‘Medical Tourism & Illicit Trafficking of Human Organs’

The World Health Organization (WHO) prohibits the commercial dealing of human organs. Human organ trafficking is also prohibited by law in all countries of the world except Iran. Unfortunately, these laws have not prevented the illegal trade of human organs.

The gap between supply and demand for organ transplants is continually increasing, particularly in countries where cultural or religious norms prohibit organ donation. This lack of legally available organs has given way to black market organ trafficking. Desperate patients, unwilling or unable to wait years on a waiting list, are willing to venture outside of the law to obtain the organs they need. Some are willing to undergo surgery in developing nations (where the cost is significantly lower), while others pay to bring citizens of developing countries to their developed nation to undergo surgery. In

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Sex Empire/Hotels Exploit Sporting Events

In late 2010 the Chow Bros, adult entertainment magnates, put a bid on Auckland’s biggest penthouse apartment at Princes Wharf atop the Hilton Hotel. Their goal was to build a billion-dollar empire in Auckland by opening pop-up brothels in time for the 2011 Rugby World Cup.

They admitted it was not financially viable to run a permanent brothel there. Probably it would later be their residence. Their goal was to take over the Auckland sex industry in order to cash in on the World Cup visitors.

The brothers already had a $100 million business empire in Wellington, which included two adult clubs, Il Bordello and the Mermaid, each of which had a brothel or escort service.

The Mermaid had strippers who swam in a large wall-mounted fish tank and a brothel that charged $240 an hour with a cash discount. Il Bordello charged $280 per hour.

At the Wellington clubs 70% of the customers were tourists. The brothers intended to open as many Auckland brothels as “the market would take.”

(http://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=10693739)
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the latter case, surgeons either allow this illicit behavior, or simply turn a blind eye.

In these underground transactions, the organ brokers charge the recipients of the organs as much as $150,000 for a kidney, while they pay the donor as little as $1000. These brokers capitalize off people of impoverished nations who may have no other way to feed their families. These organ “donors” are often illiterate and jobless, and therefore see no other way in which they can provide for their families. Unfortunately, these sales generally fail to lift the donors out of poverty, and can also have negative results due to lack of follow-up care.

In some underdeveloped nations, organs of executed prisoners are sold on the black market. Some less fortunate people are lured by ruthless organ traders to their deaths, where the traders steal their organs to sell illegally.

In September 2009 WHO put out a bulletin on organ trafficking entitled, ‘Medical Tourism & Illicit Trafficking of Human Organs’. WHO believes that a binding international treaty is needed to combat the issue of human organ trafficking. Measures must be taken to protect victims, to prosecute brokers who exploit the impoverished, and to implement consequences for surgeons who participate in illegal organ trafficking.

Organ transplants were not possible to conduct until the 1970s when pharmaceuticals that prevented organ rejection were introduced to the medical community. Until then, there was no reason for legislation on the matter of organ trafficking, and as a result, there has been little international cooperation on the matter since then.

There are a few countries that have attempted a legal trade of human organs. Prior to 1994, India had a legal human organs market. In the early 1980s, anti-rejection drugs became available to India. At this time, one in every three people in India lived in poverty. These conditions, combined with a lack of medical regulations led to a booming organ transplant industry in India. It was commonplace for the impoverished to willingly sell their organs to provide for their families. The recipients of these organs would be wealthy elite, generally from foreign countries. During this time period, India, along with China, became an international hub for organ (mostly kidney) transplants. These loose medical standards, however, led the government to pass the Organ Transplant Laws in 1994, which criminalized financial transactions in exchange for human organs. The black market organ trade, however, survived this legislation, and organs remain readily available in India.

The situation was brought to the public eye in 1995 when Delhi police uncovered a kidney trafficking ring that convinced donors to travel outside of India to have the procedure done. It is believed that hundreds of donors participated in these “kidney tours.”

