in their workplaces and how to report it to management.

Most labor trafficking occurs in the fishing and agriculture industries. The fishing industry employs young men who work at sea. Their only way of escape is to

jump overboard, which is not a good option. When the ships are unloaded and the fish is packed in refrigerator trucks, they may find that the truck drivers do not speak their language or do not want to be involved. If the trafficked fisherman manages to escape, he faces a new set of obstacles in a port city he does not know.

Families, men, women, and children are often trafficked to harvest crops. These migrant farm workers work in fields and orchards and in plants that process the food. The farm workers who pick vegetables and fruit work in the sun and rain. Their work requires stamina and physical strength as they travel from field to field harvesting the crops. Traffickers, not the farm workers, get paid. Because the workers are families with young children, escape is difficult. Domestic workers and women who work in the hospitality industry engage in childcare, food preparation/ service, or work as maids. They may also be forced into sexual alliances with men in their households or with men who frequent the hotels/motels, or the coffee shops or restaurants where they work. Their traffickers make it difficult for them to run away.

As was noted earlier, fear, the thought that they are "loved," risk of deportation, concern for the safety of their families, addiction, shame, and knowledge that they have no money and nowhere to go keeps many victims in their situations. They also fear that persons who offer help may also be traffickers.

SOAR is a continuing education program, specifically designed for health care and social service workers. This trauma-informed culturally sensitive approach to human trafficking stands for Stop, Observe, Ask, and Respond [21]. Obviously, the response to the SOAR approach depends on the form of trafficking in which the person has been engaged, and the willingness of the person who is being trafficked to leave his/her line of work, and to trust a person or more typically an organization. The methods of stopping trafficking are complex and differ by the types of trafficking and where it occurs. Addressing sex work, labor, and trafficking in the domestic and hospitality industries need to be approached differently. The appropriate responses are framed by the choices of the trafficked person, the resources of the person/ organization, and the part of the world where the trafficked person lives.

Lack of money draws many persons into trafficking. They seek a better life and are willing to travel and work for it. The Social Determinants of Health is another framework that is holistic and considers that trafficking affects all aspects of the person and the community where it occurs [22]. If you look at their situation through the lens of the Social Determinates of Health, you realize that most people who are drawn into trafficking do not possess the factors that enhance health and well-being: education, housing, a safe environment, social support, employment, adequate nutrition, and access to health care. While data indicate that 40% of those who are trafficked have completed high school and some have gone to college, their work often takes them to areas where they do not speak the language or understand the culture. Young people who run away from home usually find themselves homeless, living on the streets, or sleeping in shelters or temporary housing. Usually persons who are trafficked lack positive social support. Young women believe that their traffickers are the only ones who truly care for them.

6   Summary

For traffickers, these factors partially explain why trafficking has persisted in many parts of the world for centuries. It is easy, lucrative, hidden, and tax free. Solving the trafficking problem, even in one country, requires the co-operation of the government, private sector organizations, churches, foundations, health care professionals, and law enforcement [2]. It is easier to prevent than to uproot trafficking. It takes courage, commitment, and compassion. Is nursing as a profession and are nurses ready to assist those who are at risk of or actually being trafficked?

Discussion Questions
- Describe the different forms in which trafficking occurs.
- Who is at greatest risk for trafficking?
- What clues should you look for in assessing a person who may be being trafficked or is at risk?
- Whom do you tell? What do you do?
- What do you know about the prevalence of trafficking in the United States?

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Family-Facilitated Child Sex Trafficking in India: A Nexus of Caste, Structural Vulnerabilities, and Desperation

Rochelle L. Dalla

1   Introduction

Child sex trafficking, a form of commercial sexual exploitation of children (CSEC), is an international crime of profound proportions. Although prevalence is impossible to gauge, its global existence—in countries diverse in culture, economics, politics, and religion—and in innumerable manifestations, is undebatable [1–3]. A uniquely disturbing form of child sex trafficking involves family members as perpetrators— or collaborators—in the trafficking of minor kin. There is little reason to believe that the sex trafficking of children—facilitated by parents and other family members— does not also occur globally. Yet, from an empirical point of view, little is known about the commercial sexual exploitation of children when family members act as gatekeepers or perpetrators. Further, much of what is currently understood about child sex trafficking generally speaking, and facilitated by kin specifically, comes from studies in Western and developed countries—which—for all intents and purposes comprises a snippet only of the 360° view needed to effect culturally relevant localized change, globally. Small-scale ecologically contextualized investigations are critical for surfacing nuanced manifestations of family involved child sex trafficking. To add to the small but growing body of literature, in this chapter I synthesize my research on child involved sex trafficking in India as a means of (a) highlighting similarities and differences with the broader scientific literature, and (b) addressing research and practice needs for moving the field of scholarship forward in productive and meaningful ways.

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2   Defining Sex Trafficking for Use in a Global Context

The United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, Supplementing the United Nations Convention Against Transnational Organized Crime (UNHRC; [4]) (aka the Palermo Protocol) provides the most comprehensive and internationally agreed upon definition of human trafficking.

(a) "Trafficking in persons" shall mean the recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labor or services, slavery or practices similar to slavery, servitude, or the removal of organs
(b) The consent of a victim of trafficking in persons to the intended exploitation set forth in subparagraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used
(c) *The recruitment, transportation, transfer, harboring or receipt of a child for the purpose of exploitation shall be considered "trafficking in persons" even if this does not involve any of the means set forth in subparagraph (a) of this article*
(d) *"Child" shall mean any person under 18 years of age [italicized for emphasis]*

I highlight both (c) and (d) to emphasize that anyone under the age of 18 involved in the commercial sex industry (CSI) is considered a victim of sex trafficking according to the Protocol. The Palermo Protocol was ratified by the Indian Government in May 2011. Despite its global reach and ratification by 190 parties, it is not without criticism. Controversy surrounds the Palermo's definition [5] which is important because definitional issues impact application. However, criticisms abound in many, if not most, written legal or political documents related to human trafficking. With regard to Indian legal directives, including the Immoral Traffick (Prevention) Act of 1956, Helpingstine et al. [6] write, "There is a multiplicity and overlapping of acts and laws and yet, none adequately addresses the complex issues related to [human] trafficking." For simplicity, my research into sex trafficking—regardless of country in which data are collected—utilizes the definitions provided in the Palermo Protocol.

3   Family-Facilitated Child Sex Trafficking

Situations in which minors (anyone under the age of 18) are sexually exploited by a family member, or by a third party who is assisted by a family member, is referred to throughout this chapter as "family-facilitated child sex trafficking" (FFCST).

This is a specific type of child sex trafficking which is sometimes also referred to in the scholarly literature as "familial trafficking" [7], "family facilitated juvenile sex trafficking" [8], and "family-controlled trafficking" [9]. Although interest in this particular manifestation of child sex trafficking is increasing, the body of literature and subsequent field of knowledge remain in the nascent stages. This is largely due to difficulty identifying and accessing survivors (e.g., many do not realize they are/have been victims of sex trafficking, the human trafficking industry remains largely underground), as well as myriad additional challenges in conducting sensitive research involving *family* as perpetrators, including complex and multi-layered dynamics and emotional processes involving manipulation, coercion and control, and dependence and affection [9, 10].

Further, it is important to note at the outset that the empirical knowledge about family-facilitated child sex trafficking is from Western countries—which has implications for assumptions about family processes and dynamics as well as the commercial sex industry (CSI). With that in mind, a brief overview of the scholarly literature related to child sex trafficking is in order.

Although anyone could become a child victim of sex trafficking, certain factors place individuals at greater risk. These include poverty [11], forced and premature self-care (i.e., due to parental neglect/inability) [12], running away from home, homelessness, living in out-of-home placement, and migration [13–15], LGBTQ+ identification [16], history of sexual or physical abuse [17], and substance use [18–20]. Furthermore, compared to youth trafficked by strangers, acquaintances, or friends, those trafficked by kin are disproportionately more likely to experience familial involvement in the CSI, frequent relocation, and lack of child maltreatment detection [8, 21].

Outcomes of child sex trafficking (whether family controlled or otherwise) can be emotional, social, and physical and include the following: anxiety, depression, posttraumatic stress disorder, suicidal ideation, self-harming behavior, conduct disorders, substance use/abuse, sexually transmitted infections (STIs), and social/relational problems (e.g., attachment disorders) [13, 18].

4   Structural Vulnerabilities

Context matters. This is true regardless of the phenomena of interest—with those phenomena involving complexities of culture, human agency, and developmental pathways requiring greater attention to contextual nuance than those involving static and mechanical issues or phenomena amenable to physical manipulation and control. Further, it is undeniable that some contexts offer greater availability of and access to valuable resources (e.g., material, social, institutional) than others and that resource disparities have both direct and indirect implications for opportunities (and barriers) for optimal development. Structural violence is a term coined by Galtung [22], who defined it as the "indirect violence built into repressive social orders creating enormous differences between potential and actual human self-realization" [23]. Through time, the word "violence" has fallen out of favor and been replaced

with the term "vulnerability" [24] to allow for incorporation and assessment of broad structural forces (e.g., political, economic, cultural) that imping upon development. A structural vulnerability is a risk or threat to an individual, family unit, community, or society due to deficient resources including money, education, access to health care, or important/vital information. Included in the wider conceptualization of risk are social hierarchies, such as the Hindu caste system, which convey a taxonomy of worthiness as well as social in/exclusion. Quesada et al. [24] explain the ramifications as follows: "…the vulnerability of an individual is produced by his or her location in a hierarchical social order and its diverse network of power relationships and effects." Not surprisingly, those most affected by structural vulnerabilities are marginalized and pariah populations [25].

Structural vulnerabilities rarely appear in isolation. That is, a single vulnerability (e.g., low socioeconomic status) tends to manifest with other vulnerabilities (e.g., poor/insufficient housing) and converge to create a risk environment—defined as *a physical or social* environment that either enhances or reduces risk for individuals associated with that environment [26, 27]. Conceptualization of risk environments encourages examination of factors beyond the individual such as neighborhood conditions (violence/crime), discrimination (e.g., racial, gender, caste), and economic and social inequalities that reflect the realities of the human condition. Environments characterized by substantial risk create additional vulnerabilities— by circumscribing individuals' ability to act with *agency*. Quesada et al. [24] explain that structural vulnerabilities create risk environments which set the boundaries and conditions for how people live (i.e., because of choices that exist/do not exist) as well as "how goals are prioritized, what sorts of actions and responses might seem appropriate, and which ones are possible" [28]. Structural vulnerabilities play a profound role in family-facilitated child sex trafficking in India.

5 Caste and Structural Vulnerability

The Hindu caste system dates back about 3000 years and divides Hindus (and Indian society) into four main categories: (1) Brahmins (priests), (2) Kshatryia (rulers, administrators, warriors), (3) Viasya (artisans, merchants, landowners), (4) and Sudra (laboring classes, commoners), with some 2800 total castes and subcastes [29]. The Varna categorization has a fifth element including those people deemed to be entirely outside its scope (literally "outcast" or out-of-caste) and includes tribal people and "untouchables" (street sweepers, latrine cleaners). Today, "untouchables" are referred to as *Dalits.* Dalits are those who officially comprise the Scheduled Castes (SC)[1] and constitute about 17% of India's total population. SC include about 1100 unique subcastes who collectively occupy the lowest rung on India's caste hierarchy [29]. Historically, untouchables were denied social, economic, cultural,

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[1] Scheduled castes and scheduled tribes (ST) are officially designated groups of historically disadvantaged people in India. Though differences between caste and tribe exist, for all intents and purposes, the term "caste" is used throughout this chapter.

and political rights, including rights to property and education. Despite the enactment of laws to abolish discriminatory practices against Dalits, caste discrimination remains pervasive across the country, especially in rural areas [30] and constitutes a profound social force that shapes life course opportunities and constraints. Dalit women face disproportionate challenges due to the compounded burdens of caste discrimination, economic deprivation, and patriarchy [31].

6   Family-Facilitated Child Sex Trafficking in India

My research in India has spanned two decades. In this time, three unique types of family-facilitated child sex trafficking have been identified (refer to Fig. 1). Careful analyses between the three reveals similarities (such as membership in one of many Dalit castes) as well as nuanced differences—differences which may have implications for developmental outcomes among those victimized by FFCST in an Indian context.[2]

Caste discrimination reduces individuals' access to educational, economic, social, political, and other tangible and non-tangible resources necessary to improve one's circumstances. Not surprisingly, the CSI in India is overwhelmingly comprised of lower caste, impoverished Dalit women and minors whose entry into the sex trade was either forced or coerced, or who lacked other viable options for generating income [32, 33].
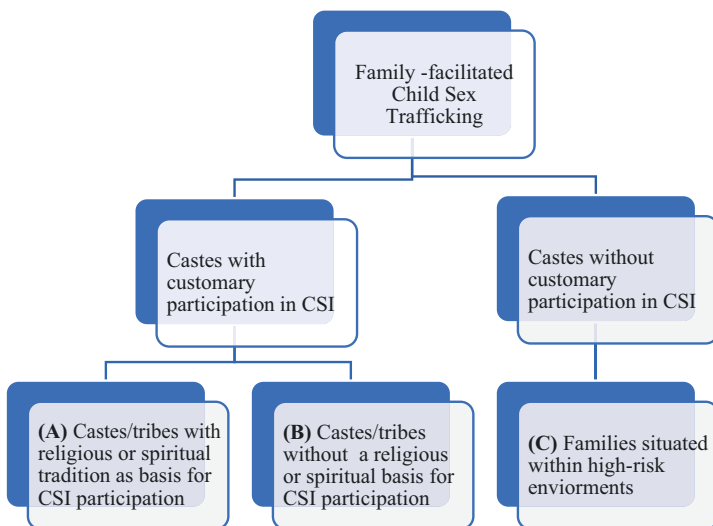
Fig. 1   Three manifestations of family-facilitated child sex trafficking in India

[2] Additional manifestations of FFCST may exist in India, although none has been described in the empirical literature, to date, that fall outside the framework depicted in Fig. 1.

6.1   High-Risk Environments and FFCST

My first empirical investigation of sex trafficking in India was aimed at better understanding the extent to which CSI entry was a product of *force, fraud, coercion or had occurred prior to 18 years of age* (i.e., that is, the extent to which women working in India's commercial sex trade were victims of sex trafficking; refer to Dalla and Kreimer [34] and Dalla et al. [35] for details). To address this question, in-depth interviews were conducted with 30 females (aged 23–40 years) working in two infamous red-light districts in Mumbai, India; interviews focused on childhood and early life experiences with specific attention to processes that led to CSI entry.

In terms of early life experiences, 29 of the 30 participants had migrated (or been brought) to Mumbai from remote and distant rural villages and were also from extremely impoverished, landless families and members of a Dalit caste. One participant described her natal village by saying, "I didn't know anything…this [sex work] doesn't happen." She continued "…we [did] agricultural work…look after the cattle, feed them…collect cow dung, cut the grass and the produce." None of the participants was literate. Formal education is considered an irrelevant and meaningless endeavor when day-to-day existence depends on harsh physical labor (if available) or scavenging for subsistence. In such contexts, children are expected to earn money as early as they are physically able. In this study, Pooja[3] provides a case in point—at age 9 she joined her parents in the rock quarries cutting stone. Another participant explained "We didn't have anybody to feed us. Every day…same roti [Indian bread] to eat, one set of clothes." Not surprisingly, exhausting physical labor, crippling indigence, and lack of services and resources took a tremendous toll on participants' families of origin. Abandonment, alcohol abuse, and early death were not uncommon.

Some caregivers responded by forcing daughters into early marriage. In fact, 16 participants (or 53%) were forced into marriage as minors (average age at marriage was 14.5 years, with an age range of 11–17 years).[4] Other caregivers responded to the same high-risk environment (i.e., that created from a multitude of structural vulnerabilities including caste discrimination, impoverishment, gender discrimination, rurality, limited physical and social resources) differently—by selling daughters into the CSI. Of the 30 interviewed, 24 (80%) met the Palermo Protocol's definition for having been victims of sex trafficking. Twelve of the 24 (or 50%) were sold as children (χ age = 12.4 years; range = 8–15 years) to work in the commercial sex trade. Six of the 12 were sold by a family friend or acquaintance, six others by kin, including: mothers ($n = 2$), sisters ($n = 2$), and stepmothers ($n = 2$). All 12 fit the definition of family-facilitated child sex trafficking (refer to Fig. 1[C]). The case of Zamekha is especially illustrative. She was sold to a brothel at age 12 and described being forced to stand, get dressed, and put on make-up. She refused, asking the brothel keeper, "Why? Why should I do any of this?" The brothel keeper

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[3] All names are pseudonyms.

[4] Child marriage is a form of human trafficking [36] and constitutes a subset of child sex trafficking [37].

responded by slapping her across the face, and yelling: "Your mother has sold you to me. Your uncle has sold you to me!"

6.2　Caste-Based and Intergenerational Family-Facilitated Child Sex Trafficking

Beyond the inequities and limitations faced by individuals on the lowest rung of the Hindu social hierarchy that renders many vulnerable to the commercial sex trade; some Dalit castes are especially well-known for active participation in the Indian sex economy. Said differently, numerous Dalit castes actively engage in the commercial sex trade as a primary (or only) means of earning income. In these communities, work in the CSI is practiced intergenerationally (across many generations of the same family) and considered customary. In such castes, pre-pubescent/early pubescent females are "selected" to enter the CSI; their lives thereafter become devoted to earning income to support kin [33, 38, 39]. Often frequently justified as a tradition or custom of culture, caste-based sex work is nonetheless a unique manifestation of family-facilitated child sex trafficking [33, 40]. Although precise numbers are difficult to gauge, thousands—perhaps hundreds of thousands—of Indian women and children are thought to be involved in India's commercial sex industry due *directly* to caste membership [38].

Some castes, including the Devadasi (meaning "servant/handmaiden of God" or "servants of the Divine" [41]) point to religious origins for their participation in the commercial sex trade (refer to Fig. 1[A]). Historically, female (and sometimes male youth; referred to as *jogini*) would be dedicated to the service of a temple and its deity and responsible for indulging in cultural activities related to the shrine (singing, dancing, lighting incense). In time, *jogini*s became obligated to cater to the sexual needs of temple patrons and village heads in order to earn income for the temple. Through time, entire lineages would "dedicate" daughters of each generation to a deity—hoping for favors or a path out of poverty. Eventually, the once-religious practice devolved into a form of institutionalized form of FFCST, with pubescent girls "dedicated" to a deity (in theory) and devoted to a life in the sex trade (in practice) to support kin. The "dedicated" girls either stay in their rural villages or migrate to the red-light brothel districts of urban areas (e.g., Mumbai, Delhi) where greater profits can be made [42].

In the study discussed earlier [34], two of the 30 participants were initiated as children to carry on the Devadasi tradition. Simply put, it was their obligation to financially support their families via work in the commercial sex trade. To illustrate, as a Devadasi, Radha was financially responsible for her siblings and other family members. She began earning money in the CSI at age 12 after being sent to live with her Devadasi aunt who taught her "how to take customers."

Caste prostitution *without* a religious basis or origin (as practiced among the Bedia, Nat, Bachada, and other castes), functions similarly (refer to Fig. 1[B]). Agrawal's [43, 44] work with the Bedia of northern India and a handful of other studies [45–50] comprise the scant academic literature on this phenomenon.

Importantly, Agrawal [44] identified unique differences between the Devadasi (discussed earlier) and the Bedia. First, only the "dedicated" Devadasi girl earns income through prostitution—typically a single female from each generation. In contrast, there is no limit to the number of Bedia girls per family or generation who engage in the commercial sex economy. Second, Devadasi women are considered "married to the god/goddess," whereas sex-industry involved Bedia females are considered "married to money" (although neither can formally marry). Third, men in Devadasi families are typically economically *independent* of their CSI-involved kin. In comparison, Bedia men rarely work and are, essentially, financially dependent upon their CSI-involved sisters and daughters. Finally, the Devadasi tradition of "dedicating" a female child dates to antiquity and is based—as noted earlier, in religious traditions; no such religious connections exist among the Bedia and the Bedia's sex-based economy is estimated to be four or five generations old.

In 2018, I traveled to India for continued investigation, with my research focused exclusively on intergenerational family processes associated with child sex trafficking among the Bedia caste of rural Madhya Pradesh (refer to Dalla et al. [46] for complete details). I was fortunate to be hosted by Samvedna [51]. Headquartered in Bhopal, Samvedna is an India-based NGO established in 2005 whose mission is to mitigate caste-based sex trafficking. With assistance of Samvedna staff, I interviewed 31 Bedia women (χ = 31.6 years, with an age range of 16–65 years) who resided across seven different rural, mixed-caste villages. Twenty-six participants were actively involved in the CSI; five had exited (or aged out). Participants entered the CSI at an average age of 15.8 years (age range = 12–20 years).

As noted earlier (see Structural Vulnerabilities), the "risk environment" encompasses both social and physical contexts [27]. Results of this study revealed that both social and physical contexts place Bedia girls in harm's way for CSI entry. Physically, the environmental context lacks basic resources considered necessary for well-being—indoor plumbing, access to education beyond the primary years, access to quality education, instructors, and educational tools (e.g., books, computers), and industry or means of earning money. Socially, gender and caste-based discrimination prevail as does pressure for females to enter the CSI which manifests in both direct (i.e., forceful) and indirect (e.g., manipulation, coercion) ways. Once initiated into the CSI, the life course of a Bedia girl is forever set in motion. She cannot marry[5] and is burdened with the economic survival and sustainability of her entire family system. Escape from the CSI comes only after she can no longer earn income from clients and when a replacement (someone able to earn on her behalf) has been initiated into the commercial sex trade. Twenty-two of the 31 participants were mothers with an average of 2.2 children each (range = 1–8 children). Children ranged in age from 3 months to 23 years old (χ = 11.3 years, SD = 4.6). Six daughters had already entered "the line." And, although the others did not *want* their daughters to participate in the CSI—there was no guarantee that

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[5] This is a strictly endorsed cultural script in which **married** Bedia females are forbidden from entering the CSI and CSI-involved females are forbidden from formal marriage (refer to Agrawal [43, 44]).

they would not. As a case in point, one participant explained: "I am trying to get them [daughters] educated, [but] if there is no money…" The only guarantee a daughter would *not* continue in the line was to not have any. This was expressed by Geta, a mother of two sons, who remarked: "I don't want any daughters because, who knows, if I die someday, she [daughter] will have to work [in the CSI]." Geta believed that if she had any female children her sons would force them into the sex industry.

6.3   Similarities Across the Three Manifestations

Structural vulnerabilities and environments posing significant social and physical risk characterize the contexts which allow all three manifestations of FFCST in India to endure.

It is important to point out that many of the structural vulnerabilities facing the families/castes/communities which perpetuate FFCST (e.g., caste discrimination, indigence, residential instability/lack of indoor plumbing or electricity, illiteracy), are, in large measure, issues which plague much of rural India [52]. Noteworthy too is that although education is one of the strongest pathways for movement out of indigence, monumental barriers render access nearly impossible. In fact, India has the largest education system in the world but 40% of its population is illiterate—most of whom are Dalits residing in rural villages [53].

Here, it is important to remember that the Dalits or Scheduled Castes were considered "children of God" by Mahatma Gandhi. The legacy has continued. Today, two broad types of social movements exist aimed at *changing* the social condition of Scheduled Castes in Indian and other (Nepal) countries [54]. One type has as its mission complete reformation of the caste system to solve the problem of untouchability, while the other type has as its mission the creation of an alternative socio-cultural structure via religious conversion (other than Hindu) or by acquiring education, economic status, and political power. Both types use political means to attain their objectives. Yet, "…despite efforts made by social reformers and provisions made in law," writes Nath [55], "…the forces of the status quo [continues]."[6]

It Millions of impoverished, illiterate, unskilled people with extensive resource, infrastructure, and accessibility needs exist throughout rural India [58–60]. In fact, the "world's worst poverty, hunger and malnutrition are to be found in India—with two thirds of the 1.1 billion population living in poverty and half the children suffering malnutrition" [55]. Yet, only certain families turn to the sex industry for income and only particular castes actively engage in the sex industry as an intergenerational, customary and community sanctioned practice. Furthermore, it is clear from prior work [33, 45, 46] that family/caste tradition works *in tandem with*

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[6] It is far beyond the scope of this chapter to discuss Dalit identity or exploration of economic independence among *Dalits* in India—but, it is critical to not paint any one group as homogenous; heterogeneity exists among all groups, including the *Dalits* of India or Nepal [56, 57].

indigence—rather than as a distinct facilitator. That is, when viable income generating options are available, families are unlikely to push daughters into the sex industry *even if they belong to castes where sex industry involvement is customary*.

6.4   Differences Across the Three Manifestations

As a social scientist—with particular interest in family processes and long-term developmental outcomes, it seems absurd to not ask: what familial, psychosocial, and intergenerational differences exist across the three manifestations of FFCST explored here? Said differently, what hypothesis could be made about those who are victims of child sex trafficking due to membership in a *religious-based* caste (such as the Devadasi) versus those who are members of a CSI-involved caste without religious origins (such as the Bedia) versus those who are members of a Dalit caste that has no affiliation to the CSI? Based on my own research [34, 35, 45, 46] as well as that of others [61–66], several hypotheses can reasonably be made with regard to familial support, personal/psychosocial well-being, and child (next generation) entry into the CSI.

In terms of familial support, those who are members of castes with historical (regardless of religious basis) affiliations to the CSI garner tremendously more support from kin than their peers who are CSI participants, but not from CSI-affiliated castes. That is, when CSI entry is part of caste and family tradition, familial ties are not severed—and, in fact, families tend to *rely on* income generated from CSI-involved daughters/mothers/sisters/aunts. Young Devadasi and Bedia girls (Fig. 1[A, B]) tend to live in the same homes as their kin—sometimes even engaging clients in private rooms of the familial home. Conversely, family relationships among victims of FFCST *without* historical connections to the sex trade (Fig. 1[C]), tend to be distant and tense, or entirely estranged. Among those families, CSI involvement by any family member is considered a source of stigma and shame—even if that person was sold into the trade as a child and by a family member!

Differences in family dynamics among sex industry involved individuals likely play a significant role in individual psychosocial well-being. It is reasonable to assume, therefore, that those with greater familial support (i.e., those with caste-based affiliations to the CSI; Fig. 1 boxes A and B) would fare better psychosocially than their peers (Fig. 1, box C). Furthermore, because those with family history and caste-based traditions associated with the CSI are tasked with financially supporting their kin, it is likely that they, in turn, receive financial support when they are no longer able to continue working in the industry (i.e., after exiting). These sources of support likely play significantly into individual health and well-being. I would hypothesize that the poorest outcomes, psychosocially as well as physically, would be among CSI-involved individuals who entry was family facilitated but without caste affiliation to the sex industry. Those individuals—sold or coerced into the sex trade by kin—uprooted from familiar environments (e.g., home/natal village) and lacking customary bases for CSI participation, face

extensive and oppressive stigma. Furthermore, these individuals would be expected to not have a system of economic support after exiting the CSI other than, perhaps, their own children.

Hypotheses can also be made about the children (next generation) of FFCST victims. Specifically, female children born to victims of FFCST and who are members of a *CSI-affiliated* caste (e.g., Devadasi, Bedia) are more likely to themselves be victims of FFCST compared to children born to victims of FFCST **without** such caste-based affiliations. Said differently, I hypothesize that the familial support expected to promote personal well-being among some FFCST victims (Fig. 1, boxes A and B) also put their daughters in jeopardy of CSI entry. Whereas the absence of familial support among other victims of FFCST (Fig. 1, box C) may serve as a protective mechanism against a destiny of CSI participation for their offspring.

7   Summary

In the United States, two primary forms of familial sex trafficking have been identified: intergenerational transmission of prostitution [67], on the one hand, and family members selling sexual access to children to obtain money, drugs, or something else of value [68] on the other. There is some overlap between these and family-facilitated child sex trafficking identified in India. That is, intergenerational transmission of prostitution exists in India as part of caste-based membership (e.g., Devadasi, Bedia) in high-risk environments. On the other hand, family members "selling sexual access" to children in India has not been documented in the extant literature—this is not to say it doesn't exist, but that it has not been empirically documented. However, another manifestation of FFCST has been identified in India—that described here as resulting from low caste status with a high-risk environment—factors coalesce in female children forced into early marriage or sold outright to those associated directly with the commercial sex trade (e.g., brothel madams, pimps).

These conclusions lead to frightening realizations. That is, much of what is currently understood about FFCST, including "risk," may not be generalizable to culturally unique populations. Further, although the scope of family-facilitated child sex trafficking is impossible to gauge in India, much less globally, is likely much more extensive and culturally nuanced than previously imagined. Further, current approaches to child sex trafficking—based in legal doctrine and law enforcement measures—are utterly failing [69]. Stated differently, it would be difficult to imagine the continuation of any of the three manifestations of FFCST discussed in this chapter if the structural barriers of indigence, illiteracy, and caste and gender-based discrimination (among many others) were removed. Clearly, culturally appropriate economic growth and anti-discriminatory (caste, gender) policies, with actionable field-based, ethical, and trauma informed strategies are paramount for change to occur.

Discussion Questions

- How can research be used as a tool to understand processes and contexts associated with FFCST?
- How can research-informed knowledge be used in practice to reduce harm and promote health and well-being among victims, families, and communities associated with FFCST?
- What can be done to instigate action from governmental bodies (local, state, national, and international) to eradicate structural barriers/vulnerabilities that create high-risk environments that *allow for* the *option* of FFCST as a means of survival?

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Sex Trafficking in Hawaiʻi

Dominique Roe-Sepowitz, Jan Vasilius, and Ann Charles

1   Introduction

Human trafficking is a public health issue that thrives in inequality, racism, sexism, and poverty. Sex trafficking has been found to impact the most vulnerable humans and creates serious harm on those exploited including maltreatment, abuse, and violence [1]. In 2000, the U.S. passed a law outlining human trafficking and victims began to be identified as sex or labor trafficking victims which has led the way to increased awareness, investigations, prosecutions, and programs for victims to develop. Sex trafficking has been found in every state in the U.S. but while sex trafficking situations seem to share many similarities including the roles of the individuals involved (sex trafficker, sex buyer, victim), unique location features can impact who is victimized and who are the traffickers, they ways individuals are groomed, recruited, and trafficked, and the involvement of law enforcement, families, and communities to protect vulnerable persons. Specific to sex trafficking in Hawaiʻi, there are unique cultural, geographic, and economic features that impact sex trafficking activities.

Traditional research on human trafficking uses law enforcement arrest and criminal justice system conviction rates to estimate how big of a problem is in any given location. Due to having no convictions and less than a handful of arrests of sex traffickers in the past 10 years, other means are necessary to estimate how many

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individuals in Hawaiʻi are victims of sex trafficking as well as understanding their recruitment, experiences, and exiting needs. This chapter explores sex buyers in Hawaiʻi, a set of qualitative interviews with sex trafficking victims, a survey of clients of a large social service agency serving five Hawaiian Islands, and a survey of homeless adults on Hawaiʻi Island.

In this chapter, we provide a description of the four sex trafficking studies we conducted from 2018 to 2022 in Hawaiʻi and highlight sex buyer behaviors, victim vulnerabilities, and recommendations to improve prevention and intervention from the research participants. This chapter focuses exclusively on sex trafficking.

2 Content

2.1 Unique Factors in Hawaiʻi That Facilitate Sex Trafficking

There are a number of factors in Hawaiʻi that continue to perpetuate a lack of awareness and intervention around sex trafficking [2]. Hawaiʻi is geographically isolated from national sex trafficking service resources and tools. There is a strong public disincentive to talk about sex trafficking in Hawaiʻi due to fears that it may disrupt tourism or militarism and change the image of Hawaiʻi. Due to the smallness and closeness of each community in Hawaiʻi, there is a lack of confidentiality, especially on neighbor islands to Oahu and in rural settings where "everyone knows everyone here", when in programs serving persons who experience addiction or violence. The problems of homelessness and poverty are the dominant social issues in Hawaiʻi and are serious push factors for vulnerable persons into sex trafficking. Also, in Hawaiʻi, there is robust amount and easy access to drugs which increase risk for victimization including alcohol and amphetamines. Finally, discrimination and segregation of Native Hawaiians continue on Hawaiʻi.

Running away is remarkably common and there is a tacit acceptance of teens running away as part of growing up in Hawaiʻi. There are nearly 3000 runaways reported every year in Hawaiʻi [2] but only a few dozen children are listed as missing children as law enforcement categorizes runaways and missing children differently. The cultural norms of family silence is for families not to talk about abuse or trauma and are led by cultural pressure to be silent about experiences of childhood abuse and family violence within families and communities in Hawaʻi. There is limited attention from law enforcement about sex trafficking, including not having any specialized human trafficking units on any island in Hawaiʻi. There is also a lack of comprehensive training for criminal justice personnel and mandated reporters on Hawaii's sex trafficking state law to identify and report cases of suspected sex trafficking. Although not unique to Hawaiʻi, researching sex trafficking in Hawaiʻi has been complicated by the experiences by victims of secrecy, shame, and stigma associated with

disclosing experiences of prostituting, regardless of the individual's level of coercion into the sex trade [2].

2.2   Studying Sex Trafficking-Demand

Studying sex trafficking is inherently complex due to the illicit and hidden nature of the crime. Determining how sex trafficking happens in a community is one step toward finding ways to build prevention and awareness. There have been limited research activities in Hawaiʻi on sex trafficking prior to the start of our research in 2018. Only one study conducted in 2014 explored the phone numbers that appeared in Hawaiʻi specific online sex advertisements on a popular sex selling website [3]. They found that there was an average of 68 sex ads posted per day in Hawaiʻi and the area codes of the phone numbers appearing in the ads demonstrated that many of the sellers were from places outside of Hawaiʻi. This lack of research led to the narrative used by many to limit attention and resources spent on sex trafficking awareness and prevention in Hawaiʻi. This lack of attention and resources lead to the continuous cycle of vulnerabilities pushing individuals toward sex traffickers.

The following four studies were conducted under the supervision of the Arizona State University Institutional Review Board and in partnership with local survivor leaders, Women's organizations, and service providers for victims of violence. The first study we conducted in Hawaiʻi was to understand the sex buyer market on Oahu and Hawaiʻi Island. Sex buyers are those who have the desire and the means to purchase individuals for the purpose of sex [4]. Attempts to estimate the number of sex buyers in a given community have proven to be complex and rife with error. Sex buyers report widely differing motivations to purchase commercial sex and are of all races, genders, and marital status. Sex buyers are traditionally difficult subjects to study as they hide their behaviors and are rarely compelled to tell the truth when interviewed. Most sex buyer research is from explorations of surveys and interviews of sex buyers who have been arrested for their sex buying behavior with few exceptions. These studies show a heterogenous group of individuals with few similarities which makes developing prevention interventions difficult.

While limited in scope, exploring the response to a sex ad in a community can give an idea of the size of the sex buyer market. In March 2018 [2], using photos of models who agreed to be used in online sex ads, two ads were placed in Adult Services Women Seeking Men Personals section on Backpage.com. One ad was placed in the locale of Oahu and the other on Hawaiʻi Island's online page. The ad content was constructed by experienced research who used language, art, and emojis similar to the other ads posted during the week before the team posted the ads. The responses (texts and voicemails) were sent to a Voice Over Internet (VoIP) system with no contact between the researchers and attempted sex buyers. The response during the 24-h after the ads were posted was analyzed.

In Oahu, there were 58 other ads posted on Backpage.com Adult Services Women Seeking Men Personals. During the first 4.5 min after the ad was posted, 11 individuals attempted to contact the ad poster to purchase sex. Over the first 24-h,

the VoIP system received 756 contacts from 407 unique phone numbers. The phone numbers were from 87 different area codes in the U.S. with 70% from Hawaii's 808 area code. This was a robust response to the sex ad and dismissed the myth that most online sex buyers were military or tourists. Specific information from the attempted sex buyers identified 21 locations on Hawai'i where they were calling from.

A second ad was placed on Hawai'i Island's page where only two other ads were posted. Over the first 24-hours, the VoIP system received 206 contacts from 113 unique phone numbers. The phone numbers were from 18 different area codes with 59.3% from Hawaii's 808 area code. Five specific locations were identified by the attempted sex buyers on Hawai'i Island where they were calling from.

While this study is simple in construction and data collection, the findings are complex and critically important to building a foundation of knowledge about the sex trafficking market in Hawai'i. Findings from this study include that there is a robust number of sex buyers in Hawai'i. The majority of the attempted sex buyers were from Hawai'i. Attempted sex buyers showed little regard for being caught and often shared their names and locations. During the time period of January 2017 to June 2018, there were 50 arrests of sex buyers on all 8 Hawaiian Islands. For each island in this study, more than double that amount of sex buyers contacted our ads to buy sex during the first 24-hours it was posted.

2.3   Studying Sex Trafficking—Interviews

The second study [5] used mixed methods to learn from sex trafficking victims how their sex trafficking happened, who bought sex from them, who sold them, where and how they were sold, and what familial and societal factors preceded their victimization. We explored the sex trafficking experiences of 22 girls and women sex trafficked in Hawai'i. Fifteen women were identified as having been a sex trafficking victim in Hawai'i and the seven others were parents, close family members, or guardians of a child who was a victim of sex trafficking in Hawai'i. Interviews took place in prison meeting rooms, church basements, in parks, on beaches, on a military bases, and in apartments. All 22 participants were sex trafficked in Hawai'i and 77.3 percent were Native Hawaiian. The participants reported that the length of time between their first sex trafficking situation and exiting ranged from 5.5 months to 32 years with an average of 13 years.

The familial and societal factors that preceded their sex trafficking victimization included nearly 75 percent reporting childhood sexual abuse with the average age of first sexual abuse being eight years old. Nearly 60 percent reported childhood physical abuse and 63 percent had been placed in foster care/child welfare services as a child. All but one participant reported that they had runaway from home as a minor and 40 percent were in special education classes when they were in school. The majority (73%) reported having serious problems at school. All of the participants reported having some drug use and were first introduced to drugs at age 12.

The participants described being recruited by a sex trafficker between the ages of 11 and 20 years old with the average age of first sex trafficking being 14.7 years old.

Table 1 Locations of sex trafficking activities

Street prostitution	Bar prostitution	Strip clubs
Online websites	House parties	Flop/drug houses
Hotels	Brothels	Call girl (phone)
Game rooms	Pornography	Hostess bars
Massage parlors	Webcams	Escort agency
Car shows	Business offices	Business parties

Eighty-one percent ($n = 81$) were children when they were first sex trafficked. More than a quarter reported that they were raped or gang raped by their first sex trafficker as part of their grooming into the sex trafficking situations. The most common relationship with their first sex trafficker was boyfriend ($n = 13$, 72%) and drug dealer ($n = 3$, 17%).

The sex trafficking experiences of the participants included where and how they were sold by their sex traffickers. Four participants reported that they were taken to the mainland by their sex traffickers for the purpose of prostitution while they were a child. In Hawai'i, they were sold in numerous locations including (Table 1):

Unique to Hawai'i, game rooms are in most towns and are places to meet up and play pool or games. Hostess bars, also called "drinky drinky bars" have women sitting at a bar and men can come in and buy them a drink and a drink for themselves. This would often lead to offers to buy sex either in a back room or at the buyer's hotel or place.

Forty-four percent of the participants reported that they had seen a medical professional as a patient during their sex trafficking experience in Hawai'i and in only once case did the medical professional recognize that they were a sex trafficking victim. Each participant described getting out of the sex trafficking situation or exiting differently. Some were rescued by law enforcement, others were in shelters that supported them as they moved forward, and others didn't identify that they were a sex trafficking victim until years after they got sober. It took between 1 and 20 tries to get out of the situation with an average of 6 tries.

Pervasive abuse during the childhoods of the participants was a constant theme. Sexual abuse was a regular experience with one victim reporting her abuse began with men visiting her alcoholic mother when she was three. Another was molested by her step-father starting at age four. Two women were forced to give birth to babies from incest, one from her brother and another from her step-father; they were both 12 when they gave birth. Another was sexually assaulted by her cousin when she was 11. Physical and emotional abuse was also pervasive in the participants accounts of their childhoods. Parental mental illness and drug addiction were present in many of the childhoods of the participants, often leading to instability and foster care involvement, and in some cases, long-term homelessness. Numerous systems interacted with most of the victim including child protective services, criminal justice systems, school systems, and health care systems. Few recognized the complexity of the victim's experiences. In many cases, schools and child protective services did not identify them as victims or didn't know how to help the

victims. The victims often had easy access to drugs and did not connect with their peers, or lived in a shelter or group home with no connections and often ran away. The criminal justice system interacted with only a few of the participants when they were children but many more as they grew older. Only one reported being arrested on prostitution charges. Being in jail for some participants was identified as a time to clean up and sober up and try to make a change. Yet once they were released with little support, particularly with their addictions, there were no other options other than to return to their trafficker.

Contrary to the media depictions of abduction by strangers, all of the participants were lured into sex trafficking in intricate and intimate ways. What looked like affection and nurturing, quickly turned to violent exploitation and emotional manipulation. The grooming and recruitment techniques of the sex traffickers were based on conditional affection, supplying drugs, and extreme dating violence. The sex traffickers were able to quickly identify what their victim's needs were, whether it was emotional, drugs, or a place to stay. One participant stated "he didn't have to groom me. I was living in a foster home and I was connected to no one. He turned me out the day after we met." Another stated that she was forced to recruit other girls for her trafficker and that he instructed her to "look for the ones that were runaways and were emotionally broken." Five victims reported that their trafficker used rape or had them gang raped as part of the grooming or preparing them to be prostituted. As part of the grooming process, most of the participants reported feeling love and connection to their trafficker even though he was violent and abusive. Most of the participants felt that their sex trafficker had chosen them, had somehow been watching them or spoken to their friends about them. One participant stated that when she was 16 years old her first trafficker, a male 5 years older than her, spent months talking with her friends about what she liked in music and interests and then when he was around her it seemed like he really knew her. She said it felt like "fate." He convinced her to move to the beach with him, told her what to wear and fed her drugs. He had her gang raped. He then made her prostitute at parties where he told her what customer to be with. Another participant spoke about how easy it was for her sex trafficker to gain her trust. She said "he was like a cool uncle to all of us kids" about her sex trafficker who knew her and her family well. He knew that she was living with relatives and he gave her things that she wanted along with giving her drugs to feed her addiction.

Intense violence while in the sex trafficking situations was present in every narrative. The violence included beating so brutal the victim had broken bones and went to the hospital. One participant reported that her trafficker hit her so hard he knocked her "out of her shoes." Another trafficker pulled out the finger nails of his victim when she was 13 and refused to prostitute that day. Sex buyers were described as visitors, military and locals, and physical assault was not uncommon There were high end customers with fetishes and customers at massage parlors who were looking for something fast. One described her customers when she was 16 as "local boys and men, cops off the clock, drug dealers and other street kids." Others described their customers from bars as "surgeons and senators" while another stated

they were "business men, travelers, senators, judges, surgeons, and doctors." Many reported violence from a sex buyer including one victim refused a specific sex act and was beaten by the customer who broke her nose.

The exiting and healing process of the victims was for some circuitous. In many cases, they dipped back into prostitution sometimes with and sometimes without a trafficker as a means of survival or to support a drug addiction. Most participants stated that finding something meaningful like helping others or working with people in recovery was important to their healing. Some participants were able to escape when they got pregnant, but others they were forced to give up their children to family members or child protective services. One client reported "being pregnant made everything different for me" which led to her sobriety and completion of an inpatient and then an outpatient recovery program. A number of clients used domestic violence shelters, drug treatment, and counseling services and found that sex trafficking was not spoken about in the programs they attended. Most reported that it took a long time to be able to tell their stories and feel like they were healing. Informal and formal helpers were present to support the victims as they worked to heal and move forward.

Some systems were more helpful than others and many needed supports simply didn't exist. The corruption of members of the criminal justice system reported by the participants in the study was pervasive in their stories of being prostituted. Many reported that law enforcement officers either were unable or unwilling to identify sex trafficking in their communities and often looked away. When family members reported their child as missing to law enforcement they were rarely taken seriously, and little follow-up was reported to the families. One participant reported that after a raid on a drug house where the victim, age 18, was living, a police officer told her "if you want pills, don't mess with this little kid, you call me." Others reported being in stings where everyone else was arrested and with no referrals or support the police told her to just leave. She had "hooked up with cops regularly and sold sex to many of the officers doing the stings." Another participant had dated an undercover cop and he would tell her when the stings would be at the strip club where she worked. Another stated "It is really easy to sell sex here and it is like they don't care because cops date. I know because they had their gun, badge and hat with them and would say, 'okay let's go date'. The same people that are charging you for prostitution are the people turning around and buying it from you."

Other takeaways from this study include understanding the places and spaces where victims came into contact before, during, and after their victimization. Many of the participants were involved in child protective services, and some were put into foster care. They all attended school. Some were allowed by their sex traffickers to attend school while being trafficked, at least at the beginning. A number of them were seen in emergency rooms as minors for injuries from violence by their sex trafficker. They were seen by hotel staff, law enforcement, business owners, sex buyers, and community members during their sex trafficking experiences. None of these bystanders offered support to the victims in this study. Many of the participants reported a sense of shame and stigma if anyone who knew them found out what they were involved in. Most of the participants ran away from everything. They ran from

their homes, treatment programs, foster homes, shelters. There were plenty of predators who found them and provided them with drugs and a place to sleep, which then turned into a sex trafficking situation. One participant described her sex trafficker as "someone to run to and someone to run from when he got violent." Other gaps that were identified by the participants of this study was a lack of services and helpers who understood the complexity of childhood sexual abuse, foster care, dating violence, and forced prostitution. Few of the participants found therapists who they felt understood the dynamics of sex trafficking. There were few programs for girls or women identified by the participants that had services that directly addressed the confluence of problems and challenges they experienced when they attempted to exit the sex trafficking situations. None of the programs that they went to had anyone that shared the same experiences as them. Survivor/peer involvement was completely absent which further confirmed that their experiences were totally different from everyone else's and that difference made them less likely to benefit from the services they were receiving. Those who used drug treatment programs reported complete silence during their treatment about prostitution or sex trafficking. There was no openness facilitated to discuss the sex trafficking.

2.4   Studying Sex Trafficking—Survey

The third study in our series [6] was a cross-sectional paper and pencil survey given to clients over the age of 12 served by a large social service agency on five Hawaiian Islands over a three-month period in 2019. The study resulted in a robust group of surveys from 363 respondents with 97 (26.7%) reporting that they had experienced sex trafficking. The respondents that identified as having been sex trafficked identified as female (83%), male (23%), and one percent each for trans and non-conforming, Of the 97 who reported being sex trafficked, 64 percent reported that they were Native Hawaiian. Sex trafficking victims involved in the juvenile justice system were more likely to report being sex trafficked for drugs. Male victims were more likely to report being sex trafficked for drugs than female victims. Sex trafficking victims who had experienced residential treatment as a child were more likely to report being sex trafficked for money and drugs. Sex trafficking victims who had runaway as a child were likely to report they were sex trafficked for money, drugs, protection, and a place to stay. Sex trafficking victims who reported that they were in special education classes were more likely to report that they were sex trafficked for food, clothing, and drugs. Sex trafficking victims who reported being harassed by peers as a youth were more likely to report that they had been sex trafficked for money, food, and protection. Sex trafficking victims who reported childhood sexual abuse were more likely to report they were sex trafficked for protection and a place to stay.

Homelessness and sex trafficking were found to be connected, with more than two-thirds of the sex trafficking victims reporting that they had experienced homelessness in their lifetimes. Sex trafficking victims who reported being home-less were more likely to report also having been in foster care or a group home as

a child. Sex trafficking victims who also reported having experienced homelessness were also more likely to report having witnessed domestic violence in their childhood homes.

The overall rate of sexual abuse reported by the participants in this study was that one out of every four participants reported having experienced sexual abuse. While the participants from this study come from a social service agency, the high rate of sexual abuse should cause community concern. Among the sex trafficking victims, sexual abuse was reported by nearly one out of every two (43.3%) participants. Childhood sexual abuse has long been linked as a risk factor to sex trafficking [7]. Sex trafficking victims in this study reported experiencing significantly more challenging life experiences than the non-sex trafficked participants. These challenging life experiences included higher scores on the Adverse Childhood Experiences survey with the sex trafficking victims reporting an average score of 4.46 (out of 10 items) compared to an average score of 2.43 of the non-sex trafficked participants. In the research literature, a score of four or above has been found to be associated with the increased odds for binge and heavy drinking, risky HIV behaviors, diabetes, heart attacks and heart disease, stroke, depression, health-related disabilities, and risky behaviors [8]. In this study, a score of four or above for the sex trafficking victims resulted in being more likely reporting of negative contact with law enforcement, having been in foster care or a group home, having run away from home, and being a victim of bullying. The long-term impact of the childhood abuse and maltreatment on the sex trafficking victims in this study is of grave concern and providing targeted trauma-informed treatment including addressing the sex trafficking victimization is indicated by these findings.

Sex trafficking victims were more likely to report that they were also victims of dating violence. The victims of sex trafficking and dating violence were more likely to report having a parent in prison, negative contact with law enforcement, involvement in the juvenile justice system, experiencing academic difficulties, running away from home, being bullied by school peers, being gang members, and report physical, emotional, and sexual abuse during childhood. The sex trafficking and dating violence victims were also more likely to report being addicted to drugs and having participated in self-harm behaviors.

Involvement in juvenile justice and law enforcement was more likely for the victims of sex trafficking including being on juvenile probation and having negative contact with law enforcement. School issues were prevalent among the sex trafficking victims when compared to the non-sex trafficked participants in this study including having academic difficulties, being expelled, and experiencing bullying and harassment from peers. Being in special education services was reported by 24 percent of the sex trafficking victims.

Drug use has been previously linked to sex trafficking experiences in the literature and often has numerous roles in the sex trafficking situations. These include being used as a recruitment tool, a way to establish dependency on the sex trafficker, to ease the victim's inhibitions, and to help the victim numb their distress during their victimization [9–11]. Among the sex trafficked participants in this study, 81.4

percent ($n = 79$) reported that they had used drugs. Specific drugs were significantly more likely to be used by the sex trafficking victims including marijuana, methamphetamines, heroin, and vaping. Twenty-two of the sex trafficking victims reported that they were forced to use drugs by their sex traffickers during their sex trafficking experience.

The sex trafficking victims were more likely to report having a mental health diagnosis than the non-sex trafficked participants. The sex trafficking victims were more likely to report experiencing Anxiety, Depression, Bipolar Disorder, and ADD/ADHD. The sex trafficking victims were also more likely to report participating in self-harm behaviors including cutting, risk taking, having sex with strangers, and not eating for long periods of time.

More than 20 percent of the traffickers of the sex trafficking victims in this study were family members. This disputes the traditional anecdote that most sex traffickers are strangers that kidnap the victim or are boyfriends who then trick their victims into prostitution. Intrafamilial sex trafficking victims were significantly more likely to report being first victimized before the age of 18. They were also more likely to report that someone else in their family had also been a sex trafficking victim. Sex trafficking victims of family member sex traffickers were also more likely to report that they were afraid to leave or quit the sex trafficking situation due to fear of violence or threats to harm them or their family. How the sex trafficking victims were sex trafficked included being recruited through websites and social media, and one out of every six sex trafficking victims ($n = 17$) were sold online through social media, dating websites, and sites like Backpage.com and Craigslist.com.

2.5   Studying Sex Trafficking—Homeless Adults

The fourth study [12] focused on homeless adults on Hawai'i Island. There are limited services for victims of violence on Hawai'i Island and none specifically for sex trafficked youth or adults. This study was a cross-sectional face-to-face survey of homeless adults (all over age 18) given in shelters, on the beach, on the street, in drop-in settings, and transitional housing in Hilo and Kona. This study explores details about the participant's homelessness experiences, substance use, mental and medical health history, family challenges, as well as risk factors along with life experiences of participants who report sex trafficking victimization.

Sex trafficking experiences was reported by 35 (33%) of the 127 adult participants of the study. The sex trafficking victims were 88.6 percent female and 11.4 percent male. The youngest age of first sex trafficking experience was reported as 7 years old. Thirty-nine percent of the participants who reported being sex trafficked identified as Native Hawaiian. The life experiences reported by the participants who were sex trafficked included 56.3% ran away as a child. A quarter (25%) was first homeless before the age of 18. Nearly half, 47 percent saw domestic violence in their homes as children. Twenty-five percent had been in special education classes. Forty-six percent had been kicked out of their home by their families. More than a quarter, 25.7 percent said their homes were not safe environments when they were

Table 2 Child maltreatment
sex trafficked homeless adults
Hawaii island

Abuse type	#	%
Emotional abuse	21	65.6%
Sexual abuse	17	53.1%
Physical abuse	14	43.8%
Physical neglect	12	37.5%

children. Below in Table 2 are the different types of childhood abuse the sex trafficked homeless adults reported.

This study found that reporting sex trafficking victimization was related to a history of childhood sexual abuse, more likely to report teen dating violence, more likely to report using methamphetamines and to also be a victim of domestic violence. This study found that there are a number of risk factors that increase the likelihood of a homeless adult having experienced sex trafficking. Those included being female, being Native Hawaiian, being in special education services when in school, histories of childhood maltreatment, and being a victim of dating and domestic abuse. Nearly three quarters (72 percent) of the sex trafficking victims reported having a mental health diagnosis.

3   Conclusion

The participants in the second study were asked for recommendations to improve awareness, prevention, and intervention for victims of sex trafficking in Hawai'i. These are their recommendations:

- Establishing peer support services to help women who have survived trafficking and help to build a sense of a positive future.
- Involving religious and cultural leaders to address stigma and reduce shame among families who have loved ones who have been sex trafficked, or those who have predisposing factors that contribute to violence, sexual violence, and substance/alcohol abuse.
- Drawing on the strengths of the centrality of family and kinship to many cultures in Hawai'i, focus on the concept of family as central to life; the support of family as healing; victim acceptance; and efforts to not repeat victimization through generations.
- Increasing training and collaboration about sex trafficking between agencies that address domestic abuse/violence, child abuse and neglect, alcohol and substance abuse.
- Providing resources to support services to women who have been trafficked.
- Funding early intervention services that address some of the risk factors related to sex trafficking including substance and alcohol abuse and domestic violence.
- Increasing education regarding the identification and connection to services of trafficked women by medical, behavioral health, school personnel, and social service workers including teachers.

- Enhancing current laws to increase protections and services for victims of sex trafficking.
- Encourage prosecuting sex buyers and traffickers.
- Prosecuting police and other judicial professionals who participate in prostitution and sex trafficking.

Addressing the individual and community issues identified in the above four studies along with the risk factors is important to decrease sex trafficking victimization in Hawaiʻi. Significantly more supports should be put into place to support high risk children and youth to prevent them from being abuse and sex trafficked. Increasing the number of social services on Hawaiʻi Island that provide services for abused or maltreated persons would assist in preventing future sex trafficking victimization. Screening for sex trafficking should be integrated into all homeless or near homeless services provided on Hawaiʻi Island to help victims connect to the few services that are available. Sex trafficking specific prevention and interventions should be developed and provided youth in schools and in community-based support services.

Discussion Questions
- What are the unique features to consider when trying to understand sex trafficking in Hawaiʻi?
- What vulnerabilities were found among the victims of sex trafficking identified in these studies?
- What programs and resources would be impactful to prevent, intervene, and support victims of sex trafficking in Hawaiʻi?

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Working with Human Trafficking Survivors

Celia Williamson

1   Introduction

"Rescue and Restore" is the U.S. government's human trafficking campaign and call to action [1]. While "*rescue*" is within the purview of the criminal justice system, "*restore"* falls squarely within the realm of all other helping systems such as social workers and social service agencies, health care professionals and health care institutions, and peer-advocates housed within human trafficking focused agencies. This chapter is devoted to those providing services to help survivors of human trafficking restore their lives and heal.

2   Processes and Approaches

2.1   Approach to Working with Human Trafficking Survivors

Because of the nature of the crime, victims of human trafficking have likely experienced physical and psychological abuse and trauma [2]. As such, they can present with complex and varied needs. Because each survivor's needs may be multi-faceted and unique to their experience, a case management model of support is well suited to meet the diverse needs of survivors of human trafficking.

Case management is an approach used to directly respond and serve vulnerable populations. Case managers meet with and assess survivor-clients, build relationships, and link clients to needed services to improve well-being. Case

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managers "start where the client is" [3] psychologically, physically, socially, and emotionally and "walk alongside" [4] survivors to ensure their needs are met.

While a particular degree is not required to become a case manager, what is necessary and important is the adoption of a set of programs, competencies, and ethical standards conducive to creating an environment of safety and engagement where healing, re-stabilization, and recovery can take place. The National Office for Victims of Crime has established a set of standards for those interested in working with human trafficking victims or other victims of crime. They offer free online training and materials to anyone interested in working with these populations [5].

All case management styles are not the same. There is a continuum of case management styles from least intensive and comprehensive to most intensive and comprehensive. The least intensive type of case management is brokerage style case management. In brokerage case management, the case manager's primary role is to link their client to services. There may not be much interaction between the client and case manager and little support given to enable the client to be successful. An example is a case manager at Jobs and Family Services. This case manager typically has a large caseload of a few hundred clients. Their primary focus is to ensure compliance so that clients may receive the benefits and services they require to meet their needs.

On the opposite end of the spectrum is comprehensive and intensive case management. This style of case management is most suitable for human trafficking survivors. The caseloads of intensive case managers may be as high as 35 and as low as 5 clients at a time. A case manager may engage a client once per week to three times per week depending on the need, and they may spend one hour to several hours per week with each client [6]. In many instances, an agency that employs intensive case managers may require them to be "on call" rotating the 24-hour emergency phone so that the agency can remain responsive to clients in crisis.

Unlike brokerage style case managers, intensive case managers work hard to ensure their client receives the services and resources they need. They go the extra mile to provide both support and linkages to quality resources and services. Intensive case managers often advocate for and with their clients to make sure their needs are met. They create a safe space for communication and work to establish both a level of rapport and trust with each of their clients.

2.2 Case Management Work with Human Trafficking Survivors

Intensive case managers may use the social work process to work with survivors of human trafficking [7]. This process of work has a beginning and ending and includes five phases: engagement, assessment, intervention, monitoring/evaluation, and graduated disengagement. Each phase is discussed below.

2.3 Phase 1: Engaging Survivors

Building a positive, genuine, nonjudgmental and trusting, supportive relationship are essential elements needed, particularly when working with survivors of human trafficking. In contrast, a hierarchical authoritarian approach will not be as effective because this approach does not lend itself to build the type of relationship needed. Hierarchical and authoritarian approaches serve to usurp power, choice and voice, in other words, elements of freedom that victims of human trafficking need to reclaim their lives.

Once a level of trust has been established, the relationship is the vehicle through which change desired by the survivor-client and services offered by the case manager may bear fruit. Also, establishing a level of trust with exploited clients serves to increase clients' feelings of safety, something of which a case manager should always be cognizant [6]. To begin building a relationship, a seasoned case manager might inquire if the survivor-client has any immediate needs. Attending to immediate needs creates a short win and may give the case manager an opportunity to begin to gain trust much faster.

Throughout their work with survivor-clients, case managers assume various roles. Each role serves a specific purpose within the helping process. For example, case managers who assume the role of "broker" link clients to a myriad of needed services. Serving in the role of educator, case managers work to help each survivor-client, their family members, and other providers understand the needs, goals, and barriers as well as the best ways to address each. Often case managers serve as advocates fighting for the needs of survivors either with them or on their behalf. By far the biggest role is that of a supporter, encouraging and assisting clients to meet their emotional, physical, financial, social, and mental health needs.

2.4 Phase 2: Assessment

An assessment is a tool used by case managers to better understand their client's needs, issues, and life goals. Assessments can be informal or formal, but an assessment should always come before any intervention takes place. Early on in the relationship, a survivor-client and case manager work together to complete a formal comprehensive assessment comprised of several critical questions designed to uncover issues and problems. Findings from the assessment help guide both the case manager and survivor-client to address the client's needs in the client's desired order. Additionally, because needs change, a shorter version of a formal assessment may be repeated annually or semi-annually to determine if the identified needs are still present and if the issues that were addressed are still a problem or have been resolved.

A formal assessment involves a number of questions that ask about the problems, needs, and issues allowing the survivor to respond in ways that are specific to their lived experience. Even though every human trafficking survivor's experience is unique, there are certain needs that are common among victims of human trafficking. A human trafficking focused assessment should take into account the 10 most

common issues. Those include: (1) survivor safety and other basic needs such as food, clothing, and shelter, (2) program orientation and education about the issue, (3) mental health needs, (4) substance abuse needs, (5) legal needs, (6) physical health needs, (7) empowerment needs, (8) disabilities identified, (9) care for any dependents, and (10) abilities and life skills [6].

Basic needs include the need for food, clothing, and shelter. When it comes to working with human trafficking survivors, safety is also an important basic need. Safety can be defined in many ways including safety from the continual threats of a trafficker or their associates. It can also mean the safety clients need because they don't have a safe place to live. It can mean feeling safe around family and friends. A component of safety might be addressing the survivor-client's fear that they might slip back into old ways with old friends or associates. Finally, survivor-clients may feel vulnerable and unsafe engaging with particular agencies, programs, or providers. Therefore, safety is a deep, multi-layered, multi-faceted concept. While there are straight-forward questions about safety that can be added to an assessment, a more effective case manager assesses for safety throughout the healing and re-stabilization process. Safety is intrinsically woven into the fabric of the helping relationship. Together the case manager and survivor-client consistently create ways to lower emotional, social, and physical risk and increase various aspects of safety.

Case managers might ask the following questions: "Is there any part of your life where you do not feel safe?" or "Is there anything going on right now that makes you feel unsafe?" If these questions are answered in the affirmative, the case manager should follow up by asking the "who," "what," "where," "when," and "why" questions to reveal the specifics behind the fear.

If safety is at risk, then an effective case manager works with the survivor-client to complete a safety plan. There are a variety of safety plan templates online that focus on diverse topics, namely domestic violence, mental health, suicide prevention, human trafficking, and more.

Case managers should also assess the need for food, clothing, and shelter. According to Maslow's Hierarchy of Needs, not much else will be meaningful to the client until the basic foundational needs for safety, food, clothing, and shelter are met [8]. Thus, those should be attended to first.

Second, survivor-clients need to be oriented. They should be oriented to the services the case manager has to offer, the agency and its policies, the client's roles and rights, and the rules regarding confidentiality. They should be asked if they want to receive services, be informed regarding what is involved in the services they may receive, and the case manager's role in the process.

Depending on the client and situation, the case manager may also educate the client as needed. Typically, education doesn't happen during the assessment phase, but rather it occurs as needed during the ongoing relationship. Some examples of education might include educating a survivor-client on human trafficking laws in their state, on trauma and trauma bonding, and on exploitive and abusive relationships, among other things. Education might occur informally as a matter of conversation or may involve formal educational modules. In turn, the client will provide a valuable education to the case manager, helping the case manager to learn more

about the clients' lives and past experiences. The remainder of the 10 common needs identified through assessment can be ranked in any order.

When it comes to mental health, questions may focus on whether or not the survivor-client has a mental health diagnosis, when they received the diagnosis, what it is, and how it affects their life. They may be asked if they believe they have an undiagnosed issue, if they are feeling depressed, anxious, or angry, and if they would like to meet with a therapist.

When asking about depression or anxiety, the case manager should follow the "frequency, intensity, duration" rule. In other words, a case manager should ask about how frequently a client may be experiencing certain feelings (e.g., weekly, daily, all of the time), how intensely they experience the feeling (e.g., feeling a little blue to they don't want to live anymore), and the duration or length of time they have been experiencing the feeling (e.g., typically a minute, an hour, all day).

Asking about frequency, intensity, and duration will provide case managers with enough information to understand how much of a crisis the client is in and how quickly they need to move to get their client the help they need. Someone that is experiencing sadness or depression that is frequent OR intense OR long lasting is someone that may need to immediately be seen by a professional that has the expertise to address depression and the potential for suicide. It is important to note that case managers are not therapists, and they don't diagnose or treat mental illness. A case manager's role in these cases is to learn just enough to connect a survivor-client to a qualified therapist or mental health agency.

Any time a client mentions suicide, including any mention of thinking about suicide or having made a plan to commit suicide, they should immediately be placed in the hands of experts. Those experts include the local emergency room or mental health crisis center. Whatever course of action is taken, the case manager should not leave the client alone until they are connected with someone trained to address suicidality.

Next, an assessment should include questions to determine if drugs and alcohol might be a problem. Questions that involve asking survivor-clients if they use drugs or alcohol, what they use, when they use, how often they use, how long they have used, and if they consider it a problem might be included in an assessment, Additional questions include whether or not clients sought treatment before, the type of treatment they received, if they tried sobriety and what happened, how long they have been sober, if they know what triggers them to use, if they have a sponsor, and the frequency, intensity, and duration of their use. This will help the case manager determine if an intervention is needed and if so, the type of intervention the client desires and how immediate and intense the service should be. For example, survivor-clients that need a substance abuse treatment program may choose an immediate intensive inpatient program, or intensive outpatient program, or they may choose to attend alcoholics or narcotics anonymous meetings.

The legal needs of a survivor may be vast and may require various types of attorneys. Often, the overriding case of human trafficking is whether the victim desires to pursue prosecution of their trafficker or not. This is a choice solely made by the victim. However, even when "no" is the answer, prosecutors can bring a great

amount of pressure to the victim to testify against their trafficker. Therefore, an experienced and knowledgeable attorney may be needed to ensure that the victim's rights (including the right to say no) are protected.

Not only does a human trafficker exploit a person by trafficking them for sex or labor, but human traffickers also exploit victims financially. Traffickers have been known to open credit cards in their victims' names, rent houses, turn on utilities, get loans, and more. They will have their victims steal, extort, commit burglaries, robberies, recruit other unsuspecting victims, lie to the police, and commit perjury on the witness stand. Female victims may have children by traffickers, in which case victims need to pursue child support and perhaps seek sole custody. Questions about legal concerns may be asked so that the case manager can connect survivor-clients to the appropriate lawyer or legal team.

Attending to one's health care needs is an important part of healing and recovery, as many survivor-clients may have been forced to put their physical health on the back burner. In trying to survive the daily stresses and consistent barriers placed before them, they may not have been able to attend to their health in a way that is healing and preventive. A case manager may ask about health and health concerns and can assist their survivor-client to connect with a primary care physician or clinic to meet their health care needs.

Empowerment is the process of becoming stronger and more confident, particularly in reclaiming one's own rights and reestablishing one's own life. Assessing the level of empowerment and self-efficacy, a client possesses helps case managers learn what is still needed to empower a client. Better understanding those areas where a client feels competent as well as areas where they need support is worth an investment of time and effort because these are opportunities where clients can thrive. More specifically, a case manager may ask about a client's interests, what they are good at doing, what their hobbies are, if they have interests in a job or goals to obtain their dream job, and if they have an interest in returning to school or enrolling in a training program. An effective case manager may have their clients self-identify their strengths and express areas in life where they feel confident. The case manager can then use these responses to connect the survivor-client to activities, organizations, educational programs, and potential employment opportunities that align with the client's interests and strengths.

Asking about disabilities enables the case manager to identify and link clients to supports that increase their abilities to navigate the world. Survivors that have been victims of physical violence may have chronic injuries. Those injuries may include a traumatic brain injury (TBI). Thus, asking if the survivor-client has ever experienced a significant blow to the head or neck is an important question. When a client has a TBI, it clouds the entire recovery process and experience. An individual with a TBI cannot fully partake in and receive the benefits that some providers have to offer. For example, a survivor-client may not be able to follow all of the instructions needed to obtain a service and/or may suffer mood swings or behavioral changes due to the brain injury. These experiences can be misinterpreted by providers who may conclude that clients are defiant, noncompliant, hostile, or uninterested in services. Assessments completed in our local program with survivors in Toledo, Ohio

revealed that over 40% reported having experienced a significant head or neck injury. These experiences led us to start screening for a TBI.

Other injuries and impairments may exist but may not be visible. Undiagnosed learning disabilities have a significant impact on the life trajectory of individuals. Undiagnosed learning disabilities impact self-esteem, create fear, sap motivation to advance in life, and may block opportunities for employment and from fully participating in one's own economic well-being. Other disabilities include the loss of vision or hearing, autism spectrum disorder, and various physical disabilities. Remember that the goal of an assessment is to learn just enough about a survivor-client to get them to a specialist that can complete a full range of assessments and provide a diagnosis. With the diagnosis in hand, the case manager and survivor-client can begin the journey to healing and improved well-being by connecting with the provider or agency that treats the particular injury or impairment.

Despite the need for services themselves, survivor-clients with dependents have the added responsibility to care for loved ones, whether they may be their children or their aging or disabled family members. Receiving support from a case manager to carry out these responsibilities may be of great benefit to survivors. Thus, asking about children, ages of the children, and if the survivor is the main caretaker, only caretaker, or if they have support is important. Also, finding out if they have any open or previous cases with any child or adult protective agency will be valuable information. Case managers may support the client that has an open case by helping them access and attend parenting classes or helping them to follow a plan outlined by the protective agency. In some cases, the case manager might assist the client by linking them to an attorney to advocate for themselves and their loved ones.

Life skills are skills that allow for full participation in everyday life. The need for education and training on various life skills is often a common need, but an under-identified and often overlooked issue. Many case managers assume that since they themselves are knowledgeable and can carry out specific duties in life, that anyone can and does. However, life experiences may have kept some from obtaining needed life skills, including the experiences of having spent an extended amount of time as a victim, having been a child of neglectful or abusive parents, having an addiction to drugs and/or alcohol, or being a foreign victim in a country where the dominant culture operates differently. There are numerous other reasons that may have kept survivors from being proficient in successfully carrying out the daily duties and responsibilities of life. Therefore, asking questions to assess life skills is a vital component of an assessment.

Even though a formal assessment is done toward the beginning of the professional relationship, an informal assessment takes place consistently as case managers learn more about and from clients at each meeting with them. When asking questions, the case manager should not sound like a census taker who is mainly interested in having their questions mechanically asked and answered. An effective case manager can determine how and when to ask questions and tries to make the questions as relatable as possible, explaining to the survivor-client why they may want to know certain information.

2.5   Phase 3: Intervention

While the assessment phase helps the case manager understand client needs, the intervention phase uses these identified needs as a guide to work together to develop and achieve desired goals. Using the completed assessment, the case manager and survivor-client develop a "service plan," aka the work to be done to address each need. An "Individualized Service Plan," also called "Individualized Care Plan," is a plan collaboratively developed between the survivor-client and case manager. In fact, it is the survivor-client, not the case manager, who determines the needs to be addressed, the issues or problems to be resolved, and/or the goals to be achieved. The rank ordering that dictates the issue or goal to be addressed first is also determined by the survivor-client. While a compassionate and knowledgeable case manager understands that they manage the "case," an effective one remembers that while they assume the role of case manager, the survivor is their own "life" manager. Case managers walk alongside survivors in support to help them achieve their goals and meet their needs.

Each survivor's plan is individualized to meet their unique needs. An individualized service plan, also called an ISP, typically has several components. Recorded on the ISP are the goals to be achieved, the types of services needed to meet each goal, an expected date of completion for each goal, the person(s) responsible or involved in getting each goal met, and the date the service plan will be reviewed again by the case manager and survivor-client. When the service plan is written the SMART model should be taken into consideration. The SMART acronym means the plan should be written in a way that is Specific, Measurable, Attainable, Relevant, and Time Bound [9]. In other words, goals should be written clearly and succinctly. If there is more than one goal, each should be outlined separately. A scenario and example of what an ISP might look like is presented below.

Survivor-client Stacey's assessment identifies both some immediate concerns and longer-term needs. After completing the assessment and in discussion with Stacey, the case manager finds out that Stacey is interested in getting support to address a basic need of obtaining services to help pay her overdue gas bill. Having relapsed on drugs in the past, Stacey would also like to return to regularly attending Narcotics Anonymous (NA) meetings. She also wants to get an NA sponsor and wants to address her persistent feelings of anxiety.

It is important to note that there are many ways to complete an ISP. Table 1 outlines a "charted" way, but ISPs can also be written in narrative form.

While various types of formal assessment tools and ISPs exist, the main purpose of the case manager's work with survivors is to meet needs that improve well-being. The assessment underscores the purpose for the relationship. The Individualized Service Plan provides direction for the relationship. The path toward recovery and stabilization is outlined in the service plan so that each understands the goals, knows who is taking the lead to address each need, and when each goal might be achieved. Through this process, goals may change as situations and life circumstances change. Goals may also be achieved or deleted because they are no longer desired. Case managers move in unison with the prosocial desires of clients.

Table 1 Charted ISP

Goals	Services needed	Expected date of completion	Person(s) responsible	Next date of review
To address overdue gas bill	Obtain options from gas company. Locate service(s) that help pay utilities	3 days	Case manager and client	3 days
To regularly attend NA meetings	Find suitable NA meetings within walking distance or on bus route	30 days	Client	30 days
To obtain an NA sponsor	Look for potential sponsors	60 days	Client	30 days
To receive a comprehensive mental health assessment.	Obtain an assessment from a mental health agency	30 days	Case manager and client	30 days

Realistically it may take many providers to assist survivor-clients to achieve their goals. Therefore, a survivor-client may have several agencies involved in their lives at the same time. Their children may also have service providers involved in their lives. These may include mental health providers, substance abuse providers, a school social worker, a disabilities specialist, a child protection worker, and/or a host of others. Each provider may be working with the client to establish goals to meet needs. This often results in service providers inadvertently running clients all over town in a stressful and uncoordinated way. In taking advantage of "wrap-around" services, the client will receive help that is a coordinated team effort.

Wraparound is a team-driven process. The purpose of wraparound is to organize, coordinate, and remove barriers to achieving goals or otherwise to "wrap the client in coordinated services" to support their well-being and recovery. The case manager who learns of all other critical service providers in a client's life may call them together for a collaborative wraparound meeting. In the event that there is an already established wraparound meeting, the case manager may ask to attend. At a typical wraparound meeting, the client is invited to meet with their providers. While there, a coordinated service plan is created, reviewed, altered, or revised based on the client's desires and/or to address any mandated services required of the client by law, for instance, services required as a matter of probation or child protection.

When wraparound works well, the survivor identifies their needs and the team, made up of many different providers involved in the client's life, works together monthly or quarterly to coordinate the care needed to meet those needs. The composition of attendees is driven by each client's needs and goals. Some clients choose not to attend and prefer their case manager to advocate on their behalf. However, encouraging clients to use their power, choice, and voice to not only attend the meeting, but to take charge of their care serves to empower the client and helps the survivor to take one large step forward in reclaiming their life. Utilizing the wraparound process can increase outcomes exponentially.

In general, case managers involved in the lives of survivor-clients are often the "glue" that holds the entire process of recovery together. While other providers may be in the life of a survivor, including a trauma treatment therapist, a physician, a lawyer, a probation officer, and a myriad of others, the intensive case manager typically knows the survivor the best. Case managers can assist communication to flow back and forth from the provider and agency to the survivor-client and vice versa. However, case managers that empower survivors to drive the process are teaching their client how to regain their power, choice, and voice.

2.6   Movement Toward Recovery

While daily or weekly activities are occurring in response to the service plan, an effective case manager will periodically pull back from the focused ongoing work to see the larger process at play. Indeed, there is a conscious continuum of care that should be taking place. This continuum involves the work to move victims to survivors and survivors to thrivers. Definitions of each and ways case managers can provide support are provided below.

2.6.1   Victim

A victim is a person who has experienced destructive or injurious, acute or chronic, emotional, mental, and/or physical victimization, derived from real or perceived threats or action, and because of these circumstances suffers from trauma. A victim may continue to be involved in trafficking or may no longer be involved but continues to suffer trauma manifested in some or all of the following ways: A victim maintains continued dysfunctional professional or personal relationships or movement into other dysfunctional relationships; or a victim lives in or experiences reoccurring crises. They may struggle to meet their basic needs, not attend to their health, and/or are unwilling or lack the ability to engage in reflection or insight into their life and situation. A victim lacks meaningful movement toward recovery or change and may have significant deficits in positive and prosocial informal and/or formal support systems.

A case manager's primary focus in assisting *victims* should be on increasing safety. Safety may present itself in very tangible ways such as ensuring that the victim is not in danger of being revictimized by the trafficker and/or their associates, ensuring that the victim has a safe place to stay, and ensuring that basic needs are being met. Services should be immediate and focused on alleviating any crisis the victim may be experiencing. If immediate housing is needed, shelters and safe houses should be accessed. Mental health crisis counseling may be needed during this time. Health care services should focus on eminent threats to health such as cuts or wounds, hypertension, or other acute concerns. However, over time services should not consistently remain at a level where acute needs are met. Services should evolve to meet the ever-changing continuum of recovery. Victims eventually become survivors. Survivors are different from victims, and therefore their needs are different.

2.6.2   Survivor

A survivor is a person who has suffered from destructive or injurious, acute or chronic, emotional, mental, and/or physical victimization, derived from real or perceived threats or action, and because of these circumstances suffers from trauma. Survivors are actively involved in recovery services but are fragile and may be retraumatized and/or re-injured emotionally. A survivor may shift in and out of victimization and victim-survivor status as they may return to their trafficker and/or other situations involving exploitation. Survivors may be involved in some or all of the following. For example, some relationships in the life of a survivor are dysfunctional and some are healthy. Survivors recognize their circumstances and issues and are actively working on them. They experience a periodic crisis, and basic needs may occasionally be needed; however, acute conditions are resolved quickly, and chronic conditions are addressed under the care of a professional. There is meaningful reflection and/or insight by a survivor about their life and situation, and meaningful movement is occurring toward recovery. Finally, there are some positive and/or prosocial informal and/or formal support systems in a survivor's life.

A case manager assisting a *survivor* should primarily focus on increasing safety and well-being. Well-being can take on many forms; however, services provided to survivor-clients should not be predominately crisis-focused immediate services. Survivors who have housing needs may be connected to longer-term housing such as transitional housing that provides housing for up to 9 months or more. This will allow survivors the opportunity to create longer-term plans to stabilize their lives and create new futures for themselves. Mental health work may focus on obtaining trauma-treatment services through the use of a certified trauma-treatment therapist. Health care services may focus on attending to any chronic health conditions and meeting long-term health needs. However, becoming a survivor is not the end of the path toward recovery. The goal of a survivor in reclaiming their life is to become a thriver.

2.6.3   Thriver

A thriver is a person who has suffered from destructive or injurious, acute or chronic, emotional, mental, and/or physical victimization, derived from real or perceived threats or action. A thriver no longer suffers or minimally suffers the trauma related to the reasons they became involved in services. They may or may no longer be involved in recovery services; however, they continue to work to maintain emotional, mental, spiritual, and physical health. Thrivers feel empowered to make healthy decisions about their lives and the people involved in their lives. They actively pursue and are engaged in positive and prosocial informal and formal support systems. They work toward goals and have attainable objectives to reach them. Thrivers may be involved in some or all of the following. For example, most meaningful relationships in their lives are healthy. Thrivers consciously monitor their emotional mental, physical, and spiritual health and attend to it. Thrivers live their lives intentionally and purposefully. They experience periodic crisis, but can recover using the resources and tools they have and the knowledge they have regrading how to obtain the resources they need. Thrivers engage in meaningful reflection and/or

insight into their lives and situations and make plans to maintain or enhance those positive aspects. Recovery is something a thriver holds dear. They spend time on recovery, and they place importance on it. Thrivers empathetically reach out to others in need and do so without being easily re-wounded or triggered. Finally, thrivers understand boundaries and balance and work to achieve both. They struggle with vulnerability in relationships but attempt to achieve a level of healthy vulnerability.

A case manager's primary focus when working with *thrivers* should be to assist in increasing autonomy and self-sufficiency. During this phase, a thriver may be focused on pursuing home ownership or a long-term affordable rental property in a safe neighborhood. They may be involved with the mental health system, but not to work on acute issues, but rather to work on deep seated issues or to maintain optimal mental health. Interaction with the health care system may be to regularly visit their primary care physician and to engage in preventive care.

2.7   Phase 4: Monitoring and Evaluation

An important part of the professional relationship between the case manager and survivor is monitoring whether the work together is going well and is productive. Monitoring and evaluation can be as informal as asking the survivor-client how the work together is going and/or to determine if the goals on the ISP are being reached or are still relevant. Monitoring and evaluation can also be formal using validated tools to assess whether the work is meeting measurable outcomes. Some agencies use both informal and formal ways to measure success.

