

Put in Harm's Way

The Neglected Health Consequences of Sex Trafficking in the United States

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Trafficking in women for prostitution and related forms of sexual entertainment is so widespread yet so invisible. Its invisibility is anchored in two foundations: the traditional view of gender inequality which instrumentalizes women's bodies for sexual and reproductive use; and the more liberal view which redefines certain forms of sexual exploitation such as prostitution as work, legitimates the selling of sexual "services" as commerce, and reconstructs the female body as a commodity. The "invisible hand"¹ of the gendered market further assures that male sexual consumption is optimized in the buying and selling of women's bodies.

Macroeconomic policies promoted by international lending organizations such as the World Bank and the International Monetary Fund, which mandate "structural adjustments" in many developing regions of the world, have helped push certain countries to export women for labor (the Philippines), making them vulnerable to trafficking; or to develop economies based on tourism (Thailand), with a huge dependence on sex tourism. Male demand, female inequality, and economies in crisis--among other factors--lie at the nexus of sex trafficking.

Researchers differ on the numbers of women trafficked internationally. United Nations (UN) reports estimate that 4 million women have been trafficked. United States reports cite 700,000 to

POLICING THE NATIONAL BODY

Sex, Race, and Criminalization

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2 million women and children internationally trafficked each year into the sex industry and for labor.² All estimates, however, are preliminary and do not include trafficking within countries. The most prevalent forms of sex trafficking are for prostitution, sex tourism, and mail-order bride industries. Women and children are also trafficked for bonded labor and domestic work, and much of this trafficking concludes with their being sexually exploited as well.

Defining the Problem

Currently, there is an international debate about the definition of trafficking and whether to separate trafficking from prostitution. We use the definition of trafficking from the new UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the UN Convention Against Transnational Organized Crime that became open for member nations' signatures in Palermo in December 2000. Thus far, the protocol has been signed by at least eighty countries.

(a) "Trafficking in persons" shall mean the recruitment, transportation, transfer, harbouring 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 labour, or services, slavery or practices similar to slavery, servitude or the removal of organs;

(b) The consent of a victim of trafficking in persons to the intended exploitation set forth in subparagraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used.³

Exploitation, rather than *coercion*, is the operative concept in this definition. A definition of trafficking, based on a human rights framework, should protect all who are trafficked, drawing no distinctions between deserving and undeserving victims of trafficking, that is, those who can prove they were forced and those who

cannot. Any definition based on the victim's consent places the burden of proof on the victim and offers a loophole for traffickers to use the alleged consent of the victim in their own defense.

Other definitions have focused on consent. However, the 1949 United Nations Convention for the Suppression of Traffic in Persons and of the Exploitation of Prostitution of Others, and Article 6 of the United Nations Convention on the Elimination of All Forms of Discrimination against Women are representative of a consensus in international law, that human trafficking is the recruitment and transport of persons for the purpose of sexual exploitation, regardless of whether or not they have "consented" to their trafficking. The new UN Protocol on the Trafficking in Persons is continuous with this international consensus.

A Global Problem

Countries as diverse as Vietnam, Cuba, and those in Eastern Europe and the former Soviet Union—all beset by acute financial crises while becoming market economies in varying degrees—are witnessing a tremendous increase in trafficking and prostitution. Mail-order bride industries capitalize on the trafficking of Russian and Asian women, particularly to men in industrialized countries who want foreign wives they deem to be pliable and exotic.

In the Asian region alone, 200-400 Bangladeshi women are illegally transported into Pakistan monthly and 7,000 to 12,000 Nepali women and girls are sold yearly into the brothels of India. The trafficking of girls from Nepal to India is probably the most intensive sexual slave trade anywhere in the world. In 1992, more than 62.5 percent of total "entertainers" (a code word for prostitution) in Japan were Filipino—92 percent of them undocumented. In Asia, millions of women and girls have been led into systems of prostitution such as street prostitution, sex entertainment clubs, sex tourism, and brothels that may literally be cages or, conversely, luxury establishments. Brothels in Bombay and Delhi receive trafficked women from Bangladesh and Nepal and are often the transit point for moving women to Europe and North America.⁴

International women are trafficked from economically unstable countries to economically stable ones; from developing coun-

tries to industrialized countries; from rural to urban centers within developing countries; from developing countries to adjacent ones with sex industries; through developed countries and regions, such as Western Europe and Canada, to the United States; and within the United States. Both international and domestic women are domestically trafficked within their countries of destination or origin, respectively.

Trafficking Into and Within the United States

Until recently, trafficking in the United States was rarely acknowledged. It was not until Russian and Ukrainian women began to be trafficked to the United States in the early 1990s that governmental agencies and many non-governmental organizations (NGOs) began to recognize the problem. As many critics, including ourselves, have pointed out, Latin American and Asian women were trafficked into the United States for many years prior to the influx of Russian traffickers and trafficked women. The fact that it took blond and blue-eyed victims to draw governmental and public attention to trafficking in the United States gives the appearance, at least, of racism.

Trafficking of women into the United States by transnational sex industries is beginning to be increasingly researched, estimated numerically, and compared with the drug and weapons smuggling industry by the US Immigration and Naturalization Service (INS). The US government estimates that 45,000 to 50,000 women and children are trafficked annually from Southeast Asia, Latin America, Eastern Europe, and the newly independent states of the former Soviet Union to the United States for the sex industry, sweatshops, domestic labor, and agricultural work.⁵

However, the documented incidents of sex trafficking in the United States have, until recently, been published in isolation and usually in newspaper articles following an enforcement crackdown and prosecution. These accounts have generally lacked an analysis of the structures that account for women being trafficked into prostitution, namely, the global sex industry, the subordination of women, the gendered labor market, and the multiple economic crises and inequalities that underlie women's lives.

Many factors-including death threats to themselves and their families at home; conditions of isolation and confinement; the high mobility of the sex industry; fear of deportation; the lack of acknowledgement within many human rights and refugee advocacy service organizations who are struggling with a range of other problems; and the lack of "safe houses" and shelters-make it nearly impossible for trafficked women to seek assistance and to testify against traffickers and other exploiters.⁶

Further, the limited legislation, light penalties, and long, complicated nature of investigations for trafficking convictions tend to make trafficking cases unattractive to many US attorneys, according to a recent government report.⁷ Additionally, the current immigration and criminal justice system in the United States is weighted against trafficked women. The current system hampers undocumented victims of trafficking from coming forward for fear of deportation and the lack of INS assurance that victims will be allowed to remain in the country if they choose.