China also provides a legal market for organ trading, though the Chinese government only legalized the market to deal in organs from executed prisoners, which provide for two-thirds of all organ transplants in the People’s Republic of China. This harvesting of prisoners’ organs, however, cannot provide enough organs for the 1.5 million transfers that are currently needed in China, where approximately 10,000 operations are performed each year. This growing supply and demand gap has led to a burgeoning black market in China. The Chinese government passed a law in 2007 banning organ trafficking and donation to unrelated recipients to combat this black market. Iran is another country that has allowed a legal organ trade to exist within its borders, and is the only country in the world that maintains a legal organ trading system. Iran’s first successful kidney transplant came in 1967, 16 years after the first U.S. kidney transplant. Up until the early 1980s, Iran, like most other countries, relied on dialysis for the treatment of kidney disease. The Iranian government, however, began using its medical insurance programs to pay for kidney transplants as soon as the pharmaceuticals became available in the 1980s because of the expense of dialysis and the economic collapse after the 1979 revolution. In 1988, the Iranian government legalized the coverage of transplants from unrelated donors, which resulted in fewer patients on the organ recipient waiting list. The waiting list for kidneys was eliminated in Iran in 1999.

There are many countries throughout the world that are considered major hubs of organ trafficking, including Egypt, Brazil, South Africa, Indonesia, China, the Philippines, Columbia, Nigeria, Iraq, Pakistan, Iran, and Israel. Israel is generally regarded as the most notorious of these countries. According to a BBC report in 2001, Israel buys more kidneys per capita than any other country in the world, though they have one of the lowest donor rates (due to religious customs). Nancy Scheper-Hughes, founder of the

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organization ‘Organ Watch’, claims that Israel “is at the top” of the organ trafficking market, and that “It has tentacles reaching out worldwide.” Scheper-Hughes describes the Israeli organ trafficking system as a pyramid system with brokers, doctors, bank accounts, translators, and recruiters all over the world. They even have a network of travel agents to secure visas for donors. It is believed that the Israeli organ trafficking syndicate has ties with surgeons in many countries, most notably Turkey, Moldova, Estonia, Russia, Georgia, Romania, Brazil, and New York City. Israel did not pass legislation against human organ trafficking until 2008, though the Israeli health system subsidizes those who participate in “transplant holidays.” Scheper-Hughes also claims that the Israeli Ministry of Defense is directly involved in the illicit organ trade.

Currently, there is little differentiation in international law between human organ/tissue/cell trafficking and the trafficking of human beings for the purpose of organ transplants. Internationally, the U.N., the World Medical Authority, and the Council of Europe lead in human organ trafficking study and legislation. Still there is not an abundance of accurate information.

Many believe that non-governmental organizations should take more action by influencing governments to sign the UN Convention Against Transnational Organized Crime (2000), which ultimately protects humans or their organs from being trafficked. The Convention also calls for the enforcement of education in certain developing countries, to keep the people aware of dangers associated with the practice. Developing countries want a law preventing international travel for the purpose of surgical operations, which would make sure that people from the impoverished areas are not exploited for the benefit of rich foreigners.

Nevertheless, some countries believe that organ trafficking and ‘medical tourist’ practices should be legalized. By doing so, health professionals could regulate the practice so the proper procedures can be practiced, legalizing an already thriving economic venue. A universal code of international health care would lower mortality and disease rates due to unsafe illegal medical practices.

Questions for Consideration:

• Does U.S. climate encourage or discourage the illicit trafficking of organs?
• What history of ‘medical tourism’ is there in the U.S.?
• What do you think should be done to prevent these practices?
• What steps have been taken towards these issues already?
• What laws would you establish and initiate to better the health of the international community relating to this topic?