2.8   Phase 5: Gradual Disengagement

Every professional relationship with a survivor will eventually end. It is important that the case manager prepares themselves and the survivor-client for the gradual disengagement. Some case managers will let their clients know upfront how much time they have to spend together. This may be dictated by programming and/or funding. Others may work with survivors for years. A longer-term relationship is better suited for work with survivors [10]. Repeated change in workers and/or consistent disruptions breeds instability and dismantles any trust built with the survivor. However, this relationship is not meant to last a lifetime.

While the case management process from engagement to disengagement remains the same independent of the clientele, the added emphasis placed on safety and trust will always be the goal for the case manager working with survivor-clients. Attending to the emotional, psychological, and physical safety is consistently in the forefront of the case manager's mind. Equally important is the need to have a deeper understanding of trauma, the effects of trauma, and how to engage and work with traumatized clients [11]. Discussing trauma and trauma recovery lies outside the scope of this article, but it is an important part of both understanding why survivors

respond in certain ways and it is a critical part of recovery work. Becoming trauma-informed is a beginning, but not the end. Learning more about trauma recovery increases a case manager's opportunity to help their clients recover and heal.

3   Conclusion

Working to restore human trafficking survivors well-being involves building a non-judgmental, genuine, authentic, and supportive relationship. Assessing a survivor-client enables a case manager to understand their needs. Working together, the case manager and survivor-client develop an individualized service plan that identifies the goals to be achieved and answers the how, when, and who questions associated with achieving each goal. While the primary goal is to assist in moving victims to survivors and survivors to thrivers, the even greater goal is for a case managers to work themselves out of a job. In other words, enabling clients to reclaim their power to a level that they no longer need the services of a case manager is the ultimate level of success.

While working in the anti-trafficking field, an effective case manager never stops learning. Because they, themselves, are the tools they use to do their work, their tools must be continually sharpened. Education around the professional helping process, values and ethics, and trauma are critical concepts that a good case manager will learn to build upon. Because case managers usually have little time to take classes and attend workshops and webinars, a podcast is a great way to continue to increase knowledge and skills.

The Emancipation Nation is a podcast devoted to discussions about human trafficking. This free podcast is designed for the on-the-go professional. On the podcast, anti-trafficking experts provide a wealth of information to help direct service workers increase their knowledge and skills. Listeners will also learn about upcoming human trafficking focused conferences, webinars, courses, and online communities developed to provide support and to increase the knowledge and skill level of those who work with survivors of human trafficking.

Discussion Questions
- What do you think is meant by the author's comment about "walking alongside" survivors to support them in their healing and recovery process? Why do you think it is best to metaphorically "walk alongside" survivors instead of walking in front or behind them?
- What would it mean for you to work with survivors in a nonjudgmental, genuine, and authentic way as suggested in the book chapter? For instance, in what ways would you convey that you are nonjudgmental? What would being "genuine" look like in your daily work with survivors? In what ways would you present yourself as "authentic" on an ongoing basis?
- Look up the Office of Victims of Crime's Standards of Excellence for working with victims and survivors of violent crime. Review their guiding values, competency standards, program standards, and ethical standards of practice for those

individuals and programs working with victims and survivors. In what ways could an organization working with survivors incorporate those values and standards?
- What are the key differences between being a victim, survivor, or thriver?
- Why is assessing or screening survivors for traumatic brain injury a critical component of the work we do to assist survivors?

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Human Trafficking in the Mediterranean

Paola Gobbi, Daiana Campani, and Elisa Crotti

1   Introduction

Despite the reduction in the number of people crossing the sea to Europe from North Africa since mid-2017, refugees and migrants continue to regularly face horrific abuses along the routes to and through North Africa. In 2019, some 17,700 people departed from the Libyan coast trying to cross the sea to Europe, a 45% decrease compared to 2018 and more than half of them (54%) were intercepted or rescued at sea and disembarked in Libya. As of the end of June, some 11,300 people have tried to cross the sea from Libya in 2020, of whom 50% have been disembarked in Libya. UN agencies, ONGs, researchers, and media have documented the multiple human rights violations many refugees and migrants suffer in Libya. Due to such widely reported violations and the absence of protection from them, including the absence of a functioning asylum system.

While the number of people departing from North Africa to Europe by sea has dropped since 2017, resulting in a decrease in the total number of deaths, refugees and migrants traveling along the land routes to and through Libya, Egypt, as well as parts of Algeria continue to risk death, kidnapping, sexual and gender-based violence (SGBV), physical abuse, and other violence.

As a result, the journey from West Africa or the East and Horn of Africa to Libya or Egypt remains one of the world's most dangerous. Refugees and migrants arriving

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by sea to Europe from Libya have told UNHCR staff during disembarkation about the many horrors they had faced during their journeys. Some reported spending more than a year detained in warehouses where traffickers subjected people to severe physical abuse in order to extract payments. Many had attempted the sea journey more than once and had been held in detention centers following disembarkation in Libya. Daily experiences of abuse in Libya and SGBV were frequently reported to humanitarian organizations by newly disembarked refugees and migrants, along with appalling conditions in official detention centers as well as warehouses or other places where people are held by smugglers or traffickers. Similarly, refugees evacuated from Libya to Italy, Niger, and Rwanda reported witnessing and experiencing potentially traumatic experiences such as SGBV against women and girls as well as men, severe physical abuse, and deaths. Many were experiencing severe mental health conditions as a result of their experiences.

In 2020, some of the risks refugees and migrants face along the route may be further increased as COVID-19-related border closures or movement restrictions may result in the use of more risky routes and further exposure to abuse, exploitation, and trafficking [1, 2].

2   Journeys Through West Africa, the East and Horn of Africa, and North Africa

The Central Mediterranean route runs from West Africa and the East and Horn of Africa to Libya and/or Tunisia, and Egypt and onwards to Europe for those who attempt the perilous sea crossing. People move along the route in different ways with some only traveling one section and then remaining there, others stopping and working for some time before moving on, including as their intended destination changes, and people using different variations of the route.

Despite fewer people being able to cross the sea from Libya to Europe since mid-2017 as well as increased border controls along parts of the route toward Libya, people have continued to travel toward North Africa from West Africa and the East and Horn of Africa for different reasons, including seeking protection, seeking employment, or joining family members. Many of those surveyed by monitors initially had different final destinations in mind, including Europe, Libya, Algeria, and Egypt.

Prior to crossing the desert, refugees and migrants traveling from West Africa usually pass through Mali, Burkina Faso, and/or Niger where Economic Community of West African States (ECOWAS) regulations allow nationals of member states to travel visa-free with national identification documents. This means that citizens of ECOWAS countries holding such documents can potentially travel on public transport as far as Gao (Mali) or Agadez (Niger) without the need to resort to smugglers. While passing through the region, many have reported being subjected to bribery demands by state officials, including at roadblocks. Once in Gao or Agadez those traveling north through the desert usually first stay in ghettos or foyers as they arrange to travel on with smugglers. In contrast, refugees and migrants

traveling in the East and Horn of Africa, where freedom of movement for nationals of countries in the region has not yet been implemented, are far more reliant on smugglers to cross borders and in some countries, risk arrest if apprehended while undocumented or without permission to leave a refugee camp. This includes people traveling to capital cities for purposes including family reunification interviews at embassies. Those traveling to Libya or Egypt from the East and Horn of Africa all transit through Sudan, often arriving in the eastern towns of Gedaref and Kassala, sometimes with smugglers who may keep them in or around the towns for several days before transporting them on to Khartoum. Once in Khartoum, some may then stay and work or may otherwise arrange with other smugglers to move onwards to Libya, sometimes via Chad, or to Egypt. From Khartoum, groups usually head north in pickup trucks or buses to towns such as Dongola or Al Dabba both in El Shemaliya State in northern Sudan from where they prepare to cross to Libya or Egypt, including via Wadi Halfa, or else to Atbara before crossing to Egypt. In order to cross the desert along the North African stretch, refugees and migrants are usually entirely dependent on smugglers. From this point onwards, some remain held by smugglers for the duration of their time in Libya, which may sometimes be 2 years or more. Journeys through the north of Niger are mostly on the back of overloaded pickup trucks that travel fast and vary their routes while attempting to avoid detection. For those crossing to Libya from Sudan, groups are usually handed over to Libyan smugglers in the border regions, sometimes resulting in people waiting in the desert for several days until they arrive. Once in southern Libya, some may stop or be held in the towns of Sabha, Qatrun, or Kufra or else be smuggled north toward Tripoli and the coast, sometimes stopping in smuggling hubs such as Bani Walid and Ash Shwayrif.

The number of people moving to Libya via Sudan and Niger is understood to have reduced significantly since 2016 when, for example, IOM monitors recorded over 24,000 refugees and migrants passing through the north of Niger in a single month, while UNHCR staff distribute bottled water for refugees and migrants whose vessel was intercepted attempting to cross the Mediterranean and returned to Libya. Some 162,900 people crossed the sea to Italy from Libya that year. This reduction in numbers traveling to Libya follows the introduction of legislation and other measures in Niger with European Union (EU) support to tackle smuggling through the north of the country, along with increased efforts by Sudanese authorities to reduce movement to Libya, also with EU support. At present the scale of movement from Niger, Algeria, Chad, and Sudan to Libya is not known but the majority of those following arrival in Europe from Libya or at disembarkation in Libya have reported being in Libya for 1 year or more.

In 2019, 7450 refugees and migrants arrived in Italy and Malta from Libya, with a further 5400 arriving in 2020 as of the end of June. The largest groups departing from Libya were Sudanese nationals, Bangladeshis, Somalis, Moroccans, Malians, and Eritreans. Approximately, a quarter of those who crossed the sea were children, most of them unaccompanied. A further 14,300 refugees and migrants were disembarked in Libya between January 2019 and June 2020, mostly after rescue or interception at sea by the Libyan Coast Guard [1, 2].

3   Risks During the Journey

3.1   Deaths

The risks along the different sections of the route are multiple. Many deaths are known to occur along the route, but the exact scale of deaths is unknown, as most deaths are believed to go unrecorded. Deaths occur in a variety of contexts with many people reported to have died in recent years while crossing the desert or detention in Libya. Data published by IOM suggests that some 1750 people may have died during journeys along the land section of the Central Mediterranean route between 2018 and 2019, although the actual figure may be much higher. As of 30 June, at least 68 refugees or migrants are known to have died along the Central Mediterranean land route in 2020, mostly in Libya, including 30 killed by the family of a trafficker after being reportedly kidnapped and subjected to physical abuse. In addition, some 1830 deaths were reported at sea after departing from Libya in 2018 and 2019 (1133 in 2018 and 697 in 2019). While the number of deaths reduced in 2019 compared to 2018, a higher proportion of those who departed Libya by sea died in 2019. As of the end of June 2020, some 136 people are known to have died during the sea journey from Libya.

3.2   Sexual and Gender-Based Violence

UNHCR and others have received multiple testimonies about continued high levels of SGBV at multiple stages of the journey, including as people flee their countries, as well as in many places as people travel onwards, affecting women and girls, as well as men and boys. SGBV along the route takes place in various situations, including at checkpoints, in border areas, as people cross the desert with smugglers, in detention centers, in places where people are kept by smugglers, and many other places.

3.3   Trafficking, Severe Physical Abuse, and Kidnap
for Ransom

Trafficking in persons is a historically under-detected crime, due to its hidden nature, the stigma attached to its victims, and the vulnerable nature of their situation. These factors often contribute to making victims less willing to come forward and make it difficult for relevant actors to identify them. Globally, the majority of detected victims of trafficking for sexual exploitation have been female, while more than half of identified victims trafficked for forced labor were men. Both trafficking for sexual exploitation and forced labor are believed to remain common along the route. Many women and girls arriving by sea from Libya are believed to have been victims of trafficking for sexual exploitation, including in parts of southern Libya such as Sabha and Qatrun. In 2019, authorities in Africa and Europe made a number

of arrests and freed multiple Nigerian and other West African victims of trafficking for sexual exploitation.

For some traveling to Libya, what begins as smuggling may turn into trafficking, including in the event that people are unable to pay the smuggler on arrival in Libya, and are instead sold for labor or sexual exploitation, or held in debt bondage. Others may negotiate to work for the smugglers to pay their debt but may still fall victim to trafficking. The Office of the UN High Commissioner for Human Rights (OHCHR) has also expressed concerns about people being sold from official detention centers in Libya for forced labor or sexual exploitation. In Italy, between 2018 and 2019, Territorial Commissions, the authorities that process asylum applications, referred some 10,000 possible victims of trafficking to specialist organizations.

Elsewhere along the route, people crossing into Sudan from Ethiopia or Eritrea are sometimes abducted as they cross the border on foot or once in Sudan, sold to traffickers by smugglers after failing to pay their smuggling fees, or deceived by smugglers and held for ransom or sold for sexual or labor exploitation. Between January 2017 and December 2019, UNHCR recorded over 630 cases of trafficking of refugees and asylum seekers in eastern Sudan, with nearly 200 women and girls reporting being survivors of sexual and gender-based violence. In West Africa, as people transit through Niger en route to Libya and Algeria, IOM reported identifying 326 victims of trafficking between 2016 and July 2019, with almost half from Nigeria.

Kidnap for ransom is also believed to remain common along parts of the route. In some cases, kidnap for ransom may also occur in the context of people being initially unable to pay their smuggler or the smuggler demanding more money than was initially agreed upon. In Libya, with further reduced opportunities to arrange successful passage across the sea to Europe in 2019, some smugglers have reportedly turned increasingly to other means to make money from those under their control, resulting in increased demands for ransom, with some people being ransomed on multiple occasions, as well as used for forced labor. Groups arriving by sea from Libya in 2020 or evacuated to Niger or Rwanda have told UNHCR about horrific experiences of repeated physical abuse, SGBV, forced labor, and starvation while being held for ransom in places such as Bani Walid. In Algeria, during profiling by UNHCR of over 1800 refugees and asylum seekers in 2018, 31% reported protection incidents perpetrated mainly by armed groups and smugglers (extortion, physical and SGBV, including exploitation and rape).

3.4   Risks in Detention

Refugees and migrants in Libya, including many of those disembarked following interception or rescue at sea, continue to be arbitrarily detained. Although three detention centers were closed in 2019, as of June 2020, according to UNHCR Libya there were still some 2500 refugees and migrants in official detention centers. Reports from OHCHR and others have voiced concerns about severe overcrowding, food shortages, very poor hygiene conditions, lack of consistent access to medical

attention, as well as reports of abuse, forced labor, and people going missing from within detention centers. Libyan legislation (Law 19 of 2010) includes a provision allowing for people who have entered the country irregularly to face imprisonment for an undefined period of time, fines, and hard labor. The risks of refugees and migrants face in detention centers increased in 2019, including as a result of the conflict. Some refugees and migrants held in detention also reported being conscripted to fight in the conflict or made to perform tasks including loading or cleaning weapons, repairing and cleaning military vehicles, and removing bodies from the battlefield. Since 2018, in just one detention center in Zintan some 25 people are known to have died of tuberculosis and other illnesses.

3.5   Other Risks

Other risks of refugees and migrants face along the route also include death or injury in conflicts in parts of Burkina Faso, Mali and Niger, robbery, and frequent demands for bribes by local authorities. Arrest and expulsion, especially in cases where people face threats to their lives or freedom upon return, also pose significant risks. In the East and Horn of Africa, some endure the risky sea journey to Yemen before traveling on to Libya via Sudan, while others face risks while leaving their own country. While the prevalence of abuses along the route is not clear, surveys conducted by UNHCR and IOM in 2017 suggested that around 75% of people arriving to Italy from Libya had experienced some form of abuse along the route. A MEDU report from March 2020 based on over 3000 testimonies between 2014 and 2020 notes that 85% of refugees and migrants who had passed through Libya suffered torture and inhuman or degrading treatment there [1, 2].

4   Human Trafficking in Italy: How Does It Happen?

According to the Department of Public Security of the Ministry of the Interior, trafficking in Italy takes place through a complex process. It starts with ethnic organizations that plan or manage the movement of victims from the country of origin to the destination countries. Structures in the border areas between the different countries involved in the journey are in charge—under the mandate of the ethnic organizations—of providing false documents and choosing routes and modes of transfer. The same structures are also entrusted with the task of concentrating illegal immigrants, while awaiting displacement, in "safe" places. After the recruitment and transfer of the people to be exploited, trafficking is perfected with the isolation and physical or psychological coercion of the victims and their exploitation in the chosen locations. Victims are often subjugated through persuasion, removal of documents, and threats of retaliation and violence, as well as beatings, torture, and sexual violence, or by resorting to the psychological influence of magic rituals with which victims are terrorized. The most active nationalities in human trafficking in Italy are Nigerian, followed by Romanian, Italian, Albanian, and Chinese. Trafficking

victims are almost always of the same nationality as their tormentors, with whom they share ethnic/cultural ties.

Nigerians are found to be very active in the trafficking and enslavement or servitude of young women (in many cases minors), as well as in the trade of slaves to be sexually exploited or used in drug dealing and other crimes. Nigerian crime shows a proven operational methodology: periodically, thanks to a dense network of connections and referrals, several people are transferred to Europe to be exploited. Young Nigerian women, after being lured and removed from migrant shelters, are often forced with threats and violence into street prostitution or brothels. When Nigerian prostitutes become pregnant, they are forced to have abortions. Most of the proceeds of these trafficking activities end up in Nigeria, where they are used for real estate purchases or to fuel the same criminal activity or finance others (e.g., drug trafficking, weapons, computer fraud).

Romanian and Albanian criminals tend to have their own management of enslavement and trafficking of young women from Eastern Europe, who are mostly targeted for sexual exploitation on the streets or in nightclubs. In other circumstances, victims are exploited in employment (on construction sites and in agriculture), in begging, and in illegal activities, such as drug dealing. Girls lured into prostitution usually come from poor families and/or domestic violence backgrounds. Among the strategies used by the tormentors to move victims from one country to another is to falsely declare a kinship link with them, especially with underage girls.

In Italy, relationships have been documented between local Italian entrepreneurs and African (Maghrebi and sub-Saharan)-based organizations in the illegal immigration, enslavement, and trafficking of people to be exploited in the labor sphere, especially in the agricultural sector. Victims are subjected to violations ranging from noncompliance with labor laws to enslavement. In such contexts, to obtain residence permits for the victims, fictitious hiring practices are used, including involving compliant Italian entrepreneurs.

Trafficking and enslavement of people are also practiced by Chinese criminals. Victims are exploited not only sexually but also in employment, most often in the restaurant and construction sectors. The workday of a Chinese trafficking victim can last from 10 to 18 h, and this labor exploitation can last for a long time—until the victim has repaid the money advanced by family members or the "master" to pay for the trip.

The war in Ukraine is exacerbating the phenomenon of human trafficking. Indeed, the long line of cases reported from around the world is being joined by women and children from Ukraine, whose disappearances are still being investigated by international authorities.

According to the U.S. State Department's annual Human Trafficking Report, Ukrainians fleeing war are at risk of becoming victims of human trafficking, as 90% of the refugees are women and children. More than half of Ukrainian children—4.3 million out of 7 million—are displaced refugees and are therefore particularly vulnerable to human trafficking. Since the beginning of the conflict to date, 4 million Ukrainian people have been forced to leave Ukraine. Within Ukraine's national borders, nearly 6.5 million have fled their homes [3, 4].

4.1   Modern Slaveries: From Labor Exploitation to Child Trafficking

Modern slaveries are fueled by trafficking in forced labor (buying and selling human beings for labor purposes), migrant smuggling, labor exploitation (domestic, agricultural, hotel, mining, and/or manufacturing, etc.), sex trafficking (women and adolescents forced into prostitution to satisfy sex tourism clients), child trafficking (sold or forced into marriage), the use of children in conflicts (child soldiers and children used as human shields, suicide bombers, sex slaves, etc.), and the exploitation of children for begging and organ and fetus trafficking.

4.2   Human Trafficking in Italy and Irregular Migration

According to a 2021 report by the Ministry of the Interior, there has been a 21.4% drop in reports of enslavement in Italy. At the same time, crimes of illegal residence have increased, fueled by migrant smugglers who, in exchange for money, cram thousands of people into boats that sometimes founder in the Mediterranean before reaching Italian shores. One of the worst shipwrecks in the Mediterranean occurred off the coast of Lampedusa, Italy, on October 11, 2013, killing 368 people who were crammed onto a barge and were being transported by unscrupulous traffickers.

4.3   "Caporalato" as a Form of Labor Exploitation

"Caporalato" is a form of labor exploitation that pervades several sectors of the economy, including transportation, construction, logistics, and care services. However, the *caporalato* phenomenon manifests more in the agricultural sector. Exploitation takes the form of illegal forms of labor brokering, recruitment, labor organization, and exploitation of irregular workers. The work is carried out seasonally and thus with short-term employment relationships. Most employment periods range from 101 to 150 workdays per year (although contracts of shorter duration are on the rise). The proportions of workers subjected to this treatment vary between 88.6 percent for employees of Italian nationality and 93.6 percent for foreigners.

This is a complex phenomenon that affects both Italians and foreigners and is widespread throughout Italy, particularly in the South. With the increase in migration flows in recent years, more and more foreigners end up being victims of "bosses" who exploit very cheap labor.

A variety of laws governing labor activity, for example, regarding working hours, social security contributions, and minimum wages, are also violated. These violations also affect occupational health and safety. In addition, the standard of living to which people are exposed is often degrading and characterized by incidents of exploitation, forced labor, coercion, and violence.

Agriculture is also one of the sectors with the highest incidence of non-regular labor. This is probably underestimated because it is difficult to make estimates that include foreign workers without residence permits or who are not registered on the civil registration lists.

5   Traffic Profile of the Human Trafficking in Italy

Source: www.interno.gov.it/sites/default/files/2021-04/focus_la_tratta_10mar2021_10.30.doc1_.pdf

As reported in the last 5 years, human traffickers exploit foreign and, to a lesser extent, domestic victims in Italy. Victims are mainly from Bulgaria, the People's Republic of China (RPC), Ivory Coast, Gambia, India, Nigeria, Pakistan, and Romania, including ethnic Roma. The pandemic exacerbates victims' vulnerability of sex trafficking through the increased use of private residences, instead of brothels or clubs, and online recruitment. Sex traffickers are increasingly using online platforms, such as social networks, mobile applications, and the dark web, to recruit, exploit victims, and book apartment rentals to make it difficult for their illicit operations to be tracked; this has been exacerbated by the pandemic. During the pandemic, sex traffickers have left thousands of Nigerian women and children who have survived trafficking destitute and without basic needs, such as food, during nationwide lockdowns. Many anti-trafficking ONG have expressed concern that travel restrictions and limited social and public services make it more difficult for victims of trafficking to flee and return home.

Traffickers, often part of criminal networks run by RPC citizens, systematically exploit RPC women in sex trafficking in apartments, beauty salons, clubs and massage parlors, as well as labor trafficking in a variety of RPC nationally owned businesses, sometimes forcing victims into drug addiction. Massage parlors are often used as a front for the purchase of commercial sex, raising concerns about sex trafficking.

Of the approximately 40,000 to 45,000 people engaged in paid sex on the street, ONG reported that approximately 60% (or 24,000 to 27,000) are victims of trafficking or are at risk of being trafficked, and between 5 and 8% are children (or about 2000 to 3600). The government and civil society argue that Nigerian women and unaccompanied minors remain highly vulnerable to trafficking due to the continued functioning of organized Nigerian trafficking networks.

Trafficking networks and gangs continue to become increasingly sophisticated, organized, and violent, especially the Nigerian gangs linked to the Black Axe, the Supreme Viking Confraternity, and the Eiye union. Several Nigerian smuggling networks have expanded operations across Italy and are reportedly receiving protection from Italian crime syndicates. International organizations have estimated that up to 75% of Nigerian women and unaccompanied minors who arrived in 2018 were victims of trafficking. Traffickers subject Nigerian women and girls to sex trafficking through debt-based coercion and voodoo rituals. Authorities report that

traffickers are encouraging Nigerian victims to seek asylum to obtain legal residency and facilitate their continued exploitation.

International organizations have reported that the number of unaccompanied minors transported by sea increased in 2021 to around 10,000, predominantly from Bangladesh, Egypt, and Tunisia; compared to 4631 in 2020, 1680 in 2019, 3534 in 2018, and 15,731 in 2017.

Labor traffickers operate in agriculture, mainly in southern Italy, in construction, domestic work, hospitality, and catering. The pandemic has exacerbated the vulnerabilities of victims of trafficking, including greater isolation of migrants and seasonal workers. Traffickers use fraudulent recruitment, passport retention, and debt-based coercion to control trafficking victims; traffickers also extort payments from the victim's family in the country of origin.

Cuban medical professionals working in Italy during the 2020 pandemic may have been forced to work by the Cuban government.

Italy has about 1.5 illion unregistered workers and 3.7 million undocumented workers in the informal market who are at risk of labor trafficking. For the agricultural sector in particular, experts have estimated that as many as 200,000 workers in 2021, especially seasonal workers, are at risk of forced labor and exploitation in Italy. Employers in the agricultural sector sometimes submit false forms relating to their workers, which impedes labor inspections and the potential identification of victims of trafficking. Italy had around 500,000 irregular migrants in 2021, many of whom are at risk of being trafficked. Italy received around 67,500 undocumented migrants arriving by sea in 2021, a significant increase from 34,154 in 2020 and 11,471 in 2019, many via Libya, where victims reported being subjected to extortion, torture, trafficking human beings, and rapes by militias or traffickers waiting to be transferred to Italy. In 2019, of the approximately 31,000 asylum seekers, authorities estimate that up to 30% were at risk of sex trafficking or forced labor while waiting for their petitions to be adjudicated. Smugglers target migrant centers to recruit and subsequently exploit asylum seekers, sometimes claiming to be family members to gain access to the centers. Asylum seekers can legally work from 2 months after applying, although many immediately seek illegal employment in informal sectors, increasing the risk of trafficking. Many also attempt the passage to other European countries; under the European Commission's Dublin Regulation, countries have 6 months to return victims to the EU country of arrival, but must accept their asylum claim if they do not relocate them in due time.

6   Protection

In 2021, Italian authorities reported pandemic-related restrictions and the increased use of private residences and online platforms continued to hinder their identification of victims of sex trafficking, while workplace closures and further isolation made it more difficult the identification of victims of trafficking for work. The government identified 463 new victims in 2021, similar to 470 in 2020 but fewer than 657 in 2019. Of the identified victims, 255 were victims of sex trafficking and 192 were

victims of labor trafficking, including 169 victims of forced labor, nine victims of forced crime, seven victims of domestic servitude, and seven victims of forced begging. Sixteen of the 463 victims were exploited in trafficking abroad or in transit to Italy. The government also identified 201 people in migrant centers who the government believed could become victims of trafficking but who had not yet been exploited in Italy. All of the newly identified victims were foreign nationals and undocumented migrants, and asylum seekers continued to make up the majority of identified trafficking victims, with the majority of victims originating from Nigeria and a smaller proportion from Pakistan and Morocco. ONG reported that gaps persisted in the authorities' proactive victim identification efforts during the reporting period.

The government cooperated with NGOs and international organizations to provide shelter and services to the victims. In 2021, the government provided assistance to victims through 12 projects presented by regional and local authorities and nine presented by NGOs from across Italy and allocated 24 million euros ($27.21 million) for these projects; the same as in 2020 and 2019.

The government said it observed UNHCR's standard procedures for screening victims of trafficking among some 67,500 asylum seekers, unaccompanied minors, and undocumented migrants who arrived by sea in 2021. Civil society coordinated with law enforcement and immigration officials at both arrival points and temporary reception centers, and an international organization reported providing information on potential trafficking victims to responsible local officials of the assignment of migrants to migration centers and victims of trafficking to shelters. However, ONG continued to say that the authorities failed to correctly identify many victims of trafficking upon arrival, potentially leaving some victims unidentified within the system and instead classifying them as asylum seekers or undocumented migrants and therefore subject to deportation. Ong continued to stress the need for more time to screen refugees and migrants at ports of arrival to more accurately ascertain the status of victims but acknowledged conditions were not conducive to a stay in ports beyond a day or two.

In 2021, the number of asylum applications doubled to around 56,000, with 42,000 pending at the end of the reporting period. The government processed 53,000 applications during the year, including applications from previous years, and granted asylum status or subsidiary protections to around 56% of applicants. The law provided an initial 3–6 months of government assistance for all victims of trafficking.

7   Prevention

The Italian government has maintained prevention efforts. The DEO, as coordinator of the Inter-Agency Steering Committee on Trafficking, was responsible for drafting the National Anti-Trafficking Action Plan, coordinating prevention and victim assistance programmes, and submitting a biannual anti-trafficking report. The government was left without a national rapporteur to provide an independent analysis of the government's efforts to combat human trafficking; in a March 2021

document submitted to the government, several ONG urged the government to set up such a body. The interagency steering committee met once in 2021 and tasked a technical committee to draft a new NAP, as the previous plan expired in 2018; however, the government did not adopt a new plan during the reporting period. Civil society reported that the DEO was not effective in leading and coordinating national anti-trafficking efforts. ONG urged the government to strengthen interagency coordination and partnership with civil society and adopt a victim-centered approach.

In 2021, as part of its three-year plan, the government continued to provide skilled cultural mediators to inform vulnerable populations of their rights and raise awareness for refugees, migrants, and victims.

The government continued to provide funding to international organizations for anti-trafficking projects, especially in Africa. In March 2022, it approved a decree allocating 428 million euros ($485.26 million) to assist and integrate up to 75,000 Ukrainian refugees fleeing Russia's full-scale invasion of Ukraine, increasing space in migrant centers and funding ONG to provide psychological and legal advice. The government continued to cooperate with Frontex, the European Border and Coast Guard Agency, and the Libyan government to reduce the number of undocumented migrants entering Italy from Libya. However, many ONG have criticized this coordinated effort because it often involved returning the occupants of vessels identified in the Libyan search and rescue area to Libyan shores; ONG cited severe security and human rights conditions inside Libyan and Libyan detention centers, including sex and labor trafficking, for the more than 12,000 undocumented migrants forced to remain in detention centers.

Fraudulent labor recruitment and passport withholding continued to be a concern. While illegal, employers or labor recruiters sometimes charged employees a placement fee, which increased their risk of trafficking. The government had a licensing and accreditation system for job brokers and job recruitment agencies. However, there was a lack of regulation, including a licensing or accreditation system, and oversight of massage parlors, which remained likely locations for sex trafficking.

Illicit labor brokering has not reached the threshold for labor trafficking; However, law enforcement efforts in this area have helped prevent and reduce the demand for forced labor.

The law required enterprises to submit reports on their actions to minimize the risk of forced labor and prohibited the purchase of products made with forced labor. In 2021, the government signed a multilateral labor rights agreement with the government of Moldova, which included major trade unions from both countries, to protect migrant workers in both countries. The government also signed another bilateral agreement with the government of Côte d'Ivoire in 2021, focusing on law enforcement cooperation on trafficking investigations and prosecutions. The DEO continued to operate its 24-h hotline for victims of human trafficking, available in 12 languages. In June 2021, the government also set up a desk dedicated to victims of labor exploitation, including trafficking; the help desk included a hotline, social media accounts, a website and a chat facility, and the government reported

identifying 37 victims of labor exploitation during the reporting period. The government has not reported national efforts to reduce the demand for commercial sex [3, 4].

Discussion Questions
- Compare and contrast the special problems of Europe in immigration contrasted with your own region.
- Describe the risks of immigrants as hey journey to their hoped for better life.
- Discuss the laws as they are and how they might be improved.

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Understanding Re-Trafficking in the United States: Why Do We Have a Revolving Door?

Marietta Baba, Christina Tipton, Gergana Danailova-Trainor, Kelsey Morgan, and Richard Matthew

1   Introduction

Re-trafficking is a serious global problem, with consequences for poverty and inequality, local and national economies, systemic forms of crime, and human rights [1–4]. It is reported to be a regular occurrence in the United States [5, 6]. Re-trafficking is one of the important reasons that human trafficking is so difficult to combat. People become trapped in a cycle of exiting and re-entering sexual or labor exploitation[1]—a "revolving door" [7].

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[1] We define exploitation as the action or fact of treating someone unfairly in order to benefit from their work (Oxford Languages https://language.oup.com/google-dictionary-english) Accessed July 18, 2022.

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There is agreement that re-trafficking may be described as a situation in which a survivor experiences and leaves one episode of trafficking but later is trafficked again [4]. The exploitation that evolves following an initial escape from trafficking is important because it provides a continuing supply of victims for sex and labor exploitation—hence, the "revolving door." Re-trafficking points toward the inadequacy of our understanding of survivor recovery and what is needed to support it. If people who exited trafficking were able to address vulnerabilities that led to trafficking, and subsequently recover and re-integrate, then re-trafficking would not take place, and this would reduce the supply of trafficking victims.

There is an understanding of systemic factors that contribute to re-trafficking; however, at the present state of knowledge, we are not able to offer individual survivors the specific services they need to resist systemic pressures and prevent re-trafficking. One of the key reasons why this does not happen is that we do not evaluate the medium- and long-term outcomes of services offered to survivors or policies/laws enacted in light of the ultimate goal of reducing re-trafficking, either in the occurrence of re-trafficking itself or the enabling conditions that may increase the risk for re-trafficking. To address this limitation, we need to be able to connect individual survivor characteristics, the services they receive, and their recovery outcomes over time. This approach would allow us to know "what works" for diverse groups of survivors and to invest in such efforts to reduce re-trafficking.

In this chapter, we provide a broad overview of re-trafficking in the United States, including its definition, evidence for re-trafficking, causes of the problem, and policy dimensions, with a special focus on the importance of understanding survivor outcomes as a measure necessary to reduce re-trafficking. We present a case study of re-trafficking to illustrate key themes.

This chapter covers both sex and labor trafficking, although there has been a focus on sex trafficking in the United States, both in the research community and in law enforcement. This focus is due in part to a perception that victims of sex trafficking face greater harms than persons who have been trafficked for labor exploitation [8–11]. In addition, most victims detected globally and domestically have been trafficked for sexual exploitation (50% compared with 38% for labor globally [12], 62% of Office of Victims of Crime grantees, and 87% of Health and Human Services-funded NGO clients in the US) [13]. There is some empirical evidence that supports the perception of greater harm for sexual exploitation [14], but labor trafficking victims also face serious harm as well as pressure to return to their traffickers after escape [9, 15].

Globally, the main economic sectors for sex and labor trafficking are domestic work, construction, fishing, agriculture, catering, street trading, garment production, and mining [12]. Polaris [16] has created a typology of 25 human trafficking industries in the US based on data reported to the US National Human Trafficking Hotline from 2007 to 2016.[2] The profiles for each industry show that victims in sex

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[2] The 25 industries are as follows: escort services; illicit massage, health, and beauty; outdoor solicitation; residential sexual services; domestic work; bars, strip clubs, and cantinas; pornography; traveling sales crews; restaurants and food service; peddling and begging; agriculture and

trafficking-related businesses tend to be American citizens, while victims of labor trafficking and labor exploitation tend to be foreign-born nationals.

Empirical studies of labor trafficking in the United States are scarce. In Owens et al.'s [15] study of US labor trafficking, all cases available for study involved foreign-born nationals. Most of the victims had come to the US under lawful visas, but during exploitation their status changed to unauthorized. In one study of more than 250,000 foreign workers who entered the US through H-2A and H-2B visas between 2009 and 2013, most were from Mexico and the majority were men 40 years of age or younger [17]. About 44% of employers who applied for such visas indicated they planned to recruit indirectly, a practice associated with reported abuses such as third-party recruiters charging fees and providing false information about job conditions.

Gożdźiak and Lowell [18] reported that of 2735 cases of foreign-born national adults that had been identified as trafficking victims in the US between 2006 and 2011 and had received assistance, 75% were labor trafficking cases. Zhang et al.'s [19] study of undocumented migrant laborers in San Diego County, California found that 30% were victims of labor trafficking, while 55% were victims of other labor abuses. Labor trafficking cases in the US demonstrate the linkages between human trafficking and the broader US economy, the legal system, and immigration policies, to be discussed later in the chapter.

2   Content

2.1   Definition of Re-Trafficking

Re-trafficking does not have a legal definition in the United States [20]. It has been defined in the literature; however, these definitions often are not based upon empirical research [4]. The research-based literature that does exist is concentrated upon persons who have migrated internationally [1], were deported, and had difficulties reintegrating into their country of origin or home, especially when they face the same economic and social conditions that propelled them into trafficking in the first place [1, 3]. Some survivors have found members of a local trafficking ring waiting for them when they returned home [2], a situation that demonstrates the overall problem of exploiters deliberately targeting people who have been trafficked before.

The global dimension of re-trafficking is an important problem that raises challenges for international migration programs and policies, yet it does not consider domestic victims and survivors in the US. The United States is one of the primary destination countries for international trafficking victims; however, empirical

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animal husbandry; personal sexual servitude; health and beauty services; construction; hotels and hospitality; landscaping; illicit activities; arts and entertainment; commercial cleaning services; factories and manufacturing; remote interactive sexual acts; carnivals; forestry and logging; health care; and recreational facilities.

studies have reported that many trafficking victims in their research populations are US-born domestic persons, especially in the case of juveniles who have been trafficked for commercial sexual exploitation [16, 21–23]. Unfortunately, there are no reliable estimates of trafficking prevalence for US domestic versus international survivors overall due to multiple data limitations [13], to be discussed later in the chapter.

Perhaps the most often cited definition of re-trafficking with an empirical foundation is that of the International Organization for Migration (IOM) based upon its study of 79 re-trafficking survivors over a period of 10 years (1999–2009) [1]. In this study, IOM analyzed its database of persons who had accepted IOM assistance for human trafficking globally and identified distinct individuals who had received services more than once. These individuals were defined as having been *re-trafficked*, meaning a person who has been trafficked according to the United Nations Palermo Protocol, exited the trafficking situation for any reason, and then re-entered trafficking again [1].

This definition may not be directly applicable in the context of the United States, not only because a significant number of survivors is domestic and cannot receive IOM assistance, but also because the US has its own narrower definition of human trafficking as provided in the Trafficking Victims Protection Act (TVPA) of 2000 and its reauthorizations.

The United Nations Palermo Protocol defines trafficking in persons as the "recruitment, transportation, transfer, harboring, or receipt of persons by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation" (www.unodc.org, accessed 19 May 2022).

In contrast, the US Trafficking Victims Protection Act (TVPA) of 2000 splits human trafficking into "severe forms" of trafficking in persons, and sex trafficking that is not considered "severe." "Severe forms" of trafficking are defined as follows:

(a) "Sex trafficking in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such has not attained 18 years of age; or
(b) The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion, for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery" (see Trafficking Victims Protection Act or TVPA of 2000; see Section 103 of Public Law 106–386).

Sex trafficking that is not considered "severe" is defined in the TVPA as "the recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of a commercial sex act," with the latter term meaning "any sex act on

account of which anything of value is given to or received by another person" (see Section 103 of Public Law 106-386).

The TVPA definitions of human trafficking noted above represent "two tiers" of the law [24] that have been called "operational" and "non-operational" [9]. In the first tier, or operational definition (i.e., "severe" trafficking with force, fraud, or coercion), trafficking can be counted and prosecuted. But in the second tier, or non-operational definition (i.e., *not* "severe" sex trafficking), trafficking cannot be counted or prosecuted. This means that some forms of prostitution (generally, where a third-party exploiter is involved) can be defined legally as sex trafficking but not serviced as trafficking (i.e., victims are not identified, benefits are not provided, and prosecution is not pursued [9].

Stolz [24] has argued that the two tiers were intended to respond to different interests involved in the process of developing federal policy on human trafficking. The first tier responded to anti-human trafficking interests that wanted law enforcement to be able to identify victims who may have been involved in other crimes such as prostitution. The second tier responded to anti-prostitution interests that wanted to define all prostitution as trafficking, toward its eventual abolition. The force of the law is trained upon the first tier, requiring force, fraud, or coercion. The second tier establishes a legal precedent for defining some forms of prostitution as human trafficking, although there is little or no enforcement of this legal distinction [9].

The existence of two conceptual frameworks in the definition of human trafficking in the US conflates sex trafficking with prostitution, making victim identification more difficult, while not providing protection for persons who have been commercially exploited by third parties. In the United States, the conflation of sex trafficking and prostitution has meant that anti-trafficking resources are diverted into sting operations and raids on non-trafficked sex workers, with little benefit [18, 25]. Further, it is possible that a case which began as "severe" sex trafficking could transform into the "non-severe" type following an initial exit from exploitation (e.g., if the victim was manipulated psychologically). The case study described later in this chapter represents an example of this kind of transformation. Also, victims initially trafficked as minors may become adults before they exit, another example of such transformation.

Commercial sexual exploitation reflects a spectrum of sexual activity upon which "severe" forms of trafficking are at the most brutal end of the spectrum (i.e., by means of force, fraud, or coercion or with minors) and agency-based prostitution (i.e., adult choice of sex work) is at the other end [9].[3] On the spectrum are different forms of sexual exploitation in which there may not have been overt force, fraud, or coercion, but there could have been an "abuse of power or of a position of vulnerability," as included in the UN Palermo Protocol's definition of trafficking in persons. Since the United States signed the Palermo Protocol, there is an argument

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[3] A continuum of exploitation also exists in labor trafficking, with "severe forms" such as forced labor at one extreme and various forms of labor exploitation arrayed along the continuum [9].

that the "abuse of power or of a position of vulnerability" should be included as a trafficking method that identifies victims protected by federal law [26].

The identification of re-trafficking cases is difficult because it is necessary to determine whether trafficking happened two or more times. Episodes may be linked; however, subsequent incidents may not conform to the definition of "severe" trafficking. In such cases, the victim may not be identified as a person who has been re-trafficked, even when they have been re-exploited in a manner that is the same or similar to what they experienced when they were considered a trafficking victim.

2.2   How Do We Know that Re-Trafficking Is Happening

Quantitative studies of prevalence rates for re-trafficking reveal the extent of this crime within the overall context of persons who have been trafficked in some geographic area or other specific domain. There are a few empirical studies of re-trafficking rates in an international context. These studies examine the proportion of trafficked persons who have been re-trafficked. Jobe's [1] summary of empirical literature reported that the prevalence of re-trafficking outside the US ranged from 3 to 45% of trafficking victims, depending upon country.[4]

Systematic empirical research on rates of re-trafficking in the United States is rare [4]. Regular data collection on re-trafficking faces many barriers and often we do not analyze the data that is collected to determine if re-trafficking has taken place. In general, the United States does not track or evaluate what happens to survivors after exit from trafficking [13]. Inconsistencies in definitions of trafficking across jurisdictions are one barrier, even though the TVPA provides one. States and other jurisdictions in the US have many different laws pertaining to trafficking, and these definitions do not necessarily conform to the US federal definition [27]. Some states may have many distinctive human trafficking laws, such as California [20]. If definitions do not correspond with one another, integration and comparison of data are difficult. Further, the US has no centralized data repository for information related to trafficking [13]. There are multiple places to store data at the federal, state, and local levels, and agencies often experience difficulties in sharing information with one another. While there are no studies of prevalence rates for re-trafficking in the United States, one study showed that 15.65% (18) of 115 adult migrants who experienced labor trafficking in the US had been criminally victimized previously, whether through physical or sexual violence, property crime, or threats of harm, suggesting that some may have been re-trafficked [28].

Professionals working in the field of human trafficking in the United States (e.g., law enforcement, social work) report that relapse into re-exploitation after an initial exit is a prominent concern. Interviews with and reports from US professionals and their organizations reveal that survivors are at risk of being re-exploited during or

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[4] Empirical studies have shown [c.f., 1] that rates of re-trafficking vary depending on region: 3–34% in South-Eastern Europe (2003–04), 21% in the UK (2003–07), 25.8% in India, and 9.1–45% in Albania.

after services and may experience pressure or threats from traffickers to encourage their return or they may "disappear" from services [29–31]. Service providers understand that exit from exploitation is a long and complex process and often involves re-victimization. In fact, re-exploitation is such a frequent situation that it has been integrated into theoretical models of exit from prostitution as a formal stage of development, with most individuals expected to relapse [32].

Case studies offer details regarding the nature of the re-trafficking experience that validate evidence from other sources. Case studies reflect many themes reported in the empirical literature, although it is not possible to generalize from a single case. For a book-length, first person account of re-trafficking in the US see Bender [33]; see also [4, 5] for brief case studies, although some of these do not present cases from the United States.

The brief case study of re-trafficking in the United States presented below shows how re-trafficking may take place. This case provides an illustration of the "two tier" definitional problem that may conflate sex trafficking and prostitution. In the first episode of trafficking described in the case, the victim faced "severe" sex trafficking involving force, fraud, or coercion (tier one). In the second episode, a third-party exploiter engaged in recruiting and providing the survivor for commercial sex acts, even though force, fraud, or coercion were not involved (tier two). Instead, the "abuse of power or of a position of vulnerability" were the methods employed. Because both forms of trafficking are included in the TVPA ("severe" sex trafficking and non-severe sex trafficking), we define this as a case of re-trafficking—from tier one to tier two. We will draw upon this case study to explore the complex nature of re-trafficking in later sections of the chapter.

2.3   Case Study on Re-Trafficking in the United States

Marie L. (a pseudonym) lives in a metropolitan area within a northern state in the US.[5] She endured sexual abuse by her father from the age of 5 until she was 17. When Marie was in her early 20s, she completed vocational training in a national program. The program bought her a plane ticket to Las Vegas to look for employment; however, she was not offered housing or employment connections in Las Vegas. She arrived in Las Vegas alone and with no appointments and stayed at the apartment of a man she knew from home. Marie says that as soon as she left the apartment to look for a job on her second day there, she was approached by an apparently successful businessman and his female associate driving a Mercedes. They asked Marie what she was doing, and she responded that she was from out of town and looking for work. The man in the car began talking to Marie about his female associate. He said she was paying for college by modeling for a sports magazine. He told Marie that she could do the same thing. The man indicated an interest in helping Marie to find

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[5] The case study narrative is based on three oral history conversations with Marie L. conducted by MB in 2022. Marie was identified as a re-trafficking survivor by CT. The direct quotes have been edited for length and clarity.

employment, although the details were vague. The man showed Marie a firearm and this frightened her. She accompanied them to a private home, where she was introduced to several attractive young women and then taken on a shopping trip by the man. After he had purchased her clothes, shoes, and jewelry, the man said "now that I've put all of this into you, you are going to do this" by which he meant accompanying two other women to hotels to have sex with men. She believed she had to do it, or else. Marie said "…*in my mind I'm freaking out. I have no idea what just happened, what I'm doing here. All I know is it's not good. I don't feel good.*" Marie accompanied the two women to hotels and for 2 or 3 days, during which they had sex with customers and took cocaine so they would not have to sleep. On the third day, the trafficker drove Marie to a hotel and told her to get 6 h of sleep. Marie decided to escape. She called a family member who helped her get to the airport and fly home, dumping the trafficker's pink flip phone in the trash at the airport.

Marie says that the trafficking experience showed her how quickly she could earn money using her body. To earn income, Marie decided to become a strip club dancer. The money was good, it was fast, and Marie received attention and complements from customers. But she also had to endure constant sexual assault— unwanted touching that involved an element of coercion. Just to get through it, Marie had to get drunk every day.

During her transition to strip club dancing, Marie began to date a man that she had known since middle school. The man was 3 years younger than Marie and she says that he thought she was beautiful. He also thought that her idea of strip club dancing was "cool." They were part of a friendship network based in the community and saw each other from time to time after high school. Marie says that while they were dating, she fell in love with him. They moved in together and he encouraged her to engage in prostitution to earn income. Marie said "…*he would provoke The Life. He would set up things and ask me to do things because he knew they would pay me large amounts of money. And I did that for him because I thought he loved me. It's the same way a pimp works. That's exactly what he'll do to his girls. Convince them that he loves them and this is what they should do for him.*" According to Marie "*it was easy for me to go along with that because he mentally manipulated me. You know, he reminded me of the cons, the pros, of allowing that. And because I loved him, it was kind of like, yeah, I guess I'll do it … I let myself become so vulnerable to the way he said he loved me that I just would do whatever he wanted, whatever he needed.*" She kept these activities private and told no one about them. As it turns out, her romantic partner was involved in trafficking other women in addition to exploiting Marie. He went to prison for a non-trafficking related crime, but when he was released, they got back together, and Marie returned to her previous lifestyle. The Life included using substances as a means of suppression. Eventually, Marie was arrested in a police raid of a drug house and sentenced to 18 months in prison for possession of methamphetamine. This aspect of the case illustrates the fine line between being a trafficking victim and being a criminal. Labor trafficking victims also face this dilemma. They may not report to US authorities for fear of deportation since some of them are irregular migrants or their authorization has expired.

The prison sentence was difficult but brought certain advantages. First, Marie had time to spend being sober and reflecting on what had happened to her, without distractions. Second, she was required to participate in cognitive behavioral therapy, which revealed the personal and social dynamics underlying her experiences of abuse and the trauma she had suffered. She says this support changed the outcome of her life. Third, Marie re-connected with her earlier spiritual experiences, including a time when she heard the nearly audible voice of God saying this is not what I have for you, prompting her to contemplate herself in a new way. Together, these experiences helped Marie to move beyond shame and toward recovery.

After her release from prison and serving an eight-month probation, Marie found employment in a manufacturing firm and was able to move into a technical position where she says she makes "clean money" and has been able to buy a car for her high school aged son. Marie now is considering options for higher education. The following sections of the chapter incorporate further discussion of this case study.

2.4   Why Does Re-Trafficking Take Place?

The reported occurrence of re-trafficking across numerous countries suggests that it is an important component in the way in which human trafficking operates globally. Indeed, re-trafficking is so important that it is represented as a factor in economic models of sex trafficking [3]. In this section, we consider three elements that help to explain re-trafficking: (1) the nature of trafficking as a business; (2) constraints faced by individual survivors; and (3) economic, legal, and cultural factors reflecting larger institutional systems. These elements represent the three major components of a model of human slavery: exploiter strategies; vulnerable people; and the institutional environment [34].

2.4.1   Trafficking as a Business

Human trafficking may be examined as a business enterprise or part of a supply chain that could include legitimate businesses [35]. Many criminal organizations involved in human trafficking are organized as business enterprises that must consider the profitability of their operations [12]. Exploiters, whether they be individual facilitators or pimps, or organized groups such as gangs, cartels, criminal networks, or syndicates, generally are interested in the money that can be made through trafficking people, although not every trafficker is a profit maximizer [7].

As a business enterprise, human trafficking can generate a considerable profit [12, 35, 36]. The International Labor Organization has estimated the annual profit for human trafficking to be $150 billion USD [37]. Of this total, two thirds ($99B USD) came from commercial sexual exploitation, while $51B USD resulted from forced economic exploitation. Studies have shown that return on investment from prostitution ranges from 100% to 1000% depending upon the market, and even in less profitable markets an enslaved laborer can produce 50% profit [35].

The sex trafficking business is one of the most profitable in the world, yielding profits second only to those of the illegal drug trade, but carrying less risk [3]. The

sale of a victim in the sex industry can generate a profit of 1000% and annual profit margins can reach 39.1%, much higher than traditional businesses [3]. These latter numbers are based on detailed analyses of sex trafficking operations conducted by Siddharth Kara [3] for specific cases in the US, Thailand, India, and Eastern and Western Europe. As few as three victims can earn a gang over $1000 a day in profits, which is equal to $300,000 per year (these estimates are drawn from Frank and Terwilliger's study [36] of federal court trafficking cases). In one study [38], sex trafficking facilitators made an average of $670,625 per year. The funds are used to support the lifestyle of the traffickers, which may involve perpetration of other crimes.

Frank and Terwilliger [36] also discuss the reasons for high profitability in sex trafficking, which include low start-up costs (as little as $100), workers being paid low or no wages (conditions may resemble slavery), and slight chance of prosecution due to numerous factors, to be discussed later in this section. A sex trafficking victim can be sold over and over to bring in revenue for a relatively long period of time (unlike drugs).

Examining human trafficking as a business reveals a complex operational process involving several stages, including recruitment/entry, transportation, exploitation, victim disposal, and criminal proceeds [35]. In this business model, re-trafficking is part of the victim disposal stage. Victims whose value to the trafficker has declined may be released, abandoned, or even murdered. However, those who are released may not be able to re-integrate due to insufficient resources or other issues (e.g., health). Financial pressures may force victims who are released to return to the underground economy or change roles (e.g., from prostitute to recruiter or madam [35]. Victims also may escape through various means (e.g., victim's own agency, police raids, friendly customers, "good Samaritans" [3], yet be drawn back into the control of a trafficker or exploited by another trafficker after exit.[6]

Below we consider several factors that contribute to re-trafficking, including circumstances surrounding the recruitment and retention of "human resources," the ability of exploiters to psychologically abuse someone who is already known, and the potential value of a victim who has prior experience in the business.

Recruitment and retention of "human resources." Traffickers must recruit and retain their "human resources," just as in any business [36]. Survivors have described various schemes for recruitment or long-term entrapment in sex trafficking within the US [39], including the following: spending money and romance/flattery (feelings of love, sweet talk, and romantic gestures); build dependence and/or trust by helping them (provide shelter and protection from previous conditions); normalized or glamorized engagement in prostitution (exposure to pornography and casualness of prostitution); isolation (move to another city, control communications); abduction/drugs (hold hostage or bribe with drugs); use of "bait and switch" (threatening indentured servitude); coercion by financial con/debt bondage (posting pictures on internet and demanding payment, giving money and demanding it be returned); recruited by boyfriend/girlfriend gang member; and preying on intellectually

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[6] The proportion of trafficking victims who are rescued globally is about 1% (www.un.news, July 29, 2016).

disabled youth (they may be unable to know the consequences of their actions [40]. These recruitment and enmeshment methods can be used to re-acquire people who have exited and represent enabling conditions for re-trafficking that might be targeted in services and/or evaluated as part of service outcomes. Similarly, in labor trafficking, charging recruitment fees is a strategy that enslaves workers for a long period of time, even after an attempted exit [13].

Because victims may be freed or escape through various means, there is pressure from exit on the business, which has an impact on profits. When a worker leaves, it takes time and money to replace her or him. Exploiters have devised specific means that may be used to re-acquire people who have departed from a trafficking situation. Reid ([39]; see also [36]) has discussed some of these methods based upon empirical research with survivors, each of which is designed to hold victims or pull them back into the business model:

- Shame and blackmail—demean or devalue the victim to create feelings of worthlessness
- Obligation—creating a hesitancy to "snitch" after exit
- Control by threatening a child—threats to sell, injure, or withhold access to them
- Isolation and control—track victim's movements using technology and using technology to harass survivors (see also [41, 42])
- Financial control—pressing into debt bondage that does not end after exit
- Intimidate—threats against the victim or family unless the victim returns
- Provide hope, connection, and faux family—saying we're the only ones who can understand us, I will marry you, or you can leave soon [33].[7]

Psychological abuse. Cases of re-trafficking in the US show that the psychological manipulation of victims is a potent force because it creates a social bond between the trafficker and the victim. Often called a trauma bond[8] or Stockholm Syndrome [39, 43], the psychological connection between a trafficker and a victim may be more effective than physical force in promoting retention and/or re-trafficking because the bond keeps the victim away from law enforcement, facilitates the victim's participation in low level crimes that re-enforce her or his dependence on the trafficker, and leads to the impression within the law enforcement community that the victim is a criminal (making her or his testimony less credible), so that their options are extremely limited [7, 27, 44]. Psychological abuse contributes to the business model of trafficking because it carries lower risk to exploiters than physical violence [35].

Potential value of a survivor with prior experience. Exploited people may become even more valuable if they gain experience and skills and then take on new

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[7] The docudrama *Apartment 407* shows some of the means used by traffickers to entrap and enmesh victims.

[8] While there is no widely agreed definition of trauma bond, it is commonly understood as a powerful psychological and emotional connection between an exploiter and a victim based upon recurrent abusive cycles of punishment and reward [43].

middle-management roles [45].[9] These roles usually must be filled by people who have knowledge of the business (not new recruits) and have proven that they can be trusted to take direction from the trafficker and not go to law enforcement. If an exploited person has had experience in one of the trafficking-related industries such as exotic dancing or escort services, there are various ways in which s/he can be lured back to generate profits for someone (e.g., moving from one sector of the sex industry to a more desirable or lucrative sector, such as moving from strip club dancer to enforcer,[10] from prostitute to "bottom girl,[11]" recruiter, or madam, or promising to "promote" the person, such as marrying her or him [33, 35]. Highly skilled victims who are knowledgeable about the business and well known to the exploiter help the business to run more efficiently and become even more profitable. Viewed from this perspective, re-trafficking is a business strategy that may be used by individual exploiters or by organized criminal groups to increase profits from the business.

In the case study, businesses and revenue were prominent themes. Marie's first trafficking experience was initiated by a job search gone wrong. Traffickers posing as businesspersons quickly found her (somewhat mysteriously), and then deceived and intimidated her. Some of the circumstances here resemble those of international trafficking cases in which migrants found traffickers waiting for them when they arrived home [2]. In those situations, an international network of traffickers was cooperating to identify and capture victims who had been deported. The circumstances here are different; however, a domestic network of traffickers could work in the same way. A trafficking network or ring would have connections across cities or states, so that exploiters with knowledge of a victim's movements in one place could alert associates in another place to meet, deceive, and threaten her or him; for example, taking victims who may not be able to find employment in one state and moving them to another state with more ample opportunities. In other words, tracking movement of victims from one place to another is part of a re-trafficking business model.

When Marie returned home, she went to work in a strip club. From this business, victims are often deployed to other activities such as prostitution (C. Tipton, interview, November 30, 2021). For Marie, strip club dancing was a bridge between her first and second (re)trafficking experiences. In the first experience, she learned that she could make money by selling her body. In the second experience, her acquired skills became the basis for an exploiter to make a large amount of money in a short time, based upon Marie's labor. Over time, Marie moved "up" from being a low-ranking member of a stable to being the sole woman in a duo where she

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[9] Two documentaries on Jeffrey Epstein show that he developed a hierarchy of positions in his sex trafficking operation, and that he "promoted" girls from masseuse to recruiter if he approved of them or if they threatened to quit (see Surviving Jeffrey Epstein and Jeffrey Epstein: Filthy Rich).

[10] See the major motion picture *Zola*, based upon a case of trafficking in the US.

[11] In the US, a "bottom girl" or "bottom bitch" is the person involved in providing commercial sexual services, usually considered a prostitute, who is the top person in the hierarchy of prostitutes who work for a particular pimp.

retained influence over the use of some of the money she made. This vertical movement "up" was quintessential to Marie's re-trafficking. The business model described in this case is institutional, meaning that the influences and interconnections within the sex industry shaped Marie's behavior and retained her over time.

2.4.2   Constraints Faced by Individual Survivors

Survivors of trafficking face serious constraints to recovery and re-integration, which constitute key factors that help to explain re-trafficking. Below we discuss four types of constraints that make re-trafficking more likely: social bonds with exploiters; criminal or police record; unmet needs; and undocumented status. These constraints again represent enabling conditions that provide opportunities for survivor services and outcomes evaluation. They are not mutually exclusive and interact with one another.

Social Bonds with Exploiters. One of the most important constraints faced by survivors is the social relationships that exist between survivors and their exploiters. If these bonds remain in place after exit, the survivor may find her or himself being pulled back into the trafficking situation. A key point of entry into trafficking that may remain in place after exit is family networks. Many survivors were initially exploited commercially by family members, including parents, siblings, and uncles or other relatives [22, 39, 46, 47].[12] Commercial exploitation may be a way of life in some families. This means that the possibility of being re-trafficked by a network of relatives is ever present. The same issue exists with people who are considered friends and were involved in earlier episodes of trafficking, perhaps as recruiters. Friends involved in the sex trade is a risk factor for trafficking ([48]; see also [15]). It is difficult to completely cut oneself off from family and friends, creating a potential point of vulnerability to re-trafficking that is especially fraught, given that family and friends also are essential to recovery [49–51].

In the case of Marie L., family members and friends were important in her exploitation. Marie's father initially abused her sexually when she was a young child. Sexual abuse of children is a risk factor for trafficking [52, 53]. Marie's long-time friend, who became her live-in romantic partner (akin to a family member), perpetrated her re-trafficking. The case also shows the importance of psychological manipulation and abuse when family members or friends are involved. Such individuals can use psychological means to abuse their power or exploit someone else's vulnerability to facilitate re-trafficking, rather than out-right physical force. Marie's cognitive behavior therapy helped her to understand her vulnerability and how she had been subject to manipulation.

Criminal or Police Record. Another constraint is a criminal or police record, which happens if a survivor has been arrested for prostitution or another crime connected to trafficking (e.g., drug possession, theft). Once a person has a criminal record, there are more obstacles to recovery (e.g., finding safe housing or employment) [15, 27]. Housing is especially critical if survivors are to find distance

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[12] The docudrama *The Turn Out* portrays a family involved in sex trafficking their children in Appalachia.

from traffickers [30, 54]. Police may place minors in detention after trafficking because there are no other safe options available [31]. If a survivor is not able to find employment that meets basic needs, s/he may feel pressure to make risky employment decisions, such as dancing in a strip club, joining an escort service, or other forms of commercial sexual exploitation that can lead to re-trafficking. In Marie L.'s case, a criminal record accompanied her prison sentence for drug possession. Housing after prison was made available by her parents, so she did not face housing discrimination at that point. However, the problem emerged later when she went into the commercial housing market and found few places that would accept an ex-felon.[13] When she applied for employment, there was no criminal background check, possibly due to labor shortages in the US during the Covid-19 Pandemic.[14]

Unmet Needs. Survivors also may have physical, psychological, or other needs related to their personal experience (for example, child maltreatment, involvement with child welfare services or foster care, running away) or their trafficking experience (for example, physical injury, post-traumatic stress disorder, substance addiction) [55–58]. If these needs are not met soon after the exit from exploitation, they can create conditions that propel the survivor into re-trafficking [49]. For example, the survivor may need to maintain connections with an exploiter to obtain access to substances [59]. Psychological or medical conditions might mean that the survivor has a difficult time reintegrating into regular employment. In the case study, Marie's first trafficking experience and later in strip club dancing and prostitution led to substance abuse, which was not treated initially and ultimately led her to prison.

Undocumented Status. Trafficking survivors who were born outside the US and are undocumented face multiple challenges to their recovery after exit [1]. An adult survivor must be willing to cooperate with law enforcement to receive federally funded services and, if undocumented, to obtain a T visa that would allow her or him to remain in the US [60]. Often victims, including those who are undocumented, are reluctant to identify themselves to law enforcement due to issues with distrust of police, fear of deportation, and/or fear of retaliation from traffickers [51, 61]. If such a person is deported, s/he may face the same circumstances that were responsible for trafficking in the first place and be unable to re-integrate, making her or him a target for re-trafficking [2, 3].

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[13] In the US, the Trafficking Survivors Housing Act of 2021 will require a study and a report on the housing and service needs of trafficking survivors and those at risk for trafficking (S. 2049–117 Congress 2021–22).

[14] The Lichtenstein Initiative, based at the UN University Centre for Policy Research has launched the Finance Against Slavery and Trafficking (FAST) project to provide enhanced financial services to survivors of modern slavery and human trafficking (https://www.fastinitiative.org—FAST). Accessed 18 July 2022.

2.4.3   Economic, Legal, and Cultural Factors Reflecting Larger Institutional Systems

Constraints faced by individual survivors take place within a larger context of economic conditions, a legal and regulatory framework, and cultural norms that encourage or tolerate certain types of behavior. In the case of re-trafficking, these institutional factors help to create the circumstances that place serious constraints on individual survivors and make exit more difficult to sustain.

Economic Conditions that Result in Inequality. Economic inequality makes re-integration of survivors more difficult [6]. Poverty, in and of itself, may not necessarily be the root cause of human trafficking in many cases; however, poverty combined with other vulnerabilities such as prior abuse are important factors. Lack of employment or low wage work that often faces survivors who exit trafficking increase the lure of a return to the trafficking situation [35]. For example, it was unrelenting economic deprivation that prevented Bender [33] from purchasing a cup of coffee at a coffeeshop that finally drove her back to sex trafficking after exit. The loss of financial resources and social connections that take place during the first trafficking experience may exacerbate impoverishment and lead to re-trafficking [25]. Lack of employment and other economic difficulties also are some of the main explanations for the re-trafficking of migrants who are returned to their countries of origin and find re-integration elusive [1].

Legal Factors that Create a Permissive Environment. Kara [3] has summarized several legal and regulatory factors that minimize risk for sex traffickers and increase the chances of re-trafficking [7]. Some of these factors, which are relevant to internal, as well as cross-border trafficking in the United States, include the following:

- Absence of agreement on the legal definition of trafficking across jurisdictions (federal, state, local). Definitional differences mean that coordination and cooperation across counties and states (and countries) in the investigation and prosecution of trafficking crimes can be more difficult. It also means that traffickers can evade prosecution by movement from one place to another, where the legal framework differs.
- Corruption in law enforcement, border control, and judicial systems, including situations in which law enforcement directly or indirectly benefits from trafficking. People may be re-exploited because of corruption, meaning that someone who was supposed to protect and prosecute after exit was aligned with exploiters [62].[15] Money obtained through illegal practices such as human trafficking may fuel other forms of illegality, such as money laundering, especially in the US [13, 63]. These factors weaken law enforcement and create conditions that facilitate other crimes.

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[15] See also the major motion picture *The Whistleblower* which depicts the circumstances surrounding the participation of a group of UN peacekeepers in a sex trafficking ring in post-war Bosnia in the 1990s.

- Feeble enforcement of the law and minimal prosecution of traffickers, with most traffickers facing charges for lesser crimes due to concern by some prosecutors that they cannot prove charges in court.[16] In the US, most trafficking suspects at the state level are not charged with a trafficking offense. In one study, fifty-three (53%) percent of the suspects charged with a state-level human trafficking offense had the case dismissed prior to adjudication, 13% went to trial, and 35% pleaded guilty to a human trafficking charge prior to trial [8]. Further, there is evidence of a decreased effort to prosecute suspects at the national level. Prosecutors brought criminal charges to a declining number of defendants in recent years [13]. This means that exploiters are more likely to engage in re-trafficking.
- Insufficient legal and other protections for trafficking victims whose cooperation is important in prosecution and may be required for restitution [20]. Most legal remedies for trafficking in the US focus on prosecution of traffickers, based on the idea that victims will be supported if traffickers face justice. There are few legal protections for victims, making them more vulnerable to re-trafficking. Such protections are conditioned on cooperation with law enforcement especially for foreign victims of trafficking in the US. Cooperation with law enforcement is an eligibility condition for granting continued presence in the United States [13].
- Immigration policies that fast-track deportation and reduce allotments for refugee resettlement, coupled with victims' fear of traffickers' retaliation, mean that trafficking is under reported and victims are not identified. Victims who are deported face the threat of re-trafficking when they return home [2]. Shifts in public opinion that accompany more restrictive immigration regimes mean that migrants will receive fewer services and be more exposed to prosecution [64].

Another serious challenge in the legal environment is the movement of trafficking to online platforms designed for the buying and selling of sex. With the enactment of FOSTA in 2017 (Fight Online Sex Trafficking Act), many of these platforms shifted operations overseas to avoid investigation and prosecution, sometimes to countries where prostitution is legal [65]. The platforms use opaque and complex payment systems and social media platforms such as Facebook and Instagram (among others), making pursuit of federal investigations even more challenging. Social media platforms are difficult to investigate because of varying levels of encryption among users, use of false identities, automatic deletion of content, and the increasing number of these platforms and their legitimate intent [65].

Cultural Factors Related to Discrimination. Discrimination against ethnic minorities means less protection for survivors [25]. Young girls who are members of minority groups in the US may be trafficked in plain sight, yet the practice appears

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[16] Exploiters are rarely prosecuted or convicted for the offense of human trafficking, meaning that it is a low-risk crime. Kara [3] estimates that 3–4% of traffickers in the US are prosecuted, while Melhman-Orozco [7] has suggested that only 0.01% of traffickers are convicted. This evidence suggests that the legal environment for human trafficking in the US does not represent a serious deterrent to the crime.

to be culturally tolerated [25].[17] For example, it has been noted that Native American and First Nation girls and women face a significant risk of trafficking; however, there is little empirical data on crimes against them [66]. One study showed that 26% of American Indian girls assessed at a harm reduction program in the Midwest had experienced sex trafficking as children [67]. A report by the National Human Resource Center found that Native American females were disproportionately involved in prostitution compared with their numbers in the general population [68]. Four federal agencies that investigate or prosecute trafficking cases in Indian country (i.e., FBI, ICE, US Attorney's Office, Bureau of Indian Affairs or BIA) record whether human trafficking occurred in their case management systems. However, ICE is not required to report whether a crime took place in Indian country and is not usually involved in such investigations. Except for BIA, the agencies are not required to collect or record the Native American status of victims in cases. This issue has been identified as an area for improvement [69]. We do not have data on re-trafficking rates for survivors who are members of minority groups in the US; however, we do know that members of foreign-born minority groups often are deported and may face re-trafficking when they return home.

The combined power of these factors means that traffickers often are not held accountable for their crimes, may believe they have practical impunity, and remain free of prosecution so that they can pursue re-trafficking of victims who escape. The case study of Marie L. shows that her romantic partner, who was a trafficker, went to prison for a non-trafficking related crime and, as far as we know, no one was prosecuted for trafficking Marie.

2.5   Economic and Social Costs of Re-Trafficking

Re-trafficking creates costs for survivors, their families and communities, and the larger public. Although there often is concern about spending tax dollars on efforts to support trafficking survivors due to constraints on public budgets and the criminalization of many victims [70–72], failure to prevent re-trafficking, protect survivors, and prosecute perpetrators could be more expensive in the long run. The state is unable to collect taxes from illegal trafficking-related businesses and practices, meaning that public budgets to prevent re-trafficking, protect survivors, and prosecute exploiters are reduced. At the same time, re-trafficking is costly to the public because of the severe nature and complexity of services required for people who have been re-exploited (e. g., law enforcement, health care, social services [56, 58]. The societal cost of trafficking in unknown, therefore the potential cost savings and societal benefit of supporting survivors and/or preventing trafficking are not well understood. Cockayne [34] summarizes the evidence linking modern slavery,

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[17] The docuseries *Surviving R Kelly* shows how Robert Kelly rose to fame as a US rock star while simultaneously engaging in sex trafficking with young African American girls. Kelly and/or his gang regularly went to Kenwood High School and local malls to find young girls and recruit them into his stable. His practices were well known but no one stopped him.

forced labor, and human trafficking to macro-level economic and social costs from a global perspective [13].

2.6   Why We Don't Know "What Works" for Survivors

There are very few studies focused on survivor outcomes. For example, Salami et al. [73] reviewed psychological services for trauma in the case of trafficking survivors and found no papers comparing the different components of the primary trauma treatment therapy strategies, or the potential usefulness of these treatments for human trafficking survivors. Lacking such evidence, psychological therapies for trafficking victims often are adapted from treatments for other groups, such as sexual abuse survivors, which may or may not be relevant to trafficking survivors. The case study showed that a combination of psychotherapy and spiritual resources made an important contribution to Marie's recovery, a point which has been made in the literature [6, 43]. However, there is no systematic empirical evidence on the effectiveness of combining specific services for re-trafficking survivors or preventing re-trafficking in the first place. We are particularly limited in understanding how specific groups of survivors respond to specific types of services. Only a few studies focus on outcomes of specific types of services at the individual level (exceptions noted below), so that it is difficult to identify "what works" for important subgroups such as persons belonging to ethnic minorities.

Other literature reviews have confirmed the scarcity of studies that evaluate survivor outcomes in the US [74]. A review of one annotated bibliography of more than 135 contemporary journal articles, reports, and books on human trafficking and commercial sexual exploitation in the US and Canada [75] found only 6 that included quantitative evidence on survivor outcomes (i.e., 18, 30, 76, 57, 77, 78). These six studies show: (1) the greater the number of needs met for a foreign-born adult survivor, the greater the chances of stabilization,[18] and the length of service had a highly significant impact on the odds of improvement [18]; (2) survivor youth who completed an Empowerment Social Services Program had improvements in 13 categories of outcomes across a broad range of indicators [30]; (3) a nurse practitioner-led intervention focused on runaway adolescents who had been sexually assaulted or exploited was effective in reducing symptoms of emotional distress, suicide ideation, suicide attempts, and self-injury over a 12-month period [76]; (4) court supervision programs for survivor youth help to increase links to mental health and substance abuse treatment, increase prescriptions for medication, and decrease citations, child welfare placements, and running away [57]; (5) participating in a survivor-mentor program helps to improve well-being, and reduce drug use, delinquent behavior, and exploitation [77]; and (6) a multi-session, psychoeducational group for girls "at disproportionate risk" of commercial sexual exploitation was effective in reducing risk and improving other conditions [78]. Clearly, service

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[18] Stabilization was defined as "prospects for long-term economic and social self-sufficiency," with case managers assessing stability for each month of service on a 1–5 scale.

programs for trafficking survivors can play a beneficial role in recovery and all of these outcomes in one way or another address enabling conditions for re-trafficking; however, these studies assess a wide range of different services and focus on different outcome measures, making it difficult to draw conclusions.

A quality evaluation should include measures of the outcome pre- and post-intervention and has an appropriate comparison group against which to compare results [79]. Davy's [79] literature review of 49 program evaluations in the field of human trafficking published between 2001 and 2015 found none that met these quality criteria, meaning that no conclusions could be drawn regarding the effectiveness of anti-trafficking programs aimed at prevention, protection, or prosecution.

The reason why there are so few empirical studies focused on outcomes assessment is the result of several serious challenges faced by such evaluations, summarized as follows:

- *Data inconsistencies*. Obtaining data to enable assessment of outcomes is challenging. Examining results over time may not be possible if baseline data is not available. Such data may be limited due to access issues at agencies and the hidden nature of the crime [74], meaning that any changes in outcomes over time are difficult to measure.
- *Process* versus *outcome metrics*. Federal agencies that act as sponsors for anti-trafficking programs often require program evaluation; however, such sponsors usually allow process measures to show impact: for example, number or type of persons served or implementation of program activities [79]. Outcome measures are different—they focus on effectiveness: for example, what happened to the survivor over time— and they are more difficult to obtain [80]. While both are important, outcomes evaluation is essential to survivor recovery, otherwise we don't know if a program is working for the intended recipients, which poses a risk for re-trafficking. A key issue is that there are no widely agreed-upon outcome metrics for trafficked persons. A wide range of different measures have been used to evaluate services for trafficking survivors [81], so it is difficult to compare results and draw conclusions.
- *Survivor perspective*. Survivors' points of view often are missing from studies pertaining to outcomes, frequently due to difficulty in connecting with survivors over time [79]. Understanding what survivors believe are critical outcomes for them is central to understanding what works overall. For example, when asked about their views of justice, survivors say it is an ability to "'move on' from trafficking experiences, achieve autonomy, and feel empowered by accomplishing self-defined goals" [54]—in other words, avoid re-trafficking.
- *Resource scarcity*. Organizations require special resources to assess survivor outcomes, such as staff with appropriate expertise and sufficient financial resources to support an evaluation program. If resources are scarce, organizations may not be able to identify outcomes, especially if survivors have departed prematurely or been re-victimized [30].

- *Multiple disincentives*. Barriers to outcomes research include client confidentiality and other ethical considerations, relatively low priority placed on research in the realm of service provision, and risk aversity within organizations: for example, concern about adverse consequences from research such as data showing that programs are not working [74, 79].

Empirical evidence on the impact of anti-trafficking programs and services on survivor recovery is needed; otherwise, we will not know if programs are effective in reducing vulnerability to re-trafficking. Federal agencies are taking steps to address the challenges of evaluation for anti-trafficking programs [74], but for the most part these efforts have not focused on survivor outcomes. Without data on outcomes, it is not possible to determine whether programs are helping survivors to recover or whether they are being re-trafficked, and it is also difficult to identify changes needed to improve outcomes or to make informed investment decisions.

2.7 Recommendations to Counter re-Trafficking

The fight against human trafficking is a complex and multi-dimensional problem, given that risk factors include childhood maltreatment, economic inequality and discrimination, legal and regulatory limitations, and long-standing social norms and institutions. These challenges will require concerted efforts across organizations, institutions, and countries over the long term. Here we recommend focused actions that can be taken to address targeted aspects of the re-trafficking problem, following the TVPA framework of prevention, protection, and prosecution.

2.7.1 Prevention of Re-Trafficking

Tracking survivors' re-integration. To prevent re-trafficking of survivors who have exited trafficking, we should develop secure, ethical, and effective means to track survivor outcomes following receipt of services. At present, many survivors who have received services "disappear" [30, 31], and service providers report that some were re-victimized. To mitigate against a return to the trafficking situation, we should have social and technological methods that monitor survivors' well-being over time to help ensure that they have been re-integrated and be able to respond appropriately should anyone disappear. Such an approach would allow us to develop databases on re-trafficking that could be used to improve our understanding of this crime in the United States.

Include re-trafficking in all training programs to fight trafficking. The importance of re-victimization is not always recognized by people who are at risk, the professionals who serve them, or the public. This subject should be included as a topic in all training programs in the field of human trafficking, together with methods to combat it. Re-trafficking should be included as a framing question in the design of all anti-trafficking training programs (e.g., Human Trafficking Initiative Research and Learning Agenda).

2.7.2   Protection of Survivors from Re-Trafficking

Find out "what works" from empirical research focused on outcomes aimed at reducing re-trafficking. Federal, state, and local authorities should require outcome measures for all anti-trafficking programs that receive funding. Widely agreed outcome measures should be developed with survivor input so that what is studied is relevant to future results. To do this, we should use the databases and methods that already exist. Many international, national, and state-level organizations have databases that include information on cases of human trafficking and commercial sexual exploitation [1, 12, 18, 22, 70, 82–84]. Some of these organizations have developed methods for identification of re-trafficking [1], and these methods could be adapted for use elsewhere. In these efforts it is imperative that survivor voices be placed at the center and prioritized. To build agency, we should ask survivors what they need to improve outcomes for them and try to ensure that those needs are met in anti-trafficking programs.

Identify, support, and promote federal, state, and local efforts to evaluate survivor re-trafficking outcomes. Resources should be made available for service organizations that are committed to quality evaluation of their programs for survivors. Communities of service organizations should be developed to encourage and support evaluation and to reduce risk from potential adverse consequences of research. Results from evaluation should be used to make program improvements in participating organizations. For example, the Freedom Greenlight Assessment Tool is a needs assessment framework in the field of human trafficking that centers survivors' input and priorities for their own recovery. Other examples of such projects should be identified and promoted widely.

Develop innovative technology to keep in contact with survivors during and after services. To counter the problem of survivor communication that thwarts current efforts to assess longer-term recovery, we should develop technologies that allow survivors to communicate securely with service organizations and vice versa. Research has shown that trafficking survivors are interested in using mobile technology to connect with service providers and to engage in an online community [85]. Survivors should be able to reach out to services when they need support to avoid re-trafficking, and services should develop unobtrusive methods to learn about survivors' well-being over longer periods of time. Further, survivors should be empowered through supportive credit and financial systems, so that they can better re-integrate into their communities (see Virtual Hearing—Ending Exploitation: How the Financial System Can Work to Dismantle the Business of Human Trafficking; US House Committee on Financial Services). Technology to support survivors should be implemented in the context of a social safety net that includes secure and supportive relationships.

2.7.3   Prosecution of Minors Involved in Commercial Sex Acts Should Not Happen

Provide alternatives to prosecution for minors involved in commercial sex acts. The TVPA holds that anyone who is involved in a commercial sex act and has not attained the age of 18 is a victim of "severe" sex trafficking and therefore protected

by federal law. Such persons should not be prosecuted as prostitutes if they are apprehended by law enforcement because minors cannot give consent to a commercial sex act. Yet empirical evidence shows that law enforcement personnel have broad discretion to determine whether minors are arrested and charged with prostitution, and they often will do so if the minor is perceived to be a delinquent rather than a victim, or there are no other options available [27, 44, 71, 82]. State-level Safe Harbor Laws which call for protection rather than prosecution of child victims of sex trafficking are helpful, but many states do not have such laws. Further, some states with these laws allow criminalization of minors prior to age 18 [86]. Charging a minor with prostitution has serious negative consequences for the individual because a police or criminal record can create conditions that leave the person few choices but to engage in the sex industry [15, 27], potentially becoming an adult prostitute [52]. One alternative is to place such minors in a court-supervised prostitution diversion program prior to adjudication as an alternative to the standard criminal justice process [87]. Such diversion programs have been shown to have beneficial outcomes for survivors [57]; however, their impact on re-trafficking is not clear. Diversion programs may not be an option until after the minor has been arrested, which does not fully address the problem [86]. All states should follow federal law and not criminalize minors under the age of 18 who have engaged in commercial sex acts.