This overview and analysis of the trafficking of women in the United States for sexual exploitation has had to rely, therefore, on indirect and secondary sources, including federal government estimates, as well as a minimal but growing body of primary sources, chief among which are interviews with trafficked women conducted by the Coalition Against Trafficking in Women. The authors have pieced together a composite picture of the scope and methods by which immigrant women, migrant women with temporary visas, and women lumped into the INS categories of "-undocumented aliens" and "illegal aliens" end up exploited in prostitution in the United States.⁸

As for delineating the harm suffered by trafficked women, we draw from three sources: studies of prostituted women which document the health effects of prostitution including the harm from violence; the literature on the health burden of violence against women; and our interviews conducted recently with trafficked Russian women. Everything learned in this investigation of sex trafficking directs us to a policy of prevention of trafficking through alternatives for women, protection for trafficked women, and prosecution of traffickers and other exploiters.

Public health and environmental protection agencies—once they have documented human health and environmental threats—typically respond with intervention and protection programs for those at risk, coupled with enforcement mechanisms to punish and deter violators. Prevention is generally late upon the scene and inadequate for the need. In documenting the trafficking of women for sexual exploitation, we have concluded that three fronts of response to this grievous abuse of human rights are equally vital: namely, investing in women's economic development and women's human rights to create alternatives for women, while exposing the sex industry and the harm to women; providing services and protection from deportation for trafficked women; and aggressively punishing the crime of sex trafficking, not by criminalizing the women but by punishing the recruiters, traffickers, pimps, and buyers.

Migration: The Nexus of Individual Necessity, Country Policy, Post-Colonial Development, and Industry Opportunism

In the mid-1990s, nearly two percent of the world's population, or about 125 million people, were international migrants, that is, people living outside their country of origin, the highest number in history. International migration in 1995 was estimated to be up to 4 million people annually, with about one-half of these entering the United States and Canada as permanent and temporary migrants, refugees, and undocumented migrants. No one international or national data source identifies all of the people moving across national borders, but all data sources tracking refugees and migrant labor suggest that the numbers are on the increase.⁹

Determinants of Migration

"Push" and "Pull" Forces

It is commonly held that the factors influencing migration are the push of poverty and underemployment at home and the pull of employment elsewhere, the push of civil strife and persecution, and the pull of family networks abroad. In the case of recruitment

for work abroad, labor recruiters and smugglers actively seek, and entrap in some cases, a supply of people in the sending country. They are "an important but under-studied factor in today's international migration networks," especially because recruiters and smugglers indenture migrants seeking labor abroad for the equivalent of anywhere from one-quarter to all of a year's salary or even a few years' salary.¹⁰ Undocumented immigrants are more vulnerable to abuse and coercion by smugglers, traffickers, and employers, out of fear of deportation. Furthermore; recent US anti-immigrant legislation, subjecting even legal immigrants to harsh and discriminatory practices, increases the vulnerability of all immigrants.

Labor for Export

The pull of employment elsewhere is augmented by the sending country's policy, implicit and explicit, to export labor for remittance because of numerous, well-documented factors: exorbitant national debt, high unemployment, the displacement of agricultural workers with the industrialization of agriculture, and imposed re-structuring of national economies by the World Bank and International Monetary Fund,¹¹ both dominated by US influence. The economic development policies of many countries are locked into repaying foreign loans, often to industrialized countries that have freely plundered the resources of the very nations that are in debt bondage. Many countries encourage their citizens to leave the country for work so that the payments, which workers send back to families, can stimulate and stabilize the economy.

In 1995, 15.3 percent of the Philippine labor force (or an estimated 4,200,000 women and men) migrated for labor, making the Philippines the largest Asian exporter of labor and making workers the Philippines' largest export.¹² Remittances sent home by overseas workers have been growing annually by 35 percent since 1992, reaching \$7.1 billion in 1996; and they are relied upon by the government to reduce the country's deficit.¹³ Sixty percent of all overseas contract workers leaving the Philippines are now women,¹⁴ a trend referred to as the *feminization of labor*, with 2000 women leaving the Philippines per day.

The trend in labor export and labor emigration in developing countries will continue with the global trend in production for export, a development policy propounded and imposed on these countries by international lending agencies and free market advocates.¹⁵ The mechanization of agriculture for export and consequent migration from rural to urban areas is another major factor in rural unemployment and migration for work. Between 1950 and 1990, the percent of the world working in agriculture dropped from 65 percent to 50 percent, and in developing countries from 80 percent to 40 percent.¹⁶ Tens of millions of displaced rural farmers and their children move to cities looking for work, where they are vulnerable to labor recruiters and traffickers with schemes of employment abroad. In some cases, families sell their daughters to recruiters, wittingly and unwittingly, for prostitution.¹⁷

Postcolonial Policy

Other factors have been cited as influencing the recent wave of immigration from Asia, the Caribbean, and Latin America, namely, powerful US political, economic, and military involvements since the 1960s that created linkages between the United States and numerous developing countries that, in turn, stimulated a flow of labor into the United States. Furthermore, the emergence of global cities, including New York and Los Angeles, as centers of international finance, culture, and business services, has resulted in an informal economy of low-paying service and sweatshop jobs which has shaped the face and locus of current immigration. Immigrants to the United States cluster in a few US regions and in large metropolitan areas; and a growing majority are women.¹⁸ "International migrations, in other words, are embedded in larger social, economic, and political processes,"¹⁹ which generate the "push" and "pull" factors so neatly packaged by migration analysts.