Intersection of Organ Trafficking & Human Trafficking

In 2008, the Council of Europe and the United Nations prepared a ‘Joint Study on Trafficking in Organs, Tissues and Cells (OTC) and Trafficking in Human Beings for the Purpose of the Removal of Organs’ in order to distinguish between trafficking in OTC and human trafficking for the purpose of organ removal. The Joint Study, while focusing on the former issue, noted:

• Trafficking in human beings for the purpose of organ removal is a small part of the bigger problem of trafficking in OTC.
• There is widespread confusion in the legal and scientific community between “trafficking in OTC” and “human trafficking for the purpose of the removal of organs”.
• Solutions for preventing the two types of trafficking should be different because the “trafficked objects” are different: in one case the “organs, tissues and cells” and in the other case the “person him/herself” who is trafficked for the specific purpose of removing his/her organs.

The main conclusions and recommendations of the Joint Study include the following:

• The need to distinguish clearly between “Trafficking in OTC” and “Trafficking in human beings for the purpose of the removal of organs”.
• The principle of the prohibition of making financial gains with the human body or its parts should be the paramount consideration in relation to organ transplantation.
• The need to promote organ donation and establish organizational measures to increase organ availability.
• The need to collect reliable data on trafficking in OTC and on trafficking in human beings for the purpose of organ removal.
• The need for an internationally agreed definition of “Trafficking in organs, tissues and cells”.

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The similarities between trafficking in human beings and the purpose of the removal of organs is included in the definition of trafficking in human beings in the Council of Europe’s Convention on Action against Trafficking in Human Beings’ [CETS No. 197] and in the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children, Supplementing the United Nations Convention against Transnational Organized Crime.’ Indeed, the definition of human trafficking in both legal instruments explicitly states that exploitation also includes the removal of organs.

The similarities between trafficking in OTC and human trafficking include the root causes, which are mostly the same: shortage of organs to meet demand for transplantation, inequalities in health care and poor economic and other conditions that put persons in vulnerable situations. They often therefore end up finding it hard not to agree to take part in the proposed activities and (seemingly) to consent – however comprehensive, detailed and correct their knowledge about what awaits them might be. Selling an organ sometimes seems to be the only way out of a miserable economic situation. In addition, some individuals are in family or cultural relationships where other people decide what happens to them. Those exploiters either offer or deliver them to traffickers for sexual or labor exploitation or to brokers or to hospitals involved in illegal organ transplantations.

The consequences for the individuals are also similar: they face stigmatisation and discrimination in their communities for “what they have done” or “what has happened to them”. When they return to their own environment they have to live with the fact that other people there know that they have sold (part of) their body or that something (their sexual integrity or organs) has been taken from them involuntarily – both of which are morally sensitive issues. They face long-term consequences regarding their physical health and bodily integrity. In the case of the removal of organs, this results from the intervention, as many of the donors encounter medical problems, in particular if there is no follow-up medical care, as often applies in trafficking cases. These persons also face consequences in psychological terms: they are often traumatised and feel ashamed. (Joint Study, pg. 53)

There is possibly a high number of unreported cases for both crimes. This is because there are huge profits and rather low risks for the perpetrators. Victims/donors are also ashamed and frightened to report cases. Recipients of organs remain silent and others who know about the interventions are often directly involved in the trafficking offenses. Thus it is very difficult to investigate these crimes. The numbers and trends available are therefore mostly based on estimates and rumors, and remain incomplete.

The term “transplant tourism” fails to capture the ethical issues involved. Reported cases describe either the potential donors traveling to the recipient’s country or both the donor and recipient traveling to another country where the transplantation procedure is then performed.

