Human Trafficking: A Global Perspective

Jordan Greenbaum, MD, Medical Director
Stephanie V. Blank Center for Safe and Healthy Children

A service of Children’s at Scottish Rite
Objectives

• Recall the similarities and differences between international and domestic sex trafficking

• Understand the scope of global human trafficking and its varied forms

• Recall special concerns for the medical provider caring for possible international trafficking victims
Focus on..

• Labor trafficking

• Sex trafficking

• Trafficking in body parts
Limits of Our Knowledge

• Relatively few studies focusing on children
  ▪ Many studies are qualitative
  ▪ Small sample sizes
  ▪ Studies not published
• Many include adults and/or report data from trafficking in other countries
• Difficult population to identify and to measure!
• Large multi-site quantitative studies needed
Human Trafficking Globally

- Exact incidence and prevalence unknown
- Millions involved
- Victims from 152 countries, trafficked in 124 countries
- Extremely profitable: low risk, high gains

UNODC 2014; ILO 2012
Global Demographics

Detected victims of trafficking in persons, by age and gender, 2011

- **Women**: 49%
- **Men**: 18%
- **Boys**: 12%
- **Girls**: 21%

- **Africa and Middle East**: Children 62%, Adults 38%
- **Americas**: Children 31%, Adults 69%
- **South Asia, East Asia and the Pacific**: Children 36%, Adults 64%
- **Europe and Central Asia**: Children 18%, Adults 82%

UNODC, 2014
Global Demographics

Forms of exploitation among detected trafficking victims, by region of detection, 2010-2012 (or more recent)

- Africa and the Middle East: 53% sexual exploitation, 37% forced labour, servitude, and slavery, 10% other forms of exploitation
- Americas: 48% sexual exploitation, 47% forced labour, servitude, and slavery, 4% organ removal
- East Asia, South Asia, and Pacific: 26% sexual exploitation, 64% forced labour, servitude, and slavery, 10% other forms of exploitation
- Europe and Central Asia: 66% sexual exploitation, 26% forced labour, servitude, and slavery, 8% other forms of exploitation
## Who are the traffickers?

### Typology on the organization of trafficking in persons

<table>
<thead>
<tr>
<th>Small Local Operations</th>
<th>Medium Subregional Operations</th>
<th>Large Transregional Operations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Domestic or short-distance trafficking flows</td>
<td>Trafficking flows within the subregion or neighboring subregions</td>
<td>Long distance trafficking flows involving different regions</td>
</tr>
<tr>
<td>One or few traffickers</td>
<td>Small group of traffickers</td>
<td>Traffickers involved in organized crime</td>
</tr>
<tr>
<td>Small number of victims</td>
<td>More than one victim</td>
<td>Large number of victims</td>
</tr>
<tr>
<td>Limited investment and profits</td>
<td>Some investments and some profits depending on the number of victims</td>
<td>High investments and high profits</td>
</tr>
<tr>
<td>No travel documents needed for border crossings</td>
<td>Border crossings with or without travel documents</td>
<td>Border crossings always require travel documents</td>
</tr>
<tr>
<td>No or very limited organization required</td>
<td>Some organization needed depending on the border crossings and number of victims</td>
<td>Sophisticated organization needed to move large number of victims long distance</td>
</tr>
<tr>
<td>Intimate partner exploitation</td>
<td></td>
<td>Endurance of the operation</td>
</tr>
</tbody>
</table>

UNODC, 2014
Risks for International Trafficking

- Gender bias/discrimination
- Poverty
- Minority groups
- Corruption of officials
- Kidnapping/abduction
- Poor education
- Homelessness
- Abuse/family dysfunction
- Poor social services
- Organized crime networks

Increased Risk

Reid, 2012
How does this differ from US domestic trafficking?

- Problems with immigration status
- Fraudulent employment agencies
- Local economies dependent on sex industry
- Sold into sex slavery in order to support family
- Armed conflicts, social upheaval, forced migration
- Extensive police corruption
- Greater discrimination against women/children

Reid, 2012
International Trafficking Examples

• Arnov is a 14 yo boy from a small village near Mumbai. He traveled to Mumbai to work in a hotel, as father had died and the family had debts.