The globalization of labor or the flow of labor across borders has accompanied the internationalization and global circulation of finance and capital, particularly in recent times. Sociologist Saskia Sassen argues that the specific forms of internationalization of capital in the last twenty years "have contributed to mobilizing people into migration streams," citing particularly the "implantation" of

Western development models and Western education.²⁰ Western development promoted replacement of small and internal agriculture and industry in developing countries with export-oriented agriculture and manufacture. Postcolonial networks and relationships, coupled with the "Pax Americana"²¹ - a catch-all for US foreign policy including recent "wars for democracy," direct foreign investment, and the creation of export-processing zones--have further fueled the flow of high finance, capital, information, high-tech services, elite personnel, *and migrant poor* to a "global grid of cities."²² In these transnational cities, the elite settle into urban zones of glamour and luxury while the migrant poor, who provide service and labor for the urban, elite, reside at the urban edges in low-income, internationally diverse neighborhoods.

The "transnationalization of labor,"²³ Sassen suggests, is more accurate terminology than the older discourse of immigration to describe the modern phenomenon of labor following capital and finance transnationally. Although we do not support an increasing tendency to redefine and legitimate prostitution as "sex work," and sex trafficking as "migration for sex work," we do believe that trafficking is an industry. Thus, we refer to the transnationalization of the sex industry.

Opportunism of the Sex Industry

Globalization of the world economy has been accompanied by globalization of the sex industry. Sexual exploitation moves freely across local and national borders in the same circulation patterns as drugs, weapons, finance, information, goods and services, and labor. In what becomes a predacious cycle, the growth of the transnational sex industry-with its unique profit potential from the reuse and resale of women, compared to the one-time sale of drugs and weapons-entices governments facing economic crisis to promote women for export within the global sex industry in order to attract a flow of remittances back to the sending country; or to directly and indirectly promote local sex industries to bring money into the country.

Sex trafficking into and within the United States is opportunistically bound up with migration for labor; that is, it preys on the

fact that women are migrating across borders, as well as within their countries, in unprecedented numbers for purposes of labor and income. Moreover, as the Internet sprawls into one massive (cyber-)mall, the growth in the transnational sex industry is spurred by the immense promotion and marketing of women and children for sex tourism, as electronic mail-order brides, and in pornography. The virtual trafficking in women and children along the information cyber-highway mimics the migration routes of sexual exploitation by air, land, and sea across the globe.²⁴

The Structure of Trafficking of Women in the United States

Economic Pull Factor Embedded in Sexual Inequality

In countries such as Thailand, Australia, and certain European countries, prostitution and sex entertainment are imputed and institutionalized parts of the formal economy, making use of the media, airlines, hotel chains, international communications and travel agencies, and banks. The sex industry is so pervasive in Thailand that it accounts for up to 14 percent of the gross national product (GNP).²⁵ To view trafficking for prostitution only through an economic lens, however, is to omit other key considerations.

The economic reasons why individual women enter prostitution and/or are trafficked are fairly straightforward. Not well spotlighted are the gendered facts that prostitution or sex entertainment is generally the only form of work that allows many women to make more money than they could in other circumstances; and that prostitution is overwhelmingly the selling of *women's* and *girls'* bodies to men for the sex of prostitution. An economic analysis is necessary but insufficient for explaining the business and the buyers of prostituted women. It leaves unaddressed the tolerated and/or accepted "natural law" of male sexuality—that men's alleged innate sexual needs must be satisfied and therefore, that prostitution is inevitable.

Methods of Recruitment and Initiation

Traffickers recruit women in their countries of origin for service and entertainment industries abroad through ads and informal

or organized recruitment networks. Passports, visas, and letters of employment are commonly obtained for women by the traffickers; often the passports and visas are fraudulent. Often, large fees are charged for procuring the documents, the alleged job, and airline tickets, fees so exorbitant that women can be indentured to the traffickers for years. Many traffickers use itineraries with multiple stop points and non-surveilled entry ports into the United States, employing paid accomplices along the way. Corrupt travel agencies, embassy officials, and inspection police facilitate trafficked women's exit of and entry to countries without inspection.²⁶

Once in the United States, trafficked women are frequently seasoned into their plight through repeated rape, threats to their lives and those of their family members, and the withholding of their legal or illegal travel documents. Initially housed at staging points, they are then moved frequently to brothels in a circuit of cities. The frequent moving serves many purposes: male customers are assured of a fresh supply of exotic women, women have little time to establish contacts who could assist them, and enforcement agencies are more easily eluded.

One case that is particularly illustrative of the patterns of sex trafficking in the United States, and the ways in which women are moved quickly from place to place, occurred in Atlanta, Georgia in March 1998. Original reports indicated that FBI agents had raided a house in Atlanta in which they found eight girls, ages 15 and 16, being held in prison-like conditions. The brothel turned out to be only one in a nationwide network operating in fourteen states. Later reports indicated that 500 to 1,000 trafficked women from Asian countries between the ages of 13 and 25, many of them minors, passed through Atlanta. The average time they spent in the city was two weeks, after which they were moved to other locations. Since the brothels made, on average, \$100 a "trick," the cost of flying the women from state to state when other brothel owners bought out the women's contracts was insignificant.²⁷

The sex businesses operated in houses, apartments, and townhouses with barbed wire fencing often enclosing the houses and land. Hundreds of sex acts later, some of the women were able to purchase their freedom but, as undocumented and thus illegal, had

nowhere to go. Ultimately, some of these women became madams who were put in charge of other women in brothels.²⁸

Those trafficking women into the United States include organized crime groups from Russia, Eastern Europe, Latin America, and Asia, particularly from China and Vietnam, groups which are both small and sometimes family-based with loosely connected crime networks, as well as large criminal syndicates. Cases investigated by the United States government have revealed that trafficking in women is tightly linked with other criminal activities, including bribery, forgery of documents, extortion, money laundering, and more.²⁹ Traffickers secure their operations by victimizing women, often from their own racial and ethnic groups, and sometimes restricting and controlling the male clientele.³⁰

Profits From Industries

Many trafficked women have become indentured for up to \$50,000, a debt accrued from a string of inflated charges for passport, travel tickets, lodging, meals, alleged job, a "jockey" who accompanies them to the United States, and the trafficker's fee. If sold to a brothel owner, a woman is further indebted. Women are kept in cheap, crowded conditions to maximize industry profits and often they have to buy back their travel documents.