Most of the cases described concerning organ trade and transplant tourism are either cases of trafficking in organs or cases of human trafficking for the purpose of organ removal. The procedures are usually facilitated and organized by intermediaries, either in the countries of origin of the potential recipients or in the destination countries. Recipients are offered the possibility of transplantation in different ways, even by healthcare professionals in charge of them. Recently, many of these “services” have been offered openly through dedicated websites in the form of “packages” including the travel and the transplantation procedure itself. The price of “kidney packages”, for example, may range from US$70 000 to US$160 000. These websites are easily found on the Internet. On the other hand, “donors” are usually, but not always, recruited in their countries of origin. There have been cases reported in which donors are recruited and transferred to other countries, where the organ extraction and the transplantation procedure takes place. According to the various sources, the intermediaries involved in this entire process have included individual agents, travel agencies, hospitals, healthcare professionals and even embassy officials. It should therefore be emphasized that underlying corruption is present in many countries. Sometimes, previous victims of trafficking are involved in the recruitment of donors. In many instances, family members act also as intermediaries in such recruitment when they have any kind of power to do so. Notably, it has been repeatedly denounced that donors are not sufficiently or completely informed about the procedure, if any information is provided at all. It seems also a frequent practice that the donor is not paid as initially promised. The amount received in general terms is quite low compared to what was paid by the recipient, the majority going to the professionals and intermediaries involved. Hence, abuse, fraud and coercion are common.

Organ exporting countries are basically located in Africa, Asia, eastern Europe and South America. In contrast, many western European and North American countries and some rich Asian countries, among others, are currently known to have nationals traveling abroad every year for
In April 2012 representatives from over 100 governments and several dozen non-governmental organizations gathered in Vienna for a meeting of the UN’s Commission on Crime Prevention and Criminal Justice and the UN World Tourism Organization (WTO). The agencies joined forces to condemn human trafficking in tourism, whether for the sex trade, hotels or restaurants.

About one billion people, a seventh of the world’s population, are expected to travel abroad in 2012. While this expansion drives economic growth, job creation and development, there is evidence that the tourism infrastructure is also being used for the exploitation of and trafficking in persons, where children are especially vulnerable.

Victims of trafficking, often enslaved for sexual purposes, can also be found in kitchens or cleaning guesthouses, restaurants and bars. Tourism infrastructure can, in turn, create markets for forced and exploitative begging and street hawking. Even organs from victims of trafficking are used today to attract people who need a transplant.

Mr. Fedotov, head of the UN Office on Drugs and Crime, said the tourism sector should play a vital role in preventing human trafficking linked to tourism. Codes of conducts for tourism companies are developed (based on the UN WTO Global Code of Ethics for Tourism approved by the UN General Assembly in 2001) and laws enacted that allow for the prosecution in their homeland of tourists, engaging in sexual conduct with children.

The Code of Conduct for the Protection of Children from Sexual Exploitation in Travel and Tourism is an initiative funded by UNICEF and supported by the UN WTO.

In India, for example, the Ministry of Tourism, UNODC, the private sector and Save the Children have jointly developed and adopted a national Code of Conduct for Safe and Honourable Tourism, based on the Global Code. Hoteliers and tour operators have pledged to abide by the Code to make sure that no one involved in the hospitality industry is forced to use drugs or is sexually exploited.

Hotel companies are carrying out awareness campaigns and providing vocational training for trafficked persons. Marriott International has taken a comprehensive approach since 2006 to such human rights abuses through policy commitments and staff training. Marriott also runs community outreach programs which help vulnerable young people, including rehabilitated victims of human trafficking, providing them with new life opportunities and training skills at their hotels.

Hilton Worldwide signed the Code in 2010 after Chinese police found a brothel operating in an independently owned karaoke club in a Hilton hotel in southern China, according to the Washington Business Journal.

In 2011 Wyndham Worldwide committed to joining the Code vowing to improve its staff training and procedures after reports of gang-led child prostitution rings in California hotels drew media and activist attention to the company’s hotels. Wyndham’s hotel system consisted of approximately 7,220 properties and 612,900 rooms, as of June 2011.

According to Beathe-Jeanette Lunde, Exec. VP, Carlson includes a video clip from the documentary ‘Not my Life’ as well as an internal video showing scenarios employees might encounter. “After each situation, we stop and discuss with employees how to deal with a possible situation the video describes. The program also includes a message from Carlson Chair, Marilyn Carlson Nelson, and her view and expectation to our employees.”