3   Conclusion

Re-trafficking exemplifies the inadequacies of our current efforts to counter trafficking and support victims. It is one potential outcome of ineffective anti-trafficking policies and programs. To make progress on reducing the vulnerabilities and risks for human trafficking, we need to come to grips with the long-term effects of the actions we have taken, or not taken, to prevent re-trafficking, provide effective protection and assistance to victims to avoid re-trafficking, and prosecute those who are found to have exploited those victims over time. A focus on re-trafficking can strengthen all efforts to stand against the trafficking of human beings.

Discussion Questions
- Why is re-trafficking a significant crime from a public policy perspective?
- How does re-trafficking as a business strategy compare with retention strategies used in legal and ethical businesses?
- How do the vulnerability factors and interconnections in the sex industry and other employment sectors shape behavior to facilitate re-trafficking?
- What financial, human capital, and research resources are needed to combat re-trafficking in the US?

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Forced Labor: Promises Made, Promises Broken

Samantha Calvin, Nicole Newman, Kaitlyn N. Félix, and Callie Mersbergen

1   Introduction

Human trafficking affects all ages, genders, races, and sexual orientations. Today, some 27.6 million people around the globe are living without the freedom to choose how they live and work, according to the International Labor Organization (ILO), the International Organization for Migration (IOM), and Walk Free (2022). Each individual is affected in different ways and copes in a variety of different forms. Poverty, environmental degradation, structural racism, and discrimination, as well as gender and economic inequity, continue to be underlying drivers of human trafficking around the world [1]. Labor trafficking, a specific category of the broader scope of human trafficking, is when a person performs work through force, fraud, or coercion [2]. While labor trafficking occurs in a variety of communities around the world, forced labor also occurs domestically in the United States of America, too. These practices can be hidden in spaces or in plain sight. Health care providers, social workers, business owners, law enforcement, and other professions see victims differently. In order to create a safer and more effective society, ensuring that our community stays educated and informed on what victims' lives look like and how to identify them is essential.

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2   Content

2.1   Defining Labor Trafficking

Labor trafficking is a relatively under-studied and under-discussed form of human trafficking. It is defined as involuntary labor performed through the use of force, fraud, or coercion [2]. Victims are lured by false promises, jobs, and a better life. Labor traffickers will use violence, threats, debt bondage, and/or other forms of coercion to force individuals to work against their will. Labor trafficking is often thought of as an international issue affecting minorities and the poor. However, labor trafficking happens on a large scale both nationally and internationally and affects individuals of all nationalities, ages, genders, and socioeconomic statuses.

When discussing labor trafficking, it can be classified into two categories: privately imposed or state-imposed trafficking. Privately imposed trafficking accounts for 86% of labor trafficking and includes all forms of forced labor and sexual exploitation imposed by private individuals, groups, or companies [3]. Indicators of labor trafficking may manifest at any point during an employment or recruitment process. An individual may accept a job and be deceived into exploitative work or forced into a situation of debt bondage. An individual may be offered a job and charged a recruitment fee, then provided minuscule wages, often faced with a high cost of living or fees taken from their pay, making it virtually impossible for the individual to repay initial costs. Additionally, an individual may be coerced into work not agreed to at the time of recruitment or may be charged an extraneous termination fee if they attempt to leave. State-imposed labor trafficking accounts for the remaining 14% and includes labor imposed by state authorities onto their own citizens as a form of punishment for political opposition, strike involvement, or for economic development [3]. This can include forced prison labor, involuntary military service, and other involuntary civic obligations.

2.2   Domestic Labor Trafficking

Privately imposed labor trafficking is prevalent in domestic service, agriculture, factory, restaurant, and hotel industries. Victims are often required to work in inhumane conditions and with little pay. Within the United States, the highest number of cases have been recorded in New York, California, and Florida with large numbers involving immigrants [4]. It is a common misconception that labor trafficking heavily involves undocumented immigrants when research shows 71% of labor trafficking victims have entered the United States legally [5]. Immigrants are highly vulnerable to forced labor due to language barriers, psychological factors related to trauma, lack of social support systems, and unfamiliarity with visa laws [5].

2.3 Domestic Laws and Regulations

The United States prohibits goods produced through forced labor, and violators are subject to criminal and civil consequences. As of June 23, 2021, the United States has recognized 155 goods from 77 countries produced through forced labor [5]. The majority of these goods produced are raw materials including gold, cotton, bricks, and sugarcane [5]. In order to deter labor trafficking and help victims of forced labor, several laws have been put into place. The Trafficking Victims Protection Act of 2000 ensures victims of labor trafficking are eligible for services and benefits as refugees in the United States [2]. This includes cash assistance, food stamps, Medicaid, and Supplemental Security Income. Additionally, the Fair Labor Standards Act sets parameters for child labor within the United States. This law stipulates minimum age requirements for different work settings and prohibits hazardous work for children [6]. Although progress has been made to improve working conditions and limit labor trafficking within the United States, there are no current laws that regulate live-in domestic workers, and this profession has no protections related to overtime or health and safety regulations [4].

2.4 International Labor Trafficking

The prevalence of labor trafficking is increasing on a global scale. From 2016 to 2021, the number of individuals involved in labor trafficking rose by 9.3 million, with women and children accounting for nearly half of this growth [7]. Asia and Pacific countries account for the majority of labor trafficking cases (15.1 million), followed by Europe and Central Asia (4.1 million), Africa (3.8 million), the Americas (3.6 million), and Arab states (0.9 million) [7]. According to Walk Free, the regions with the highest levels of labor trafficking directly correlate with the prevalence of violent conflict and political unrest in those areas (2018). A prominent example can be seen in North Korea, where one in ten individuals are trapped in modern slavery, most of which is state-imposed for economic growth [8]. Similar to domestic labor trafficking, it is common for trafficking victims to be immigrants. Thailand's fishing industry is a prime example. Most often, male immigrants, commonly from Burma and Vietnam, become victims of labor trafficking through debt bondage while seeking employment [9]. Additionally, corrupt law enforcement officials are commonly paid off in Thailand to disregard any knowledge of these practices [9].

2.5 Child Labor Trafficking

Child labor trafficking is a concern both internationally and within the United States. It spans urban and rural areas alike, as well as all demographic characteristics. A 2021 report by the U.S. Department of Labor reported that there are currently 160 million children in child labor. Although not all of these cases are

incidents of trafficking, as child trafficking is distinguished from child labor, it provides a baseline for understanding how many children are currently involved in the labor force as a whole. According to a 2021 by the United Nations, one in every three victims of trafficking is a child; however, in low-income countries, it is closer to one in two. Most of these children are victims of forced labor [10].

With the passage and continued reauthorization of the TVPA, for children who experience sex trafficking, there does not need to be an element of force, fraud, or coercion present in order for it to be considered trafficking. However, the same is not true for labor trafficking. For victims under the age of 18, there must be an element of force, fraud, or coercion present in order for it to be classified as labor trafficking. This higher legal standard creates increased hardship for children to come forward as victims. Furthermore, because child employment is legal in many countries, it increases the difficulty for cases to be recognized and reported. The most common industries child labor trafficking occurs are within "…agriculture, domestic work health and beauty, restaurants/small businesses, gang-involved drug sales and gun carrying, traveling sales crews (e.g., magazine sales), and peddling/begging rings," [11].

Child labor trafficking victims do not come forward for many reasons. Child labor traffickers often use psychological manipulation against their victims [12]. These tactics can include threatening to harm the victim or victim's family, starving the victim, threatening to report the victim to immigration authorities, and restricting the victim to have outside contact [12]. In addition, there is often fear associated with reporting to the police due to fear of being deported or threats against their family [12]. It can also be difficult to identify child labor trafficking as indicators do not fit into one checklist. A few indicators can include children who reside in the custody of a non-family member and the child's work financially benefits them, or denying a child food, access to schooling, or rest [13].

Child labor trafficking has harmful consequences at all levels, regardless of where it occurs. Victims can be exposed to harsh environments, such as temperature extremes, fumes/dust, toxic chemicals, and flying debris [14]. Victims are at an increased risk for physical and mental health consequences because of these factors. Some of these health consequences include chronic respiratory issues, loss of limbs, sexually transmitted infections, gastrointestinal illnesses, exhaustion, malnutrition, child post-traumatic stress disorder, chronic anxiety, depression, and other mental health issues [15, 16].

Poverty continues to drive child labor on a global scale and there is still much work to be done. Although improvements have been made, the COVID-19 pandemic exposed further inequities and created new challenges. Twenty-eight countries' prohibitions of child trafficking do not meet international standards [15]. Furthermore, 16 countries do not have a minimum age for hazardous work that meets international standards. Specifically, the countries with no minimum age include Dominica, Eritrea, Grenada, Niue, Saint Vincent and the Grenadines, Solomon Islands, Tokelau, and Tonga [15]. Out of 131 countries, only 102 have a mechanism to assess civil penalties for child labor violations [15].

3 Labor Trafficking Major Industries

3.1 Agriculture

Although labor trafficking as a whole is not often well documented, forced labor tends to be more well documented in the agricultural industry than in others. Many countries have reported labor trafficking within agriculture including developed and developing countries. Agricultural work can include activities, such as harvesting crops, raising and tending to animals, and working in orchards or nurseries. In the U.S., victims can be citizens, but those often more at-risk center around immigration status, including legal permanent residents, undocumented immigrants, and individuals with temporary H-2A work visas [17]. Globally, children can be born into a labor trafficking situation, specifically within agricultural or domestic work, due to family debt bondage. Traffickers use debt bondage in other ways; for example, insisting the victim owes a bill for room, board, and/or food in order to continue victimization.

3.2 Hospitality

The hospitality industry can include food and beverage, lodging, recreation, travel and tourism, and events. Victims can be forced to work in this industry in management, guest services, janitorial services, or similar jobs. In one study of children trafficked for labor, based on cases filed from 2011 to 2018, 32.4% of the cases were within the hospitality industry [12]. Similar to other labor trafficking industries, victims can be trafficked to do different work other than what was contracted, recruited through false promises, and have exorbitant fees deducted from their paycheck for lodging and boarding.

3.3 Case Study: Labor Trafficking & Hospitality

Cristopher's lifelong dream was to leave his home country of the Philippines to work in the United States. When a labor recruiter approached him and offered him a job at a resort in the Appalachian Mountains, he paid them nearly $5000 for the opportunity. However, when he arrived in the U.S., he was told the job didn't exist. Instead, he was put on a bus to a Gulf state and traveled for 3 days with no money for food or water. He arrived in a small town and was told that he had to clean hotel rooms for 15–18 h per day at a significantly lower wage than he was originally promised. He was constantly monitored and threatened with deportation. Cristopher was worried for his family and unsure how he would repay his debt to his recruiter. Fortunately, Cristopher was able to escape. Once he did, he began working with Polaris to receive services, hoping to be able to continue working in the United States—this time legally. Through a special visa program for survivors of human trafficking, he's been able to stay here and has also been reunited with his family.

Case retrieved from Polaris—Human Trafficking & the Hotel Industry Fact Sheet: https://polarisproject.org/wp-content/uploads/2019/09/human-trafficking-hotel-industry-recommendations.pdf

3.4   Domestic Work

Domestic workers provide a range of services, in or for a private household, including cleaning, cooking, washing, and taking care of children and/or family members. Domestic workers may be employed full-time or part-time, by a single household or through a service provider. A domestic worker may also be working in a country of which she/he is not a citizen; therefore, this scenario is referred to as a "migrant domestic worker" [18]. The largest share of domestic workers comes from the Asia and Pacific region, accounting for almost a quarter of the world's female migrant domestic workers, preceded by Europe at 22% and the Arab States at 19% [18]. With over 75.6 million domestic workers worldwide, 76.2% are female, and less than a quarter of domestic workers are male [18].

Domestic workers account for approximately 24% of identified forced labor exploitation cases, the largest portion of the private forced labor sector, with an estimated 3.8 million victims [18, 19]. Despite the essential services provided, the forced labor of domestic workers is propagated by supply and demand systems that do protect the rights of workers, including inadequate or disregarded regulations, unpaid or withholding wages, abuse, extreme violence, and other injustices. With the conditions and circumstances brought on by the COVID-19 pandemic, it is believed that this number has increased significantly in recent years.

A common coercion method that often leads to forced labor situations arises from the recruitment and job placement of the worker. For example, workers may be inflicted with excessive job recruitment fees that result in large loans with extremely high-interest rates or significant salary deductions. These circumstances are often exacerbated when a migrant domestic worker is obligated to work for an employer for visa arrangements. Over 80% of domestic workers are in an "informal employment" agreement, which is twice the amount of informal employment amongst other industries [18]. The informal employment structure, as well as the common practice of "live-in" arrangements associated with domestic work, poses a challenge to enforcing proper employment standards and exacerbates the vulnerability to harassment, violence, restrictions of freedom of movement, and poor working and/or living conditions. A decrease in private live-in work arrangements has been noted recently, as domestic workers have attempted to gain greater independence and autonomy [20]. Similarly, an increase in charging households a rate per job instead of hourly rate, which is possible if the worker is self-employed, has been noted in attempts to avoid labor exploitation.

While progress has been made in the charge to protect the rights of domestic workers through legislation and the standardizing of their employment, many circumstances are not covered by labor and social security laws in the United States.

Furthermore, enforcing the law still prevails to be of great difficulty due to the private setting and informal nature of the occupation thus, heightening the vulnerability of this population of the workforce [18].

Case Example
Maria, from Honduras, worked for a family in their home country. Maria was told she would be cooking and cleaning for the family once they came to the United States. However, Maria ended up performing many more tasks for the household, including caring for the children. She worked 14–18 h a day, six and a half days a week while getting paid $7 an hour, with room and board deductions. The family refused to renew her legal status, and when Maria became pregnant, they did not allow her to use their address to receive temporary Medicaid assistance for pregnant women. The abusers expected her to maintain the same long work hours throughout her pregnancy.

3.5   Construction, Manufacturing, and Factories

The construction industry employs roughly 7% of the global workforce and uncovers 18% of the identified force labor exploitation cases, amounting to roughly 2.6 million people [18, 19]. Extortionate recruitment fees, false promises of self-employment opportunities, and other fraudulent recruitment practices are commonly seen in construction labor exploitation cases.

The manufacturing industry is responsible for 15–20% of identified forced labor exploitation cases, which amounts to nearly 3 million people [18]. Clothing, footwear, and electronics factories are most notable for excessive working hours, hazardous environments, coercion through high recruitment fees, illegal holdings of passports and documents, violence and abuse; however, many global supply chains exhibit the malpractices of labor exploitation.

3.6   Other Industries

There are many other industries that account for smaller percentages of total forced labor exploitation; nonetheless, these industries still result in hundreds of thousands of workers being forced into the labor trafficking sphere. With nearly a quarter-million adult workers encountering extreme isolation, hazardous work conditions, imperfect payment processes, and little to no regulatory oversight, these industries include mining, quarrying, massage parlors, salons, carnivals, traveling sales crews, and more. Additionally, reports have shown that over 200,000 adults annually are forced to beg on the streets or perform door-to-door sales [18]. It is important to also note that many of the forced labor cases lead to or incorporate an aspect of sexual exploitation, as well.

4   Victims of Labor Trafficking

Labor trafficking victims are not a homogeneous group of people. Victims include small children, teenagers, transgender individuals, men, and women. Some come in legally on work visas while others come in illegally. Additionally, women and children are trafficked more frequent in labor settings.

There are many vulnerabilities that are associated with labor trafficking. Labor traffickers prey on the marginalized US-born victims that are suffering from poverty, substance abuse, and mental illness [21]. There are many reasons that a person can be in a situation where labor trafficking is present and it can look different in every case. For one, a victim can feel compelled to stay with an employer even if they want to leave. It also means that they could be living and working in hazardous or overcrowded conditions. Also, many traffickers used threats, violence, or power to keep victims working in these areas. Debt bondage affected half of all victims of the private sector's forced labor [22]. Victims are frequently isolated in order to prevent them from seeking help. Their movements are restricted, and they are usually watched, escorted, or guarded by traffickers' associates. Traffickers may attempt to coach them to answer questions as well.

4.1   Demographics [1]

- 71% of trafficking victims around the world are women and girls and 29% are men and boys.
- 30.2 million victims (75%) are aged 18 or older, with the number of children under the age of 18 estimated at 10.1 million (25%).
- 16 million (64%) forced labor victims work in domestic work, construction, or agriculture.
- 4.8 million (19%) persons in forced sexual exploitation.
- 4 million (16%) persons in forced labor imposed by state authorities.

4.2   Effects of Trafficking on Victims

Victims of labor trafficking are subjected to physical abuse in the form of scars, headaches, hearing loss, cardiovascular/respiratory problems, and limb amputation due to various methods of forced labor. Victims of labor trafficking may also develop chronic back, vision, and respiratory problems as a result of working in hazardous conditions in agriculture, construction, or manufacturing [16]. Child labor trafficking victims are frequently malnourished to the point where they may never reach their full height, have poorly formed or rotting teeth, and may later experience reproductive problems [16].

Torture causes helplessness, shame and humiliation, shock, denial and disbelief, disorientation and confusion, and anxiety disorders such as post-traumatic stress disorder (PTSD), phobias, panic attacks, and depression [16]. Childhood abuse can

make a person more vulnerable to trafficking and other forms of re-victimization. The cumulative effect of pre-trafficking trauma exposures and trafficking-related trauma may result in significant negative psychological outcomes beyond PTSD. Complex trauma is a term that refers to chronic or cumulative trauma exposure, which often begins during critical developmental periods, as well as the consequences of this type of trauma exposure. Complex PTSD (C-PTSD) categories include affect regulation (dissociation, depersonalization), changes in self-perception (guilt, shame, low self-worth), somatization (headaches, stomach pain), changes in relationships with others (isolation, distrust), and altered systems of meaning (loss of faith, hopelessness) [16].

5   Traffickers

Each type of trafficker has a distinct strategy for recruiting and controlling victims, as well as concealing the crime. Through arrest record searches, Bracy et al. [21] investigated characteristics used by labor traffickers to recruit and control their migrant workers in and within the United States. Keeping victims isolated, sometimes physically and sometimes emotionally, is a key method of control in most labor trafficking situations.

The individual may also owe money to the employer or recruiter and have to work off that debt [1]. Researchers evaluated the methods used by labor traffickers, such as making false promises of a better life in the United States, promising money and wealth to recruit victims, and using debt bondage to entrap their victims by using perceived debt against the victim as a means to force work in order to pay off the debt [21]. This means that the trafficker can say when the debt is paid off, where many times those words are never said.

6   Solutions/Responses to Labor Trafficking

The solutions to trafficking are as diverse as the underlying issues and necessitate societal change. It will require governments, legislators, private sectors, and social/civil organizations to lay the groundwork for a system free of trafficking and exploitation. This can be accomplished through education and proper reporting channels.

Conscious consumption is one of the most effective ways for individuals to combat labor trafficking. Encourage companies to monitor labor practices in their supply chains and to conduct ethical and transparent business. Being aware of how purchases may contribute to the exploitation of others' labor is also essential [21]. It is important to teach people their rights as employees as well. This can include being paid at least a minimum wage, having a safe and healthy workplace, and keeping their passport and other identification documents in their possession. Employees also need to know that they can report abuse without retaliation, leave an abusive employment situation, and get help from unions, immigrant and labor rights groups, and other organizations.

7   Summary

Human trafficking happens all over the globe at a rate that is difficult to quantify. Labor trafficking affects individuals from all demographics and socioeconomic classes, but disproportionately affects immigrants and those of lower social classes. Trafficked children are forced to work in harsh conditions and endure inhumane living situations which negatively impact their health. People were made false promises, coerced into work, and often placed in situations of debt bondage when they attempted to make a safer and better life for their families. Although there are several laws in place and advocates working to help combat labor trafficking, research shows labor trafficking victimization continues to increase each year.

Discussion Questions
- Where does trafficking occur?
- What makes someone vulnerable to labor trafficking?
- What resources are available in your area to help human trafficking victims?
- What are some red flags to help identify labor trafficking victims?

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Human Trafficking in the Philippines: The Plight of Forced Labor

Mary Dioise M. Ramos

1   Introduction

Human trafficking is a global problem that harms adults and children in many shapes and sizes; however, cases are rampant in developing countries. In Asia, human trafficking is prevalent, where 56% of the world's population works in forced labor [1].

Human trafficking is heavily impelled by globalization and the lack of employment opportunities in developing countries. In the Philippines, human trafficking is a significant issue and has one of the world's highest victim populations, with an estimated 784,000 individuals living in modern slavery [1]. The Philippines is both a destination and a source or transit country for human trafficking. Traffickers are frequently successfully deceiving, coercing, and forcing victims into human trafficking, which can be related to the scarcity of regulation in East and Pacific Asian countries and inadequate law enforcement [2]. Human trafficking prevention initiatives were still in their infancy, and few actions and preventative plans were in place. Filipinos experience a unique set of circumstances that occasionally lead to exploitation and determining this connection calls for evidence-based data that is currently scarce [2].

The Republic Act No. 10364, known as the "Expanded Anti-Trafficking in Persons Act of 2012," refers to trafficking in persons as:

> *The recruitment, obtaining, hiring, providing, offering, transportation, transfer, maintaining, harboring, or receipt of persons with or without the victim's consent or knowledge, within or across national borders by means or threat, or use of force, or other forms of coercion, abduction, fraud, deception, abuse of power or position, taking advantage of the vulnerability of the person, or the giving or receiving of payments or benefits to achieve the*

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consent of a person having control over another person for exploitation which includes at a minimum, the exploitation or the prostitution of others or other forms of sexual exploitation, forced labor or services, slavery, servitude or the removal or sale of organs [3].

The Philippines now holds the Tier 1 ranking from the US Department of State, indicating that it satisfies all requirements for abolishing trafficking. This status acknowledges the enormous and ongoing progress made in the battle against human trafficking in the Philippines, but as the statistics demonstrate, it still poses a severe problem. Commercial exploitation of sexual minors, kidnapping within the home, and forced labor are the three most common types of human trafficking in the country. A substantial number of Filipino migrant workers are victims of human trafficking in various industries, including industrial fishing, shipping, construction, manufacturing, education, home health care, and agriculture, as well as in domestic work, janitorial service, and other hospitality-related jobs [4]. There is a strong presence of the sex tourism sector in the Philippines, including labor exporting, mail bride orders, and online pornography due to poverty, globalization, and foreign military presence [4].

2 Types of Forced Labor in the Philippines

Human traffickers in the Philippines prey on local and foreign victims. To maintain the Philippines' economy, outsourcing the workforce is necessary. Many migrant workers are from tiny towns and rural areas where the media has made the migrant job seem enticing. People are motivated and inspired to migrate to other countries when they hear about the success of family members or acquaintances who have already done so [5]. To exploit migrant workers in sex and labor trafficking, traffickers attract credulous Filipinos through illegal hiring practices such as deceit, hidden costs, and the fabrication of fake travel documents, overseas employment certificates, and contracts, frequently in collaboration with local networks and enablers and increasingly utilizing social media websites and other digital platforms [6].

2.1 Sex Tourism and Sex Trafficking

The term "sex tourism" refers to traveling to engage in sexual activity, specifically with prostitutes [7]. Human trafficking, which involves trafficking for sexual activities, has been an issue for decades. It includes the recruitment, harboring, transportation, provision, or obtaining of a person for a commercial sex act [8]. In the Philippines, sex workers and prostitutes are considered victims of poverty and social change, which is why they were rescued rather than arrested. Another reason is that, according to research, there are no specific criteria to help determine whether an activity falls under sex tourism, as they are tough to locate. Scientific research

and statistics on sex tourism are limited because it remains a relatively unknown and unidentified behavior to the broader population, academia, and helping professionals [9]. When it relates to forced labor within the commercial sex industry, regrettably, women and girls account for 99 percent of victims, and 21 percent of these are children [10].

Even though sex trafficking is prohibited in the Philippines, prostitutes are easily accessible in nightclubs and massage parlors [1]. In the early 1960s, prostitution began in Clark Air Base in Angeles City due to the Vietnam War. In the 1970s, at least 30 girlie bars on the main street of Olongapo City catered to U.S. Navy personnel stationed at Subic Naval base [4]. The city earned the nickname "Sin City." The closure of U.S. bases in these two locations did not significantly alter the situation; it merely changed the clientele. Fields Avenue, in the vicinity of Clark, Angeles, and Pampanga, grew as a hub of the sex tourism industry, followed by different areas and parts of the Philippines, falling under the entertainment and hospitality industries [5].

Every year, millions of children and women are trafficked for sexual exploitation around the globe [2]. Traffickers frequently exploit vulnerable women by enticing them with money and a legitimate job. Instead, they are compelled to sell their bodies repeatedly. In some instances, human traffickers deceive families into surrendering young girls. When families disagree, they are frequently kidnapped and sold in the sex trade for a high price [6].

Most victims of human trafficking come from impoverished backgrounds and are more likely to accept risky job offers promising easy money [11]. After becoming the victim of human trafficking, violence becomes a constant threat [12]. Adults and children forced into the commercial sex trade seem to be especially susceptible to physical assault from owners, traffickers, recruiters, and consumers, in addition to serial rape. Although sex trafficking is a global issue, it is most ubiquitous in countries like the Philippines, with under-resourced justice systems, where perpetrators know they can avoid significant consequences while making a substantial profit [13].

Traffickers exploit Chinese and other Asian women for commercial sex near off-shore gaming operations that cater to Chinese nationals; however, the pandemic caused a mass exodus of Chinese citizens engaged in offshore gaming operations resulting in a decline in reports of sex trafficking within this community [14]. In tourist places with a high demand for commercial sex acts, such as Boracay, Angeles City, Olongapo, Puerto Galera, and Surigao, sex trafficking also happens [15]. Even though the availability of child sex trafficking victims in commercial operations has decreased in some urban areas, child sex trafficking remains a prevalent problem, generally assisted by taxi drivers aware of concealed sites. Numerous sex tourists have been convicted or implicated as sexual offenders or pedophiles in their home countries. Most sex tourists in the Philippines come from Australia, Japan, New Zealand, the United Kingdom, and the United States; however, reports from Canada, Morocco, Iraq, and Denmark are rising [15, 16]. Filipino men also get sexual services from victims of human trafficking [17, 18].

2.2   Exploitation of Children

Non-government organizations and government agencies continue to record situations and cases in which family members exchange children with employers for housework or sex trafficking. In contrast, hundreds of thousands of children who sell goods on the street or beg are reportedly at risk of abuse and trafficking [19]. A survey reveals that more than 50,000 minors and young children work as domestic servants in the Philippines, including roughly 5000 younger than 15 years old [20]. Many working children were subjected to hazardous working circumstances, such as mines, factories, and farms, and were likely compelled to perform manual labor.

Indigenous peoples and many of Mindanao's approximately 340,000 internally displaced people are vulnerable to human trafficking, primarily through fake employment offers [21]. In the Philippines, armed groups such as the New People's Army, Maute Group, Moro National Liberation Front, Abu Sayyaf Group, and Bangsamoro Islamic Freedom Fighters recruit and utilize children for combat and non-combat tasks, frequently under coercion as soldiers [22].

According to law enforcement data, the Philippines is one of the largest recorded sources of online sexual exploitation of children, in which traffickers exploit children individually and in groups during live internet broadcasts in exchange for compensation wired through a money transfer agency primarily by individuals from another country, such as the United States, Australia, Canada, and the United Kingdom [23]. The majority of male and female juvenile victims are under 12 years old. Most traffickers are parents or close relatives operating out of private dwellings or small Internet cafes [23].

With technological advancement, the sexual exploitation of children online has dramatically increased. Abusers with internet access from anywhere worldwide can now live stream the sexual abuse of children concealed in private residences or computer shops [24]. The Philippines continued to aid U.S. law enforcement agencies in transferring Americans who sexually abused children into U.S. custody. During the COVID-19 pandemic, the number of reported child sexual assaults committed online climbed by around 265% [25]. Due to the economic repercussions of the epidemic and the increased amount of time children spend at home, many families are compelling their children to engage in online sexual exploitation [26].

The issue of child sexual abuse by foreign nationals in the Philippines is a growing concern. While the exact number of cases is difficult to determine, the Philippine government and media outlets have reported instances of foreign child sexual predators in the country. Many of these perpetrators come from countries in Europe and Asia and hold positions of power in business and politics [27]. The problem is further complicated by the lack of resources and coordination between government agencies, making it difficult to investigate and prosecute cases effectively. The Philippine National Police's Women and Children Protection Center reported investigating over 500 issues of online sexual exploitation of children, with over half of the cases involving foreign nationals [28]. In response to this growing problem, the Philippine government has taken steps to increase penalties for child sexual abuse and improve the tracking of cases [29]. Despite these efforts, the problem of foreign child sexual abuse

in the Philippines remains a significant challenge. To effectively address this issue, there is a need for continued efforts by the Philippine government, international organizations, and civil society groups to improve the investigation and prosecution of cases and increase public awareness and education.

2.3   Exploitation of Women

Evidence supports the claim that female migrant workers face more incredible hardships and dangers than their male counterparts. Migrant women often face double the vulnerability of women and migrants, which can result in greater poverty, exploitation, and abuse [30]. In addition, UNODC has reported that women and girls make up the majority of victims of trafficking persons and that they are often targeted for exploitation due to gender-based discrimination and inequality [8]. The exploitation of Filipino migrant women is a well-documented issue. In a study by the Asian Pacific Resource and Research Centre for Women (ARROW), it was found that Filipino women migrant workers are often subjected to various forms of abuse, including sexual harassment and exploitation, due to the gender-based stereotypes and discrimination they face in their host countries [31]. In terms of media representation, research has shown that negative stereotypes of migrant women in the media can contribute to their marginalization and vulnerability to exploitation. A study by the Global Alliance Against Traffic in Women (GAATW) found that media representation of migrant women often reinforces harmful stereotypes and contributes to their exploitation, as it reinforces negative perceptions of them as domestic helpers, enslaved people, and sex objects [32]. It is essential to address these issues and provide support and protection for female migrant workers to prevent and mitigate their exploitation and abuse.

The number of female migrant workers is on the rise globally, with an estimated 47% of all international migrants being women [30]. Studies have shown that female migrants are often more vulnerable to abuse and exploitation than their male counterparts [33]. Filipino migrant women are at high risk for abuse and isolation due to their marginalization and discrimination based on gender and race in host countries [34]. These women are often forced to take on low-paying, labor-intensive jobs, making them easy targets for exploitation by traffickers. Traffickers frequently use false promises of work, marriage, education, or escape from home countries to entice women into trafficking situations. Some women may also be deceived into accepting falsely advertised positions, resulting in domestic slavery, labor exploitation, or sexual exploitation [32]. In addition to trafficking, female migrants may experience sexual harassment, rape, and physical abuse, particularly in the workplace [33]. The negative portrayal of female migrants in the media as domestic helpers, enslaved people, and sexual objects reflects a broader negative social perception and may contribute to their sexual exploitation [34].

The issue of mail-order brides and human trafficking within the industry is complex and controversial. It has been noted that human trafficking is often legitimized under the guise of marriage in the mail-order bride industry [35]. This unique form

of exploitation is facilitated by the addition of marriage, which can prevent Filipino families from recognizing the practice as a form of exploitation or trafficking [36]. Once these individuals are moved to the United States, they may become susceptible to the will and power of their consumer spouse [37]. Some international marriage brokerages do not attempt to safeguard these individuals, instead embracing the notion that they are "selling" submissive husband-pleasers [35]. As a result of lacking the necessary skills, support network, and employment opportunities to live independently in the United States, many individuals in this situation may be unable to sustain themselves [37]. The threat of deportation can also trap these individuals in hostile environments, leading to power imbalances in the relationship [36]. Data suggests that the low divorce rate among mail-order bride marriages may be due to a lack of understanding of immigrant rights in abusive relationships [35]. However, it is also noted that individuals in these marriages may tolerate abuse out of fear of losing their American "dream" lifestyle and returning to a life of poverty [37].

The urge to escape impoverishment and sociopolitical pressures considerably enhances the possibility that a Filipino individual will participate in the mail-order bride process. The American dream that many aspired to attain for themselves and their families does not correspond with the realities. Much of the abuse that these immigrants undergo occurs behind the surface of a respectable and legally binding marriage. Still, the United States must work closely with nations worldwide to monitor this perilous legitimization of sex, human, and labor trafficking.

2.4   Exploitation of Migrant Workers

According to the Philippine Statistics Authority (PSA), overseas labor migration has been a significant source of foreign currency remittances, contributing to the country's economic growth [38]. An ILO report highlights OFWs' challenges regarding poor working conditions and limited protection under labor laws in receiving countries [39]. A study by the Commission on Filipinos Overseas (CFO) found that many OFWs, particularly those in domestic work, experience exploitation and abuse due to long working hours, low wages, and limited social protections [40]. The COVID-19 pandemic has significantly impacted the migration of Filipino workers, with many losing their jobs and facing difficulties returning to their home countries [41]. A research article published in the Journal of International Migration and Integration (JIMI) provides evidence of the negative impact of the COVID-19 pandemic on the health, employment, and well-being of OFWs and their families [42].

The Philippine economy is heavily dependent on immigrants and Overseas Filipino Workers (OFWs), with an estimated 1.77 million OFWs out of a total population of 109 million in the Philippines [43]. Despite their significant contribution to the Philippine economy, many OFWs often lack respect, assistance, and legal protection from their employers and government officials [44]. As a result, these workers are vulnerable to exploitation, mistreatment, and trafficking [45].

Traffickers usually target OFWs because of their unique circumstances. Typically, OFWs are separated from their families for extended periods, causing them to become isolated and penniless. Then, many are recruited with false promises of well-compensated positions and improved working conditions. Once they reach their destination, they are often subjected to sexual exploitation or forced labor [46]. Furthermore, OFWs may be in debt after paying recruitment costs, necessitating that they work under challenging conditions to repay their debts.

2.4.1 Maritime Workers

Large maritime staffing agencies provide an essential service by providing crew members for vessels ranging from small fishing boats to enormous container ships and dealing with everything, including paychecks to airline tickets. Even though many businesses work responsibly, the industry is poorly regulated. The few regulations need to be more comprehensive to apply to fishing vessels, where the worst violations typically occur, and enforcement needs to be improved.

Verite (2021) interviewed Filipino migrant fishers in Taiwan and found significant evidence of unethical recruitment practices and reports of poor working and living conditions, including some indicators of forced labor [47]. Their findings included: (1) charging of high recruitment fees, in contravention of the law, (2) recruitment-linked debt, (3) lack of transparency in the recruitment process, (4) passport withholding, (5) wage withholding and forced savings, (6) lack of transparency in wage payment, (7) excessive work hours, (8) poor living conditions, (9) barriers to contract termination, and (10) lack of access to grievance and remedy.

2.4.2 Construction Workers

The US Department of Labor recovers over $202,000 in back wages among Filipino construction workers in Guam. There were 43 workers who traveled from the Philippines as part of a federal temporary work visa program. Their employer intentionally withheld their overtime pay while working at multiple construction sites in Guam. Investigators determined that the general contractor failed to pay overtime to employees who worked more than 40 h per week. In addition, the division assessed the employer $29,971 in civil penalties for the intentional nature of the violations discovered.

Investigators discovered that the contractor paid employees by check for the first 40 h worked each week and documented these payouts in their payroll records. However, Asian Construction Development Corporation paid cash at straight-time rates for any overtime hours worked by its employees and managed to keep a separate, undeclared record of these hours. In this instance, the laborers left their home countries to work for this employer and deserved to be paid every legal dollar they earned [48].

2.4.3 Healthcare Workers

While the United States has relied on Filipino healthcare professionals to treat its citizens, American health institutions have sometimes treated their Filipino employees with a different degree of respect. Since the 1960s, the U.S. medical

system has employed Filipino nurses in understaffed hospitals, particularly during health crises.

Recent studies have shown that foreign-educated nurses, including those from the Philippines, continue to face challenges and exploitation in the U.S. healthcare industry. For example, a 2021 study by The National Domestic Workers Alliance and the University of California, Los Angeles Center for Health Policy Research found that Filipino nurses, among other immigrant healthcare workers, experience high rates of wage theft, and hazardous working conditions. These workers are also often subjected to additional barriers to accessing health insurance and workers' compensation [49]. Furthermore, the COVID-19 pandemic has exacerbated existing issues for Filipino healthcare workers in the U.S., with many facing discrimination, substandard working conditions, and inadequate support and resources [50]. The pandemic has also highlighted the disparities in treatment and support for immigrant healthcare workers compared to their U.S.-born counterparts [50].

A long history of wage discrimination and exploitation continues to afflict Filipino nurses today. Fraudulent recruiting agencies and even some American healthcare facilities enticed Filipino nurses with empty promises of opportunities or higher pay. Then they forced them to work long hours in unsafe conditions, sometimes under the threat of visa revocation. 200 Filipino nurses won a human trafficking lawsuit in 2019, alleging that the operators of a group of New York nursing homes did not pay them the wages specified in their contracts and forced them to work in unsafe conditions with inadequate staffing [51].

Numerous American employers continue to modify their job offers to include conditions, such as noncompete clauses and forced arbitration, that make it nearly impossible to switch to a better workplace or hold management accountable for mistakes [52]. They recruit foreign workers who frequently lack the legal protections afforded to U.S. citizens, whether in theory or practice [53]. They argue that they are not liable for unfair treatment of their subcontracted workers by the companies that employ them [54]. In addition, they charge employees for essential equipment or training, establishing a debt cycle that tends to grow in tandem with low wages [52].

2.4.4 Domestic Workers

According to anecdotal evidence, surveys, focus group discussions, and other sources, labor violations and other mistreatment are prevalent in the domestic work sector [55]. Due to a lack of understanding of the laws governing domestic work, some violations occur [56]. However, some mistreatment manifests discriminatory attitudes toward domestic workers [55]. This prejudice occurs along racial, sexual identity, and socioeconomic lines [57]. Domestic workers are frequently of a different racial, linguistic, cultural, and even religious background than their employers [55]. Most domestic workers are women, who are expected to occupy subservient roles within the family and the community [57].

The media reported in January 2021 that human traffickers falsely recruited hundreds of Filipino domestic workers for employment in the United Arab Emirates but brought them to Damascus to conduct forced domestic labor. Using tourist visas available in Middle Eastern countries where many Filipinos work in-home service

jobs, traffickers recruit children from rural areas of Mindanao and other regions, then sell them to exploitation-prone employers [58]. The inequities in socioeconomic status between employers and domestic workers also influence the attitudes of many employers toward their domestic workers [59]. Domestic workers frequently develop low self-esteem due to mistreatment on the job, which prevents them from deciding to leave abusive employers or reporting rights violations [60].

According to recent studies, the issue of forced labor and domestic worker trafficking often goes unreported due to a lack of awareness and understanding among both domestic workers and the public [61]. The hidden and isolated nature of domestic work and the frequent use of illegal migration channels make it difficult for law enforcement and non-governmental organizations to reach and assist these victims [62]. As a result, there is limited data available on the prevalence of forced labor and domestic worker trafficking, making it a challenge to address and solve the issue accurately.

2.4.5 Hospitality-Related Workers

Hotels, motels, resorts, and casinos have been identified as places where human trafficking occurs [63]. Potential victims of labor trafficking may work as front-desk personnel, food service employees, and, most commonly, housekeepers [64]. Most potential victims of labor trafficking in hotels entered the country on a temporary work visa [65]. They are recruited abroad with the promise of lucrative contracts and favorable working conditions [64]. Many incur debt to pay the often fraudulent and excessive recruitment fees [63]. They encounter oppressive and unethical working conditions, including inhumane living conditions, low or no pay, and verbal, physical, and sexual abuse when they arrive [64]. However, due to their legal status, leaving is not an option for most people [65].

In addition, traffickers utilize student and intern exchange programs [66], bogus childcare employment [67], and porous maritime borders [68] to circumvent the Philippine government and target national regulatory frameworks for foreign labor and evade detection. Human traffickers exploit Filipinos already working abroad by presenting them with fake employment opportunities [66].

2.5   How Covid Affected Forced Labor in the Philippines

The Covid-19 pandemic has revealed and exacerbated global inequity, particularly for marginalized and vulnerable people. As a result of the crisis, risk factors for human trafficking, such as family abuse, homelessness, interrupted schooling, job loss, and financial insecurity, have grown. According to preliminary evidence, the Covid-19 pandemic has significantly impacted services for survivors of human trafficking and worsened working circumstances for people trafficking. It has also introduced new difficulties in identifying victims of human trafficking [69].

Despite a strict lockdown in place for most of 2020, the Covid-19 pandemic continues to wreak havoc on nations, causing economic ruin and long-lasting disturbances to people's lives. The financial repercussions of the pandemic in the

Philippines include severe unemployment and job loss, resulting in continued revenue loss. Due to the economic collapse, many individuals cannot pay their rent or buy adequate food to support themselves and their families. This situation is especially grave for survivors of human trafficking, the majority of whom are already impoverished. Many low-income individuals fear being evicted from their homes despite specific eviction bans. Due to their financial predicament, these individuals may fall victim to predatory lenders, a problem observed among survivors in neighboring countries such as Cambodia. It has plagued low-income, vulnerable communities in the Philippines during previous disasters such as Typhoon Haiyan. Due to their inability to repay the loans, such agreements may place vulnerable individuals in risky situations. The pandemic has exacerbated the exploitation of migrant workers by their employers, who force them to work for little to no pay and threaten to dismiss them if they refuse [70].

The Covid-19 pandemic has seriously affected mental health, particularly among survivors of human trafficking. Anxiety, depression, self-harm, and PTSD are already prevalent among these individuals and have been further exacerbated by the crisis. Domestic violence has also increased due to survivors' increased isolation and financial insecurity [71]. A May 2020 survey conducted by the OSCE Office for Democratic Institutions and Human Rights (ODIHR) and United Nations Women (UN Women) found that 60% of men and 70% of women among 94 human trafficking survivors from 40 countries, including the Philippines, reported that the uncertainty and isolation caused by the pandemic had significantly or somewhat worsened their mental health [71]. Some survivors said that their depression, anxiety, or PTSD had returned due to the lockdown, which evoked memories of previous restrictions on freedom of movement and seclusion [71].

The pandemic has dramatically diminished the capacity of civil society organizations to aid survivors of human trafficking [72]. According to a UN Women and ODIHR survey, anti-trafficking response organizations were concerned about their ability to weather the crisis [73]. Organizations feared they would be forced to close their emergency shelters for survivors, raising the risk of homelessness and further exploitation of survivors as the outbreak redirected attention and resources from anti-trafficking activities to the response to the Covid-19 virus [74]. In addition, despite having sufficient space, many shelters, such as those in the Philippines, have been obliged to turn away survivors because of social distancing regulations. Due to the excessive number of Covid-19 instances, services like therapy and counseling have been deprioritized, making it impossible for survivors to obtain prompt mental health treatment [75].

As more effort and resources are devoted to halting the spread of COVID-19, more victims are left at the mercy of their traffickers and exploiters and remain unidentified. Due to the pandemic's catastrophic impacts on health care, housing, and mental health services, however, identified victims of trafficking are left without crucial assistance to rehabilitate and achieve socioeconomic (re)integration and are at a higher risk of being re-trafficked [76]. According to studies, victims forced to remain with their abusers were subjected to harsher degrees of violence and abuse.

The same holds true for child abuse victims, especially if their abusers are also their caregivers and their home situation is dangerous.

3   Conclusion

Forced labor is a severe problem in the Philippines that affects many vulnerable individuals, including women and children. The Philippine government has taken various measures to combat forced labor. For instance, it has enacted laws prohibiting and punishing forced labor. The government has also established several agencies and programs to enforce these laws and regulations, such as the Department of Labor and Employment (DOLE), which is charged with enforcing labor laws and protecting workers' rights. In addition, the government has established several programs to support and assist those affected by forced labor, such as the DOLE's Kabuhayan Program, which offers training and financial aid to help individuals find better jobs and improve their economic circumstances.

In addition to the government, several non-governmental organizations (NGOs) and international organizations are addressing forced labor in the Philippines. These organizations frequently provide legal and medical assistance, education, and training to help victims of forced labor find better jobs and improve their economic circumstances. For instance, the International Labor Organization (ILO) has been working in the Philippines to combat forced labor by providing technical assistance to the government and non-governmental organizations (NGOs) and raising public awareness about the issue. NGOs work to combat forced labor by providing legal aid and help and raising public awareness about the subject. In addition, they conduct investigations and rescue operations and provide rehabilitation and reintegration services for victims of forced labor. There is still much work to be done to address this problem and ensure that all individuals in the Philippines are protected from forced labor and have access to the support and assistance they need to improve their economic situation and seek justice for the abuse they have suffered.

Discussion Questions
- What are the root causes of forced labor in the Philippines, and how can they be addressed?
- How does forced labor in the Philippines affect different groups of people, such as women, children, and migrant workers?
- What are the major industries where forced labor is prevalent in the Philippines, and how can these industries be held accountable for their practices?
- How does forced labor contribute to the overall economic development of the Philippines, and what impact does it have on the country's global reputation?
- What steps can be taken at the local, national, and international levels to prevent and combat forced labor in the Philippines, and what role can individuals play in this effort?

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Global Health Disparities and Trafficking of Human Beings for the Purpose of Organ Removal

Ana Manzano

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1   Introduction

Human organ transplantation has the potential to be the best treatment available for several chronic and terminal illnesses. Scientific advances in transplantation have progressed rapidly from the early twentieth century: from corneas in 1905 to kidneys in the 1950s to the heart in 1967, followed by liver, lungs, pancreas, intestine, and a full facial transplant in 2010, and the womb in 2014. However, these innovative therapeutic advances, unlike many others, depend on the availability of donated human organs. These organs can be retrieved from deceased bodies (deceased organ donation) or living bodies (living organ donation), although organs from living donors are more likely to have the best post-transplant results. At the time of writing, living organ donation is feasible with two organs, kidneys and liver. Since its conception, the demand for transplants has outstripped the availability and supply of human organs, not only because this type of treatment is dependent on the altruism of other human beings but because this outstanding medical innovation is expensive and riddled with medical and institutional complexities [1]. Demand is also endless as more organs are added to the list, people live longer and these continuous technological advancements mean that older age is no longer a barrier for transplantation.

There are many complex reasons why people sell and buy human organs and how global criminal networks benefit from this commercialization. These reasons are often simplified with a narrative of colluding desperations: the financial desperation of those in need of money, and the clinical desperation of those in need of better health. Of the people trafficked worldwide every year, some will be trafficked for the purpose of removing their organs to sell for profit. Most commonly,

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people are transferred from their place of residence to another location (region/ country), where one of their organs (e.g., a kidney or a portion of their liver) is removed and transplanted into another person. Many people also sell their organs domestically and this is often referred to as organ trade/sales [2]. The reasons for this commercialization are related to the history of organ transplantation, engrained with ethical issues from its origins. These can be broadly summarized as ethical issues related to the use of human subjects and cadavers for medical experimentation, and those associated with the shortage of available organs for transplantation. Interestingly, the first transplantations were conducted shortly after the Nuremberg code (1949)- a set of ethical research principles for human experimentation to prevent the Second World War research atrocities from being repeated- was signed. The code promoted ten standards of research with humans, stating that explicit voluntary consent from patients must be required for human experimentation. Later in 1964, the Declaration of Helsinki, set up by the World Medical Association, described voluntary consent as absolutely essential [3].

It is hard to establish how and when patients who needed or preferred living human organs for their transplants started to pay healthy people for their kidneys. Some quote India in the 1980s [4, 5], where poor citizens sold their kidneys to mainly foreign patients from regions such as the Middle East, Malaysia, and Singapore [6]. In 1987, as kidney transplants became part of routine treatments in many Western countries, the World Health Organization (WHO) declared the organ trade illegal because it contravenes the Universal Declaration of Human Rights [7]. This WHO guiding principles document was followed by a number of supranational regulatory instruments that flourished at the beginning of the twenty-first century, criminalizing the trade of organs including the Declaration of Istanbul on Organ Trafficking and Transplant Tourism [8]. The United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children—also known as The Palermo Protocol [9]—in Article 3 defines and criminalizes trafficking in human beings for the purpose of organ removal (THBOR) by specifically mentioning it when referring to "the removal of organs" as one of the "purposes of exploitation" of trafficking in persons.

This chapter aims to examine the relationship between inequitable access to health care in diverse populations across the globe. This generates disparities in health outcomes and has the potential to encourage THBOR. This chapter will examine the intersectional relationship between various health disparities and the organ trade demonstrating how they are closely entangled with motivation to buy and sell organs. Firstly, general global health disparities will be discussed and since kidneys are more likely to be sold for profit than other organs, the particularities of chronic kidney disease will be examined. Secondly, wealth, national transplant systems, ethnicity, and gender disparities in organ donation will be related to organ trafficking. Finally, the effects of the COVID-19 pandemic will be examined, showing how this aggravated these intersectional disparities because of the direct impact on transplantation capabilities worldwide and increased vulnerability of populations at risk of trafficking.

2   Health Disparities in an Unequal World

Scholars often thrive on disagreements, and disputation is a key mechanism for science to advance. There is, however, agreement in the scientific literature that the place where people live affects their health. Rich countries have better health outcomes than poor countries, and habitants of poorer areas within rich countries have poorer health outcomes than those living in wealthier neighborhoods. The environment that individuals live in, their social and economic conditions, impacts their health and mortality. Health disparities are about these differences in health status, also referred to by some as health inequalities or the health gap [10, 11]. Academic disagreements on health disparities concentrate on the reasons why this gap occurs. Some [10] argue that low socioeconomic status and the living conditions of poor people generate poor health (social determinants of health). Others [12], however, favor individual explanations that blame decreased health outcomes on lack of individual responsibility, or low health literacy, which means that people make the "wrong" health and lifestyle choices.

These diverse views on the causes of health disparities reflect directly in public health improvement policy solutions, which tend to focus on individual responsibility, for example, educating the poor on the benefits of healthy diets and exercise, or the health risks associated with alcohol, drugs, and tobacco consumption. There are, however, differences in the health risks that people are exposed to according to their wealth and these are reflected in the opportunities they have to remain healthy. For instance, clean water and sewage provision are fundamental infrastructures for health. However, in many countries, policymakers promote the use of individual filtration and bottled water to access clean water, instead of investing in more expensive structural policy solutions such as water chlorination, filtration, and improved sewer systems.

Geographies, biology, and organizational contexts of organ donation are crucial determinants of rates of donation and transplantation. Although it seems that bodies and their inner parts are interchangeable, only some bodies and some parts are interchangeable in some parts of some countries. Patterns of access to organ donation also match patterns of inequality in society more broadly. In organ transplantation and trafficking, these are often studied in terms of demographic categories (socioeconomic position, gender, ethnicity, country of origin of buyers and sellers); but in the last decade, many scholars [13] have highlighted the relevance of an intersectional perspective in health inequalities. That is, a focus on "social dynamics rather than social categories" [14], which is based on the impact of a conglomeration of unequal "systems of race, social class, gender, sexuality, ethnicity, nation and age" that construct social organizations [15] such as legal and illegal organ transplantation systems. This means that the places where people are born, the health systems available to them, and the lived experiences they have according to their demographic characteristics entangle in complex and dynamic forms to generate victims and perpetrators in organ trade networks. In the next section, I untangle some of these intersections to further understand this phenomenon from a public health, rather than a criminology, perspective.

3 Health Disparities in Kidney Disease and Transplantation Programs

To be able to understand the kidney organ trade, it is important to examine the impact of health disparities in chronic kidney disease. There are several types of kidney disease, often broadly typified as short-term or acute kidney injury (AKI) and chronic kidney disease (CKD). With CKD, the kidney is damaged permanently and over time it will stop working. When tests show the kidneys are getting worse, people are diagnosed with progressive CKD; when their kidneys function at less than 10–15% of their normal rate, this is called Established Renal Failure (ERF) (or variations thereof) [16]. At this late stage of disease progression, there are treatments that can do some of the work of the kidneys (renal replacement therapy) or treatments that manage the symptoms of ERF (conservative care) with medication and diet but since these do not replace kidney function, eventually, kidney failure leads to death. At the time of writing, the two main replacement therapies are kidney transplantation and dialysis, which removes toxins and excess water from the body using artificial filters, doing about 10% of the work of both kidneys [16].

The burden, diagnosis, treatment, and prognosis of kidney disease vary substantially across the world, although, the availability of global data reflecting the full impact of kidney disease is limited and inconsistent as many countries lack surveillance systems [17]. In 2016, the spectrum of kidney disease was estimated to affect more than 750 million people worldwide [18] and around 15% of the US population has been diagnosed with CKD [19]. The reason why people eventually need a kidney transplant is a compelling interplay of biological, environmental, sociocultural, political, and healthcare system factors colliding. The prevalence of early stages of CKD seems to be similar across different socioeconomic groups, while the prevalence of progressive and end-stage renal disease is greater for ethnic minorities. This is better documented in high-income countries, where monitoring systems are in place identifying decreased kidney disease outcomes in ethnic minority groups [20] and people with lower socioeconomic status.

Kidney disease care is complex and expensive. While in some countries, the government funds CKD and ESRD care, in others such as the US, while ESRD care is publicly financed, optimal treatment of CKD may not be accessible for people without health insurance or those who are under insured, and undocumented immigrants are not covered for kidney disease [21, 22]. Globally, access to and distribution of renal replacement treatment varies and often requires significant expenditure for patients [17]. There is a lack of adequate facilities for hemodialysis in low- and middle-income countries, decreasing quality of life. As well as global and local structures, there are longitudinal structures of marginalization, which include lack of transplant facilities in many countries. For example, although CKD has a high incidence in Western Africa, public health programs tend to focus on infectious diseases. In French-speaking Black Africa, kidney and liver transplantation are often not provided by government public health programs. As a consequence, some people who need treatment and can afford it, travel abroad for transplant [23]. Sub-standard follow-up outcomes, which include the inability to

afford the complex, chronic, and expensive treatment needed post-transplantation, have been reported.

Living-donor transplantation programs are found in only a small number of African countries: some that are established such as South Africa, Tunisia, and Sudan and others still developing, such as Ghana, Kenya, and Nigeria. Deceased donation is only available in South Africa. Although Egypt has been identified as a hub for international organ trade, it was only in 2010 that this country legalized living organ donation, establishing a formal organ waiting list and banning financial rewards for organ donation [24]. Even when programs exist, the cost of follow-up is prohibitive for most citizens. For example, in Cameroon, there is government funding to travel abroad for transplantation but patients must cover the prohibitive cost of essential immunosuppression drugs [25].

4   Wealth Disparities and Human Trafficking for the Purpose of Removal of Human Organs

In THBOR, the policy focus on fighting "transnational organized crime" diverts attention from many failed nation state policies (i.e., public health, labor, migration) [26] that generate and sustain structures of privilege and marginalization. This is why it is essential to examine the wealth inequalities that operate upwards and sideways to instigate criminality. Globally, there are systems of wealth disparities between low- and high-income countries that can facilitate markets for organs; local and national structural inequalities generate poor people that are more likely to become victims of organ commercialization. In THBOR, wealth disparities operate "within the same interlocking set of oppressions that perpetuate other forms of trafficking" [27] but these have the added contextual difference of health disparities. Not only in sellers but also in buyers of human organs, intersectional characteristics of gender/class/age/ethnic societal structures of marginalization [27] create the potential to promote organ commercialization. While the literature and policy instruments usually treat different forms of trafficking (sexual, labor, organs) separately, poor people can be vulnerable to more than one form of trafficking simultaneously [27] and in this process, they may be moved across national and/or international borders. For instance, Columb [26] demonstrated how in Egypt, Sudanese migrant populations are key sources of sellers in the country's organ trade networks. Sudanese brokers were often involved in the recruitment of Sudanese sellers from the migrant community, while recipients were recruited domestically and internationally.

Reliable information on THBOR is sparse but reliable information on wealth disparities is abundant. Although it is difficult to establish a general profile, sellers tend to come from countries with a large proportion of the population living below the poverty line. Poverty, debt, and the inability to provide for their families are clear and constant reasons for people to sell one of their body parts, with debt featuring heavily in the majority of the studies across numerous international settings [28, 29].The socio-demographic characteristics of organ vendors are not

homogeneous, although they tend to be from a relatively young age and low-level education [30]. The seller's financial needs can be due to poverty in lower-middle-income countries (e.g., Vietnam, India, the Philippines), but also due to extreme wealth differential across countries and national inequalities in countries with higher incomes (e.g., Singapore, Hong Kong) but with high living expenses. The latter explanation, based on income inequality not just absolute poverty, offers a more nuanced understanding of the cases where people have been prepared to sell body parts to purchase luxury objects, such as the story of the 17-year-old who sold their kidney to buy an iPad [31].

There is also more information about the situation and experiences of organ sellers and buyers from some countries than others, and their nationality varies as prohibitionist legislation has been implemented. In 2013, a number of countries were identified by Pascalev et al. [30] in their systematic review as more likely to have organ trade transactions, namely India, China, the Philippines, Pakistan, Bangladesh, Kazakhstan, Ukraine, Russia, Iraq, Jordan, Egypt, Romania, Moldova, Kosovo, Turkey, Israel, Brazil, Colombia, Peru, and Bolivia. Some of these countries have since passed legislation to deter organ commercialization but networks and infrastructure remain active.

5   Gender Disparities in Organ Transplantation and Organ Trafficking

There are gender discrepancies in chronic disease, organ donation, and deceased and living organ transplantation and, despite the lack of access to reliable data, these seem to be mirrored in organ trafficking. These gender disparities tend to favor men and are often presented as a "puzzle" where biological and social factors interplay in such complex ways that it is difficult to establish if women are discriminated by medical institutions, or if there is an inevitable biological determinism that results in unfavorable health outcomes for women. Nevertheless, since medicine has been traditionally identified as a gender-biased science [32], we could assume that the same historical and societal constructs that impact women negatively extend to the field of organ transplantation.

In 2022, the European Committee on Organ Transplantation of the Council of Europe, the committee that monitors the development of ethical, quality, and safety standards in transplantation in Europe [33], estimated that in most European countries, there are gender differences in deceased vs living donation, with women donating more living kidneys and livers, and the majority of all human organs being transplanted into men. Although epidemiology may be influenced by the higher incidence of certain diseases in men, evidence suggests that gender roles in patriarchal societies (the ones we still mostly live in today) influence who is seen as deserving the precious human organs from dead or live bodies. For example, multiple studies have identified disproportionate gender differences in heart transplantation [34] when there are no gender differences in the likelihood of heart failure but women are more likely to die from it [35]. Only 30% of all heart

transplantations are conducted in women [36]. Although some biological explanations can be possible (e.g., childbearing related immune sensitization [37], donor-recipient size mismatch [38]), many social explanations related to expected gender roles for women are likely to impact their reduced access to organ transplants.

In the case of living donation, patterns of transplantation have consistently demonstrated a greater tendency of women to be donors [33]. Although many explain this gender disparity due to a supposed altruism unique to women's biology, the social roles of women are more likely to drive this sacrifice for their partners, children, or other family members. Culturally, women are more likely to feel or be more pressured to donate and risk their health because men are still perceived as the main breadwinners in households worldwide. Globally, CKD seems to be more prevalent among women [39] but more men than women start renal replacement therapy, with older women being more likely to refuse it [40], and women's mortality is higher on liver transplant waiting lists [41]. There might also be a gender selection bias on who is put forward to access kidney transplantation, which includes societal norms about female body shape, since women classified as overweight and obese have lower access to transplantation than men with the same BMI classification [42].

In human trafficking, gender puzzles also occur. Women are more vulnerable to human trafficking, and this is why traditionally they had been considered as victims, and men offenders. Recent studies have demonstrated a more nuanced account of gender roles in human trafficking networks with women fulfilling active and leading roles [43, 44]. Youssef [27] argued that the conceptual and policy gendered separation of different types of trafficking (women in sex trafficking, men in labor trafficking) seemed to have contributed to the invisibility of organ trafficking and also a gendered bias view of it (poor men who sell their kidneys). However, in THBOR, there are blurred boundaries between victimization and criminalization where victim-offender roles overlap [45].

There is disagreement in the academic literature about which is the dominant gender of sellers. There is more information about sellers than about buyers since organ sellers are more likely to be prosecuted than buyers; and they are also easier to recruit as research participants. Pascalev et al. [30] concluded that the vast majority of sellers are men and, in fact, men have been interviewed more for ethnographical studies in countries like Bangladesh, Moldova, Egypt, Pakistan, Colombia, and the Philippines. Male sellers are also the ones who have been prosecuted in the few THBOR cases brought to justice. However, sociologists have long established how patriarchal power relations shape gender differences in crime related activities, with women being pushed into crime and exploitation in different ways than men and this is also the case in THBOR. In a cross-sectional survey study with kidney sellers in India of which 71% were female [46], 31% of the married women reported they sold organs because their husbands were the breadwinners and two women said that they had been forced into doing so by their husbands. This phenomenon can be further understood with Tong et al.'s [47] in-depth interview study with transplantation staff across Asia, which found that the number of women donors appeared disproportionately high and related this to the extended practice of covert commercial transplantation in the form of illegitimate marriage arrangements and

falsification of relationships. Pseudo-marriage for transplantation is acknowledged by many policy instruments, and deterrents are put in place to avoid it. For example, Hong Kong's living organ donation legislation stipulates that spouses from marriages that have lasted for fewer than 3 years are not considered as eligible living donors [48]. Similarly, in Taiwan living donation is restricted to spouses married for a minimum of 2 years or who have given birth to at least one child [47].

6   Ethnicity and Health Disparities in Organ Donation, Transplantation, and Trafficking

Advances in transplantation are predicated on the availability of donated organs which is intrinsically linked to the process of matching donors and recipients. Laboratory innovations in blood typing and tissue matching are essential here since organ allocation protocols are based on matching two principal immunological characteristics between donor and recipient: blood groups and genetic type (called the tissue type or HLA-human leukocyte antigens-type). A "same blood group" rule, matching donors and recipients, is usually maintained. There are four main blood types in human populations; for example, in the United Kingdom (UK), O is the most common blood group and A, B, and AB are rare. B and AB are particularly concentrated amongst South Asian, Chinese, and Japanese communities. This means that these blood groups are also geographically concentrated. The distribution of HLA antigens also differs between ethnic groups. For complex reasons, in the UK, the majority of organs are donated from the white population, therefore access to organs can be particularly difficult for some communities. New products and systems that can counteract the rejection of organs are fundamental to the matching process. For instance, researchers are working on artificial blood group conversions [49] using a perfusion machine. While these innovations take years to be taken from labs to operating theatres, there are still disparities in the donation process based on ethnicity and geographical location.

Time constraints also restrict donation procedures. After matching organs, medical staff have to manage the organization of the donation process: finding available theaters in donor and recipient hospitals, booking planes and summoning specialized transplant teams at short notice. Organs that cannot be stored and preserved (like corneas and other tissues) have to be transplanted promptly after removal for them to retain their functional qualities. This period is variable (approximately 40 h for a kidney, and 4 h for a heart) but, as a general rule, the shorter the amount of time, the better the outcome. The whole process—from allocation to removal to implantation into the multiple recipients—often takes less than a few hours. This means that in areas where there are fewer donors, there are fewer organs available for transplantation. Together these arrangements mean that there is significant variation in demand for, access to, and waiting times for organs between different ethnic groups in different countries. For example, in countries like the UK [50] and the US [51], there are a disproportionately greater number of people from black and minority ethnic backgrounds waiting for transplants. Addressing these inequalities is not

just a matter of scientific and technical advancement, better training or public health, it requires a coherent strategy and concerted action. This includes changing institutional mechanisms to make the matching process more flexible, speeding up the allocation of organs and sourcing suitable donors in the local community, as well as improving coordination between institutions to streamline the complex donation to transplantation process.

Consequently, due to the challenging access to organs for certain communities where the chances of being allocated an organ are next to impossible, a significant number of ethnic minorities have been observed in some countries to travel to the region of their corresponding ethnicity in order to undergo transplantation [52, 53]. These buyers can also experience limited access to medical care post-transplantation. Although buyers can afford the purchase, funds may be limited and/or borrowed; and the follow-up care, fundamental to a successful transplantation, is unaffordable.

7   The Impact of the COVID-19 Pandemic on Trafficking of Human Beings for the Purpose of Organ Removal

The COVID-19 pandemic affected global healthcare delivery systems in general and disproportionally impacted different population groups, widening existing health disparities across the world. For example, in England, from March 2022, mortality from COVID-19 was 2.6 times higher in more deprived areas. These disparities were higher in ethnic minorities, with Bangladeshi, Pakistani, and Black Caribbeans experiencing higher mortality from COVID-19 [54]. In the US, during the early part of the pandemic, there was increase in mortality on kidney transplantation patients on the waiting list and transplanted patients [55] and the highest mortality (82% above expected) was among Hispanic solid organ transplant recipients [56]. In addition, the pandemic generated pervasive gender-based inequities across the world.

The impact of the COVID-19 pandemic extended to organ transplantation and human trafficking, although the consequences for TBOHR were rarely discussed. Initially, the pandemic had a dramatic effect on organ transplantation since many hospitals prioritized COVID-19 patients and temporarily stopped or reduced transplantation activity [57]. Reasons ranged from organizational (e.g., high use of intensive care beds for patients with lung diseases from COVID-19 infections, loss of access to operating theatres, shortage of transplant staff due to illness or redeployment, diverted healthcare funding, logistical challenges due to travel restrictions), to clinical (e.g., concerns over donor-derived disease transmission, adverse outcomes in immunosuppressed recipients), to personal (e.g., safety of living donors, severe isolation of patients from non-household contacts who wanted to postpone hospital appointments) [57]. Overall the impact varied according to organ type and over time. Kidneys were not perceived as urgent organ transplantations since stable transplant candidates could be put on renal replacement therapy and many living donor programs were suspended or reduced across the world [58]. Living donor

transplantation experienced greater reductions in activity than deceased donor transplantation (global 40% reduction in kidney living donors and 33% reduction in liver) [59]. Many complex factors impacted this overall decline, including a decrease in donors but also reduced availability of ICU beds for maintaining donors. Geographic sharing of organs was limited to local organs in many areas for several reasons including restricted air travel [60].

When it comes to human trafficking, reductions in income, especially for low wage, seasonal and informal sector workers (e.g., agriculture and farming, garment industry, manufacturing and domestic work), exacerbated precarity and vulnerability in sectors where human trafficking is common [61]. This vulnerability has the potential to be exacerbated in countries with limited social safety nets for marginalized populations [62]. During the worst of the pandemic, migrants were stranded in smuggling routes [63] with restricted access to desired destinations, while online services and activity increased, allowing criminal networks to recruit people with false promises. Interpol warned that the COVID-19 impact "exposes economically vulnerable communities to a higher risk of being exploited for the purpose of organ removal." In 2021, the press published stories of groups of people being lured to sell their kidneys in India's Assam tea plantations after the devastating economic impact of the pandemic on rural workers forced many to take out loans that were unable to repay [64]. Similar stories have been published about Ugandan workers in the Gulf states [65], Egypt [66] and Afghanistan [67].

8   Conclusion

While this chapter has demonstrated an understanding of the shortages in organ donation that can lead to organ trafficking, we also need to consider the organization of the systems of donation and transplantation and how these shape the availability and success of organ transplantation for some people. The image of individual altruists who simply choose to "do good" has been challenged by scholars such as Healy [68], showing how procurement organizations play an important role in the donation process. Scholars have explored the political economy of organ donation, particularly the ethics of turning human bodies into commodities [69] for others to buy and profiteer. However, the image of selfish individuals who simply choose to pay for human organs must also be challenged. This suggests that when thinking about how to reduce THBOR, a range of practical, national, and local aspects of how it is organized must be approached. To understand the significance of health disparities in THBOR is fundamental since trafficking and transplants are entangled in biology, geography, and socioeconomic factors [70]. The amplified impact of COVID-19 on health disparities and the backlog of patients on transplant waiting lists has the potential to increase vulnerability to being trafficked in already marginalized populations worldwide.

Discussion Questions

- How would you describe the relationship between inequitable access to healthcare in diverse populations and THBOR?
- How is the motivation to sell and to buy human organs influenced by intersectional health disparities?
- What research evidence supports gender discrepancies in living organ donation and the organ trade?
- Why did the COVID-19 pandemic aggravate the intersectional health disparities in populations at risk of THBOR?

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Nonconsensual Marriage

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1   Introduction

Nonconsensual marriage is a human rights violation, disproportionately affecting women and children globally, subjecting them to all forms of violence [1]. Child and forced marriage (CFM), a form of nonconsensual marriage, threatens the lives and futures of women and children worldwide. CFM robs its victims of free agency, disrupts their education, and increases their vulnerability to violence, discrimination, and abuse. CFM prevents victims from fully participating in economic, political, and social spheres. Child marriage is accompanied by early and frequent pregnancy and childbirth, resulting in higher-than-average maternal morbidity and mortality rates among child brides. Women and young girls often attempt to flee their communities or commit suicide to avoid or escape CFM [1].

This chapter aims to provide an overview of the different forms of nonconsensual marriage as it relates to human trafficking, focusing mainly on CFM. This chapter will also review the current evidence surrounding child marriage in the United States and globally. Additionally, this chapter discusses the impacts of COVID-19 on various populations affected by these practices.

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2   Overview

2.1   Basic Definitions

Nonconsensual marriage, or **forced marriage**, is defined as a marriage with one or more elements of force, fraud, or coercion where one or both parties cannot or do not consent to the marriage [2, 3].

   Consent means that a person has given their full, free, and informed agreement to marry the intended spouse and has further agreed to the timing of the marriage [2, 3].

   Human trafficking involves exploiting one person or party by a separate person or party to compel the first person or party to perform sexual acts—commercial or non-commercial—or to force labor. Generally, this exploitation must involve force, fraud, or coercion to be considered human trafficking [2, 3]. However, if the victim is younger than 18 years of age and is made to perform a commercial sex act that is regarded as human trafficking even if there is no force, fraud, or coercion [2, 3].

2.2   Types of Nonconsensual Marriage

There are several types of nonconsensual marriage; see definitions below. Often nonconsensual marriage involves the exchange of money or resources, or it can be used to resolve a debt. These marriages result from hardship, such as poverty, war, death, or unexpected pregnancy.

- **Dowry and Bride Price:** Marriage accompanied by transfers of payment between the families of the bride and groom. A *dowry* involves payments made by the bride to the groom and his family and is a common practice in many Asian countries. A *bride price* refers to the payments the prospective groom and his family make to the prospective bride and her family, a practice more commonly seen in Africa [4].
- **Marriage by Abduction:** The unlawful carrying away of a woman or child for marriage. This is a form of sexual violence. The would-be-abductor forms a group of intimate friends and relatives to kidnap the young girl or woman without the knowledge of her family, relatives, or friends. In some cases, abduction is followed by rape. This practice is most seen in Ethiopia [5].
- **Debt Negotiation or Debt Resolution:** Women or children are used as a substitute for money to offset debts or used as a substitute to settle conflicts [6].
- **Widow Inheritance:** Customary law that requires a widow to be inherited by a male relative of the late husband upon his death [7].
- **War Spoils:** Wartime sexual violence occurs in the form of rape or forced sexual acts committed by combatants during armed conflict, war, or military occupation. Such atrocities are seen as profits or "prizes" seized/confiscated from the enemy. Anecdotal evidence of wartime sexual violence illustrates the use of humiliation, physical violence, bondage, and forced pregnancy [8].

- **Pregnancy Out of Wedlock or "Shotgun Wedding":** An unwed individual or couple feels forced to marry or is required to marry following an unexpected pregnancy. This is a marriage performed out of moral obligation. Historically, a shotgun wedding was done to prevent a loss of reputation for the family. Such marriages were/are usually enforced by the father of the bride and are most often seen in North America [9].
- **Child marriage**: The United Nations (U.N.) defines child marriage as any marriage where at least one of the parties is under 18 years of age [10]. Child or early marriage is the most prevalent form of forced marriage today. Child marriage is forced marriage for the simple reason that a child is unable to give informed consent, a prerequisite of lawful marriage. The U.N. states, "A child marriage is considered a form of forced marriage, given that one and/or both parties have not expressed full, free, and informed consent" [10]. Child marriage can legally be performed in the United States utilizing one of two routes—adoption or contract.
  - *Marriage by adoption* occurs when an elder spouse adopts the younger individual to gain legal rights and protections.
  - *Marriage by contract* occurs when the parent contracts on behalf of their underage child and promises that the child will wed the other party once they achieve the "age of majority" or legal age.

Both routes avoid laws prohibiting child marriage and are still considered common practices in the United States [11].

3   Nonconsensual Marriage and Human Trafficking

Forced marriage may occur when family members or others use physical abuse, emotional abuse, threats, or deception to force an individual to marry without consent [2]. Forced marriage can be both a cause and a consequence of domestic violence, dating violence, sexual assault, or stalking. Forced marriage can happen to individuals of any race, ethnicity, religion, gender, sex, age, immigration status, or national origin. It can happen to individuals from any economic or educational background [2]. Some forms of nonconsensual marriage are more likely to involve human trafficking. According to the *United Nations Office on Drugs and Crime,* forced, abusive, and exploitative marriages included in recent research were linked to all three elements of trafficking as defined in the *Trafficking in Persons Protocol*: (1) Act, (2) Means, and (3) Purpose [12].

1. **Act**. Forced marriage is often linked to recruitment [12]. This is most seen in situations where marriage is used as an instrument to bring a spouse to the destination country where they will be sexually exploited, forced into domestic servitude, or forced into labor. In various analyzed cases, marriages were linked to the transportation or transfer of the victim. For example, the victim was transported by the victim's family or another third party to the intended spouse

and/or the spouse's family. Furthermore, the spouse and/or spouses' family of the victim could be seen as receiving or harboring the victim.

2. **Means.** Forced marriage may be directly linked to certain means, as defined in the *Trafficking in Persons Protocol*, such as abduction, fraud, deception, abuse of vulnerability, and receiving payments or gifts [12]. Specific marriage arrangements may be sought after only for deceptive purposes, such as to conceal exploitation. In addition, research on forced marriage has discovered the use of various forms of coercion in multiple cases, similar to cases of human trafficking found in other contexts. Subtle forms of coercion, including psychological pressure or oppression, are often used to ensure the victim "consents" to the marriage. Control methods are then used to maintain the vulnerable state of the victim, making further exploitation possible.

3. **Purpose.** Forced, abusive, and exploitative marriages are directly related to the exploitative purposes of human trafficking [12]. This last element has been repeatedly emphasized by experts and practitioners as a significant challenge in linking human trafficking to specific forms of marriage. The complicating question encountered is as follows: To what extent do abuse, violence, and similar types of misconduct within a marriage qualify as exploitation in the *Trafficking in Persons Protocol*? Countries concerned with the issue have opted for different approaches to address this question. These approaches can be broadly categorized like so: (a) forced or child marriage (or similar types of marriages, depending on the national context) are included as explicit examples of exploitation in the national definition of crimes involving trafficking in persons; (b) forced and child marriage are subsumed under the concept of "practices similar to slavery" in the antitrafficking legislation; and (c) forced and child marriages are understood by the national authorities to be subsumed under additional, broader forms of exploitation, defined in antitrafficking legislation that refer to the violation of human dignity.

4　Child Marriage

Child marriage refers to any formal marriage or informal union between a child under the age of 18 and an adult or another child [10]. The United Nations International Children's Emergency Fund (UNICEF) estimates that approximately one-fifth of young women are married before their 18th birthday. That is approximately 15 million girls that are married before their 18th birthday each year, totaling 41,000 child brides each day worldwide [11]. Overall, forced marriages have been on the rise since 2016, showing a globally estimated increase of 6.6 million people. A significant portion of these involve children [10]. Roughly 41% of people forced to marry are under the age of 18 [10]. This estimate involves children reportedly as young as 9 years old, although this is a rare occurrence [10].

Forced marriage of children affects both males and females, though females are more likely to be victimized. Approximately 650 million women and girls alive today were reportedly married before the age of 18 [11]. In developing countries,

one in three girls are married before age 18, and one in nine are married by age 15. Comparably, 1 in 30 boys are married as children. UNICEF estimates that 115 million boys and men alive today were married before the age of 18. Total child brides and grooms worldwide equate to over 765 million individuals [11].

There are significant health risks associated with child marriage, especially for girls in developing countries. A study in Kenya found that girls married between the ages of 15 and 19 years old were 75% more likely to contract HIV than sexually active, unmarried girls of the same age [11]. The risk of maternal morbidity or mortality increases due to complications with early childbearing. There is a risk for fistula, caused by obstructed labor and birth, that can leave girls incontinent for the rest of their lives if left surgically unrepaired. Additionally, child mothers experience stillbirth 50% more than adult women between the ages of 20 and 29 years old.

4.1   Child Marriage as Slavery

Circumstances qualifying as child slavery includes the following criteria [13]:

- The child does not give their free and informed consent to enter the marriage
- The child is subjected to control and ownership in the marriage, including abuse and threats to the child
- The child is forced with the responsibility of domestic chores within the home or labor outside the home
- The child is forced to engage in nonconsensual sexual activity
- The child feels that they cannot safely or realistically leave the marriage [13]

Children are particularly vulnerable in situations of CFM compared to adults because of their inability to give free and informed consent to marry, even if they appear to agree or do not express refusal [14]. Additionally, children have limited control over the marriage or expectation of sexual relations. Girls are commonly controlled through violence, threats, humiliation, isolation, and loneliness. Child brides are more likely to face sexual, physical, and emotional abuse than women married after the age of 18 [11]. A study conducted in India found that young girls who have married before the age of 18 experience physical violence twice as often and sexual violence three times as often as girls who marry after 18 years of age [11]. Children have a limited ability to provide for themselves financially, which can inhibit their ability to leave the marriage. They often face rejection or repercussions from family and community if they do not participate in the marriage or attempt to leave. Without support from those closest to them, children (particularly girls) are vulnerable to abuse and exploitation [11].

Most cultures that participate in child marriage primarily consider the age of puberty and the capacity for reproduction when determining the minimum legal age to marry. Unfortunately, research reveals that the actual age of puberty often varies from public belief, and consequences for illegal marriages are not typically imposed [11]. This is important when defining reasons why child marriage continues to exist

across the United States and worldwide. These topics will be discussed in further detail. Drivers contributing to child marriage include gender inequality, cultural tradition, poverty, and economic or social insecurity [11].

In impoverished countries, marrying off girls at a young age is seen as a financial solution to secure the futures of both families involved and the girls themselves. Families use the marriage of their daughters to lessen the economic burden on them, repay debts, manage disputes, and form social, political, and economic alliances. Types of marriages related to financial gain include dowry, bride price, debt negotiation, and dispute resolution [4, 6].

During times of conflict and humanitarian crises, child marriage increases in parallel with social and economic insecurity. The ongoing global issue of child marriage can be attributed to unstable nations, as nine out of the ten countries with the highest child marriage rates worldwide are considered fragile states [11]. Wartime sexual violence is a taboo subject that is poorly prosecuted. Violence has shifted from targeting opposing soldiers to targeting the elderly, women, and children during times of armed conflict [8]. This is a common practice during civil wars, religious wars, and world wars. Often, soldiers rape women to intimidate other civilians.

The abduction of women in conflict zones is a war crime [8]. Although, many see it as a celebrated legend and victory. Violence toward women during these conflicts includes rape, murder, forced marriage, sexual slavery, mandated enlistment into military service, and forced labor [8]. These crimes are largely unprosecuted due to victim shame, lack of authoritative entities, and lack of support after being shunned from families and communities.

Historically, war spoils have been captured and detained in special camps or brothels to be tortured, raped, and impregnated at the discretion of soldiers [8]. In 750 B.C., men from the newly founded Rome kidnapped dozens of women from the Sabine hills as brides [8]. These marriages were credited with populating Rome and stimulating the rise of an empire that once dominated the ancient world.

Between the years 1932 and 1935, over 200,000 girls and women across Asia were kidnapped, enslaved, and held in "comfort stations" set up by the Japanese military. The "comfort stations" were like brothels. Girls as young as 12 years old became sexual slaves and were subjected to CFM in some cases. In 1937, Japan launched a 6-week assault on China in the city of Nanking, later known as "the Rape of Nanking." Many were tortured, raped, or slaughtered during this time, including children, young girls, and women [8].

4.2   Child Marriage by Abduction

Marriage by abduction is a violent form of CFM. A study in 2005 shows 8% of women of reproductive age reported that they had been married by abduction [5]. This is a common occurrence in Ethiopia but occurs worldwide.

- Reasons for child marriage by abduction include the following:

- – Refusal or anticipated refusal of consent by the parents or the girl.
- – To avoid excessive wedding ceremony expenses and ease the economic burden of a bride price.
- – To outmaneuver the girl's potential spouses or suitors.
- – Or it could be due to differing economic statuses between partners.
- The harmful effects of child marriage by abduction include the following:
  - – Beatings that cause bodily harm, severe disabilities, or death of the girl.
  - – A family conflict that lasts for generations.
  - – Unhappy, unstable, and unloving marriage.
  - – Suicide resulting from the psychological stress of the girl.
  - – Expenses related to conflict settlements to the family or legal proceedings.
  - – Or discontinuation of schooling and other opportunities available to the girl.

