Awareness Advocacy Action

Anti-Human Trafficking Newsletter ● July 2020 ● Vol. 18 ● No. 7

FOCUS: The demand for organs for transplantation grows each year leading to an increase in the number of people trafficked for organ removal.

Human Trafficking for the Removal of Organs

Pakistani police raid an apartment near the capital Islamabad and release 24 people locked inside. The men and women who had been brought there through deception and threats were waiting to be taken to a clinic. They had heard that one of their kidneys would be removed.

Since the first successful organ transplants in the 1950s, organ transplantation has saved the lives of hundreds of thousands of people worldwide. It is estimated that about ten percent of all organs transplanted globally are commercial transplantations, money is exchanged for the organ. It is not known how many of these organs are removed from persons who have been coerced or tricked into “donating” an organ. An organ “donor” may also be a victim of sex trafficking and/or labor trafficking as well as a victim of organ trafficking.

As stated in the Palermo Protocol of 2000, the basis for most national laws on human trafficking, organ trafficking is defined within the broader definition as: “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.”

While organ trafficking is a form of human trafficking, national and international initiatives against human trafficking have focused on sex and labor trafficking, paying little attention to the trade in organs. However, trafficking for the removal of organs holds a critical place with transnational organized crime groups due to high demand and relatively low rates of law enforcement. The World Health Organization (WHO) estimates that 10,000 kidneys are traded on the black market worldwide annually, or about one kidney every hour. Many countries, along with the WHO, prohibit commercial transplantations and ban physicians from transplanting organs that were obtained commercially. Click here to learn more.

Yet the existing medical consensus prohibits the organ trade, based on the ethical view that human organs are not a commodity to be bought and sold. It is also argued that the trade is inherently exploitative, since it is the poor and vulnerable members of society who sell their organs to the rich. Furthermore, kidney sellers receive only a small fraction of the $100,000-$200,000 typically paid by patients and rarely experience the hoped-for economic improvement. Many, in fact, suffer a deterioration of their health, which further worsens their financial problems, along with a sense of hopelessness and social isolation. And patients might also be disappointed. Given the often-inadequate pre-transplant evaluation and substandard medical treatment, commercial transplantations might yield poor health outcomes, and put patients at a higher risk of surgical complications, infections and organ rejection.
How difficult is it to curb organ trafficking?

Compared with other illicit trades, organ trafficking should be rather easy to curb. Governments are sometimes reluctant to suppress illicit activities that are economically important, such as the trade in drugs or counterfeit goods. But this is not the case with the organ trade that is of little economic significance, financially benefiting a small group of organ brokers and physicians. Furthermore, fighting the organ trade entails limited law enforcement efforts, since it is less hidden and more detectable than many other criminal activities. The prohibited transplantations do not take place in back alleys, but in a few easily identifiable locations: hospitals. The physicians who perform these transplantations can be easily identified, as can the patients who receive the illegal transplants. Before the transplantation abroad, they are on the organ wait list in their own countries; after undergoing the procedure, they must receive continuing care, including immunosuppressive drugs.

Why, then, isn’t the organ trade eliminated?

The problem is a lack of willingness to enforce the law. While a legal prohibition may exist, governments often make little effort to stop the trade. My research identifies several reasons for that. One is that organ trafficking, at first blush, does not look harmful or morally repugnant. Transactions in organs may deceptively seem advantageous to both the organ buyer and seller, although in reality they are far from it. While the notion of buying sex — prostitution — meets widespread disapproval, many people accept the buying of kidneys as a legitimate solution for the shortage of organs for transplantation. Governments also struggle to consider organ-trade participants as offenders, even when they break the law. Physicians, with an aura of respectability, hardly seem like shady criminals; and patients fighting for their lives have the authorities’ sympathy. Cracking down on the organ trade would condemn these patients to dialysis — an excruciating treatment that is also very costly for the health-care system — or, worse, to death.

What fuels the organ trade?