“Not My Life” is a part of CNN’s Freedom Project: Ending Modern Day Slavery and received support from The Carlson Family Foundation. In 2010, Carlson trained 158 Radisson hotels and 447 corporate employees in the U.S. in a program called ‘Living Responsible Business’. One of the modules is dedicated to creating awareness of child exploitation and child trafficking.

Dr. Thomas Mayr, National Expert in the Austrian Federal Ministry of Economy, Family and Youth, highlighted an initiative by Germany, Switzerland and Austria to fight cross-border child abuse with a tri-national awareness campaign on child sex tourism and pornography, while reinforcing networks that protect minors.

By enhancing their public image, ethical companies and destinations benefit from more business. “We must raise awareness of human trafficking in the tourism sector. Consumers should be able to make an informed choice about where they choose to spend their money and crucially, how it will be used,” said Mr. Fedotov.

Advocacy

U.K. & U.S. Investors Call for Anti-Trafficking Efforts Before the 2012 London Olympic Games

In March 2012, a coalition of 37 U.S.- and U.K.-based socially responsible investors representing $58 billion in assets under management, children’s rights, and investor-focused organizations sent letters to 32 companies, asking that they work against human trafficking in advance of the 2012 Summer Olympic Games taking place in London July 27 to August 12.

The initiative focuses on the London tourism industry and key sponsors of the 2012 Olympic Games that may be at a higher risk for on-premise child and labor trafficking and that have the potential to help raise public awareness of these crimes.

The coalition called for immediate and transparent actions by these companies to train staff and suppliers to recognize and avoid the trafficking of workers into slavery, to monitor their supply chains, and to examine hiring and recruitment practices.

(For information on the key members of the coalition and an action to take, see ‘Investor Coalition’, pg. 8.)

"With the eyes of the world trained on the 2012 Olympic Games, companies are well-positioned to take steps to prevent trafficking. With the help of our allies in the U.K., our initiative can help focus attention on this global problem." Julie Tanner, Asst. Director of Socially Responsible Investing at CBIS.

Companies in the tourism sector that acknowledged the coalition’s letter include: Accor, Best Western, British Airways, Choice Hotels, Carlson, Hilton, Hyatt, InterContinental Hotel Group, Starwood, Thomas Cook, and Whitbread. Olympic sponsors that acknowledged the letter include: Adidas, ArcelorMittal, BMW, Coca-Cola, John Lewis, Kraft Foods, McDonald’s, Next, Procter & Gamble, Rio Tinto, Sainsbury’s and Samsung. Non-responding companies will be noted in a future press release with general trend analysis of the responses.

“We are very heartened that the vast majority of companies that received the letter will be taking action. Companies that already have formal anti-trafficking programs in place are showing genuine leadership, including conducting training sessions for staff and for suppliers, to make sure human trafficking will not be a blight on this summer’s games and to help end this practice once and for all.” Lee Coates, Chair of The Ecumenical Council for Corporate Responsibility.

To impact future Olympics, select members of the coalition sent a letter urging the International Olympic Committee (IOC) (www.iccr.org/issue/subpages/pdf/IOCLetterRogge2.pdf) to require that all Olympic corporate sponsors, suppliers, contractors and host cities take concrete steps to eliminate commercial sexual exploitation of children and labor trafficking.

“We expect the IOC going forward to incorporate clear guidelines on trafficking and slavery that include public reporting of results.” Rev. David Schilling, director of Human Rights, Interfaith Center on Corporate Responsibility.

Fiona MacTaggart, Member of Parliament, introduced a bill in the UK House of Commons in February 2012. The bill was modeled on The California Transparency in Supply Chains Law and would require retailers and manufactures in the UK to disclose the steps they are taking to eradicate slavery and human trafficking from their direct supply chains.