4.3   Child Marriage by Widows' Inheritance

A widows' inheritance is another form of CFM where cultures require the youngest wife of the deceased to marry the eldest son [7]. Widow inheritance is common in West African and European royal bloodlines and is a form of institutionalized incest [7].

4.4   Child Marriage in the United States

It is a common belief that child marriage does not exist in the United States (U.S.). The reality is that child marriage exists and is widespread across the country, with approximately 40 child marriages each day [11]. Until World War II, the minimum age to marry in the United States was still set at 21 years old, prompting Congress to lower the minimum age to 18-year-olds with parental and judicial consent. A study from 2018 found that 200,000 minors, 87% girls and 13% boys, were married in 41 states between 2000 and 2015 [11].

Currently, federal laws do not exist within the United States that define a minimum age of consent to marry. The decision is left to each individual state. There are also no federal laws that ban child marriage in the United States. Although two states, Delaware and New Jersey have banned marriage under the age of 18 with no exceptions. States like Idaho and Massachusetts have no minimum age requirement for marriage. West Virginia has a minimum age of 16 years old for marriage, but the bride or groom can be younger if the parents and judge find the marriage "in the best interest of the child." Missouri has been dubbed the "destination wedding spot" for child brides. The United States marriage license data shows that between the years 2000 and 2010, at least three states granted marriage licenses to 12-year-olds, and 14 states granted marriage licenses to 13-year-olds [11].

The U.S. government has failed to take federal action against child marriage, and state autonomy makes the issue difficult to combat. The United States has not yet ratified the two existing conventions from the United Nations that denounce child

marriage: *The Convention on the Rights of the Child (CRC)* and the *Convention on the Elimination of Discrimination against Women (CEDAW).* The United States is one of only three countries that has not ratified the CRC and is the only developed country that has not ratified the CEDAW. The aims of the CRC and the CEDAW are to eliminate "all harmful practices, such as child, early and forced marriage, and female genital cutting." The CRC is considered one of the most universally endorsed and ratified treaties in history and defines all humans below the age of 18 as children [11].

In cultures with strong patriarchal values, like the United States, there is a significant emphasis placed on controlling the sexuality, purity, and virginity of their daughters. In the United States, pregnancy out of wedlock is often followed by a "shotgun wedding," described above in Sect. 2.2. Among new findings from the 2020 report:

- 27% of women in the 1970s who experienced a first premarital pregnancy experienced a "shotgun wedding" compared with just 7% for first premarital pregnancies since 2000.
- 51% of single pregnant women married within 3 years of conception in the 1970s. This has decreased by half—currently 25% in the United States.
- Unmarried pregnant women who cohabit at the time of their child's birth have risen from 8% in the 1970s to 28% today.
- In the 2000s 56% of all births to unmarried couples were to men and women living together, representing just over 20% of all U.S. births [11].

Because the United States does not have a federal age floor, or a minimum age for child marriage, an array of exceptions currently exists. Age floors are one of the best ways to prevent child marriage in the United States, although marriage license data shows that even in states with age floors, unwarrantably young children have been married because proof of age was not required. Current state laws do not include a requirement of residency, allowing individuals to circumvent strict age protections in other states. Many individuals cross state lines to engage in child marriage. Children still lack protection despite parental and/or judicial consent requirements. Judges lack the training, experience, and resources required for inquiry into cases of child marriage. Parental consent allows adults to make the decision for the child, even if the child does not consent [11].

Driving factors that contribute to child marriage include gender inequality, cultural tradition, poverty, and economic or social insecurity. More than half of girls from the poorest families in developing countries are married as children. Deep-rooted gender inequality is a dynamic that disproportionately harms girls and women in child marriage. The World Policy Analysis Center found that 93 countries legally allow girls to marry before they are 18 years old. Fifty-four countries allow girls to marry 1–3 years younger than boys. The Pew Research Center identified at least 117 nations that allow CFM through legal loopholes, including religious and cultural exemptions. The U.N. Population Fund asserts that "there are no major religious traditions that require child marriage," and "it would be wrong to say that

child marriage warrants protection as a cultural or religious practice." Despite these assertions from a universal global organization, some countries still recognize child marriage based on religious affiliation. Customary and religious laws have historically taken precedence over national law. In the Philippines, the minimum age to marry is 21 years old, but Muslim boys can marry at age 15, and Muslim girls can marry at puberty [11].

Child marriage has serious legal and health consequences for girls in the U.S. There are high rates of divorce, with 70–80% of child marriages ending in divorce in the United States. Early marriage doubles the likelihood that a child bride will experience poverty. Females who earn less in wages and begin to conceive at a younger age contribute to the intergenerational transmission of poverty and excessive population growth. Child marriage delays or deters the education of young girls and increases gender inequality. Girls in the U.S. who marry before 19 years old are 50% more likely to drop out of high school and are four times less likely to graduate from college [11]. Educational attainment contributes to fewer childbirths, increased lifetime earnings, improved household income, reduced experiences of intimate partner violence, and advanced decision-making ability. Health complications are associated with child marriage. Child brides are at a higher risk for sexually transmitted infections and diseases, as well as increased psychiatric disorders and sexual, physical, and emotional abuse [11].

5   Impacts of COVID-19

It is estimated that an additional 10 million girls will be at risk for child marriage due to disruption related to the COVID-19 pandemic [15]. Although child marriage rates have declined in the last 10 years, isolation and financial strain resulting from the pandemic have led to increased risk to young girls for child marriage, pregnancy, and intimate partner violence. Girls who experienced the death of one or both parents or who belong to a family experiencing hardship as a direct result of the pandemic are especially vulnerable. UNICEF's efforts to end child marriage by 2030 have been greatly impacted since the start of the 2020 pandemic, slowing progress. School attendance and access to health and social services decrease the risk of victimization and should be made a priority in improving the global impacts of COVID-19 and protecting vulnerable children from the harmful effects of child marriage [15].

6   Conclusion

In summary, there are many types of nonconsensual marriage. With some being more likely to result in human trafficking, especially child marriage. Child marriage is a global issue that is still practiced and exists as a cultural norm across the globe, including in developed countries like the United States. Despite efforts to end child marriage, religious and cultural exemptions have continued to impact progress.

Table 1 Internet resources

Organization	Website name	Website type	URL
United Nations Population Fund (UNFP) [16]	Child marriage	Report	https://www.unfpa.org/child-marriage
Girls Not Brides [17]	About child marriage	Organization	https://www.girlsnotbrides.org/about-child-marriage/
Human Trafficking Search [18]	Behind closed doors, 2017	Blog	https://humantraffickingsearch.org
Al Jazeera [19]	Forced at 15	Interactive website	https://interactive.aljazeera.com/aje/2018/child-marriage-niger/index.html

Child brides experience negative financial, social, and educational effects secondary to child marriage. It threatens the health and well-being of all victimized but primarily affects young girls and women worldwide, often leading to life-long health complications or death. The United Nations and the World Health Organization continue to push for a universal ban on child marriage and have made significant progress, although there is much work to be done before the fight against child marriage is over (See Table 1).

Discussion Questions

- How does a "forced" marriage differ from an "arranged" marriage?
- Why is child marriage or forced marriage difficult to prosecute?
- Why are girls more often victimized in child marriage than boys, or why do girls suffer more negative effects than boys?

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The Forced Marriage of Young Girls to Child Soldiers

Brittany Foutz and Timothy Westcott

1 Post-Conflict Gender Justice and Forced Marriage

Empowering women in post-conflict justice requires action on many fronts from instilling in children that girls, as well as boys, have an inherent right to develop their potential to be treated with respect and dignity and afforded control over their life choices. This should consist of ensuring that girls and women have equal opportunity to education as well as equal access to economic, social, and political opportunities based on their aptitude and their abilities. It should also ensure that legislators are inclusive of the needs required by the entirety of their population in the legislation and processes of their land. Consequently, it should make certain that the laws reflect gender equality and that criminal laws recognize acts of sexual violence as serious crimes regardless of whether they are committed in times of war or peace [1]. All over the world, the demands by women for those in power to take responsibility for violations and abuses have gained more attention now than ever. This is a decisive moment for gender equality, with campaigns and movements around the world, such as #MeToo and #SheDecides, with women's marches, turmoil at the local and national level, and many governments and companies that highlight their commitment to change. These movements have exposed the disparity between the promise of justice and the realities with respect to the land, in the home, in the community, and in the workplace. Women and girls continue to face legal discrimination, disparate legal protections, and implementation uneven of the existing guarantees. This chapter will further address these challenges that girls face in relation to being forced into marriage with child soldiers, focus on the United Nations and international courts achievements in gender justice, the background

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and typologies of being a child soldier, and conclude with a discussion on the role of peace and conflict resolution for gender justice.

Women and girls have always been disproportionately victimized by conflict [2]. Despite, or possibly because of that fact, many women and girls have been involved in impactful efforts to end conflicts around the world. The courage and commitment of women such as Zainab Hawa Bangura, who is now the Special Representative of the Secretary-General on Sexual Violence in Conflict, emphasize the critical role that women play in ending conflicts and ensuring lasting peace [3]. However, all too often women and girls have been restricted to serving as waitresses at the table of peace negotiations as well as at the table of the creation of peace and justice enforcement mechanisms. At the Special Court for Sierra Leone in 2002, women were given their first major voice in the international conversation of peace and justice.

2   Resolution 1325 and the Special Court for Sierra Leone

The images that come to mind for Sierra Leone in the 1990s are those of brutality, mutilation, abduction, rape, murder, murder of children, children carrying weapons heavier than themselves, a campaign of terror by armed groups against innocents, unarmed women, and children… The systematic amputations of frightened, crying groups of people, repeated acts of sexual violence, and the Revolutionary United Front carving their acronym "RUF" with machetes into the bodies of children became hallmarks of the Sierra Leone conflict. As a result, the government of Sierra Leone and the United Nations brought together the Special Court for Sierra Leone and initiated trials in Den Haag [4–6].

The Special Court stands as tangible and substantial evidence that violence during conflict, including sexual violence, will be prosecuted by the United Nations and potentially by its member states as well, so that those who commit atrocities against women and children can and will be held accountable. This affirms that rape and other forms of sexual violence will be condemned as a war crime or as a crime against humanity. The creation of the Special Court assures there will be no place for anyone to hide from their heinous acts of violence and that every resource of the international community will be utilized to find and prosecute perpetrators to the fullest extent of the law. The Special Court is not only a guiding light but a living example of what domestic ownership and international leadership can achieve. The Court has groundbreaking jurisprudence in many respects on sexual violence crimes, especially justice for girls who are at risk for sexual and gender-based violence in the form of domestic violence, sexual assault as minors, school-related sexual abuse, harmful traditional practices like female genital mutilation, and then if married to a child soldier, marital rape.

The United Nations Security Council adopted Resolution 1325 for women's rights and peace and security on October 31, 2000. This resolution reaffirms the imperative role of women in the prevention and resolution of conflicts, peace negotiations, peacebuilding, peacekeeping, humanitarian response, and post-conflict

reconstruction. It also stresses the importance of their equal participation and full involvement in all efforts for the maintenance and promotion of peace and security. One of the most significant elements of 1325 is that the resolution acknowledges how war has a tangibly different impact on females as opposed to males. In war, women and girls are often targets of rape and forced marriage. Women and girls are usually targeted because of what they represent in society with the inability of men and the state to keep them safe. The inspiration of 1325 comes from the mass atrocities of women and girls committed in Sierra Leone that occurred during their 11-year war, where women and girls were targets of the aforementioned rape, forced marriage, and targeted abuse.

Resolution 1325 reaffirmed the need to fully implement humanitarian and human rights laws to protect the rights of women and girls during and in the aftermath of conflicts. The resolution emphasizes the responsibility of states to end impunity and prosecute genocide, crimes against humanity, and war crimes, including those related to sexual violence and other forms of violence against women and girls. This understanding of 1325 makes the jurisprudential achievements of the Special Court for Sierra Leone an important pillar in the legal prosecution of violence against women and girls. The Court has made contributions to gender justice, international criminal justice, strengthening the stability in West Africa, and to bringing an end to impunity in completing the trial proceedings against former Liberian President, Charles Taylor, for war crimes and crimes against humanity [7, 8]. The Special Court for Sierra Leone has recognized and set meaningful precedents, which have institutionalized our understanding of 1325. Examples of this include: the Special Court for Sierra Leone had the first ever convictions in an international tribunal for crimes against humanity of sexual slavery and forced marriage, the Special Court for Sierra Leone set precedents on justice for sexual slavery, and the Special Court for Sierra Leone handed down the first convictions by a UN-backed tribunal for the crime of recruiting and using child soldiers [8]. Following, the Trial Chamber confirmed the elements of the crime and the contents of those elements, thereby developing gender jurisprudence and helping to build a unified legal understanding. In addition, there are precedents on forced marriage where the judgment details this as a form of inhumane treatment, thus looking at the way the whole notion of marriage has been abused when forced marriage happens. The Trial Chamber observes that the deliberate and concerted campaign to rape women constitutes an extension of the battlefield to women and girls' bodies. The Trial Chamber further comments on the individual acts that have taken place in the war and seeing how these fit into a larger pattern of events and more deeply explains the actual role and consequences of gender-based violence [4–6].

This resonates with the language of Security Council Resolution 1325, which calls on states not only to specifically ensure responsibility for war crimes related to sexual violence but to look at the differential impact of such acts of war on women and girls. 1325 not only highlights how important it is to support women as they fight sexual and gender-based violence but also to ensure that women are part of the decision-making processes at the front and center of them. In this regard, having such inspirational women working together sets an example for the way in which

1325 can be delivered. In the year 2000, after decades of struggling for human equality and women's rights, the United Nations Security Council's Resolution 1325 paved the way for women in conflict to be heard and has called on all nations and parties to respond to a conflict to fully respect the rights of women and girls.

3   Jurisprudence Evidence of Criminalizing Violence Against Women

There are three jurisprudence items to address in terms of violence against women and girls. The first involves recognizing forced marriage as a crime against humanity. The second is identifying and laying a foundation for the criminalization of the use and recruitment of child soldiers, including females that have been abducted and brought into combat situations. These women have a unique set of needs and suffer in a distinctly different manner from the way abducted males suffer. The third is recognizing sexual violence as a form of terrorism. They must be able to identify that the effects of sexual violence against women and girls extend further than just that individual women or girl and understand that acts of sexual violence against women and girls affect not only that one woman or girl, but her family and community. There is an interrelationship of those accomplishments in the jurisprudence of child soldiers in the foundation and acknowledgment of such for the International Criminal Court's first trial decision for Lubanga. Lubanga was found guilty on March 14, 2012 of the war crimes of enlisting and conscripting children under the age of 15 years and using them to participate actively in hostilities [9].

4   The Evidence Behind Forced Marriage

For young girls in armed conflicts, the burdens can be just as great, or much greater than that of their male counterparts. The child-soldier stereotype is an African boy with an AK-47 but, in fact, a considerable number of forced soldiers are girls. Girls carry out the same tasks as boys, and in most countries, this means carrying weapons and participating in combat [10]. Many are also sexually exploited. In northern Uganda, girls abducted by the Lord's Resistance Army (LRA) are forced to become wives of the commanders and subjected to repeated rape, exposure to sexually transmitted diseases and unwanted pregnancies. According to some estimates, there are currently more than 3000 children of girls who are sexually enslaved by the LRA.

The consequences of being a boy-girl soldier are profound. Children are often separated from their home for long periods of time, and they are severely lacking the familial bonds and community orientation of most. Brutal treatment and exposure to violence cause them emotional and psychological difficulties. Counselors who work with them explain that former child soldiers often suffer from sleep disorders, eating problems, anxiety, and fear for the future and for themselves. Many of them suffer from recurring nightmares about their experiences. In general, the education

of child soldiers is interrupted. After missing years of college, they have trouble going back to school after leaving the military. In some countries, high school fees make schools unaffordable for a child soldier. Without civilian training or education, the immediate challenge for many is to earn a living. This concern is even greater for girl soldiers, who often return with babies.

Rehabilitation and reintegration programs for these girls are urgently needed. They need help locating family, getting medical help, going back to school or vocational training, finding a place to live, and being accepted back into their home community. They also need adults to help them. This means that general prevention strategies must apply equally to boys and girls, as many girls may join armed forces or groups to escape sexual and gender-based violence, early marriage or other harmful practices and exploitation.

Girls face numerous gender-specific consequences from their time spent in armed forces or groups. The stigma these girls face is of a fundamentally different type: being more persistent, terribly more difficult to reduce, and more severe by nature. In essence, many, if not all, of these girls have lost their value as perceived by their communities, especially regarding marriage. Therefore, reintegration programs should seek to establish positive values for girls in their communities and families. In addition, a girl will often have to deal with relationships or feelings that are maintained toward her captor often because he was her "husband" and the father of her child.

Likewise, girls may be seen as an additional burden on their families and of lesser value in terms of their potential for marriage. With little hope of earning an income, limited opportunities to participate in educational and vocational training programs, and without financial support or childcare, girls can become depressed and isolated from their peers and the community at large. Specialized and culturally appropriate responses should be identified or developed for such girls who become depressed and even suicidal; additionally, long-term support may be required. This long-term support can include mental and physical support to the girls, depending on their specific needs.

5   The Origin of Child Soldiers: A Social Phenomenon

In general terms, when one thinks of armed conflicts, regardless of the definition that one attributes to them, it is hardly possible to imagine an eight- or nine-year old boy or girl firing weapons on a combat front. However, the cultural figure of innocence that modern Western societies share as a social imaginary today faces a very different reality from the origin of child soldiers. In this reality, the minor civilians are no longer the victims to be protected as a priority and become efficient belligerents, especially for violent non-state actors.

In the pre-modern wars of medieval Europe, there were times when children were also used to support armies and navies [11]. The pages or squires were auxiliaries of the medieval knights, and on the other hand, there were the drummers and those who brought gunpowder to the cannon crews. In any case, they were not

considered combatants but helpers, and most importantly, they were not taken as legitimate targets nor were they on a combat front. Then, at the time of the second World War, the Hitler Youth trained young people as a political measure to maintain the Nazi regime; but although these already capable young men enlisted in the military forces effectively during their maturity, when the allied forces invaded Germany in the last months of the war, Hitler ordered these young children to fight also, along with the rest [12].

At first reflection on the subject, children have been used as army assistants in times of despair for military leaders when there seemed to be no more human resources. But it is key to highlight here that the very first concrete precedent of child soldiers, that is, not as assistants but actively fighting in a theater of military operations, is precisely in Nazi Germany, perhaps the most notable of genocidal regimes in world history of the last century. Nothing less than the Nazis then opened the antechamber of what we find today as the iron phenomenon of child soldiers at the head of a military-tinged operation and their exponential growth in new forms of warfare.

6   Being a Child Soldier

Crossing a border where guards are ordered to shoot to kill, leaving parents and homes knowing return is not an option, knowing the fear of attack and exploitation, the fear of being captured, imprisoned, or tortured… This is the life of a child soldier. Most of the world's child soldiers are linked to a variety of armed political groups [13]. These include paramilitary groups, militias, and self-defense units that operate, with governmental support, in many of the areas of armed conflict. Others include groups opposed to central governments; groups made up of ethnic and other minorities; factions or social groups fighting against governments or among themselves to defend territories or natural or economic resources. Government use of children has declined in many countries since 2001 but continues in others [14]. Government forces continue to use people under the age of 18 informally as spies or couriers, exposing them to serious harm, including death or reprisals from opposition forces. Some children become targets of government forces when they suspect their involvement in armed opposition groups. Often these children have been arrested, detained, tortured, and killed. Many boys and girls between the ages of 14 and 18 have enlisted voluntarily [15]. Despite this, research shows that they did not have many other options [16]. The armed conflict, the lack of education and work, and the desire to escape situations of domestic violence or sexual exploitation are just some of the reasons that lead to this voluntary recruitment [16, 17]. Many others, in response to violence, suffered in person or by members of their family in armed conflicts. In many countries, the forced recruitment and kidnapping of children link them to armed conflicts continues. Children as young as nine have been kidnapped [18]. Disarmament, Demobilization and Reintegration (DDR) Programs, aimed at child soldiers, have been established in several countries, both during and after armed conflicts. These programs, dedicated to former child soldiers,

aim to provide new opportunities for children, and the possibility of returning to their communities. However, these programs are often underfunded and rarely provided with adequate resources.

Despite the growing evidence of the involvement of girls in armed conflicts, they frequently do not participate in DDR programs due to the invisibility and disenfranchisement; they suffer due to the simple fact that they are females. Girl soldiers are frequently subjected to sexual violence in addition to being involved in combat or other tasks. In some cases, they are stigmatized upon returning to their communities. DDR programs should be built to respond sensitively to their special needs.

A series of international legal mechanisms prevent the participation of children in armed conflicts. Among these is the Optional Protocol to the Convention on the Rights of the Child regarding the participation of minors in armed conflicts, which prohibits the direct use of persons under 18 years of age in combat; forced recruitment under 18 years of age in government forces and all types of recruitment before that age in non-state armed groups [19]. The Rome Statute of the International Criminal Court states that recruitment under the age of 15 is a war crime and provides for the prosecution and punishment of those who promote it. At the Worst Forms of Child Labour Convention in 1999, the International Labour Organization defined child soldiers as being the recruitment of children under 18 years of age for an armed conflict, in a forced or compulsory manner, as one of the worst forms of child labor. International Humanitarian Law (IHL) provides further protection.

7   IHL and Youth in Armed Conflicts

International Humanitarian Law provides general protection to girls in situations of armed conflict because they are civilians who do not participate in hostilities. Likewise, IHL provides special protection due to their age and their particular vulnerability. In this framework, the person under 18 years of age must not be recruited by the armed forces or by armed groups, nor must they participate in hostilities. However, most IHL rules set the age of 15 as the lower limit [20]. Specifically, IHL indicates that, on the one hand, boys and girls recruited and who participate in hostilities enjoy the legal status of combatant and, in the event of capture, benefit from the status of prisoners of war; and on the other hand, those who participate in the hostility, without being combatants under IHL, are subject to the national legislation of the country to which they belong, and in case of their capture, they are included in the category of civilians [21]. In addition, the IHL maintains that if the boy and girl who have participated in the hostilities do not have the right to a particular status, in accordance with the third paragraph of Article 45 of Protocol I, they should minimally benefit from the general protection recognized in Article 75 [22].

8   Culture of Peace and Conflict Resolution: The Best Choice of Weapon

Education is an intrinsic human right and an indispensable means of realizing other human rights. Education is the primary means by which economically and socially marginalized adults and children are lifted out of poverty and fully participate in their communities [23]. Education, the promotion of human rights, democracy, and peace all play a decisive role in the emancipation of women, the protection of children against labor exploitation, hazardous work, their use in armed conflicts, and sexual exploitation. Education is one of the best financial investments states can make, but its importance is not only practical, since having an educated and active mind, with freedom and breadth of thought, is one of the pleasures and rewards of education.

In 2015, the United Nations Security Council passed Resolution 2250, the first to be devoted entirely to recognizing the importance of the participation of young people of both sexes in peacemaking and peacekeeping [23, 24]. Resolution 2250 urges member states to include youth in their institutions and mechanisms to prevent violent conflict and support the work that youth are already doing for peace and security. The resolution also requests the Secretary General to "carry out a study on the progress achieved in relation to the positive contribution of youth to peace processes and conflict resolution, in order to recommend effective responses at the local, national, regional and international" [24].

9   Conclusion

Girls associated with armed forces or groups have specific needs for international protection and assistance that also arise in the processes of disengagement that put an end to their association with such groups, both in armed conflict and post-conflict situations and peacebuilding. At present, there seems to be a certain consensus around the need to develop the operational practice of combating forced marriage of girls to child soldiers. This framework based on a human rights approach must be appropriate for children associated with armed forces or groups. Consequently, internal reintegration mechanisms should be articulated and accessible to girls during an armed conflict. The processes of reintegration of girls associated with armed groups requires psychological work with the girls and the understanding of the specific community environment to which the girls return to is key for reintegration. Indicators are also necessary but should be developed to be sensitive to gender, specifically to girls, so that reintegration can be measured in the short and long term.

Discussion Questions
- How can large governmental bodies like the United Nations go about handling unique and personal situations involving forced marriage and child soldiers?

- What can individuals, organizations, and governing bodies do to support young girls who have been abducted and abused and are now seen as worthless by their communities?
- Where in the world are child soldiers and forced marriage most common? Why might that be?
- What can the average individual do to help support traumatized ex-child soldiers? Is this something that you could or would do? Why? Why not?

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Trans Trafficking and Sex Work in Brazil, Costa Rica, and the USA

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1 Introduction

Human trafficking, also called *Trafficking in Persons* (TIP) is a global phenomenon that generates enormous illegal profits for traffickers and great suffering for those who are trafficked. The covert and criminal nature of human trafficking makes it difficult to assess its pervasiveness and also difficult to apprehend and prosecute traffickers. As in other high-profit, illegal enterprises, a sophisticated social network is part of the process of human trafficking. Organized criminal groups, including national and transnational organized crime organizations, are involved in human trafficking on a large scale, in part, because of its lucrativeness. While low-level traffickers can at times be held accountable, prosecuting and convicting high-level key players in human trafficking networks are difficult. When organized human trafficking systems are not dismantled, trafficking activities will likely continue unchanged. This has economic and other consequences for individuals, neighborhoods, communities, and nations involved [1–4].

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2   Content

2.1   Who Do Traffickers Target in Their Attempts to Recruit?

Human traffickers attempt to recruit members of vulnerable and marginalized groups. Traffickers target young people, people without economic and intellectual means, people who are easily exploited, tricked, lied to, deceived, and manipulated. People of color, young women, and girls are especially desirable to human traffickers. These groups are recruited for a variety of reasons, particularly for the sex trade and various forms of forced labor. Another group at exceptionally high risk for human trafficking, mainly for forced sex work, are members of the transgender, transsexual, Latin American *travesti*, gender non-conforming, and gender fluid communities (to be called "*trans*" communities in this chapter). Because of their extreme vulnerability and marginalization, members of *trans* communities are targeted and highly sought out by traffickers [5].

Why is this the case? Individuals who identify as transgender, transsexual, *travesti,* non-gender conforming, gender fluid, etc. encounter unique challenges in their lives. Incidences of violence, aggression and cruelty, prejudice, and discrimination toward those who identify as *trans* are high and stand in stark contrast to non-trans individuals. The stigmatization and victimization of *trans* individuals can create unsustainable living conditions, thus making them highly susceptible to sex trafficking, including various forms of modern-day sex slavery, sexual exploitation, sex work, coerced sex work, kidnapping, etc. [5–9].

Considering racial, ethnic, religious, and socio-cultural factors across various geo-political realities can help us to better understand how local factors shape macro conditions for members of *trans* communities. Research and theoretical frameworks used to analyze the intersection of human trafficking and *trans* communities are in the early stages. More evidence concerning this issue is needed especially regarding the characteristics it takes on in different countries and geographic realities. Because well over 50 percent of the human trafficking in the *trans* community is trafficking for sex work, the primary focus of this chapter is specifically on trafficking for sex work, and not on other forms of human trafficking such as forced labor, bondage, child marriage, organ harvesting, etc.

Matters related to trafficking for sex work in *trans* communities are laden with cultural nuances. Legal prohibitions and sanctions reflect societal biases and prejudices. A good number of laws and regulations are intended to subjugate, control, and suppress *trans* populations [10]. Only recently have advocacy groups and rights-based organizations begun to make inroads to change the landscape. National, regional, and state legislation pertaining to the rights and advocacy initiatives can create considerably different local realities. Exploring the landscape of trafficking for sex work of those in *trans communities* in different localities can inform and enlighten academics, policy makers, and practitioners.

The need to better understand trafficking for sex work in *trans* communities is apparent as the existing evidence on the topic is minimal [11, 12]. Also, because conditions and circumstances differ from county to country, a cross-national

perspective is particularly useful. The aim of this chapter is to explore the intersection of *trans* trafficking for sex work in three nations in the Western hemisphere—Brazil, Costa Rica, and the United States. While these three nations differ in size, level of development, policy, language, socio-cultural values, and norms, such an analysis offers the opportunity to better understand global trafficking patterns and to compare and contrast how different societies endeavor to confront and resolve these important and timely social issues. For a topic such as this in great need of exploration, it is important to relay as much culturally specific information as possible to explore cross-national differences and well as similarities.

2.2 Global *Trans* Sex Trade

This section considers the broad topic of the global *trans* sex trade and its intersection with the countries of interest. The pressures of geo-political systems which favor capitalist accumulation, profit, and privatization have increased structural inequalities, poverty and put an increasing number of *trans* persons at-risk for trafficking. Exploring how Brazil, Costa Rica, and the USA fit into the global *trans* sex trade allows us to consider the context and movement of "human goods" within the capitalist world system. *Trans* persons are part of the supply chain of human resources needed to satisfy the growing market for this very lucrative enterprise.

The 2020 *United Nations Global Report on Trafficking in Persons* published by the United Nations Office on Drugs and Crime (UNODC) responds to the UN General Assembly 2010 Global Plan of Action to Combat Trafficking in Persons [13]. The global phenomenon of "trafficking in persons" is a "hidden crime" where it is often difficult to identify both perpetrators and victims, as well as the overarching multinational crime networks leading the processes. Transnational organized crime groups that engage in the trafficking of *trans* persons for profit are more sophisticated, business-like, and calibrated than smaller, individual non-networked traffickers operating in isolation and on their own. Reports show that traffickers connected to high-level organized crime ventures use more violent tactics than small groups and often simultaneously engage in other lucrative criminal activities such as drug trafficking and money laundering [13]. Moreover, organized criminal groups and cartels that are networked globally are difficult to dismantle and earn far greater profits in trafficking than small non-networked groups [13]. Hence, the incentives for transnational criminal groups to continue their trafficking practices, undaunted, are great.

Understanding trafficking flows and patterns and how this crime is hidden is a first step. Understanding the business economics of trafficking and the large number of people involved in the transit, smuggling and accommodation of those trafficked are the second step. The enormity of the enterprise could not persist without the collusion and complicity of multiple actors, from border guards, to landlords, to government officials, to friends, family, and acquaintances of those trafficked. These accomplices are paid for their services and for their silence [13].

Trans persons are targeted almost exclusively for sexual exploitation and the sex trade, and rarely for forced labor (e.g., on plantations, mines, quarries, homes) or forced criminality (e.g., begging, theft, drug runners). Within the category of *trans* person, traffickers principally target "'*trans* women," especially those in severe economic need and those alienated from family. While *trans* men and boys are also sought out by traffickers for sex work, they are a more "invisible" subgroup and information on them is minimal [14]. In this chapter, we focus on the trafficking of "*trans* women." We use the term "*trans* women" to refer to those within the *trans* spectrum who have been assigned male sex at birth but who develop a female gender identity.

The transregional flow of *trans* women trafficked across borders can deviate somewhat from patterns seen in non-trans (cisgender) women trafficked. Indeed, due to sex trade centers and other establishments that cater to customers seeking *trans* women as well as cultural, linguistic, and other factors, destination countries for traffickers of *trans* women can differ considerably from the destination countries for non-trans (cisgender) women [14].

As a general rule internal trafficking within countries flows from rural to urban areas and trafficking internationally across borders flows from less developed to more developed countries [15]. All forms of human trafficking increases in areas with political, economic, social or ecological upheavals, when a country is in crisis, including military crises and conflicts, and during environmental or natural disasters [16].

Countries in Latin America and the Caribbean are considered both "a major source, transit, and destination countries for trafficking victims" (p. 4) [16]. *Trans* women throughout those regions are particularly vulnerable to trafficking for sex work. Factors exist that would entice *trans* women to accept offers from traffickers and to be pulled toward the hope of finding a better life. For those living in the periphery, the appearance of wealth and opportunity in Europe and the United States is a pull factor fed by images on television, the Internet, and social media [16].

Traffickers search out geographical areas where *trans* women are particularly defenseless and in danger of harm. Areas with strong cultural or religious stigmas against gender diversity and countries with severe laws that criminalize LBGTQI+ and *trans* behavior are sought out. These areas provide fertile ground for traffickers to entice impressionable *trans* women to escape their restrictive surroundings. Traffickers use the lure of better prospects and easy access to services and money as bait to tempt *trans* women to agree to travel to preferred destination countries, e.g., in Europe [6, 14].

The trickery, lies, fraud, and force traffickers use to subjugate victims is ubiquitous. They lure victims by offering them enticing deals to convince them to migrate, all the while disguising the fact that upon arrival they will be in debt to them and trapped in sexual servitude. A growing demand for *trans* sex workers in certain geographical areas is an element that is fueling the need to increase trafficking activities. From Latin America, it is not uncommon for trafficked persons to be transported to Spain and Portugal [17].

   Good social services in Western Europe and the possibility of accessing general healthcare, plastic surgery, and other forms of physical enhancement are used as pull factors. *Trans* persons from countries that were former colonies to Western European countries have increased rates of trafficking and are destination countries for some former colonies. The reality is that prosperous Western European cities have large sex markets. Sex tourism in southern Spain is one example. Other markets for sex trade and sex tourism exist in cities throughout affluent urban areas in Western Europe [17].

2.3   Global Organized Crime Networks

Global organized crime networks seeking people to exploit follow the rules of the market by harvesting vulnerable human beings for many forms of human trafficking. Large multinational crime networks are able to engage in other profitable activities and trade in a host of other goods and products such as drugs, stolen art, and money laundering. These arrangements provide global crime networks with the greatest amount of money and the ability to maximize profits through the capital accumulation of diverse commodities. Global human trafficking is a prominent area of study by governments and scholars across the world although the developed world has conducted much of the research to date. Research on the *trans* trafficking experience in general is limited, and most of the studies that exist have been carried out in Europe and North America (p. 132) [18]. This northern-centric view is skewed and fails to consider varying constructs that have idiosyncratic meanings in non-northern geo-political, economic, and cultural environments [14]. Cross-national research to identify the operations of global organized crime networks and the economic incentives to grow *trans* trafficking enterprises is needed. Investigation on how the growth and flow of *trans* trafficking are organized especially in countries with strong social stigma and severe laws criminalizing same-sex relationships and *trans* identities is also needed.

2.4   Coerced Sex Work Versus Free Choice

Political climate, supply and demand, morality, cultural mandates, and economic circumstances feed into the debate around sex work in any particular country. For the purposes of analysis, most countries make a distinction between *coerced* and *free choice* sex work and draw rather rigid dichotomous lines between the two. In countries where sex work is legal, the temptation is to view sex workers as having complete free will in the choice of this occupation. In countries where sex work is illegal, the temptation is to view sex workers as being a part of an illicit, unlawful, criminal activity. When sex work is illegal, sex workers are seen as being complicit in carrying out the practice. In fact, sex workers can be charged with various crimes, convicted and imprisoned, sometimes for long periods of time [16].

In both legal and illegal sex work, the possibility and likelihood of the sex worker being coerced into it through deceit is a distinct possibility. Debt bondage, violence, and the threat of harm or murder to relatives and friends are common mechanisms for continued subjugation. This likelihood increases when the sex worker is a member of a highly discriminated and vulnerable group. Some scholars argue that the "dichotomy between coerced and freewill sex work may be misleading" as are "the blurred boundaries between migration and human trafficking" (p. 78) [6]. Stigma surrounding sex work is ubiquitous whether it is perceived as coerced or free will sex work (p. 79) [6]. For *trans* persons who are stigmatized and discriminated against from a young age, the lines between coerced and free will sex work are even more clouded and distorted [12].

2.5 Terminology

Using the correct terminology to refer to persons within the *trans* spectrum is important. Terms change over time and cultural differences exist from region to region and group to group. The correct terms to use are those chosen by the individual. Preference is given to terms chosen by the person or the group, rather than those chosen by government officials, researchers, or scholars. In this chapter, we adopt the term "*trans* woman" to refer to a woman who was assigned male at birth. In Brazil and Latin America, some persons who have been assigned male sex at birth but who develop a female gender identity refer to themselves as *travesti* [14, 19]. We intentionally adopt the Latin American concept of *travesti* which we describe in detail later in this chapter. While many other terms exist, in this chapter, we use the terms *travesti, trans* women, *trans* men, and *trans* persons to refer to those in the *trans* spectrum.

2.6 *Trans*-Stigma

Ample evidence exists to show that persons from all segments of the LGBTQI+ spectrum are considered to be a highly stigmatized group. This fact alone can create marginalization and exclusion from mainstream society and it puts this population at an increased risk for exploitation [6, 12, 20]. Friends and family can banish and ostracize those who identify as LGBTQI+ thus leaving members of those groups even more vulnerable to abuse, manipulation, and mistreatment [8]. To compound the issue, law enforcement, health care workers, social service workers, and educators are often poorly informed about the vulnerability of LGBTQI+ persons [21]. Prejudice regarding LBGTQI+ groups is pervasive in the wider society. Unfortunately, some human service professionals and paraprofessionals carry the prejudices and stereotypes prevalent in society into the workplace and on the job [11, 20].

Trans persons of color, immigrants, migrants, and refugees are at an even higher risk for exploitation. This specific population is fearful of deportation, of not being

taken seriously, and of further marginalization due to multiple variables which make them at-high risk for oppression, harassment, violence, and murder [8].

2.7   *Trans* Teens

Research on adolescents in the USA who identify as gender diverse are at increased risk for bullying, hate crimes, and intimidation. Those who identify as *trans* are an even more vulnerable subgroup. *Trans* teens can be rejected by their families, thrown out of their homes, or run away, forcing them to live on the streets or in temporary or unsafe housing. They can find themselves in situations that put them at-risk for homelessness, poverty, and a lack of access to nutritious food and medical treatment. Safety hazards and the temptation to engage in unlawful activity are significant. Additionally, they run the possibility of being coerced into the sex trade or may choose to do so voluntarily [8, 12].

Much has been written about the plight of gender-diverse teens reverting to *transactional* or su*rvival* sex, where sex is exchanged for food, a place to sleep, money, and other goods. Transactional sex among *trans* youth is documented and it may lead to commercial sex work and prostitution [8]. In the USA, sex work and prostitution are illegal and engaging in any aspect of this behavior can be considered a crime. In these cases, anyone caught participating in sex work are treated as criminals, rather than as victims [12].

2.8   *Trans* Trafficking Specific Research

Many of the studies carried out on the risk of trafficking within the LGBTQI+ population aggregate the data without the possibility of looking specifically at those who identify as *trans*. While the assumption is that studies of LGBTQI+ groups include *trans* persons in their samples, it is usually not possible to ascertain specific numbers or to qualify specific features of *trans* persons in the studies. Few U.S. studies focus exclusively on trafficking in the *trans* community and the paucity of research in this area is surprising [5, 11, 22].

The lack of research regarding the trafficking of *trans* persons is attributed, in part, to language in the *Palermo Protocol* (the 2000 Protocol to Prevent, Suppress, and Punish Trafficking in Persons, Especially Women and Children) which profiles the typical trafficking victim is a "cisgender female" as well as the lack of recognition of *trans* women as "females" p.182 [11]. Sadly, the lack of evidence of the trafficking of *trans* persons carries through to a lack of services available to protect, intercept, and attend to the essential requirements of those *trans* persons, who are trafficked [23].

2.9   The *Trans* Tipping Point

The visibility of celebrity *trans* women has increased exponentially on television, streaming, and social media sites to the point where it was termed the "*trans tipping point*" [24]. *Trans* media figures have come to dominate the *trans* identity giving the impression that this type of *trans* woman makes up a larger percentage of the population than they actually do. Celebrity *trans* women are polished, coiffed, and manicured *trans* women who appear to have all of the resources needed to live a Hollywood-like existence. Because they are in the limelight, the tendency is to transform them into Western cultural icons for those who identify as *trans* women. A hypervisibility of this tiny percentage of *trans* women who are media celebrities can influence the overall perception of *trans* figs [24]. Mia Fischer argues that these representations are "fetishistic media spectacles" that characterize *trans* women in accordance with mainstream gender ideals. In fact, privileged *trans* women often conform to Western "cisgender" ideals of beauty. They may undergo cosmetic, surgical procedures, and other costly treatments to help them attain this goal. The creation of *trans* media figures who appear to conform to mainstream ideals is the goal.

In actuality, celebrity *trans* women make up a tiny fraction of the larger *trans* community, while the mass media depicts this small minority as the norm. When *trans* women conform to look and act like cis-women, they are viewed as safe and normal, so to speak. This categorization of *trans* women as narrow and static hides the high percentage of non-celebrity *trans* women who suffer from poverty, discrimination, harassment, and violence that many members of the *trans* community experience [25].

Trans women are the most vulnerable group of LBGTQ+ persons. In the United States and in Latin America, more and more *trans* women, mostly *trans* women of color, are murdered each year thus revealing the contradiction between the mass media image of *trans* women and their actual lived experience. Some *trans* activists and advocates proport that the increased visibility of celebrity *trans* women in the media has heightened anger and rage against this population and fueled greater intolerance [24].

2.10   The Concept of *Travesti* in Latin America

The Latin American concept of *travesti* needs a special description here because the term is not well understood outside of Latin America and has frequently been misinterpreted. Widespread in Brazil and Costa Rica, the word *travesti* was created to describe a construct that is entirely embedded in the cultural context of Latin America. While neither Portuguese nor Spanish, the word "*travesti*" was created to approximate both Spanish and Portuguese and the term is widely used and understood across Latin America. The word *travesti* cannot be translated into any other language and has often been confused with the English word transvestite, or cross-dresser, which it is not [26].

The figure of the *travesti* has existed in Latin America for decades. The persons themselves decided to adopt the term *travesti* to describe themselves. A *travesti* is a person who was assigned male at birth, but who develops a gender identity consistent with expressions of femininity. While *travesti* may inject silicone to approximate female curves and they may use some female hormones, usually they do not desire gender realignment surgery because they, in most cases, consider themselves men [27]. *Travesti* can be described as those who are "assigned male sex at birth and who feminize their bodies, dress, and behavior; prefer feminine pronouns and forms of address; and often make significant bodily transformations by injecting silicone or taking hormonal treatments but do not necessarily seek sex-reassignment surgery" p. 306 [26]. In Latin America those who identify as *transgender* or *transsexual* often seek a legal and social change of gender and sex, while *travesti* usually do not.

For decades, *travesti* were associated with prostitution and the sex trade in Brazil and some other parts of Latin America, including Costa Rica. As a part of this image, *travesti* were often linked to crime and violence and viewed as potentially dangerous. They became targets of police raids, harassed and, at times, charged incorrectly with crimes [26, 28].

While Portuguese is the official national language in Brazil, other languages, including many indigenous languages and dialects are spoken throughout the country. The gender-diverse community in Brazil has come to consider language as an ideology that can foster inclusion. The history of the *travesti* and broader *trans* community is laden with ways in which Brazilians use language to protest against religious traditionalists and conservative political beliefs which privileges cisgender mainstream norms. In response to discrimination and prejudice, *travesti* built their own form of communication, a coded language to protect themselves, their work, and their lives in a society that excluded them. *Pajuba*, which is a mix of Portuguese, Yoruba and other African languages is a language originally developed by African, Caribbean, and indigenous groups who practiced traditional religions in some areas of Brazil. Brazilian *travesti*, especially in the Rio area, banded together, adopted this secret language, added many of their own expressions to it and syncretized it with group-specific internal expressions and colloquialisms. *Travesti* use this coded language for protection when they need to communicate without outsiders understanding them. They also use it as banner of pride and identification [26, 28–31].

At a certain point in time*, travesti* throughout Latin America organized even more to advocate for themselves. They grew in solidarity, unity and camaraderie and sought to be accepted by society [28]. *Travesti* increasingly opposed and challenged their mistreatment and the prejudice toward them and created an actual resistance movement. They adopted a political identity intended to break with discriminatory paradigms held against them in Latin America [30]. Over time*, travesti* slowly began to be perceived differently and were somewhat more accepted by certain aspects of Brazilian society [28]. To support the self-determination of this group and to initiate international discussion of the topic, we intentionally include the concept of *travesti* throughout this chapter as an important element of the *trans* spectrum.

2.11   Trafficking of *Travesti* and Those Within the Trans Spectrum in Latin America

The trafficking of *travesti* and all of those in the *trans* spectrum in Latin America is complex as it is closely related to advanced capitalism and the post-Covid reality that we face today as a society. The expansion of the market economy in the global world system has transformed *travesti* and *trans* women into objects of male pleasure. This trafficking is closely tied to global prostitution and sex tourism which have grown significantly in the capitalist world system. This economic model which centers on the production of wealth for a few is possible through the exploitation of certain segments of society, including groups such as *travesti* and *trans* women. This subjugation of vulnerable groups deprives them of their personal freedom, autonomy, and dignity as well as stripping them of control over their bodies and their identities [19]. Considered a form of modern slavery, trafficking of self-identified *travesti* and *trans* women is a part of organized crime networks and second only to drug trafficking in its profitability. In Latin America, this crime, aimed specifically at sexual exploitation of the *trans* population, primarily victimizes *travesti* and *trans* women, rather than *trans* men.

A significant underreporting of cases of trafficking of *travesti* and *trans* women including violent crimes and murder against them exists in Latin America, including Brazil and Costa Rica. The International Labor Organization [32] sees poverty as the primary determining factor in the recruitment of *travesti* and *trans* women by traffickers into the sex trade. The phenomenon is multidimensional and is shaped by globalization, the absence of job opportunities, gender discrimination, political, economic and civil instability in the region, undocumented emigration, sex tourism, weak laws ,and even weaker enforcement of laws [32]. The trafficking, coercion and exploitation of *travesti* and *trans* women as well as incidences of violence toward them, even murder are conditions which do not elicit a great deal of sympathy from many in mainstream society. Structural discrimination, prejudice, and questions of morality contribute to the lack of compassion, empathy, and outcry regarding these issues. Data from Latin America including Brazil and Costa Rica indicate that violent events (including self-directed aggression) have a high prevalence in this population, although official records do not include accurate statistics, thus making it difficult to build social policies to confront the phenomenon [33, 34].

Despite the complexity of the trafficking phenomenon, it is understood that traffickers often lure *travesti* and *trans* women to work outside of Latin America and Brazil in highly developed Western European countries and the USA, with the promise of a better life, the opportunity to access gender reassignment surgeries, the assurance of a decent job, easy money, etc. Traffickers aim for trafficking connections in certain countries especially Spain, Italy, France, and Portugal. The language and culture are similar and some laws in those countries offer other assurances. The USA is also a trafficking destination from Latin America and Brazil. These developed countries are excellent locations of sexual consumption of *trans*-Latin women [35].

When *travesti* and *trans* women are trafficked internationally and do not know the language spoken at the new location, the situation becomes even more critical. The only way to survive is to acquiesce to the demands of the smuggler and typically, money, and any form of identification (e.g., passports, government-issued ID cards) are withheld. Upon arrival abroad, the trafficked person is forced to assume all debts of the transfer. Indeed, many *travesti* and *trans* women who are trafficked for the purpose of sexual exploitation see it as a way out of unlivable conditions in Latin America. This difficult reality is characterized by an environment of rejection, misunderstanding, prejudice. and structural violence [36] which often leads members of this group to take on roles as sex workers in order to survive social harm [34, 37].

In this context, the trafficking of *travesti* and *trans* women in Brazil and Costa Rica for sexual exploitation occurs with the explicit intention of forcing them into sex work and other forms of sexual exploitation in both the domestic and international markets. This phenomenon is still poorly documented in the literature and in the popular press due, in part, to the ongoing invisibility of the victims and the denial of their recognition as legitimate citizens.

2.12 Obstacles for *Travesti* and *Trans* Women in Latin America

Regarding quantitative data, Vasconcelos [9] points out that in 2019 across Latin America 4% of all trafficking victims identified as either *travesti* or *trans* women. In real numbers, this is about 15,000 *trans* victims of trafficking living abroad. However, given the lack of accurate data it is difficult to fully understand the scope of the problem. Information shared by the President of the Asociación Transvida-Costa Rica (*Trans* Association of Costa Rica) [38], *travesti* and *trans* women in Latin America are at-risk for sexual exploitation and human trafficking mainly for two reasons: (1) rejection by their families and (2) difficulty accessing the education and the labor market [38].

Regarding family rejection, this occurs when the person either "comes out" or is "found out" by family members, friends, or neighbors to have an alternative lifestyle. For mainstream Latin American society, this is considered a violation of cisgender standards since they do not fit into so-called traditional social positions. According to Carvalho [28], this same confusion makes them targets of prejudice among family and friends and generates discrimination in educational systems and in the labor market. This anthropo-binary logic makes it difficult for *travesti* and *trans* women to access labor or educational rights, which subsequently pushes them into specific niches generally linked to the sex trade, prostitution, massage parlors, and beauty services.

A general lack of understanding, fear, and societal disrespect for *travesti* and *trans* women is a barrier to employment, thus forcing them to revert to the sex trade for survival. Few Latin American employers welcome *travesti* or *trans* women as part of their work force. Today, the estimate is that almost nine out of ten (90%) *travesti* and *trans* women are engaged in prostitution or some type of sex work

REDLACTRANS [39]. While formal mandates technically give everyone access to the labor market, few laws protect the rights of *travesti* and *trans* women or guarantee their fair access to education and employment.

The average lifespan for this vulnerable population of *travesti* and *trans* women in Latin America is about 35 years of age. Fundamentalist and neo-Pentecostal groups have declared themselves against the rights of sexually and gender-diverse people, and the lack of interest on the part of the executive powers on the subject, is even greater. Given the precariousness and inefficiency of Latin American legislation and public policy and additionally the absence of regulations, the conditions of systematic harm are great [40]. In light of these factors, the vulnerability of this group and their low life expectancy is understandable.

Due to the above conditions, the need to develop protective and inclusive measures aimed at this part of society is evident, otherwise vulnerability will be aggravated and exclusion will be perpetuated, since updated data from platforms such as REDLACTRANS [39] indicate that Brazil leads the ranking of deaths of *travesti* and *trans* women. In 2021 alone, 141 *travesti* and *trans* women were murdered [29]. It is clear that *travesti* and *trans* women who are victims of trafficking are, above all, victims of social abandonment from the lack of public policies. Interestingly, many of those who have experienced sexual exploitation outside Latin America prefer not to return, because they believe they will not have job opportunities, medical care or, importantly, social and family support.

Several factors differentiate the trafficking of *travesti* and *trans* women from the trafficking of cisgender women in Latin America. Not only will more trafficked *travesti* and *trans* women work in the sex market, but also, they will be subjected to greater sexual exploitation and debt bondage for longer periods of time than cisgender women. Cisgender women who are trafficked usually go free once their debts are paid, while *travesti* and *trans* women who are trafficked are rarely released by traffickers [41].

Expanding the discussion on the exploitation of *travesti* and *trans* women in Latin America is needed. We know that some trafficking recruiters are part of the economic elite. In fact, they can be men or women, married couples, or single individuals. Some traffickers are owners or partners in nightclubs or other establishments linked to networks that promote human trafficking.

A tactic used by both male and female *trans* trafficking recruiters is through friendship and affection. They may be a part of the circle of friends, or even relatives, of the victim. In these cases, the victim trusts the recruiters and may even have close emotional ties with them. These recruiters are often well-educated individuals with persuasive and seductive personalities. Some of them are actually businesspeople who work for established trafficking organizations. Recruiters can appear wealthy. They may own or claim to own large houses, boats, bars, and (fake) dating agencies. They may have or pretend to have powerful roles in industries such as fashion, beauty, or modeling. Trafficking recruiters propose deals and opportunities to the *trans* women that intentionally offer them the hope of improving the quality of their lives. Traffickers also lure *travesti* and *trans* women with the "threat or use of force, coercion, kidnapping, fraud, deceit, abuse of power or of a situation of vulnerability,

or the granting of paid benefits in exchange for control of the victim's life" as reported by a UNDOC study in 2018 [3].

After considering the issue of trafficking of *travesti* and *trans* women in Latin America, and in thinking about the national legislation needed regarding the criminal activity surrounding *trans* trafficking, we have determined that it is not sufficient to only address the phenomenon of trafficking. The perpetuation and reproduction of *trans* trafficking are shaped by the broad social relations, including discrimination and structural social violence as well as the ideology of social indifference that exists vis-à-vis this vulnerable population.

2.13   *Trans* Trafficking in Brazil and Costa Rica in Context

The problem of *trans* trafficking in Latin America, including Brazil and Costa Rica is associated with the historical oppression of sexuality and gender of *travesti* and *trans* women and the commodification of their bodies. Importantly, it is related to structural social determinants such as poverty, inequality among regions, lack of work and decent wages, inefficiency of the State to enact public policies and to protect fundamental human rights. The underlying social context experienced by *travesti* and *trans* women in situations of human trafficking and irregular migration is related to the precariousness of labor relations and the lack of effective government policies [42].

It is important to consider social transformations produced by globalized capital in regard to the impact on the lives of workers and the feminization of poverty. Cis-patriarchal power structures reproduce practices that accentuate different forms of violence against *travesti* and *trans* women, exacerbating prejudice and xenophobia. To create effective policies to combat trafficking in Latin America, it is necessary for governments to implement programs using a multidimensional, intersectoral approach as the foundation.

2.14   *Trans* and *Travesti* Resistance

While liberal and progressive ideas have permeated the *trans* and *travesti* rights discourse in Brazil, Costa Rica, and the USA for well over a decade, conservative and even reactionary thinking has also infiltrated segments of society including religious and political discourse in a kind of backlash. Attempts to promote equality and defend human rights for all *trans*, *travesti* and LGBTQI+ communities were sought out through legal means, including legal recognition, using a right-based approach [26].

Gains in gender-based rights legislation have been significant across the Americas, in the last 20 years, with some achievements more recent than others. In Latin America, the Inter-American Court of Human Rights ruled in 2018 that member countries to the American Convention on Human Rights would be required to allow same-sex couples to marry and other rights for *trans* persons have been

won since then as well. In the United States, the US Supreme court ruled in 2015 that same-sex marriage is a right guaranteed by the Constitution. At that point, all US States and territories, including those that had not legalized same-sex marriage, were required to make same-sex marriage legal [43].

Despite advances in legislation across the Americas for LGBTQI+ and *trans* persons, legislation cannot guarantee absolute safety, fairness or freedom from discrimination. Here is where resistance from below and among local activists and advocates takes on a particular role.

The resistance movement in Latin America to support those in the *trans* and *travesti* communities is not only widespread and pervasive across multiple countries, but also vital to the cultural transformation needed to make meaningful and authentic change.

2.15 Conservative Political Movements and Ideology in the Americas

Conservative political movements and ideas in the USA, Costa Rica, and Brazil have touted increasing anti LGBTQI+ hate rhetoric and fanaticism. Conservative leaders throughout the Americas have repeatedly made their transphobic views public. Disdain for *trans* and gender-diverse persons from conservative factions of society stokes fear increases intolerance and spurs acts of violence toward *trans* persons [44]. The strength of today's conservative political movement manifests itself across the Americas. Visible display of *trans* prejudice, hate crimes, violence and murders is increasing [5]. Conservative leaders and politicians in the USA, Brazil, and Costa Rica are emboldened to lash out and to stoke fear and apprehension in regard to *trans* and non-binary/gender-diverse persons. While rates of *trans* violence and discrimination person are clearly increasing, accurate data are limited and the underreporting of incidents is the norm. *Trans* persons living in poverty and trans persons of racial and ethnic minorities are even more at-risk [14, 20].

In the USA, the executive branch of government and the courts have shown a commitment to equality for *trans* persons. While Obama era policies strove to end discrimination and promote equal rights for *trans* persons (in healthcare, the military, housing, family, and employment policies), the Trump era rolled back as many policies as possible causing insecurity and stoking fear and uncertainty in the durability of these rights. Trump tried to remove gender identity from the umbrella of key civil rights. US President Joe Biden recommitted to protect the civil rights of trans persons [45]. However, as long as policymaking for *trans* persons is subject to the whims of ideology, their civil rights are not assured. Even the courts, including decisions made by the U.S. Supreme Court, are tied to the ideological persuasion of its members. The current conservative makeup of the U.S. Supreme Court does not bode well for the promotion of civil rights for *trans* persons. In the U.S. some anti-trafficking initiatives are connected to anti-prostitution and the push to end all sex work [46]. For this reason, some recent anti-trafficking laws in the U.S. (e.g.,

FOSTA/SESTA) aimed to curb sex trafficking online are controversial among anti-trafficking advocates [10].

Conservative political movements are also present in Costa Rica and Brazil. The election of populist leaders in Brazil with Jair Bolsonaro in 2018 and in Costa Rica with Rodrigo Chaves in 2022 demonstrates increasing conservative ideals and antiestablishment sentiment. Conservative political movements across the Americas are focused on business profits, the economy, individual rights, and religious morality, while the protection of civil rights and social policy takes on secondary importance. In a conservative climate, anti-trafficking efforts for *trans* and other persons take a back seat to the economy. Even leaders no longer in power such as Jair Bolsonaro in Brazil and Donald Trump in the USA have a lasting effect on the pervasive climate of hate toward gender-diverse persons. The consequences of policies and a cultural environment engendering fear and terror toward all diverse groups will continue to prevail in the public eye for years [45].

Dissatisfaction with democracy, rejection of the political status quo, and those perceived as political elites characterize the shift toward conservativism. The election of those who have never served in government but who could be perceived as business savvy also exemplifies conservative populist movements. Anti-regulation is pervasive since regulation by government is viewed as potentially blocking the freedom of business interests. A lack of concern for human rights (including *trans* rights, indigenous rights, civil rights) and rights for persons at-risk for and subjected to human trafficking typifies populist political movements.

While awareness of issues related to members of the *trans* and non-binary community have increased over the last decade, a paucity of accurate evidence-based information exists regarding this population. The decades-long pathologizing of gender identity differences as "gender dysphoria" and the labeling of it as a disorder within biomedicine promotes and legitimizes stigma toward *trans* persons, also called *trans-stigma*. Elite Western cultural norms and beliefs tend to dominate discussions regarding human trafficking, gender identity, and sex work (coerced and voluntary). These norms are characterized by white, male, heterosexual, cisgender views. In fact, most of the ideas which make up the dominant belief system are those of white, male, heterosexual, cisgender persons [46, 47]. A look at the history of slavery and colonialism in the USA, Brazil, and Costa Rica reveals how structural patterns and social relations reproduced privilege and wealth for those in power and created dramatic social inequities.

The following section provides a look at country-specific *trans* trafficking circumstances in Brazil, Costa Rica, and the USA.

2.16 Brazil and the Situational Status of Trans-Human Trafficking

The federal republic of Brazil is the fifth largest country in the world with 8.5 million square kilometers (3,300,000 sq. mi) and over 217 million people. Its vastness is home to great ecological and biodiversity with enormous tropical rainforests and

many protected areas. It is distinguished by great diversity in its ethnic, racial, and indigenous makeup from both indigenous populations and huge in-migration. Brazil has a well conceptualized and organized, universal national health system called the Sistema Único de Saúde (SUS), but it suffers of late from underfunding. In 2021, the literacy rate in Brazil reached 99% and public education is free and mandatory. The life expectancy for females is 80 years old and for males 73 [48].

Legislation prohibiting sexual exploitation, human trafficking, and crimes against personal freedom is a part of the penal code in Brazil. It considers the following acts illegal: the enticement, transport, purchase, and reception of persons in situations of serious threat, violence, coercion, or fraud with the aim of removing organs or body parts, or subjecting persons to work under conditions analogous to slavery, illegal adoption, or sexual exploitation. In 2016, Brazilian Law 13.344 granted protection to a wider range of vulnerable groups, including all trafficked persons, not only women and children. The 2016 law carries more severe penalties for perpetrators. In addition to punishing the crime of human trafficking, sanctions against the perpetrators of human trafficking, both those directly and indirectly involved, were added. Also, a support network protecting all victims of human trafficking and exploitation was created [49].

While attention is being given to the broad issue of human trafficking in Brazil, no specific legislation exists to protect those members of the *travesti* and *trans* populations. Also, it is not possible to disaggregate data on gender identity or trans-specific human trafficking within the data set, thus making it impossible to count the exact number of *trans* and *travesti* persons trafficked (United Nations Office on Drugs and Crime [43].

Only now are measures aimed at controlling and preventing the sexual exploitation specific to the *trans* population starting to be put in place. Some state-sponsored projects in certain areas of Brazil have been created to reduce the vulnerability of this group. Model programs exist in the States of São Paulo and Rio de Janeiro. One program in São Paulo offers scholarships to *travesti* and *trans* women and another one offers educational and employment opportunities. A non-governmental organization in Rio de Janeiro called *Prepara Nem* offers education, training, and job search services for *trans* and *travesti* persons. *ANTRA*, the National Association of *Travesti* and *Trans* Persons (*Associação Nacional de Travestis e Transexuais*) is the largest non-governmental trans-specific organization in Brazil [50]. Their work focuses on confronting violence, offering legal guidance, health care and employment services to those who identify as *trans* and *travestis*. In light of the lack of services provided by the Brazilian government, the *ANTRA* group provides for a critically important void in services [50].

Despite the programs noted above, Brazil as a whole still lacks public policies for those persons across the *trans* spectrum. While the Health Ministry launched the "National Policy for the Comprehensive Health of Lesbians, Gays, Bisexuals and Transsexuals" in 2013, undoubtedly an important milestone for the country, the day-to-day implementation of its mandates is far from being achieved [50, 51].

2.17   Costa Rica and the Situational Status of Trans-Human Trafficking

While Costa Rica is an extremely small country when compared to Brazil and the United States, it has unique characteristics that brought it to our attention for analysis. Costa Ricans invest much of their economic resources in the tutelage of its nature, its animals, and its people, including the indigenous populations. While it occupies only 0.03 percent of the land surface (Costa Rica has only 51,100 km^2), it concentrates about 6 percent of the world's biodiversity [52]. The population of Costa Rica is barely over 5 million people with a life expectancy of 80–83 years for women and 78 years for men [52]. The overall mortality rate is decreasing, including a decrease in the infant mortality rate. Costa Rica is home to the Nicoya Peninsula, one of the few *Blue Zones* in the world where people are healthy with extremely long lifespans [53].

Costa Ricans disbanded its military in 1948 and added a clause in its constitution not to reinstate one. It funnels some of its excess resources into public services, including education and healthcare. The literacy rate in Costa Rica is 97%, one of the highest in the area and public education has been free and compulsory since 1869. The national health care system is well organized and administered and is considered one of the best health care systems in the area [54]. In 2016, Costa Rica became the first country in the world to sign onto the National Pact for the Sustainable Development Goals (SDGs) promoted by the United Nations System (UNS). Support of this forward-thinking initiative demonstrates Costa Rican dedication and commitment to peace, disarmament, human rights, democracy as well as its investment in its people and the environment [55].

Along these progressive lines is Costa Rica's creation of the *LGBTI+ Commissioner* in 2018. This *Commissioner* is a member of the executive branch of government, receives input from government institutions and is dedicated to issues pertaining to the human rights of the LGBTI+ population in Costa Rica [42]. In terms of public policy advancement, the Ministries of Health and Education jointly established new definitions for *trans* populations that are emancipatory rather than pathologizing. The current legislation recognizes and explicitly uses the term *travesti* to acknowledge and affirm the political identity of those persons who manifest a gender expression opposite from the biological identity assigned to them at birth [42].

While the health and social security systems are working to create a mechanism to guarantee gender reassignment procedures through the national health system, *trans* persons do not have access to gender reassignment surgery through the national healthcare system. They are allowed to seek out private care. Some *trans* persons travel outside of Costa Rica to institutions in other countries such as in Spain, Ecuador, or Cuba where both legitimate and black market services are available. A comprehensive mechanism to guarantee health access for *trans* people, such as training programs for health teams on gender identity, human rights, and comprehensive care for trans people is still lacking. However, a number of legal and

institutional supports to protect the rights of trans people are in place. Some examples are:

- Article 33 of the Constitution states "everyone is equal before the law and no discrimination contrary to human dignity may be practiced." A "Prohibition of Discrimination" in the labor code bans discrimination at work based on sexual orientation or gender identity.
- Regulations regarding photographs for government-issued identity cards and passports give every person the right to have their image and gender identity respected.
- Executive Decree 34399 declares "May 17 as the National Day against homophobia, lesbophobia and transphobia." Executive decree 38999 declares the Presidency and the Government Ministries as "institutions that respect and promote Human Rights." Executive Decree 41,496 declares public and national interest of a comprehensive health care protocol for *trans* people for gender-affirming hormone use.
- Executive Decree 40849: Regulation of the National Penitentiary System No. 40849-JP affirms the principles of equality, equity, and non-discrimination for all persons deprived of liberty as well as the right to gender identity, expression of gender, and sexual orientation. Decree TSE 7 of the Reform of the Regulation of the Civil Status Registry and Regulation of the identity card with new characteristics that allows the change of name for gender identity.
- National Standard for health care free of stigma and discrimination for lesbian, gay, bisexual, trans, intersex (LGBTI) and men who have sex with men (MSM). Guidelines guarantee the right to health of gays, lesbians, bisexuals, trans, and intersex persons. The Ministry of Public Education put forth protocols against the bullying of the LGBTQI+ student population [52].

Despite these numerous regulations, a considerable underreporting of *trans* and *travesti* trafficking exists. Nonetheless, *trans* and *travesti* persons suffering from violence and rejection across Central and South America flee their homes and come to Costa Rica for refuge and protection. They are cared for by Costa Rican public institutions and non-governmental organizations [42]. Examples of initiatives seeking to prevent *trans* trafficking are as follows:

1. Street-level sexual health education campaigns where *trans* women and *travesti* engage in sex work (here they take the opportunity to use harm-reduction measures on drugs) [42].
2. Training workshops on leadership and human rights and life skills in collaboration with the Ombudsman's Office [42].
3. Initiatives by the Ministry of Public Education seeking to rescue *trans* and *travesti* persons from exploitative street sex work and offer them education as a vehicle to personal and collective enhancement [42]. In addition, Costa Rican advocacy organizations have established therapeutic support groups for *trans* women and *travesti* that foster emotional recovery, crisis management, suicide

prevention, and general life skills with the aim of preventing victimization and trafficking [42]. With the advances made in Costa Rica over the last decades toward *trans* and *travesti* rights, and the despite the history of sexual impropriety and anti- LGBTIQ positioning of the current conservative president Rodrigo Chaves, the hope is that civic rights will be protected [56].

2.18 The USA and the Situational Status of Trans-Human Trafficking

The United States of America (USA) is the third largest country in the world with a population of circa 335 million and a total area of 9,629,091 square kilometers (3,717,792 square miles). It is a constitution-based federal republic and it ranks high in human rights, quality of life, education, and wealth. The USA has great diversity with persons from many cultures, ethnicities, and races and is known for its long history of immigration. While public education is free and mandatory, the literacy rate in the USA is 79%, low for an industrialized nation [38, 57].

The USA has a large, well-funded armed forces and is considered a global military power. It also has the highest incarceration rate in the world and great economic inequality. No comprehensive or universal health care program exists. The average life expectancy for women is 81 years and for men is 76 years. Access to health care is uneven due to the absence of a national health care system and the existence of multiple, complicated insurance plans.

The U.S. National Institutes of Health (NIH) list persons who identify as sexual and gender minorities as a "health disparity population" in need of advocacy and support [58]. While federal mandates protect all LBGTQI+ populations, no federal legislation specifically protects *trans* persons. Interestingly, in the United States, *trans* rights and legal protection can differ considerably from state to state. For example, some individual states have state-level laws regarding the equal treatment and protection of *trans* persons. Others do not. While U.S. federal legislation has sought to expand all civil rights over the last two decades, some states have passed laws to restrict civil rights, including the rights of *trans* persons [44].

Of late, numerous bills have been introduced to state legislatures to curb the civil rights of *trans* persons and some of the bills have become law. The topic of *trans* rights is increasingly a polarizing issue with deep political division. The word "*grooming*" has taken on a political connotation with some arguing that liberals are "grooming" youth to become *trans*. This rhetoric obfuscates the issue and instills fear. A concerted effort by conservatives to deny health care and other civil rights to *trans* persons is intensifying. NBC news reported that in the first 3 months of 2022, "nearly 240 anti-LBGTQ+ bills were filed, most of them targeting trans people" [59]. In the US, "Drag events" and LBGTQ+ clubs are increasingly the targets of protests, hate crimes, shootings, and mass murders. Another area of concern is the increasing attempt to restrict *trans* youth from accessing gender-affirming treatment. Attacks on health care providers treating *trans* youth in clinics are on the rise. In

2022, a bomb threat was made at Boston Children's Medical Center for offering gender-affirming care to *trans* youth [60].

Despite these incidents, the push to protect and extend the rights of *trans* persons is growing. Some states are becoming "sanctuary states" and are passing laws to protect *trans* people and their families, as well as their healthcare providers, fleeing anti-trans states, from extradition. In 2022, the State of Connecticut became the first state to pass trans protective "safe harbor" laws [61] and similar laws were passed by Massachusetts, California, and Washington, DC [62].

In terms of trafficking, members of the *trans* community are rarely included in research studies on human trafficking. Formal research on *trans*-specific trafficking in the U.S. is relatively recent and sparse. Findings document a hyper-criminalization of *trans* migrants and *trans* people of color who are exploited and trafficked. *Trans* persons who are trafficked are overly represented by *trans* women of color, migrants, refugees, and others who come to the U.S. from other countries. Qualitative ethnographic research with *trans* sex workers shows high levels of exploitation related to "race, ethnicity, poverty, and immigration status" (p. 183) [11].

Several factors lend to the underrepresentation of *trans* trafficking in the U.S. Evidence shows that *trans* women may not view their own exploitation as "trafficking" even when their narrative stories describe their experiences as trafficking. Another component is that law enforcement officers and social service workers often do not view the experiences of *trans* women as "trafficking" even though if presented with the same case scenario of a cisgender woman, they would classify it as such [5]. One common misnomer is that "*trans* people like sex and cannot be exploited" (p. 190) [11]. Also, because the gender of *trans* persons is often misclassified in official crime and other statistics, the number of *trans* persons trafficked is further underrepresented. Still another main reason for the lack of accuracy on the statistics of *trans* trafficking is, as mentioned earlier, the impossibility to disaggregate the numbers from all of those who identify as sexual minority, that is, the larger LBGTQI+ community [12].

2.19   A Path Moving Forward

Helping to brainstorm a plan for a better future for communities of *trans* and *travestis* is the goal of this section. Adapting culturally nuanced beliefs, attitudes, values, and behavior in partnership with members of *trans* and *travestis* communities is an open, uncensored, and democratic way to move forward.

Understanding the origins of the discrimination toward and the disenfranchisement and subjugation of *trans* groups is valuable knowledge to share as this can help to dismantle biases and prejudice. Actively advocating for new laws, protocols, regulations, and the promotion of *trans* rights are a necessary element in our global society. The dissemination of credible knowledge garnered from scientific advancements in human biology and continued research in these areas is essential. Evidence-based educational interventions with youth through school systems, with adults through civic and faith-based organizations, and with social and health

service personnel through workplace initiative is an important element of the change process.

The criminalization and victimization of *trans* groups and the criminalization, dehumanization and demonization of *trans* sex work and *trans* sex workers are an issue that needs to be addressed. Moralizing arguments from both conservative and liberal groups demonstrate the exclusion of an authentic *trans* perspective in the creation of policy, legislation, and *trans* trafficking awareness education. *Trans* input, collaboration and participation of members of *trans* communities are required at every step in the process. Scholarly projects and research focusing exclusively on *trans* trafficking is a critical element of the path to move forward.

Looking broadly at global capital as a system which privileges corporatization and privatization over the rights of local communities and people is essential to recognize. Global capital provides the incentives for large crime organizations to traffic in persons, including the trafficking of members of *trans* communities. Educating and advocacy pertaining to legislative initiatives including those that target law enforcement, social service and health care providers, teachers, and others is one strategy.

Understanding that this issue has not been adequately addressed by local, state, and national governments and that complacency is fueled by inequalities, fundamentalisms, and extreme right-wing paradoxes. Our path is to bolster the commitment and effort of social forces cross-nationally and the ability of local grassroot initiatives to advocate and educate through open dialogue and discussion. Joining forces in this fight to develop actions and to unite across borders will guarantee more effective public policies and human rights actions.

3   Conclusion

3.1   Final Considerations

The focus of this chapter was to explore the intersection of human trafficking, the sex trade, and the *trans* community in three national realities. The authors addressed the state of *trans* and *travesti* trafficking vis-à-vis national realities in Brazil, Costa Rica, and the United States, including landmark *trans* rights legislation, community and public safety initiatives, and cultural and societal innovations. It also reviewed data on incidences of violence, death, and victimization. The goal was to paint a picture of the rich mosaic of community and national challenges and circumstances, as well as pioneering innovations and initiatives.

Discussion Questions
- Why are *trans* women and *travesti* targeted for trafficking by recruiters?
- Name three factors that contribute to the global *trans* sex trade
- Why are *trans* women rarely considered victims of trafficking and forced sex work?

- Make a list of prominent *trans* organizations and advocacy centers you can locate. Describe one of them.
- You were given funds and three full time staff to create an advocacy organization for *trans* trafficking. Discuss how you would organize it.

Field Exercises

- Investigate two local advocacy centers for *trans* persons. Look at their mission, vision, and goals. What services to they offer? What mechanisms do they use to gain visibility?
- Look for evidence of *trans* trafficking in your state. Police records, motel strips, large sports events, convention centers, urban red light zones. Describe what you find.
- Traffickers are increasingly sophisticated in their use of the Internet to solicit customers and to search for vulnerable *trans* persons for the sex trade. What two factors are essential to consider regarding privacy and identity protection online? What are two potential risks?

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Domestic Minor Sex Trafficking

Mary de Chesnay and Liliana Simpson

1   Introduction

Domestic minor sex trafficking (DMST) accounts for a significant percentage of sex trafficking. Of the 600,000–800,000 people trafficked across borders internationally, 70% are women and half of those are children [1]. Since so many sex trafficking victims are minors, sex tourism has grown into a thriving business for pedophiles. A common misconception is that sex tourism only happens in other places like the far East and South America, but pedophiles find opportunities in America as well. In the United States, while some children are sold by their family members and a few are kidnapped, any child is vulnerable and most are recruited by friends or people they perceive to be friends.

Many are runaways who arrive in a strange city penniless. Recruiters hang out at bus stations waiting to befriend arrivals with promises of food and a safe place to stay. They are then "broken in" either by seduction or violence until they believe they have no other choices. A fortunate few are identified by police or health care practitioners and placed in shelters. Others commit suicide or are killed by their pimps or "johns." If the rescued victims receive treatment, they can manage to become thriving survivors and often work in shelters helping others as peer support counselors. This chapter summarizes the problem in the United States in terms of the children, the traffickers, treatments, and prevention tips.

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2   Terminology

The general public, media, and law enforcement particularly have the unfortunate tendency to refer to victims as child prostitutes. The term implies choice, but little kids do not dream of becoming a prostitute when they grow up. Therefore, the precise term is prostituted children, indicating that something is done to them, in contrast to their seeking out sexual experiences. In most states-indeed, in most countries—the age of consent for sex is 18. If a minor (under the age of consent) is lured, tricked, or forced into sex, then that child has been raped. Yet, we continue to treat children as offenders rather than victims.

Another confusing term is victim. Legally, children are victims, but it is therapeutic to refer to them in a positive way as survivors, especially when working with them clinically. Whatever happened to them and how awful their lives have been, if they manage to escape the life, they are survivors. Then the job of the clinician or counselor is to help them become what one young woman described herself with pride—"a thriving survivor."

3   Demographics

Prostituted children are both female and male and represent all races and a range of age from infancy till 18 when they are no longer minors. The average age of beginning is usually stated as 12–14 or 11–13. Both figures are suspect because the population is largely invisible and studies are few and have limited validity and reliability. For all practical purposes, it should be enough to remember that the age of consent is usually 18 and sex with anyone under that age is rape even if the minor believes he or she can consent.

Even this figure is complicated by child marriage, when parents can obtain legal permission to marry off their young children. Child marriage is discussed elsewhere in this book so only a brief mention is made here to emphasize that the reason many parents insist on these marriages is when the child has been raped by an adult and the parents force her to marry her rapist [2].

In 2016, the Tahirih organization collected case stories by survivors to present to the Virginia legislature to document the lives of children forced into marriage. The founders noticed large numbers of girls married to older men and documented their stories in the hope of changing the lax law permitting child marriage. They found that only Delaware and New Jersey set minimum marriage age at 18 with no exceptions. Thirteen states do not set any minimum age [3]. Recent and pending legislation in a few states addresses setting new rules for child marriage but progress is slow and hampered by attitudes of family shame and parental prerogatives.

There is a market for children who are disabled in some way. Disability can be physical or developmental. Offenders can be preferential and choose children by age and/or gender. Some prefer more vulnerable children. They derive their thrills from the particular weakness of the child. Traffickers who use the disabled might find them easier to isolate from their support systems and can control them for their

benefits if they receive disability social security or other funding. Traffickers use their level of awareness and cognitive processing against them to lure and trick them into compliance.

4   Cases

4.1   Cassie

Blind and deaf since birth, a 13-year-old Cassie was an orphan raised by an elderly grandmother who employed a caretaker for Cassie. Vulnerable and physically weak herself, the grandmother trusted the woman she employed and gradually turned over financial control to the woman, Mrs. Smith. She was unaware that Mrs. Smith was a trafficker who took Cassie to hotel rooms to meet men under the guise of fun outings like the zoo and museums. The true situation was discovered by the grandmother when Cassie became pregnant. Mrs. Smith disappeared with a substantial amount of money, but Cassie received help and the grandmother was able to make appropriate arrangements for Cassie.

Gay and transgendered children are particularly vulnerable in that they tend to be rejected by their families. They runaway or are forced to leave home and end up in strange cities where they are quickly tricked by pimps. As many as 25%, LBGTQ youth may be rejected by their families and become trafficked as a way of surviving on the street [4].

4.2   Billie

Billie was a 15-year-old girl who ran away from home when she came out as gay and her parents threatened to send her to a readjustment school. She took a bus to New York from her small town in Alabama and lived on the street for a few days until she was "befriended" by a young man who claimed he also was a gay runaway. She quickly learned that he lied and was just another pimp, but one who specialized to an extent in men who thought they could reverse Billie's homosexuality. Her life was a living hell until she was arrested and was fortunate enough to be referred to a human trafficking shelter.

What is common to these two stories is that the traffickers were easily able to establish trust with their victims by pretending to care for them. In contrast to the stereotype of sex traffickers as kidnappers, most traffickers, at least in the US, become known and trusted fairly easily until the child is under their control. Even then, survivors report that they do not try to escape from fear of retribution or because they believe they have no other options.

5   Risk Factors

Risk factors are factors, such as genetics or behavior, that place an individual at an increased risk of contracting an illness or being placed in an unsafe situation. In sex trafficking, risk factors can make certain children more susceptible. Although there is no standard profile for sex trafficking victims, it is important to identify the risk factors associated with trafficked victims.

The top five risk factors for human trafficking in the U.S. are children who have recently migrated or relocated to a new region, engage in substance abuse, runaway or homeless youth, history of mental illness, or involved with the child welfare system [5]. In addition, researchers have found that sex traffickers often target children from low-income families, isolated/marginalized/minority communities, or families that have perpetuated abuse (i.e., mental, emotional, and sexual abuse). Children with families that have been sex trafficked or have bought sex are at a heightened risk. It is important to note that an absence of these risk factors does not prevent a child from being trafficked.

6   Recruitment

Recruiters rely on control tactics to target and seduce their victims. Recruiters may establish a sense of trust with their victims through false promises, seduction or coercion, intimate relationships, or monetary payments. Children are susceptible to trusting traffickers who display good intentions even if this is not true. Victims who are in difficult situation may find recruiters reliable and trustworthy, especially if they offer assistance. Once this sense of trust has been built, they will be forced into the sex trafficking ring where they may be sold, broken-in, traded, or killed. Some recruiters may rely on force, coercion, and threats to suppress and control their victims as well. Traffickers may threaten their victim's family and friends, which forces them to comply with their demands out of fear for their family's well-being. Other control tactics include restriction of health care, psychoactive drugs, debt bondage, and threat of law enforcement.

There are four main types of pimps or traffickers: Romeo, Gorilla, CEO, and bottom girls. It is important to note that each trafficker may have different grooming tactics that do not fit this specific list. This list is a general guideline to identify traffickers/pimps. In this chapter, the terms pimp and trafficker are interchangeable.

