

WHY IS IT AN EMERGING ISSUE?

As the world is moving towards more industrialization, political instability and widening gap between rich and poor, human trafficking can be predicted to increase in the future which has detrimental health consequences. Though some efforts are carried out on sex trafficking, little is explored about the health consequences of trafficked men, women and children for exploitation in agriculture, construction, contract cleaning and domestic services.

HUMAN TRAFFICKING

An emerging global health problem

By Dinesh Neupane and Per Kallestrup

WHAT IS HUMAN TRAFFICKING?

The protocol to prevent, suppress and punish trafficking in persons of the United Nations defines human trafficking as:

“the recruitment and movement of individuals - most often by force, coercion or deception - for the purpose of exploitation” (1).

It is a grave violation of basic human rights, which is often associated with extreme violence and a range of physical, mental, and sexual health consequences (2). Every year, thousands of men, women and children fall into the hands of traffickers, in their own countries and abroad.

As consequences of human trafficking, children are coerced into becoming soldiers, sold for sex or doing very hard labor. Women and girls are being trafficked for exploitation, prostitution, and marriage or forced into domestic labour.

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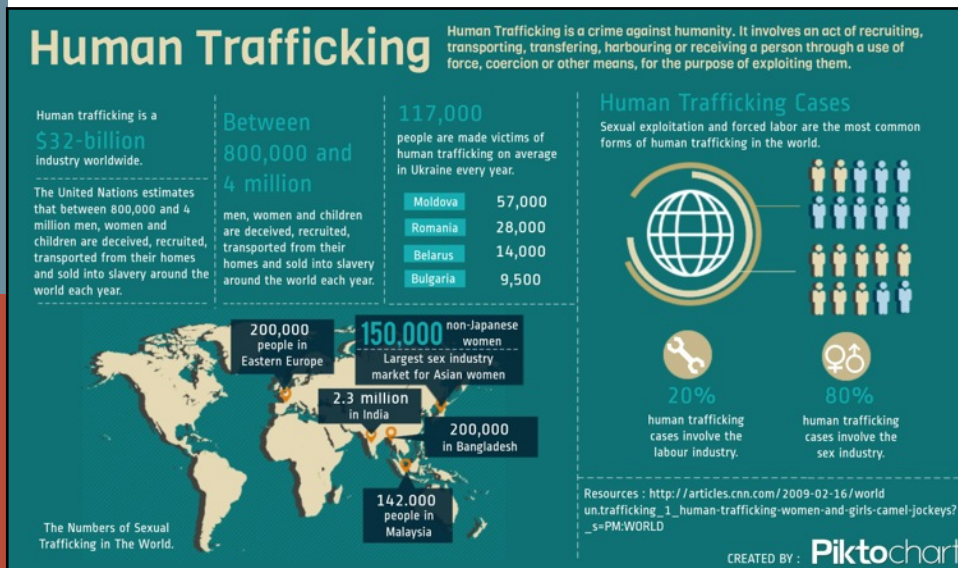
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Men, trapped by debt, slave away in mines, plantations, or sweatshops (3).

Whatever the form of human trafficking; the victims of this crime are exploited and the consequences touch every element of a society. Virtually, it affects every region of the world and generates tens of billions of dollars in profits for

criminals each year.

It is dynamic, adaptable, opportunistic and like many other forms of criminal activities, it takes advantage of conflicts, humanitarian disasters and the vulnerability of people in situations of crisis (3).



Initial anti-trafficking policies and programs focused on women and girls trafficked for forced sex work. However, little is explored about the consequences of trafficked men, women and children for the exploitation in agriculture, construction, contract cleaning and domestic services (4).

WHAT IS THE GLOBAL SITUATION?

Given the definitional imprecision surrounding “trafficking” and the difficulty of logically separating it from several other types of migration, precise figures at the global or even local level remain elusive (5).

Reliable data on trafficking are difficult to obtain owing to its illegal, often invisible, nature; the range and severity of trafficking activities; and variations in how trafficking is defined (6). Moreover, most trafficking is national or regional carried out by people whose nationality is the same as that of their victims further creating difficulties to make reliable estimates.

According to new Global Report on Trafficking which was released in 2014, the most common form of human trafficking is sexual exploitation (53%) followed by forced labour (40%), although this may be a misinterpretation because forced labour is less frequently detected and reported.

Worldwide, 28% of all trafficking in persons were female and almost 30% were children. Out of every three child victims, two are girls and one is a boy. In Africa and the Middle East children comprise a majority of the detected victims (7).



Sexual exploitation has become the most documented type of trafficking, in aggregate statistics. In comparison, other forms of exploitation are under-reported: forced or bonded labour; domestic servitude and forced marriage; organ removal; and the exploitation of children in begging, the sex trade and warfare. Despite lack of precise figures, what we know is that undocumented migration is

occurring at an unprecedented rate and will continue to increase in the future (8).

For example it is estimated that some 50,000 Chinese might be smuggled to the US every year on purpose-bought ships, containers on regular shipping routes and, most commonly, on commercial airlines using both genuine and forged documentation (5).