The shortage of organs for transplantation is a persistent worldwide problem: Demand for organs significantly outstrips supply. Consider the following statistics. As of early 2016, 100,791 people were waiting for lifesaving kidney transplants in the United States. Yet in 2014, only 17,107 kidney transplants took place there. That year, 4,761 Americans died while waiting for a kidney transplant. Unable to obtain an organ at home, patients from rich countries might choose to travel to developing countries, where they can buy the organ and have it transplanted. In the developing countries, organ brokers lure poor, uneducated individuals into selling their kidney through the promise of financial gain and a better future. Economic need drives most organ sellers, but in some cases — as in the Pakistani case above — actual coercion is used. Such cross-border form of organ trafficking is known as “transplant tourism.”

Which countries are involved? But wait, why prohibit a trade that may save people’s lives?
Demand for Organs

The global demand for organs far exceeds the global supply. It is estimated that only about 10 percent of those needing transplants receive them, despite the transplantation of almost 107,000 organs annually. It is estimated that a person is added to the transplant waiting list every 10 minutes. As of March 2020, more than 112,000 men, women and children were on the United States’ national transplant waiting list. However, in 2019 only 36,718 transplants were performed in the United States. Each year, the number of people put on the waiting list continues to be much larger than the number of donors.

Patients from rich countries often travel to a developing country, purchase an organ and have it transplanted. In developing countries, people constrained by poverty, lack of job opportunities, and environmental degradation, are persuaded to sell their organs for much needed money. Usually the organ traffickers and brokers make enormous profits but give the organ “donor” little or no compensation. In some cases, actual coercion is used and the organ is surgically removed from the individual without their consent. A person may awaken from a drugged state to find that an organ had been removed.

The buying and transplantation of organs typically take place in developing countries whose hospitals are advanced enough to offer transplant services. Commercial transplant centers originated in India in the 1980s. Since then Pakistan, the Philippines, Egypt, Turkey, Kosovo, South Africa, and China became centers of commercial transplants. Patients in need of organs generally come from Japan, Saudi Arabia, Israel, the United States, and Western Europe.

Medical Problems

There are potential medical problems for any person who donates an organ. Immediate, surgery-related risks of organ donation include pain, infection, hernia, bleeding, blood clots, wound complications and, in rare cases, death. A living donor may also experience long term psychosocial symptoms such as anxiety, depression, regret, and anger. These symptoms may be compounded if the donated organ fails in the recipient.

Extensive medical and psychosocial testing prior to donating an organ is required to assure that the donor is eligible both physically and mentally to donate. With those who are trafficked for the removal of organs such testing is lacking, along with follow up care post-surgery. A trafficked organ can be transplanted to recipients in the most reputable of hospitals or in makeshift operating rooms in houses. For many people who are coerced to sell their organs because of poverty, need to pay a debt, etc., their economic situation may actually deteriorate due to being unable or less able to work as a result of postoperative health problems. All donors, but especially those trafficked for the removal of their organs, often suffer from psychological and social problems.

According to the 2018 update of the Declaration of Istanbul on Organ Trafficking and Transplant Tourism “provision of care for the living donor includes medical and psychosocial care by suitably qualified health professionals throughout the process of organ donation and for any short- and long-term consequences related to donation.” Screening mechanisms should seek to prevent organ trafficking and human trafficking for organ removal while candidates for donation should be made aware of the health risks, and the ethical and legal concerns associated with trafficking activities.

Click here to learn more.
Awareness

International Black Market

Iran
While the buying and selling of organs are illegal in most countries, in Iran it is legal for any Iranian citizen. Iran has established a base price for organs at $4,600 (in 2018). However, even in Iran, the sale of organs means exploitation of the poorest who often go through brokers and are paid an unknown, under-the-table price, which often becomes criminal. Health professionals in Iran are attempting to change the law and to encourage more people to pledge to donate their organs upon their death.

Egypt
At the time he wrote this article Derek Pace was a law student at McGill University. His research interests include maritime security, human trafficking, comparative human rights law, and the American legal and political sectors. He writes about trafficking for organ removal and its connection with mixed maritime migration.

Egypt has been recognized for years as a center of commercial organ transplantation. Located at the northeastern tip of Africa, opposite the Mediterranean Sea from southern Europe, Egypt is the last step before migrants from Africa may board a boat and travel to Europe, which they consider freedom.