The "loverboy" or Romeo pimp is someone (usually a young, attractive man) that seduces their target and forces them into the sex trafficking trade through romance. Loverboys rely on establishing trust and forming romantic relationships through promises and acts of service. These relationships can be formed through chat rooms, internet rooms, forums, etc. They will promise things like how wonderful a life with them would be, jobs, money, support, or a "real' relationship. Romeo pimps will twist the perception of their target and try to isolate them from their social support. The relationship may begin as loving or stable, however, it will quickly turn into an emotional and psychological abusive relationship [6].

The Gorilla (or Guerilla) pimp is one of the more violent and intimidating traffickers. They rely solely on intimidation, violence, force, and threats to control their victims. They are seen as the opposite of a Romeo pimp because there is usually no staged love or affection. If it is present, it is seen for a short time period. Their violent nature is hard to subdue. However, they may employ Romeo tactics to entice their target at first and will lash out once they have them trapped in the trade [7]. Victims may feel like they are trapped by the routine violence and intimidation. If the victims do not follow the pimp's rules, it may result in severe consequences.

The CEO pimp views sexual exploitation as a form of business. Typically, they hold the belief that the prostituted women and children are their property. They run it like a business and may operate other illegal businesses. They display narcissistic tendencies such as grandiose sense of self-importance, entitlement, exploitation of others, and constant need for attention. CEO pimps may brag about themselves and what they can do for their victims.

Traffickers often have an intermediary between themselves and their victims. The intermediary is often called "the bottom." The bottom or "bottom girl" is typically a victim and has been with the trafficker(s) the longest. She will look over the other children, punish them, report to the trafficker, and transport them. Even with the gained trust of the traffickers, they still fear retaliation and abuse at the hands of the traffickers. Bottom girls are seen in the same light as pimps; however, many bottom girls view their position as a way of survival.

7   Markets/Trading

Traffickers have found ways to exploit victims and connect with buyers or other traffickers. The internet has made it easier to sell and trade prostituted children. The three main communication channels to connect with and sell children is advertising (ads selling sex services), hobby boards (sex service review boards), and dating websites (websites that arrange sex services under the guise of a dating app). Hobby boards are used to disguise sexual exploitation as a legal service. These reviews are used to narrow down and market the children and girls to buyers and other traffickers. Dating websites are used as a front to disguise the illegal activity, but within the system lies a network of pimps, buyers, and "watchers" that buy sex services. Traffickers and recruiters rely on markets as well. The black market, or shadow market, is a network of connections, websites, and sources that sell illegal services and items.

8   Outcomes

Once a child is forced into the sex trade, there is a 1% chance of them escaping or being rescued. Once a child has been forced into "the life," it is extremely difficult to escape it. The conditions of living vary, but are controlled and limited by the

trafficker. Some victims live with their trafficker or the related gang, others work within groups or brothels [8].

Similar to domestic violence situations, victims are often asked why they don't "just leave the situation." Victims choose not to leave their trafficker for a variety of reasons. They feel like they lack control or power to leave the situation, fear repercussions or retaliation, or lack insight into their victimization [9]. Due to this, many victims stay in the trade and become subject to violent deaths or face jail time. They are forced to endure physical torture and engage in substance abuse which can lead to overdoses. If the victim feels hopeless, they may seek out means to end their own lives. Depending upon their trafficker, they may become involved with gang-affiliated violence that can lead to death by homicide or homicide-suicide. If a trafficker has multiple child victims, they may trade their victims with other traffickers, "madams," or buyers.

Victims that remain in the trade for several years may age out of the system or go on their own. If the demand of their services or labor decreases or they appear aged, they may be pushed out of the trade. Victims that become "bottom girls" or work with their traffickers may be criminalized and prosecuted by the justice system if they are arrested. The Federal Bureau of Investigation (FBI) has issued a statement from their sex trafficking operation from 2021 that reports their efforts for criminalizing traffickers and liberating their victims. However, local governments still prosecute victims and treat them like criminals.

9   Identifying Sex Trafficking Victims in a Medical Setting

In the last 6 months, more than 75% of victims were seen by a provider for medical treatment [10]. Traffickers may bring their victims to health centers or hospitals to treat broken limbs, sexually transmitted infections (STIs), pregnancy, or overdoses. The victims may not communicate honestly or openly with their health care provider. As a result, health care providers are in a unique position to intervene and implement safety measures for sex trafficking victims.

Sex trafficking victims may seek treatment for a lack of protection (i.e., condom use or contraceptives), increased contact with individuals diagnosed with STIs, unwanted pregnancy, bruising, broken or fractured limbs, head trauma, or depression. Victims are often forced into unwanted sexual acts where protection is unavailable or too expensive, so they face an increased risk of teen pregnancy, STI infection, and unsafe abortions. Key identifiers for trafficked children in a health care setting include:

- Youth that are afraid of adults or authority
- Chronic pain without obvious causes
- Unexplained bruising or injuries
- Drastic changes in appearance, weight, behavior, or sleep patterns
- Withdrawal
- Reluctance to self-identify or disclose past medical history

During the initial assessment, patients may feel hesitant when discussing their prior health history and current visit to the provider. They may decline to self-identify or disclose any health information, especially if their trafficker is in the room with them. If the provider suspects that the patient may be a victim of sex trafficking, ask their guardian to step out of the room to provide privacy. If their guardian declines to leave, explain per your facilities protocols, a patient's right to confidentiality and privacy during a health assessment. Once their guardian has left the room, begin the health questionnaire to gather more about their visit and their underlying health concerns. Appropriate questions to ask a possible sex trafficking victims include:

- Has your identification been taken from you?
- Are you able to leave your job or situation if you want?
- Have you ever been forced to commit a sexual act even if you refused?
- Have you performed sexual acts in exchange for money?
- Have you been physically harmed in any way?
- Has anyone threatened you, your friends, or your family?
- Have you been abused by someone close to you?
- Have you taken illegal substances?

There are several questions that health providers can ask to gauge whether their patient is a victim or involved in an unsafe situation. When a provider is conducting their health assessment, it is important to establish trust and respect. The patient will be more reluctant to seek help if the provider does not establish that foundation of trust. The patient needs to be monitored for signs of distress and uneasiness. A provider can explain every procedure, answer questions or concerns brought up by the patient, and maintain privacy. By ensuring all of these measures are implemented with every patient, the goals of identifying sex trafficking victims are met. A patient's safety, privacy, and trust are pivotal in identifying sex trafficking victims.

10   Treatment

When survivors escape the trade, it is encouraged that they seek treatment and become involved in support resources. The treatment and care for sex trafficking survivors are complex—they require extensive mental health, physical, emotional, and physiological care. Trauma-informed care is crucial to survivor recovery [11]. Survivors may be at their most vulnerable, therefore it is important for health care professionals to provide care that is respectful, informative, and holistic. It can take time for survivors to seek treatment and report improvements in their health. With education and therapy, survivors will be able to reflect upon their trauma without relieving it. Survivors need to be transitioned back into society. Interpersonal care teams can achieve this goal of reintegration.

There are guidelines for the prevention, identification, and immediate treatment for child sex trafficking victims. Yet, there is a lack of guidelines or recommendations

for continuous, ongoing care and follow-ups for this vulnerable population. Comprehensive physical examinations, STI testing, prenatal care, psychiatric evaluations, and behavioral assessments are essential for ongoing care for survivors [12].

10.1 Mental Health

Due to the trauma and abuse victims may experience, they are at an extremely high risk of developing mental illness or disorders. The most common mental health concerns include posttraumatic stress disorder (PTSD), anxiety, obsessive-compulsive disorder (OCD), substance-abuse disorder, and major depressive disorder. The treatment of mental health disorders is driven by evidence-based practice (EBP), therapeutic communication, and pharmacological approaches. EBP is guided by the idea that there is scientific evidence that supports the proposed treatment, which could be medication, therapies, support groups, or treatment plans. Therapy may be referred for the survivors to process and cope with the long-term consequences of sex trafficking. Cognitive and behavioral therapy are among the most common forms of therapy offered.

10.2 Physical Health

The physical health of survivors is often affected as well. Survivors may report unintended weight gain or loss, serious injuries, or change in their ability to complete activities of daily living (ADLs). A major concern for survivors is their reproductive health. Traffickers view their victims as property that can be sold and used multiple times. This has a negative effect on the victims reproductive system. Treatment plans for these survivors will consist of pharmacological approaches and medical interventions to promote quality of life and increase their health.

10.3 Spiritual Health

A traumatized brain is mistrustful and paranoid, especially around figures of authority. When a survivor is referred to spiritual services, it may be beneficial to move slowly, calmly, and carefully. Trust, forgiveness, and love must be slowly presented and built so the victim does not revert back to their prior mental state. Spiritual care is offered to survivors to provide them with a source of unconditional love and support during a traumatic time. If the victim is requesting religious interventions, explaining God's plan for all of His children and the message He has for His followers may promote spiritual healing. However even if this strategy does not seem appropriate for all survivors, faith-based shelters can be quite effective in providing the comfortable environment that comes with a focus on the survivor as a welcome visitor. Churches and other groups can also be a source for education and prevention

of sex trafficking. There may be support groups and communities within churches and similar institutions. Survivors can use this as an outlet to engage in social interactions with other survivors of sex trafficking and seek spiritual healing.

11   Legal Resources

Legal efforts can be intimidating and traumatic for survivors. Laws and federally funded groups are available for victims of sex trafficking. The three main laws that have been established and upheld are a follows:

- Trafficking Victims Protection Act of 2000—Protects victims and prosecutes traffickers, pimps, and buyers
- The Justice for Victims of Trafficking Act of 2015—Improves the response to human trafficking and changed the criminal liability of buyers
- The Preventing Sex Trafficking and Strengthening Families Act of 2014—Seeks to reduce incidence of minor sex trafficking in foster care systems

Before 2000, there were scarce resources for survivors and even less criminal prosecution of traffickers. The laws from the early and late 2000s were established to increase the prosecution of traffickers and resources for survivors. However, it can be difficult for survivors when they seek and use legal resources. They are often held as material witnesses which forces them to testify in their own cases. This can be seen as a traumatic situation because the victim has to relive their trauma in front of the perpetrator and the general public. Due to this, there is a discrepancy between the criminal justice system's defined metrics and the survivors' wants and needs. Survivors stress the importance of holding their traffickers accountable through criminal prosecution [13].

Discussion Questions
- Compare and contrast the vulnerabilities of children vs. adults to sex trafficking.
- For the case studies, describe prevention strategies that might have been implemented.
- Discuss aspects of the TVPA that relate to domestic minor sex trafficking.

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Part III

Clinical Interventions

Human Trafficking and the LGBTQ+ Community

Heather C. Quaile and Sarah L. Pederson

1   Introduction

According to current research, there is not one direct path into the involvement with the commercial sex market; however, there are multiple risk factors and paths to entry. Runaways, persons with substance abuse problems, homeless youth, persons with intellectual disabilities, and youth who are involved in the juvenile justice system are often targets to sex traffickers. Lesbian, gay, bisexual, transgender, queer, or questioning/queer (LGBTQ+) individuals are particularly vulnerable to sex trafficking victimization [1, 2]. LGBTQ+ individuals are often overlooked and underreported for being individuals who experience sex trafficking. There is also very limited research surrounding this population and their victimization in sex trafficking; however, previous research studies have identified this population as LGBT or LGBTQ, or even separate each group into its own for unique understanding [1, 2].

Of more than 23,000 reported runaways by the National Center for Missing & Exploited Children, one in seven were likely victims of sex trafficking [3–5]. When a youth is on the run and experiencing homelessness, they are often forced or coerced into sex trafficking in order to obtain basic needs such as food, shelter, and clothing. Unhoused LGBTQ+ youth are at increased risk due to their overrepresentation in the homeless youth population [3–7]. These LGTBQ+ individuals are statistically more at risk due to nonacceptance of their gender identity or sexual orientation by family, thus leading to higher rates of abandonment, which research shows increased risk of homelessness [3–7]. The LGBTQ+ population faces unique experiences, but research has yet to fully understand young adults experiencing homelessness and engaged in the commercial sex market of this subset [3–7].

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2   Statistics/Scope of the Problem

There is a lack of awareness among LGBTQ+ individuals in terms of resources available. There is also underrepresentation in the reporting of LGBTQ+ cases of human trafficking due to fears of discrimination, prejudice, and violence [3–7]. LGBTQ+ individuals are often marginalized and stigmatized in many regards including in community support systems like health care in addition to their homes, where many often hide their sexual orientation/gender identity to avoid social, mental, and physical harm from family members. LGBTQ+ individuals often feel they are unable to disclose sex trafficking [3–7]. Since the National Human Trafficking Hotline opened in 2007, more than 31,000 cases have been reported and identified; however, less than 1 percent have been associated with LGBTQ+ individuals. Due to fear, discrimination, and lack of awareness, LGBTQ individuals have limited access to anti-trafficking services [3–5]. The odds of being LGBTQ+ and sex trafficked were two times greater than those of being heterosexual and sex trafficked. These individuals also experience higher rates of homelessness and are at greater risk of exchanging sex for money to survive [3–5].

Due to the high-risk nature of being homeless and exchanging sex for money, LGBTQ+ individuals reported higher rates of suicide attempts, drug use, impulsive behaviors, and sexual assault between ages 13 and 17 compared to heterosexual young adults experiencing homelessness and reporting sex trafficking victimization [3–7]. Also, LGBTQ+ homeless youth are also more likely to engage in high-risk sexual behaviors, such as participating in the commercial sex market, than their heterosexual peers [3–7]. Transgender youth of color are at disproportionally high risk for sex trafficking [8, 9]. However, the literature and research to understand and identify LGBTQ+ individual risk factors are very minimal and are subject to the aforementioned limitations [3–8].

According to the Administration for Children and Families Street Outreach Program, LGBTQ+ individuals are at a higher risk for homelessness because of being asked to leave or forcibly expelled by a parent or caregiver [3–5]. The limited research also reveals other coinciding factors that contribute to LGBTQ+ youth homelessness, such as physical abuse, sexual abuse, neglect, substance abuse by parents, and mental health disabilities [3–5]. The literature in general population for youths shows that being on the streets/homelessness contributes to a higher rate of participating in high-risk behaviors that inflate their probability of being sexual exploited. While the current literature does support that LGBTQ+ individuals have higher rates of homelessness and engage in high-risk behaviors while on the streets, there is limited research on how LGBTQ+ individuals engage in the commercial sex market. When LGBTQ+ individuals are faced with less familial and social supports and fewer resources, they may enter the commercial sex economy to meet their needs for survival. The participation in the commercial sex market of LGBTQ+ youth or young adults is defined in the literature as three different terms: survival sex, trading sex, or sex trafficking [3–5].

There are varying rates at which LGBTQ+ youth experience stigmas and discrimination throughout the United States. The variation is related to homophobic

attitudes, which also include transgender and gender nonconforming intolerance. Class, race, ethnicity, and religion are all variants that lead to homophobic attitudes, with location and religion appearing to be more relevant in numbers than race or ethnicity in deciding these attitudes [8, 9].

The LGBTQ+ population has complex social identities that vary according to sexual orientation, gender identity, and gender nonconformity, it is also possible that various subgroups (e.g., sexual minority youth vs. gender nonconforming youth) will perceive experiences of stigma and prejudice differently [8, 9]. LGBTQ+ individuals may also have concerns accessing the national human trafficking hotline to report sex trafficking due to fear of being discriminated against by service providers and law enforcement. Maltreatment is unfortunately a common underpinning of LGBTQ+ youth [8, 9]. They are often mistreated by those who are supposed to support them such as parents, teachers, law enforcement, or social workers, which can lead LGBTQ+ youth to distrust the services that are in place to help them, even if they have nowhere else to turn [8, 9]. Many LGBTQ+ individuals may already have attempted to get support but have had negative experiences in requesting help.

3   Social Determinants of Health

Social determinants of health are conditional to the places where people live, learn, work, and play. For example, social determinants of health include, but are not limited to poverty, unequal access to health care, lack of education, stigma, and racism. These are often conditions linked to health disparities [10].

Individual health outcomes can be impacted by many factors beyond the efficacy of medical care. Economic stability, educational opportunities, neighborhood environment, and community structure are factors that may affect one's wellness. LGBTQ+ individuals experience inequalities in access to educational opportunities and earning potential, which prevents them from achieving health outcomes comparable to those in the non-LGBTQ+ community [11]. These disparities lead to a higher incidence of risk factors for human trafficking.

LGBTQ+ individuals experience higher rates of poverty than non-LGBTQ+ people. Poverty creates vulnerability and increases the risk factor for victimization. LGBTQ+ youth, in particular, face "heightened risk factors that affect their economic stability, including a lack of parental emotional and financial support as well as discrimination on the job market" [10]. As many as 40 percent of homeless youth identify as LGBTQ+ [12]. Homeless LGBTQ+ youth face more barriers to securing stable housing and tend to remain homeless longer than their non-LGBTQ+ counterparts [13]. In addition, many LGBTQ+ survivors of human trafficking become misidentified as criminal offenders. This misidentification causes LGBTQ+ youth to be overlooked as victims, especially when legislation fails to address sexual exploitation without an individual easily identifiable as a trafficker [13].

Youth engaged in "survival sex" experience physical violence, sexual assault, and other forms of coercion. Traffickers may coerce individuals by offering fraudulent job opportunities or engaging in sexual acts in exchange for shelter and food

[14]. They may even use the person's gender identity or sexuality as a tool of coercion to prolong the exploitation. In addition, most LGBTQ+ individuals engaged in "survival sex" report that their decision to do so stems from the dire economic need and a lack of alternatives [14].

Health care providers must be better trained and be willing to expand their understanding of human trafficking to include the social determinants of health that positively and adversely impact patients' healing and recovery. With a deeper appreciation for the complex nature of this crime and its impact, we can begin to develop pointed health care interventions that address trauma at the individual, community, and societal levels. In addition, we must collaborate within a multidisciplinary framework to advocate for and implement a comprehensive, holistic, and systemwide approach to education about human trafficking [11, 14].

4   Breaking Barriers and Operationalizing Interventions for Practice

Effective human trafficking interventions rely on strong community-based collaborations. This is especially true when responding to trafficking situations involving LGBTQ+ individuals as these individuals may have fewer social supports and simultaneously have more specialized service needs [4, 5, 15–19]. Building partnerships with organizations specializing in LGBTQ+ rights also provide the opportunity for knowledge exchange and strengthening service referrals. To ensure local human trafficking responses and practices are equitable and appropriate across service populations, human trafficking task forces should include local LGBTQ+ providers and LGBTQ+ survivors in their efforts [4, 5, 15–19] (Table 1).

Social service agencies need to receive training to understand the increased risk of sexual exploitation of the LGBTQ+ population. According to Polaris health care providers, service providers and criminal justice professionals can improve services for LGBTQ+ human trafficking victims. According to Polaris, there are 10 ways to accomplish this. The 10 ways include: building partnerships within the LGBTQ+ communities, training staff to create a welcoming environment, improving the ability to identify human trafficking, revising the intake process to reduce fear or hesitancy in disclosing sexual orientation, reviewing confidentiality practices, adapting facilities to be inclusive, adjusting the safety planning process to be multidimensional and self-directed, and allowing flexibility in treatment or case planning [4, 5].

When building partnerships within the LGBTQ+ communities, it is imperative to build alliances. Organizations specializing in LGBTQ+ rights provide opportunities for knowledge exchange and strengthening service referrals and it is compulsory to build these partnerships especially when responding to trafficking situations involving the LGBTQ+ population [4, 5, 18, 19]. Human trafficking task forces should involve organizations or agencies that reflect the diversity of victims and survivors served. Some examples of organizations might include specialized LGBTQ+ Providers, local Gay-Straight Alliances (GSAs), youth development organizations, universities & hospitals, Sex Worker Rights Groups, Government or Law

Table 1 Definitions [breaking-barriers-lgbtq-services.pdf (polarisproject.org)](breaking-barriers-lgbtq-services.pdf) gender terminology and definitions

Binary gender: A concept of gender that recognizes only two dichotomous gender identities: male and female

Bisexual: Describes a person who is attracted to both men and women

Cisgender: A person whose gender identity is the same as their sex assigned at birth

Gay: Describes a person who identifies as male and is attracted to males

Gender: A social construct assigning roles and attributes to a person based on their sex assigned at birth

Genderqueer: A person whose gender identity is neither, both, or a combination of male and female genders

Gender expression: An outward manner in which a person expresses their gender (an include hairstyle, clothing choices, mannerisms)

Gender identity: A person's internal sense of self from gender perspective

Gender nonconforming: A person who identifies as somewhere between male and female, both male and female, or having no gender

Intersex: An umbrella term covering differences in sexual or reproductive anatomy which vary from traditional anatomical definition of male or female

Lesbian: Describes a person who identifies as female and is attracted to other females

MSM: Men who have sex with men (sexual activity may or may not align with the individual's sexual orientation, straight youth may engage in survival sex or commercial sex with individuals of the same gender to meet their basic needs)

Pansexual: Describes a person who is attracted to both people of any gender and who describes their attraction as not limited to typical gender constructs

Sex: Sex assigned at birth based on appearance of genitals

Sexual orientation: Who a person is attracted to physically, spiritually, and/or emotionally

Transgender: Umbrella term used to describe all people whose gender identity is in some way different from their natal sex

Transition: The process by which a person aligns their physical appearance with their gender identity

Trans man and trans woman: These terms are used to describe, in a gender binary manner, a transgender individual's gender identity or expression. For example, the term "trans woman" is used for an individual whose sex at birth was assigned male and whose gender identity is female. However, not all transgender individuals use these terms to describe themselves.

Two-spirit: A term within American Indian and Alaska native cultures, representing a person whose sense is that their body simultaneously holds a masculine and feminine spirit

WSW: Women who have sex with women (sexual activity may or may not align with the individual's sexual orientation, straight youth may engage in survival sex or commercial sex with individuals of the same gender to meet their basic needs)

Trafficking terms and definitions

Human trafficking: A crime involving the exploitation of another person for the purposes of compelled labor or a commercial sex act through the use of force, fraud, or coercion.

Labor trafficking: The recruitment, harboring, transportation, provision, or obtaining of a person for labor or services through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.26

Sex trafficking: The recruitment, harboring, transportation, provision, or obtaining of a person for a commercial sex act in which a commercial sex act is induced by force, fraud, or coercion, or in which the person induced to perform such an act has not attained 18 years of age.

Safe harbor: Legislation to curb criminal prosecution of minor victims engaged in commercial sex, sometimes including additional protections and services for those victims.

Survival sex: Exchanging sex for basic needs, such as housing, food, or clothing.29

Other terms and definitions:

Ally: An individual or group who is supportive of the LGBTQ community

Minor: A person under the age of 18, as defined by U.S. federal law

Youth: A person who has not yet matured into adulthood (for the purpose of this publication, youth refer to individuals under the age of 25)

Enforcement LGBTQ+ Liaisons, local branches of national LGBTQ+ organizations, runaway and homeless youth organizations, and survivor-led organizations [4, 5, 18, 19].

Train staff to create a welcoming environment by having regular training and discussion forums. Educational opportunities should allow staff the opportunity to learn about the LGBTQ+ population experiences incorporating the survivors' perspective and recognize any internal bias and strengthen empathetic responses and allow staff to ask questions [4, 5, 16, 17]. In order to build cultural competency staff and providers need to check in with their own biases and understand that building competency is ongoing. "Discussion and support of sexual orientation and gender identity should be ongoing and practiced in day-to-day actions" [4, 5].

Of utmost importance is improving the ability to identify human trafficking. Increased homelessness among the LGBTQ+ population increases vulnerability to being trafficked. "Yet, despite higher rates of victimization, LGBTQ youth face more frequent profiling, receive higher sentences, and are more likely to be prosecuted for consensual sexual activity than their non-LGBTQ+ peers" [4, 5]. Adequately identifying signs and red flags of human trafficking across all populations is imperative for law enforcement to understand as well as being culturally competent and checking in on their own biases. First responders should not make assumptions about a person's gender identity or sexual orientation based on the circumstances of their trafficking situation [4, 5, 16, 17].

Revising the intake process to reduce fear or hesitancy in disclosing sexual orientation is very important when working with the LGBTQ+ population. The intake process in medical settings for this population can cause a great deal of anxiety and hesitancy because they are needing to disclose personal information, and LGBTQ+ individuals may or may not have already "come out." The intake process is a way for organizations to demonstrate a welcoming, inclusive environment, where tolerance, empathy, and respect are expected of everyone [4, 5, 15–19].

The next step is reviewing confidentiality practices that are currently in place within the organization or healthcare setting. LGBTQ+ individuals have differing levels of comfort in disclosing their sexual orientation or gender identity. "Some people may only feel comfortable sharing their sexual orientation or gender identity with one trusted staff member and may not be ready to come out to everyone in their lives" [4, 5]. LGBTQ+ individuals who have experienced trafficked may be hesitant to disclose their situation out of fear of retribution from traffickers, fear of judgment by providers or loved ones, or simply out of lack of awareness about trafficking and assistance available to them [4, 5, 15–19].

Adapting facilities to be inclusive shows that organizations are a welcoming place for the LGBTQ+ population. Having staff members and volunteers who identify as LGBTQ+ helps with the inclusivity of an organization. The environment that cares for LGBTQ+ individuals should include signage or visual cues around the building, website, and in outreach materials that are LGBTQ+ friendly. Having the trafficking hotline and resources for help in the open areas will also help where LGBTQ+ individuals can pick up a brochure or flier confidentially [4, 5, 16, 17].

The need for this population to feel safe is of utmost importance. "LGBTQ+ youth who have been trafficked may have external safety concerns (such as threats from traffickers), necessitating strong safety plans"[4, 5]. It is also just as important to conduct internal safety plans. "External safety planning with LGBTQ+ victims of human trafficking must be multidimensional and self-directed" [4, 5]. LGBTQ+ individuals who have been trafficked frequently face threats from traffickers or others who were involved in the trafficking situation, familial or intimate partner violence, and harassment or violence by individuals or groups simply because of their gender identity or sexual orientation. The organizational system should approach safety planning in an empowering manner, reinforcing that they are in control of their own safety and allowing them to drive their safety planning process [4, 5, 16, 17].

Allowing flexibility in treatment or case planning is essential. Comprehensive, trauma-informed wraparound services are key for this population. It is important to know that specialized services may be necessary for this population. In particular for transgender as they may be in the process of transitioning while others may need ongoing medical and psychological support [4, 5, 15–19]. "Trusted community volunteer mentors from the LGBTQ+ community can be a great way to support LGBTQ+ populations and help them build social capital" [4, 5] (Tables 2 and 3).

Table 2 Other considerations for response

(a)	Implement internal protocols
(b)	Ongoing training for the response to human trafficking
(c)	Culturally sensitive care and training
(d)	Safety plan and protocol to protect patients, providers, staff
(e)	Knowledge about community resources and referrals
(f)	Process in place for persons of trafficking to self-identify/disclose
(g)	Pamphlets and resources in patient bathroom areas

Table 3 Questions to be included on intake

- What do you prefer to be called?
- Sex assigned at birth?
- What are your preferred pronouns? He/Him/His   She/Her/Hers   They/Them/Theirs
  – Other: _____
- What is your sexual orientation?
- How do you describe your gender identity?
- Is there anything else you need me to know to best care for you today?

5   Conclusion

There is a clear impending need to foster appropriate and effective social service responses in serving LGBTQ+ individuals experiencing sex trafficking victimization within the United States. The limited research shows that the odds of being an LGBTQ+ young adult experiencing homelessness and reporting sex trafficking victimization is significantly greater than their cisgender and heterosexual counterparts. Other associated risk factors have been found to predict LGBTQ+ young adult experiencing homelessness and reporting sex trafficking victimization, which include having a current medical issue, having a history of dating violence, having a childhood history of sexual abuse, having a history of binging/vomiting, and having a post-traumatic stress disorder (PTSD) diagnosis. Healthcare providers must consider screening for eating disorders among potential LGBTQ+ victims of sex trafficking. Social service and healthcare providers should also screen LGBTQ+ young adults experiencing homelessness for potential sex trafficking victimization as it is critical to evaluate their intervention service needs. The connection between LGBTQ+ young adults experiencing homelessness and reporting sex trafficking victimization deserves attention as a global priority to provide preventive and therapeutic services to these individuals.

Discussion Questions
- Compare and contrast the vulnerability of LGBTQ+ young adults with other sex trafficking victims.
- Write a case study for this population and describe solutions.
- Review the research literature on LGBTQ+ people and identify gaps.

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Everlasting Pain: The Long-Term Effects of Physical and Emotional Abuse

Jessica Ellis, Quinta Johnson, and Alyssa Moxley

1 Introduction

This chapter will review the long-term effects of physical and emotional abuse and recovery for survivors of such violence and mistreatment. Physical abuse is causing someone physical harm, with or without a weapon. Emotional abuse erodes a person's sense of self-worth. Forms of emotional abuse include degradation, threatening, stalking, and isolating. Both forms of abuse are rampant in human trafficking. Lastly, intimate partner violence (IPV) is a perpetrator's pattern of behavior that may include various types of abuse, including physical injury, emotional harm, and sexual assault meant to isolate, intimidate, or otherwise coerce a romantic partner [1].

2 Long-Term Effects of Physical and Emotional Abuse

Throughout this chapter, the terms "victim" and "survivor" are used. The term "victim" refers to an individual who has experienced a recent assault. The term "survivor" refers to an individual who has begun to heal from the assault, both physically and psychologically [2].

2.1 Physical Abuse

Physical abuse includes punching, kicking, biting, choking, burning, shaking, and beating. Physical abuse may result in bodily injury, permanent damage, and death.

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Physical abuse is most frequently observed in relationships of trust, including between parents and children and between intimate partners. Individuals who experience physical abuse often feel helpless, isolated, and/or prone to the subsequent development of pathological conditions [3].

The most common form of adult physical abuse in the United States is intimate partner violence [3]. In the United States (U.S.), 32.4% of women and 28.3% of men report physical violence by an intimate partner. Moreover, about 1 in 3 women and nearly 1 in 6 men in the U.S. have experienced sexual violence during their lifetimes, and about 1 in 5 women and 1.5% of men have experienced rape or attempted rape [4]. In the U.S., women experience 4.8 million incidents of physical or sexual assault annually; however, the true prevalence of violence is unknown because many are afraid to share their experiences [1].

Research on physical abuse related to human trafficking is limited at this time; however, the limited evidence corroborates that victims of physical abuse related to human trafficking likely experience similar consequences of physical abuse related to IPV. These health consequences include anxiety, emotional numbness, memory loss, depression, post-traumatic stress disorder (PTSD), substance abuse, and eating disorders [5]. Many of the studies cited in this section reference IPV, but their conclusions can likely be applied to survivors of human trafficking.

2.1.1 Long-Term Physical Effects of Physical Abuse

Not only do survivors of physical abuse face short-term consequences, including physical injury, fear for safety, and acute stress, but they are also more likely to experience chronic physical health problems. In the National Intimate Partner and Sexual Violence Survey, men and women in the U.S. who report a history of physical or sexual violence by an intimate partner are more likely to report asthma, irritable bowel syndrome, frequent headaches, chronic pain, and difficulty sleeping compared to those without a similar history of sexual or physical violence [4].

Many victims of violence experience somatization or internalized stress. Somatization includes physical effects, which will be discussed here, and psychological effects, which will be discussed in the following section. Somatization may present as chronic headaches, sleep and appetite disturbances, palpitations, chronic pelvic pain, urinary frequency or urgency, irritable bowel syndrome, sexual dysfunction, abdominal symptoms, and recurrent vaginal infections [1]. It is important to screen all patients—but especially those with these chronic complaints—for a history of physical abuse or other violence.

Chronic pain. Chronic pain is common among survivors of physical abuse. Common complaints include abdominal pain, pelvic pain, headache, low back pain, and joint pain. In a study of 292 women who had separated from their abusive partners on average 20 months prior, more than one-third experienced high-disability pain. Those experiencing high-disability pain were more likely to have experienced child abuse, adult sexual assault, severe spousal abuse, lifetime abuse-related injuries, symptoms of depression and PTSD, history of suicide attempts, difficulty sleeping, and unemployment. High-disability pain was also associated with the use of medication in more than prescribed dosages [6]. Chronic pain persists long after

leaving abusive partners, so ongoing treatment of emotional and physical health is critical in the care for this population.

Traumatic brain injury. Sixty to 92 percent of female victims of physical abuse report traumatic brain injury (TBI). By applying the more conservative 60% estimate, there are 23,000,000 women in the U.S. living with a TBI from IPV. That is 37,000 times the number of National Football League players, but little research exists on TBI related to IPV [7]. A TBI results from repetitive blows to the head, and long-term sequelae include a decrease in memory, learning, and cognitive function; difficulty performing activities of daily living, which may make the victim more vulnerable and cause her to remain in her abusive environment; reduced ability to maintain employment; personality and behavioral changes; and increase in mental health problems, which will be addressed in a later section.

Gastrointestinal disorders. Women who have experienced IPV are more likely to have diagnosed gastrointestinal (GI) disorders including peptic ulcer disease, irritable bowel syndrome, gastroesophageal reflux, indigestion, diarrhea, and constipation. Patients seen in a gastroenterology clinic for GI complaints who had a history of childhood or adult abuse were significantly more likely to have GI surgeries compared to patients without such abuse history. Psychological and physiologic mechanisms related to chronic stress are likely responsible for increases in GI symptoms among survivors of IPV [6].

Chronic disease. Past or present IPV is also associated with developing or exacerbating chronic diseases, including asthma, stroke, hypertension, hypercholesterolemia, myocardial infarction, and cardiovascular disease [8]. Chronic and acute stress activates autonomic, neuroendocrine, immune, and cardiovascular systems; this may increase the likelihood of developing or exacerbating cardiovascular disease [6]. It is also essential to consider the social context in which IPV occurs. Poor self-esteem and lack of social support have long-lasting health consequences. In addition, survivors of IPV are more likely to smoke, which is associated with poorer outcomes related to chronic disease management [8].

2.1.2   Long-Term Psychological Effects of Physical Abuse

Individuals who experience physical abuse are at greater risk of developing mental health issues, including PTSD, depression, anxiety, substance use disorders, and suicide [2].

Post-traumatic stress disorder. Somatization, or internalized stress, may develop into PTSD. PTSD may be associated with depression, anxiety, and suicide [1]. Survivors of physical abuse and intimate partner violence are likely to experience PTSD. PTSD is a disorder that may result when an individual lives through or witnesses an event in which they believe there is a threat to their safety. Symptoms include but are not limited to painful recollections, flashbacks, recurrent dreams or nightmares, avoidance of activities or places, emotional numbing, chronic physiological arousal, and difficulty sleeping [9]. PTSD prevalence predictions range from 31 to 84.4% of IPV survivors [10].

In 2018, the World Health Organization proposed a new diagnosis called complex post-traumatic stress disorder (CPTSD), which includes criteria for PTSD as

well as symptoms of disturbance of self-organization. In a study of 162 female IPV survivors, 39.5% met the diagnostic criteria for complex PTSD, and 17.9% met the diagnostic criteria for PTSD. The main variable related to experiencing CPTSD, in contrast to PTSD, was expressive suppression, which is an effort to conceal, inhibit, or reduce emotional expression [11].

Depression and anxiety. Experiencing physical violence increases the risk for developing depression and anxiety. Individuals in abusive relationships commonly experience depressed moods, poor sleep, inability to concentrate, and feelings of hopelessness [6]. Moreover, one meta-analysis found that women with pre-existing depression were more likely to be victims of IPV [12]. Not only does physical abuse affect mental health, but mental health factors can cause some women to be more vulnerable to violence than others.

One longitudinal study ($n = 1529$) found a relationship between IPV at 21 years of age and new cases of major depression disorder at 30 years of age; however, IPV did not predict the onset of a new anxiety disorder [13]. IPV did, though, have a robust association with more severe anxiety disorders in women with a previous anxiety diagnosis. Individuals with a previous anxiety diagnosis may show a stronger response to interpersonal stressors, engage in negative self-evaluation, and experience intensified and prolonged negative emotions; therefore, individuals with anxiety may be more vulnerable to perpetrators of the cycle of abuse, and those with anxiety will likely experience worse anxiety symptoms because of physical abuse.

Alcohol and substance abuse. Women experiencing IPV are nearly six times as likely to have a substance abuse diagnosis [6]. Conversely, women diagnosed with alcohol or substance abuse are more vulnerable to IPV. Among women at a methadone maintenance clinic, nearly half had experienced IPV in the past month, and nearly 20% had experienced severe violence or injury by an intimate partner in the previous 6 months [6]. One potential theory is that victims abuse alcohol and substances as a poor coping strategy for violence. Another theory is that women who are dependent on substances are more likely to be in relationships with men who are similarly dependent on substances, and substance abuse and IPV perpetration are strongly linked. It is important for a clinician to screen for abuse and substance abuse together [6].

Suicide. Physical abuse is a risk factor for suicide. A study of formerly abused women experiencing chronic pain found that 31% had attempted suicide. Physically abused women are nearly eight times more likely to attempt suicide than non-abused women, and HIV-positive physically abused women are 13 times more likely to attempt suicide than HIV-negative, non-abused women [6]. The National Violent Death Reporting System found that intimate partner problems were a precipitating factor for 32% of male and 27% of female suicides [6].

2.1.3 Recovering from Physical Abuse

It is important to emphasize that a preventative approach toward reducing violence in the community is more valuable than the community's reaction to acts of violence. As various forms of abuse abound, it is imperative to clinically address the treatment

of survivors following physical abuse. This section will address both prevention of physical abuse and how to support survivors.

Prevention. Physical abuse is not the victim's fault, so prevention must be geared toward perpetrators. Risk factors for perpetrating physical abuse include low self-esteem, low education or income, depression, antisocial personality traits, conduct problems, suicide attempts, lack of nonviolent problem-solving skills, belief in strict gender roles (e.g., male dominance in relationships), history of physical or emotional abuse in childhood, unhealthy family relationships, and interactions, witnessing violence between parents, history of experiencing physical discipline as a child, living in a community with high poverty rates and limited educational and economic opportunities, weak community sanctions against IPV, gender inequality in the society, societal income inequality, and cultural norms that support aggression [14]. Protective factors against perpetrating physical abuse include strong social networks, positive social relationships, neighborhood connectedness, coordination of resources and services, safe housing, medical care and mental health service access, and access to economic and financial help.

Physical abuse is preventable. To prevent abuse, we must understand and address the factors that put people at risk. Promoting healthy, respectful, nonviolent relationships, and community will reduce the occurrence of physical abuse. The Centers for Disease Control and Prevention (CDC) has developed a resource titled "Preventing Intimate Partner Violence Across the Lifespan," which addresses various prevention strategies to help communities utilize evidence-based techniques to impact individual behaviors and modify larger risk factors [15] (see Table 1).

Table 1 Preventing IPV: a CDC resource

Strategy	Approach
Teach safe and healthy relationship skills	• Social-emotional learning programs for youth • Healthy relationship programs for couples
Engage influential adults and peers	• Men and boys are allies in prevention • Bystander empowerment and education • Family-based programs
Disrupt the developmental pathways toward partner violence	• Early childhood home visitation • Preschool enrichment with family engagement • Parenting skill and family relationship programs • Treatment for at-risk children, youth, and families
Create protective environments	• Improve school climate and safety • Improve organizational policies and workplace climate • Modify the physical and social environments of neighborhoods
Strengthen economic supports for families	• Strengthen household financial security • Strengthen work-family supports
Support survivors to increase safety and lessen harms	• Victim-centered services • Housing programs • First responder and civil legal protections • Patient-centered approaches • Treatment and support for survivors of IPV, including teen dating violence

Initial steps. The first step a victim of violence will take to break the violent pattern is to tell someone of the abuse, so telling someone they trust—whether a medical provider, social worker, or friend—is a momentous step. When a client discloses physical abuse, the clinician should first acknowledge the trauma and assess the victim and any children's immediate safety. Risk factors for homicide include previous acts of violence, estrangement from a partner, threats to life, threats with a weapon, previous strangulation, and partner access to a firearm [1]. It is also important to discuss the person's feelings, whether they be relief or shame, and emphasize that no one deserves to be abused. Being abused is never the victim's fault.

Next, assess their desire and readiness to leave or remain in their current situation. For those wanting to leave an abusive relationship, clinicians may help them make a plan, but their best resource is a local domestic violence agency. The National Domestic Violence Hotline and other hotlines (see Table 2) can help with legal assistance, shelter, counseling services, and connection to other resources. A plan may include seeking medical care for injuries, keeping any evidence of physical abuse, reporting the abuse legally, contacting the local shelter for domestic violence victims, and gathering monetary fund's [16].

Short-term recovery. The 2013 World Health Organization guidelines concluded that there is not yet sufficient evidence to support interventions for IPV that will improve health outcomes, except for women who have spent at least one night in a shelter or for pregnant women experiencing IPV. This does not mean that all interventions are ineffective, but quality research in this field is difficult due to patient safety concerns and difficulty with follow-up.

A Cochrane review analyzed the effectiveness of advocacy interventions for survivors of domestic violence in healthcare settings, domestic violence shelters, and community centers. Advocacy, or active support by trained people, may help individuals make safety plans, deal with abuse, and access community resources [17]. Counseling the survivor at the time of their disclosure of abuse may strengthen their self-worth and provide ongoing support. Counseling may also allow the clinician to assess the degree of danger for survivors and their children and help them develop a safety plan. Attempting to or leaving a relationship with a perpetrator often increases the risk of injury, so providers should not encourage their patients to leave a relationship but should instead support their patients in their decisions. If a patient would like to leave their abuser, healthcare workers should aid in developing a safety plan and connecting to community resources [17]. The Cochrane review

Table 2 Hotlines for victims of abuse

Child Abuse Hotline	1-800-4-A-CHILD (800 422 4453)
National Domestic Violence Hotline	1-800-799-7233
Missing and Exploited Children Hotline	1-800-843-5678
Rape, Abuse, Incest, National Network (RAINN)	1-800-656-HOPE (1-800-656-4673)
Sexual Abuse - Stop It Now!	1-888-PREVENT
National Human Trafficking Hotline	1-888-373-7888
Suicide and Crisis Lifeline	988

showed that intensive advocacy might reduce physical abuse 1–2 years after the intervention, but there was no evidence that advocacy reduced physical, emotional, and sexual abuse in the long term or that advocacy benefitted survivors' mental health [17]. This does not mean that advocacy efforts are ineffective, however; rather, these vulnerable individuals require longer-term follow-up and mental health care.

Evidence-based treatments for survivors of physical abuse and IPV may be lacking, but clinicians should familiarize themselves with local resources for referral. These may include hospital programs, community hotlines, shelters, support groups, legal aid, and social welfare services. Governmental web-based resources include:

- www.futureswithoutviolence.org/
- www.ncadv.org/learn-more/resources
- www.womenshealth.gov/relationships-and-safety/get-help
- www.cdc.gov/ViolencePrevention/intimatepartnerviolence/index.html
- Other web-based resources are available (see Table 3)

Long-term recovery. In a study reporting the perspectives of adult female IPV victims in a Midwestern community domestic violence shelter, 83.5% indicated that IPV worsened their health, and 53.5% reported unmet healthcare needs. About 80% of unmet care was related to mental health care needs [18]. Because of this clear gap

Table 3 Web-based resources for victims of abuse

Organization	Description	URL
Women's Law	Non-profit organization that supports all victims of abuse, regardless of sexual orientation or gender, providing education, tips, and a state-by-state list of resources for victims and families.	https://www.womenslaw.org/find-help
Health Insurance and Mental Health Services	Overview of how to navigate insurance coverage for mental health resources.	https://www.mentalhealth.gov/get-help/health-insurance
Substance Abuse and Mental Health Services Administration (SAHMSA)	Locates services for various forms of mental health or substance abuse treatment.	https://www.samhsa.gov/find-treatment
National Human Trafficking Hotline	Connects victims and survivors with resources to get to a safe place. Accepts tips for suspected cases of human trafficking.	https://humantraffickinghotline.org/
Office on Trafficking in Persons (OTIP)	Connects victims and case workers with additional resources, including federal assistance. Also, includes information on how to assist foreign nationals.	https://www.acf.hhs.gov/otip/victim-assistance

in care, the following section will address mental health care for survivors of physical abuse.

The World Health Organization recommends that women who have experienced IPV and have a mental health diagnosis should receive evidence-based mental health treatments. A Cochrane review (n = 5517 women) demonstrated that psychological therapies—including cognitive behavioral therapy (CBT), third-wave CBT (e.g., acceptance and commitment therapy and mindfulness), behavior therapy (e.g., problem-focused), humanistic therapy (e.g., grief work), integrative therapy (e.g., motivational interviewing), and systemic therapies (e.g., narrative therapy)—effectively reduced depression and anxiety symptoms; however, therapy did not improve other outcomes including PTSD, social support, re-exposure to IPV, and safety planning. IPV survivors require a team-based, individualized, and trauma-informed approach to tailor treatment to each individual's needs. Therapy may help with mental health symptoms, but survivors must first feel safe and supported by their social network, community, and society to make holistic progress [19].

2.2   Emotional Abuse

The prevalence of emotional abuse remains elusive, largely because it is difficult to define, making it difficult to identify and report. Unlike physical abuse, emotional abuse leaves no visible mark that can be quantified. In fact, the long-term effects of abuse are only recently being researched and somewhat understood. Even in the current research, the long-term effects of emotional abuse in adulthood remain minimal, as most research is focused on the emotional abuse of children or adolescents. What is known is that emotional abuse wreaks emotional and psychological havoc upon the recipient throughout their lifetime.

Emotional abuse. Emotional abuse encompasses a wide variety of behaviors and patterns that vary amongst abusers. Though difficult to define, emotional abuse is easily recognized by objective third parties—following the adage "you'll know it when you see it." Though there is a push to define emotional abuse for diagnostic or legal purposes, there is also resistance based on the fear that defining emotional abuse may impose limitations, leaving outlying victims unprotected [20]. Attempts at defining emotional abuse often result in simply describing the outcome of emotional abuse, such as "damage to the child's psychological development and emerging personal identity" or "the child's behavior is disturbed or their development impaired" [21].

Instead of focusing on defining emotional abuse, experts rely primarily on distinguishing patterns. Emotional abuse can be largely recognized as repetitive behaviors demonstrating an inappropriate emotional interaction or response from the abuser [21]. Emotional abuse may entail intimidation, threatening, or emotional with-holding. The abuser may blame and inflict excessive punishment for menial offenses. Victims of emotional abuse endure deprecating speech, insults, and rejection from the abuser. Victims are often isolated from external social networks as the abuser may interfere with the victims' external relationships, limiting contact

or transportation. Emotional abuse of a child may include assigning inappropriate responsibilities and tasks. Exposing children to explicit adult behaviors or exposing an adult to unwanted explicit behaviors is a form of emotional abuse [20]. It is important to note that though any individual may occasionally demonstrate any of these or similar behaviors, emotional abuse is characterized by a pattern of repetition—inflicting such behaviors on another individual repeatedly [21].

2.2.1 Long-Term Effects of Emotional Abuse

Emotional abuse has the potential for detrimental long-term effects. Emotional abuse may lead to psychological or mental health problems and chronic disease, which may severely impair the victim's ability to develop healthy, lasting relationships. These effects may be seen in childhood or adulthood, though there are some slight differences when the victim suffers emotional abuse as a child that should be taken into consideration.

Psychological. Victims of emotional abuse struggle to establish a self-identity, often holding on to poor self-perception, self-worth, and self-esteem. Emotional abuse survivors possess inadequate coping mechanisms for periods of distress, resulting in depression, anxiety, and isolation. Poor mental health in this population commonly manifests in higher rates of self-harm, substance use disorder, eating disorders, and high-risk behaviors [22]. Women who endure emotional abuse are more likely to suffer from depression and low self-esteem. A history of emotional abuse contributes to feelings of loneliness and self-despair. Anxiety and emotional numbness may be signs of emotional abuse [5].

Physical. Emotional abuse may lead to long-term physical effects. It has been hypothesized that emotional abuse is related to the development of chronic fatigue and fibromyalgia [23]. Eating disorders developed secondary to the effects of emotional abuse may lead to physical harm, such as nutrient deficiencies, anemias, bone demineralization, and irregular menstruation in women [5]. Victims often experience sleep disturbances, such as insomnia, that affect their overall mental and physical health. Emotional abuse may precipitate chronic pain of a psychosomatic origin, disrupting their ability to work, care for a family, or engage in regular physical activity [5].

Relational. Those who have endured emotional abuse often find it difficult to create and maintain healthy relationships [22]. Victims of emotional abuse experience higher rates of interpersonal conflict in subsequent relationships [24]. Emotional abuse increases the likelihood of revictimization, or exposure to subsequent traumatic events, more so than physical or sexual abuse. This perpetuates a cycle of recurrent emotionally abusive experiences [25]. In fact, emotional abuse has been found to be a reliable predictor of intimate partner violence in affected women, leading to further victimization of physical abuse, emotional abuse, sexual abuse, coercion, or controlling behaviors [26].

2.2.2 Effects of Childhood Emotional Abuse

Emotional abuse in childhood has been linked to various mental health disorders well into adolescence and adulthood. Mental health disorders known to be associated

with *any* form of childhood abuse include anxiety, depression, bipolar disorder, various eating and personality disorders, post-traumatic stress disorder, and revictimization. Emotional abuse specifically has been found to be strongly correlated with the increasing severity of post-traumatic stress disorder when endured in childhood [25].

Studies have shown that childhood emotional abuse is independently related to the development of emotional dysregulation and depressive symptoms compared to physical or sexual abuse [24]. This is important to consider when evaluating behavioral or learning problems or when establishing a new home with a new caregiver. Children who suffer from emotional abuse seem to show increased rates of substance use disorders in adulthood [24]. However, it is important to consider that a child often suffers from multiple forms of maltreatment resulting in overlapping long-term effects.

2.2.3   Recovering from Emotional Abuse

First Steps. Unlike physical abuse, where visible wounds heal relatively quickly, emotional abuse often takes years of active rehabilitation to achieve recovery. Before recovery from emotional abuse takes place, the victim needs to be removed from the reach of the abuser. This requires recognizing and disclosing the abuse, which is a hard first step for many victims. Emotional abuse tends to develop slowly, becoming more severe over time. This can make it difficult for the victim to see the abuse as they endure it daily. Once the victim does recognize the abuse, leaving the abuser may be further complicated by child custody, lack of housing, lack of independent finances, lack of education, or lack of employment opportunities. As mentioned previously, victims of emotional abuse experience feelings of low self-worth. Low self-esteem may cause them to believe they are incapable of a life independent of the abuser or even that they deserve the abuse they suffer. Victims of emotional abuse may show signs of Stockholm Syndrome—an unhealthy emotional attachment to the abuser [27]. A desire to withhold information about the abuse is common, often due to feelings of shame or wanting to protect the abuser. This can be especially challenging and lead to additional barriers to recovery because recovery requires honesty and transparency from the victim. However, when supporting victims of emotional abuse, it is important to validate these feelings and desires. Normalizing these emotions will aid in decreasing embarrassment and facilitating a trusting relationship [28]. Because leaving an emotionally abusive situation can be so difficult, victims of emotional abuse may need support from an outside source, such as a primary care provider, religious leader, mental health specialist, peer support group, or simply a good friend or family member. Normalizing asking for help and creating a safe space for a victim to turn when the time comes can be an excellent starting point for anyone encountering a suspected victim of emotional abuse.

Therapies. The primary goal when aiding in emotional abuse recovery is to rebuild a sense of self, develop healthy relationships, and create healthy coping strategies for strong emotions. This is most commonly achieved through various methods of psychotherapy [22]. Research shows that adults who have suffered

maltreatment as children and currently suffer from mental health disorders, such as depression, anxiety, or post-traumatic stress disorder, benefit more from psychotherapy than medication [29]. There are multiple modalities of psychotherapy that may be beneficial to a recovering victim of emotional abuse. Eye Movement Desensitization and Reprocessing (EMDR) therapy has specifically been shown to assist in resolving memories of adverse events, such as memories of severe emotional abuse [30]. Component-based psychotherapy (CBP) was developed solely to support victims of emotional abuse resulting in complex post-traumatic stress disorder (CPTSD). This method of psychotherapy addresses four components of emotional trauma—relational, self-regulation, dissociative self, and narrative construction of self [3, 31]. Other forms of therapy beneficial to victims of emotional abuse include group therapy, individual therapy, cognitive behavioral therapy, and somatic therapy [27].

Supporting Children. Experiencing emotional abuse as a child can lead to an especially challenging recovery. Childhood is when relationship roles are defined, attachments are formed, communication skills are developed, and skills for emotional regulation are learned. Recovery starts with placing the child in a safe environment away from the abuser. Safe placement can be a barrier as there are many considerations to be made, such as whether to place the child with extended family, how/if to keep siblings together, and how to support the new caregiver or adopter. Children from an emotionally unstable environment often come with severe emotional dysregulation. Preparing the new caregiver for this anticipated barrier through education and promotion of self-care is essential to success. Role-modeling healthy emotional regulation by the new caregiver is an important aspect to the path to recovery. It is advised to refrain from labeling children with a severe history of emotional abuse with any form of behavioral disorder. Commonly, these children will present similarly to other children with attention hyperactivity disorder (ADHD), autism, attachment disorders, anxiety, depression, or PTSD. However, mislabeling children recovering from emotional trauma may lead to self-fulfilling prophecies, as it may be easier for these children to adapt to the label than to an emotionally recovered state. Children recovering from emotional abuse should have a supportive care team, including a case manager, behavioral health specialist, and pediatrician [20].

Supporting Victims of Human Trafficking. Hope is an essential element when aiding human trafficking victims in their recovery from emotional abuse. In a recovery setting, victims of human trafficking feel as though they are in a state of limbo—scarred by their past and unsure of their future. Unsurety leads to feelings of worry and anxiety—worry about where they will live, how they will generate an income, or whether anyone cares about them or want them. A study conducted by Viergever et al. found that replacing feelings of hope*less*ness with hope*ful*ness gives victims direction. Victims benefit by developing a sense of competence in a skill or area. Competence can be achieved with small projects or learning activities, such as learning a language, learning to bake, or taking an art class. Recovering victims also benefits from feeling relatable to others. This can be facilitated through group activities with other victims of abuse and further provides opportunities for

emotional support. Developing autonomy allows victims to envision another future. A sense of autonomy may come from opening a bank account or developing a trade skill that could potentially generate income. Creating a sense of purpose lights up a pathway for recovering victims to move forward [32].

3   Summary

Physical and emotional abuse are significant contributors to the trauma experienced by victims of human trafficking and intimate partner violence. Physical abuse is preventable with education, identification of risk factors, and promotion of healthy relationships. Though the effects of physical abuse may be seen long after the abuse has occurred, acute injuries occurring from physical abuse are usually treatable. Long-term physical effects of physical abuse include somatization, chronic pain, traumatic brain injury, gastrointestinal disorders, and chronic disease. Psychological sequelae may include PTSD, depression, anxiety, substance use disorders, and suicide. When supporting a victim of physical abuse, the first step is to perform a safety assessment, followed by referring to appropriate community resources to create a safety plan. After treatment of any physical injuries, the next consideration should be a mental health evaluation, as mental health is the most common unmet healthcare need following physical abuse. Evidence-based mental health therapies for physical abuse recovery include CBT, behavior therapy, humanistic therapy, integrative therapy, and systemic therapies.

Emotional abuse is difficult to define, but it includes emotionally degrading behaviors committed against another individual and is characterized by a pattern of repetition. Long-term effects of emotional abuse include emotional instability, mental health disorders, chronic health conditions, and difficulty maintaining healthy relationships. Emotional abuse suffered in childhood is correlated with increased rates of post-traumatic stress disorder, emotional dysregulation, and behavioral problems into adolescence and adulthood. Recovery from emotional abuse requires recognition of the abuse by the victim, which is not always easy. Recovering from emotionally abusive relationships can take years and most often requires various forms of mental health support, including psychotherapy. Supporting child victims of emotional abuse can be difficult as severe emotional dysregulation and attachment problems often create challenges for the child and the new caregiver.

Supporting victims of abuse requires a hopeful environment. Clinicians need to take an empathetic approach, understanding that leaving a physically or emotionally abusive situation presents various challenges for the victim to overcome. Recognition of the long-term impacts of both physical and emotional abuse better prepares clinicians to provide the support required for recovery. The role of clinicians when encountering abuse is to identify, treat, and refer victims when appropriate. Clinicians should become familiar with local, state, and federal resources available to victims.

Discussion Questions

- Name three long-term physical and three long-term psychological effects of physical abuse.
- Your 28-year-old patient is here for her annual physical exam. She reports she is a survivor of human trafficking and discloses a history of related physical abuse that occurred 5 years ago. She reports feeling safe now and denies any ongoing abuse. She endorses a history of depression but is otherwise healthy. However, she complains of chronic headaches, insomnia, and random abdominal pain with no associated cause over the last 5 years. What might your patient be experiencing? How do you proceed?
- What actions may be considered emotional abuse? What key elements need to be present to call it emotional abuse?
- You are taking a social history on a new patient. She reports not having a driver's license because her partner can take her wherever she needs to go. She reports no socializing beyond work or home. She doesn't make eye contact and often makes self-degrading comments. What questions do you have for this patient? What resources would you provide her?

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Human Trafficking and the Trauma-Informed Physical Exam

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1 Trauma Definitions

According to the Substance Abuse and Mental Health Services Administration (SAMHSA), trauma can be described by the "Three E's": Events, Experiences, and Effects. Trauma results from an event, a series of events, or a set of circumstances that is "experienced by an individual as physically or emotionally harmful or life threatening and that has lasting adverse effects on the individual's functioning and mental, physical, social, emotional, or spiritual well-being" [1]. Trauma assumes multiple forms, including psychological abuse, physical assault, war, death/loss, poverty, community violence, pandemics such as the COVID-19 pandemic, natural disasters, neglect, generational trauma, racism, homophobia, transphobia, misogyny, and others. Notably, how the event is experienced may vary from person to person, and it is the individual's experience of the event that will determine whether it has long-lasting traumatic effects. These experiences may be influenced by cultural factors (e.g., gender, race, ethnicity, sexual orientation, etc.), as well as by protective factors that are lacking or present (e.g., supportive family, sense of community, economic stability, and others) [2]. Certain populations are at greater risk for trauma than others. These include children who have experienced foster care; impoverished children; refugees and immigrants; LGBTQIA youth (lesbian, gay, bisexual, transgender, queer/questioning, intersex, and asexual); underrepresented racial, ethnic, and religious groups; children of military families; neurodiverse children; individuals with complex medical needs and chronic conditions; and even overweight and obese youth who many experience microaggressions (seemingly small and sometimes unintentional slights, insults, and biases that accumulate over

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time) [3]. Certainly, people who have experienced human trafficking will be at high risk for trauma, and typically multiple types of trauma.

A pair of "ACEs" contributes to toxic stress and trauma and points to a need for a population health approach to resolving trauma. These ACEs include adverse childhood experiences such as divorce, maternal depression, emotional and sexual abuse, physical and emotional neglect, substance use disorder, mental illness, homelessness, domestic violence, and incarceration as well as adverse community environments such as poverty, discrimination, violence, community disruption, poor housing quality and affordability, and lack of opportunity, economic mobility, and social capital [4] This same pair of ACEs is correlated to human trafficking [5] and increasingly, human trafficking is recognized as a public health issue [6–9].

2   Trauma Statistics

While environment and population characteristics influence the frequency of toxic stress and trauma, simply put, trauma is common, not just among trafficked persons but among the general population, where 89% of people report at least one traumatic event in their lifetime [10]. Youth are susceptible to trauma, with 46% of all youth experiencing at least one traumatic event by 17 years of age [11], and 37% of youth experiencing a physical assault during a 1-year period [12]. Exposure to traumatic events is even more common, with 82% of children entering a Childhood Mental Health Initiative System of Care program having experienced at least 1 trauma exposure, such as witnessing crimes, fires, and physical/sexual assault [13].

3   Effects of Trauma

Health effects of trauma include chronic disease such as asthma and diabetes, cardiovascular disease, mental illness, and chronic pain syndromes [14]. Unsurprisingly, victims of human trafficking experience physical and mental health symptoms, as well as chronic medical problems [15–17]. Signs of trauma witnessed in patients by the medical professional may include avoidance of procedures such as a Pap smear, colonoscopy, or routine dental care; vague, generalized symptoms such as chronic headache or pelvic pain; appearing nervous or distracted or antagonistic during a clinical encounter; and/or nonadherence to medical treatment plans and, therefore, repeated presentations with acute exacerbations of chronic disease such as diabetic ketoacidosis, asthmatic respiratory distress, thyroid storm, and even late transplant graft failure due to immunosuppressive medication nonadherence [18, 19].

4 Trauma Is Treatable

4.1 Prevention and Growing Resilience

Qualitative data suggest that efforts to build community resilience to trauma should be grounded in quality improvement projects through data-driven decision-making and program development [20]. The Centers for Disease Control (CDC) advocates for an approach to stop violence and trauma before they begin. The CDC Social-Ecological Model identifies the connection between four factors that influence violence and trauma: individual (biological, age, personal history) relational (family, intimate partner, and attachment to caregivers), community (schools, workplaces, and neighborhoods), and societal (cultural norms, socioeconomic, and policy-driven) [21, 22].

SAMHSA's Children's Mental Health Initiative (CMHI) promotes treatment and support for children, youth, and young adults with serious mental health disorders—most of whom have experienced at least one traumatic event. Analysis of data gathered from 2009 through 2016 revealed that children and youth with traumatic experiences who received services through the CMHI for 12 months showed reductions in aggression or "externalizing problems," as well as anxiety or depression (often called "internalizing problems") compared to their baseline. Moreover, the benefits extended far beyond their mood and behavioral issues; these children also exhibited improved strengths, improved functioning, and improved problems with substance use and abuse 12 months after the start of treatment. They demonstrated significant improvements in school functioning, with reduction in days absent from school, improvement in school performance, and improved competence in school and classroom tasks, as reported by parents [13]. The bottom line is that trauma is treatable.

4.2 Trauma-Hyphenated Terms

If trauma is treatable, then how do we as medical and healthcare professionals work with traumatized individuals in a manner that avoids re-traumatization and promotes their healing? The term trauma-informed care is thrown around often, but what does this mean? And how does trauma-informed care differ from some of the other trauma-hyphenated phrases being used?

"Trauma-focused" or "trauma-specific" therapies include evidence-based therapies that directly address the source of mental and psychological trauma and seek to treat post-traumatic stress disorder, anxiety, depression, and even substance abuse that might result from trauma. Trauma-focused cognitive behavioral therapy (CBT), psychotherapy, and eye-movement desensitization and reprocessing (EMDR) are examples.

The term "trauma-sensitive" was first introduced into educational literature to describe schools or places of learning in which all students feel safe, supported, and empowered to participate in learning activities. Such environments are free from

racism, misogyny, and other systematic forms of oppression and inequity and instead promote a sense of belonging [23]. Trauma-sensitive clinical practice, as explained by Schacter et al., involves nine principles to promote survivor health: within the clinical encounter, trauma-sensitive care calls for respect, patience, rapport, sharing of information, sharing of control, respecting boundaries, fostering mutual learning, understanding that healing is nonlinear, and demonstrating awareness and knowledge of interpersonal violence [24].

According to SAMHSA, an approach that is trauma-informed [25]:

- Realizes the widespread impact of trauma and understands potential paths for recovery.
- Recognizes signs and symptoms of trauma in patients, families, staff, and others involved in the system.
- Responds by fully integrating knowledge about trauma into policies, procedures, and practices.
- Seeks to actively resist re-traumatization.

The individual physician, nurse, or other clinician will incorporate a trauma-informed approach to their work with patients. In doing so, the CDC recommends six guiding principles to this approach. Namely, these require attention to [26]:

1. Safety
2. Trustworthiness and transparency
3. Peer support
4. Collaboration and mutuality
5. Empowerment and choice
6. Cultural, historical, and gender issues

A "trauma-responsive" system of care (such as a hospital, criminal justice, or child welfare network) provides an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma. The system emphasizes physical, psychological, and emotional safety for providers as well as patients/clients. Language is oriented toward rebuilding a sense of control and empowerment, collaboration, and the establishment of trust. Screening for trauma takes place universally at all encounters and in all settings. Further, there are protocols already in place that anticipate crises and prepare staff to address these crises in a manner that reflects trauma-informed values and with trauma-informed resources [27, 28].

Trauma-responsive care involves a paradigm shift from "What is wrong with you?" and even "What happened to you?" to "Where do you want to go, and how may I help you get there?"

Trauma-responsive care involves healing-centered engagement through the building of positive relationships, through the focus on agency and well-being, and through engagement with the surrounding communities culturally, spiritually and through collaborative civic action and healing [29]. Part of this engagement with

communities involves listening to and hearing the voices of survivors of human trafficking. Survivors have requested that health professionals avoid judgmental comments, listen empathically, offer resources and information (regardless of disclosure), and avoid pushing for disclosure [30].

5 Case Study

Let's walk through a case.

"Leah" is a 15-year-old girl presenting to your care for contraceptive counseling and acne. She was discharged from the inpatient children's psychiatry unit 6 months ago when she threatened suicide after being "rescued from a hotel with several young adult men." It is noted in the electronic medical record that she is a "victim of rape" and was "introduced to methamphetamine, cocaine, acid, mushrooms, benzos, and marijuana, with likely gang involvement." (Police noted a young man with firearms within the group at the hotel). Prior to being detained by law enforcement, she was living with her dad but frequently ran away.

On her social history, it is noted that she was a straight-A student and basketball player until recently.

Her mother pulls you aside before you enter the room, tells you that her daughter is a victim of human trafficking, and asks you to address this in your visit today.

Her PHQ-9 score is 0.

You enter the clinic room with mom and find your patient sitting in a chair staring blankly at the wall. She doesn't look up when you enter, and she rolls her eyes when you greet her.

How do you begin?

In fact, you've already begun. You are reading her body language and facial expression and are noting signs of withdrawal, perhaps denial, and certainly a lack of willingness to engage with you. Noting her lack of engagement, you proceed cautiously, quietly, and directly.

She has already sized you up: your age, your gender, your race, the expression on your face (Nervous? Nonchalant? Compassionate? Curious? Uninterested?), the clothes you're wearing, your posture, and more. She is already observing how her mom interacts with you, whether she defers to you or challenges you or maybe is even currying favor with you.

You share with the patient and her mother that you have reviewed the electronic medical record and understand that she was recently discharged from the psychiatric unit and experienced significant trauma. You inquire about what follow-up had been obtained for human trafficking.

Leah again rolls her eyes, shoots a dirty look at her mother, and declares, "Oh my GOD!" and turns her back to you and her mom. Her mother looks desperate and looks to you to engage her daughter.

It's quite possible your patient now feels that you and her mother have teamed up "against" her. How do you re-engage your patient?

You shift the conversation back to the patient's reason for seeking medical care: acne.

You note facial acne, and Leah was previously on Accutane and minocycline and tried multiple topical medications before those treatments. She previously had taken combined oral contraceptive pills for acne and dysmenorrhea, but she could never remember to take the birth control pills consistently and, therefore, experienced frequent breakthrough bleeding.

You ask Leah about her skin, and she immediately engages and asks you, "Can you fix it?"

You share with her alternate contraceptive methods that could help with acne, and she appears somewhat engaged but hesitant.

What might you be able to do to further engage Leah and provide her with a safe space to share with you?

You share with Leah and her mom that you need to have some time alone with Leah to discuss "teen issues" such as sex, drugs, and "rock 'n roll"—your shorthand for feelings such as depression and anxiety and even thoughts of suicide. You share that when you're alone with teen patients, there are some guidelines you follow: "When I meet with you by yourself, I don't perform any physical exam unless there's another adult such as a nurse or medical assistant or your parent in the room. Everything we discuss is private, meaning it stays between you and your health care team, unless I find out that you're in danger—for instance because you're planning to hurt yourself or someone else is hurting or threatening you. In those cases, I would need to get help to protect you."

Her mom leaves the room, and you ask Leah about any questions or concerns she might have. She replies immediately, "Can you give me birth control?" You respond that you can. "For real?" she asks, and she now seems happy and engaged.

You start to move into a Strengths-based HEADDSS assessment—a psychosocial assessment exploring your patient's strengths, home environment, education/employment, activities, depression/drug use, suicidality/sexuality/sexual activity. Leah is now quite open with you, but she responds, "No comment" when asked about drug use. When you ask her, "When was the 1ˢᵗ time you chose to have sex?" She pauses, and replies simply, "This year." When you ask her if she'd like to discuss any coercion or violence, she responds tersely but politely, "No comment, thank you."

What do you do now? Do you probe further to elicit the history about trafficking so that you can provide resources and document her disclosure?

In addition to counseling about the various types of contraception, you ask Leah if you could share with her—as you do with all of your patients—about sexual consent and condom negotiation, as well as some basic information about CSEC (commercial sexual exploitation of children). She agrees to listen, and she remains attentive throughout, asking questions about side effects of medication, asking for online resources about sex, and she asks for information about CSEC "for her friends." She decides on the Nuvaring as her choice of birth control, and—after verifying a negative urine pregnancy, the date of her last menstrual period, normal blood pressure, and no contraindication to estrogen-containing medication—you prescribe her Nuvaring. You share that you will need to do a physical exam and ask

her which she would prefer—her mother or another medical professional in the room? She chooses a nurse as her chaperone. You ask if she has ever had a gynecologic exam, and she shares that in the emergency department "after the 'thing,' they did that and tested me for infections." She shares that she has had unprotected sex since then and consents to a pelvic exam with STI testing, including HIV.

6 Trauma-Informed Clinical Encounters

Knowing that your patient has an extensive history of trauma, how do you conduct the gynecological exam in a trauma-sensitive manner? There are additional parts of the routine clinical encounter that might be triggering for this patient, so keeping some basic trauma-informed approaches in mind is beneficial. See Table 1.

Language matters. During the clinical encounter and history taking, it is important to convey transparency, openness, genuine caring, and curiosity rather than judgmentalism. Body language can speak volumes, so introducing oneself by name and title/role, facing the patient—regardless of the location of the computer screen—sitting, and making eye contact are key. The phrasing of questions—in addition to intonation—could be off-putting to patients. Table 2 provides a sample of survivor-informed phrases that could be used to help people who have experienced human trafficking feel supported rather than judged or pitied.

While most medical students learn to perform the trauma-informed gynecologic exam [32], physical trauma—especially for people who have experienced sex trafficking or sexual abuse or exploitation—often is not limited to one part of the body. Ample research shows that survivors of sex trafficking endure other types of physical abuses, such as choking, beating, slapping, burning, and withholding of nutrition [16]. In light of this, the entire physical exam, in addition to history taking, should be conducted with a trauma-informed lens and in a trauma-sensitive manner. See Table 3.

Table 1 Trauma-informed clinical encounter [31]

1. Introduce yourself and clarify names, pronouns, and titles/relationships
2. Show your ID photo without a mask on
3. Set an agenda: establish time, goals for visit, navigation of History + PE + Tests + Tx Plan. E.g., "We're going to spend about 30 min together today. We'll talk about what's been going on for ___ minutes, and then what to expect in terms of physical exam. Finally, we'll discuss any testing that's needed, possible diagnosis and a treatment\ plan"
4. Use simple, anatomic language. Avoid medicalese and slang
5. Identify any concerns, and reassure the patient you will have a private discussion
6. Engage a chaperone
7. Ask about comfort. Use clothes/drapes to preserve modesty/dignity
8. Reassure the patient that you will stop/pause exam if needed
9. Use standard of care for exam, testing, and treatments
10.   Educate/summarize what you find

Table 2 Language matters: survivor feedback[a]

Instead of…	Youth feel…	Try…
"I am so sorry for you!"	Weak, pitied, reminds them about their lack of power	"I see you're struggling. I'm here to see if I can help and support you. Talking to me is your choice"
"I understand the way you feel"	Weak, resentful, angry, depersonalized story, provider just like everyone else who thinks they understand	"I can see that must've been hard. What can I do to support you?"
"Why did you run away?"	Angry, judged, in trouble	(Address basic needs.) "When you're ready, I'm here to listen. I would really like to know what pressured you to leave"
"Why didn't you leave?"	Angry, judged, in trouble	"I'm so happy to see you now. Is there anything on your mind you'd like to talk about?"

[a]From San Diego Youth Services CSEC training with Live Well San Diego

Table 3 Trauma-informed physical exam [31]

Exam	Modifications
General	• Communicate beforehand the reason for the exam, what the exam entails, and how much time it could take. • Stay within eyesight at eye level (e.g., sit if needed) • Request permission to begin the exam. • Remind the patient that you will pause or stop the exam at any point if they are uncomfortable. • Leave it up to the patient to decide which parts of the exam are sensitive to them. Offer a chaperone before the start of a physical exam. • Use simple, anatomic language. • When possible, allow patients to keep their clothes on and simply move the fabric as needed. • Take time to educate about findings of the exam.
Cardiac	• Allow the patient to place the bell diaphragm of the stethoscope on their own chest. • The clinician can instruct the patient by pointing on their own body where the bell diaphragm should be placed and asking the patient to mirror the clinician.
Pulmonary	• Advise the patient that you will need to listen from behind them; stand angled at the side of the patient and extend your bell to access the back with the other hand resting on the patient's shoulder.
Abdominal	• Allow the patient to have their hand placed on top of yours as a guide for both auscultation and palpation. • Undrape in segments, only as needed.
Thyroid	• Offer to perform anterior vs posterior vs angled approach based on comfort/preference. • Allow the patient to have their hands resting on top of yours lightly as you perform exam.

Table 3 (continued)

Exam	Modifications
Gynecologic	• Allow patient to wear all clothing above the waist. • Communicate what you are going to do before you do it. • Check in routinely. • Once the patient feels comfortable with your description, perform the exam at your normal speed: do not risk missing details by rushing, and do not prolong the discomfort by going too slowly. • Offer to perform the bimanual exam from the side with the patient in the lateral decubitus position. • Use the smallest speculum to begin, sizing up only if needed. • Use lubricant instead of water, and reapply between the speculum exam and the bimanual. • Offer the patient the opportunity to insert speculum themselves (like a tampon) if more comfortable. • Be honest if you are having difficulty getting a sample: offer to retry or to stop and reattempt at another time if they would prefer. • Provide tissues and/or pad at the end of the exam.
After the exam	• Express thanks • Discuss results/findings • Welcome questions

7 Case Conclusion

After you perform Leah's physical exam in a trauma-informed manner, you express thanks to her for entrusting you with her care. You share that you will send samples to the lab for testing, and that you expect results in several days. You reassure her that you will call *her* (not her parent) with any abnormal results and confirm her phone number, and you confirm that it's safe to leave a voicemail on her phone if needed. You also request phone numbers for two other trusted people in her life, just in case you have trouble reaching her. You invite questions, and Leah asks when she can come back to see you "just to check in." You confirm your clinic schedule and invite Leah to return in 6 weeks to follow-up for a pregnancy test and to trouble-shoot any issues with the Nuvaring or any other concerns, and you inform her that the nurse who served as a chaperone will call her in 2–3 weeks to check in with her, as well. Leah thanks you for your time and leaves the clinic with her mom. She is almost smiling.

8 Conclusions and Future Directions

People who have experienced human trafficking will be at high risk for multiple types of traumas. In general, trauma is common, trauma may assume multiple forms, and the long-lasting health effects of psychological and physical traumas may be observed by the trained health care professional (HCP) during history taking and/or during the physical exam. Therefore, the individual HCP must actively seek to resist re-traumatization, must keep in mind that trauma is treatable, but must also

avoid the "rescue mentality." When HCPs consider the CDC Social-Ecological Model that identifies the connection between individual, relationship, community, and societal violence and trauma [21, 22], HCPs may find it easier to embrace a trauma-sensitive approach that restores agency to the individual and seeks long-term solutions in addition to or rather than quick fixes. HCPs may even advocate for the creation of trauma-responsive systems emphasizing physical, psychological, and emotional safety for providers as well as for patients/clients.

Trauma-responsive systems build on health professional human trafficking education programs by acknowledging the extensive time and resources needed for patients with complex trauma, such as individuals who have experienced human trafficking. In these cases, the integration of multiple services—medical, psychological, social work, immigration assistance, housing, education/jobs training, substance use rehabilitation, and even theater arts—is used to holistically address the needs of trafficked individuals [33–38].

Preliminary data show that medical safe havens that coordinate with community agencies and nonprofits to provide a nexus for delivery of services to trafficked individuals may help participants increase their completion of community rehabilitation programs and may increase persistence of follow-up within such programs [39]. More study is needed with non-female individuals in various geographic locations and across multiple typologies of human trafficking, but building on the trauma-informed exam by working toward the coordination of resources and the creation of trauma-responsive systems may increase long-term recovery and ultimately help people out of exploitation.

Discussion Questions
- What actions can you put into your own practice today to prevent re-traumatizing your patients/clients? These might pertain to history-taking and/or physical examination.
- What are steps that you can take with your practice group to promote patient-centered, trauma-sensitive care for your patients? These might include the patient check-in process, documentation, medical gowns and undressing, universal education in the form of posters, etc.
- Identify agencies and organizations in your area that may be appropriate for partnership, such as housing organizations, cultural organizations, arts organizations, and child welfare agencies, among others.
- For ideas on building community partnerships and forming trauma-sensitive protocols, go to https://healtrafficking.org/2017/06/protocol-toolkit/.

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Reproductive Health Care for Trafficked Women Traversing South of America

Rachel Simmons

1 Impact of Human Trafficking

Human trafficking entails the fraudulent and illegal commodification of human beings for profit [1]. According to the United Nations, women and girls represent the majority of human trafficked victims, representing more than 70% of trafficking victims globally [1]. The trafficking industry in the industrialized United States (US) is tenacious as the market for women and girls continues to grow [2]. The deleterious psychosocial and physical effects of trafficking are chronic, particularly for women across their lifespan [3, 4].

American values surrounding human rights, particularly related to human trafficking, have shifted toward justice. Individual and collective research advancements and coordinated efforts by global human rights organizations and other alliances have heightened public awareness of the problem. Geopolitical alignment with several countries, particularly those south of America, has enhanced surveillance, reporting, and mitigation strategies against trafficking across the southern regions [3, 4].

Based on 2018 statistics provided by the Global Slavery Index (GSI), trafficking prevalence is amongst the highest in states and countries with close geographical borders where quality of life is suboptimal [5]. The GSI tracks prevalence, vulnerability, and governmental response as a function of risk management. As a plethora of immigrants illegally traverse the southern US border, either to escape repressive governments/regimes, or for seasonal work (often associated with labor trafficking), chaos ensues. The situation is further exacerbated by those with expired visa classifications awaiting deportation. The result is that these individuals frequently live, work, and exist in dire situations that are not amenable by means of personal control.

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Trafficked women who become pregnant are at risk for reproductive injustice. Many women are said to have "anchor babies"—a derogatory term—inferring extended ties to the US by illegal means. Postpartum deportation, which ensues after mothers give birth and deportation orders are processed, creates a maternal/child dilemma and is a common practice designed to deter women from entering the US illegally. These cases are highly complicated due to a multitude of variables. The above encompasses the derivation of human trafficking for women, making multidisciplinary professional roles vital when providing reproductive health care.

1.1   Impact on Families

Women are often said to be the gateway to the family. When women's lives are changed for the better, the functionality of the family unit is enhanced. Women with improved health literacy often promote health and well-being in the family [6]. When familial kinship bonds are broken through trafficking, families are vulnerable to acute or chronic diseases that lead to poor quality of life. This is extremely detrimental to the family. The chronic and malignant cycle of trafficking endangers entire families for generations as many are looped into the cycle of slavery. Thus, the trafficking impact on families is profound as women are often powerless to advocate for themselves, their families, or their children to establish or support a strong family unit.

1.2   Impact on Children

Trafficking impacts not only women but also their children. The UN estimates that children account for slightly more than 30% of trafficking victims [1]. While all trafficked children are at risk, girls are particularly subject to being trafficked or groomed for sex work. This occurrence is due to misconceived societal norms surrounding gender roles that place girls in jeopardy of sexual, physical, and emotional exploitation [7]. All of the aforementioned have devastating effects on the psyche of children [7]. Girls, who are highly susceptible to violence, may attempt to flee their situations, which potentiates sex trafficking [8].

Trafficked women hold deep feelings and beliefs about their situations. Those brave enough to speak on their probable plights offer insight into their humanity. In one such case, a probable trafficked victim in the deportation process fighting to stay with her child, a US citizen by birth, who provided fundamental thoughts about the functionality of familial ties. The woman inferred that women are the same regardless of race, ethnicity, or circumstances. Moreover, women desire to be loved and healthy and to have themselves and their children treated with dignity and respect. The depth of profound feelings such as the above may be considered for professional role when caring for vulnerable women and their families.