“The problem of commercial sexual exploitation of children and its connection with the tourism trade is extremely complex. While the tourism industry is not accused for encouraging this un-wanted phenomenon, it has been asked to collaborate and to react against the use of its networks and establishments for this purpose.”

“I would rather see the global tourism industry actively working to eradicate child sex tourism than for everyone to line up, sign a document and feel that by doing that, their responsibility ends. The fight against this scourge will probably never be won, but actions always speak louder than words. Hotels are the tourist accommodation mainstays in most global destinations, and it is therefore essential to confront this possibility head on, no matter how distressing.” Bill Ford, Group Operations Director for Cape Town, South Africa-based Protea Hospitality Corporation.

Protea is in the process of becoming a member of the Code.
Nivaldo Inacio da Silva has a word to describe what it’s like to wake up at 6 a.m., strap on a hardhat and endure suffocating 100-degree heat on the construction site of one of Brazil’s new 2014 World Cup soccer stadiums: “Freedom.” Da Silva, age 44, is one of 25 men at the site who, in previous jobs, worked in conditions that were classified as slave labor by the Brazilian government. They are now helping to build the stadium in the western city of Cuiaba as part of a state-sponsored program that trains former ‘slaves’ in skills like carpentry and helps insert them into the regular workforce.

Like several of the men, Da Silva said he was lured into accepting a job as a farm hand and then forced to pick cotton seven days a week from dawn to dusk in return for pay he never received. He had to forage or hunt for food. He said he was unable to escape because of the farm’s isolation. He left only after a co-worker managed to flee and alert the authorities.

Now he and the other workers say they are proud to help in Brazil’s preparations to host the 2014 World Cup. “I’m happy. I have the freedom to do what I want now,” said Da Silva, who lives with the other workers in temporary on-site housing provided by the company and has weekends free. “Before, we had to sleep in the jungle. Now, we have a good work schedule, good food. There is nothing to complain about because everything got better in our lives.”

The story of how Da Silva and the others arrived at the site is rooted in Brazil’s economic challenges, past and present. Brazil imported more African slaves than any other country in the Americas, mainly to cut sugar cane. While slavery was formally abolished in 1888, there are still pockets of Brazil, especially on farms and in areas where the Amazon jungle is being razed, where working conditions are frighteningly similar to those in the 19th century. Even in Brazil’s biggest and most modern city, Sao Paulo, authorities often discover workers in slave-like conditions in sweatshops producing textiles and clothes.

More than 2,600 people were ‘rescued’ from slave labor in 2010, the labor ministry says. Brazil’s government has made the problem a top priority over the past decade, and expanded the definition of slavery in 2003 to include both forced labor and degrading working conditions, a broader definition than many countries, says the International Labor Organization.

Government programs such as the one that placed the workers at the Cuiaba stadium, which included six months of on-site training, are critical to ensuring that slavery ultimately disappears for good in Brazil.

Valdiney Arruda, the superintendent at the labor ministry in Mato Grosso state, said, “The biggest challenge is often to prove to these people that they are capable” of working dignified jobs. “How do you leave behind a whole lifetime in just six months? ... It’s not easy, but they’re doing it.”

When the men first arrived at the stadium site last April, all of them were functionally illiterate, said Simone Ponce, a spokeswoman for the consortium of companies building the stadium. Many were unaccustomed to following even basic instructions, and struggled at first in a classroom setting as teachers tried to teach them basic reading skills, construction techniques, and how to manage their money. “Some of them got frustrated, and started saying things like ‘Being a servant was OK for me,’” Ponce said. “Others were just afraid because they had never been treated well by an employer.” Still, they stuck with it. Of the 26 who enrolled in the program, only one dropped out and went back home to Brazil’s northeastern region.

The men said they quickly saw the value of what they were being taught. Durval Fernandes da Silva, 38, said he was one of 20 siblings and never had the opportunity to go to school. “All I did (before) was cut sugar cane,” he said. “Now I have a job. I’ve learned a lot and I learn more every day.”