Thai traffickers made an estimated \$1.5 million in fifteen months in a New York-based operation that enslaved Thai women; and Mexican traffickers made \$2.5 million in a period of two years from Mexican women and girls they procured for prostitution where customers paid \$22 for fifteen minutes of sex.³¹ The Atlanta brothel in the trafficking operation cited earlier grossed \$1.5 million in two and one-half years³² while the women were kept in debt bondage and as virtual prisoners. A continuous supply of women and girls enables traffickers and brothel owners to maximize their profits by requiring women to see multiple male customers per day, paying them at will or denying them health care, and discarding them when sick, injured, diseased, or disfigured.

The Health Effects of Trafficking in Prostitution

Women trafficked in prostitution are uniquely vulnerable to

being physically harmed and traumatized by gender-based violence. While we have a limited set of interviews documenting the health effects of violence against women trafficked in prostitution, we can also extrapolate from other research. There is a substantial yet limited-in-scope set of studies on the health effects of prostitution and a larger body of international studies on the extensive health consequences of violence against women that help characterize, if not yet quantify, the harm. If anything, we surmised, the injury and harm could be more egregious because trafficked women are sexual chattel, ultimately expendable, often "illegal aliens" who do not speak English, and without recourse to law enforcement, health, and social services. The men who sexually traffic them are linked directly and indirectly with criminal networks and explicitly set out to exploit the trafficked women. The conditions are ripe—with few social controls on the men and no social protections for the women—for gender-based violence, abuse, injury and infection, and medical neglect.

The Health Burden of Violence Against Women

Gender-based violence preponderantly involves men harming women. While interpersonal in nature, it is socially rooted in unequal power relationships between men and women and condoned by patriarchal ideology and institutions.³³ Women victimized by male violence suffer bodily injury, disability, homicide, and suicide; severe stress and psychological trauma; substance abuse; a plague of sexually transmitted diseases, infections, and non-infectious diseases; and unwanted pregnancy, miscarriages, abortions, and infertility.³⁴ A World Bank study has estimated that women worldwide between the ages of 15 and 44 lose as many years of healthy life to the above-cited consequences of rape and domestic violence as they do to each of the following disease conditions high on the agenda of the World Health Organization: HIV/AIDS, tuberculosis, maternal sepsis, cardiovascular diseases, and all cancers.³⁵ Rape survivors are nine times as likely to attempt suicide and suffer severe depression as non-victims.³⁶

The World Bank estimates of healthy years lost by women due to male violence have been calculated within cultural and medical

contexts that have historically condoned, denied, ignored, and trivialized violence against women. In the United States, for example, researchers have estimated that greater than 1 million battered women per year seek medical care for injuries (still a fraction of those battered); yet "of those seeking medical care only one in ten is officially identified as a battered woman by health care professionals."³⁷ Moreover, even when battering has been identified, most medical professionals have trivialized or denied it. Woman battering-which causes up to an estimated one-third of female trauma injuries-had no priority as a medical health issue, according to studies conducted through the late 1980s.³⁸

The Health Burden of Prostitution

Women in prostitution are particularly at risk of gender-based violence-including physical, psychological, and economic harm-from pimps, buyers, police, and boyfriends. In some cases, police are buyers, and boyfriends/husbands are women's pimps and traffickers.³⁹ Yet, historically, the overriding preoccupation of medical and public health practitioners regarding prostitution has been prostitutes *as vectors of disease*. Their research has fixated on the prevalence of sexually transmitted (STD) and infectious diseases in prostituted women and the women's role in the web of disease causation, to the exclusion of documenting the injuries and other-than-STD illnesses suffered by women in prostitution.

Medical and public health remedies-including regular and mandatory surveillance for sexually transmitted diseases, routine antibiotic treatment, and promotion of condoms-have functioned to monitor and control women in prostitution, but rarely, if ever, to medically monitor, challenge, control, or reform the more numerous male purchasers of sex. These remedies also do not address the more powerful sex industry. Studies conducted to characterize and document the full health impacts of prostitution on the women involved (impacts such as injury and trauma, in addition to sexually transmitted and communicable diseases) for the sake of intervention and advocacy that benefits the women, are a rarity.

One unique and telling source, *Prostitutes in Medical Literature*,⁴⁰ provides a comprehensive annotated bibliography of studies on

women in prostitution published in international medical literature from 1900 through 1990. By far the preponderance of studies conducted in the late nineteenth and twentieth centuries were preoccupied with the epidemiology of sexually transmitted diseases. Numerous case control studies found that women in prostitution have significantly higher rates of sexually transmitted diseases or infections, hepatitis B, and HIV/AIDS; higher risk of cervical cancer; decreased fertility; and a higher abortion rate.⁴¹ However, the absence of studies on the physical violence and psychological trauma that prostituted women suffer at the hands of pimps, purchasers, police, and boyfriends confirms that health professions have largely ignored and not documented nor studied the full scale of gender-based harm in prostitution.

The lack of documentation on the harm of prostitution and trafficking, and its health burden, may in large part be due to the fact that prostitution has not been categorized as a form of violence against women, and the ambivalence on the part of many researchers, NGOs, and governments to view prostitution as a violation of women's human rights. This professional disregard parallels the earlier and common medical response to battered women, a response increasingly documented and characterized by health researchers over the last twenty years.⁴²

Women in the sex industry who have been trafficked and prostituted suffer the same kinds of injuries as women who are battered, raped, and sexually assaulted. However, when women are subjected to these same injuries in the context of prostitution, the violence is ignored or redefined as "sex." "Rough sex," sadism and rape-for women in prostitution, whether trafficked there or not-are often accepted or tolerated as "occupational hazards." When women are made to endure unwanted sexual behavior on the job, it is called sexual harassment. When men in a sex club or brothel pay to enact the same behavior, it is accepted as commercial "sex work."