• Katerina is a 16 yo girl from Moldova. During social upheaval following collapse of Soviet Union she was desperate for work. Through an employment agency she found a job as a nanny in the U.S.
Trafficking Into U.S.

www.thefuturegroup.org/id20.html
## International Gateways to U.S.

<table>
<thead>
<tr>
<th>Country of Origin</th>
<th>Departing City</th>
<th>Arrival City</th>
</tr>
</thead>
<tbody>
<tr>
<td>Korea</td>
<td>Seoul</td>
<td>Detroit (via Toronto), LA, San Francisco</td>
</tr>
<tr>
<td>Guatemala</td>
<td>Mexico City</td>
<td>Miami</td>
</tr>
<tr>
<td>Ukraine</td>
<td>Brussels, Frankfurt, Paris</td>
<td>Chicago, NY, San Francisco</td>
</tr>
<tr>
<td>Ghana</td>
<td>Amsterdam, Brussels, Frankfurt, Paris</td>
<td>NY, Seattle</td>
</tr>
</tbody>
</table>
Travels of a 15 year old Ukrainian girl

Estes, 2002
**Trafficking Into United States**

- “Brides” of U.S. servicemen may enter country and be channeled into sex industry
- Victims may enter with ‘tourist’ or ‘student’ visas (forged or legal)
- Work visas (H-2A, H-2B)
- Often part of criminal network
- Vast majority enter illegally
  - Trafficker poses as family member
  - Sneaking across borders
  - Forced to transport drugs
Travel Conditions

• May be no significant travel

• Travel
  – May be multi-step
  – May transition from smuggling to trafficking
  – Trafficker establishes control
  – Conditions vary, may be very harsh

• Katerina and Arnov....
Conditions at Destination

• Lots of variation
• Freedom varies
• Often deprivation, harsh living and working conditions
• Wages withheld; debt bondage
• Manipulation, threats, intimidation
• Psychological manipulation
• May be sold multiple times
How Does It End?

- Law enforcement may discover victim
- Other professional or lay person makes report
- Victim reaches out to NGO (with or without assistance)
- Victim escapes
- Victim released by trafficker
- Victim dies
Labor Trafficking
The Picture In Greece

Child labor trafficking

- May be trafficking victim
- Whole family is victimized
- Parents may be victims
- Common industries:
  - Cleaning
  - Agriculture
  - Tourism
India’s child maids face slavery, abuse and sometimes rape
By Simon Denyer, January 19, 2013
NEW DELHI — She was just 14 years old when she was picked up from her poor village in eastern India and promised good wages as a maid in New Delhi. Instead, she was forced to work for free as a virtual slave in a wealthy middle-class household.
When she plucked up the courage to complain to the “placement agent” who had found her the job, “he beat me and then he raped me,” the girl, now 17, said in an interview in this capital city. “He said if I ever tried to run away from home, he would kill off my family and burn down my house.”
Child Labor in India

Working Children by Sector, Ages 5-14

- **Agriculture**: 69.5%
- **Services**: 13.0%
- **Manufacturing**: 13.0%
- **Other**: 4.6%

US Dept of Labor, 2012
Labor Trafficking in the U.S.

- Agriculture
- Construction
- Landscaping
- Janitorial/Cleaning
- Food Processing
- Manufacturing

Zhang, 2012
Labor Trafficking of Foreign Children In U.S.