By the time they reach Egypt, Africans from Nigeria, Cameroon, Eritrea, Mali, and Côte d’Ivoire are desperate for money. It is this desperation and economic insecurity that organ traffickers in Egypt exploit for profit. Organ traffickers offer these migrants money in exchange for an organ, usually a kidney, telling them that the procedure is safe and an easy way for them to raise money for this final stop of their journey.

Some traffickers take organs by force, kidnapping their victims and drugging them. When they wake up they find they have been operated on and are missing an organ. In a case that was reported to the United Nations High Commissioner for Refugees, a woman fleeing Sudan was kidnapped and drugged. When she woke up several days later, she found that they had taken her kidney. The traffickers threatened to kill her if she told anyone.

The Egyptian organ trafficking network is well established and strongly integrated into society. There have been multiple cases of organ trafficking rings involving dozens of people. In July 2018, an Egyptian court convicted 37 people who were involved in a large-scale organ trafficking ring. Among those convicted were doctors and nurses. Some organs were removed at licensed hospitals.

Due to the vulnerability of migrants in major transit points such as Egypt, the migrant population is especially susceptible to trafficking by those working in the illegal trade of organs.

Click here to learn more.

China
Since the beginning of this century, hospitals in China have been transplanting an estimated 60,000 to 100,000 organs per year. Perfectly matched organs can be obtained in weeks or even days, while in most other countries it often takes months. The availability of organs in China cannot be accounted for by voluntary organ donations.

For decades, an estimated ninety-five percent of donor organs were taken from executed convicts, a practice banned by the government in 2015. However, despite legislative action and public outcry, along with the creation of a virtual registry for organ donors and recipients, the harvesting of prisoner’s organs is still prevalent, although now done clandestinely. Organ traffickers forge paperwork indicating that the person selling their organ was a relative of the organ recipient.

Practitioners of Falun Gong, a spiritual movement established in 1992, have been targeted for arrest, execution, and organ harvesting by the Chinese government who denounces Falun Gong as an evil religion against the government.
Today, Uyghurs, Tibetans, and some Christian sects are being targeted for arrest and incarceration. In December 2017, Human Rights Watch reported that the Chinese government forcibly collected DNA and blood samples from 19 million Uyghurs, with a million Uyghurs imprisoned in concentration camps. Around this time a priority lane labeled as “special passengers/human organs transport lane” appeared in the Kashgar airport of Xinjiang Uyghur for passengers coming to China for a transplant. Passengers generally come from the United States, Canada, Australia, Israel, Japan, Oman, and Saudi Arabia.

In a study published in November 2019, analysis of official deceased organ donation data casts doubt on the credibility of China’s organ transplant reform. The authors found a significant discrepancy with the number of voluntary organ donations in official reports. The authors report that “elaborate efforts appear to have been made to create a misleading impression to the international transplantation community about the successes of China’s voluntary organ donation reform, and to neutralize the criticism of activists who allege that crimes against humanity have been committed in the acquisition of organs for transplant.”

The voluntary system of organ donation operates alongside the continued use of organs from donors who are forced or coerced. The authors also express concern that the large cash payments to poor rural families for their relative’s organs may be considered “financial coercion” by the World Health Organization organ donation guidelines. The authors conclude by stating that “one of the most troubling consequences of the apparent data falsification and apparent continued use of nonvoluntary organs in the official allocation mechanisms is that it impugns the reputations of Chinese surgeons dedicated to the highest standards in ethical transplant medicine, and undermines their efforts at establishing a trustworthy, transparent, and ethical system.”

Click **here** to learn more.

**India**

The number of organ transplantation surgeries in India is growing steadily, with a large number of recipients coming from other countries. Paradoxically, the vast majority of India’s citizens have limited access to essential healthcare.

Dr. Lawrence Cohen is Professor of Anthropology and South & Southeast Asia Studies at the University of California, Berkeley, and has studied organ trafficking in India for many years. As is the case globally, he found that the most transplanted organs in India are kidneys. Transplant surgeries are highest in four major cities: Chennai, Bangalore, Delhi, and Mumbai. Dr. Cohen found that some of the leading transplant surgeons he met consider the selling of organs as a “win-win situation in the particular context of India.”