Studies by Service Organizations for Women in Prostitution

Only recently, as survivors of prostitution are organizing alternatives for women in prostitution and as international NGOs are

confronting the expanding trafficking in women and girls for purposes of sexual exploitation, are studies being undertaken to document the full health impacts of prostitution and trafficking on women and girls in this industry. A 1994 survey conducted with sixty-eight women in Minneapolis/St. Paul, who had been prostituted for at least six months in varied contexts from the "street" to massage parlors and escort services, found that 62 percent had been raped by a john; half the women had been physically assaulted their purchasers; and a third of these experienced purchaser assaults at least several times a year. Twenty-three percent were beaten severely enough to have suffered broken bones; two were beaten into a coma.⁴³ In another survey of fifty-five victims/survivors of prostitution who used the services of the Council for Prostitution Alternatives in Portland, Oregon, 78 percent reported being raped by pimps and male buyers on average forty-nine times a year. Eighty-four percent were the victims of aggravated assault, often requiring emergency room treatment; 53 percent were sexually abused and tortured; and 27 percent were mutilated.⁴⁴

The emotional consequences of prostitution reported include severe trauma, stress, depression, anxiety, self-medication through alcohol and drug abuse, and eating disorders. Ninety-four percent of the women in the Minneapolis/St. Paul study categorized themselves as chemically addicted. Crack cocaine, marijuana, and alcohol were used most frequently, with most women taking up crack cocaine after being in prostitution. Virtually all of the women (93 percent) had been in drug treatment programs, an average of three times each; they reported, however, resorting to drugs during prostitution. Ultimately, women in prostitution may be at extreme risk for self-mutilation, suicide, and homicide. Forty-six percent of the women in the Minneapolis study had attempted suicide, many repeatedly; and 19 percent had tried to mutilate and harm themselves physically in other ways. Rates of suicide attempts did not vary among women with different prostitution experiences (that is, street, massage parlors, and escort services) nor age of initiation. "Most notably, drug abuse and violence were virtually universally present in all the women's lives, regardless of age, race, or type/amount of prostitution."⁴⁵

Most of the women interviewed in the Twin Cities study had some type of medical coverage and access to health care (a situation which is likely very different from trafficked women whose status in the United States may be "illegal alien"). One-third of the women disclosed their experience in prostitution to their health providers, while the majority did not out of feared repercussions, namely social stigma, threats from abusive pimps and partners, loss of children, and being reported to authorities.

HIV/AIDS

The dawning recognition that most women is sex with infected men has begun to realign the dominant view of prostituted women as vectors of sexually transmitted disease. The 12th World AIDS Conference held in Geneva in July 1998 and World AIDS Day in December 1998 provided a lens through which to frame one of the most lethal (and growing) health impacts of male trafficking in women and girls for purposes of prostitution. The most recent data on the prevalence rates and geographical and gender-specific spread of this modern-day plague reveal that "men drive the AIDS epidemic" by their self-interested sexual promiscuity. The epidemic in HIV/AIDS among women is driven, in particular, by male use of prostitutes and infected men's transmission of the virus to their wives, sexual partners, and sexual prey. Women and girls, consequently, are contracting HIV primarily from men and at a faster rate than men and boys.⁴⁶ Of an estimated 33 million people currently with HIV, approximately 43 percent are women and girls.

Prostituted women are highly susceptible to this "new" sexually transmitted disease because of the nature of the disease transmission, the exploitative nature of sex in prostitution, and the web of social and economic factors that exacerbate disease and injury for women in prostitution. Women contract HIV more easily than men in heterosexually-penetrative sex because the genital tract of women allows the virus to pass through the bloodstream relatively easily. Researchers estimate that women contract HIV up to ten times as easily as men, with the risk being driven up further by factors of powerlessness, ill health, and economic vulnerability of the

female vis-à-vis the male.⁴⁷ When sexual intercourse is frequent, hurried, or non-consensual, women have an increased likelihood of infection. Most prostituted women are required to service multiple customers per day. Studies have documented that women in prostitution have had to service dozens of men per day, orally, vaginally, and anally.⁴⁸ Sexually transmitted diseases of the lower and upper reproductive tract, including syphilis, genital herpes, chancroid, trichomoniasis; chlamydia, and gonorrhea further increase the HIV transmission rate in women two- to ten-fold.⁴⁹

HIV/AIDS is both a stark disease burden and also a biomarker of the gendered condition of women and of male sexual consumption. The highest rates in the world today exist in centers of sex tourism, in the military, and in societies and subcultures that condone male sexual exploitation, male sexual promiscuity, and female subordination.⁵⁰ When these landscapes of sexual politics are further riven by economic collapse and conflict, we see-as in Africa, South and Southeast Asia, and the Newly Independent States (NIS) of the former Soviet Union-the rise of trafficking in women and girls for prostitution and the emergence of new and the re-emergence of "old" sexually transmitted diseases.⁵¹

Retrograde Public Health Response

Despite the known etiology of HIV/AIDS, the public health response to prostitution as codified in the Contagious Diseases Acts of the nineteenth century--medicalize the women to protect the men--has little changed in the modern health campaigns to check the HIV epidemic. Promoting policies which are distinctly imitative of population control, AIDS-prevention advocates are targeting prostituted women-not male customers and transmitters-for disease control, even though epidemiologists have documented that the epidemic is now driven largely by male-to-female viral transmission and male use of prostituted women. Potentially infected women, not the sexual consumption of infected or potentially infected men, is the focus of control. Working within that framework, one Worldwatch analyst describes married men who are prostitute users as "a bridge between high- and low-risk groups" and advocates targeting condom programs to the

"high-risk" group, women in prostitution.⁵² The role and responsibility of men who act recklessly in their sexual lives is neutralized and safeguarded, by suggesting that men are mere passive thoroughfares over which HIV/AIDS migrates from culpable "high-risk" women to "innocent" low-risk women. (Indeed, mosquitoes that contract the West Nile encephalitis virus from infected birds and then bite and infect humans are treated with more surveillance and control!)

Interviews with Women Trafficked in the United States

In 1999, the Coalition Against Trafficking in Women (CATW) received funding from the Ford Foundation to study the health effects of migrant sex trafficking. The project is being conducted in selected countries of three major areas of the Coalition: Asia, Latin America, and North America. In these regions CATW is analyzing female migration and the health effects of sex trafficking in the contexts of the globalization of markets and capital, the globalization of the sex industry and the internationalization of patterns of sexual exploitation. Coalition partners have designed a survey which is being used to interview 150 trafficked women for the purpose of documenting: the injuries and infections suffered by these women in prostitution; the sexual and reproductive consequences of being trafficked into prostitution; and the women's perspectives on the traffickers and the buyers and on the viability of prostitution as so-called "work" for women. Since the project is ongoing, only preliminary results of a subset of questions regarding the health effects of prostitution will be presented here.⁵³

A Russian NGO partner has translated the CATW survey into Russian and interviewed numerous Russian women who were trafficked for prostitution, both before and after entering the United States. We report here on the results of interviews during 1999-2000 with seventeen women.