Work as:

- Domestics in private homes
- Cleaners in restaurant kitchens
- Launderers in hotels
- Nannies
- Care services
- Garment industry
- Agriculture
- Magazine sales**; performing groups
- May involve sexual exploitation as well
- 3 D’s: dirty, dangerous, and difficult jobs

Estes, 2002, Hepburn 2013
Hurricane Katrina

Natural disasters lead to:
- Sudden demand for cheap labor
- Poor monitoring of agencies
- Overextended law enforcement
- Ideal for human trafficking

The New Slavery
Human trafficking flies below the radar of most people's consciousness, but it happens — even in New Orleans
by Sarah Andert

Hepburn, 2013
Health Consequences of Labor Trafficking

• Untreated chronic medical conditions
• Work-related injuries
  ▪ Acute trauma
  ▪ Chronic illness related to exposure to chemicals, dust, etc
  ▪ Chronic pain, strain
  ▪ Malnutrition/dehydration
  ▪ Infection
  ▪ Consequences of sexual assault
Possible Indicators of Labor Trafficking

- Accompanied by domineering adult
- Parent is not in control of ID documents, money
- Parent/child not able to come and go at will
- Parent/child work very long hours
- Living/working conditions highly secure
- Parent or child unable to say where they are, where they are staying
- Parent/child provide inconsistent histories
- Indicators of abuse/neglect

Polaris Project, 2010
Example 1:

- 6 year old male presents with severe respiratory distress, cough, fever x 3 days
- Accompanied by ‘uncle’ and parents
- Uncle answers all questions

- Exam:
  - increased WOB, moderate distress
  - Intense redness, erosions on hands
  - Underweight

- X-ray: bilateral pneumonia

Are there some red flags here?
Given concerns of a possibly coercive relationship between the parents and the ‘uncle’ what are the primary concerns of the medical provider?
Medical Evaluation of Suspected Victims

• Special concerns:
  ▪ Safety
  ▪ Trauma-informed care
    ▪ Consider victim behavior in context of trauma
    ▪ Minimize stress and re-traumatization
  ▪ Interpreter training, etiquette
  ▪ Cultural differences
  ▪ Infections uncommon in U.S.
What Questions Would You Ask?

• Did anyone arrange your travel to America?
• Did you or your family borrow or owe money to anyone who helped you come to America?
• Have you ever been pressured to do anything you didn’t want to do to pay back the debt?
• Does anyone where you work make you feel scared or unsafe?
• Tell me about your job conditions (hours, breaks, pay, safety, duties)
• Have you ever felt you could not leave the place where you work?
• Did anyone ever keep your identification (passport, visa, etc.)?
• Are you free to come and go from your home as you please?
This is what the parent tells you…

- Employment agency promised agricultural work
- Sold all their belongings
- Promised fair wage, 8 hour day, school for kids
- Papers confiscated, told of new debt
- Lived in camps with guards
- 14-16 hour days
- 6 yo worked: hand burns from pesticides
- No medical care until severe
What do you do about reporting this?

• Follow laws on mandatory reporting
  – Law enforcement
  – Child protective services
• U.S. Immigration and Customs Enforcement (ICE) Victim Assistance Program
  ▪ 1-866-872-4973
• National Human Trafficking Resource Center
  ▪ 1-888-3737-888
• But suppose the child is not being trafficked—only the parents?
What do you do about reporting this?

• If report is not mandatory
  – Seek parental informed consent to make report
  – Be aware of community resources and offer these
  – Offer hotline numbers (US Human Trafficking hotline and ICE hotline)
  – Need parental consent to make referrals

• Consider safety (uncle is present)
  – Arrange secure transfer to victim service agency
  – Law enforcement protection
Global Sex Trafficking
Pre-Trafficking Conditions

• Typically hard economic conditions
• Gender bias
• May have experienced violence, abuse
• May be lured by promises of romance, work, better life
• Parents may or may not know truth

• Katerina….what were her conditions?
Conditions During Exploitation

- Variable degree of violence
- Psychological manipulation
- “Happy trafficking”
- May be severe deprivation
- Number of clients: few to ~50 or more

- Katerina and Arnov...
Conditions During Exploitation

- Extreme, constant stress
- Abuse
  - Physical
  - Sexual
  - Emotional
- Use of drugs/alcohol
- Pervasive uncertainty
- Lack of control
- Economic manipulation

Zimmerman, 2006, Silverman, 2011
Destination Stage - Economic Exploitation

• Debt bondage
  ▪ Initial transport
  ▪ Expenses related to travel
  ▪ Basic necessities, health care
• Control victim’s money
• Resell victim, renew debt
• Quotas
Suppose Katerina Came To Your Clinic/ED