Those who sell their organs in India come from urban slums as well as from drought-prone farming districts. Dr. Cohen has found that in the urban slums, those who sell their kidney are largely women. Many of the women approach traffickers and offer to sell their kidneys. Most of the money they receive goes into paying off debts. Unfortunately, he found that many of these women eventually fall back into the debt cycle.

Many people in India consider their kidneys as a commodity. Many of the doctors interviewed by Dr. Cohen reported experiences of desperate people approaching them asking for help in selling their kidneys.

There is a growing awareness campaign in India on the need for the donation of organs. With 80,000 deaths on the road annually, the inclusion of the ‘clause of organ donation in the driving license’ can save many lives.

The Government of India has established guidelines to deal with human trafficking for illegal organ removal. These guidelines include measures for the implementation of existing laws, investigation and prosecution of perpetrators, rescue and rehabilitation of victims, and prevention of trafficking. These guidelines also encourage the involvement of Non-Governmental Organizations (NGOs) to help with prevention, rescue and rehabilitation. The ministry has also instituted awards for State Governments, police officers and NGOs for outstanding work done in the anti-human trafficking field around the commercialization of organs.

Click **here** to learn more.
Human trafficking isn’t just about forced labor or sexual exploitation. Organ trafficking is not the same as trafficking for organ removal. Trafficking for organ removal is an individual being trafficked for the purpose of removing their organ(s), whereas organ trafficking is the illegal buying and selling of organs. A trafficked organ could come from a trafficked individual but that is not always the case; they may be two separate crimes. The two terms should not be conflated.

Click here to view a one minute YouTube video.

Awareness

What if you woke up one day and your kidney was gone?

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Click here to view a one minute YouTube video.

Advocacy

A Neglected Form of Human Trafficking

Since the Palermo Protocol was adopted in 2000, public policy regarding organ trafficking has increased and this eventually led to the Declaration of Istanbul in 2008 which defined organ trafficking and transplant tourism and developed best practices to curtail organ transplant commercialization.

In 2017, the Pontifical Academy Summit on Organ Trafficking and Transplant Tourism at the Vatican stated: “Organ trafficking violates the principles of justice, equity and respect for human dignity as it entails not only the sale of organs, but also because it has become a form of slavery that exploits bonded laborers, migrants and refugees fleeing the genocide in their countries, executed prisoners, minors — the destitute and the excluded.”

The Council of Europe adopted a Convention Against Trafficking in Human Organs which went into effect in 2018. It calls upon governments to establish as a criminal offense a broad range of illicit organ- and transplant-related activities. It is the first legal document that provides an internationally agreed-upon definition of trafficking in human organs, identifying the activities that ratifying States must criminalize in their national laws.

As early as 2006, the Anti-Trafficking Law was ratified in Israel, which led to the enacting of the offense of human trafficking for organ removal, punishable by 16 years in prison. This criminal prohibition refers to the “sale or purchase of a person or conducting of another transaction in a person, for the purposes of organ removal, or placing the person in danger to that effect.” There is no need to prove that the person did not agree to the removal of the organ.

The United States and Canada did not include organ trafficking as a form of human trafficking when adopting their national laws on human trafficking. However, in the United States some individual states do include organ trafficking within their state laws on human trafficking.

Click here to learn more.
The Declaration of Istanbul on Organ Trafficking and Transplant Tourism was adopted in 2008 at an international meeting organized by The Transplantation Society and the International Society of Nephrology. In 2010, the document was disseminated to aid professional societies and governments in combatting organ trafficking. The document was updated in 2018 to ensure that it provided clear and current directives for health professionals working in organ donation and transplantation, as well as for policymakers in these fields.

Since the creation of the declaration, over 100 countries have endorsed the principles leading several nations to subsequently strengthen their laws against commercial organ trade and against human trafficking for the purpose of organ removal.

The Declaration emphasizes that organ trafficking and transplant tourism violate the principles of equity, justice and respect for human dignity. The Declaration also acknowledges that transplant commercialism targets impoverished and vulnerable donors, including persons who are trafficked for organ removal.