Recruitment, Conditions, and Buyers

The women interviewed were recruited into prostitution through a variety of means: ads in Russian print media for dancers, babysitters, waitresses, and secretaries; by a boyfriend, a family

member, a neighbor, an acquaintance, strangers, a US pen pal; and by immigrant husbands in the United States. Eight of the seventeen women had been, in prostitution in Russia, and it was mainly they who were recruited or pressed into prostitution by boyfriends, acquaintances, and family members once they were in the United States working in low-paying jobs or unemployed.

In prostitution in the United States, most of the women were moved frequently by pimps and traffickers and placed in bars, massage parlors, and brothels in cities, rural areas, suburban sites, and immigrant areas. The men who purchased sex were described by the women as "all kinds" of middle-aged businessmen and blue-collar truck drivers from the United States and of various other nationalities, with some brothels being frequented especially by Russian and Azerbaijani businessmen. Women were made to service multiple "customers" per day and do group sex; one woman reported an average of ten to thirty male buyers per day.

Health Effects

In response to the question of what injuries they suffered from clients while in prostitution in the United States, the women interviewed reported an extremely high incidence of bruises, bleeding, and mouth and teeth injuries. Twelve of seventeen women (71 percent) suffered bruises, with the majority answering that they were bruised often. Seven (41 percent) reported mouth and teeth injuries; ten (59 percent) had vaginal bleeding; seven (41 percent) had "other bleeding"; eleven (65 percent) reported suffering internal pain; four (24 percent), head injuries; and two (12 percent) broken bones.

Virtually all (94 percent) reported seeing other women injured in prostitution by male buyers and brothel owners. When asked about specific injuries that other women in the brothel suffered, twelve of the sixteen (75 percent) who responded to the question reported even higher incidence of injury than they reported about themselves. Some women found it harder to talk about injuries they had seen other women endure than what had happened to themselves, while others who could not speak about their own did answer questions about other women's injuries. For this reason, the composite of what they experienced and of what they witnessed other

women experience is important to document in order to capture the full scope of male violence and female injury in prostitution.

So-called "safety policies" in brothels did not protect women from harm. Even where brothels supposedly monitored the "customers" and utilized "bouncers," women stated that they were injured by buyers and, at times, by brothel owners and their friends. Even when someone intervened to control buyers' abuse, women lived in a climate of fear. Although 60 percent of women reported that buyers had sometimes been prevented from abusing them, half of those women answered that, nonetheless, they thought that they might be killed by one of their "customers."

Condom Use

In response to a series of questions about condom use, the women revealed that buyers willing to use condoms ranged from 30 percent to 80 percent of men. With those buyers not willing to use condoms, women employed whatever strategies they knew to try to convince them, often unsuccessfully. Where buyers were allegedly required to use condoms, this requirement did not deter them from offering to pay more for sex without a condom. Twelve of the seventeen (71 percent) interviewees said that male buyers offered to pay more for sex without a condom. The prostituted and trafficked women's physical and economic vulnerability could easily render any "policy" on condom use ineffective.

In answer to the question, "Did the condoms ever break," an astoundingly high eleven out of sixteen (69 percent) replied "yes," with the number ranging from one time to at least ten times.⁵⁴ This extraordinarily high rate of condom breakage, together with reported vaginal irritation and bleeding from multiple condom use, raises serious questions about the validity of relying on public health policy that mainly emphasizes condom use in the name of protecting women in prostitution from sexually transmitted infections, including HIV/AIDS.

Integrative Public Health Response Needed

Public health programs which promote "safer sex" and condom use in the sex industry are more likely to protect male prosti-

tute users than to protect women from men who engage in "risky" sex. Ultimately, they insure a healthier supply of prostituted women for male buyers. Safer sex intervention programs do not protect women against condom breakage during intercourse,⁵⁵ nor against latex allergies and vaginal abrasions from frequent sex with multiple customers--and, most importantly, against the high incidence of physical and psychological harm women in prostitution have reported. Condom programs in prostitution are like gun locks in gun safety programs: they do save some lives; they don't eliminate the source of the harm.

Promoting Alternatives Versus Risk Reduction

A fuller public health response to the harm of prostitution for women could draw by analogy from the Principle of Precautionary Action, proposed by environmentalists to guide industrial activities and prevent harm to human health and the environment. The "Precautionary Principle" breaks out of the now normative school of risk assessment, which is commonly employed in environmental health decision-making and program design. Risk assessment is the process of estimating the amount of damage or harm that may occur or can be reduced if an activity under consideration takes place. (For example, if 95 percent of buyers purchasing women in commercial sex can be made to use condoms, and condoms have a certain breakage rate, what is the predicted rate of new HIV infection cases among the prostituted women in a particular sex tourism area?) According to scientist and critic Mary O'Brien, risk assessment concerns itself with "How much damage or harm is safe and tolerable, rather than how little damage is possible?"⁵⁶

Risk-based regulatory systems, like those of cost-benefit analysis, assume that there is a "safe" amount of harm that can be tolerated, that we can set limits to control irreversible harm, and that we know enough about the causes of harm to take risks.⁵⁷ Risk reduction programs (such as safety training for pesticide applicators; warning labels on toxic substances; and controlling the access of minors and pregnant women to toxic substances or activities) are generally promoted by those who have a stake or interest in the risky business.⁵⁸

In the case of prostitution industries into which women are trafficked, it is the sex industry that has sought legitimacy through its public relations campaign of alleged condom promotion in the brothels. They set the parameters of condom use and, often, when condom distribution is allowed, it is the brothels--not the women--who receive them directly. NGO advocates who promote and distribute condoms in the brothels are also restricted in what they can mention to women in prostitution. For example, HIV educators in Bombay report that they were only given permission to enter the prostitution areas when they agreed to the traffickers' directives mandating that they could promote condom usage only if they would not discuss "social issues," and if they would ignore the rampant child prostitution.⁵⁹ Condoms could only be promoted by not challenging the brothel keepers and by not discussing with the women alternatives to prostitution.