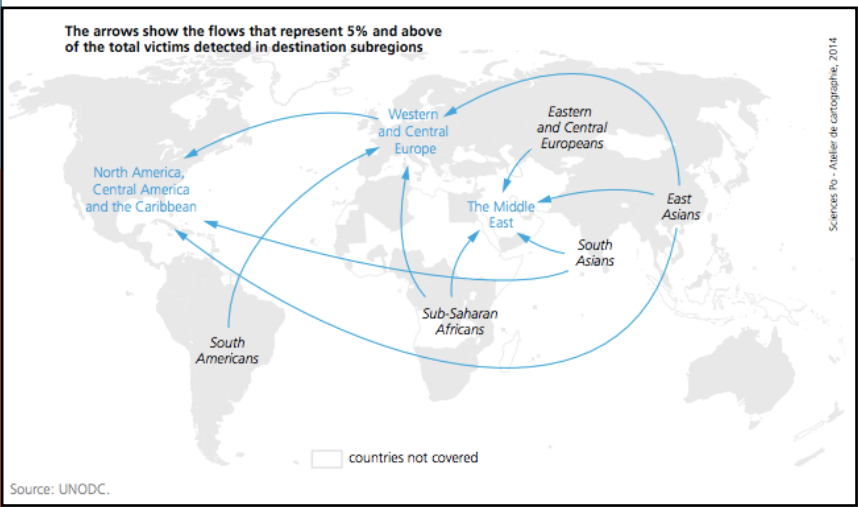
Likewise over 200,000 Nepali sex workers are reported to work in Indian cities, one fifth of whom are supposedly under the age of 16 years (9). Increasing proportions of asylum seekers in Europe are being trafficked (10).

HEALTH AND HUMAN TRAFFICKING

Although trafficking-related abuses have been well-documented, health is a subject that has been largely

neglected in anti-trafficking work, particularly compared to activities in the fields of immigration and law enforcement (11). Despite a dramatic increase in the profile of human trafficking over the past decade, the evidence on trafficked people's experiences of violence and of physical, mental, and sexual health problems is extremely limited (2).

MAIN DESTINATION AREAS OF TRANSREGIONAL TRAFFICKING FLOWS (IN BLUE) AND THEIR SIGNIFICANT ORIGINS, 2010-2012.



The health consequences and potential public health implications of human trafficking have generally received little attention (2). Knowledge about the health risks and

consequences among people trafficked for non-sexual purposes remains scarce (12). Similarly, the health sector has had limited engagement in trafficking dialogues and published literature on health and trafficking in persons, particularly theory, remains scant (11).

Existing evidence suggests that trafficking for sexual exploitation is associated with violence and a range of serious health problems (2). A systematic review on exploring prevalence and risk of violence and the physical, mental, and sexual health problems associated with human trafficking found high levels of anxiety (48.0%-97.7%), depression (54.9%-100%), and post-traumatic stress disorder (19.5%-77.0%) among trafficked persons (2).

Studies also found that a longer duration of trafficking may be linked to higher levels of mental distress and increased risk of HIV infection. Studies from Nepal and India showed that prevalence of HIV among women accessing post trafficking services was almost 32% (13). Thus human trafficking indisputably affects physical, mental and social well-being massively.

Further, providing medical services for people who are still being trafficked or who have escaped can pose many

ethical, safety, and medical challenges. For example, trafficked persons may be sought by traffickers and may be at risk of retribution. They are also likely to present with complex physical and psychological symptoms resulting from a history of repetitive abuse, deprivation, or hazards related to their forced labour. Legal circumstances (for example, participation in a criminal prosecution) or problems related to the provision of care (for example, insecure immigration status) may affect their health. Other complexities include language differences and diverse cultural expressions of ill health (4).

HUMAN TRAFFICKING

- Worldwide 2.4 million people across the globe are victims of human trafficking at any one time
- The evidence on trafficked people's experiences of violence and of physical, mental, and sexual health problems is very limited
- Providing health services for people who are still being trafficked or who have escaped can pose many ethical, legal and medical challenges
- Priority must be given not only to explore the magnitude of problems but also to generate evidence on effective interventions to mitigate the associated physical and psychological damages.

FUTURE PERSPECTIVE

Albeit limited studies have been carried out, all indicate that trafficking is associated with serious health problems and suggest that trafficked people are likely to require a coordinated response by health care providers and other support services. As there is no sign that human trafficking is abating, we need more and better information on trafficked people's health needs and experiences, including evidence on coordinated comprehensive interventions to mitigate the physical and psychological damage (2).

The United Nations Anti-Human Trafficking Protocol that entered into force in December 2005 is not universal, implementation is patchy, and information is incomplete. The elimination of trafficking, no matter how desirable, is unlikely to be realistically achieved through legislation and declarations of intent. Rather, the improvement in the socio-economic status of the population, particularly through the education of girls, is more likely to lead to reductions in its worst forms (5).

It is also essential to understand the nature of human trafficking and its underlying conditions, as well as the profiles of traffickers and victims (3). As a global health professional, it is important to realize that there is an enormous gap in research on the health of trafficked men, trafficked children, and people who have been trafficked for labour exploitation. Priority must be given not only to explore

the magnitude of problems but also to generate evidence on effective interventions to mitigate the associated physical and psychological damages.

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