The following terms have specified meanings in the context of this document. Organ trafficking consists of any of the following activities:

a) removing organs from living or deceased donors without valid consent or authorization or in exchange for financial gain or comparable advantage to the donor and/or a third person;

b) any transportation, manipulation, transplantation, or other use of such organs;

c) offering any undue advantage to, or requesting the same by, a healthcare professional, public official, or employee of a private sector entity to facilitate or perform such removal or use;

d) soliciting or recruiting donors or recipients, where carried out for financial gain or comparable advantage; or

e) attempting to commit, or aiding or abetting the commission of, any of these acts.

In the context of this Declaration, trafficking in persons for the purpose of organ removal is defined 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 the removal of organs.

Travel for transplantation is the movement of persons across jurisdictional borders for transplantation purposes. Travel for transplantation becomes transplant tourism, and thus unethical, if it involves trafficking in persons for the purpose of organ removal or trafficking in human organs, or if the resources (organs, professionals, and transplant centers) devoted to providing transplants to nonresident patients undermine the country’s ability to provide transplant services for its own population.
Advocacy

Indicators of “Donor” Trafficked for the Removal of an Organ

There are “red flags” that members of a transplant team may look for to determine if a potential donor is a victim of human trafficking for organ removal or otherwise being coerced to “donate” an organ. The person may show signs of fear of a person who accompanies them, e.g. sweating, trembling, not speaking. They probably will not carry their own travel or identity documents. They will be accompanied by another person when visiting the hospital/clinic, who insists on answering questions on their behalf and/or translates all conversations with the medical staff. They may be illiterate, and any signed documents were not written or explained in their native language.

After surgery they may suffer from physical complaints, such as pain in the area where the organ was removed. They were never provided with discharge information nor know the name of the “hospital” where the operation took place.

Click here to learn more.

Red Flags of Money Laundering

It is estimated that over $1 billion is illegally transacted annually related to organ trafficking. However, it remains difficult for both law enforcement agents and anti-money laundering professionals to detect financial activity linked to organ trafficking. Factors such as a lack of domestic laws deterring citizens from traveling abroad, the transnational nature of organ trafficking, and purveyors who know the laws related to organ trafficking well enough to circumvent them by way of shell companies and legal offerings via public websites all contribute to the difficulty in the detection of money laundering linked to the trafficking of organs.

While it may be challenging for banks to detect financial transactions related to organ trafficking, it is not impossible as there are some indicators available. In a 2018 article, Organ Trafficking: The Unseen Form of Human Trafficking, Christina Bain, director of the initiative on human trafficking and modern slavery, Babson College, Wellesley, MA and Joseph Mari, CAMS, senior manager of major investigations, Bank of Montreal, Toronto, offered the following red flags that may be harmless on their own but when combined, could present potentially suspicious behavior:

- Wire transfers to entities in high-risk jurisdictions with names that include a variation of medical. For example, “Medicus”;
- Methods of payment such as wires payment, email money transfer, and bulk cash withdrawal;
- Payments between charities and medical tourism sites;
- Credit card payments to travel agencies, airlines or hotels, prior to movement of money and travel;
- First-line banking staff indication of potentially ill customers moving large amounts of funds to numbered companies or charities prior to travel;
- Medical tourism websites that offer transplant services abroad that recommend utilizing their own trusted domestic doctors prior to traveling.

Traveling abroad to obtain an organ may be legal in certain countries; however, associated financial transactions would still be considered reportable in many jurisdictions as the act of purchasing an organ may be illegal within their country of citizenship.

Click here to learn more.
Role of Health Care Professionals

Francis L. Delmonico, MD, FACS is a surgeon, clinical professor, and health expert in the field of transplantation. He serves on numerous committees and is affiliated with various leading organizations and institutions. He is an adviser to the World Health Organization (WHO) on organ donation and transplantation and in 2016 was appointed by Pope Francis as an academician of the Pontifical Academy of Science, a benchmark in the field of organ transplantation worldwide. Delmonico has traveled the world to learn about transplantation practices and how these are carried out by his colleagues across the globe.