A precautionary approach asks different, yet commonsensical, questions in designing a public health response to a high-risk activity such as prostitution: "What are the alternatives to this ... activity that achieve the desired goal?" and "Does society need this activity in the first place?"⁶⁰

Politicizing Health

Some "safer sex policies and programs for women in prostitution join condom use with holding out hope for an AIDS vaccine."⁶¹ However, relying on a magic molecular bullet to remove the risk of AIDS in prostitution treats disease as an individualized body-based event rather than as "the outcome of multiple conditions arising from changes not only in cell nuclei but also in social, economic, and ecological conditions."⁶² An interdisciplinary team of researchers at Harvard University, who are studying the emergence of "old" and "new" communicable diseases, affirms the view that the causation of epidemics and pandemics "must be understood in the broad sense as residing in much larger wholes than are usually considered by the microbiological or clinical paradigms."⁶³ Thus, epidemiological models and public health responses to the emergence of new disease epidemics such as AIDS must become socialized, politicized, and gender-based.

A politicized and structurally-based public health response to the risks of prostitution-risks which HIV/AIDS have drawn the world's attention to-would heed the lessons that integrated and social epidemiology have learned from the reemergence of old diseases, such as tuberculosis and hepatitis, and the emergence of new diseases, including AIDS. Diseases evolve and come about within a complex interaction that includes social and economic inequality and ecological changes, as well as pathogens, vectors, and hosts. A fuller public health response would advocate for the health and safety of women within the sex industry, at the same time that it seeks to dismantle the sex industry.; When "safe sex" advocates for women in prostitution, as well as reproductive health activists, are as willing to confront the sex industry as they are to challenge the pharmaceutical industry and other multinationals, this will be an enormous step forward.

As early as 1987, one survivor of domestic trafficking and prostitution in the United States noted the limitations and hypocrisy of condom promotion not accompanied by other legal and structural solutions.

We don't believe for one moment that politicians are concerned that prostitutes will die from AIDS: they're not concerned that we're bought and sold like cattle ...they're not even concerned when we're killed off one by one, or en masse by serial murderers. Why would we believe that they'd be frantically concerned about us dying off from a virus? We think perhaps they're frantically concerned about their own well-being and maintaining their ability to traffic in women without any health risks to themselves.⁶⁴

Her conclusion: women who have been trafficked and prostituted don't mainly need condoms but "civil remedies to fight the traffickers." Disease prevention strategies, such as condom promotion for women in prostitution, will only be effective in protecting women if they embrace recognition and active promotion of women's human rights-most importantly, the right not to be trafficked into the sex industry.

Public Policy Recommendations

There has been a recent trend to separate international sex trafficking from domestic sex trafficking and prostitution. This directly contradicts the United Nations Convention for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others, which recognized the inconsistency of isolating the international problem of sex trafficking from the various forms of commercialized sex within nation-states. The international experts came to the conclusion that the principal factor fostering international traffic in women from the East, for example, was the existence of both illegal and licensed houses of prostitution already operating on a national level in the East.⁶⁵

Our final policy recommendations are based on the necessity to rejoin trafficking with prostitution. There is an urgent need for courage and for the political will to act against this global exploitation of women and children. The challenge for governments today is to recognize that prostitution is a massive and growing industry, while not ratifying prostitution as a job. The challenge for governments today is to provide rights and protections for women in conditions of sex trafficking and prostitution, while acknowledging that sex trafficking and prostitution violate women's rights and bodily integrity. The challenge for governments today is to punish the growing numbers of sexual exploiters-traffickers, pimps, procurers, and buyers-while not penalizing the women who find themselves in conditions of sex trafficking and prostitution.

Although it is not within the scope of this article to explain at length the debate over legalization of prostitution, legalization vs. decriminalization, and recognizing and redefining prostitution as "sex work," and sex trafficking as "migration for sex work," it is necessary to understand some of this background with reference to the policy dimensions. Legalization means that the state, whether through regulating health, size of brothels, and/or working conditions for those in the sex industry, recognizes prostitution as work and provides a legal framework within which the sex industry may operate. At the same time, the state taxes brothels and other sex-related enterprises and thus, as some would say, becomes the pimp and lives off the earnings of women in prostitution.

Decriminalization, on the other hand, means that those in the sex industry are not arrested, charged, or prosecuted for prostitution-related offenses because they are not criminally liable. Many groups, such as COYOTE in the United States and the Global Alliance Against Trafficking in Women internationally (GAATW) want the entire industry decriminalized. They argue that prostitute users ("customers" or johns) should be decriminalized and that women have the right to contract with third parties, now known as pimps, redefining them as "third party business agents" for women in the sex industry. Other NGOs, such as the Coalition Against Trafficking in Women and the International Human Rights Network, want the women decriminalized, and prostitute users and pimps subject to prosecution. For many years, the sex industry has lobbied for legal and economic recognition of prostitution and related forms of sexual entertainment as "sex work." Now, some women's groups and other NGOs are doing the same kind of advocacy under the banner of women's human rights.

It is our contention that state recognition of prostitution as work, or state regulation of the sex industry as an economic sector, institutionalizes the buying and selling of women as commodities in the marketplace. Legalization and state regulation of prostitution further removes women from the economic mainstream by segregating prostituted women as a class set apart for sexual service and servitude. Legalization and decriminalization of the entire industry reinforces the definition of woman as sexual object, and as a provider of sexual services, thereby eroticizing and perpetuating gender inequality. Furthermore, legalization and decriminalization of the buyers and pimps legitimizes and strengthens men's ability to put the bodies of women at their disposal.

Rather than accept the unexamined premise that some women need prostitution to survive economically, we question why prostitution is the only place where mostly women can turn when all else fails. It is a gendered reality that prostitution may be the best of the worst economic options that many women face. However, the fact that there are often no better income opportunities for women should not function as a new economic law turning many women's desperate economic plights against them by institutionalizing

their exploiters as entrepreneurs. In our framework, this is to surrender the political battle for women's right to sustainable work, and to tolerate women's bodies being increasingly bought for sex and used as merchandise in the marketplace.