- Man hanging around outside
- CC: physical assault
- What’s the first thing you need?
- Vague history of ped vs auto incident
- What do you do?
  - How build rapport?
  - What questions do you ask?
- Eventually Katerina discloses situation
Katerina

• Physical exam:
  ▪ Bruising to back, upper arms, lip
  ▪ Chipped tooth
  ▪ Contusion to right kidney
  ▪ Chlamydia positive; HIV, other STI & pregnancy negative

▪ Once you treat her, what do you do?
  ▪ Reporting, referrals?
  ▪ What about the guy lurking outside?
Complex Needs of Victims

• Housing
• Food, clothing, etc.
• Interpreter services
• Emotional support
• Mental health care
• Legal advocacy
• Case management
Complex Needs of Victims

• Immigration assistance
  – Contact professionals who can assist with applications

• Language training

• School enrollment

• Life skills and job training
Integration/Re-integration

• **Integration** challenges:
  - Language, cultural barriers
  - Discrimination as minority, ‘prostitute’
  - Social isolation (no family, friends)
  - Legal issues
  - Fear of trafficker

• Re-trafficking common
Integration/Re-integration

• **Re-integration** challenges:
  - Poverty, extreme conditions at home
  - Poor quality medical/mental health care
  - Abuse, neglect, dysfunction, stress at home
  - Failure to provide for family
  - Ostracism by family, community
  - No longer ‘fit in’

• Re-trafficking common
Trafficking in Body Parts
 Trafficking body parts *separate from the victim*

- Not included in U.N. protocol
- No internationally accepted definition

“Transportation or movement of a body part, either across a border or within a country for the purpose of sale or commercial transaction is considered trafficking body parts.”

Human Rights League, Mozambique
Human Rights League, Mozambique

- South Africa and Mozambique
- Interviews of 429 victims, witnesses, police and traffickers
- 14 month study period
- >2 events per month
Teeth
Lips
Breasts
Liver
Hands
Head
Eyes
Heart
Genitalia
Feet
Muti

- Traditional medicine
- Witch doctors corrupt muti
  - Incorporate body parts into treatment
  - Treat ailments, help bring wealth, good business, curse enemies
  - Belief: more powerful when human body parts are from living children
  - 3rd person involved
- Where does witchcraft come from??
Just pretend for a second...

- You are a young doctor in a small village in Mozambique. One day, three men run into the clinic, holding a young boy of ~8 years who is bleeding profusely from his face and genitals. They tell you they found him in a ditch by the side of the road. The boy is unconscious, has no palpable pulse, and agonal respirations that cease soon after arrival. The medical provider realizes his eyes have been cut out and his penis and testicles removed. Despite efforts to resuscitate him the child dies within minutes.
What could you do?

• As the foreign village doctor, what could you do?
  – As an ‘outsider’ what challenges to you face?
  – How would you overcome them?

• As a U.S. doctor, half a world away, what could you do?
Conclusions

• International trafficking complex problem with multiple root causes

• Multiple steps in process, with ongoing trauma

• Victim needs are extensive, services limited

• Health care provider has unique opportunity, but also heavy responsibility
Resources
## National Referral Organizations