Delmonico has seen firsthand the use of poor people as commodities. Organs are taken from people for sale, at times without their consent. He teaches the importance of transparency through which every donor and every recipient is identified, and all information about transplants is available to the Department of Health and Human Services and its equivalent in other countries. This oversight should protect the living donor from exploitation and complications. It would also guarantee that the practice of transplantation is carried out with satisfactory outcomes for both donor and recipient.

Physicians and other health care professionals seem well placed to play a role in the monitoring of organs for transplantation. They could also aid in the curtailment of the trafficking in human beings for the purpose of organ removal. They serve as important sources of information for patients and may have access to information that can be used to gain a greater understanding of organ trafficking networks. Legal and ethical obligations may prohibit physicians from reporting patients who have received an illegal organ. However, they can report colleagues involved in the illegal trade to an appropriate regulatory authority.

Medical and other professionals involved in organ transplantation and transplant centers can contribute substantially to the prevention of human trafficking for the removal of organs. By following the recommendations of the 2018 version of the Istanbul Declaration they can protect victims of trafficking for the removal of organs. This document defines the health professionals’ obligations not only to avoid facilitating transplant-related crimes and to prevent harm to others but also to provide care for their own patients whose involvement in such activities could result in criminal liability and severe health risks. The health care professional should provide information about the clinical and legal risks and the ethical concerns associated with involvement in these illegal activities and discourage their patients who are considering traveling abroad to receive an organ obtained through transplant-related criminal activities.

Health professionals should not refer patients to transplant facilities that they know, or suspect, use organs obtained through transplant-related criminal activities nor should they release medical records if they believe that this information will be used for the transplantation of an organ obtained through any form of trafficking.

Health professionals involved in organ transplantation need to exercise diligence in evaluating prospective living donors and recipients, with particular attention to verifying claims of family relationships and altruistic donor motivation and only proceed if the evaluation and consent processes have confirmed the appropriateness of the procedure.

All health professionals, including those who may not be directly involved in the transplantation process should be encouraged to report suspected transplant-related criminal activities to law enforcement agencies.

Some transplant surgeons such as Ignazio Marino, a former Mayor of Rome, Italy suggest that “the only way to tackle organ trafficking and organ sale, is by cutting down the demand of organs themselves.” The key, according to Marino, would be to “propose hard legal punishments for those people who buy organs. If they would know that buying an organ would save their lives but also bring them to jail for fifteen years, maybe those people would think about it twice.”
Advocacy

Role of Law Enforcement

Since the selling of organs is unlawful, victims of trafficking for the removal of organs may be at risk for criminal liability and possibly also for other criminal offenses directly linked to their experience as a trafficked person, such as the use of forged or altered documents, illegal border crossings or participation in a criminal organization.

As prescribed in the Istanbul Declaration, victims of trafficking for organ removal are not to be punished by law enforcement agencies and the judiciary. Moreover, as stipulated by the United Nations Recommended Principles and Guidelines on Human Rights and Human Trafficking, Article 26 of the Council of Europe Convention on Action against Trafficking in Human Beings and Article 8 of the EU Directive 2011/36/EU, victims of trafficking for the removal of organs are to be protected from prosecution or punishment for criminal activities that they have been compelled to commit as a direct consequence of being subject to trafficking.

Law enforcement agencies and the judiciary are not permitted to make an exemption from criminal liability conditional upon the co-operation of victims of trafficking in the identification and prosecution of the perpetrators. Victims are to be kept immune from prosecution, detention and the applicability of a penalty not only when it becomes evident that they are a victim of trafficking for the removal of organs but as soon as there is credible suspicion that they might have been trafficked.

Finally, it is recommended that prosecutors and judges receive regular training so that they are aware of circumstances under which victims of trafficking for organ removal may commit offenses.

Click here to learn more.

Action

The HOTT Project

The HOTT Project, an international research project, ‘combating trafficking in persons for the purpose of organ removal,’ was the first EU-funded project against this neglected form of trafficking in human beings. The aim was to increase knowledge and information about human trafficking for the removal of organs, raise awareness about the crime, and to improve its non-legislative response. The project ran from November 2012 until October 2015.