2 Professional Roles in Human Trafficking

All disciplines have professional roles that require accountability, client trust, and the assurance of safety [9]. However, the professional role when caring for trafficked women has not been adequately defined and is often disjointed and fragmented. Comprehending professional roles may contribute to providing reproductive care for probable, past, or persistent trafficking victims and *prevent* trafficking in the first place. Moreover, many trafficked women do not continually undulate between states or countries. Rather, some trafficked women traverse between jobs and individual homes [3, 4]. However, most of these women endure inhumane conditions surrounding inadequate funds, hard labor, unpaid work, and physical, sexual, or emotional abuse with poor living conditions [1, 10]. Professionals within all disciplines must be aware of the social determinants of health impacting these women. Ethical, moral, and legal implications often obscure professional roles when providing health care for the trafficked.

2.1 Ethical Considerations

Ethics is a complex philosophical inquiry method ranging from conceptual to applied components. Most health disciplines function at the applied level utilizing professional, ethical standards that refer to "what is good" with an internal value-based reflection ([11], p. 6). The goal of health care in the US is to promote well-being, improve quality of life, and prevent disease [12]. This goal requires a commitment to beneficence, autonomy, non-maleficence, and justice.

Healthcare goals in the US do not have an asterisk or delineation by race, ethnicity, disability, income, gender, or immigration status. Therefore, providing reproductive health care for trafficked women appears to meet basic ethical clearance and is within the purview of nursing, medicine, public health, and allied health partners. While all health disciplines have a duty to report what is illegal, it is not within the scope of practice to legislate or apply judiciary punishment. The latter is a process that creates a professional conflict of interest and would prevent "doing what is good," which is the philosophical underpinning of professional ethics.

2.2 Justice Considerations

Human rights research in the twenty-first century has advanced to continuously include one of the most under-utilized and controversial ethical principles of justice. For more than 20 years, the World Health Organization (WHO) has included reproductive justice within its human rights framework [13]. This delineated framework includes women's rights to bodily autonomy, child status (having children or not), and parenting [13]. Trafficked women are often excluded from reproductive justice principles because of their societal standing. Ensuring reproductive justice for these women requires healthcare partners across all

disciplines to know the trafficking problems and to keep ethical principles as the basis of professional practice.

2.3   Moral Considerations

Morals are the values that guide the internal locus of control. Understanding morals as an essence of self helps to guide the thought processes and actions required in professionalism. Healthcare providers may be challenged to care for trafficked victims because of individual morals conflicting with the law. These are often valid and necessary considerations, as morality is individual and innate. Moral thought often surrounds healthcare resource allocation for those with an illegal status who arrive without a formal process. Many health providers assert that providing health care for those with unlawful immigration status deprives US citizens of health care resources. The aforementioned is a form of "distributive justice" and is a function of what society has deemed equitable ([11], p. 408).

When caring for probable trafficked women, it should be considered that these women often lack autonomy. Presenting in the health care setting is usually a last resort and is a frightening endeavor for this group. These women fear being reported, deported, and a trifecta of abuse that contributes to deteriorating physical and mental health. To assist moral logic, healthcare professionals may apply the moral tenants of empathy and respect for humanity when caring for vulnerable and trafficked women. Reflection on these virtues of morality may support professionalism in promoting health advocacy and autonomy when providing reproductive care for trafficked women.

Another important consideration is the human virtue of empathy. Empathy requires one to identify with others as fellow beings who are deserving of having their basic human needs met. Having empathy for others encompasses fleeting self-reflection that guides behaviors and actions. The act of human trafficking inherently decreases a victim's dignity. Moreover, trafficked women have complex reproductive needs where their dignity and humanity require consideration. Health professionals are well-positioned to offer empathy, a critical component of caring. For all of the reasons stated above, health professionals must ponder the ramifications of denying the intrinsic dignity and humanity of any person and allow this simple query to guide decisions about best clinical practices.

2.4   Legal Considerations

The legalities surrounding care for trafficked women are numerous. Trafficking is illegal and fraudulent in the US. Nevertheless, the industry for trafficking continues to expand, particularly for women [1, 2]. There is an apparent juxtaposition between reporting duty and health care delivery as professionals seek to abate worsening the predicaments of patients. The Victims of Trafficking and Violence Protection Act of 2000 seeks to provide justice for trafficked victims in terms of prevention, protection

from harm, and to ensure prosecution of the perpetrators [14]. Health professionals must be familiar with the regional, state, national, and global laws, acts, and policies implemented to protect trafficked women.

While multidisciplinary professionals in all 50 states may encounter trafficked women, providers along the U.S. southern border are most likely to interface due to proximity [15]. An interdisciplinary team is required to mitigate morbidity and mortality for these individuals [2]. Law enforcement partners are vital resources against trafficking but are often under-resourced to tackle the trafficking pandemic. Healthcare professionals need knowledge of the problem, an understanding of trafficked victims' characteristics, and of the duty to report. If human trafficking is reasonably expected without malicious intent to harm, it may be reported [16]. Human trafficking drastically hurts women, families, communities, and the nation.

3   Characteristics of Trafficked Women

Another impairment to health professionals' ability to report legally is the lack of knowledge regarding the characteristics of suspected trafficked women. It is impossible to delineate all characteristics of one specific group as this often requires years of immersion with the group under study. However, prolonged engagement with potential or trafficked women (intentional or unintentional) may aid in creating a profile of the unique characteristics of this group of interest. After more than a decade of service providing direct clinical care to thousands of diverse women traversing south of the US, it is plausible to chronicle approximate characteristics that exist for trafficked women.

Trafficked women often present without legal identification (driver's licenses, social security numbers, birth certificates, passports, or any identifying document). These women typically sign with an "X." The women are likely to walk into healthcare facilities without an appointment. Often, little English is spoken, particularly in the presence of a suspected trafficker or their representative. Grooming may be inadequate for what is socially normative, and clothing may be inconsistent with the weather. Though culture is considered, many women lack eye contact and speak softly, often in as few sentences as possible. Reproductive and gynecological histories are inconsistent and illogical. There are no physical ties to the city or town, be it names of relatives, phone numbers, addresses, or orientation. Cell phones may be pre-programmed with only a few numbers. Atypical preoccupation with specific activities of the provider or the care team is evident as the patient asks several reporting-related questions. Patients may ask for food or drink at the clinic. Follow-up care may be declined due to a lack of trust during the first encounter. Lack of follow-up creates significant barriers to care and an impetus for adverse clinical outcomes for trafficking victims, ultimately increasing morbidity and mortality.

4   Clinical Implications of Trafficking

Clinical implications for trafficked women are vast. These women face unique barriers to health related to access, quality, and timeliness of healthcare delivery. Health professionals caring for women are often the primary care providers. As such, providers are required to manage chronic conditions and reproductive health. Reproductive health implications include obstetric challenges (prenatal, postpartum, and breastfeeding) and gynecological challenges surrounding urinary tract infections, vaginal injury/trauma, sexually transmitted diseases, vaginal infections, and contraception misuse, which leads to unintended pregnancies [2, 10]. Chronic conditions impacting reproductive health may be related to hypertension, dyslipidemia, and diabetes, which challenge decision-making when providing reproductive care [17]. Therefore, trafficked women are at risk for worse health outcomes.

5   Obstetric Services

Care for pregnant women with past, probable, or persistent trafficking histories is arduous. A comprehensive obstetric history is one of the most vital aspects of care for pregnant women. These women will often not share extensive histories that allow for obstetric decision-making, management, treatment, and prevention. Complicating obstetric care is a late entry to prenatal care services during the second or third trimesters, where accurate last menstrual periods and gestational ages cannot be calculated. The latter may lead to poor fetal outcomes. Some trafficked women present to the clinic just before delivery, further complicating the labor and delivery process.

In these cases, building trust and rapport is paramount. All labs, imaging, and electronic fetal monitoring must be done at the clinical sites, as there are minimal opportunities to engage these women. A thorough physical examination is pertinent as any infections or pelvic abnormalities must be identified, treated, and planned for before delivery. Women must be oriented to emergency services, call service lines, and the correct hospital or delivery facility. A multidisciplinary team must be assembled to optimize care for potentially trafficked women requiring obstetric care. Follow-up visits may be recommended every 2–3 days (in severe cases and if feasible) or weekly in some cases, as several opportunities to interface with these patients are required to optimize maternal and fetal outcomes.

5.1   Prenatal care

Prenatal and routine obstetric care provided throughout pregnancy is pertinent for trafficked women. Unlike regular medical appointments, prenatal appointments allow professionals to interact with potentially trafficked women at least ten-plus times if following a regular prenatal schedule. The prenatal period is also a time to

build trust and rapport and to alert potential trafficked victims of their rights. There are several opportunities for clinicians or care team members to isolate victims and to speak privately with them. Therefore, it is vital to maintain the standards associated with a professional role while also exhibiting excellent bedside manners consistent with empathy and respect for the trafficking victims' humanity.

Further, prenatal appointments are times when providers monitor fetal growth, development, and maternal health. There are opportunities to address potential problems such as hypertension, gestational diabetes, anemia, sexually transmitted diseases, and vaccinations early in the pregnancy and before complications arise. With adequate prenatal care, potential trafficked women will develop better-coping skills to care for themselves and their newborns. The prenatal period is an optimal time for outreach team members to conduct covert investigations (without harming the victim) while appropriate resources can be allocated to assist this vulnerable group.

5.2   Postpartum Care

Postpartum trafficked women with maternal instinct desire to mother, bond, and protect their children above all. However, many trafficked women do not return for postpartum care. Failure to return is partly due to a lack of systematic trust in health care. Other times, patients may have abruptly moved away from legal ties to the town or city. Unfortunately, these women are at risk for postpartum bleeding, anemia, vaginal complications, infection, eclampsia, stroke, wound disruption, and subsequent mortality. Any postpartum complication may temporarily or permanently take a mother away from a child, which can be distressing for both entities. Missed postpartum follow-up is a squandered opportunity to discuss further care such as contraception and breastfeeding. Finally, postpartum care is often the last interface to disseminate trafficking laws and protections available to these women who may deny a trafficking history.

5.3   Breastfeeding

Breastfeeding provides essential antibodies, fats, proteins, and eugenic properties to sustain infant life [7]. Exclusive breastfeeding is a primary prevention strategy to reduce maternal and infant mortality. Global organizations recommend exclusive breastfeeding for the first 6 months of life and continued breastfeeding as is compatible with the needs of the mother, child, and family [7].

Trafficked women traversing south of America may be inclined to breastfeed. The inclination to breastfeed may be related to culture. Often, trafficked women are not in positions to afford traditional infant-feeding formulas as a function of access and costs. Women benefit from breastfeeding for maternal protection against breast and ovarian cancer, decreased postpartum bleeding, and weight loss [7]. Infants may gain protection against necrotizing enterocolitis, respiratory tract infections, asthma, diabetes, obesity, and sudden infant death syndrome [7]. Women must be

educated about the benefits of breastfeeding and taught methods to keep their milk supplies intact through adequate food, hydration, and frequent feedings or pumping. Medical professionals should teach women about the ominous signs of infection.

6 Gynecological Services

A range of gynecological services is often required for trafficked women. Healthcare professionals across all disciplines with proximity may refer suspected trafficking victims for gynecological services. While primary care providers often possess the knowledge to provide basic gynecological care for trafficked women, these women are best cared for when treated by professionals specializing in women's health. The Department of Health and Human Services lists common reproductive problems that may alert clinicians or health professionals to potential trafficking [10].

6.1 Urinary Tract Infections

Urinary tract infections (UTIs) are common in the trafficked due to sexual abuse or limited access to hygienic processes. In general, the proximity of a woman's reproductive organs (urethra, vagina, rectum) puts women at risk for bladder infections that may move into the kidneys, causing pyelonephritis. Therefore, UTIs are serious and often require specific antibiotics to rid the offending organism. Without care, trafficked women may self-medicate and worsen the problem. Once an organism and antibiotic are identified through culture and sensitivity (C&S), it is relatively simple to treat these infections. However, C&S is not always necessary for empirical UTI treatment. Trafficked women prone to repeat UTIs may require education surrounding prophylactic treatment, such as taking a prescribed antibiotic daily for a while to avoid the need for repeat office visits, complications, or hospitalizations.

6.2 Vaginal Injury and Trauma

Many women are trafficked for sexual work and consequently experience an increased risk of vaginal injury [10]. High suspicion for female trafficking includes the presentation of red, inflamed mucosa (out of proportion for a regular sexual act), vaginal lacerations and bleeding, or perineal burns by chemical irritants or devices. There is frequently a significant amount of pain associated with these injuries. Women with these conditions may appear ashamed or reluctant to receive a physical examination. In addition, the provided histories are likely incongruent with the observed injury.

It is essential for providers to have a chaperone that speaks the patient's language while using translation services as policy dictates. The provider should thoroughly explain the risks/benefits of a vaginal exam (which are most often minimal). A

signed consent to treatment is prudent. Never force the woman to open her legs or touch her body without permission during the exam. Utilize the least invasive equipment for assessment and diagnosis and obtain vaginal cultures for stat processing. Use in-office microscopes as resources for rapid diagnosis and treatment. Repair vaginal lesions in the office if appropriate. Provide appropriate antibiotics, antivirals, or antifungal medications where applicable. Offer pain medication that is not controlled when feasible. Finally, refer to medicine or the hospital for severe cases as needed.

6.3   Sexually Transmitted Diseases

Sexually transmitted diseases (STDs) are problematic for trafficked women [1, 3, 4]. The UN reports that many women are most at risk for sex trafficking [1]. Even when not directly trafficked for sex purposes, women traversing south of America are well aware of the dangers of STDs as there may be rapes or encounters that may contribute to the spread of diseases. These women may have chronic histories of sexually transmitted infections such as human immunodeficiency virus (HIV), gonorrhea, chlamydia, syphilis, herpes, and hepatitis B and C.

The provider should complete a comprehensive physical examination of the eyes, nose, throat, extremities, skin, and pelvic region. On pelvic exam, providers may quickly identify conditions (common in non-trafficked women) such as ectoparasitic infections, human papillomavirus, molluscum contagiosum, bacterial vaginitis, vulvovaginal candidiasis, trichomonas, and herpes. The history and chronicity of these infections may give insight into the diseases' origin or other related factors. Full STD panels, regardless of stated history, but with patient consent, should be sent urgently since early treatment is paramount to preventing pelvic inflammatory disease, infertility, and community disease spread.

Trafficked women south of America require screening and education for diseases outside of the standard HIV, gonorrhea, chlamydia, syphilis, herpes, and hepatitis B and C. Women from the south of America and certain parts of the Caribbean may also come in contact with epididymitis, chancroid, and lymphogranuloma venereum. Providers must stay current with emerging STDs in various regions. Clinicians may also empirically treat trafficked women with different evidence-based medications if presenting symptoms suggest sexually transmitted diseases. Successful STD treatment requires both parties to be diagnosed and treated. Multiple traffickers may sexually abuse women, which is a barrier to health.

7   Hormonal and Non-hormonal Contraception

The ability to family plan ranks among the top ten public health achievements in the US [6, 18]. Family planning is a step toward reproductive justice, which asserts personal control and decision-making. In addition, reproductive control is a measure of autonomy. The ability to family plan is not just for citizens of the US. All women

require the ability to plan their families to facilitate maternal health and well-being. Therefore, access to contraception is a pivotal component of family planning. The lack of reproductive control in trafficked women may place these women at risk for unwanted pregnancies with subsequent poor maternal and fetal outcomes and risks for morbidity and mortality.

Comprehensive education is pivotal to providing effective contraception for women at risk for trafficking. Providers should offer contraception after considering past and current medical and reproductive histories, after a thorough discussion of the most effective method to meet the client's needs, and aligned with heterogeneous cultural values. Providers must avoid inferring preferred contraceptive methods as the woman must make an informed decision-based on individual needs. Trafficked women often require covert methods of contraception. Therefore, various contraception modalities may uniquely benefit these women.

7.1   Oral Contraceptive Pills

Oral contraceptive pills (OCPs) are effective toward preventing unwanted pregnancies [17]. These pills may contain estrogen and progestin, also known as combined oral contraceptives (COCs) or progestin-only pills (POPs). The mechanism of action for OCPs, dependent upon the type, is to prevent the ovaries from releasing eggs, thicken cervical mucous, or thin the uterine (endometrium) lining. Various formulations of estrogens and progestins allow providers to tailor OCPs for the patient's current and future needs.

Trafficked women often utilize OCPs due to their relative ease of use, cost, and access. It is pertinent to provide as many packs of pills as allowed, typically a 90-day supply with four refills for the year. This increases compliance and may prevent unwanted pregnancy. Some women do not prefer an endometrial withdrawal bleed, so pills must be dosed to allow this occurrence. For some, a withdrawal bleed may offer protection and deterrence against sexual advances, even for a short duration. Further, a withdrawal bleed may be preferred due to cultural traditions where monthly bleeding is associated with cleanliness and linked to health. Many women cannot fathom the concept of a drug-induced thin endometrium that prevents the need for a monthly menstrual cycle. There are advantages and disadvantages to both. The advances in formulations of OCPs makes it easier for clinicians to calculate and amend withdrawal bleeding profiles.

7.2   Contraceptive Patches and Rings

Combined contraceptive patches and rings contain estrogen and progestin similar to OCPs. The delivery systems are transdermal and intravaginal, respectively. These methods bypass first pass metabolism and may be better options for those taking certain medications [19, 20]. Further, the patch may be placed in inconspicuous places or stated to be something other than contraception. The ring may be briefly

taken out during intercourse to avoid detection if there is trafficking of women for child-bearing purposes. The effectiveness of these methods depends on device positioning and consistent skin adherence. Weight should be considered with the patch, so body mass index calculation is prudent [19, 20].

7.3   Progestin Injections

Depo-Provera is a contraceptive progestin injection that delivers a form of synthetic progestin injection into a muscle [19, 20]. The injection is typically given in-office or by an individual after displaying anatomical knowledge of where to place the medication. The injection is generally given every 3 months. The advantages include the costs and efficacy. The disadvantages are related to quarterly appointments, potential weight gain, bone density loss with prolonged usage, and undesired bleeding profiles. Trafficked women may benefit from Depo-Provera's efficacy if given on schedule. Precise scheduling may also be a disadvantage of this method. Many women achieve reduced menses or amenorrhea, which is effective against anemia. The privacy surrounding Depo-Provera lends to bodily autonomy in cases where women cannot use contraception. In extreme instances, where women are at risk for repeat pregnancy in the early postpartum period, providers may give the injection at hospital discharge. Injection at hospital discharge gives women the time to establish exclusive breastfeeding, which may be used for several months as a method of contraception.

7.4   Long-Acting Reversible Contraception

Long-acting reversible contraception (LARC) methods are available to trafficked women. These methods are known as intrauterine devices (IUDs) and subdermal implants. Longer-acting reversible contraception can be removed (temporary unlike sterilization) and does not require women to use OCPs, patches, rings, or injections on the daily, weekly, or quarterly. The advantages of these methods are related to the length of use, one-time insertion, and superior efficacy. The disadvantages include costs, removal fees, and side effects such as continuous vaginal bleeding. Women should be taught to feel for longer strings (inferring IUD shifting) and to ensure that the IUD has not been displaced after heavy menses.

There are several types of IUDs on the market today. The differences are related to duration (3–10 years), diameter, progestin dosages, parous status, and family planning or medical needs. A thorough history with comprehensive education is required to determine the device that best fits the patient's needs. While there is no relative maintenance required for IUDs other than occasional string checks, trafficked women may be challenged to commence the latter due to access to care. As a matter of privacy, discussions regarding string length can be negotiated for women desiring discretion. Many facilities offer IUDs at reduced costs for impoverished women.

7.5 Subdermal Implant Contraceptives

Subdermal implants are progestin-only devices implanted under the skin by a licensed professional. This device delivers progestin in a time-released sequence over 3 years. The device is inconspicuous and is often a favorite of women at risk for trafficking. These women may have contraindications to OCPs, patches, and rings or do not prefer IUDs. The implant is highly efficacious and helps to prevent unwanted pregnancies. Those meeting insertion criteria may also achieve amenorrhea status. Amenorrhea reduces the need for feminine hygiene products that are not always available to trafficked women. The advantages are the ease of insertion, length of time, privacy, and efficacy. The disadvantages are cost, side effect profile, and locating a licensed professional for removal.

7.6 Non-hormonal Methods

LARCS and COCs are not the only methods of contraception for trafficked women. Non-hormonal methods include condoms (male and female), spermicides, vaginal sponges, cervical caps, and diaphragms that may be preferred by some women. Some women prefer no method of contraception due to culture. Providers should discuss alternative methods of contraception such as condoms, periodic abstinence by way of calendar usage, ovulation method, and thermal checking [19]. In addition, there is sterilization, which is permanent. Clinicians or care teams may also discuss lactational breastfeeding methods. Trafficked women may be provided samples of non-hormonal methods if feasible. Condoms should be adjunctive to any contraceptive method, as STD prevention is paramount.

8 Chronic Conditions

Chronic conditions challenge reproductive health. Reproductive health cannot be advanced until chronic conditions are identified and controlled. Certain chronic conditions often preclude or limit the full scope of contraceptive interventions [17]. Trafficked women often present with hypertension, dyslipidemia, coronary artery disease, obesity, renal or hepatic impairment, or diabetes due to poor access to quality health care and habits not conducive to optimal health. These conditions must be adequately assessed through history, physical examination, and laboratory confirmation. Labs should not be limited to STD panels in reproductive health if covered by insurance or grants. Various disease processes may be missed if there is tunnel vision regarding the comprehensive needs of women. Clinicians must be ready to serve as primary care providers to prevent, treat, and educate women about the impact of chronic diseases on reproductive health during obstetric or gynecologic care. Early detection and prevention are measures to prevent chronic diseases.

9   Summary

Trafficked women of reproductive age are heterogeneous and vulnerable groups. No individual woman or group from a specific region is homogenous. All trafficked women face different trajectories and present with distinctive needs and challenges. The social determinants of health are essentially absent or gravely deficient for trafficked women. Healthcare professionalism mandates diverse health disciplines to consider the ethical, legal, moral, and practical implications when providing reproductive care for trafficked women. Considering the humanity of trafficked women is judicious as this underserved group deserves adequate clinical care that is evidence based for best practice and aligned with individuals' cultural values.

Reproductive health care must be comprehensive while considering the chronic health of women. To improve reproductive health, interdisciplinary teams across all health disciplines must work together to report and *prevent* trafficking. Health professionals proximal to the problems are also closest to solutions to mitigate morbidity and mortality as well as to facilitate comprehensive reproductive health care for trafficked women.

Discussion Questions
Discussion surrounding reproductive health care for human trafficked victims is a way to determine strategies to allay trafficking in the US. Below are questions for health care professionals across all disciplines to consider when caring for vulnerable trafficked women.

- Discuss the legal duty to report suspected trafficking in your state.
- Discuss additional clinical implications for trafficked women.
- Discuss how culture may impact the delivery of health care for trafficked women.

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Sex Trafficking in India

Priyanka Patel

1   Introduction

The right to freedom is a fundamental right outlined in the United States Constitution. Yet, there are people around the world, who are not free to live their own lives. Trafficking of a human being is a global problem. There are even individuals who participate in trafficking without the knowledge of what they are really contributing to. A common example is household help employed by Indian households. There are agencies that arrange household help for families in need of such help. The problem with this service is that the household help arranged by these agencies are sometimes, underage minors or adults, who owe debts to landlords or money lenders from multiple past generations. Therefore, they themselves, their family, the landlords, or the money lenders will sell them to pay back the debt. The families hiring the help are at times unaware of the trafficking situation.

This example of household help is one of the various forms of human trafficking [1]. The United States Department of State defines human trafficking as selling, trading, exchanging, or transferring a human being for labor, sex, money, or other commodities. Current surveys, like the Trafficking in Persons (TIP) report published by the USDS, report millions of children, women and men are trafficked for various forms of profit [2]. The U.S. Department of State works to distinguish trafficking and smuggling. Smuggling, in relation to trafficking, involves an individual who may voluntarily agree for the act and later becomes a victim of trafficking [3].

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2   Forms of Trafficking

Human trafficking can occur in various forms, such as labor trafficking and sex traf-
ficking. Sex trafficking is trafficking for the purpose of sexual exploitation. Sexual
exploitation is forcing an individual to engage in commercial sex, such as prostitu-
tion or production of pornography through fraud, force, or coercion. Commercial
sex exploitation is more common in certain risk groups, such as runaway and home-
less youth [4]. International movement is another area that needs attention when
talking about sex trafficking. Victims are trafficked not only within a country, but
they are trafficked between countries as well [5]. In India, foreign nationals from
neighboring countries, such as Nepal and Bangladesh, are sold for sex trafficking in
India [6].

3   India in Relation to International Trafficking Standards

The Trafficking Victim Protection Act of 2000 (TVPA) is a requirement from United
States Secretary of State to submit a list of problem areas to legislative bodies in
countries that require special scrutiny and monitor the progress made by these
countries in combating human trafficking. The Trafficking in Persons report
classifies countries into 4 Tiers. Governments that comply with the minimum
requirements of the TVPA are Tier 1. Tier 2 belongs to countries trying to meet the
minimum requirements outlined by the TVPA, but fall short of these requirements.
Most countries make it onto the Tier 2 watch list because, either, the number of
victims in those countries keep increasing, or there is a failure to provide evidence
of increasing efforts to combat trafficking. The countries who do not meet the
minimum requirements and are not making efforts to meet the requirements are
Tier 3 [7].

Trafficking across international borders is common, and the majority of these
victims end up forced into commercial sex and prostitution. Certain countries have
high rates of sex trafficking. India is among the Asian countries where sex trafficking
is at peak. The United States Department of State has put India on the Tier 2 watch
list on the Trafficking in Persons report, along with a warning to down grade it to
Tier 3 unless it improves its records on trafficking [8]. Sex trafficking is not only
common within India, but women and children are trafficked outside of India to
Gulf countries and Southeast Asia. India is also a receiving end for women and
children enroute from Nepal and Bangladesh. Illiteracy and poor financial
background are key victim factors in trafficking. On the other hand, the common
profile of the perpetrator is an individual who identifies themselves as a savior to the
victims in need of money or a stable job and lures the victims into sex slavery by
making promises to get them a stable job in a big city. The mobilization of people
from rural areas to cities further aides the perpetrators to move the victims across
India [6].

4   Statistics of Sex Trafficking in India

The Indian government identified 6622 trafficking victims and a potential 694 trafficking victims in 2020, compared to 5145 trafficking victims and potential 2505 in 2019. Additionally in 2020, the authorities identified that there were 5156 labor trafficking victims, 2837 bonded labor victims, and 1466 sex trafficking victims. The National Crime and Records Bureau reported 1714 trafficking cases under the Indian Penal Code. The numbers have decreased compared to 1830 in 2018 and 2088 in 2019. There are still concerns about underreporting by Indian government. As an example, there are eight million Indians in labor trafficking, but the Ministry of Labor and Employed reported that India has identified and released 313, 962 bonded labor victims since 1976. Of these, 99% of trafficking victims were Indians, 59% of victims were females, 41% were males, 47% of victims were children, and 53% were adults [9].

5   Risk Factors for Sex Trafficking

Sex trafficking victims can be from any age group, sex, and economic status. Adults, minors, and people with various educational levels are all prone to trafficking. Traffickers use a tailored style of enlisting and then controlling the trafficking victim. Although, trafficking victims can be from any strata of the society and from any age-group, but there are risk factors that make certain individuals more vulnerable. Youth on a run from their homes and youth who are homeless are especially vulnerable [2].

6   Mental Profile of Sex Trafficking Perpetrators

Both human trafficking and sex trafficking are a violation of an individual's basic rights of freedom. One wonders: what is the mindset of the people who indulge is such criminal acts of violating other people's rights? To understand the process of trafficking, it is worthwhile to explore the criminal minds of perpetrators involved in such crime. Based on the information available majority of trafficking perpetrators are men [10]. The first person who lures the victim into trafficking shares the same citizenship, which means it is the local criminals that enlist the victim, and then pass them into international criminal networks. These local criminals use various tactics to not only gain a victim's trust, but also threaten harm to them and their families if victims refuse to participate in the crime [11].

Sex traffickers groom and gain trust of runaway children, and then, repeatedly exploit them. They gain trust by making promises, buying gifts, and showing the victims that they are the only ones that care for them [12].

To exert control over the victims, the perpetrators will scare their victims with threats and false fears. They threaten the victims about homelessness, incarceration, and label the victims as a source of shame to their families. If nothing works on the

victim, then the perpetrators will use the last resort of depicting the worst-case scenario, which is that the victim will never be able to reintegrate into society after leaving the sex trafficking ring. Traffickers cut off victim's engagement in the community and do not allow them to speak with anyone, including health care providers. Victims are taught to believe they cannot trust anyone other than their traffickers. For the traffickers, victims are only a source of income, and a commodity to keep running the sex trafficking business. In rare instances when victims attempt to run, the trafficker will threaten to call police and incriminate them for participating in commercial sex. Thus, exerting control over another human being and traumatizing them to follow traffickers command is the basic psychological tactic used by the traffickers [13].

Human traffickers themselves are more likely to have been a victim of physical or sexual abuse at an early age. They could have been victims of domestic violence, having witnessed their mothers beaten by their male partners [14].

7   Red-Light Areas of India

As a child unaware of the implications of sex trafficking, this author frequently walked past the red-light district of the city of Nagpur, Maharashtra in India. The sex trafficking rings operate from these red-light areas, which are the brothels of commercial sex in India. It is here where the victims are sold off into a life of sex slavery. In these red-light areas, the conditions of sex workers are deplorable. Society and legislators shun sex workers and do not prioritize sex worker's needs [15].

Brothels are not legal, yet there are multiple red-lights districts operating in India. Law enforcement agencies receive commissions from these "so called" brothels, and therefore, they operate without trouble. The story of Munni, a sex worker from one of these districts, gives insight to the law enforcement officials' criminal involvement in supporting the brothels. One night, Munni ran away and approached a police officer who, along with his friends, raped her and brought her back to the brothel [16].

Sex workers are not aware of their health care needs, and they are afraid that health care workers will stigmatize them. Poverty is another factor that prevents them from seeking health care for contagious diseases and sexually transmitted diseases (STDs). Because of poor living conditions, contagious diseases and STDs are rampant in red-light districts. Lack of medical treatment can lead to grave consequences, including disability and demise. There is an ongoing debate about decriminalizing sex work, so sex workers may seek help from medical personnel and law enforcement. The counter argument is that legalizing commercial sex will increase demands leading to further increase in sex trafficking [15].

8   Indian Laws Related to Sex Trafficking

Indian legal systems recognize the impact of human trafficking. There are legal ramifications for sex trafficking and various forms of labor trafficking. Under Section 370 of the Indian Penal Code, trafficking is a criminal offense which involves various exploitations such as sexual exploitation, physical exploitation, and any practice of slavery. The penalty for this kind of law violation involves 10 years of imprisonment and monetary fines that vary based on whether the victim is underage or not. The major difference between Section 370 of the Indian Penal Code and international law is India requires use of fraud, coercion, or force for child trafficking, which results in some forms of child trafficking not being criminalized by the law. This is a major concern because when we consider the child's age, an underage child cannot consent, so there should be grave legal consequences due to it. The Indian legal system has addressed this discrepancy in Section 372 to 373 as it criminalizes child prostitution and eliminates the requirement for the use of force. There are other laws under which child sex trafficking is criminalized in the legal system. Protection of Children from Sexual Offences Act (POCSO) and the Immoral Traffic Prevention Act (ITPA) are two legal acts criminalizing offenses that are related in any manner to sex trafficking. The Republic of India is striving to enact more anti-trafficking laws; however, individual Indian states have poor coordination between themselves, and this weakens trafficking investigations across the country. Furthermore, due to lack of coordination, a victim has limited ability to obtain services and file criminal and civil cases in their home state. To address this, the government has sought input from various sectors of society, such as legal experts, survivors of trafficking, and other civil agencies to draft future legislation against human trafficking and sex trafficking [9].

9   Effects of COVID-19 Pandemic on Sex Trafficking

The isolation measures used to control the COVID-19 infection had the entire globe struggling in its efforts to adjust to the stay-at-home orders. The global pandemic impacted the human trafficking and sex trafficking world as well. In most ways, it had an adverse effect on the world's trafficking victims. The criminals of sex trafficking adapted to the changes and started using sophisticated technological communication modes to conduct underground systems of crime. At the same time, COVID-19's isolating measures afflicted the legal system so much so that criminal prosecution slowed down. It was necessary to divert the police force dedicated for sex trafficking to manage pandemic efforts and enforce the curfews and isolation. Law enforcement focused on other crimes, such as murders, thus loosening their hold on criminals involved in the sex trade. In addition, the pandemic slowed law enforcement training on anti-trafficking laws and regulations. The Centre responded to the pandemic by starting virtual trafficking prevention training in states of Karnataka, Kerala, and Tamil Nadu. These sponsored online trainings for deputy superintendents of police focused on education about human trafficking and crimes

against women and children. During the COVID-19 pandemic, victims filed online applications and legal proceedings resumed virtually [9].

The Indian Supreme Court encouraged lower courts across the nation to continue hearing trafficking cases through virtual means. Although the hearings were conducted virtually, the testimonies were not recorded, which again resulted in delays in prosecution [9].

Even with however successful, the courts were to adjust legal proceedings, the human trafficking and sex trafficking trade had major advantages during the COVID-19 pandemic. Multiple industries, including garment, farming, manufacturing, and domestication were shut down. People with low incomes faced further financial restraints and lost wages, which left this already vulnerable population even at more risk for abuse and victimization. During the pandemic and isolation orders, more adults and children were online for work, learning, and socialization. With these newer outlets, children and adults were more at risk for ongoing sex crime, grooming, and recruitment of victims via online technologies [17].

For the victims who were still in confinement, such as sex slavery, living conditions became worse. During the curfews and stay-at-home orders, it became easier to hide sex trafficking. Restrictions of movement affected the victim's ability to be identified by non-government organizations (NGOs) or law enforcement officials. They had even more limited access to health care services, including mental health services and informal support networks [17].

10 India: A Market for Sex Trafficking of Non-Indian (Foreign) Children and Women

India became a market for sex trafficking foreign nationals from adjoining countries, such as Bangladesh and Nepal. In addition, there are women trafficked from Uzbekistan and Thailand to work in Indian sex trafficking industry. These sex trafficking rings work under the pretext of massage parlors, where foreign nationals provide massages and sex services. These traffickers terrorize the victims and hold them captive: their passports are seized upon entry in India, they are provided forged documents to stay in India, and they are groomed to provide false information to the embassy. Even after rescue, they are stuck in India as they might be missing legal paperwork to return to their home country. Therefore, it is essential that foreign nations enter into an agreement with India to repatriate rescued sex trafficking victims [18].

11 Technology and Sex Trafficking in India

Poverty and increased use of online platforms are identified as two main factors that promote sex trafficking. The traditional approach of targeting poor defenseless families and using deceit and money to lure victims is changing with technological advancements. Now, the sex trafficking criminals are using fake accounts, social

media, and dark web to trap women and children. India had 755 million internet users in 2021. Many internet users are youth and children, who easily fall prey to sex trafficking predators. The methods these perpetrators use to attract women, children, and youth online are gaming apps, lottery, fake advertisements, and social networking sites [19].

The Indian government in collaboration with United Nations Office on Drug and Crime (UNDOC) took steps to address this technology misuse in sex trafficking. In May 2019, a multi–stakeholder consultation was held in Guwahati, India. This was the third in a series of five stakeholder meetings planned by the UNDOC to unify the anti-trafficking work done in different parts of India. Participants shared ideas to counteract the use of technology for trafficking. The take home message was to expand existing standards, unify and develop uniform methods among the stakeholders to deal with the trafficking issues, work on developing standard operating procedures within the law enforcement agency, and create greater social awareness about trafficking [20].

12   Corruption Within the Law Enforcement and Sex Trafficking

Corruption cripples the legal system. When talking about sex trafficking in India, the one factor that makes reporting of victims difficult is corruption within the Indian law enforcement agencies. Of note, police officials often receive bribes from sex trafficking gangs and/or sexual favors from the hostage sex victims. In return, they will alert the traffickers of any forthcoming investigations and enforcements. Even public prosecutors have accepted bribes to influence the hearing and provide immunity to sex trafficking criminals. These criminals have political connections, and therefore, an advantage over the judiciary system. Due to this, victims feel helpless to their situation and do not report their perpetrators [21].

13   Trauma Experienced by the Sex Trafficking Victims

When victims first enter the world of sex trafficking, they face significant amount of physical abuse to threaten them into participating in prostitution and sex trafficking. There are reports of gang rape, beating, burning with cigarettes and fire [22]. Sex abuse victims are susceptible to sexually transmitted diseases such as syphilis, gonorrhea, urinary tract infection, public lice, HIV and AIDS infection. They also experience injuries to their vagina, rectal tears, pain in the pelvic area, and urinary incontinence. In addition, they lack proper healthcare to treat not only the physical wounds, but the emotional wounds left behind by such abuses. Sex abuse victims can develop post-traumatic stress disorder, anxiety disorder, and depression [23].

14   Rehabilitation of Sex Trafficking Victims

The Central Government of India implemented the "Ujjawala" Scheme to prevent sex trafficking and provide rehabilitation and reintegration into community for sex trafficking victims. The services provided within this scheme not only include basic amenities, such as food, shelter, medical treatment, but it also includes counseling, legal help, guidance, and vocational training. The focus of reintegration efforts is supporting half-way homes, financial assistance, medical treatments, and follow-up visits. Furthermore, under the victim compensation scheme of Section 357A of the Code for Criminal Procedure, state/union territories allocate the use of funds to compensate for victims of various crimes [24]. In addition, there are NGOs coming forth to help rescue the victims of sex trafficking and to rehabilitate them within the society [25].

There are criticisms against the rehabilitation services provided by government agencies. In India, the government and law enforcement send the rescued sex trafficking victims to shelter homes. Oftentimes, the shelter homes do not have adequate financial resources to meet the victim's needs. This long-term institutionalization does not help a victim's mental health, which leaves them at risk of re-victimization. The counselors are not skilled to provide counseling for mental health problems such as depression, anxiety, and sleep issues. The vocational training provided does not align with available jobs in the market. Institutionalization of the victims does have an advantage in cases where family was a facilitator of sex trafficking. As outlined by World Health Organization (WHO), community-based rehabilitation is a better model to integrate victims in the society [26].

15   Sex Trafficking Preventions Efforts

The Indian Government's Ministry of Home Affairs (MHA) and Ministry of Women and Child Development (MWCD) are the two main government organizations working on trafficking, including sex trafficking prevention efforts in India. MHA focuses on National public safety issues, and MWCD focuses on prevention and reintegration. Government of India organized an inter-ministerial committee headed by MWCD that meets to discuss trafficking related issues. NGOs are essential in data collection which the government uses to combat trafficking. Prevention strategies vary from state to state. The focus of the preventive strategies is to raise awareness among the common public as well as government officials. MWCD also worked on creating broader networks of trafficking prevention, such as crisis hot line for trafficking, removing children from exploitative homes, and identification of missing children. To address exploitation of Indian nationals in foreign countries, the Ministry of External Affair's (MEA) overseas division created five national centers with 24/7 helplines to provide counseling and resources to migrant workers. Foreign recruitment agencies and migrant workers can register themselves on emigrate system. MEA published monthly list of unregistered agencies and prosecuted the unregistered agencies. The Government focuses efforts on human

trafficking in general, but it lacks specific information on combatting commercial sex and child sex tourism in India [9]. An international non-profit organization, Global fund for Children (GFC) has partners in India that prioritize human trafficking and sex trafficking prevention in India. They encourage supporting local leaders who are fighting the sex trafficking problem in India. Through their community partners, GFC has created online platforms to increase awareness and prevent online sexual harassment. GFC, along with other NGOs and government agencies, is working on a shared platform for data collection and dissemination within the stakeholders [27].

16   International Collaboration to Address Sex Trafficking in India

The United States Department of State Trafficking in Person Report has streamlined the standard of care for addressing trafficking worldwide. The report details all the progress and areas of improvement for each nation, thus giving an individual to-do list for each nation. There are multiple NGOs active across India, funded by non-profits throughout the world. The NGOs collaborate with Government of India to address various sex trafficking issues in India. Indian government and the NGOs have focused on the recommendations provided by United States Department of State trafficking report [28]. The United States Department of State 2022 trafficking in person report mentions that overall Indian government has made more efforts compared to previous reporting years. In addition, India has ongoing collaboration with UNODC to protect and assist trafficking victims [9]. The Indian Government and stake holders, such as NGOs and local leaders, support the various projects implemental by UNODC regional southeast Asia office [20]. United Nations has a voluntary trust fund that supports trafficking victims [29].

17   Summary

There is a widespread network of human trafficking and sex trafficking in India. This network has international players that collaborate well with each other to continue the business of trafficking and sex trafficking. Collaboration is the keyword not only for the criminals behind the business of sex trafficking in India, but it is also the key word for all the stakeholder involved in combating sex trafficking in India. Sex trafficking criminals have mastered the art of collaboration to run this illegal business of sex trafficking in India. There are national and international agencies, there are local leaders and NGOs that are all working to address and combat the sex trafficking crime in India, what they lack is a collaborative approach. What would help is to develop a common platform for local leaders, the NGOs, and the Indian government, where they can unify data collection process, share their plan of action, and brainstorm ideas to counteract the criminal minds behind the multibillion sex trafficking industry in India. During literature review, only few

published research articles about sex trafficking in India came up in the search engine. The information is available either on United Nations website [8], United States Department of State trafficking in person reports [30], or on websites of multiple NGOs [25, 27] that participate in providing respite to the sex trafficking victims. Some questions that can help advance this mission of combatting sex trafficking in India are How do we decrease this demand of commercial sex workers, especially children? How do we create a nationwide uniform awareness campaign against the sex trafficking and human trafficking, such that everyone, men, women, and children are trained to identify "red flags" of sex traffickers and protect themselves? Finally, how do we organize a common platform for all the stakeholders to unify the taskforce, better utilize the limited resources, and support each other.

Discussion Questions
- Describe the risk factors for Indian women's vulnerability to human trafficking.
- Describe how the courts in India function in regard to human trafficking.
- Propose a way to unify stakeholders to address human trafficking in India.

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When Monsters Are Real: Counteracting Malignant Systems

Sandra L. Bloom

1   Introduction: This Is *Not* Make Believe

Most children have had read to them or have themselves read or heard or watched fairy tales. These stories and fables differ from culture to culture, but all focus on common human themes: love, resilience, justice, cruelty, or family conflict [1]. They are meant to teach children about the world they are soon to encounter with all of its complexities while making it simple enough for a child to understand.

In fairy tales, there are always monsters. Sometimes monsters are supernatural creatures like ogres who eat babies. In other stories they are animals, like Fenrir, a monstrous wolf who grows larger every time he eats human flesh. Monsters like vampires are the walking dead who look like human beings but live by draining the life out of living human beings. Still others, like Bluebeard, are fully human, seducing young women to marry, while manipulating the girls into situations that will result in their murder at his hands. Many commentators believe that these stories were meant as warnings, as lessons to children about the potential evils that exist in the world and the kinds of behaviors they must use when encountering them—sometimes running away, at other times, displaying courageous disobedience, and at other times, being compliant while waiting for the right moment to escape— while at the same time warning what will happen if they do not escape. The original stories that children have read to them today have often been tamped down to reduce the terror, but in many of the original stories, children didn't always survive and sometimes the monsters consume them [2].

But what happens if the monsters are real? The monsters that sex trafficking victims must face look like human beings but turn out to be far more similar to the monsters of fairy tales. These social predators that walk among us are known as

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psychopaths and in this chapter, we will look at some current knowledge about who these people are and what impact they have on the moral center of the people they prey upon, especially when these people are young and still developing a moral compass, as well as what it is like to be captives in systems that can only be described as evil, and as malignant, where betrayal and moral injury are routine experiences for sex trafficked victims. Getting out of "the life" is extremely difficult and is compounded by the institutional betrayal that has a long history in our patriarchal society, made even worse by the profitability of sex exploitation in our neoliberal economic environment.

To understand the contradictions that arises between our natural evolutionary heritage of cooperation, attachment and compassion, and exposure to human evil, we will summarize what moral development and moral emotions are and then describe how important it is that we create systems that counteract the malignancy that trafficking victims have already experienced, many of whom will already have developed complex post-traumatic symptoms and have become trauma-bonded to their captors.

This work demands a level of understanding, empathic concern, and moral safety that is not within everyone's scope of skills nor scope of experience. People who are interacting with and hoping to help trafficking victims must be willing to expose themselves to the moral horror that has been the ongoing life experience of those who have been sexually trafficked. This chapter concludes by describing an online organizational system, called *Creating Presence,* that has been designed to help caregiving programs to become "trauma-informed, trauma-responsive, and trauma-resilient."

2   Trafficking and Psychopathy

Psychopaths hunt other humans. They attack and capture them. They feed on their time, resources, power, and energy. They dispose of the remains. And they move on. The violence is covert. It sometimes ends in self-harm or suicide of victim. More often it ends in depression. Every relationship between a social human and a psychopath follows the same pattern. There seem to be no exceptions, no "nice" psychopaths [3].
    Hintjens, P., *The Psychopath Code: Cracking The Predators That Stalk Us*.

It has become unfashionable to discuss what is and is not worthy of being termed "evil." In the past, the word itself has encouraged the dehumanization of any person, group, or belief that whoever is using the word disagrees with and then frames in moral terms, aiming to produce a social or very real isolation and even destruction of the offending party. Every atrocity committed by humans begins with that process of dehumanization, historically and in the present, often by invoking a supernatural justification for the offensive behavior and intended to evoke retaliation and punishment. To avoid that prospect, our culture appears to have lost words to describe behavior and its consequences that is currently threatening to unravel and destroy parts of our civilization that are the most valuable—peace, democracy, and human rights.

As philosophers in practical ethics have recently written:

"*With its religious overtones and implied absolutism, the concept of evil seems ill suited to advancing public discourse and pro-social relations in a liberal democracy, as evidenced by its use in the abortion debate. International relations have also suffered from references to an "axis of evil." Recently, however, philosophers have begun reconceptualizing evil within a secular, moral framework, using the idea of evil as the worst kind of immorality to inform and shape our responses to issues such as torture, genocide, and rape as a weapon of war*" [4].

The sexual trafficking of children, women, and men and inducing them into sexual slavery for the express purpose of using them as livestock to increase profits surely induces sufficient moral horror to fall into a secular category of "evil."

To begin a description of the monsters, we must turn to the established literature on psychopaths. That literature and research are extensive and yet have often existed as a separated study from that of trauma, abuse, and victimization. Because they are so skilled at faking being like everyone else, most people find the psychopaths in our lives difficult to discern. We say someone is "narcissistic," or selfish, or a "man-child," or a bully instead of seeing the frightening reality that is before us. As long as people have been people, there have been dialogues and opinions about the nature of evil. The research on psychopathy makes the definition of evil far clearer.

Based on the experience of trafficked victims, it is relatively easy to see that they have been exposed, often since childhood, and frequently for many years, to the fundamental evil of psychopathy. They have been preyed upon by beings far more similar to the monsters of fairy tales than we would like to admit. Their bodies, minds, and souls have been abused and manipulated to such an extent that they frequently suffer from what is now called complex post-traumatic stress. But they have also suffered profound moral injury and betrayal trauma that has affected them in a wide variety of ways, only beginning to be investigated.

2.1 What Is a Psychopath?

"Social predator" is a pretty strong description for any human being but there is no better way to describe the people who prey on others for profit and there is some research that supports the idea that sex traffickers are indeed, appropriately labeled as psychopaths [5, 6]. In a very systematic way, sex traffickers go about converting their prey into profit centers, exploiting them for the commercial sale of sex. They use specific tools to recruit and exploit their victims including grooming through spending money on them and becoming a trusted person, providing drugs, and a false sense of love and concern for their well-being [7].

The concept of psychopathy is an ancient one and a consistent feature of humanity across the world. As one author expressed, "*Persons we now call psychopaths have preyed upon us since the dawn of time*" [8]. They appear to have existed in preindustrial societies, suggesting that they are not cultural artifacts of Westernized culture. For example, the Yorubas, an indigenous tribe of Nigeria describe a word *aranakan* that is applied to "*a person who always goes their own ways, regardless*

of others, is uncooperative, full of malice and bullheaded," while the Inuit people use a word, *kunlangeta,* referring to someone whose mind knows what to do but he does not do it and who repeatedly lies, steals, cheats, and rapes [9].

This would indicate that the emergence of psychopathy in the human species predates our expansion out of Africa, some 150,000 years ago, but at that time populations were small, relatively isolated, and cheating was frowned upon and dealt with by social exclusion and sometimes even death. For social predators to be successful, they need larger population densities, so as we have multiplied so too has the influence of the psychopaths among us [3]. With larger populations in urban environments, their hunting is likely to be far more successful.

Psychopaths appear to be a relatively stable and consistent proportion of any population—about 0.5–1% of the male population and about 0.1% of the female population—and come from any segment of society, any family type, ethnicity, social class, or racial group. Statistically, that comes out to about 29 million psychopaths worldwide. According to the person who has studied criminal psychopaths extensively, one in four prison inmates residing in maximum security are psychopaths, and 77% of the ones in the United States are incarcerated—at least they were at the time of this publication [10]. But that leaves a large number of psychopaths out in the world with the rest of us. And it is important to emphasize that most convicted criminals are not psychopaths.

You will notice I haven't yet used the terms "sociopath" or "antisocial personality disorder." That's because there is controversy and confusion about all this in that psychopathy has not really qualified as a psychiatric disorder according to the DSM-5 and the other two terms have. Here we are mostly talking about differences in causality. Among researchers, evidence has been accumulating that psychopathy is biological, that the brains of psychopaths are substantially different from everyone else and that their behavior is substantially different from other people throughout childhood, regardless of the home environment they are in [9–12]. Some have a clear history of abuse in childhood, but others have no abuse history at all.

Among psychiatrists, "antisocial personality disorder" or ASPD is an umbrella term that encompasses all kinds of antisocial behaviors. According to one group of researchers, those who are labeled as sociopaths are more the products of adverse environmental experiences that affect autonomic nervous system and neurological development that may lead to physiological responses similar to those of psychopaths [8]. What they do to other people may be quite similar if not indistinguishable, from the other. But when research expands, there may be ways of distinguishing sociopathic people from true psychopaths and that could lead to better efforts aimed at potentially successful intervention and prevention.

People who are psychopaths may or may not engage in criminal behavior. Those who do not engage in criminal behavior are often considered to be "successful psychopaths" and approximately 23% of them or almost a quarter who are not charged with criminal behaviors are still out in the world, often wreaking havoc on the streets, in finance, in government, in religious organizations and basically anywhere they can get an opportunity to prey on other people [13–15]. Many others, of course, such as the multitude of sex traffickers exploiting increasing numbers of vulnerable youth and adults, are engaging in criminal behavior but have just not yet been caught.

This is why saying someone is a "sociopath" is a diagnosis of a mental illness, while psychopathy is not definable as a mental illness. Most criminals are sociopaths, but they are *not* necessarily psychopaths. They may be capable of loving other people, caring about their pets, and believing in their own version of right and wrong that they do not violate, while engaging in a wide variety of criminal behaviors. In contrast, people who are psychopaths—criminal or non-criminal—are blind to any concern about right or wrong and are unable to empathize with other living beings who they perceive as targets of their manipulation, forms of entertainment or profit, or a way of satisfying their desire for stimulation, even of the cruelest and most vicious kind. They do not experience the moral emotions of shame, guilt, and remorse, though they are expert at pretending they do.

2.2 It's a Brain Thing

According to interesting work, people who are psychopaths have brains that are not "wired" for empathy or for a moral compass. Dr. Adrian Raine has been researching antisocial behavior for many years. In a recent review article, he has made clear that "*functional impairment to the neural circuit underlying morality is, in varying degrees, a common denominator to this wide spectrum of antisocial disorders across the lifespan*" [16]. Meanwhile, Dr. Kent Kiehl has accumulated the largest database of functional MRI studies of the brains of imprisoned psychopaths and believes he has found "*a robust and persistent pattern of abnormal brain function in psychopaths: namely, decreased neural activity in the paralimbic regions of the brain*" areas thought to be important in moral reasoning, emotional memory, and inhibition [9, 10, 17].

These and many other demonstrations of brain function that is substantially different from the rest of us are consistent with several thousand years of experience with people who evoke moral horror at their behavior and attitudes. After all, we are all familiar with brains that do not function properly, with people who are born with some form of brain disability. The problem for our culture when it comes to psychopaths is what do we do about it? Punishment of their behavior has little to no impact, except perhaps to make them worse. And why punish behavior that is not the person's fault? But then, these are people who are highly motivated to intentionally hurt others, so what do we do about that? Our unwillingness as a culture to confront these kinds of thorny problems is part of the reason our culture has become so divided and from the perspective of many people outside of the culture—bizarre and dangerous [18].

Parents of psychopaths often are bewildered by the difference in these children and their other children beginning from birth in that the nature of attachment experiences are different [10]. Research is beginning to define the characteristics of budding psychopaths by preschool [19]. They do not have normal attachments especially to their mothers, other family members, or other children; they do not get along with other children and are often intentionally aggressive; they are frequently cruel to animals and may set fires; they show a wide variety of problem behaviors and do not develop any understanding of cooperation or sharing. Research has shown that even

babies have an innate sense of right and wrong, so much a part of our social species but these are children whose brains are not developed in the same way as other children—and every nursery school and kindergarten teacher can identify these children [20].

Dr. Robert Hare was the first person to create an assessment tool, *The Psychopathy Checklist-Revised (PCL-R)*, and his work has become the standard in assessing psychopathy [21]. To administer it properly requires more than checking off boxes, however, but necessitates a complex interview and investigative process, largely because psychopathy is so difficult to see, hidden behind a mask of normality. Hare built on the seminal work of Hervey Cleckley, an American psychiatrist who described psychopathy in his book *The Mask of Sanity,* first published in 1941 and still relevant today [22]. Cleckley wrote, "*We have said that his outer functional aspect masks or disguises something quite different within, concealing behind a perfect mimicry of normal emotion, fine intelligence, and social responsibility a grossly disabled personality*" (p. 587–588) [22].

What is remarkable about this observation and many others like it written about psychopaths is that those observations are made by sophisticated, educated, experienced people. We should not therefore be surprised, that young, often abused, and maltreated children, young women, and young men would be drawn into believing the psychopath who assures them that he will take good care of them. Some of the notable characteristics of psychopaths is that they do not experience empathy for others, nor do they have any moral center, but they are brilliant at pretending that they feel what other people feel and with that facility easily manipulate others into believing they are someone who they are not.

They are often described as charismatic which helps us to understand how they rise to political and religious leadership positions, often achieving a cult status, and certainly how readily young people are seduced into believing their promises. They lie easily and whenever it suits their purposes. These purposes may vary—attaining power, money, sex, and the enjoyment of other people's pain—but whatever the case, they have no moral constraints whatsoever on achieving those purposes. If they are intelligent, they can outwit almost anyone because of their exceedingly good capacity at mimicking normality while behaving in ways that are unconscionable for anyone else. Because of an utter absence of the capacity for empathy, they do not and cannot love their prey any more than a lion loves the antelope. But they are insatiably *hungry* for that prey, and they will do just about anything to satisfy that hunger.

3   Captured by Malignant Systems

The word "*malignant*" has several definitions, according to dictionary.com, all of which are useful in characterizing the systems that sex traffickers create to ensnare and trap their victims. Malignant means disposed to cause harm, suffering, or distress deliberately; feeling or showing ill will or hatred; very dangerous or harmful in influence or effect, tending to produce death; characterized by uncontrolled

growth; cancerous, invasive, or metastatic. The young people most likely to be caught by the traffickers' webs are those who are already vulnerable because of a history of child maltreatment, abandonment, homelessness, and all manner of adversity. Victims of childhood abuse and adversity are notably more likely to be revictimized [23, 24]. They are often picked up in places where runaways frequent and traffickers are notorious for being able to discern through reading body language, who the most vulnerable young people are.

As in the case of torturers and kidnappers, once their prey has been located, sex traffickers set about systematically creating a trauma bond, also known as the Stockholm Syndrome, by carefully seducing the vulnerable child or young adult into exploitative sexual practices [25–27]. The sequencing of this bonding behavior is so typical that it can easily be found on the Internet: Luring/Recruiting; Grooming and Gaming; Manipulation and Coercion; Exploitation. But how does this sophisticated methodology for manipulating the need to attach to other human beings, particularly when there is danger, become so widely known? It is conceivable that the sex industry, which operates in virtually every society, might be a primary vector for socialization in the practices of coercive control, and the pimp might be among the world's most common instructors in the arts of torture [28].

The result of this well-documented sequence is that victims of trafficking are subjected to high levels of psychological and physical violence, social isolation, and forced compliance with excessive and constant sexual demands that secure the profits of the traffickers. As Dr. Herman points out, "*control of bodily functions is an established method of coercion well known to clandestine police forces and criminal organizations worldwide. It is systematically practiced by pimps and traffickers in the sex industry, not only to intimidate victims and break their resistance, but also to train them for sexual performance*" [28].

The goal is to completely break the person's sense of individual autonomy and will using any means possible to achieve total compliance with the demands of the exploiters so that the victim will do anything the trafficker wishes them to do, regardless of how sadistic or morally reprehensible. Many years ago, the theologian and educator, Richard Rubenstein described the "*bureaucratic modernization of slavery*" that the Nazis refined at Auschwitz and that produced a new form of totalitarian society—a complete and profitable way of disposing of "surplus" people, those who live on the margins of society and whose very selves are not respected. "*The history of the twentieth century has taught us that people who are rendered permanently superfluous are eventually condemned to segregated precincts of the living dead or are exterminated outright*" [29]. The aim of the psychopaths who create and supply trafficking systems is to turn the men, women, and children who are trafficked into things, into machines that create money by their actions and that can be thrown away when they are broken. This is what slavery is and always has been all about.

The psychopath presents a caricature of the ideal male dominating a patriarchal system. In a patriarchal system, by definition, children are the property of men, women are inferior to men, and men are systematically taught to betray their own natural empathy and sensitivity in order to participate successfully in a culture that

is defined by war, violence, and toxic masculinity. As Carol Gilligan asserts in an article on moral injury and an ethic of care, the "love laws" of patriarchy determine who, when and under what circumstances we are allowed to love and forces men and women to betray their own sense of "what is right." And here Gilligan is referring to "normal" circumstances—the environments in which we are all immersed. When we look at the profoundly degrading and demoralizing process of inducting, capturing, and keeping a person bound to the malignant system of sex slavery, magnify this pathological dissociation of emotion and empathy a 1000-fold.

3.1 Betrayal Trauma

Trafficking victims will experience repeated betrayals of trust. If they understood what was going to happen to them, it is unlikely that they would easily submit to the coercion and violence that inevitably occurs. But people can become "accustomed" to betrayal when it begins in early childhood and then come to expect betrayal from other people. Dr. Jennifer Freyd from the University of Oregon introduced the terms "betrayal trauma" and "betrayal trauma theory" in 1991. Betrayal trauma theory is a theory that predicts that the degree to which a negative event represents a betrayal by a trusted needed other will influence the way in which that event is processed and remembered [30].

This research has pointed out that in general, evolution has prepared us to deal with cheaters and betrayers of trust by avoiding them or eliminating them from our social group. But young, dependent children under the care of parents who betray them—and those children and adults under the coercive control of sex traffickers—cannot get away from their betrayers, while anger or retaliation is extremely dangerous. So, it is in their best interest to become blind to the betrayal by dissociating that information from ongoing reality and unconsciously denying that it has even occurred. The importance of Freyd's work and that of her colleagues is to point out that fear is not the only core mechanism in understanding the response to trauma, but that betrayal of trust may be critically important in understanding complex trauma responses. Research on betrayal trauma has borne out this basic premise and shown that betrayal trauma is associated with higher rates of a host of outcomes, including post-traumatic stress disorder (PTSD), dissociation, anxiety, depression, and borderline personality disorder, compared to interpersonal trauma perpetrated by strangers [31, 32].

3.2 Moral Injury

It is important to recognize that the field of traumatic stress studies is still very young. Its origins are traceable to the Vietnam War and the subsequent devastation in the lives of so many of the young servicemen and women. The first recognition, definition, and research of post-traumatic stress were therefore among combat veterans and later victims of disaster, accidents, and crime. The survivors of the

Holocaust were already a focus of attention from the time the field began. As a clear conceptual framework emerged during the 1980s and 1990s, work expanded to include victims of sexual assault and domestic violence, and then the maltreatment of children [33]. It has only been quite recently that workers in the sex industry—pornography, prostitution, and sex trafficking—have begun to be redefined as "victims" and in the eyes of the public, there is still great ambivalence about the status of "working girls" in the "oldest profession in the world"[34, 35]. This public ambivalence has served to keep the very real villainy conveniently hidden from view.

Similarly, in the evolution of the field of trauma studies, the existential, meaning-making, spiritual component of injury and of recovery did not become a central focus until quite recently. The concept of moral injury has been applied to combat veterans most extensively, but also to asylum seekers, refugees, and victims of torture [36, 37]. The moral aspects of being a human being are too complex and varied to make easy generalizations and perhaps even more challenging to develop workable and fundable research projects. So very little has been documented about the moral injury that victims of trafficking experience at the hands of those who deliberately set out to seduce, manipulate, and torture them into subservience.

What is moral injury? Jonathan Shay first described moral injury in veterans and defined it as a shattering of trust that followed the betrayal of "what's right," in a high-stakes situation, where the betrayal was sanctioned by someone in a position of legitimate authority [38]. Carol Gilligan's definition is that moral injury is a result of the shattering of trust following an experience of betrayal in a situation where the stakes were high and the betrayal was culturally sanctioned, a betrayal that compromises our ability to love, a betrayal of "what's right"[39]. As Gilligan notes, "*Deep assumptions of what's right and wrong, what's praise-worthy and blameworthy, are rooted not only in culture but also in our humanity. This explains Shay's observation of a consistency in response across cultural differences*" (p. 93) [39].

"*It is the warriors who are injured in war, in their bodies and in their souls, and their wounds are all but indifferent to whether the war they fought and suffered was just or unjust*" (p. 99) [40]. Moral injury events that soldiers are exposed to include "*bearing witness to perceived immoral acts, failure to stop such actions, or perpetration of immoral acts that are inhumane, cruel, depraved, or violent, bringing about pain, suffering, or death of others*" [41]. Military culture fosters an intensely moral and ethical code of conduct and by definition, being violent and killing is normal in war, and bearing witness to violence and killing is expected. But even so, soldiers are likely to face unanticipated moral choices, especially when exposed to modern guerilla warfare where it is extremely difficult to distinguish civilians from combatants.

As a result, the psychosocial and spiritual impact of decisions they made may be long lasting, negative, and delayed [36]. Although the term "moral injury" is still new in mental health fields, clinicians who cared for prior generations of veterans have often discussed the central importance of "*moral transgressions, betrayal-related events, and the role of ensuing painful moral emotions and cognitions in hindering recovery from posttraumatic issues*" [42]. Moral injury is thought now to

be an important component of the complex post-traumatic effects of exposure to morally injurious events, and the results are very disturbing. Every day, 17–20 veterans in the United States commit suicide because suicide is a common outcome of profound demoralization secondary to moral injury [42].

Victims of trafficking are likely to experience all of the events described in the literature as potentially morally injurious events as part of the process of profound dehumanization and degradation that forces them into compliance with the demands of the sex traffickers to increase profitability. Living in a malignant culture and being involved in "the life" may go on for years, even decades, and for those who have been abused by family members, or sold into sexual slavery, they have not known any other kind of culture. Although moral injury among this population has not yet been well studied, it is clear that victims form intense trauma bonds with their captors that are quite resistant to change and that pose a significant challenge to successful intervention [25].

When they do come to the attention of caregivers, they are likely to be suffering from what is now termed complex post-traumatic stress disorder although because of the demands for diagnoses that fit the current diagnostic system, they may present with a wide variety of different and multiple diagnoses depending on their presenting symptoms [43–46]. If they can be persuaded to stay in caregiving environments and not return to the traffickers, they will need to confront the powerful negative emotions of guilt and pervasive shame and remorse that are the accompaniments of moral injury and that lead to self-destructive behaviors and suicidality if not contained and transformed. Whether or not the victims of trafficking stay in whatever sheltering situation they can find when attempting to leave their increasingly dire situations will depend not entirely on their own will. They may find that the institutions that should be supporting them are not so supportive.

3.3   Institutional Betrayal Trauma, Neoliberalism, and Patriarchy

Institutional betrayal occurs when institutional actions or inactions exacerbate the impact of traumatic experiences that have already occurred. In recent years, there have been many examples of betrayal experiences on the part of religious organizations, schools, healthcare facilities, protective services, law enforcement, the military, and government—basically all of our social institutions [47, 48]. The concept of moral injury and institutional betrayal is powerfully relevant to the psychological injuries suffered by victims of the sex industry because it clearly connects the individual dissociation of emotions, empathy, sensitivity, kindness, and a basic respect for humanity that is necessary if sex slaves are to survive, to the values of the patriarchal system we all are immersed in. This helps to explain why there has been so much cultural support or blind indifference to the exploitation of women and children that is endemic in the sex industry and that surrounds cultural attitudes toward violence, war, refugees, and victims of political torture.

When trafficking victims take the dangerous steps necessary to get out of the situations they are in, they are likely to seek a trusting relationship that they can depend upon to help to contain the terror of change associated with trying to extricate themselves from the trafficking life. Simply put, institutional betrayal occurs when an institution causes harm to an individual who trusts or depends on that institution. This occurs, for example, when law enforcement and the justice system perceive, judge, and punish the victims as equally liable as the perpetrators of the trafficking. Similar actions or nonactions also occur in the social service, mental health, and healthcare systems when staff members fail to understand the dynamics of trafficking and the impact of prolonged participation in malignant systems [49, 50].

To fully understand the enormity of institutional betrayal and sex trafficking, it is important to engage with a macroanalysis best formulated by Jeffreys in her revealing book, *The Industrial Vagina: The Political Economy of the Global Sex Trade.* Jeffreys points out that in order to understand what has transpired in the last 40 years, it is important to fully recognize and unmask the new economic ideology and practice of these times, neoliberalism, in which the tolerance of "sexual freedom" has been merged with a free-market ideology to reconstruct prostitution as legitimate "work" which can form the basis of national and international sex industries. Prostitution has been industrialized and globalized in the late twentieth and early twenty-first century with the help of the Internet. The author argues that this growing market sector needs to be understood as the commercialization of women's subordination, definitely NOT the expression of women's freedom and success [51].

Universal condemnation by feminists of prostitution as a viable job choice for women across several hundred years, changed in the neoliberal 1980s and the process began by which "*pimps were transformed into respectable businesspeople who could join the Rotary Club. The business of brothel prostitution was legalized and turned into a 'market sector' in countries like Australia, the Netherlands, Germany and New Zealand, stripping became a regular part of the 'leisure' or 'entertainment' industry, and pornography became respectable enough for corporations like General Motors to make porn channels part of their stable*" (p. 14) [51]. Meanwhile the vast majority of prostitution both within those western countries that legalized prostitution with varying constraints and throughout the world remained an illegal and a most profitable sector for organized crime.

Prostitution has been globalized through the growth of pornography and the boom in adult shops, strip clubs, escort agencies, military prostitution and sexual violence in war, marriage and the mail order bride industry, the rise in sex tourism, and sex trafficking of women and children—all interconnected and highly profitable. All of this accompanied by the euphemistic use of words like freedom, free-trade, liberty, and women's rights have provided an opportunity for sexual predators. It is therefore no coincidence that 2016 saw the election of a U.S. President who openly admits to sexual abuse and sexual harassment and whose grandfather made the original Trump fortune operating brothels [15].

This routine exploitation of women and children for the sexual satisfaction of men could only occur in a patriarchal culture. Sociologist Allan Johnson's (2014)

definition of patriarchy requires that people can understand social structures as distinct from individual action and behavior. Johnson carefully and thoroughly defines patriarchy as not a way of saying "men" but rather as a kind of society comprised of men and women that promotes male privilege by being male dominated, male identified, and male centered. Male dominance means that "*positions of authority are generally reserved for men*," while male identified refers to "*a core of cultural ideas about what is considered good, desirable, preferable, or normal and that are associated with how we think about men and masculinity*". Male centeredness means that the focus of attention is primarily on men and boys and what they do.

The reality is terrifying. According to a U.S.A Today investigation published in 2019, there are more than four million victims of sex trafficking globally and 99% of them are women and girls. The top three nations of origins of these women and girls include the United States. One in seven of reported runaway children are trafficked. Seven out of ten of these are exploited in Asia and the Pacific region. Profits from forced sexual labor are estimated to be at least $99 billion every year, and profits are highest in developed countries. It is estimated that there are over 9000 illicit "massage" parlors in the U.S. alone with profits estimated at $2.5 billion. Prosecutions of traffickers in the U.S. are down, and the prosecution of victims of trafficking are still arrested for crimes they were forced to commit by the traffickers [52].

A patriarchal society is organized around an obsession with control and involves as one of its key aspects the oppression of women [53]. Significantly, Johnson focuses on the systemic nature of patriarchy, showcasing how everyone participates in this system, regardless of their gender, rather than focusing on actions or beliefs exhibited only by males [54]. For the women involved in trafficking, this remorseless abuse of women and children becomes normalized, just the way things are. Their own survival is likely to depend on them complying with the desires of the traffickers, even if that means recruiting others, deliberately inflicting harm on others, and even participating in the death of others if that guarantees survival. The moral contradictions must be suppressed, dissociated from consciousness, if they are to survive.

3.4   Trying to Get Out of "The Life"

It is exceedingly difficult for victims of sex trafficking and prostitution in its many forms, to get out of the sex industry. Leaving the men who control them, just as leaving a batterer in the case of domestic violence, is the most dangerous time and when these women are most likely to be intentionally murdered. This is complicated by the fact that they have become trauma-bonded to their abusers, may fear for the safety of their loved ones, and have little means to find shelter and achieve even the most rudimentary physical safety. If they are in a country illegally, it is likely that their immigration status puts them at even greater risk from the authorities they

hope will help. If they do have a legal status, the abuser is likely to have taken their passport and other forms of identity in his attempt to have total control. And then, the mental health symptoms of complex PTSD and the multiple health problems associated with trafficking all make exiting extremely difficult [28, 46, 55].

4 Counteracting Evil: Moral Development in Humans

Everything that psychologists know from the study of children's moral development indicates that moral identity – the key source of moral commitment throughout life – is fostered by multiple social influences that guide a child in the same general direction. (p. 77) [56].
  William Damon, *The Moral Development of Children*

Most victims of trafficking—women, men, and children—will enter the malignant system of trafficking already existing as moral beings. That is because human moral development is built into our species and we are born with the capacity for moral development that then becomes refined and differentiated based on our environmental experiences [20, 56]. As animals we need food and warmth, as mammals we need affection and play and as the most social of all species, we need close attachments to our mothers first and then to others within a safe community of support that comprises a species-typical "nest" [57]. As a species, we are unique in how long it takes for us to mature and how deeply that maturity depends upon the social context of our experience. But moral behavior does not just spring up without precedent, in human evolution. As primate researcher, Frans de Waals has pointed out, "*The first hints of moral obligation and indebtedness are already recognizable among primates*" (p. 136) [58].

4.1 Hunter-Gatherer Heritage

Our profound social needs are a result of our similarly profound individual vulnerabilities. Our species survived because we depended on each other and that required the evolutionary hard wiring for cooperation, empathy, and altruism that enabled us to band together to master the elements, fight off predators, and acquire food, while at the same time providing prolonged caring for helpless infants. It is important to remember that our species spent 99% of its existence living and thriving in small, hunter-gatherer societies. In order to make that original type of society workable, we come into the world already prepared for a "companionship lifestyle," that involves nonexclusive intimacy, face-to-face connection, food sharing, movement, and a typical lack of violence or the extreme gender differentiation that comes under the current heading of patriarchy [59]. But evolution has prepared us to co-exist with about 150 other people, not to live in the complex urban societies that now exist, the societies within which social predators thrive.

4.2   Need for a Healthy Nest

For human children to have a healthy nest that promotes human social and moral development, it has been shown that they require soothing perinatal experiences from others who are responsive to the infants' needs and prevent distress, usually through extensive touching and physical presence without physical or emotional isolation and with infant-initiated breastfeeding. The nest must function within a community of warm and responsive caregivers that create a positive climate of social support where children are allowed to creatively play with other children of multiple ages. Within this social setting, the innate capacity for moral development is promoted. This type of parenting appears to be a "cultural commons" for all human beings [59].

When children grow up within this kind of species-typical environment, their moral development follows a predictable sequence throughout childhood and adolescence and into young adulthood that has been well-described [56, 60–63]. Research with children in a variety of settings has demonstrated that human moral experience is grounded in human development and is profoundly relational [64, 65]. These social influences begin at birth and continue throughout our lives but because of the lengthy and complicated nature of human development, relational problems can profoundly disrupt the process of healthy moral development [66].

The need for such a "nest" among human beings is so strong, that for women and children who have never had such a protected space, the promises of protection and care that the traffickers offer during the recruitment and grooming phases are powerful, almost irresistible lures.

4.3   Moral Emotions

We need an intact emotional system to properly valuate what we are or are not doing as well as perceiving the intentions of others. In interaction with other people, we are constantly being challenged about what is the "right" thing to do, or say, or be. Our emotional system has evolved to help us evaluate and resolve the complex situations presented by the social nature of our species. Emotions that are particularly relevant to the study of morality have been termed "moral emotions" and include feelings such as shame, guilt, and remorse that negatively evaluate the self and its actions; righteous anger and indignation that negatively assess others; pride, admiration, gratitude, and inspiration that guide us to appreciate the moral qualities in ourselves and in others; compassion and empathic distress that compel us to experience and show concern for the suffering of others; and empathic joy that connects us to delight in other people's well-being.

Healthy emotional development and, therefore, the development of emotional regulation and emotional intelligence are highly dependent upon the childhood developmental experience of receiving empathic regard, sympathy, and attunement from caregivers [67–69]. It is the capacity for experiencing these emotions that the psychopathic trafficker can expertly take advantage of, turning their prey's sense of

guilt, responsibility, shame, and anger into tools that he can use to manipulate them to his advantage. These are precisely the emotions that the psychopath does not experience himself.

4.4   Moral Intelligence and Human

When all goes well with this developmental process, people end up with moral intelligence, considered by many to be the "central intelligence" for our species, our mental guidance system for determining how universal human principles should be applied to our own personal values, goals, and actions. The anthropologist Donald E. Brown studied principles of human behavior that are universally present in every culture around the world. What he found is that the moral codes of all cultures include recognition of responsibility, reciprocity, and the ability to empathize [70].

Another group of investigators found that by analyzing earlier lists of human universals and by examining the official tenets of the major world religions, they found the following principles espoused in common by all or most religions, as well as by secular organizations including American Atheists, Inc., the American Humanist Association, and the United Nations Declaration of Human Rights: commitment to something greater than oneself; self-respect, but with humility; self-discipline, and acceptance of personal responsibility; respect and caring for others (the Golden Rule); caring for other living things and caring for the environment [71].

Yet another group have conducted research that led them to identify six "universal virtues" honored in all cultures: wisdom, courage, humanity, justice, temperance, and transcendence [72]. These human universal principles and competencies are important in every culture. They include *integrity*: acting consistently with principles, values, and beliefs, telling the truth, standing up for what is right, and keeping promises; *responsibility:* taking responsibility for personal choices, admitting mistakes and failures, and embracing responsibility for serving others; *compassion:* actively caring about others; and *forgiveness:* letting go of one's own and other's mistakes.

Our level of moral intelligence determines how we use our other forms of intelligence, binding us to our social group, culture, and a moral system that gives our lives purpose and meaning [73]. All of these investigators are focusing on the same basic need: to hold a clear set of values in common with other people in any social group and to consistently live a life that supports those values. But these are the values that have no meaning for the psychopath who traffics in human lives. Though he may become expert in pretending to hold these values, there is no accompanying moral emotion experienced when any or all of these values are violated. This makes it very difficult for anyone who is not a psychopath to understand or relate to, much less comprehend how the world of the psychopath is constellated, how it works and does not work. It is extremely difficult to imagine the intrapsychic world of a vampire or a Bluebeard. But this is why so many women and girls are fooled into believing the promises made and then blame themselves for the promises broken.

When things have not gone well in a child's life, the young person may not have developed a level of consistent moral intelligence and may have moved into adolescence and adulthood with enormous confusion about their own fundamental moral identity. That does not mean that they have the same brain-based problems as the psychopath, but it does mean that they may have great difficulty in discerning who is safe to be with and who is dangerous, what is "right" and what is "wrong." After all, if the people in your life who you are supposed to be able to trust, turn out to be highly untrustworthy, then your sense of confusion about what is right and wrong may be profound. This confusion will only be preyed upon by the trafficker because he knows that this vulnerability will provide the power he needs to get you to do exactly what he wants you to do—betray whatever principles you have and in doing so, betray yourself.

5   Creating Presence: Counteracting Malignant Systems

Care is a feminist, not a "feminine" ethic, and feminism, guided by an ethic of care, is arguably the most radical, in the sense of going to the roots, liberation movement in human history. Released from the gender binary and hierarchy, feminism is neither a women's issue nor a battle between women and men. It is the movement to free democracy from patriarchy (p. 101).
    Dr. Carol Gilligan, *Moral Injury and the Ethic of Care: Reframing the Conversation about Differences, 2014*

The emphasis on "trauma-informed care" has altered the way we all, as clinicians, go about understanding the people in our care and the trauma and adversity they have been exposed to. Grappling with the complex and interactive biopsychosocial and existential problems that chronically traumatized people experience, changes our notions of causality and strengthens our ability to empathize with behavior that is often very problematic in any treatment setting. Much has been written about trauma-specific assessment and treatment, but the moral injuries that victims of trafficking have experienced have not yet been adequately addressed, nor are staff usually adequately prepared to address the dilemmas they are going to encounter [43].

My colleagues and I have built on our previous work, *The Sanctuary Model* by creating an expanded system that is delivered online with coaching and facilitation, and divides into separate learning tracks for leaders, clinicians, direct service staff, and indirect staff. *Creating Presence* is an organizational framework designed to create and sustain a biocratic, living system that gets all staff members, at every level in an organization, on the same page around the critical issues of responding to and treating complex PTSD and addressing the impact of moral injury and all of the issues surrounding being sexually abused, assaulted, and trafficked. The objective of *Creating Presence* is to offer a process for creating and sustaining a safety culture, one in which there is an active and sustained creation of a healthy moral climate for everyone—clients, family members, staff, and leaders. The *Creating Presence* process is designed to provide everyone in an organization with the opportunity to have constructive conversations and interactions

with each other as they work through the dilemmas confronting them every day in the difficult and challenging work of helping victims get on and stay on a road to recovery.

The word "P.R.E.S.E.N.C.E" is used as an acronym for a value system that is then modeled by all policies, procedures, attitudes, and conduct of leaders, managers, and staff. Via the organizing framework of the acronym, meaningful, value-based conversations are held that are not grounded in any specific ideological or religious framework. The values of *Creating Presence* are informed by current knowledge and understanding about what is required for groups of people to live together peacefully and without violence—for whole systems to become "trauma-informed," "trauma-responsive," and "trauma-resilient." The process is designed to offer a contrast between what trafficking victims have experienced at the hands of social predators and the value-based experience of P.R.E.S.E.N.C.E.: Partnership and Power; Reverence and Restoration; Emotional Wisdom and Empathy; Safety and Social Responsibility; Embodiment and Enactment; Nature and Nurture; Culture and Complexity; Emergence and Evolution.

5.1   Complex PTSD and Trauma Bonding

Several decades of research has demonstrated that the course of childhood, adolescent, and adult development can be radically derailed as a result of exposure to trauma and adversity in a myriad of ways and a better diagnosis to view the survivors of trafficking is "Complex PTSD" (CPTSD) [74–79]. Complex trauma refers to a type of trauma that occurs repeatedly and cumulatively, usually over a period of time and within specific relationships and contexts. The term emerged over the past several decades as clinicians and researchers found that some forms of trauma were much more pervasive and complicated than others. These were people who had survived wide ranges of exposure to human cruelty who were extremely difficult to treat and varied according to the age and stage at which the trauma occurred, the relationship to the perpetrator of the trauma, the complexity of the trauma itself and the victim's role and role grooming (if any), the duration and objective seriousness of the trauma, and the support received at the time, at the point of disclosure and discovery, and later.