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<th>Organization</th>
<th>Contact info</th>
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</thead>
<tbody>
<tr>
<td>Polaris Project (policy, training, advocacy, National Resource Center)</td>
<td><a href="http://www.polarisproject.org">www.polarisproject.org</a> 1-888-373-7888 202-745-1001 (office number)</td>
</tr>
<tr>
<td>National Human Trafficking Resource Center Hotline</td>
<td>(1-888-3737-888) Report tips, receive technical assistance, operates 24/7.</td>
</tr>
<tr>
<td>US Immigration and Customs Enforcement</td>
<td>(1-866-872-4973) Interpreter, legal and victim services for transnational victims</td>
</tr>
<tr>
<td>Shared Hope International (training, research, advocacy, policy)</td>
<td><a href="http://www.sharedhope.org">www.sharedhope.org</a> 1-866-HER-LIFE</td>
</tr>
<tr>
<td>Organization</td>
<td>Contact info</td>
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<tr>
<td>----------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>National Center for Missing and Exploited Children (search for missing</td>
<td><a href="https://www.missingkids.com">website</a> 1-800-THE-LOST (National Hotline, 24/7)</td>
</tr>
<tr>
<td>children, cybertipline, training, collaboration)</td>
<td><a href="http://www.missingkids.com/CyberTipline">CyberTipline</a> (report possible exploited child)</td>
</tr>
<tr>
<td></td>
<td>703-224-2150 (office number)</td>
</tr>
<tr>
<td>National Children’s Advocacy Center (training, advocacy, find other CAC’s)</td>
<td><a href="https://www.nationalcac.org">website</a> <a href="https://www.nationalcac.org/locater">locater</a> (find local CAC)</td>
</tr>
<tr>
<td></td>
<td>256-533-KIDS (5437)</td>
</tr>
<tr>
<td>Girls Educational and Mentoring Services (GEMS) (National)</td>
<td><a href="https://www.gems-girls.org">website</a></td>
</tr>
<tr>
<td>Office of Refugee Resettlement, Anti-Trafficking in Persons (US Dept. of</td>
<td><a href="https://www.acf.hhs.gov/programs/orr/programs/anti-trafficking">website</a></td>
</tr>
<tr>
<td>Health and Human Services) (National)</td>
<td></td>
</tr>
<tr>
<td>Child Welfare Information Gateway (National)</td>
<td><a href="https://www.childwelfare.gov/responding/human_trafficking.cfm">website</a></td>
</tr>
<tr>
<td>National Child Traumatic Stress Network (Mental Health Resources) (National)</td>
<td><a href="https://www.nctsn.org/resources/public-awareness/human-trafficking">website</a></td>
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</tbody>
</table>
## Referral Organizations in Georgia

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<tr>
<th>Organization</th>
<th>Contact info</th>
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</thead>
<tbody>
<tr>
<td>Division of Family and Children’s Services (reporting of CSEC)</td>
<td><a href="http://www.dfcs.dhr.georgia.gov">www.dfcs.dhr.georgia.gov</a> 1-855-GA CHILD (1-855-422-4453)</td>
</tr>
<tr>
<td>Georgia Cares (system of care for victims)</td>
<td><a href="http://www.gacares.org">www.gacares.org</a> (404) 602-0068</td>
</tr>
<tr>
<td>Children’s Healthcare of Atlanta (medical exams, forensic interviews, behavioral health)</td>
<td><a href="http://www.choa.org/childprotection">www.choa.org/childprotection</a> • ED for acute cases • Scottish Rite (non-acute): (404) 785-3820 • Hughes Spalding (non-acute): (404) 785-9930</td>
</tr>
<tr>
<td>Child Advocacy Centers of Georgia (find other CAC’s in GA)</td>
<td><a href="http://www.cacga.org">www.cacga.org</a> (770) 319-6888</td>
</tr>
</tbody>
</table>
Presented By

Children’s Healthcare of Atlanta

My contact info:

jordan.greenbaum@choa.org

404-785-3829

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References


References


• Fellows S, Human Rights League in Mozambique. Trafficking body parts in Mozambique and South Africa. 2010.

References

References


References


• Zimmerman C. Stolen smiles: A summary report on the physical and psychological consequences of women and adolescents trafficked in Europe. London School of Hygiene and Tropical Medicine; 2006.
Thank You!

Please help by sharing your knowledge of child sex trafficking with others.

If you have not already done so, please register for other webinars in this series: www.choa.org/csecwebinars

- Introduction to Child Sex Trafficking for Healthcare Professionals
  - Special Topics on Child Sex Trafficking: Victims, Pornography and Legal Response
  - The Demand Side: Traffickers, Gangs, and Buyers
- Child Sex Trafficking and Commercial Sexual Exploitation: The Medical Evaluation of Victims
- Using a Victim-/Survivor-Centered Approach When Working with Trafficked Youth