A team of researchers conducted scientific, empirical research on trafficking of human beings for the purpose of organ removal (THBOR) in countries across the globe. The focus of our research was THBOR and not other forms of organ trafficking. Their findings were compiled into nine reports, all available on their website. The reports were also published in various journals and distributed among police forces and other key stakeholders worldwide.

The project was an initiative by the Erasmus MC University Medical Center Rotterdam (The Netherlands) that led the project in close collaboration with Lund University (Sweden), the Bulgarian Center for Bioethics (Bulgaria) and the Academic Society for the Research of Religions, SACRI (Romania). These beneficiaries, represented by a group of enthusiastic researchers, were supported by a large number of associated partners and advisers from countries worldwide that participated on a non-funded basis. Click here to learn more.
Europe Works to Prevent Trafficking of Organs

How would you feel about being forced into donating an organ, such as a kidney or lung, your liver, heart, or pancreas?

Did you know that every day somewhere in the world, a person is lured into the illicit organ trade?

The World Health Organization estimates that about 10,000 organs are sold on the black market each year, some of which come from trafficked persons.

Click here to view a short YouTube video on what Europe is doing to prevent trafficking for the purpose of organ removal.

What Can Be Done

Human trafficking for the purpose of organ removal differs in many respects from other forms of human trafficking. It is an unknown type of human trafficking and law enforcement of this type of crime is practically non-existent. The international character of human trafficking and the principle of medical confidentiality serve to impede the detection and investigation of criminal activities.

The extent of human trafficking for the removal of an organ or organ trafficking is still unknown when compared to the number of organ transplants performed annually. Furthermore, the full integration of the issue within the human trafficking field as a whole is still lacking.

The recipients of the organs are vulnerable, and so although they have often broken the law, they are seldom charged with an offense. However, they are a source of information when it comes to the detection of criminal facilitators.

The medical community and the media have mobilized to speak out against transplant commercialism, which is beginning to have an impact. The Declaration of Istanbul on Organ Trafficking and Transplant Tourism aims to unify physicians in denouncing organs being traded. The media serves to motivate governments to promote altruistic organ donations, asking people to donate their organs upon their death. Public awareness campaigns provide information about the risks and possible consequences of buying and selling organs.

Since organ trade and trafficking is a transnational issue, international collaboration is needed to eliminate trafficking for organ removal effectively. The focus of an investigation is often on the countries where the illegal transplantations take place, whereas those countries often have insufficient resources for effective prohibition, investigation and prosecution of the trade.

Countries from which the patients and donors originate must contribute to the prevention and combating of this form of exploitation. These countries will need to sensitize and encourage their citizens, including healthcare professionals, to respect the law against organ trade and trafficking.

Click here to learn more.

Resource on Trafficking for Organ Removal

Trafficking for organ removal is an individual being trafficked for the purpose of removing their organ(s), whereas organ trafficking is the illegal buying and selling of organs. A trafficked organ could come from a trafficked individual but that is not always the case; they may be two separate crimes.

This one-page fact sheet provides a quick overview on trafficking for organ removal and specific facts on the issue in Asia Pacific. It can easily be translated into other languages. Easily distributed digitally as a PDF or as a print-out, it can be used to educate audiences on human trafficking and exploitation. It can be translated into other languages by editing the Adobe Illustrator file.

Click here to learn more.
LifeWay Network

LifeWay Network envisions a world in which human trafficking is abolished and every survivor is strong, connected and free. LifeWay Network joins the global movement against human trafficking by providing safe housing for women who have been trafficked and offering education about trafficking to the general public.

LifeWay currently has short term and long-term volunteer opportunities open! This is for live-in host community members to support and accompany women survivors of human trafficking. Read on to find out more!

New York City alone has reported nearly 2,000 cases of sex and labor trafficking in the past 10 years. LifeWay Network’s Safe Housing Program is the only program in the New York metro area providing safe housing specifically for women survivors of labor or sex trafficking, who are domestic and foreign-born survivors.