The program has been just as useful for the companies. Many Brazilian cities face a severe labor shortage as years of robust economic growth have pulled workers away from hard labor such as construction. The problem is so pronounced in Cuiaba, which is experiencing a boom from soy, that the consortium has been forced to alter its plans by using more preassembled pieces in the stadium’s construction.

“We’ve trained these men ourselves, and as a result we’ve received a better quality of labor,” Ponce said. “They’re like family now, so they’re more likely to stay than others might be. It’s almost like a human resources program.” “What’s happened here is not charity,” said Arruda. “It’s an exchange. The company gets labor, and society gets productive people.”

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Christian Brothers Investment Services (CBIS)

CBIS is a leader in Catholic socially responsible investing (SRI) with approximately $4.0 billion in AUM for more than 1,000 Catholic institutions worldwide, including dioceses, religious institutes, educational institutions and health care organizations. CBIS strives to integrate faith-based values into the investment process through a disciplined approach to socially responsible investing that includes principled purchasing (stock screens), active ownership strategies (proxy voting, dialogues, and shareholder resolutions) and community investment. (www.cbisonline.com)

Interfaith Center on Corporate Responsibility (ICCR)

Currently celebrating its 40th year, ICCR is the pioneer coalition of active shareholders who view the management of their investments as a catalyst for change. Its 300 member organizations with over $100 billion in AUM have an enduring record of corporate engagement that has demonstrated influence on policies promoting justice and sustainability in the world. (www.iccr.org)

FairPensions

FairPensions is a registered charity that promotes responsible investment practices by pension providers and fund managers. Bringing together leading charities, trade unions, faith groups and individual investors, FairPensions aim is to catalyze a shift at each level of the investment chain, so that Responsible Investment becomes the norm. FairPensions is recognised in the UK as the leading NGO that monitors and engages with the investment industry. (www.fairpensions.org.uk)

Action: ‘Celebration Without Exploitation’

To involve the public, the Coalition has launched a ‘Celebration Without Exploitation’ website (http://www.iccr.org/issues/subpages/olympics_home.php) that includes links to fact sheets, anti-trafficking materials to download and bring to hotels, and letter-writing campaigns to join, as well as tools for investors and companies that are working to end these egregious human rights abuses.

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purchased organs (“organ-importing countries”). Estimates have been carried out regarding the magnitude of these various practices. On a global level, it is estimated that up to 5%-10% of kidney transplants performed annually around the world are the result of trafficking. According to the Global Observatory on Donation and Transplantation’s estimate of overall activity of about 68,000 kidney transplants a year, this would mean that 3,400-6,800 kidney transplants are being carried out on the basis of these which is obviously a quantitatively significant figure, although still possibly an underestimate. (Joint Study, pg. 57-58)

Informative Web Sites:

(Each contains information related to human trafficking)

“Declaration of Istanbul on Organ Trafficking”
http://www.declarationofIstanbul.org

Council of Europe
http://www.coe.int/trafficking

Register to donate organs at the time of death
http://www.donatelife.org

Christian Brothers Investment Services (CBIS)

Letter asking hotels to take action against commercial sexual exploitation of children
http://www.cbisonline.com/page.asp?id=1017

U.S. Hotels that signed “The Code”
http://www.thecode.org/index.php?page=6_3#USA

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The workers’ classes ended in January 2012 and they are now considered regular full-time employees, working alongside some 600 others. They earn a salary of $168 (€100) a month - the same as their co-workers and 30% above Brazil’s minimum wage - plus free room and board.

The learning hasn’t stopped, though. Ponce says the consortium is still trying to teach the workers basic things like going to a dentist when a tooth hurts instead of just ripping out the tooth. “We’ve changed the lives of 25 people, and God willing we’ll change the lives of their kids,” Ponce said.

“We’ve learned a lot from them, too.” View a short video in Spanish by theaus-tintimes.com/2012/02/former-slaves-build-brazil-world-cup-stadium/