Complex PTSD consists of seven different problem areas shown by research to be associated with early repetitive, interpersonal, and cumulative trauma [80–82]. These include: (1) Alterations in the regulation of affective impulses, including difficulty with modulation of anger and self-destructiveness; (2) Alterations in attention and consciousness leading to amnesias and dissociative episodes and depersonalization; (3) Alterations in self-perception, such as a chronic sense of guilt and responsibility, and ongoing feelings of intense shame; (4) Alterations in perception of the perpetrator, including incorporation of his or her belief system; (5) Alterations in relationship to others, such as not being able to trust and not being able to feel intimate with others; (6) Somatization and/or medical problems; (7) Alterations in systems of meaning.

Given the enormity of these interactive challenges, is it any wonder that victims of trafficking often feel hopeless about finding anyone to understand them or their suffering? Much has been said about the treatment of the other elements of recovery, but less about the treatment of moral injuries. It is often difficult for helpers or loved ones to understand why a person stays in an abusive relationship—domestic violence, sexual harassment, trafficking, and prostitution. In the case of trafficking victims, there are very real and tangible threats made against them and their loved ones by the traffickers should they try to escape.

But this is compounded by the issue of the trauma bonding that has been deliberately and systematically created, referred to above as "Stockholm Syndrome" or capture bonding and is a part of our evolutionary heritage. The problem is that whenever we are in danger, our attachment needs go up and we do not distinguish between people who are safe to attach to versus those who are dangerous when the attachment figure is the *source* of the danger. Among victims of trafficking, this has been shown to be a significant problem, and those who have been previously traumatized are more vulnerable. It also helps explain why the victim professes love for the trafficker, even after exiting, why she often refuses to prosecute them, and why the trafficker so intentionally and systematically cultivates the trauma bond [25].

These interdependent and interactive challenges require high levels of emotional, social, and moral intelligence on the part of helpers. The demands of emotional and social intelligence are substantial but the focus on this chapter is on the need for morally intelligent caregivers and morally coherent caregiver environments. To elaborate on that, we need to turn to the recently developed literature on responding to moral injury that comes out of working with combat survivors.

5.2   Restoration of Moral Integrity

In one of the first articles to draw attention to the treatment of moral injury, Litz and colleagues outline eight steps or elements that do not necessarily proceed in the orderly fashion they described for the article [36]. But the first is the establishment of a strong working alliance within the context of a trusting, caring, and safe relationship. As is the case in working with any type of psychological injury, the nature and quality of the therapeutic alliance are critical and consist of three components: (1) agreement on the goal of therapy; (2) agreement on the tasks of therapy; and (3) the quality of the emotional bond between therapist and patient [83].

In the early stages of responding to the critical needs of the trafficking victim, moral injuries that they have sustained are not likely to be in the foreground, but the therapist and other staff members need to be prepared for these issues when they do come up. In these early stages, simply building a trusting relationship will demand unusual skills because of the past experience with betrayal trauma and institutional betrayal that trafficking victims have experienced. They will not trust you regardless of how trustworthy you perceive yourself. They will have become highly sensitized to the nonverbal expression of emotion and desire to stay in your good graces and

therefore unwilling to share the shameful and guilty actions they may have been coerced to do. Keeping them in the therapeutic context will be challenging enough for most therapists and early on you must anticipate that they may leave quickly so leaving the door open for return is critical.

Once the trafficking victim has engaged in the process of therapy, along with all the other psychoeducation necessary in working with people who have complex PTSD, it is also the time to educate them about moral injury and its impact as a way of letting the victim know that as a therapist, you are prepared to deal with difficult and challenging information without preconceived judgment. To do that you will need to create a morally safe therapeutic environment for them.

Moral safety in the therapeutic relationship means actively defining and redefining a moral universe of integrity, responsibility, honesty, tolerance, compassion, peace, nonviolence, justice, and an abiding concern for human rights. Being morally safe means having a system of values that are consistent, that guide behavior, and that are founded on a deep respect for each other and all living things. In a morally safe environment there is no "other," no enemy that is fair game for aggression and violence, no scapegoat upon which it is acceptable to project one's own denied feelings or the denied feelings of an entire group [84, 85]. A morally safe relationship is the exact opposite of what trafficking victims have been experiencing, often for years by the time they get to you. It is important to keep in mind that the victims of trafficking have been living in a highly secretive, malignant system and even if they trust you, it will be difficult for them to reveal much of what has happened that is tied to them by fear, and the stronger the bond is with you, the more they will want to protect you from any involvement in those probably criminal secrets and want to protect the image they think you have of them.

It is important to respect the stages of change knowledge and become sensitized to when a person is ready to talk about situations, experiences, and behavior that may bring up overwhelming feelings of guilt and shame [43, 86]. At that point, it can be very useful to engage in an exposure-based processing experience having them detail the events surround the moral injuries and then carefully formulate the ways in which those experiences have affected the development of their sense of self as a moral being [87].

Litz and colleagues have found it very useful at this point to encourage the use of moral imagination to create an imagined dialogue with a benevolent moral authority who was been an actual part of the person's past, or someone they would like to have a relationship with based on understanding, respect, and forgiveness. Although a term that has goes back at least as far as Adam Smith, moral imagination has been more recently defined as "*an ability to imaginatively discern various possibilities for acting in a given situation and to envision the potential help and harm that are likely to result from a given action*" (p. 202) [88]. As Litz and colleagues have described this in working with combat veterans, "t*he goal is to have patients verbalize what they did or saw, how it has affected them, and what they think should happen to them (or others) over their life course as a result, to someone who does not want them to suffer excessively and who feels that forgiveness and reparation is possible*" (p. 703) [36].

5.3   The Impact on the Helper

Who can bear to think for too long about a worldwide enterprise that condemns millions of women and children to social death, and often to literal death, for the sexual pleasure and profit of men?
    Judith L. Herman, M.D. *Hidden in Plain Sight: Clinical Observations on Prostitution*, in *Prostitution, Trafficking, and Traumatic Stress*

It is impossible to dedicate one's life to furthering the well-being of trauma survivors without confronting the nature of evil and the profound moral questions at the heart of any culture that accepts and permits the infliction of harm upon its citizens, especially the most vulnerable of them. Though we may be entertained by stories and movies about monsters—think *The Silence of the Lambs* and *Hannibal*—most people, even mental health practitioners, do not anticipate their own responses to listening to living stories of torture. In organizations, all staff—board members, leaders, and managers, clinicians, direct service staff, and indirect staff—must be prepared to expand their own level of knowledge including an emphasis on self-reflection as well as expanding capacity at a group level around moral injury and how to manage the emotions that will inevitably be elicited.

Moral injury may also be sustained by caregivers who seek to offer aid to victims of trauma but who are frustrated in their endeavors. "*The shame and stigma attached to prostitution are so severe that most people will go to great lengths to hide this aspect of their experience, even in a confidential therapy relationship that depends for its success on frank and full disclosure*" (p. 3). This can cause what has been termed "moral distress" on the part of the helper, defined as "*the pain or anguish affecting the mind, body or relationships in response to a situation in which the person is aware of a moral problem, acknowledges moral responsibility, and makes a moral judgment about the correct action; yet, as a result of real or perceived constraints, participates in perceived moral wrongdoing*" (p. 5) [89]. Moreover, the realities of their daily lives are often so precarious and dangerous that without sustained and well-organized social intervention, ordinary therapeutic measures are unlikely to have any meaningful effect and the pre-existing pull of trauma bonding is likely to draw them back into the same situations and that can be profoundly demoralizing for those who have tried to help [28].

In their work with combat veterans, Klassen and colleagues have referred to "Therapist Stuck Points," beliefs that can interfere with the effective treatment of moral injury-based distress that can be similarly useful reminders for clinicians interacting with trafficking victims [86]. For example, therapists may believe that all trafficking victims have been morally injured which may or may not be true. Therapists may have their own biases about innocence and guilt and what other people may or may not have reason to be guilty about. Likewise, therapists may have an unrealistic notion of how much voluntary action was truly possible in the trafficking situation and therefore how much culpability or responsibility the victims should take for what has happened to them. In an even more complicated way, some therapists may feel that helping to relieve shame, guilt, and remorse may actually

make them complicit in and therefore sanctioning or approving of what they perceive as moral transgression. At other times, therapists may avoid touching on issues relating to moral injury, believing that the victim cannot emotionally handle the confrontation with these issues, while it actually may be the therapist who is not entirely sure he, she or they can handle the emotions associated with a thorough exploration of what happened.

And then, for all caregivers who allow themselves to empathically engage with victims of trafficking, there is always the risk of vicarious trauma. Dr. Herman begins getting beneath the moral horror clinicians may experience in her description about the impact of working with trafficking victims, "*For helping professionals, it is difficult enough to face the reality of sexual and domestic violence as it operates in a single family, and to engage in a therapeutic relationship with a battered woman or abused child. How much more difficult, then, to face the reality of sexual violence as exercised by an organized criminal enterprise that operates freely in every community, hidden in plain sight, and to engage with victims who have been systematically reduced to the condition of slavery. Even those of us who are seasoned clinicians may find ourselves overcome with feelings of disgust, fascination, or pervasive dread, reactions which interfere with the formation of a successful therapeutic alliance. Like bystanders everywhere, we may choose not to see, hear, or speak about what in fact we already know*" (p. 2) [28].

This is all so difficult to manage as a clinician, that just emphasizing the importance of clinical supervision, although important, seems not nearly sufficient.

5.4 Creating a Moral Climate?

Experience in working with patients who suffer from problems associated with complex PTSD indicates that team treatment within a moral climate is the most effective way of addressing the dilemmas posed by victims of sexual trafficking [84, 90–94]. A moral climate has been described as a workplace atmosphere that is conducive to dealing with ethical problems and that fosters ethical practice reflected in organizational vision, goals, policies, and routines. A positive moral climate embodies a set of values that replicates societal norms that are consistent with ethical practice [95]. In a recent book on moral development, the author has asserted that "*The culture in which one is immersed influences how one behaves toward others on all levels: as an individual toward another individual, as a member of a group toward members of another group, as an individual or group member toward institutionalized social will*" (p. 7) [96].

Such a climate must embrace "moral pluralism," a view that proposes moral beliefs as limited, partial, and incomplete, not that they are wrong and that there can be conflicting moral views that are each worthy of respect, a point of view that takes into account the person and the context of the situation the person is in [97]. Clear and sustainable moral climates within a caregiving organization that serves victims of trafficking must make sure not to embrace either of two extreme positions— moral absolutism or moral relativity. Caregivers are confronted with ethical

dilemmas frequently and discovering the optimal moral action then requires an explorative and dialogical process using and integrating self-reflection, emotions, empathy, cultural awareness, situational factors, and moral imagination. One term used to describe the day-to-day dilemmas that caregivers face has been called "microethics," or "the view from the inside" which is unique to each situation, arises spontaneously at a particular moment in time, and is created in the relational space between people [98].

Trafficking systems are malignant, and like cancers in the body result in death, whether the victims experience this as a living death or actually die as a result of the chronic exposure to the dynamics of trafficking, illnesses that occur secondary to trafficking, and the predatory behavior that supports it. Instead, victims must experience a culture to counteract the malignant system they have managed to survive within. What is emerging out of that knowledge of living systems is the concept of "**biocracy**"—organizations and whole societies built upon the knowledge of what we know about human nature and the impact of trauma, about complex adaptive living systems and about the vital importance of expanding liberal democracy in all of our systems.

5.5   The Importance of Alignment

Victims of trafficking can heal and create new lives for themselves but often not without help due to the many complex problems that have arisen secondary to their abusive experiences. Guaranteeing a positive outcome in situations of high acuity with very short lengths of stay and therefore little time to gather the complex information necessary for good treatment is challenging and difficult. This situation, by definition, creates a high-stress work environment and it therefore becomes critically important for all staff members to be well-trained, competent, and in alignment with each other while coping with constantly varying levels of stress.

The most significant challenge in introducing an organizational approach is to get everyone in the environment aligned around a set of commonly held culturally relevant and trauma-informed values, knowledge base, practice, and skills in a way that is economically feasible and logistically possible. Conveying scientifically based content is vitally important as is the embedding of processes that allow diverse groups of people to unlearn habitual patterns, learn new patterns, and then apply that learning in a wide variety of complex situations. But practicing scientifically is not just about adopting "evidence-based practices." It is about developing routine methods for what we do every day—all day long—that requires observation, questioning our established assumptions, asking questions, developing a hypothesis, testing the hypothesis, analyzing and sharing our findings, reaching conclusions, and then restarting that whole process. When you hear or read about trauma-informed services as a "Paradigm Shift," this is essentially what it means.

5.6 The Challenge of Complexity

The kind of change we are describing requires the ability of individuals, families, organizations, and whole cultures to deal with the most significant barrier to healing and recovery: complexity. For centuries, in every level of our society, we have been chained to mental models of reality that no longer are working, largely because our societies have become so complexly interdependent and interactive. When it comes to human dysfunction in all of its many guises, we continue to apply a mental model that has us categorizing people into "sickness" or "badness" and have consistently denied the evidence that insists that most of this dysfunction and multiple pathologies are due to INJURY and that most of that injury is—or was at some point in time—preventable.

   Changing mental models is an enormous and frightening task. When it has happened in the past, it has been a gateway to revolutionary—even evolutionary—change but it is never without significant turmoil. In bygone days, people were burnt at the stake for suggesting that basic assumptions need to change. Our overarching purpose in *Creating Presence* is to provide the knowledge base and skill development for collective change starting at the organizational level.

5.7 Collective Purpose

Being in alignment with each other doesn't mean that we are all doing the same thing. It does mean that at the deep level of organizational meaning, values, and purpose, we are all aiming at the same goals, regardless of our individual roles, responsibilities, experience, and training. That means that collectively, when we are aligned with a higher purpose, we choose to adopt a worldview of what is possible and in doing so change our attitudes and behavior. To do that we need to help each other and our organizations to create a new and different vision of the future than the one determined by current social, economic, and political forces. Then we need consistent messaging and training suited to each individual job within a complex organizational structure and the tools that allow theory to become practice in service of furthering that shared vision.

5.8 Guiding Values and the P.R.E.S.E.N.C.E. Acronym

Using the word P.R.E.S.E.N.C.E. as an acronym encompasses values that guide organizational growth through trauma-informed care to trauma-responsive and resilient practice and trauma-specific treatment. These values include Partnership and Power; Reverence and Restoration; Emotional Wisdom and Empathy; Safety and Social Responsibility; Embodiment and Enactment; Nature and Nurture; Culture and Complexity; Emergence and Evolution. Each set of values is associated

with a knowledge base and a set of universally applied tools that are designed in sequence to provide (1) Brain regulation skills; (2) Communication skills; (3) Group engagement skills; (4) Complexity management skills.

The linked aligning values of *Creating Presence* are meant to consistently inform and anchor all personal, interpersonal, and organizational processes. In the implementation process, each value will be actualized through the acquisition of individual and organizational knowledge, practices, and skills that are tailored to specific needs of the organization.

5.8.1 Partnership and Power

Trafficking victims have been exposed to the extreme abuse of power, repeatedly and chronically. The problems we are all facing today are fundamentally about the misuse of power. So, it becomes essential that everyone in an organization grapple with their own personal power and what this means in interaction with others and in the group. The only viable solution that human beings have evolved to deal with balancing power are democratic, participatory systems of self-governance. Victims of trafficking are unlikely to have had any experience in a participatory, partnership system. Immersing them in an environment where they are listened to, their opinions are respected, and they have a voice in decisions is likely to be unique and important but frightening as well.

Democratic processes are being tested around the world. It has been said that democratic practice embodies the notion of safe struggle and that exposure to repetitive trauma can destroy that capacity [99]. At the same time, the skills necessary for participatory practices are antidotes to the very problems that adversity and trauma create for both children and adults. In *Creating Presence*, we explore the attitudes and skills necessary to engage in true collaborative relationship with each other and the people we serve. That means learning, sometimes for the first time, what it means to share power. We need to rediscover the enormous benefit to be found in collective power because the only way humanity has survived throughout our evolution without sacrificing individual achievement, empowerment, and pride has been through participatory processes. Democratic participatory governance is the best method human beings have thus far evolved to balance those vital and parallel needs.

5.8.2 Reverence and Restoration

Reverence is an elevated form of respect combining basic human decency with spiritual purpose. The recognition that every cell in the body of the person before us is comprised of elements that came into being at the origin of the universe is awe-inspiring. Knowing that life emerged out of inorganic elements, that it is endangered and that it must be preserved must be sufficient to motivate significant change in our current attitude toward each other, the other life forms that populate and maintain life's balance, and the planet itself. A sense of deep and universal respect for all life in protecting it, maintaining health, and restoring integrity to what has been damaged is what we mean by reverence. This is what we need to demonstrate in our daily

lives with the people around us and in our children, and that manifests in what we do and what we don't do.

This aspect of human experience may have been the most damaged by the trafficking experience, or if this deep spiritual commitment has been preserved, it may be what kept the victims alive. Whatever the case, it is important that the healing environment embodies this respect and this hope that expands to a restoration of health for all of us.

5.8.3   Emotional Wisdom and Empathy

In *Creating Presence*, we are defining emotional wisdom as the ability to use emotional intelligence to make sound decisions based on the application of experience, knowledge, judgment, and enlightened purpose combined with relational intelligence and empathic concern. Besides connecting us with each other, one vital function of emotional intelligence is to provide us with information about value in the world around us beyond materiality. Deciding what is valuable and what is not is vital to our ability to survive and thrive.

Empathy may be the key healing ingredient for victims of trafficking since true human empathy has been completely absent in their interactions with the traffickers. However, it may require a great deal of patience on the part of helpers to work within the victims' limited expression of healthy emotions since feelings are likely to have been targets for the perpetrators that they had to learn to suppress and dissociate.

5.8.4   Safety and Social Responsibility

Every organization has a culture and usually, many subcultures. A safety culture is "*the product of individual and group values, attitudes, perceptions, competencies, and the patterns of behaviors that determine the commitments to and the style and proficiency of, an organization's health and safety management…. characterized by communications founded on mutual trust, by shared perceptions of the importance of safety*" [100]. Maintaining a safety culture is essential if we are to be effective in helping traumatized people to recover. If we live or work in a place where we do not feel safe, our cognitive functioning and our ability to solve complex challenges deteriorate significantly. But safety is itself a complex idea that encompasses physical safety, psychological safety, social safety, moral safety, and cultural safety. Unless we can be secure in all five domains of safety, we are not truly safe.

A holistic view of safety inevitably involves an assumption of social responsibility on the part of every individual and each organization, a concept that recognizes that human survival depends on the health of the collective, which requires that we all embrace the notion of a common good. It is likely that the victims of trafficking never feel truly safe and have not experienced safety for a long time - if ever.

This necessitates a very different definition of what it means to be safe by recognizing and when necessary, changing the current social norms that presently tell us that the only way to be safe is to individually accumulate wealth and sacrifice the public good and that our safety depends on humiliating, disrespecting, or punishing others. Change in systems occur when we use the tools we have developed in

interaction with very unsafe children and adults and apply those tools to everyone. It also means that we must decide on strategies to address the psychopaths who are inevitably members of our culture in ways that do not harm our own moral beliefs and values while no longer permitting them to do damage to others.

5.8.5   Embodiment and Enactment

Values are just a lot of talk unless we put them into practice in our everyday busy and sometimes chaotic lives. What does it mean to enact "reverence" and "complexity"? What does it mean to embody "safety" and "emotional wisdom"? Without concrete tools, they are just words that can easily become meaningless or misinterpreted.

We are constantly enacting our beliefs through what we do in the world with our bodies and our minds. Our beliefs are embodied in our enactments. The experiences that life delivers are engraved on our minds and bodies. Centuries of problems grounded in Cartesian duality—the idea that the mind and the body are disconnected from each other—are finally dissolving in our growing understanding about the complex interaction of minds and bodies. This new knowledge has significant implications for our ideas about healing and recovery.

It has become much clearer that the behaviors we call "symptoms" are cries for help, indicators of unresolved pain and loss that need to be recognized and redirected by others if injured people are to heal. One of the key understandings about the effects that adversity and trauma have on people is that of the compulsion to repeat also known as *traumatic reenactment*. Empathy makes mutual understanding of reenactment behavior possible. But enactment—what we do or stop doing is what can change a life story. This change in story is what we all need now if the human story is not to be a tragedy.

5.8.6   Nature and Nurture

Our planet has been nurturing life for billions of years and we have much to learn about how living systems develop, maintain health, recover from injury or illness, and age with dignity while accepting the inevitability of death. The current model that informs organizations is largely based on outdated ideas that are applicable to non-living machines but highly damaging to living organisms including organizations. Modern science has revealed much about our nature that helps us to develop an understanding about how we, as a species, have evolved and that knowledge helps to inform a deeper compassion for the multiple dilemmas we face as the stewards of this planet.

We now know far more than we have before about the dynamics of development and the profound influence of childhood experiences. Our long period of helplessness in infancy and childhood leads directly to an appreciation for the impact of nurture experiences that are with us throughout our lifespan. People exposed to adversity and trauma as children experience serious and often severe disruptions in their developmental course that can last a lifetime. Healing and recovery must focus on establishing the capacity for healthy attachment within the constraints of each individual.

We need attachment-based skills that help each of us as individuals and groups of people to comprehend and use the reality that the stewardship of living systems requires of us, a recognition that changes the way we treat each other, our organizations, and the world we are dependent upon. Victims of trafficking have had experiences with disrupted or abusive attachments that often go back to childhood. Healing will not take place over night and in fact may require multiple contacts over time to establish sufficient trust necessary for change to become possible.

5.8.7   Culture and Complexity

Put any two or more people together for any but a short period of time and we will create culture. It's what human beings do and have always done to stay alive. We like to think that we are self-directed individuals, but this is only partially true. We are always being affected by social norms and mental models and worldviews that are deeply embedded in the various cultures to which we each belong. But largely because of our denial of that influence, it works at an unconscious level, determining much of what we think, feel, and do. It's critically important that we convert what are now the effects of unconscious influences, into conscious intention so we can make better decisions about value, meaning, and purpose. We therefore need the knowledge and skills that allow us to recognize and respond to group dynamics.

Meanwhile, the study and science of Complex Adaptive Systems (CAS) have yet to be adequately incorporated into our present organizations and communities. CAS science tells us much about the interconnectedness of all living systems, the vital diversity of all human cultures, and the ways that systems change. In this era of accelerating change, our systems must be prepared to meet the challenges that are constantly unfolding before them.

To do that every person and every system must develop skills to address complexity through connection, through changes in organizational and social culture and through the critical ideas around self-organizing change. In the case of working with trafficking victims that can mean coming to terms with the complexities of change within the challenges of survival that have faced them every day.

5.8.8   Emergence and Evolution

The short version of understanding the concept of emergence is captured by the phrase "the whole is greater than the sum of the parts." The problems that confront our colleagues, our families, communities, corporations, and the global community are so complex that we have thus far outstripped our evolved cognitive capacity to confront, much less resolve, those problems. Complex problems can only be solved with complex methods and that necessitates effective collective methods that emphasize collaboration over competition.

Successful therapeutic processes are the result of emergence. Exposure to trauma and adversity creates complex problems that can only be resolved by a therapeutic journey that incorporates a wide variety of spiritual, cognitive, emotional, relational, embodied, and enacted approaches and out of those parts comes a greater more mature and wiser whole person. We can say then, that on an individual level, that person is evolving.

Whether the focus is on an individual, a family, an organization, a community, or a society, setting the goal of "emergence" helps to drive such developing collective approaches so that ultimately the whole of humanity will indeed be greater than the sum of the parts and that our evolutionary course will continue. But making decisions and doing problem-solving requiring the balanced and conscious emergence of new ideas, new beliefs, new ways of doing things necessitates the acquisition of skills that are unfamiliar to many people. These need to be taught and felt for human groups to know the joy and creativity of collective conscious experience that comes with true teamwork.

The study of evolution is the science of how living systems change. As individuals, we continue to evolve throughout our brief lifetimes. As a whole species we are still evolving, and we do not know what the future holds for us. To some extent, because we are conscious creatures, we can do our best to guide that evolution by making emotionally wise decisions that are based on life-preserving and reverent values. But what will emerge out of what exists today is still unknown.

Discussion Questions
- When you consider your work with victims of trafficking, what have been the most challenging ethical/moral dilemmas you have encountered?
- What are the most complex problems that victims of trafficking have presented to you and how did you manage those problems?
- In helping victims of trafficking to escape from "the life," what have you found to be the most important help you can offer?

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Part IV

Regional Resources, Programs, and Policies

North American Policy on Trafficking of Humans

Anne Watson Bongiorno

1   Introduction

North American policy on trafficking in humans (TIP) is a complex endeavor due to the need to protect the rights of survivor victims, while balancing societal needs for safety. TIP is an affront to long standing moral values. All forms of TIP deprive people of freedom and strip them of dignity and choice. Estimates of human trafficking continue to rise significantly, with profits estimated at 152 billion dollars annually [1]. As of this writing, 27.6 million individuals are compelled to engage in work in industry or forced sex [1]. Effective human trafficking policy employs coordination, collaboration, and private/public partnerships. Prevention and protection efforts rely on a multi-pronged approach. It is equally vital to develop effective protocols for recovery and reintegration of victims and prevent repeat trafficking [2]. A public health approach to TIP could improve public awareness of TIP, a key component of influencing policy. This includes awareness of the toxic environmental and societal issues that create a market for traffickers and the need to support and care for victims [3]. If we are to eliminate human trafficking, we must create and enact policy to that addresses the root problem of TIP—the criminal activity of traffickers [3]. At the heart of effective policy on all fronts of the human trafficking crisis is the need to value human dignity.

2   North American Policy

The United Nations (UN) adopted a protocol in 2000 to prevent, punish, and suppress trafficking in an effort to strengthen the UN convention against transnational organized crime [4]. Not all countries heed the tenants of the policies set forth in

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this protocol. In such cases we need to focus efforts and assistance with countries who demonstrate political will and have the greatest need for combating TIP [5] The United States Department of state TIP Office (USDTIP) provides global leadership in anti-trafficking policy, including assistance with capacity building of civil societies and government. USDTIP ranks countries according to their adherence to the Trafficking Victims Protection Act of 1990 (TVPA) standards for elimination of trafficking in persons [2, 6]. Rankings consider not only the TVPA standard how well a government engages in efforts to meet TVPA minimum standards of anti-trafficking initiatives.

In North America, only Canada, the Bahamas and the United States meet criteria for Tier One, meaning they consistently meet TVPA standards to combat human trafficking and show annual progress in combating human trafficking crime. Canada and US policy are in alignment across municipal, national, and international agencies [7]. This integrative policy driven approach is designed to reduce cross-border TIP through multiple strategies to strengthen TIP training and a network of intelligence sharing. Integral to policy management in Canada is using the Royal Canadian Mountain Police in education, awareness, and victim assistance programs with sensitivity to gender and cultural issues inherent in TIP populations. A strong emphasis is included on policy specific to vulnerable indigenous and immigrant women [7].

Several North American countries such as Mexico, Costa Rica, and Belize have shown substantial progress to comply with TVPA standards, meeting Tier 2 criteria [2]. Many of the smaller islands such as Haiti and St. Lucia are on the Tier 2 watch list, because there have either been disproportional government efforts in comparison to the magnitude of trafficking in country or trafficking is on the rise, despite current TIP prevention efforts. Cuba and Nicaragua do not meet TVPA standards and their ranking reflects insufficient efforts to combat TIP. This means that TVPA policy dictates restrictions of funding assistance as a result of this failure [2, 6]. Another example of successful policy is how a nonprofit group, *The Millennium Corporation*, uses an analytical framework and tools to combat TIP when funding global programs [8]. The United States USAID and State Department assistance programs might benefit from instituting these additional benchmarks when considering aid, in addition to using the TVPA policies.

When considering North American policy on human trafficking, it is important to remember that advocacy is a formidable tool. The early UN policies such as TVPA and the 2003 policy eliminating discrimination against women were important milestones in advocacy efforts [4]. Additional advocacy efforts that could lead to new labor policies include the need for North American countries to divest from products or services that are related to TIP. This includes pornography and disposable fashion, both of which demand cheap, often trafficked, labor [9]. Raising awareness of trafficking in all its forms and promoting elected officials whose platforms include anti-trafficking reforms are important. Efforts to eliminate TIP should focus not only on legislation, but on policy making that includes awareness. Consistent policy implementation, reliable data collection, and better policy for trafficked victims are needed to increase TIP prevention, prosecution, and protection efforts [7].

Canada has implemented a national strategy designed to empower victims within traditional pillars of prevention, prosecution, and protection [10]. A key feature of this policy is working with industry partners to reduce the chance of TIP in supply chains of goods and services. Such a multi-pronged approach includes international concerns and addresses TIP of indigenous origin [10]. In contrast, Mexico's polices on human trafficking are failing and have been insufficient to stem the tide of trafficked victims [2]. Mexico has the highest number of trafficked persons in the Americas. Recommendations from the United States Department of State are to strengthen policies through strategic national plans that are developed in consultation with nongovernmental international organizations [2].

3   United States Policy

The fundamental principles of the United States Constitution and the rule of law lay out our core moral and ethical values in the United States (US) [11]. Clearly, the ethical obligations of human society are incompatible with TIP, yet, the US is one of the largest receiving countries of TIP victims. Within the US, policy is focused on four pillars of society, prosecution, protection, prevention, and partnership (4Ps) [2]. Policy is about people, to think about our neighbors. In particular, the lens of human trafficking policy seeks to eliminate the exploitation of others by means of fraud, coercion, and force. Contemporary trends in TIP policymaking in the US focus on using human dignity as the basis for across the aisle collaboration. Multiple policy initiatives have updated the original TVPA regulation throughout the years such as the enactment of the *William Wilberforce Trafficking Victims Protection Reauthorization Act of 2008* [12]. More recently, policy deliberations resulted in the *Justice for Victims of Trafficking Act* [13]. These policy initiatives increase fines for convicted perpetrators, establish a fund for trafficking victims, provide for additional treatment options for trafficked children, and improve trainings for law enforcement on TIP. One concern in US policy is that current immigration policy increases the risk of exploitation of migrants. With enhanced immigration policing at the border, migrants are subject to increased vulnerability to debt bonding, forced labor, and abuse as foreign domestic workers [7]. Stringent polices on immigration are significant factors in TIP because when vulnerable migrants need a third party to process their paperwork or immigration policy is so stringent that successful entry is nearly impossible, it creates a prime opening for traffickers to take advantage of victims [14].

Every US state and the District of Columbia have enacted policy on human trafficking [2]. Partnerships between states and federal entities drive good policy in prevention of TIP. The Office of Justice provides policy guidance and technical in forming such collaborations [15]. Some examples of policy initiatives include the *Human Anti-trafficking Response Team (Hart)* developed in the state of Connecticut and the TIP task forces developed by the respective states of Illinois and Minnesota [16–18]. Another policy approach closes loopholes in the economic engine of legitimate businesses that unknowingly aid traffickers, such as the hotel industry by

requiring signage about TIP in public spaces [19]. These are just three examples of a wide variety of approaches taken by individual states as they work to support federal laws. Although a synthesis of the evidence on human trafficking over the past two decades clearly points to the improvements trafficking policy at state, federal, and global levels, it is still not enough to slow the numbers of TIP crimes [20].

3.1   US Healthcare and Nursing Policy

In the US, the health care sector focuses primarily on education and intervention, both key aspects of the 4Ps framework [2]. The American Nurses Association (ANA) stresses that work with patients must protect the fundamental human rights of patients although their position statement on human rights does not specifically discuss human trafficking [21]. The National Association of School Nurses policy statement on TIP notes that it is essential for school nurses to actively engage in prevention, identification, and interventions with students [22]. Nurses United Against Human Trafficking provides vital resources to educate nurses and develop nurse led advocacy for prevention of TIP [23] Recognizing the need for more work in the area of human trafficking prevention, at the 2019 ANA Membership Assembly (MA), representatives called for more effective screening tools, increased education of nurses on TIP, and endorsed trauma informed approaches to care in collaboration with the health care team. The MA also requested that ANA assembles a national task force on TIP [24].

The American Medical Association (AMA) adopted a more specific policy focused on the distinctive and key role that physicians provide in preventing TIP [25]. Both the ANA and the AMA offer educational opportunities for their respective professions. Both organizations advocate for the need for the entire health care team to know how to identify, protect, and connect patients suspected of being trafficked to appropriate resources. The American Hospital Association (AHA) also plays a key role in advancing the human rights of TIP victims [26]. AHA provides protocols for care of victims and documentation policy guidance. They offer robust educational opportunities for health systems, and multiple resources such as disseminating a model human trafficking response system [26]. At the population level, key stakeholders such as the American Public Health Association (APHA) have developed policies to combat TIP and endorsed groups such as Health Education Advocacy Linkage (HEAL) [27, 28]. HEAL offers an integrated team approach to ending TIP and supporting survivors. The APHA policy on human trafficking calls for support to expand TIP research and coordinate and expand educational efforts of the health care team [28]. Support for the four pillars of human trafficking initiatives means setting policy to accurately identify and use trauma informed care when treating victims of TIP. Inherent in APHA policy recommendations is a call to evaluate quality screening tools and engage in more research that advances effective models of care for TIP victims. The entire health care team plays a critical role in advancing public policy through development of a body of evidence about effective interventions.

One of the most difficult aspects of human trafficking is identifying victims. Almost 90% of women who escape their traffickers report that they had previously been seen in a healthcare facility at least once while captive [29]. When interpreting provision two of the Nurses Code of Ethics, nurses are clearly mandated to identify and report suspect TIP [30]. This means that nurses must know the signs of TIP and actively seek to help victims of TIP. Nurses are often the first healthcare worker that a TIP victim may see, and they often miss the signs of trafficking [31]. Part of the problem is that workplace policy in health care facilities varies from transparent protocols to no policy at all or to policy that exists but is not well distributed so that staff lack awareness of the policy. The Joint Commission on Healthcare recommend that healthcare personnel be informed of how to identify, know how, and when to involve law enforcement and refer TIP victims to community resources, but do not mandate trafficking policy for their member institutions [32]. In a multi-year study on identification of TIP, nursing students in an RN program were surveyed about knowledge of TIP workplace policy, symptoms, approaches to care, and resources [33]. The majority of the subjects did not know of a policy on TIP or could not find it. Many were unable to identify hallmark signs of human trafficking and/or were unable to differentiate symptoms of TIP from suspected intimate partner violence. Few knew about national or community resources. In response to the need for policy, protocols, and education, several agencies have created toolkits for employers. The Human Trafficking Collaborative of the University of Michigan is one example of an initiative that provides free templates for training policy on the assessment, identification, and care of TIP survivors [34]. Their guidance includes language that defines TIP, discusses the purpose of TIP policy, and provides multiple resources such as standards and documentation templates. The Vera Institute is a national organization that develops solutions that disrupt current criminal and legal paradigms related to TIP [35]. Vera developed the first validated screening tool in the US for use within workplace policy to accurately identify TIP victims [35]. HEAL advocates have also developed a **Protocol Toolkit** for responding to victims with trauma informed approaches within the healthcare setting [36]. Project ECHO developed educational models on TIP policy and screening through a learning loop linking transdisciplinary professionals with care providers in a virtual network [37]. The project aims for providers to have a readiness policy and toolkit that raises awareness and supports providers in evidence-based screening and services for TIP victims [37]. Employer toolkits are valuable resources for developing policy to combat TIP through the lens of healthcare.

4 Supply Chain Labor Policy

The ILO estimates 21 million people a year are compelled into forced labor [1]. US policy which holds employers accountable for forced labor in the supply chain bit clearly there is more to be done [2]. Global companies such as the Target Corporation publish explicit supply chain policies which hold human rights as central to their business practice [38]. Williams Sonoma Corporation (WSC) and its affiliates also

share transparent supply chain labor policy practices stating they adhere to ILO policies, the UN Guiding Principles on Business and Human Rights, and the UK Modern Slavery Act [1, 4, 39]. WSC and Target policies are great examples of multinational corporations that exhibit a strong commitment to end TIP, child labor and forced labor in the global supply chain. Gaps in adherence to human rights principles are often seen in smaller service industries. Failure to ascribe to international norms on human rights is, in part, because public policy for such actions is nonbinding [1]. Many governments also not only fail to provide good policy to prevent TIP but aid and abet forced labor [2].

4.1 Transportation and Trucking Sectors

An integral part of interrupting modern slavery lies with policies about TIP in transit systems. In 2012, Truckers against Trafficking (TAT) began a US nationwide policy initiative to raise awareness of sex trafficking across the nation's road system through education and advocacy [40]. TAT has partnered with multiple, major transport companies such as UPS, FedEx, and Amazon. Through their private and government partnerships, TAT has mobilized a massive number of transportation professionals poised to assist victims and law enforcement in combatting TIP. TAT offers multiple programs that include coalition building and initiatives with bus drivers and truckers, while working to shift norms in the culture of demand [40]. TAT shares stories by survivor leaders (SLs). They provide much-needed context of the harms of trafficking for transit system workers. SLs share vital first-hand knowledge about many vulnerabilities, systems issues, and emerging challenges that must be addressed in identifying and assisting victims [41]. This same essential expertise helps key stakeholders view proposed healthcare policy development through an equity lens. SLs have also helped employers, and policymakers consider the experiences of survivors so that policy is survivor centric. Private businesses should take note and consider trauma informed approaches in their human resource processes. SLs can provide dynamic information when developing risk management plans designed to strengthen anti-trafficking efforts [1].

5 Child Welfare Policy in TIP Victims

Approximately a million children each year are trafficked for sexual exploitation [41]. A school-based framework utilizing an ecological perspective is essential to implementing effective policies for protection and support of vulnerable students [42]. The registered professional nurse plays a pivotal role in the interdisciplinary development of protective policies and protocols [22]. Because disclosure reluctance in youth sexual exploitation cases is a well-known concern, it is very important to develop school and law enforcement policies where forensic interviewing is holistic and trauma informed [42]. Evidence basis is limited on such novel

interviewing approaches but is vital to ensure that critical interventions are set in motion for the victims [43].

6   COVID-19 and TIP

The COVID-19 pandemic and subsequent rise of unemployment have increased risks for trafficking in vulnerable and disadvantaged populations. Social media use ramped up during the pandemic and traffickers quickly pivoted to using online platforms to lure mostly women and children into labor and sex trafficking [4]. The pandemic severely limited resources for combatting TIP and made it much more difficult to track perpetrators, as victims were not as visible, hidden away in homes and apartments due to lockdowns. Policy makers may learn from crisis strategies employed during the pandemic for future TIP investigation guidance [4]. Policymakers should develop mitigation plans, move resources online, and create e-Justice resources. Should a pandemic reoccur, trafficked persons should be exempt from quarantine movement restriction such as lockdowns, so that they can seek help [44]. The pandemic raised awareness for the need for timely contingency policies on TIP during times of crisis.

7   Strengths and Challenges in TIP Policy

7.1   Strengths

Many strengths are found in current policy to prevent human trafficking at the state, national, and North American levels of government and commerce. In the government sector, there is a well-developed Canada/US policy effort to prevent cross-border trafficking and TVPA has encouraged other North American countries to strengthen their TIP policies. Every state in the nation has enacted TIP policies and more and more states are moving from policy that penalizes trafficked victims as criminals toward policy that is survivor centered.

In the commerce sector, there are excellent examples of multinational corporations implementing transparent and strong supply chain policy committed to eliminating TIP and developing trauma informed employment practices and strong education programs so that employees learn the hallmark signs of TIP. The transportation sector has ramped up significant efforts for truck and bus driver's ability to recognize and act when they suspect a person is being trafficked. They also are educating their members on the role that demand for sexual services plays in TIP and working to change norms. Advocacy efforts have led to increase awareness of TIP and an understanding of the need for education congruent with the 4PS pillars in law enforcement. In health care, nurses and physicians' leadership supports the 4PS model with an emphasis on education about prevention, protection, and treatment.

7.2   Challenges

Language matters when discussing TIP policy. TIP continues to be defined in many different ways, creating confusion. We urgently need common terms to describe TIP so that we have a shared understanding of the nuanced meanings of TIP and needs of survivors. We also need much more research to inform evidence-based strategies in all facets of TIP prevention, protection, prosecution, and treatment. TIP legislation is much more likely to be successful when using terms that evoke a research basis to the recommended policy [45].

Current policies predominantly discuss sex trafficking, and more attention is needed on labor trafficking and other forms of trafficking [2]. Policy is also needed to not only evaluate best practices but to identify and eliminate ineffective or harmful initiatives. Nurse and physician lack of knowledge on TIP identification, intervention, and referral needs to be strengthened. Effective and easily accessed policies are needed across the spectrum of healthcare institutions. These should include policy that mandates ongoing education for providers and staff. The health care workforce should partner across sectors to develop effective protocols and policies that improve the health, safety, and recovery of trafficked youth.

In the commerce, government and transportation sectors, strong collaborative efforts are needed to change social norms around sexual exploitation and the appetite for cheap goods. More international and North American supply chain and transportation policy is needed for both labor and sex trafficking prevention. Policy initiatives are needed that address the complex dynamic relationship between immigration and TIP, reducing vulnerability for being compelled to work in the sex and cheap labor markets.

8   Conclusion

North America needs a strategic interdisciplinary plan to develop and enforce legally binding policies aligned with the 4PS focus. Although much has been improved to date, all businesses urgently need consistent standards that ensure their supply chains are grounded in human rights. Strong, sustained efforts are needed in the healthcare sector to strengthen and maintain transparent TIP policy in every health care facility. Education and trauma informed care should be at the forefront of efforts in all business and health sectors. Most importantly, we need strong, effective policies to combat TIP at its source—the traffickers [3]. Advancing human rights and dignity as core values in TIP policy may lead to a much- needed strategic framework which stops perpetrators and protects victims. Effective collaborative policy initiatives are grounded in mobilizing advocates, partnering with survivors, and establishing systems for private/public partnerships (Table 1).

Table 1 Websites relevant to policy on the trafficking of humans

US State Department Policies on Human Trafficking
Polaris Anti-Trafficking Efforts
HEAL
Physicians Against Trafficking of Humans
Federal Child Welfare Policies and Human Trafficking
The Human Trafficking Institute
Project ECHO

Discussion Questions

- What constitutes an effective public health approach to improving public awareness of human trafficking?
- Why is public awareness so important to advocacy efforts in human trafficking policy?
- How can nurses and health care professionals strengthen the four pillars of human trafficking policy?
- What terms would you include in a fully inclusive definition of trafficking in humans?
- You are assigned to an interdisciplinary team whose mission is to advance human rights and dignity as core values in human trafficking policy. What key constructs would you include in a strategic framework to prevent human trafficking and protect its victims?

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Determinants of Child Trafficking in West Africa: An Issue of Social Justice

Modupe Adewuyi and Robin R. Walter

> *We should not emerge from a focus on West Africa feeling good about how much better other regions are doing on this issue but awake to and engage the ongoing systemic injustices that lead to the ultimate dehumanization and commodification of children.*
>
> —*Modupe Adewuyi and Robin R Walter*

> *I have stepped into darkness many times, but none so dark as Nigeria. To research slavery is to face the raw and unrestrained bestiary of man. Those beasts are most fiercely unleashed in the dens of sex slavery, and Nigeria is the most unleashed of them all. Other countries may have more victims and other networks may be more sophisticated, but Nigeria took everything I had experienced about sex trafficking and cast it into an inscrutable abyss.*
>
> —*Siddharth Kara, Director of the Program on Human Trafficking and Modern Slavery, Harvard Kennedy School of Government (2012)*

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1   Introduction

The Palermo Protocol, which was adopted in October 2000 as part of the United Nations Convention on Transnational Organized Crime, established a global definition for human trafficking, a modern form of slavery:

> Trafficking in persons shall mean the recruitment, transportation, transfer, harboring, or receipt of persons by means of the threat or use of force or other forms of coercion, abduction, fraud, deception, abuse of power, or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labor or services, slavery or practices similar to slavery, servitude or the removal of organs ([1], p. 42).

According to the United Nations Article 3(c) of the 2000 Palermo Protocol [1], child trafficking is defined as the recruitment, transportation, transfer, harboring, or receipt of any person under the age of 18 for exploitation, whether or not it is done through fraudulent means. The article also specifies that exploitation can include forced labor, slavery, or practices similar to slavery, servitude, and the removal of organs. Despite various international and regional conventions, national laws, and the efforts of many NGOs, faith-based organizations, and international organizations, West Africa remains the worst region in the world, serving as the source, transit location, and destination for child trafficking [2].

This chapter is divided into four sections that cover the topic of child trafficking in West Africa. The first section introduces the region and gives an overview of the scope and forms of child trafficking in West Africa. The second section examines the cultural norms, traditional practices, and religious beliefs that traffickers have exploited. The third section evaluates the role of the state in creating and maintaining conditions that contribute to trafficking, as well as the failure of international, regional, and national policies to protect children from trafficking. The fourth section concludes the chapter with a summary of efforts to combat child trafficking in West Africa and offers recommendations for future action.

2   West Africa Region

2.1   West Africa and the Problem of Child Trafficking

It is important to understand the context of West Africa because, while child trafficking is not exclusive to this region, its prevalence and contributing factors are unique. West Africa is one of five regions in Africa, and the Atlantic Ocean borders it to the west, the Gulf of Guinea to the south, and the Sahara and Sahel to the north [3]. It consists of 17 countries: Benin, Burkina Faso, Cabo Verde, Gambia, Ghana, Guinea, Guinea-Bissau, Ivory Coast, Liberia, Mali, Mauritania, Niger, Nigeria, Saint Helena, Senegal, Sierra Leone, and Togo [3].

Out of the 17 countries in West Africa, 15 are members of the Economic Community of West African States (ECOWAS) [4]. These countries are Benin, Burkina Faso, Cabo Verde, Cote d'Ivoire, The Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone, and Togo [4]. ECOWAS has two main goals: (1) to foster economic cooperation among member states in order to improve living standards and promote economic development and (2) to address some security issues by establishing a peacekeeping force for conflicts in the region [4]. Christianity and Islam are the two dominant religions in West Africa, though many people also practice traditional African-centric religions [4].

West Africa, with an estimated population of about 427 million in 2022, makes up 5.16% of the world's population [5]. The population of West Africa has a median age of 18.2 years and a disproportionately high number of children compared to older adults [5]. In addition to its younger population, the region has diverse agricultural resources that have the potential to drive inclusive social and economic development [6]. For example, Côte d'Ivoire, Ghana, Nigeria, Ivory Coast, Liberia, and Sierra Leone produce around 70% of the world's cocoa beans, which are in high demand by Western industries, particularly the chocolate industries [7]. West Africa also has 5500 km coastline that is home to some of the most diverse fisheries in the world [8]. In addition, it is a rich source of gold, bauxite, coal, copper, diamonds, gemstones, gold, ilmenite, iron ore, lead, manganese, nickel, silver, columbite-tantalite, tin, uranium, zinc, and zircon [9]. The farms, mines, and fishery industries are often operated by small-scale farmers, fishermen, and miners who are paid low prices for their products. In 2021, Taylor [10] explained that lower prices of coco in West Africa are expected to plunge farmers into poverty, increase the prevalence of human trafficking, and add to the rates of illegal child labor. The combination of poverty, lack of education and employment opportunities, and unjust social, economic, and political structures creates a favorable environment for child traffickers to lure children and their parents with false promises of educational or vocational training opportunities and working opportunities in farms, mines, or the fishery industries [11].

Additionally, it is worth noting that West Africa has a long history of migration, both within the region and across national borders, which predates the establishment of borders by colonial powers [12]. This trend, referred to as "mixed migration," includes the cross-border movement of people, including refugees, victims of trafficking, and people seeking better lives and opportunities [13]. The ECOWAS protocol [14] on Free Movement, Right to Residency, and Establishment, approved in 1979, has further strengthened this trend among member states. While the protocol may have had positive effects on social, economic, and cultural development among member states [15, 16], the ease of free movement of people, goods, services, and capital, combined with corrupt border personnel, has been identified as a key factor in the rise of child trafficking in the region [17–19].

According to a report from the United Nations Office on Drugs and Crime (UNODC) [2], over 75% of trafficking victims detected in West Africa are children. Child trafficking in West Africa occurs for various purposes, including labor, prostitution, street begging, and child pornography in countries such as The Gambia,

Guinea Bissau, Mali, and Senegal [20, 21]. In other countries such as Benin, Ghana, Togo, Cote d'Ivoire, and Nigeria, it primarily occurs for the purpose of child labor [19, 22].

From 2003 to 2021, 63% of sex trafficking victims in West Africa were females, 41% of whom were children aged 0–17 years [23]. In December 2022, Interpol [24] reported the rescue of eight, four, and three individuals from human traffickers in Côte d'Ivoire, Benin, and Togo, respectively. The agency also reported that 10 children were rescued in Burkina Faso as they were being transported by traffickers to an illegal gold mine where they were to be put to work. However, the number of rescued children reflects a small percentage of the number of children who are currently experiencing child trafficking. Children trafficked outside the region, such as to Europe, are often subjected to forced labor and sexual exploitation [19].

2.2   Forms of Child Trafficking in West Africa

Child trafficking in West Africa often involves children from rural areas, where people may be unaware of the issue and desperate to escape poverty, leading them to seek better opportunities for their children [25]. Mlambo and Ndebele [15] identified resourceful ways used by human traffickers to trap children into trafficking that include abduction, the sale of children by poor parents with the promise of a better future, bonded placement of a child as debt repayment, temporary placement of a child for a small fee, the exchange of children for gifts, the enrollment of a child in a domestic work program at the request of the child's parents, and deception of parents into allowing their children to be placed in distant schools, trades, or training institutions, only for the children to end up as domestic servants, street vendors, beggars, or forced child labor in industries such as fishing, mining, or agriculture.

Benin, Burkina Faso, Ghana, Mali, Nigeria, Guinea, Cote d'Ivoire, and Togo are primary source countries for children trafficked for forced domestic labor [18, 20]. In particular, girls from Togo are often trafficked within the country and to neighboring countries such as Benin, Nigeria, Niger, and Gabon for forced labor and prostitution, while the boys are trafficked for labor in plantations in Benin, Nigeria, and Cote d'Ivoire [20]. Children in Senegal, Gambia, Guinea Bissau, and Mali are trafficked for the purposes of labor exploitation, begging, prostitution, and pornography, and are often trafficked to tourist areas in those countries [20].

3   Cultural and Religious Practices That Contribute to Child Trafficking

West African cultures have norms and traditional practices that reflect their values and beliefs, such as respect for authority and elders, generosity, an extended family system, solidarity, tolerance, caring for the needy, sharing, negotiating, discussing, and mediating [26]. Unfortunately, child traffickers are now exploiting some of these norms and practices to convince parents to give up their children for

exploitation. In the following section, we will explore how some of these norms and practices are being exploited.

3.1   Child Fostering

The concept of family and kinship plays a crucial role in West African society, serving as a key social instrument for promoting cohesion, preserving community continuity, and fostering stability. In the West Africa community, the structure of a family extends beyond the nuclear family, encompassing a wide network of relations including spouses, unmarried children, grandparents, uncles, aunts, nephews, nieces, and cousins. The extended family system is responsible for the well-being of its members, including those who have lost their parents. Members share a common identity and support each other, both financially and socially, to ensure the success and prosperity of the whole family [27].

One traditional practice that is commonly observed in West African communities is the "fosterage" of children. This practice involves parents sending their children to live with other members of the extended family or kins households who are more financially stable [28]. This is often done to provide the children with better educational and working opportunities, as well as to provide financial and material support for the family. This practice has been an enduring tradition for centuries and is considered a normal part of child-rearing and socialization in many West African communities [29].

Unfortunately, human traffickers are exploiting the traditional practice of "fosterage" in West Africa by preying on low-income families with false promises of better educational and skill-building opportunities for their children, as well as financial support for the family. Thus, well-intentioned families living in poverty could be deceived into giving their children to relatives, friends, or trusted community members who directly exploit or procure them for someone else. This is made worse by the fact that parents may not question the morality of the people they entrust their children to because of the strong emphasis on family solidarity in West Africa [30]. The United Nations notes that "consent" of the parents should not be considered a legal defense in cases of trafficking, as outlined in Article 3(b) of the Trafficking in Persons Protocol. The UN states that consent is not valid if it is obtained through deceit or if the individual, particularly a child, is unable to give informed consent because of their vulnerable status [31].

3.1.1   Exemplary Case

The following narrative captures the experiences of a trafficked child in Nigeria for domestic service though deception of the parents and child by relatives as documented by Ovuorie [32]:

> Timipriye, a 16-year-old girl, was living in a Nigerian rural village with her parents who were struggling to provide for her and her ten siblings. She and her parents were quick to agree for her to go and live with her uncle and his wife in Lagos (a city), where she would

be taken care of and sent to the university. "With so many promises, I was very, very excited," she says, shyly, telling her story for the first time. "I immediately said I wanted to go with them."

She says what has happened since was different from what she was promised. Instead of attending school, she wakes at 3 a.m., her days passing in a blur of domestic chores and babysitting her uncle's triplets. Once when she did not get out of the car quickly enough, her uncle's wife slammed the car door on her hand. Despite the excruciating pain in her fingers that evening, she still had to wash the triplets' clothes by hand. To add to the horror of Timipriye's life in Lagos, she is sexually abused by her uncle. He barges in on her while she is bathing and enters her room late at night.

3.2   Child Labor as Work Socialization

Across West Africa, it is common practice to encourage children to work at a young age to learn skills, develop a sense of responsibility, and contribute to the family or community. For example, in rural communities, children are expected to assist with farming, herding, or other household tasks from a young age. Parents also encourage their children to work outside the family household as apprentices in a trade or as domestic workers in order to contribute to the family income. Young girls are encouraged to earn and save for their wedding days. In such a situation, girls as young as 10 years old are given out by their parents in rural areas as domestic servants to individuals in urban areas. Sometimes, the employment is arranged by older females who may be related to their parents or a respectful community member. The salary of the girls may be given to those persons, or they may have a percentage of it allocated to them. The employment opportunities in the urban areas offer the girls the opportunity to earn money to buy wedding materials.

These practices inadvertently create a culture of tolerance for child exploitation when children's work is perceived within the context that strenuous work and the ability to endure abuses prepares children to become resilient, productive members of society. Abdullah et al. [33] found that societal expectations of the roles of males and females, the preference for apprenticeship programs over formal education, the asset value of children's contributions to the family, and the emphasis on child obedience were key social norms that precipitated the exploitation of children in West Africa.

3.3   Forced Child Marriage

Although child marriage is prevalent across Africa, its prevalence is greatest in West Africa [34]. Niger tops the list of countries with the highest rate of girl-child marriage in the world, with 75% of girls under age 18 wedded yearly [32, 34]. Other West African countries with high rates include Chad (68%), Guinea (63%), Mali (55%), Burkina Faso (52%), and Senegal (33%) [32]. Many West African communities view marriage as a way to protect their daughters from engaging in premarital sexual activities and pregnancies that can tarnish the daughter's and her family's

honor [35]. However, child marriage has been shown to have significant negative impacts on a girl child's physical growth, health, and mental and emotional development, and it also reinforces a cycle of poverty, perpetuates illiteracy and malnutrition, as well as high infant and maternal mortality rates [36]. In addition, child marriage is increasing the number of girls being exploited for sex and domestic work under the disguise of marriage.

3.3.1   Exemplary Case

The following narratives capture the experiences of children in Niger forced into marriage by their parents as documented by International Center for Research on Women [37]:

> Takia is a 12 years old girl who was married at age 9 in Niger. Her mother died in childbirth. Because of her family's poverty, her father believed the only way to guarantee a secure future for his daughters was to marry them off. She said her father told her she was to be married and never asked how she felt. It was her duty to respect his decision. She is unsure about her husband's age, but a local youth organization estimates he is around 50. The husband waited until Takia was 11 before consummating the marriage. She gave birth to a daughter, Layla, that same year. She would have wanted to wait and find someone she loved. She said it was too late now and preferred not to think about it.

3.4   Religious Beliefs: Oath-Taking, Trokosi Practices, and the Almajiri System

3.4.1   Oath-Taking Practices

From the context of West African customary practices, traditional oath-taking is a key element of native justice systems that predates European contact and the adoption of Christianity and Islam in the region. It has been a mechanism for ensuring law and order in many West African communities for centuries.

The practice involves using words connoting calamity and death to make a formal pledge, stating that the involved individuals will keep to their own part of the agreement, typically accompanied by animal sacrifice and incantations [38, 39]. For example, the Ibibio and Efik people in Nigeria have the Mbiam oath, which leads to the death and destruction of anyone who swore falsely [40]. While the initiation of oath-taking can occur anywhere, there are dedicated templates associated with deities. For centuries, these practices have established fairness and justice by ensuring individuals are keeping to what was agreed on within the communities.

Unfortunately, the practice is now one of the most powerful psychological control mechanisms used by human traffickers to control sex-trafficked victims. The oath-taking ceremony, which a priest performs, is viewed by the trafficked victims as sealing a contract with the traffickers and a pact with the gods that could have negative consequences if not kept [41, 42]. During the oath-taking ceremony, the victims are required to give personal items, such as underpants, saliva, menstrual blood, hair, or fingernail, to the priest to create an object with which the pact will be made [39, 41]. The severity of this immense psychological control of the oath had

been equalized to torture as defined by the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment because it creates a mechanism for perpetual trauma, coercion, threat, and mental control [39]. Thus, it ensures the victims' commitment to paying their debts, silence, obedience, and not to betray their traffickers by cooperating with legal authorities even when they are rescued [39].

3.4.2   Exemplary Case

A participant, who is a victim of human trafficking, in Millett-Barrett's study [39] illustrates the psychological effects of taking an oath through their response.

> … Some take the oath and remain in it forever. If I don't pay my madam, I will die. To stay in camp is a problem. To go out is a problem. One leg in, one leg out. We sit and do nothing and have no way to earn money…If I were to advise a girl from Nigeria, I would not allow her to come to Italy…

Trokosi

Trokosi, or "wives to the gods," is a traditional practice found across Benin, Togo, south-western Nigeria, and the Volta region of Ghana, predominantly among the Ewe tribes [43]. The Trokosi are young girls given by their families to shrines and forced into ritual servitude as reparation to the gods for sins committed by the family [39]. Sins demanding the offering of a virgin girl can range from theft and adultery to rape and murder. Parents believe that they will suffer disease, misfortune, or even a succession of deaths if they do not appease the gods by offering their virgin daughters [44].

The philosophy behind this tradition is based on crime and punishment as communal responsibilities, which means that a person with no direct relation to the crime committed might be offered to appease the gods instead of the culprit. In severe cases, this making of amends can encompass generations of Trokosi girls in one family. Thus, girls as young as nine are taken without their consent and trafficked by their families to live anywhere from 3 years to their entire life in a religious shrine, where they become the slaves, property, and wives of the priest in charge of the shrine [41, 45, 46]. Typically, priests prohibit all Trokosis from attending school and deny them access to any form of health care [44].

Despite the harmfulness of this practice, there are organizations defending it. Afrikania Mission, the most prominent organization defending Trokosi refutes allegations of neglect and violence against Trokosi women, claiming the practice is a "valuable cultural practice" protected under the right to freedom of religion guaranteed in Ghana's Constitution [47]. With an international outcry from human rights activists outcry against the practice, Trokosi was banned by many West African governments such as in Ghana in 1998 [43]. However, it is still being practiced with no single priest or family member being arrested for continuing the practice [41, 48]. This practice likely persists because of deeply entrenched traditional beliefs; therefore, it is unlikely that any legislative prohibition or criminal penalty alone will eliminate it [44].

3.4.3 Exemplary Case

Talbot [49] documented the experience of a former Trokosi, who has adopted the name Patience:

> Patience was brought to Ghana from her home in Togo at the age of ten to compensate for her relatives stealing land that belonged to someone else. Several members of Patience's family died, which led to the fear that they were being punished by the god and needed to offer a Trokosi to make amends. She was forced to leave school and describes a childhood spent farming the priest's land and gathering firewood in the bush. She provided for her own sustenance with what she could find in the bush. Occasionally, the priest would give her small amounts of money, which she saved up to buy soap and other essentials. When she reached puberty, she was given to the priest's brother, who repeatedly beat and raped her. Patience remained with the priest's brother and ultimately gave birth to three children, for whom she was totally responsible. Patience feared spiritual retribution if she were to flee and physical punishment if she were caught. Eventually she summoned her courage and escaped, but was forced to leave her children behind. She ultimately returned after she became ill and believed it was punishment for the escape. Eventually she was liberated, presumably released by the priest because the debt had been satisfied. Unfortunately, the only thing unique about Patience's experience of Trokosi is that she was released. The abuses she describes recur in the stories of numerous other Trokosi women.

Almajiranci System and Forced/Exploitative Begging

The Almajirai system is a religious practice across many West African communities through which young male children are sent to traditional Quranic boarding schools called *daaras* where they live with and acquire free moral and Quranic education from Islamic teachers called *Mallamai* in Nigeria or *Marabouts* in Senegal [50, 51]. The students, some as young as 4 years, are called Almajirai in Nigeria or talibe in Senegal [52]. For the discussion in this section, the words Almajirai and Mallamai will be used hereforth.

The life of the Almajirai is a spiritual journey of nurture and knowledge, guided by their Mallamai [53]. The practice is based on good intentions of having children to be Islamically educated and morally prepared to be good citizens of their communities. Kukah [51] explained that parents handed their children to the Mallamai because they are seen as the repository of knowledge, a pathway, a light, a source of transmission of values so treasured that the search for the essence of Islamic life began with him. Thus, according to Kukah [51], the system is not meant to be a slaving mechanism with the Mallamai as enslavers. While the system is based on religious beliefs, the Qur'anic schools (daaras) could be a kind of solution to financial problems for family living in poverty as they are meant to provide free religious education and livelihood to the students [54].

Factors contributing to the exploitation of the Almajiri include urbanization that has resulted in the loss of farmland owned by the Mallamai who have no other means of feeding the large number of children being placed with them and had lost the support that familiar villages once provided [55]. In 2020, about ten million Nigerian children were in the Almajirai system [51]. In Senegal, it is estimated that there were over 100,000 Almajirai (talibés) in 2019 [56]. The Almajirai live in unsanitary condition, are beaten into submission, punished for trying to run away

and forced to engage in street begging and labor in exchange for food and money to sustain themselves and sometimes their Mallamai [53].

3.4.4 Exemplary Case

Njoku [51] documented a case illustrating the experience the Almajirai:

> In 2018, Muhammed Abdulkadir's father decided to send him away from home for Qur'anic training under a Mallam (Islamic teacher) in Kano (city) which is far from his village. However, when he arrived in Kano, he found himself among hundreds of other children who had lost contact with their homes and families. When he woke up the next morning, he was handed a bowl and told he had to go out and beg for the food he would eat that day. When Muhammed returned to the Almajiri school, Mallam demanded the proceeds of his begging and Muhammed told him that he had eaten the little he had received. The Mallam punished him by making him kneel for hours and warned him not to do that again. Mohammad said that thereafter he always made sure he brought food and money home for his Mallam. Furthermore, he didn't know where he could find his father to tell him what he was going through, and he did not know the road to his village.

4 Political Determinants of Child Trafficking in West Africa

In this section, we will discuss the political determinants influencing child trafficking in West Africa. In the context of child trafficking, the political determinants include the policies and laws for preventing and mitigating the impact.

4.1 Failure to Enforce Anti-trafficking Laws

All West African countries have laws that specifically prohibit the trafficking of children. These include the Transportation of Minors and the Suppression of Child Trafficking Act of 2006 in Benin, which criminalizes all forms of child trafficking [57], and the 2005 Law Related to Child Smuggling in Togo [58]. Burkina Faso has a law from 2014 that prohibits the sale of children, child prostitution, and child pornography [59], while Cote d'Ivoire has the 2010 Law No 2010-272 Pertaining to the Prohibition of Child Trafficking and the Worst Forms of Child Labor, which was the first to provide punishment for trafficking offenses [60]. Nigeria's Trafficking in Persons Law Enforcement and Administration Act of 2003 addresses and condemns all forms of trafficking [61]. However, in many of these same countries, laws prohibiting child trafficking are not consistently enforced.

This divergence between the adoption of laws and a nation's ability or willingness to enforce them connotes a failure on the part of the state to protect its children. Blanton et al. [62] posit that the intractability of child trafficking is linked to the lack of requisite state capacity by West African nations. Broadly, state capacity represents the ability of a nation to successfully govern its society and implement policies and initiatives within its borders. While individuals may carry out child trafficking, their ability to do so results from multiple "governance failures" of the state to provide the necessary resources and law enforcement to protect its most vulnerable citizens

([54], p. 473). While these failures may reflect a lack of political will, many well-intentioned West African nations lack the fiscal capacity, independent judiciary, and impartial legal systems needed to disrupt child trafficking within and across their borders.

4.2   Civil Unrest, Armed Conflicts

Armed conflicts and civil/political unrest have caused internal and regional insecurity, resulting in the displacement and turmoil of West African populations. There has been five successful coups between 2020 and 2022 in Burkina Faso, Chad, Guinea, Mali, and Sudan [63]. The political unrest in Mali, and Guinea have been reported to serve as opportunities for child traffickers who take advantage of the chaos to adopt, lure, and smuggle children [64, 65]. Also, the Boko Haram insurgency has created opportunities for human traffickers. Boko Haram, in the northern part Nigeria, provides opportunities for human traffickers to lure the Boko Haram survivors to travel to the eastern part of Nigeria in search of jobs, only to end up as trafficked victims [23].

4.3   Corruption

Corruption and child trafficking are often interconnected in West Africa and can exacerbate one another. Corruption facilitates child trafficking by allowing traffickers to bribe officials or to obtain false documents needed to move children across regional borders. Corruption can also make it more difficult to prosecute traffickers or to provide support and assistance to victims of trafficking. In turn, child trafficking contributes to corruption by providing a source of illicit income for those who engage directly or indirectly in the trade.

Several factors contribute to the dual social menaces of corruption and child trafficking in West Africa. As noted in the introduction, West Africa is notorious for border permeability between nation states, making the influx of transnational criminal networks and related actors rampant in the region [56]. Links involving transnational criminal syndicates and trafficking networks within the West African sub-region have become increasingly sophisticated and continue to thrive, with several major cities and towns—such as Benin City in Southern Nigeria—dubbed as notorious trafficking hubs [20]. Traffickers have mastered the art of maneuvering the region's borders either through the numerous illegal routes or with the assistance of border guards who are usually technically and professionally ill-prepared for their role in maintaining security [66].

Poverty and economic inequality also contribute to corruption and child trafficking [15, 19]. For example, individuals and families struggling to make ends meet may be more likely to participate in unprincipled behavior. There may be a sense of frustration and resentment among those who feel they are not getting a fair share of resources or opportunities. Inequality may also act as a barrier to accessing justice

or holding unscrupulous religious and government leaders, employers, and traffickers accountable [67]. This cultivates a culture of impunity in which corruption and trafficking can thrive. Inequality also creates social divisions that make it more difficult to build the consensus needed to address corruption and other problems. Addressing corruption in West Africa will require a combination of efforts to strengthen governance and accountability, promote economic development, reduce inequality, and change cultural and social norms that contribute to corrupt behavior.

5   Ending Child Trafficking Through Justice in State-Society Relations

In state-society relations, justice refers to the fair and impartial treatment of individuals and groups within a society by the state and its institutions. It encompasses the idea that all individuals are entitled to certain rights and protections under the law and that the state is responsible for ensuring that these rights are upheld and that individuals are treated fairly. This includes the fair and impartial administration of justice in the criminal justice system, where individuals who are accused of crimes are afforded due process and a fair trial. It also includes the idea that the state should ensure that all citizens have access to basic necessities, such as food, shelter, education, and healthcare, and that it should provide a safety net for those who are unable to meet their basic needs through no fault of their own.

Justice in state-society relations can also encompass the idea that the state should work to promote the fair distribution of resources and opportunities within society. This can include efforts to address issues such as poverty, inequities, disability, and social exclusion or marginalization. The non-existent welfare support system in most West African countries makes it difficult for parents to adequately meet the economic and welfare needs of their families [68]. The result of these poor economic conditions is that parents are compelled to either offer their children for educational or apprenticeship opportunity, or to exchange them for debts to traffickers to pay back debts in their attempts to escape poverty [2, 17]. The goal of justice in state-society relations is for all citizens, including children, to have an equitable opportunity to reach their full potential and live fulfilling lives.

Justice in state-society relations that focuses on children includes their rights as outlined in the United Nations Convention on the Rights of the Child [69]: the right to survival, development, protection, and participation. In practice, this can involve a range of measures, including:

- Ensuring that children have access to quality education and healthcare.
- Protecting children from abuse, neglect, and exploitation.
- Providing support and services to children in need, including those who live in poverty, have disabilities, or have experienced trauma.
- Enforcing laws and policies that protect children's rights, including those related to child labor, child marriage, and child trafficking.
- Involving children in decision-making processes that affect them and ensuring that their voices are heard and they provide assent about their lives.

The 15 member states of the Economic Community of West African States (ECOWAS) have ratified the UN Convention on the Rights of the Child [69] and the African Charter in the Rights and Welfare of the Child [70]. In 2008, ECOWAS developed West Africa's first Child Policy and Strategic Action Plan for 2009–2013 [71]. The policy was updated in 2018 to protect and promote children's rights across the region. The objective of the Child Policy (2019–2030) is to assist ECOWAS Member States in creating state-society relations conducive to child survival, development, protection, and participation across the entire region. Survival rights include the child's right to life and the needs that are most basic to existence, such as nutrition, shelter, the quality of childcare, an adequate living standard, access to medical services, and the prevention and management of the major childhood illnesses. Development rights focus on the rights of the child to develop to her or his full potential. This requires adequate care and stimulation in early childhood, universal access to quality education at all levels, vocational training, and a well-charted transition through adolescence to early adulthood. Child Protection is concerned with the prevention and response to situations of violence, abuse, and exploitation of children. It is focused on strengthening the protective environment of children and takes account of key societal and systemic pillars relevant to child well-being. Participation rights are centered around the child's rights of freedom of expression, thought, religion, conscience, and association as well as rights to express their views, wishes, and opinion on issues concerning them depending on children's evolving capacity.

The policy offers six goals for achieving children's rights across west Africa by 2030 ([71], pp. 7, 8):

Goal statement 1: Children of all ages in the region live healthy lives and enjoy total well-being (survival)

Goal statement 2: Every child enjoys the right to intellectual, emotional, and psycho motor development and care from the early years until adulthood, as well as equal opportunities to inclusive quality education, leisure, and recreation (development)

Goal statement 3: Every child is protected from all forms of violence, abuse, and exploitation and has access to prevention and response services (Protection)

Goal statement 4: Children's voices are amplified by enabling platforms for self-expression and participation in decisions on matters affecting children, taking into account their diverse ages and evolving capacity (Participation)

Goal statement 5: Revenue mobilized and budget allocated to implement the ECOWAS Child Policy and the Plan of Action at the regional, state, and local levels is commensurate with the priority accorded child right issues

Goal statement 6: The ECOWAS Child Policy and Plan of Action effectively implemented through regional level support to Member States

These initiatives demonstrate that West African states are sincere in addressing child trafficking from a preventive strategy rather than previously prioritized reactive policies [15, 72]. Successful implementation of a preventive strategy will require addressing socio-economic and socio-political issues of West Africans, addressing insecurity, and focusing on rural orientation strategies aimed at

enlightening people on the phenomenon and dangers of child trafficking [17]. Building state capacities for addressing these issues are key to the success of preventive measures that will put the region in a position to adequately address child trafficking. Unfortunately, evidence suggests that most West African nations continue to experience profound economic and political challenges that undermine their best intentions [19, 62]. We close this chapter with four recommendations for long-term, preventive solutions to child trafficking in West Africa that are at once complex and imperative:

1. Enacting domestic legislation to prioritize the government's duty to uphold the law and protect its children from all forms of harm and violation of their human rights. Coordination in the enforcement of these laws and policies will require delegating various duties to relevant law enforcement divisions or units, supplemented by adequate training in anti-trafficking operative measures
2. Coordinated and joint efforts by border guards of member states to consistently and legally reinforce border security and control as it relates to the transport and migration of children across national borders
3. Governments, in collaboration with international nongovernmental organizations (NGOs), need to develop and implement robust and supportive outreach, early warning, and awareness programs for communities that are susceptible to and at risk of child trafficking. Governments should position themselves to "own" and continue these programs as long as they are needed
4. Governments should provide basic amenities needed for daily survival, which all children in at-risk communities lacked [17]

6   Summary

This chapter explored the cultural, economic, and political determinants of child trafficking in West Africa. The combined forces of extreme poverty, political instability, corruption, and the uncritical acceptance of cultural norms work synergistically to sustain and increase child trafficking across the region. International, regional, and state policies and laws to address child trafficking are well intentioned, but if they are not consistently implemented and enforced, the region's children will continue to be exploited. We argue that the solution to this menace lies in justice in state-society relations. Partnerships between international NGOs and West African nation states are necessary short- and medium-term actions to identify and support the victims of child trafficking. However, only justice in state-society relations will provide the long-term economic, education, health, and social support systems needed to secure the well-being of West Africa's children. As part of the global community, we should not emerge from a focus on child trafficking in West Africa feeling good about how much better other regions are doing on this issue but awake to and engage the ongoing systemic injustices that lead to the ultimate dehumanization and commodification of children.

Discussion Questions

- Social norms are an unwritten set of rules that tell us how we should behave and what we should do. Why do we follow them, and why should we? Are you willing to give up your beliefs and values to meet society's expectations?
- Many parents in Ghana believe they are giving their children up for a better life as fishermen falsely promise to send their children to school or to teach them the fishing trade. What social, cultural, and economic factors might drive a parent to make the decision to give up or sell their child? If poverty is identified as a root cause or contributing factor to children being relinquished or sold by their parents—which makes them vulnerable to exploitation and child trafficking—how might anti-trafficking awareness campaigns address the issue of poverty?
- There is no one consistent face of a trafficker. Both men and women commit trafficking crimes. Traffickers include a wide range of criminal operators, including individuals, small families or businesses, loose-knit decentralized criminal networks, and internationally organized criminal syndicates. Identify and discuss some potential trafficking "hot zones" in your community (hotels, malls, massage parlors, farm labor, etc.).
- What factors do you think contribute to the rise of human trafficking in West Africa?
- How can education help in the fight against child trafficking in West Africa? Discuss why this is a less popular option than learning a trade or inheriting the family agricultural or fishing business in the rural areas of West Africa.
- The odds are substantial that a chocolate bar bought in many Western countries is the product of child labor in West Africa. Discuss how and why chocolate manufacturers may knowingly or unknowingly use child labor in their supply chains. What can they do to ensure that child laborers are not involved in harvesting their source of cocoa? What actions can we take as consumers to end this exploitation of children?
- In small groups, select a country within the region of West Africa and discuss the status of its state-society relationship. How could it improve? What do you see as the major obstacle to this improvement? In larger groups, compare the assessments of different countries across the region, as they impact child trafficking in each country.

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Part V

Research

State of the Art of Research on Human Trafficking

Amy Roach, Bonnie Bowie, and Mary de Chesnay

1 Sex Trafficking

Sex trafficking is identified as the leading type of human trafficking globally and the most researched as opposed to other forms of trafficking such as forced labor or organ trafficking [1]. Sex trafficking is defined as a commercial sex act that is forced or prompted by fraud or coercion, or if the act is forced onto a child [2]. The current published systematic review literature on sex trafficking identified similar themes in the research such as serious health outcomes, poor access to medical care and other supportive services, and inadequate legal and medical policies and protocols.

Gender. Most of the sex trafficking research published focuses on women, followed by children, then a small percentage focuses on men [3–5]. The frequency of studies focusing on female victims leads to a gap in evaluating the male victim experience.

Health Outcomes. There is a significant amount of research that is focused on the physical and mental health outcomes of trafficking survivors [1]. However, the methods used by many of these studies lack validity and reliability along with neglecting other facets of one's person, such as their sexual, spiritual, and social health needs [1]. Armstrong and Greenbaum found through their systematic review many victims sought care for a variety of reasons, including reproductive concerns, violence-related issues, and chronic disease management [2].

Many victims experienced significant physical symptoms after being trafficked, including injuries, malnutrition, varied aches and pains, and insomnia. Additionally,

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there were reports of reproductive issues, including pregnancy, forced abortions, sexual assault and violence, and sexually transmitted infections [6].

Additionally, Talbott et al. found very little is taught in medical or health care curricula to prepare professionals to care for trafficked patients [6]. There is also a lack of resources to guide practice in assessing and treating these victims. This educational and practice gap leaves health care professionals unprepared and patients without quality and informed care.

Prevalence of mental health problems. When investigating psychosocial outcomes and resources, the research focus has been mainly on children, leading to a gap in understanding how adult survivors cope and utilize mental health care after being trafficked [7]. Interestingly, Casassa, Knight, and Mengo identified in their scoping review that victims can become trauma bonded to their traffickers [8]. This bond occurs due to the complexities of the relationship. Many victims have poor familial relationships or a history of abuse, which leave them with feelings of gratitude or love for the trafficker who "rescued" them. Traffickers use this vulnerability to manipulate the victim, which includes techniques such as isolation, violence, and alternative behaviors of kindness and abuse to gain control [8]. To move forward, victims need to break this trauma bond for healing, yet there is no research on adequate interventions for this endeavor. Therefore, this is a gap in the literature that should be addressed to help victims become survivors of sex trafficking.

Moreover, substance abuse was identified as one of the leading risk factors for individuals being trafficked [2, 9]. Once they enter sex trafficking, drugs and alcohol were found to be coping mechanisms among victims [2]. Along with substance abuse, Talbott et al. identified high incidences of posttraumatic stress disorder (PTSD) and depression among sex trafficking survivors [6].

Prevention. There were significant findings in the published literature that policies, both on a macro- and micro-level, need to be robust and implemented more effectively [5, 7]. This includes researchers identifying root causes or risk factors in victims, such as poverty, poor family relations, and substance abuse [3, 4, 7, 9]. Haney et al. found the United States (U. S.) anti-trafficking policies are widely varied [9]. It is important to streamline a national policy on anti-trafficking to better identify, respond to, and control human trafficking cases [9]. Additionally, Okech et al. identified the need for better collaboration between stakeholders and policymakers to effectively address anti-trafficking initiatives that provide support to victims while punishing offenders. The lack of legal ramifications toward traffickers is a continual problem, leading to a further increase in human trafficking incidences [7].

Upon review, Armstrong and Greenbaum found little evidence of human trafficking response protocols within the hospital setting, which is where many trafficking victims could be identified and rescued [2]. They recommend a formal screening process to identify and assist victims. Moreover, Talbott et al. found a lack of competency among health care providers related to referral services needed for sex trafficking victims. They recommend a collaborative and multi-disciplinary approach to meet the holistic needs of survivors [6].

Methodological issues. Overall, there is a lack of empirical data in all aspects of human trafficking research, with most studies utilizing qualitative measures [3, 5, 7]. With this deficiency of data, there is a lack of rigorous experimental designs, and many researchers utilize semi-structured interviews to gather data [3, 7]. Furthermore, there is a need for validated scales and more intervention-based studies to create an impact in sex trafficking research [3]. Since many survivors will need a multi-prong approach to recovery and rehabilitation, it is recommended that researchers work in interdisciplinary teams [7].

Barrick & Pfeffer identified in their scoping review that the measurement of sex trafficking prevalence is widely varied, and researchers use inadequate methods. They recommend studying trafficking prevalence at micro-levels, by focusing on small sections of the population in specific geographical regions. This will improve the ability to assess prevalence [10].

Future directions. To meet the needs holistically of trafficked survivors, it is important to develop and implement robust policies to ensure victims are not criminalized, and offenders face consequences for their crimes [4, 9]. Additionally, since many survivors leave trafficking with physical and mental health issues, health care curricula need to address this content in both informal and formal ways to improve care [6]. Similarly, Graham et al. identified the need for improved abilities to assess and treat survivors, strategies to improve coping skills, and substance abuse treatment [1]. They also recommended a standardized intake assessment to holistically meet the needs of the patient.

2   Forced Labor

Forced labor, or labor trafficking, is defined as a person unable to freely leave their work or are recruited to work by force, fraud, or coercion. Additionally, debt bondage can be involved and is trifold: the victim has a debt to pay off, they cannot repay the debt, and they cannot leave freely because of this debt [11]. While this is a formal definition of this type of human trafficking, it has been proven difficult to identify and control labor trafficking for law enforcement due to the legal and employment nuances [12].

Gender. Overall, men are most affected by labor trafficking due to the nature of the labor, which is often in agriculture, mining, construction, and manufacturing [13, 14]. Migration can also influence an uptick in forced labor, as men seek financial support to enter affluent countries, such as the US [15]. There are very few articles investigating female involvement in labor trafficking, such as domestic servitude [5].