When a woman arrives, she is welcomed into a supportive, caring environment that helps her continue along that journey through life enrichment, social services, and community life. The Host Community member is an integral member of the community to provide a safe haven and has the unique opportunity to interact and live with the residents on a short-term or long-term basis, contributing to the relaxed and home-like atmosphere in the house and providing a willing ear when a resident needs one.

If you would like to learn more about this opportunity for community living beginning in the Fall of 2020, please fill out our Host Community Application and email any questions to Volunteers@lifewaynetwork.org to be part of the discernment process! Click here for the application.

Websites

Click below to visit these sites.

HOTT Project, combating trafficking in persons for the purpose of organ removal
Click here.

Organ Trafficking: The Unseen Form of Human Trafficking
Click here.

Click here.

Protection of Human Beings Trafficked for the Purpose of Organ Removal: Recommendations
Click here.

Factsheet from International Organization for Migration in Various Languages
Click here.

Trafficking for Organs in China
Click here.

UN Office on Drugs and Crime Assessment Toolkit: Trafficking in Persons for the Purpose of Organ Removal
Click here.

Organ Trafficking — The Forgotten Form of Trafficking

In this short podcast, Ariel Niforatos discusses trafficking for organs and what makes it so difficult to stop. Click here to listen to the podcast.

What if you woke up one day and your kidney was gone?

Please click here to view a short YouTube on organ trafficking and human trafficking for organ removal.
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- Franciscan Sisters of Little Falls
- Franciscan Sisters of Peace
- Franciscan Sisters of Perpetual Adoration
- Franciscan Sisters of the Poor
- Franciscan Sisters of the Sacred Heart
- Holy Spirit Missionary Sisters
- Marianites of Holy Cross
- Maryknoll Sisters
- Medical Mission Sisters
- Northern California Catholic Sisters Against Human Trafficking
- Our Lady of Victory Missionary Sisters
- Presentation Sisters, Aberdeen
- Presentation Sisters, San Francisco
- Racine Dominicans
- Religious of the Sacred Heart of Mary
- Religious Sisters of Charity
- School Sisters of Notre Dame, North America
- School Sisters of St. Francis of Christ the King
- Sisters of Bon Secours
- Sisters of Charity of Cincinnati
- Sisters of Charity of Halifax
- Sisters of Charity of Leavenworth
- Sisters of Charity of Nazareth
- Sisters of Charity of New York
- Sisters of Charity of St. Joan Antida
- Sisters of Charity of the Blessed Virgin Mary
- Sisters of Charity of the Incarnate Word
- Sisters of Charity of Seton Hill
- Sisters of Christian Charity Mendham, NJ & Wilmelle, IL
- Sisters of Mercy Catherine’s Residence
- Sisters of Mercy of the Americas
- Sisters of Notre Dame, CA Province
- Sisters of Notre Dame de Namur, USA
- Sisters of Providence, Mother Joseph Province
- Sisters of St. Dominic - Racine, WI
- Sisters of St. Francis of Clinton
- Sisters of St. Francis of Colorado Springs
- Sisters of St. Francis of Dubuque
- Sisters of St. Francis of Redwood City
- Sisters of St. Francis of the Providence of God
- Sisters of St. Francis Rochester, MN
- Sisters of St. Joseph of Carondelet
- Sisters of St. Joseph of Chestnut Hill Philadelphia
- Sisters of St. Joseph of Cluny, USA & Canada Provinces
- Sisters of St. Joseph of Concordia, KS
- Sisters of St. Joseph of Orange
- Sisters of the Divine Savior
- Sisters of the Good Shepherd
- Sisters of the Holy Cross
- Sisters of the Holy Family
- Sisters of the Holy Names of Jesus and Mary
- Sisters of the Humility of Mary
- Sisters of the Precious Blood
- Sisters of the Presentation of the Blessed Virgin Mary
- Sisters of the Sacred Hearts
- Society of the Divine Savior
- Society of the Holy Child Jesus
- Society of the Sacred Heart
- Southern CA Partners for Global Justice
- Tri-State Coalition Against Human Trafficking & Slavery
- U.S. Ursuline Sisters of the Roman Union