Health Outcomes. Within forced labor, health problems are common and include factors that affect a person's health from all facets, including occupational, environmental, and social determinants of health [11]. Those in the mining industry are at risk for exposure to hazardous chemicals and dust, lack safety training which can lead to accidents, and experience common illnesses including mosquito-borne or diarrheal diseases from standing water or poor sanitation [11]. Those in the fishing industry are at risk for exposure to severe weather at sea, accidents, and

health conditions like hypertension and mental health illnesses [15]. In combination with these health outcomes, forced laborers have poor access to quality water, food, and medical care [11, 15].

Similarly, Cockbain et al. found that labor trafficking victims were controlled violently or through isolation by traffickers and lived and worked in unsafe and poor conditions [13]. There were reports of aches and pains associated with the victims' work as well as high incidences of mental health disorders, such as depression, anxiety, and post-traumatic stress [13]. Victims also had poor or inadequate access to support and health services.

Methodological issues. When exploring forced labor in the fishing industry, Pocock et al. found that several researchers did not report ethical approval, were unclear in their analysis whether it was qualitative or quantitative, and reported findings that were difficult to interpret [15]. Furthermore, there are very limited publications on forced labor that include scientific data with most reporting anecdotal evidence [13]. Similar to Pocock et al., Cockbain et al. found there was a lack of methodological transparency and poor analytical rigor in much of the published literature. Additionally, studies were mostly descriptive or exploratory in nature with non-random sampling techniques.

Future directions. For future research endeavors, there needs to be an exploration of women, domestic servitude, and children in forced labor [5, 11]. Additionally, studies need to be transparent in their methodology and report accurate and precise data. There needs to be adequately defined laws and statutes on labor trafficking along with formal policies for law enforcement when apprehending traffickers and assisting victims [7, 12]. Lastly, consumers can verify products are made or resourced through slavery-free avenues which will lead to a decrease in the demand for forced labor [7].

3   Organ Trafficking

Organ trafficking is a type of human trafficking that involves the recruitment, transport, or receipt of organs from vulnerable persons using force, abduction, or abuse of power and is received by individuals with the means to pay for the organ [16]. Individuals may be trafficked for their organs due to the vulnerability of financial insecurity or without one's consent. The impetus for organ trafficking is the lack of supply versus demand and is fueled by individuals in health crises needing organ transplantation and having the means to purchase one [16, 17].

Human morbidity and mortality have increased significantly regarding cardiovascular disease, kidney disease, and diabetes, thereby making the need for organ transplantation greater [17]. The World Health Organization has estimated around 10,000 kidneys have been trafficked as this organ is the most frequently desired. However, other organs that can be trafficked include the heart, lungs, liver, and pancreas along with human tissue [17].

Health Outcomes. Very little in the available research identifies concrete health outcomes related to a victim being trafficked for their organs. Most literature states

death or other severe health consequences occur to the victims, which could be interpreted as infections or disability from poor surgical technique or a lack of postoperative care [16]. However, this information in the systematic review literature is not detailed and does not outline the mental health implications for a victim of organ trafficking or their surviving family.

Methodological issues. There is limited published literature on organ trafficking and its real impact on vulnerable communities. However, the literature that is published is more often found in medical and anthropological journals [5, 18]. There is a significant gap in published research within the social sciences and humanities [18]. Additionally, much of this research originates in Western countries, such as the US or the United Kingdom (UK), which are more affluent. An understanding of the trade in poorer countries is lacking despite these areas being the most vulnerable to organ trafficking. Also, Columb's review of the published literature found that much of what is available is anecdotal, lacking in evidence-based studies with quantifiable and reliable data on the incidence and impact of organ trafficking [17].

Prevention. Columb argues that better investment in primary care would decrease the demand for an illegal organ trade due to individuals not requiring a last-resort treatment such as organ transplantation [17]. Additionally, more robust legal ramifications and evidence related to organ trafficking could further prevent these crimes.

Future directions. To impact a decrease in organ trafficking, it is imperative to utilize research methods that will obtain evidence-based and quantitative data. This data can be used to impact legal repercussions for traffickers as well as better support victims of organ trafficking. Additionally, more information needs to be gathered from poorer, more vulnerable countries, outside affluent, Western countries. For instance, research projects based in countries located in South America or Africa where vulnerability is high and formalized transplant services are low [17].

4   Child Marriage

Child marriages are defined as those marriages that occur when one partner is less than 18 years old. The prevalence of child marriages is difficult to estimate as children may be removed by parents or guardians from their current country of residence to be married in another country, thus making record tracking more difficult [19]. In addition, self-report of age at the time of marriage may not be accurate and underestimate the prevalence [20] Estimates of child marriage vary across countries but have been reported as high as 12 million girls annually, with the highest prevalence in sub-Saharan Africa [19]. Over the past decade, three major systematic reviews have been performed examining the literature on different aspects of child marriage.

Health Outcomes. In their systematic review of the literature on the health consequences of child marriage, Fan and Koski identified six major areas of possible adverse health outcomes related to child marriage: (1) births—timing, birth intervals,

or unwanted pregnancies; (2) contraceptive use; (3) use of maternal health care; (4) intimate partner violence; (5) mental health; and (6) nutritional status [21]. Women who are married before the age of 18 are more likely to give birth before the age of 18 when compared with their peers. Studies regarding birth intervals among child brides were mixed; some studies have reported an increase in a less than 2-year birth interval and others found no difference. Similarly, there were mixed results across studies examining unwanted pregnancies among child brides. Concerning the use of contraceptives, Fan and Koski found that results varied by country. Studies based in Africa found that child marriage was associated with lower use of contraception; however, in India and Bangladesh, the likelihood of using contraception increased among child brides [21]. With regard to maternal health care, child brides in Pakistan, Nepal, and India were less likely to receive prenatal or postpartum care, and all studies reported that child marriage decreased the likelihood of delivering in a health care facility. All studies found that child marriage was associated with increased physical and emotional violence. Consistently across the reviewed studies were the increased likelihood of depressive symptoms, anxiety, and overall decreased psychological well-being. Results from studies that examined the effect of child marriage on nutritional status were mixed, some noting it could lead to vitamin deficiencies while others reported increased nutritional status with pregnancy [21].

Prevention. A systematic review of interventions to prevent child marriage revealed 6 studies out of 11 had a positive impact on decreasing child marriages following a community intervention [20]. Successful interventions included economic incentives to remain in school or a life skills curriculum. Interestingly, study sites were geographically diverse and located in Columbia, Mexico, Zimbabwe, and India. In general, efforts to keep children in school were associated with decreased child marriage.

Future directions. In their systematic review of gaps in research around child marriage, Siddiqi and Greene note that while greater attention has been given to studying the prevalence and consequences of child marriage over the past two decades, more emphasis needs to be placed on evidence-based interventions going forward [22]. While the United Nations has included a goal to eliminate child marriage by 2030 in the Sustainable Development document, rates of child marriage have not decreased substantially [23]. What is needed now is the development and implementation of culturally relevant interventions targeted in those areas and countries with the highest prevalence. In addition, the authors recommend more sharing of knowledge around child marriage across a variety of languages. Child marriage is a global problem, and the sharing of knowledge across countries could enhance the goal of eradicating this practice.

Methodological issues. As mentioned previously, this population can be difficult to reach. Child marriage is illegal in many countries and typically, subjects are the age of majority and/or out of the marriage when interviewed. Other methodological issues include a lack of longitudinal studies, large variation in study approaches, particularly by country, and self-reported age by subjects that may be inaccurate.

5   Child Soldiers

Child soldiers are children under 18 years old who have typically been coerced or abducted and forced to join the armed forces. In 2017, the United Nations Office for the Coordination of Humanitarian Affairs estimated that at least 300,000 children were believed to be serving as soldiers in armed conflicts across the globe [24]. Reviews of the literature on research related to child soldiers are sorely lacking and not recent. However, the seminal paper by Betancourt et al. categorized their findings from 14 observational studies, 5 interventional studies, and 2 prospective studies into a systematic review of the psychosocial adjustment and mental health of child soldiers [25].

Gender. Surprisingly, across the included studies, females comprised 30% of the participants. Former female child soldiers reported a higher severity of psychosocial problems than males across those studies that included gender as a variable. Three studies found that girls were more at risk for long-term mental health effects than boys after their experiences as child soldiers. However, the female gender could also be a positive moderating factor in responding to mental health interventions [25].

Prevalence of mental health problems and protective factors. Not surprisingly, PTSD rates were higher across all studies when compared to control groups. In addition, longitudinal studies reported elevated levels of depression, anxiety, and hostility. The measurement of mental health problems varied widely across studies with 10 studies utilizing validated measurements.

Most child soldiers experience some stigma around their former soldier status upon returning to their community. However, when child soldiers experience a higher level of family acceptance, mental health outcomes were generally better. Similarly, when former child soldiers experience social support and community acceptance, their psychosocial adjustment was better than their counterparts [25].

Methodological issues. Similar to other areas of trafficking, most studies are cross-sectional and frequently lack strong control or comparison groups. Many studies understandably utilize convenience sampling and, as a result, samples may be homogeneous. Thus, it is difficult to estimate the prevalence of mental health issues among former child soldiers. Many of the studies did not use strong sampling designs or comparison groups, making generalizing results difficult. In addition, many of the studies reviewed used measures to assess mental health symptoms expressed in higher resource or Western countries [25].

Future directions. Betancourt et al. recommend utilizing more mixed methods and longitudinal designs with this population [25]. In addition, refrain from making assumptions regarding the mental health problems among former child soldiers to avoid utilizing measures that are too narrow. Employing more participatory research approaches and locally defined research priorities could yield intervention approaches and priorities that serve the local community and those most affected by child soldiering.

6 Infant Trafficking

Infant trafficking, or black-market babies, encompasses the illegal selling of infants for adoption or for other purposes, such as child labor. To date, there are no published systematic reviews on research regarding infant trafficking. Most articles focus on Nigeria and infant trafficking. Salihu and Chutiyam described trends in baby trafficking in Nigeria; however, their review focuses predominantly on prevalence and location [26]. The dearth of information in the literature is not surprising as the practice is illegal across most countries, and thus, highly secretive. Factors that have contributed to the rise in infant trafficking are increased rates of infertility and lack of job opportunities, poverty, and loss of hope in countries such as Nigeria [26]. These variables have led to an increase in "baby factories" across Nigeria and Western Africa [27].

Methodological issues. The published literature on infant trafficking is predominantly anecdotal and/or observational. In addition, while there are possible adverse effects for infants, the abuse of surrogate mothers has not been adequately studied. Makinde et al. report that underage girls are often deceived, abducted, and then impregnated by their captors to produce infants for the black market [28]. These mothers may experience physical, psychological, and sexual violence, and the long-term effect on these underage girls is largely unknown. Some qualitative studies have documented anxiety, depression, PTSD, and addiction; however, larger studies are lacking [29, 30].

Future directions. What is most needed in this area is prevention research around educational interventions for young girls at risk in countries such as Nigeria. Longitudinal research on the long-term effects of abduction and/or coercion of surrogate mothers is also sorely lacking in the literature and should be included in future studies.

7 Summary

This chapter has been a discussion of the state of the art of research in human trafficking via the analysis of recent systematic reviews on the six forms of trafficking discussed in this book. While many studies are currently being performed on aspects of the broad topic, it seems clear that methodological issues, access to samples, and focus from different disciplines do not yet present a cogent understanding of how to decrease one's vulnerability to be trafficked. However, there is hope in the talents and commitment of many people globally who are dedicating their time, energy, and resources to address human trafficking as a global epidemic.

Discussion Questions
- Compare and contrast the research questions asked and methods used in your discipline.
- Identify methodological issues within published human trafficking research.
- Describe strategies that can be used to enhance human trafficking research.

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Building Evidence in Mixed-Race Vulnerabilities

Shiphrah Williams-Evans and Anicia Cross-Robinson

1 Introduction

A vulnerable population is a group of people more likely to experience health disparities due to their social or economic position, or their race, ethnicity, gender, or age. These individuals may also be affected by the physical or mental disabilities or lack of access to basic education and healthcare. This chapter will begin to build evidence through review of case studies of one vulnerable population that have not been widely studied in the literature: Mixed-race persons of African American heritage.

This group of mixed individuals have also been termed "mulatto" "biracial," "mixed" "colored," "high yellow," "red boned," "Negrito with the good hair," and other derogatory terms throughout history [1]. The complexity of "mixed race" or "Mulatto" individuals has been an issue since the "one drop rule" was put in place. This rule states that if one is even a drop of black, they are considered black. The challenges to this population have not been adequately addressed in the literature and seem to be invisible to the body of evidence in vulnerable populations. Case studies will be presented and reviewed to present this population's unique health care needs and vulnerabilities.

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2 Terminology

Mixed-race persons of African American heritage—individuals who have at least ¼ African American heritage and ¼ Caucasian ancestry. May have other ancestry such as Latino, Asian, or other.

Social determinants of health (SDOH)—conditions in which people are born, grow, live, work, and age.

High yellow—fair skinned person of African American ancestry.

Red boned—fair skinned person of African American ancestry.

3 History

Just as in the African American history, individuals of mixed race have been tormented by laws that prevent them from being recognized [2]. It was not until January 26, 1967 that it was legal for Blacks and White to marry. Mildred and Richard Loving were married in Virginia June, 1958, and it took them until January 26, 1967 to be recognize in that state as man and wife. They were initially given a one-year prison sentence; however, a judge gave them the opportunity to leave Virginia or spend one year in jail. They chose to leave the state and was eventually able to engage civil liberties attorney to represent their case, winning in the Supreme Court in 1967. Prior to that time, mixed-race couples would not get legally married. The Black female would serve as a live-in maid in the home. The Black male would serve as the live-in butler or hired hand. Even after the breakthrough from the 1967 Loving v. Virginia case which formally allowed interracial marriages, many still struggled and lived with fears in their homes due to the social construct of race which has been the cornerstone of our society, shaping our education and government, legal systems, and even our care.

The effect of racism and discrimination against minorities particularly African Americans can have serious implications on their mental health. This is especially true for mixed-race children, as they are often caught between two identities and can face severe disparities when it comes to resources and opportunities. With evidence from the census, it is clear that there is still a lot of violence against minorities and mixed-race individuals as well as lack of understanding and recognition of their existence. It is time to reexamine the way we review race and ethnicity and to recognize the complexity of it. We must strive to create a society where everyone is accepted and respected. Only then can we begin to acknowledge and address the disparities that exist between people of different races. The writers will be interviewing individuals of mixed race to get their firsthand view of their experiences as well as leveraging the small amount of evidence that is available.

4   A Struggle for Identity: The Mixed-Race Experience

A great deal of evidence has been gathered from case studies and empirical studies of mixed-race experiences. According to the 2020 census [3], there were over eight million people who identified themselves as mixed race, compared to the 5.5 million reported in the 2010 census. This growth in population points to the importance of understanding the implications of mixed race in today's society.

In a world where there is a growing divide between those of different races and color, it can be extremely difficult to be part of two cultures. For those who are part of mixed race they often face discrimination and prejudice from both sides. The story follows the struggles of persons of mixed race exploring their journey of identity, trauma, and freedom.

Mixed-race people have always been vulnerable to unique challenges and struggles, both physical and mental, that have serious implications for society at large and have had a serious impact on individuals and communities. This has been evidenced through trauma, identity failure, and even abuse—racism on both sides of the divide that does not allow them to easily belong. Fears, disparities, and even two census data points—the 2020 census and the 2010 census—highlight the anger, guilt, and shame that is ever-present in this struggle. The data from the census also reveals that there are significant disparities in health, education, and other indicators between the two groups.

Case Study 1
Adia is a 29-year-old female who was born to an African American father and a Caucasian mother. She was the first born of three children. She states she did okay with her mixed heritage until she started school. Children wanted to know "what" she was…Mexican, Indian? She asked her parents why they were asking; they glazed over the topic. She really never thought that her questions were answered. Her mother did not work, so she was the parent that the children and teachers saw. It seemed not to make much of a difference. Then one day her father was the parent who picked her up from school. The children in her class saw this and there were mixed responses to how they reacted. "Oh, I didn't know your daddy was black?" "So, you half black, I thought you were Mexican?" "She's a nigga," "I thought she was one of us." She says she began to feel ostracized. She was no longer included in some groups that she had taken for granted. She was bullied and called names by some. The Black children felt she wanted to be White, so they did not include her either. She began to eat when she felt stressed or said. She did not share her feelings with her parents. She stated she did once, and her father became so enraged it scared her. She felt responsible for his anger. She admits that she did want to be White because they were the ones with the power. They were treated "good," and the Black kids had to fight for any recognition. She did not want to be treated like a Black child. She was told by some teachers she had to identify as Black whenever forms called for race to be documented. She recalls her mother going to school to fight for her right to self-identify as wanted. Teachers then started to look at her "funny." She felt as if she was starting a war. By the time she was in the ninth grade, she was 5′9″

and weighed greater than 220 pounds. Now she was being bullied not only for being Black, but for being fat. She could not take it, so her parents allowed her to quit school in the tenth grade. She feels the only reason was that she could no longer hide her depression. She was suicidal. She did not want to live. She hated herself. She hated being black and white. She just wanted to become normal. Her best friend was a Black girl who was dark skinned. She could talk to her and tell her how she felt. Her friend continually gave her positive affirmations. However, she could not make herself return to school. She became pregnant at the age of 15. She has been married to two white males and is the mother of seven beautiful children. She has a low tolerance for people who discount others based on race and for people with insensitivity to others and accept stereotypes. She continues to struggle with her weight and the pattern of eating. She feels issues of mixed-race center around health disparity that threatens mental health and cultural bias that can lead to self-hatred, suicidal, and homicidal thoughts. She states she not only had thoughts of killing herself, but she wanted those who taunted and made her feel less that a person to die. She even kept awake at night imagining how she might kill them or harm them in some way. Her thoughts were consuming. She had panic attacks that started in middle school and still bother her today intermittently. She felt the need to protect her parents from the anger and disrespect of others. The father of her first child (African American ancestry), who was deceased by age 18 (killed by police) tried to lure her into prostitution. He was a part of a street gang.

Case Study 2

Seth is a 40 year of male who was born to a White father and African America mother. He states that he felt he did not want his father to come around when he was with his Black friends, and he did not want his mother to come around when he was with his White Friends. He says there were too many questions? He felt ill equipped to answer questions and became angry because to him race was not important, and he did not want to be questioned about it. He says he was full of rage. He was bullied constantly and called names throughout school, and he told no one. One night when his mother was going through his notebook, she found a picture he had drawn of a person sitting behind another person. The person in the back was holding a gun to the head of the person in front of him and there were sparks drawn as if the gun had just been fired. His mother quickly shown it to his father, and they all cried. His parents did not realize that he was being traumatized by others. He told his mom that the picture was one of the biggest bullies in the school. He stated that the child with the gun pointed to his head had just threaten to "kick his ass" if he touched another child. He played football, and the guys often played around, and touch was natural among teammates. However, this bully saw him as Black, and Blacks were not supposed to touch Whites. He stated in one of his classes where he was the only mixed children, when it was time for discussion he would try to talk and children in the class would drown out his conversation by making loud noises every time he tried to speak. He stated the teacher allowed this to happened. He never spoke of this to his parents until his mother found the picture that he had drawn. He stated one night he was talking on the phone to a female in his school, and he put the phone on

speaker and his mother heard the girls' father calling him a nigger and forbidding her to have any contact with her. Stating, "first they will try to be your friend and then they will be trying to date you and marry you, I'm not having my daughter married to no nigga." He states these times of incidence repeatedly happened. This made him feel unworthy, alone, and less than. Not everyone treated him this way. In fact, some befriended him, and some would be friendly if no one else was around. He was not invited to many parties, and there were no Black girls in the school to date. He was brown skinned, not fair skinned, and he felt this made it harder for him to fit in. He recalls that he felt very depressed and once came out of his room with his belt around his neck and told his mother that he wanted to kill himself. He says that some customs that he had within the Black part of his family were bizarre to others and he stated that some foods he ate strange to others. Sometimes stereotypes like fried chicken and watermelon jokes were told; or two white guys would give each other a high five and state "what's up my nigga!" in front of him. He would ignore them, but he would become more and more angry. When he told his parents they became angry, so he began to tell them less and less. He was taking responsibility for their behavior and blaming himself for their anger. He also felt the need to protect his Black mother from White rage and disrespect. He stated he was once offered a job as a model by a man he met that stated he was from New York. Instead, it turned out to be an offer to become a male prostitute.

4.1   Summation

These case studies reveal disparities within childhood that the child is ill equipped to handle. They also suggest some parental needs regarding navigating these situations with the best outcome for their child. Anger, anxiety, suicidal thoughts, homicidal thoughts, suicide gestures, barriers to communications are just some of the concepts and constructs that emerge. However, these and other issues led us to see that there are disparities and vulnerabilities in this populations that mandate that we do further scientific investigations. There were many more case studies that provide empirical evidence that these vulnerabilities are real and experienced by others in this populations. These case studies where selected because they represented the common thread found in the population of individuals mixed with the African American race.

5   The Struggle for Identity While Dealing with the Echoes of Anger, Guilt, and Shame

From the case studies that were carried out, the common theme is the struggle for identity. Each individual was never able to fully connect with either side of their heritage. They were aware of the racial divide and were often subjugated to derogatory terms such as "half caste," "nigger," "mulatto," "half-breed." Despite the attempt to shield themselves from racism, it is evident that it was something that

they could not escape. These individuals tried to find their place in the world, but they constantly felt like outsiders. They were constantly made aware of the color of their skin, and the fact that they were not "white enough" or "black enough" feeling subjected to censor and shame. This struggle for identity plagued the individuals leaving them feeling isolated and alone. In many cases, mixed-race individuals are faced with a great deal of anger, guilt, and shame. This can come from both sides of the racial divide and is compounded by a lack of understanding of the complexities of their identity. It is important to recognize that these feelings can be very real and have serious implications for the individual's health and well-being.

6   Review of Literature

In order to understand the needs of this vulnerable population, it is important to review empirical data. Scientific literature on mixed-race individuals is scant. We were unable to find scientific literature. However, there is a growing body literature of individuals beginning to write about interracial marriages are increasing in the United States of America, individual experiences. In the 2020 Census, the population was greater than it has ever been recorded.

7   Building a Bridge

In order to bridge the divide between mixed-race individuals and the rest of society comma, it is important to recognize that race is a social construct, rather than a biological one. It is also important to understand historical and legal implication of racism, as well as importance of education and knowledge in providing a sense of belonging and acceptance.

8   Positive Possibilities and Future Change

The present and future of mixed-race individuals should not be seen as hopeless. Taking a look at the Healthy People 2030 [4] initiative, which is a program of the US Department of Health and Human Services, we can see that there are positive possibilities for change. This program focuses on the social determinants of health, health equity, health literacy, and population health, and it has outlined three priority areas for Healthy People 2030.

These priority areas are improving the health of people from all backgrounds, promoting health equity, and improving the health of vulnerable populations. This program is one way that we can work to bridge the divide between black and white and create a society that is inclusive and understanding of the struggles of a mixed race.

9 Understanding the Implications

The traditional notion of race has been shattered by the realities of our modern world, and this has significant implications for our understanding of health and well-being. Mixed-race populations bring with them a unique set of challenges and opportunities, and we must take a hard look at our existing systems and policies to ensure that all people have access to the health and wellness they need.

10 Call for Evidence and Empirical Knowledge

It is time for us to take a serious look at the implications of living in a mixed-race world. We must understand the full implications of what this means for our future, and for the vision of a healthy people 2030. We must heal the past in order to prepare for the future.

> *"It is essential to understand the implications of living in a mixed-race world in order to ensure that our future is a healthy one."*—Healthy People 2030 [4]

The world is in a state of tumult and chaos. In this climate of uncertainty and confusion, one thing is certain: the need for evidence and empirical knowledge is greater than ever.

The call for proof and facts is universal—from schoolchildren to politicians, from scientists to business leaders, from citizens to nations. It is a call that must be answered not just with words, but with action. The call for evidence and empirical knowledge is clear. It is a call that must be answered if we are to create a better future for ourselves and for future generations. We need to understand the implications on social, cultural, political, and economic levels. We must be diligent in our research and analysis of the data we gather. We must look at the data from all angles in order to gain a full understanding of the implications. Once we have gathered the evidence and knowledge, we must then report our findings. We must be honest and transparent in our reporting, so that the public can be informed and make decisions based on the facts.

11 Meeting the Challenges of Healthy People 2030

The Healthy People 2030 [4] initiative is a call to action to promote health and well-being for all. This requires us to think beyond traditional definitions of race and ethnicity and to consider the full implications of our changing world. We must take a comprehensive approach to health, one that considers the unique needs and experiences of diverse populations.

12   Healing the Past

We must heal the past in order to prepare for the future. We must understand the implications of living in a mixed-race world and use that understanding to shape our future. We must take the time to understand the full implications of living in a mixed-race world and use that understanding to help heal the past and build a better future.

13   Healing Our Future

The full implications of understanding the changing nature of mixed-race demographics, and the challenges they face, are a matter of serious concern. Healthy People 2030 [4] is a call for evidence and empirical knowledge to better understand the needs of vulnerable populations and address the fears of the future.

14   Taking Action Now

We must act now to ensure that the health of all vulnerable populations are protected.

15   A Healthy Future for All

We must work together to address the concerns of mixed-race populations and strive to create a healthy future for all. We must act now to ensure a brighter future for everyone.

16   Acting Toward a Healthier Future

"We must take a holistic approach to health, one that takes into account the unique needs and experiences of diverse populations."

In order to be effective and create a healthier future for all, we must take action. This means understanding the full implications of our changing world and using evidence and empirical knowledge to inform our decisions. We must also strive to promote equity, inclusion, and access to healthcare, and take meaningful action to ensure that all people have the health and wellness they need.

17   Implication for Practice

Providing mental health services across the life span for this population would help to eliminate the disparities that exist that lead to vulnerabilities experienced. Implementing programs that began in preschool throughout high school that are inclusive of all children to speak freely regarding sensitive issues of racial diversity in all of its forms. There is an elephant in the room and no one wants to address that fact. We all just move around the elephant as if it's not there. However, as we all know elephant are huge and to attempt to walk around it could pose several issues. For example, you cannot see the people on the other side of the elephant. We speak loudly because others in the room may not here us. The elephant may become loud and become disruptive because no one is acknowledging it's even there. Or it may become quiet and prefer to sit alone by itself to avoid those who view it strangely or say strange things. Others in the environment may become disruptive as well because they see others acting out. Some don't want the elephant in the room and try to forcibly remove it. Others will find fault with various attributes of the elephant and begin to point out those attributes they feel are undesirable, annoying, or just voice false believes about the elephant to get others to join in the dissonance.

Instead what should occur is that open dialog should occur that allows all in these group to become education about similarities and differences. These dialogs should be held by nurses who have a background in mental health. Educator should take part in sensitivity modules that are designed with various scenarios that may occur in a classroom.

There should be zero tolerance of name calling and bullying of students who are mixed race. Advanced practice nurses could maintain mental health clinics within the setting for students who are struggling with anger, hostility, irritabilities, and problems related to inability to express themselves in a group setting. Students can be assisted to work out angry in constructive ways. Art is a medium that can be used for story writing and storytelling. This will help the child productive express feeling in a safe secure setting. Parents should be included in any session they desire. Mental health clinic providers should be help for a minimum of once a week in case some patients require medication management can be serviced by qualified PMHNP, BC or psychiatrist. Therapist should be on hand to assist and to provide individualized care to children in need (Table 1).

Table 1 Mental Health Concerns

Diagnosis	Symptoms	Interventions
Major depressive disorder Recurrent without psychotic features	• Decreased Concentration • Fatigue • Decreased energy • Hopelessness • Helplessness Worthlessness	• Individual • Group
Anxiety disorder unspecified	• Restlessness • Perspiration • Increased shortness of breath • Palpitations • Overwhelming doom	• Individual • Group

Interventions	
Individual	Therapist Counselors Psychologists Nurse practitioner

Group	Like group (mixed)
	Integrated group
	  • Mixed
	  • White
	  • Black
	White only
	Black only
	Community group
	Projects

18   Conclusion

The concepts that flow from the case studies certainly suggest that mixed-race persons of African American heritage are indeed a population that has major vulnerabilities including behavioral and mental health care challenges. They are essentially invisible in the literature. It is important to gain an understating of the experiences of mixed-race individuals as they have serious implications for physical and mental health, as well as for our society as a whole. It is important to recognize that racism is an issue that needs to be addressed, and that there are both historical and legal implications that need to be taken into consideration. As we look to the future, it is important to use the knowledge gained from empirical evidence, case studies, and experiences to create a better future for mixed-race populations. This is a population that seen to be growing at an exponential rate and so understanding their unique dilemma is of great importance.

It is only through understanding the history of this struggle and leveraging the knowledge that we have gained over time that we can disrupt lives and create a better future. Even with the legal advances of 1967, the mixed-race struggle is still present, and it is up to us to create a bridge and understanding to bring about the change needed for a more equitable society. Thus, providing support to those who

are most vulnerable. However, there are positive possibilities for change, such as the Healthy People 2030 [4] initiative. It is important to continue to look at the history of this topic and to be aware of the challenges that exist.

Other Sources/Recommended Readings

Adelman L. Race: the power of an illusion. http://www.pbs.org/pov/inwhosehonor.2003.

Loving v. Virginia. Black Culture Connections, PBS/WYCC

Films

Imitation of Life (1959) Universal International Films

Books and Chapters

Hanger KS (1997) Bounded lives, bounded places: free black society in Colonial New Orleans; 1769–1803. Duke University Press, p 104–106

Hoston S (2020) I am these truths. Harper One, New York

Hobbs A (2014) A chosen Exile: a history of racial passing in American life. Harvard University Press, Cambridge, MA and London, p 129

Johnson JW (1995) The autobiography of an ex-colored man. Dove Publication Inc., New York, p 90

Larsen N (1929) Passing. Alfred A. Knopf, New York

Lukasik G (2017) White like her: my family's story of race and passing. Skyhouse Publishing, New York

Morrison T (2015) God help the child. Alfred A. Knopf, New York

References

1. Hoston S (2020) I am these truths. Harper One, New York
2. Loving v. Virginia. Black Culture Connections, PBS/WYCC
3. 2020 Census
4. Health People 2030

The Case for Qualitative Designs in Human Trafficking Research

Mary de Chesnay

1   Introduction

Numerous problems in access, validity, and reliability limit the use of quantitative designs and methods in human trafficking research. Since human trafficking is largely invisible even to organizations focused on the problem, access to the sample is difficult. Measuring the extent of human trafficking might be easier for some types and impossible for others. For example, the arrest and prosecution of sex traffickers might require testimony from survivors who are unable or too afraid to identify the key players or do not know the leaders. Qualitative designs should be used to understand the experiences and outcomes of the survivors. Assessing knowledge of practitioners points supervisors and faculty to gaps and deficits in order to improve training and policies, not just for teaching purposes but for expanding the broader state of knowledge about human trafficking.

This book is designed as a text for any discipline and students at all levels. Including a chapter on graduate research from relevant disciplines provides a sense of how qualitative research can build knowledge in those disciplines. In this chapter, qualitative theses and dissertations are examples of how students can design their own studies. No attempt was made to conduct a comprehensive review nor to address quality issues. It is assumed that the faculty who signed off on the studies accepted their merit. Readers can judge the merits of rigor for themselves. An array of recent studies is presented to show current designs used in the disciplines. Of course, the published literature includes data-based articles using many designs, and methods and qualitative design textbooks are widely available.

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2   Overview of Qualitative Research

The basic designs are presented in Table 1 to show the derivation of the design, that is, the discipline from which it was developed. Although qualitative studies can stand alone in terms of merit, it is helpful to think of qualitative research as the first step in theory development. Certainly these techniques represent a beginning understanding of the phenomenon and while qualitative studies are valuable without further research, they also point to directions for follow-up research such as instrument development and experimental design.

A key feature of qualitative research is the way people are described: *participant* not *subject.* Qualitative researchers do not *do things to* the people they study, unlike, for example, experimental investigators who manipulate variables in order to study relationships among variables.

Table 1 Disciplines, designs, and methods

Discipline	Design	Primary methods
Philosophy	Phenomenology	Interviews
Anthropology	Ethnography Life history	Participant observation, interviews, may use quantitative measures as well
Sociology	Grounded theory	Interviews
History	Oral history Biography	Interviews, record review
Humanities disciplines	Case study	Interviews, record review, content analysis
All	"Qualitative"	Content analysis/thematic analysis/discourse analysis
Focus groups		
Participatory action research		

3   Rigor

Accuracy and replicability are essential in documenting rigor in qualitative research [1]. Does the study reflect what the participant meant at that time? Is the study able to be replicated, that is, is enough information provided in the report for another researcher to conduct a study with the same methods even though the results might vary with the participant's evolving experience and opinions. Reflexivity is crucial in qualitative research—does the researcher understand and own his or her biases? It is critical to be self-aware of own opinions and biases when conducting interviews so as not to filter out what the participant is actually saying. When reviewing qualitative studies, readers should look for discussion of accuracy and reliability to determine how much to trust the findings and conclusions.

4   Brief Descriptions of Designs and Methods

4.1   Phenomenology

Phenomenology describes the "Lived Experience" of a person or group. The method is interviewing, usually referred to as conducting a semi-structured interview. Interview questions are designed around the general topic but not necessarily asked in order. The goal is to elicit the participant's processing his or her experience. For example, a woman trafficked for domestic labor might be asked a series of questions about her entire journey from home to her current residence and how she felt and what she thought along the way.

4.2   Ethnography/Life History

Ethnography describes a culture or, in the case of a focused ethnography an aspect of a culture. A single culture is defined broadly and might be a community, organization, or region. For example, a small rural town in India might be a center for the organ trade with traffickers setting up shop to arrange for locals to travel to a city for surgery. Research questions for this study would include the history of the community that led to the problem, the key players, and how the community reacts. A focused ethnography, on the other hand, might describe the organ trade in kidneys in the Middle East. Both types can employ mixed methods—e.g., quantitative case record review of vital statistics, population counts, surveys of local leaders, etc.

Life history is the story of one person who represents the culture of interest. For example, a resident of the town in India might describe his life before and after his decision. His story is framed within the cultural context of that community as well as the cultural context of health care about organ surgery. Life history is distinguished from autobiography in that a researcher interviews the participant or key informant and presents the story. Autobiography is written by the person telling his or her own story.

4.3   Oral History/Biography

Oral history design accesses the memories and experiences of people who lived through a specific time. The COVID-19 pandemic is such a dramatic time in world history that those who lived through it have an opportunity to document so much about it for future generations. One example might be to interview therapists who worked with sex trafficking survivors during the pandemic.

Biography is similar to life history in that the researcher tells the story of an individual. While life history is framed within the cultural context, biography has a historical context. Life history involves interviewing the participant, not always possible in biography since the person might no longer be living.

4.4   Grounded Theory

Grounded theory design is a way of developing theory "grounded" in the experience of real people by systematically collecting and analyzing data at the same time. The goal is to develop theoretical propositions that build theory to explain the phenomenon of interest. The study by Laurent in the table below examined psychological coercion of sex workers.

4.5   Case Study

Case study as a research project describes a single person's experience or status and might include multiple sources of information. Life histories and biographies might be considered case studies, but a case study does not necessarily include a frame of reference. In contrast to case study is case report. Medical journals often publish case reports, especially when a patient has an exotic disease or there are unusual features to his or her condition.

4.6   Participatory Action Research

Participatory Action Research (PAR) is an approach that actively involves members of a community as stakeholders to the outcome. PAR might include both quantitative and qualitative methods so it is similar to other designs, but the defining characteristic is involvement of the community. For example, a group of parents and teachers in a community might work with a researcher to develop an awareness program about human trafficking for children. The investigator might start by conducting a focus group with parents, interview teachers about what is currently taught, administer a questionnaire to students to measure knowledge and obtain police data about the extent of the problem.

4.7 Qualitative Research

Qualitative research as an umbrella term is often used when the investigator does not know or wish to use other specific designs or is focused only on the method of data collection. For example, focus groups are a technique to gather opinion data from stakeholders. Focus groups are often used in marketing research to determine quality of a product. An example for human trafficking might be to conduct a focus group in a shelter for survivors of domestic minor sex trafficking to generate best practices for follow-up services.

5 Data Collection

Primary data collection methods in qualitative research are interviews, participant observation, open-question surveys, and focus groups (Table 2). Data are analyzed by identifying concepts and themes. The terms for coding data are content analysis,

Table 2 Summary of studies by discipline

Social Work
1. Murray, Lakeia (2022). Yeshiva University. Social Workers' Knowledge of the Psychological Impact of the Aftermath of Human Trafficking: A Grounded Theory Approach (Grounded Theory) [2]
2. Findley, Katherine (2018). Rutgers. Trafficking in Persons for the Removal of Organs in India. (Grounded Theory) [3]
3. Lyons, Aldina (2021). Capella University. Child Welfare Assessments with Human Trafficking Victims: An Action Research Study. (Participatory Action Research) [4]
4. Mulhern, Margaret (2014). University of Central Florida. Social Work Student Perceptions of Labor Trafficking. (Content Analysis) [5]
5. Ray, Nilanjana (2008). Washington University. Vulnerability to Human Trafficking: A Qualitative Study. (Grounded Theory) [6]
Criminal Justice
1. Broad, Rosemary (2016). University of Manchester. A Study of Individuals Convicted for Human Trafficking Offenses through the UK Criminal Justice System: Characteristics, Relationships and Criminal Justice Perspectives. (Content Analysis) [7]
2. Van Der Watt, Marcel (2018). University of South Africa. Investigating Human Trafficking for Sexual Exploitation: From Lived Experiences Towards a Complex Systems Understanding. (Phenomenology) [8]
3. Loibl, E. C. (2019). Maastricht University. The transnational illegal adoption market: A criminological study of the German and Dutch intercountry adoption systems. (Case Study) [9]
Law
1. Gaitis, Konstantine (2020). University of Edinburgh. How is Human Trafficking Regulated in the UK? A Critical Examination of the UK's Anti-Trafficking Response. (Content Analysis and Case Study) [10]
2. Al-Zoubi, Muath Yahia Yoseph (2015). Brunel University. An Analysis of the Crime of Trafficking in Persons under International Law with a Special Focus on Jordanian Legislation. (Content Analysis) [11]
3. Kinney Edith (2011). University of California-Berkeley. Stuck in Traffic: Sexual Politics and Criminal Injustice in Social Movements Against Human Trafficking. (Ethnography) [12]
4. Sultan, Amina (2020). Near East University Institute of Graduate Studies International Law. Analysis of Bonded Labour and Slavery in Pakistan. (Content Analysis) [13]

Table 2 (continued)

Education

1. Morris, Carson (2020). University of Nevada-Reno. A Qualitative Study of the Lived Relational Experiences of Sex Trafficked Women. (Phenomenology) [14]
2. Williams, Jodi (2017). University of Missouri-Columbia. Human Trafficking Survivors: Aftercare Services and Institutional Betrayal: A Qualitative Perspective on the Effectiveness of a Victim Advocacy Program. (Content Analysis) [15]
3. Thomas, Danielle (2022). Liberty University. A Phenomenological Study Exploring the Lived Experiences of Professionals Supporting Minor-Aged Human Trafficking Survivors in Northeast Non-Metropolitan Communities. (Phenomenology) [16]
4. Spires, Robert (2012). University of Georgia. Human Trafficking and Education: A Qualitative Case Study of Two NGP Programs in Thailand. (Ethnography) [17]

Public Health

1. Recknor, Frances (2017). University of Texas. Human Trafficking: Responses by the Public Health and Health Care Sectors. (Case Study) [18]
2. Ashi, Anestasia Iliwo (2020). Walden University. The Lived Experience of Child Marriage and its Health Effects Among Young Mothers in Nigeria. (Phenomenology) [19]

Nursing

1. Lipkin Leveque, Noelle (2017). University of San Diego. The Health of Human Trafficking Victims in San Diego, California: A Retrospective Study. (Qualitative) [20]
2. Ernewein, Charrita (2021). University of Central Florida. Survivors of Human Trafficking: Reintegration into the Community and Society. (Content Analysis) [21]

Medicine

1. Ceasar, Daniel (2019). Harvard University. Intersections of Human Trafficking and the Opioid Epidemic, and Barriers to Data Collection in Human Trafficking. (Content Analysis) [22]

Humanities

1. Policy: Konneh, Shirley (2017). Walden University. An Exploration of Efforts to Combat Human Trafficking in a Small Community. (Content Analysis) [23]
2. Sociology: Price Kathleen (2019). University of Massachusetts-Boston. Defining Worthy Victims: State-Level Legislative Decisions to Prevent the Criminalization of Commercially Sexually Exploited Children in the United States. (Mixed Designs-Content Analysis of Interviews) [24]
3. Psychology: Alves, Catarina Durante Burgue (2020). Southern Illinois University. A Qualitative Analysis of Survivors' Experiences with Sex Trafficking. (Grounded Theory) [25]
4. Psychology: Wilson, Ruth (2021). University of Hertfordshire. The Role of Oath-Taking in Human Trafficking Experiences of Survivors. (Thematic Analysis) [26]
5. Laurento, Rebecca Ann, (2021). Walden University. Psychological Coercion Among Trafficked Sex Workers: A Grounded Study Approach. (Grounded Theory) [27]
6. Global Affairs: Poucki, Sasa (2012). Rutgers. The Quest for Root Causes of Human Trafficking: A Study on the Experience of Marginalized Groups, with a Focus on the Republic of Serbia. (Mixed Design-Ethnographic Interviews) [28]
7. Anthropology: Marconi, Veronica (2020). Oregon State University. Demystifying the Sensationalism of Human Trafficking: An Anthropological Study on the Systemic Exploitation of Migrant Labor in Tuscany Italy. (Ethnography) [29]

thematic analysis, and discourse analysis. For example, an interview would be recorded, then transcribed so that the investigator can code the participant's words into categories that lead to concepts, that lead to propositions, that ultimately lead to theory. That theory might be limited to that participant or group or used as a building block for a comprehensive theory about the phenomenon under investigation.

6   Summary

Qualitative research methods and designs are useful in beginning theory development and as a foundation for developing interventions that help specific vulnerable populations. Among the most vulnerable are survivors of human trafficking. This chapter introduced readers to a variety of designs used in different disciplines. Application of those designs are based upon the most relevant research questions for the discipline.

Discussion Questions
- Compare and contrast the primary design used in your discipline to the other designs and how they are used.
- For any of the above studies, suggest three studies that might be appropriate as follow-up research.
- Propose a qualitative study for a type of human trafficking or a region not covered in the above studies.

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Appendix A: Films on Human Trafficking

Films	
Sex trafficking	
10 Seconds	Priceless
A Dance for Bethany	Pretty Baby
Born in Brothels	Priceless
Born into Brothels: Calcutta's Red Light Kids	Rape for Profit
Call + Response	Redlight
Cargo: Innocence Lost	Sacrifice: The Story of Child Prostitutes from Burma
Children for Sale	Sands of Silence
Don't Say My Name	Sex + Money
Dreams Die Hard	Sex Trafficking in America
Eastern Promises	Spartan
Eden	Sugar Babies
Elephant White	Surviving Sex Trafficking
Finding Home	Taken
Flesh: The Movie	The Children of Leningradsky
For My Brother	The Chosen Ones (Las Elegidas)
Girl Model	The Day My God Died
Half the Sky	The Girl Who Played with Fire
Holly	The Jammed
Human Trafficking	The K11 Journey
Human trafficking in the media : a content analysis of human trafficking frames in documentaries, movies, and television episodes	The Lost Girls
I Am Jane Doe	The Price of Sex
I Am Not for Sale: The Fight to End Human Trafficking	The Storm Makers
Import/Export	The Trap
In Plain Sight	The Whistleblower
Kayan Beauties	Trade
King of Thieves	Trade of Innocents

Films	
Lilya 4-Ever	Trading Women
Magnificent Girl	Trafficked
Nefarious: Merchant of Souls	Trafficking
Not for Sale	Traffik
Not My Life	Tricked
Not Today	Very Young Girls

Forced labor	Child soldiers
7 Prisoners	Beasts of No Nation
Amazing Grace	Captives on the Frontlines
Black Gold	Children of War
Borderline	Children on the Front
Call + Response	Crisis Childhood
Cecilia	Fight Like Soldiers, Die Like Children
Face to Face with Slavery	Generation Z: Child Soldiers of the Zetas
Ghosts	Innocents: Child Soldiers at War
I Am Not for Sale: The Fight to End Human Trafficking	Invisible Children
Maria Full of Grace	Returned: Child Soldiers of Nepal's Maoist Army
Not My Life	Soldier Child
Rotten	The Rescue: The Story of Joseph Kony's Child Soldiers
Stand with Sanju	War Witch
The Dark Side of Chocolate	Where Childhood Died
The Sugar Babies	
There is No Place for You Here	**Black market adoptions**
Traces of the Trade	"I Was a Black Market Baby"
	Baby Sellers
Child marriage	Black Market Babies
America's Child Brides	Colin
Child Brides: Stolen Lives	Don't Leave Home
Difret	Outsourcing Embryos
Dukhtar	Philomena
Hope (2019)	Song Without a Name
I am Nojoom, Age 10 and Divorced	Stolen Babies
Knots: A Forced Marriage Story	Taken at Birth
Tall as the Baobab Tree	
The Travel	
Organ trafficking	
Caged (2010)	

Forced labor	Child soldiers
Coma	
Hard to Believe	
Heartbeat	
Human Harvest	
Tales from the Organ Trade	
The Bleeding Edge	
The Traffickers	
Traffickers	

Appendix B: Human Trafficking Policy Templates and Protocols

Organization name and website	Description
Society for Human Resource Management https://www.shrm.org/resourcesandtools/tools-and-samples/policies/pages/anti-human-trafficking-policy.aspx	Policy that prohibits trafficking, applies to all personnel, and provides procedures to report violations
Human Trafficking Collaborative University of Michigan https://humantrafficking.umich.edu/policies-procedures/templates/	Provides templates to create policies, procedures, and adapt current screening and response procedures to encompass labor and sex trafficking awareness
Reproductive Health National Training Center https://rhntc.org/resources/human-trafficking-policy-and-procedures-template	Policy template aids in compliance of Title X grantees and subrecipients with requirements to identify and report human trafficking victims
Social Responsibility Alliance https://www.socialresponsibilityalliance.org/strt/	Template to comply with human trafficking and modern slavery legislation
Doc Pro https://docpro.com/doc2080/anti-slavery-and-human-trafficking-policy-company-corporate-policy	Template of guidelines for employees and supply chains to utilize to prevent modern day slavery
Genie AI https://www.genieai.co/document-types/anti-slavery-and-human-trafficking-policy	Template for organizations to implement and give guidelines and steps to address and prevent human trafficking
Houses of Parliament https://assets.ctfassets.net/vuylkhqhtihf/4cm7jGZVg1xHsdE5PWy4Tb/cfe071259043e98cb3cc49d8f97a7455/SB_Modern_Slavery_Statement_External__003_.pdf	Policy outlining steps taken to prevent and identify potential human trafficking in the organization
Rushax https://rushax.com/resources/anti-slavery-policy-uk-template/	Policy template describing guidelines and actions taken within organizations to prevent modern day slavery

Organization name and website	Description
Global Data https://www.globaldata.com/investors/corporate-governance/ anti-slavery-and-human-trafficking-policy/	Statement detailing commitment to zero tolerance for slavery and human trafficking, steps taken if suspected violations occur, and compliance information
McAfee https://www.mcafee.com/enterprise/en-us/assets/ legal/anti-slavery-human-trafficking.pdf	Company statement to stand against human trafficking, steps taken to ensure business is not endorsing trafficking, and compliance with legislation
Oracle https://www.oracle.com/assets/human-trafficking-policy-2967692.pdf	Policy detailing steps taken to prevent human trafficking, uphold accountability standards and compliance, and how to report any violations suspected
Indiana University https://policies.iu.edu/policies/ua-07-anti-trafficking/index.html	Policy on zero tolerance for trafficking in persons, prohibition of any activity, and procedures to follow if suspected trafficking occurs
United Nations Office on Drugs and Crime https://www.unodc.org/unodc/en/human-trafficking/protocol.html	Legally binding protocol that helps organization identify victims, detect all forms of exploitation, provide protection and assistance to victims
United Nations Human Rights https://www.ohchr.org/en/instruments-mechanisms/instruments/ protocol-prevent-suppress-and-punish-trafficking-persons	Supplemental resource with protocol to prevent, suppress, and punish human trafficking
US Department of Health & Human Services https://nhttac.acf.hhs.gov/soar/eguide/respond/ Response_Protocol	Protocol with guidelines to work with individuals who have experienced trafficking or are at risk, providing resources for staff training and more
HEAL Trafficking https://healtrafficking.org/protocols-committee/	Evidenced-based protocol tools for identification, care, and referral of human trafficking victims
National Human Trafficking Hotline https://humantraffickinghotline.org/resources/ protocol-toolkit-developing-response-victims-human-trafficking-health-care-settings	Protocol toolkit for professionals in healthcare settings to respond to victims of human trafficking
Wisconsin Office of Justice Assistance https://www.doj.state.wi.us/sites/default/files/ocvs/ human%20trafficking/ WIHumanTraffickingProtocolResourceManual. pdf	Manual detailing overview of human trafficking, services offered to victims, guidelines for victim response, how to assist victims, and more
Office for Victims of Crime https://www.ovcttac.gov/taskforceguide/ eguide/3-operating-a-task-force/31-task-force-membership-and-management/ task-force-operational-protocol/	Resource offering questions to consider when creating a protocol for responding to those affected by human trafficking
Delaware Healthcare Association https://www.deha.org/Resources/ Human-Trafficking-Protocol	Recommendations to all healthcare facilities and hospitals to identify and help victims of human trafficking

Organization name and website	Description
Department of Family & Protective Services Texas https://www.dfps.state.tx.us/handbooks/CPS/Resource_Guides/Human_Trafficking_Response_Protocol.pdf	Manual providing information regarding human trafficking support systems, investigations, and youth at risk
Police Chiefs' Association of Santa Clara County http://www2.sjpd.org/records/pc-13650_library/Protocols/Human%20Trafficking%20Protocol%202016.pdf	Protocol for police forces that dictates how to identify, respond, understand, and help victims heal from human trafficking
National Center on Safe Supportive Learning Environments https://safesupportivelearning.ed.gov/human-trafficking-americas-schools/school-policies-protocols-to-combat-trafficking	Resources for schools to create policies and protocols to combat, raise awareness of, and support victims of human trafficking
Mississippi Human Trafficking Task Force https://www.dps.ms.gov/humantrafficking/sites/humantrafficking/files/Documents/Human%20Trafficking%20Case%20Reporting%20Protocol.pdf	Protocol for reporting human trafficking in a variety of instances and how to ensure the victim is referred to the correct party
Southern Arizona Anti-Trafficking Unified Response Network https://www.sacasa.org/wp-content/uploads/2017/06/SAATURN-Human-Trafficking-Protocol-Final-081417-1.pdf	Reference to improve communication and coordinate community responses to human trafficking, supporting the victim, and follow-up to bring justice to the offender
Lockheed Martin https://www.lockheedmartin.com/en-us/who-we-are/ethics/human-trafficking.html	Explanation of policy regarding supply chain transparency, employee training, and continual development and reassessment of anti-trafficking plan
Arnold & Porter https://www.arnoldporter.com/-/media/files/firm-statement-policy/antislavery-policy.pdf?la=en	Policy delegating responsibilities to involved parties, procedures, identification, reporting, and training in regard to human trafficking
Alfresco https://www.alfresco.com/anti-slavery-and-human-trafficking-policy	Policy defining modern slavery, commitment to and application of policies, responsibilities of upholding policy, and training for staff
Pact World https://www.pactworld.org/human-trafficking-and-worker-exploitation-policy	Applicable policy to all employees and staff to define human trafficking and provide guidance for reporting, training, and awareness
Blue Cross https://modernslaveryregister.gov.au/statements/file/2c919a51-89b1-4525-8640-4c02823b66e2/	Statement provides information on steps taken to reduce risks of human trafficking, plans to review and improve upon policies

Appendix C: Sample Syllabus

University of _____
College of _____

Sample Syllabus

Course: Human Trafficking: Modern Slavery as a Global Concern
    Course Number:
    Credit Hours: 3 (3-0-3)
    Prerequisites:
    Faculty:
    Class Hours:

Course Description

The course focuses on cultural aspects of members of a specific vulnerable population, victims/survivors of human trafficking (sex trafficking and forced labor.) The course is a combination lecture–seminar with fieldwork activities designed to provide the student with in-depth knowledge of the topic. Human trafficking will be discussed as a global phenomenon with specific application to many disciplines, and students will approach the topic from the perspective of their own disciplines.

Course Objectives

At the conclusion of the course the student should be able to:
1. Describe the extent of the problem of human trafficking as a global issue.
2. Analyze selected aspects of modern slavery from a cultural framework, specific to the student's discipline.
3. Compare and contrast the differences among victims of sex trafficking, victims of domestic violence, and those forced into slave labor.

4. Analyze the components of successful programs that serve victims of trafficking and sex trafficking.
5. Analyze factors that contribute to the black market trade in organs and infants.
6. Compare and contrast child marriage and child soldiers from the point of view of human trafficking.

Text and Readings

de Chesnay M, Sabella D (2023) Human trafficking: a global emergency. Springer Nature, Berlin

Bibliography

In addition to selected readings from the following sources, students will review literature in the humanities, medical sciences, and social sciences for their individual or group projects. (It is not necessary to buy the following books, but students might want to buy one of the first-person accounts to use for their seminar or fieldwork. However, wait until the first class when we decide on the groups.)

Bales K (2004) Disposable people: new slavery in the global economy. University of California Press, Berkeley

Bales K (2009) The slave next door: human trafficking and slavery in America Today. University of California Press, Berkeley, CA

Batstone D (2010). Not for sale. Harper-Collins, New York

Campagna D, Poffenberger D (1988) The sexual trafficking in children. Auburn House Publishing, Dover, MA

de Chesnay M (2012) Sex tourism and sex trafficking. In: de Chesnay M, Anderson B (eds) Caring for the vulnerable: perspectives in nursing theory, practice, and research, 3rd edn. Jones and Bartlett, Inc., Sudbury, MA, p 385–392

de Chesnay M (2013) Sex trafficking: a clinical guide for nurses. Springer, New York. [Note: Even though this is written for nursing, there are chapters that cover overview of human trafficking, criminal justice, social work, psychology, mental health interventions, public health, and anthropology.]

Dalla R, Sabella D (2019) International handbook of human trafficking: a multidisciplinary and applied approach. Routledge/Taylor & Francis, UK

Farr K (2005) Sex trafficking: the global market in women and children. Worth Publishers, Yew York

Flores T (2010) The slave across the street. Ampelon Publishing, Boise, ID

Kara S (2009) Sex trafficking: inside the business of modern slavery. Columbia University Press, New York

Lloyd R (2011) Girls like us. Harper-Collins, New York

Mam S (2009) The road of lost innocence. Spiegel and Grau, New York

Muhsen Z (1994) Sold. Little, Brown, London

Sage J, Kasten L (2008) Enslaved. Palgrave MacMillan, New York

Shannon L (2011) A thousand sisters: my journey into the worst place on earth to be a woman. Seal Press, Berkeley

Shelley L (2010) Human trafficking: a global perspective. Cambridge University Press, New York

Sher J (2011) Somebody's daughter: the hidden story of America's prostituted children and the battle to save them. Chicago Review Press, Chicago

United State Department of State (2022) Trafficking in persons report. Retrieved November 16, 2022 from 2022 Trafficking in Persons Report - United States Department of State

Course Requirements

Role of Faculty

1. Provide basic material in lecture format about topic of human trafficking.
2. Assign readings relevant to broad topic.
3. Guide seminar discussions.
4. Supervise fieldwork.
5. Evaluate students' work.

Role of Student

1. Participate in seminar sessions.
2. Read required assignments.
3. Conduct fieldwork appropriate to the course objectives.
4. Submit required assignments as directed via the KSU email system. (Note: this is a writing-intensive course.)

Seminar Attendance and Participation

[Insert department policy]

Grading Criteria

Seminar presentation on cultural aspects of human trafficking	40
Fieldwork report	40
Midterm examination	20
Total	100 pts

Grading Scale

[Insert department policy]

Topical Outline

Seminar 1: Nature and Extent of Human Trafficking

Objectives
1. Define terms and identify types of human trafficking.
2. Describe the extent of the problem of human trafficking as modern slavery, including types, demographics, costs, and etiology.
3. Compare and contrast sex slavery with other forms of violence against men, women, and children.
   Reading Assignment:
   [Insert readings specific to discipline]

Seminar 2

Objectives
1. Define forced labor and discuss how the various types affect the people and families trapped in forced labor.
2. Define the terms "victim" and "survivor" and distinguish how they might be used in serving the population of trafficked people.
3. Describe the ways in which victims respond and the ways traffickers control victims.
   Reading Assignment:
   [Insert readings specific to discipline]
   Each student will select the fieldwork option and begin work on the selected option.

Seminars 3 and 4

Objectives
1. Describe the factors that encourage sex trafficking.
2. Describe what it is like for victims/survivors of the sex trade.
3. Describe the medical and psychological effects of the sex trade.
4. Compare and contrast the culture of sex slavery with that of forced labor.
   Reading Assignment:
   [Insert readings specific to discipline]

Seminar 5

Objectives-Mid-term Exam
- In-class mid-term examination: This will be a short-answer essay exam covering the content to date.
  Seminar 5:

Objectives
1. Discuss socio-political issues related to human trafficking.
2. Discuss challenges in prosecuting offenders.
3. Discuss resources (and lack of resources) for victims.

Reading Assignment:
[Insert readings specific to discipline]

Seminar 6
1. Describe the issues associated with baby trafficking, organ trafficking, child brides, and child soldiers.
2. Propose solutions to each.
   [Insert readings specific to discipline]

Seminar 7 and 8
1. Content specific to discipline prepared by course faculty

Seminars 9 and 10: Objectives-Student Presentations
Students present results of seminar group projects and fieldwork.

Guidelines

Seminar on Cultural Aspects of Human Trafficking (40 pts)

All students will complete this assignment. Students may work individually or in small groups no larger than 3 depending upon course enrollment. Students who work in groups will be assigned the same grade for all group members and thus are responsible for ensuring contributions by all group members and compliance with course requirements.

1. Each group will select a topic related to human trafficking and conduct a literature search on the topic including at least two articles per student on the topic and one website for the group for an organization that serves that population. Acceptable general topics are forced labor, sex trafficking, organ trafficking, baby trafficking, child soldiers, and child brides. Students select an aspect that interests the group and examines the literature and relevant websites to present an interesting aspect to the class. Topics will be decided upon in the first class and you will have class time to work on the presentations.
2. Prepare a seminar presentation with PowerPoint lasting no longer than 30 min and be prepared to answer class questions. The presentation will be designed to educate the class about the topic and resources for the population.
3. Prepare a concise (no longer than 2-pages) handout for the instructor that includes a 300-word abstract of the presentation and references used for the presentation. Each group member must include two references.
4. Submit the PowerPoint and handout to the professor by email one day prior to class.

   Criteria for grading: Logical flow; depth and detail of material; critical thinking; adherence to basic principles of presentations such as speaking so everyone can hear, easy-to-read PowerPoints, etc.; resolution of any group conflicts; appropriateness of references; internal accuracy and consistency.

Fieldwork (Choose One of the Following Options)

Fieldwork Option 1: Case Study (40 pts)

1. The case study is a group or individual project in which the students select a case involving human trafficking and prepare a detailed analysis of issues, resources, and expected outcomes from the point of view of the student's discipline. The group will prepare a single paper of no longer than 6 pages including references to be emailed to the professor by the beginning of the last class.
2. The case can be derived from the literature from first-person accounts of survivors of human trafficking, description of programs that serve the population, or can be designed by the students. Students will first identify a case situation, choose a culturally sensitive approach, analyze the case in terms of the approach, and prepare a detailed report of the analysis. Include at least six references from the scientific literature in the student's major or on human trafficking. Appropriate examples include but are not limited to:
   (a) Flores T (2010) The slave across the street. Ampelon Publishing, Boise, ID
   (b) Lloyd R (2011) Girls like us. Harper-Collins, New York
   (c) Mam S (2009) The road of lost innocence. Spiegel and Grau, New York
   (d) Muhsen Z (1994) Sold. Little, Brown, London
   (e) Sage J, Kasten L (2008) Enslaved. Palgrave MacMillan, New York
   (f) Shannon L (2011) A thousand sisters: my journey into the worst place on earth to be a woman. Seal Press, Berkeley
   (g) As an alternative to a published case study, students may review the literature on abandoned babies and write a fictional case of a sex trafficking survivor who became pregnant by a john and abandoned her infant. Think carefully about why a girl would do such a thing.
3. The following are examples but students are not limited to these:
   (a) Nursing or pre-med students might select a case of one of the victims of sex trafficking, identify the health risks and problems of the victim, develop a care plan to address the health issues, identify how health care professionals should intervene by using best practices, and present the expected outcomes.
   (b) A business or economics student might choose a case of a Mexican man in forced labor on a farm and discuss the economic issues that prevent him from escaping and the implications on the American economy of state laws regarding undocumented immigrants.
   (c) A psychology or social work student might discuss mental health interventions with trafficked children from the perspective of community-based services needed.
   (d) A criminal justice or pre-law student might research the prosecution of a local trafficker or pimp and critique the actions of all the people involved in the arrest and prosecution of the defendant.

Fieldwork Option 2: Film Critique (40 pts)

Students will select a film (documentary or fiction) on the topic of human trafficking in modern world and select a theme from the film to explore in a formal paper: for example, the concept of adolescent independence in the film, *Taken.* A list of films is included in the Appendix of the text, but students may obtain approval of a film not on the list. Students may work individually or in small groups not larger than 3.

Criteria for grading fieldwork: completeness of assignment, accuracy of data, critical thinking of analysis of data, significance of contribution to the research.

Email all assignments to the professor by the due date.

Appendix D: Missing and Murdered Indigenous Women

Organization (Web address)	Description
Urban Indian Health Service https://www.ihs.gov/urban/	Provide public health services and support to urban American Indian and Alaska Native individuals residing in the United States
U.S. Government Accountability Office https://www.gao.gov/	GAO gives Congress, leaders of agencies, and the public factual information to improve the government and save taxpayer funds. They work to hold facets of the government accountable on a wide variety of issues, from racial injustices to cybersecurity
Native Women's Wilderness https://www.nativewomenswilderness.org/	A non-profit that offers a place for Native women to join together to share, support, and learn from each other as they explore the outdoor realm
Bureau of Indian Affairs https://www.bia.gov/	The Bureau facilitates relationships with Indian tribes in the U.S., offering support to the tribal people and governments, promoting safe living environments, strengthening communities and individual's rights, with an overarching focus on enhancing well-being of American Indians and Alaska Natives
Office for Victims of Crime OVC https://ovc.ojp.gov/	Offers resources for American Indian and Alaska Native victims of violence, with one of the highest rates of victimization in the country. They work to provide assistance under challenging circumstances, such as cultural differences and remote tribal locations
Coalition to Stop Violence Against Native Women https://www.csvanw.org/	A native women founded organization created to support native women and children in New Mexico's tribal communities through education and victim advocacy
Library of Congress Report on Missing and Murdered Indigenous Women and Girls https://www.loc.gov/item/lcwaN0028038/	A report storing the national inquiry into missing and murdered indigenous women and girls' statistics in Canada

Organization (Web address)	Description
Washington State Office of the Attorney General https://www.atg.wa.gov/	The Office of the Attorney General provides legal services and protects the rights of the people of Washington. They are dedicated to stopping all forms of racism in the workplace so as to impact individuals in the state of Washington, including American Indian individuals
Wisconsin Department of Justice https://www.doj.state.wi.us/	The DOJ focuses on apprehending criminals, seeing them to justice, and providing resources and support for victims of violence. In 2020, a task force was initiated to evaluate the factors that contribute to missing and murdered indigenous women and how various organizations respond
Department of Justice https://www.justice.gov/	The US DOJ is committed to upholding the law, keeping the country and individuals safe, and provide protection of civil rights in the country for all, including indigenous individuals
Native Hope https://www.nativehope.org/	This non-profit is dedicated to addressing injustice done to indigenous individuals as they move toward healing and restoration of relationship
YouthREX https://youthrex.com/	A Canada-based initiative dedicated to sharing knowledge and working with youth programs to engage all communities and groups of individuals to create more equity, diversity, and inclusion
Government of Canada RCAANC https://www.rcaanc-cirnac.gc.ca/eng/1448633299414/1534526479029	The Government of Canada started a national action plan as they look into missing and murdered Indigenous women and girls, working with local territories, organizations, etc. to collaborate on a national action plan, also offering support for those affected by the missing and murdered
The Red Road https://theredroad.org/	Initiative focused on empowering and offering hope to native communities with an emphasis on encouragement to live by upholding traditional values and keeping their culture alive today. Raise awareness and educate the public on native communities' history and the current status of native American culture
Yukon Government https://yukon.ca/	This website offers a variety of services and information for individuals regarding legal and social support systems, safety information, statistics and data, and more
DGW Law https://www.dgwlaw.ca/	Dedicated to providing legal and financial services to first nations, indigenous, Inuit, and Métis individuals in Canada. They are committed to reconciling with indigenous peoples and work in the fields of litigation, negotiation, economic development, and strategic advice

Organization (Web address)	Description
New Mexico Indian Affairs Department https://www.iad.state.nm.us/	Working with tribal nations, communities, and people to ensure the traditional ways of life are honored and lived out. Partnering with the DOJ initiative in the Missing and Murdered Indigenous Women and Girls Task Force Act
National Indian Women's Resource Center https://www.niwrc.org/	An advocacy and resource center focused on supporting American Indian, Alaska Native, and Native Hawaiian women. Dedicated to ending violence against these women, offering resources, assistance and training, and developing policies
Tribal Epidemiology Centers https://tribalepicenters.org/	Providing service and knowledge to American Indian and Alaska Native Tribal and urban communities, improving the health and well-being of these individuals
Department of Public Safety – State of Minnesota https://dps.mn.gov/Pages/default.aspx	The Dept of Public Safety has an office dedicated to Missing and Murdered indigenous relatives with the focus on implementing the recommendations of the National Task Force into the local community
Province of Manitoba https://www.gov.mb.ca/	The Province has an office which works to reconcile with indigenous and northern tribal communities. This includes implementation of the MMIWG Task Force initiatives to protect and provide resources for victims and those impacted
Office of Hawaiian Affairs https://www.oha.org/	Office that provides support and encouragement for Native Hawaiian individuals to grow and increase in their culture, honoring it. Created a Missing and Murdered Native Hawaiian Women and Girls Task Force Report to provide information and knowledge regarding this violence against the indigenous peoples in this area
School of Criminology and Criminal Justice—Arizona State University https://ccj.asu.edu/	Leading higher education and regarded for productivity in faculty and research. Leading in interdisciplinary approaches to social issues, dedicated to contributing to transformations in our society and communities that create greater well-being and enhance public safety.

Appendix E: Human Trafficking Grants

Organization (Web address)	Description
US Government	
U.S. Department of State https://www.state.gov/ trafficking-in-persons-funding- opportunities/	The Trafficking in Persons (TIP) office runs a competition each year that raises funds to combat human trafficking in areas outside of the United States. It encourages organizations to apply for funding to further the work they do to combat human trafficking
Office for Victims of Crime (OVC) https://ovc.ojp.gov/program/human- trafficking/grants-funding	The OVC has a funding opportunities page to view open opportunities to support anti-trafficking related efforts. They also provide links to outside grant and funding sources, including websites and snippets of information about them
U.S. Department of Health & Human Services, Administration for Children & Families https://www.acf.hhs.gov/otip/grants	The Office on Trafficking in Persons maintains funding opportunities, coordinating and managing the anti-trafficking grants in conjunction with the Department of Health & Human Services
U.S. Department of Justice Justice.gov	The Department of Justice provides links to government programs and offices that fall under its umbrella that offer grant opportunities for victims of crime & trafficking. Overall, they offer funding opportunities that assist both victims and those who are involved in law enforcement and the programs to improve justice systems
U.S. Department of Health & Human Services, Children's Bureau https://www.childwelfare.gov/	The Children's Bureau awards grants to localized children's welfare organizations as they combat and reduce risk of trafficking in youth and children, and support victims of trafficking in youth
U.S. Department of Homeland Security https://www.dhs.gov/dhs-grants	The DHS provides grants to many types of jurisdictions that work to aid those combatting types of threats, hazards, and crimes. The website lists various additional grant opportunities that work alongside the DHS

Organization (Web address)	Description
Benefits.gov https://www.benefits.gov/benefit/622	This government organization has a National Human Trafficking Assistance Program that provides funding and grants to victims of human trafficking, providing case management and resources to help support these victims
US States	
Connecticut General Assembly https://cga.ct.gov/	The CGA provides links to human trafficking grant opportunities afforded by government associations
Massachusetts Government https://www.mass.gov/service-details/human-trafficking-trust-fund-httf	The Massachusetts Office for Victim Assistance has a Human Trafficking Trust Fund that is granted once every 2 years to applicants to assist victims and survivors of human trafficking
Michigan Department Health & Human Services https://www.michigan.gov/mdhhs/inside-mdhhs/newsroom/2023/01/06/trafficking-services	The MDHHS has a program to extend services and funding to victims of human trafficking through a grant given to organizations that fight human trafficking and give support to survivors
Kansas Attorney General, Victim Services https://ag.ks.gov/victim-services/grants	Grant funds are available in Kansas to various funds, including a Human Trafficking Victim Assistance Fund that provides training to law enforcement agencies in Kansas as well as support for victims of human trafficking in the state
State of Nevada https://dhhs.nv.gov/programs/grants/funding/human_trafficking_fund/	The State of Nevada has a Contingency Account for Victims of Human Trafficking that is managed by the Dept. of Health & Human Services. It is compiled of contributions by donors and offers assistance to victims of human trafficking in this state
State of Georgia Criminal Justice Coordinating Council https://cjcc.georgia.gov/grants/grant-subject-areas/sexual-assaulthuman-trafficking	Offers resources via grants that give agencies in the state of Georgia the assistance needed to assist victims of sexual assault/human trafficking
State of Maryland http://goccp.maryland.gov/grants/programs/rnpg/	The state offers a grant that gives funding to expand projects against child sex trafficking in the state of Maryland, including raising awareness, giving resources to victims, and provide victim safety, rights, and resources
Texas Secretary of State https://www.sos.texas.gov/tbat/index.shtml	The Secretary of State gives donations made through the Texas Businesses Against Trafficking partnership to the Texas Health and Human Services Commission, which raises funds specifically to aid victims of human trafficking with housing and treatment services
International	
United Nations Office on Drugs and Crime https://www.unodc.org/unodc/en/human-trafficking-fund.html	The United Nations Office has a Voluntary Trust Fund for Victims of Trafficking in Persons, established in 2010. This fund receives contributions from supporters worldwide to support and aid victims of human trafficking

Organization (Web address)	Description
Human Trafficking Foundation https://www. humantraffickingfoundation.org/	The Human Trafficking Foundation has an Emergency Support Fund that allocates grants to help victims of human trafficking in situations where resources and assistance are not otherwise available by working with organizations that provide support to survivors
Public Safety Canada (Government of Canada) https://www.publicsafety.gc.ca/cnt/ cntrng-crm/hmn-trffckng/fndng- prgms-cmbt-hmn-trffckng-en.aspx	The Public Safety Canada organization has various funding programs that combat human trafficking, including a victims fund, women's program, gender-based violence program, and more
Charitable organizations	
Support Human Trafficking Survivors Supporthtsurvivors.org	This group offers information about human trafficking and displays a myriad of fundraising and grant opportunities that support survivors of human trafficking
Rural Health Information Ruralhealthinfo.org	Large resource center that offers information about grants for victims of human trafficking in their resource catalog and online library
Change a Path https://changeapath.org/	Change a path receives donations from volunteers and offers funding and grants to various anti-trafficking organizations that work directly to support victims of human trafficking
Innovations for Poverty Action https://poverty-action.org/	This organization administers grants given through donations from contributors. They work with researchers, various teams across the world, and donors to implement the grants to support victims of poverty and human trafficking
Laboratory to Combat Human Trafficking https://combathumantrafficking.org/ toolkit/funding-your-partnership/	This organization, based in Colorado, brings awareness to human trafficking and offers information about grants that can be given to other organizations who are also anti-trafficking. The Funding Your Partnership section gives information about funding and partnering to gain grants
Carlson Family Foundation https://carlsonfamilyfoundation.org/ our-priorities/ sex-trafficking-prevention/	This foundation funds grant for organizations and programs that prevent human trafficking and spread awareness, support survivors, and work to change the systems in place in the local Twin Cities area in Minnesota
Slave 2 Nothing https://www.slave2nothing.org/grants	This non-profit offers funding and grants to more than 100 organizations per year that work to combat human trafficking and provide resources and support to survivors

Appendix F: Reintegration of Child Soldiers

North America

Organization	Website	Description
Southeastern US		
Northeastern US		
UNICEF, USA USA & International	https://www.unicefusa.org/	Reintegration programs to offer medical care, counseling, residence, and training prior to re-entry into civilian life
War Child New York	https://www.warchild.org/	Programs dedicated to bringing collaboration between children and communities to assist with reintegration, recovery, and building great futures
New England US		
Save the Children Connecticut & International	https://www.savethechildren.org/	Provide safety, resources, and help to former child soldiers to reenter life both locally and internationally
Midwest US		
Southwestern US		
Western US		
World Vision Washington	https://www.worldvision.org/	Aiding former child soldiers through financial and physical means in various countries
Alaska		
Hawaii		
Canada		
War Child	https://www.warchild.org/	Programs dedicated to bringing collaboration between children and communities to assist with reintegration, recovery, and building great futures
Mexico		

International

South America		
Europe		
Children & War Foundation Norway	https://www.childrenandwar.org/	Create manuals to provide information and assistance to organizations who support child soldier reintegration
War Child UK, Holland, Sweden	https://www.warchild.org/	Programs dedicated to bringing collaboration between children and communities to assist with reintegration, recovery, and building great futures
Dallaire Institute Children Peace Security Nova Scotia	https://www.dallaireinstitute.org/	Protecting children through implementing programs, advocating for policies, and engaging in local communities of former child soldiers
Asia		
All People Free Middle East, Asia, North Africa	https://www.allpeoplefree.com/	Providing education, safe housing, and tools and resources to at-risk children, or children saved from atrocities prior to entering society again
Child Rescue Cambodia	https://www.childrescueinc.org/	Orphanage provided to support orphans and children impacted by war and other crimes. Support, education, and care given to those affected by war and conflict
Peace Direct Afghanistan, Philippines	https://www.peacedirect.org/	Support building relationships to peace in affected areas, partnering with direct programs and safe places for child soldiers
Project AK-47 Southeast Asia	https://www.projectak47.com/rescue-restore-reshape	Work to rescue child soldiers, then provide safe houses, educational programs, and safety to children impacted
Australia		
War Child Australia	https://www.warchild.org/	Programs dedicated to bringing collaboration between children and communities to assist with reintegration, recovery, and building great futures
Africa		
Childsoldiers.net Belgium (Uganda)	http://www.childsoldiers.net/	Belgium-based organization assisting directly with child soldiers in Uganda, reenter society with financial and physical assistance
Wakiso Hope Project Uganda	https://wakisohope.org/	Supporting children in Uganda through education and providing basic human needs at an orphanage
OMO CHILD Ethiopia	https://myomochild.org/	Rescuing mingi children from war and providing a safe shelter, education, and more for integration into society
Invisible Children Central Africa (Washington D.C.)	https://invisiblechildren.com/	Working to bring peace to affected areas in Central Africa, provide necessary resources and care for affected children in war areas
Exile International Africa	https://exileinternational.org/	Dedicated to transforming child soldiers into leaders of peace through care, education, and physical needs being met

Appendix G: Shelters for Sex Trafficking Survivors

North America

Shelter	Website	Description
Southeastern US		
Faithful Love Brunswick, GA	https://faithfullovega.org/	Organization that offers a safe place, food, and shelter to female survivors of trafficking
WellHouse Odenville, AL	https://www.the-wellhouse.org/	Non-profit that offers immediate short- and long-term care support to victims
Northeastern US		
Refuge for Women Pittsburgh, PA	https://refugeforwomen.org/	Provide long-term care for survivors of sex trafficking across a variety of locations
Safe Harbor Shelter Richmond, VA	https://safeharborshelter.com/	Safe shelter providing transitional living for survivors of human trafficking
New England US		
Sojourner House Rhode Island	https://sojournerri.org/human-trafficking/	Offers comprehensive services to victims of domestic abuse and sex trafficking
Brigid's House of Hope New Hampshire	https://www.brigidshouseofhope.org/	Shelter state-wide provided to survivors of trafficking with long-term and transitional services to victims
Midwest US		
YWCA Kalamazoo, MI	https://www.ywcakalamazoo.org/	YWCA provides a shelter for labor and sex trafficking survivors of all genders, also lending aid to legal matters for survivors
Refuge for Women Chicago, IL	https://refugeforwomen.org/	Provide long-term care for survivors of sex trafficking across a variety of locations
Southwestern US		
Refuge for Women North Texas	https://refugeforwomen.org/	Provide long-term care for survivors of sex trafficking across a variety of locations

Shelter	Website	Description
New Mexico Dream Center, Spoken For New Mexico	https://www.nmdreamcenter.org/spoken-for	Residential housing and variety of services dedicated to caring for survivors of trafficking
Western US		
Ruby's Place California	https://www.rubysplace.org/	Provides a short-term residential program for survivors, supporting mental and physical health, as well as case management and more
Cast LA California	https://www.castla.org/	Offers a shelter for safe housing for trafficking survivors, along with programs and services to rebuild their lives
Alaska		
Covenant House Anchorage, AK	https://www.covenanthouse.org/	Give refuge to survivors through initial intake, education, services, and programs available
Hawaii		
Ho'ōla Nā Pua Hawaii	https://hoolanapua.org/	Foundation dedicated to providing support and care for child survivors of sex trafficking
Canada		
SafeHope Home Ontario, CA	https://safehopehome.com/	Safe, supportive home for survivors of human trafficking, providing care after breaking free from trafficking
Mexico		
Centro Integral de Atencion a la Mujer Cancun, MX	http://www.ciamcancun.org/	An organization dedicated to providing safe services and housing for survivors of sex trafficking

International

South America		
House of Hope Latin America	https://www.houseofhopeinternational.com/	3 locations across South America that give residential centers, programs, education, and more to victims of sex trafficking
Alas de Colibri Fundación Ecuador	https://fundacionalasdecolibri.org/	Care and shelter offered for adolescent survivors of trafficking
Covenant House Nicaragua, Guatemala, Honduras	https://www.covenanthouse.org/	Give refuge to survivors through initial intake, education, services, and programs available
Europe		
IOM Moldova	https://rovienna.iom.int/	Shelter opened for male victims of trafficking, providing care and services to survivors

Mission823 Eastern Europe	https://mission823.com/human-trafficking-eastern-europe/	Works with law enforcement to save victims of trafficking, then providing shelter and healing to survivors
Red Cross EU Europe	https://redcross.eu/	Offers short-term residence for victims of sex trafficking in crises
Alba Italy	https://www.albacommunity.org/	Providing long-term housing and recovery for women and children survivors of trafficking, then reintegration into society
Asia		
ZOE International Japan, Thailand	https://gozoe.org/	Shelters open for victims of trafficking, for men, children, and women—dedicated to providing assistance long term
Love146 Philippines	https://love146.org/philippines-survivor-care/	Two safe homes available to children's safety and follow-up after rescue from trafficking
OneChild Philippines	https://onechild.org/	Ranch opened to sex traffic survivors, offering medical, physical, and emotional care
Compassion First Indonesia	https://compassionfirst.org/	Various shelters open in Indonesia to provide personalized care for girls rescued from sex trafficking
Tenaganita Malaysia	https://tenaganita.net/	Two shelters open for women and children survivors of human trafficking, providing hands-on care
Australia		
The Salvation Army Sydney, Australia	https://www.salvationarmy.org.au/	Safe house operated for women who have been trafficked, offering accommodations and further services
A21 Australia	https://www.a21.org/	Work with law enforcement to save victims of sex trafficking, then offer a holistic approach to care, including immediate shelter
Africa		
S-cape South Africa	http://www.s-cape.org.za/	Safe house dedicated to serving victims of human trafficking through care and restoration
Love Justice Southeastern Africa	https://www.lovejustice.ngo/	Providing intervention, practical hands-on care, and shelter for victims of trafficking