Some will say that women's choices should be respected and that if women consent to entering and remaining in the sex industry, that is their right. We think that this argument confuses compliance with consent. Nor do we doubt that a number of women "choose" to enter prostitution. However, we do not think that choice should be the issue or the governing standard. We can "choose" to be exploited and we can "choose" to enter into conditions that may harm us.

The political questions are: "Should governments confer legal legitimacy on the sex industry, and foster legal conditions that legitimate exploitation of and harm to women in the name of fostering choice? Whose choice is really promoted in this argument?" Distinctions between "forced" and "consensual" prostitution promote the view of prostitution as the individual act of an individual woman and conceal the role of an enormous global industry that propels women and children into prostitution. The sex industry makes no distinctions between "forced" and "free" prostitution, while encouraging others to do so.

We, therefore, encourage governments to use the following elements in implementing policy, and in drafting national, regional, and international legislation addressing sex trafficking and prostitution: that governments protect and promote women's rights, while they are still in conditions of sex trafficking and prostitution, and at the same time aggressively eliminate the causes; reject any policy or law that legitimizes sex trafficking or prostitution or that legalizes or regulates prostitution in any way, including as a profession, occupation, entertainment, or an economic sector; decriminalize the women in conditions of sex trafficking and prostitution, at the same time as they penalize the traffickers, pimps, procurers, and promoters of prostitution, as well as those who buy women for sexual acts (johns or customers); adopt legislative and other measures to prohibit sex tourism and to penalize those who organize and advertise tourism for the purpose of sexual exploitation as

practices of the procuring and promoting of prostitution; use appropriate publicity to warn of prosecution for sex tourists; prohibit persons or enterprises from promoting, profiting from, or engaging in any business involving the matching of women in marriage to foreign nationals, as in mail-order bride sales and pseudo-marriages.

Women in conditions of sex trafficking and prostitution have the right to sexual integrity and sexual autonomy, and should therefore be able to sue for sexual harassment, assault, and rape. Consent of the woman procured for sex trafficking and prostitution should not be recognized as a defense for pimps, procurers, and buyers, nor as a rationale for state-sanctioned institutionalization of prostitution as work. Sociocultural practices of temporary marriage honor or written contracts should not be used to justify or defend against any act of sexual exploitation.

Women should receive fair, sustainable, and, if necessary, legally mandated compensation as waitresses, receptionists, dancers, singers, bar workers, entertainers, artists, "GROs" (guest relations officers)--but not as "sex workers"--so that the economic pressure to engage in the prostitution often cloaked by these terms is reduced. Women should be able to keep and control any money they receive, and no third party should profit from the earnings of women in conditions of sex trafficking and prostitution.

Most importantly, governments and non-governmental organizations must put resources at women's disposal such as credit, micro-lending programs, enterprise training, and other needed services; and provide medical care, shelter, voluntary counseling, and educational programs for women who have been harmed by sex trafficking and prostitution. A woman's prior sexual history, or status as an illegal immigrant or stateless person should not be used against her. Trafficked women should be provided with refuge, visas, refugee status, protection from traffickers, and voluntary repatriation whether, as victims of sex trafficking, they have entered a country legally or illegally. Under no circumstances should governments construe these above recommendations in a manner to prevent women from migrating or traveling abroad.⁶⁶ Governments and non-governmental organizations can ac-

knowledge that there are women and girls attempting to survive in conditions of sex trafficking and prostitution without normalizing prostitution as work. Governments and non-governmental organizations can acknowledge that women have the right to do what they can to mitigate these conditions until they can live in a society which no longer supports or tolerates the mass male consumption of women and children who have been trafficked and prostituted.

Governments and non-governmental organizations have tended to emphasize short-term solutions for women in sex industries that encourage women to stay in the industry, such as negotiating for safe sex, condoms, and HIV/AIDS testing. However, it is important to advocate for such measures within a context of other proposals, which provide women with alternatives to sex trafficking and prostitution. We believe that women have the right to humanitarian assistance to help them out of prostitution rather than humanitarian assistance to keep them in it.

- 1 The Scottish economist Adam Smith promulgated the “invisible hand” in society as the underlying principle that when each individual acts in their own self-interest, the society will achieve an optimum level of economic welfare. This principle, which fortifies market capitalism, has been widely critiqued by feminist and environmental economists. Marilyn J. Waring, *If Women Counted* (San Francisco, CA: HarperCollins, 1988); Herman E. Daly and John B. Cobb, *For the Common Good* (Boston, MA: Beacon Press, 1989).
- 2 Amy O'Neill Richard, "International Trafficking in Women to the United States: A Contemporary Manifestation of Slavery and Organized Crime," *Women* (Washington, DC: Central Intelligence Agency, 1999).
- 3 The Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children is a wide-ranging international agreement to address the crime of trafficking in persons, especially women and children, on a transnational level. It creates a global language and legislation to define trafficking in persons, especially women and children; assist victims of trafficking; and prevent trafficking in persons. The trafficking in persons protocol also establishes the parameters of judicial cooperation and exchanges of information among countries. Although the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children anticipates accomplishing what national legislation cannot do on its own, it is also intended to jumpstart national laws and to harmonize regional legislation against the trafficking in women and children.
- 4 The Bangladeshi-Pakistan and Nepal-India estimates come from the "Fact-Finding National Workshop on Trafficking in Women and Children" (Dhaka, Bangladesh: Centre for Women and Children Studies, May 23-25, 1997), 33. However, a report from the Lawyers for Human Rights and Legal Aid (LHRLA), "Trafficking of Women and Children in Pakistan: the Flesh Trade Report 1995-96," puts the figure higher at 100-150 Bangladeshi women per day trafficked into Pakistan. The Philippines to Japan numbers come from Irene F. Daguno, "Migration and Trafficking of Filipino Women for Prostitution," in *Halfway Through the Circle: the Lives of Eight Filipino Women Survivors of Prostitution and Trafficking* (Manila: Women's Education, Development, Productivity and Research Organization, 1998).
- 5 Richard, "International Trafficking in Women to the United States."
- 6 Janice G. Raymond, Donna M. Hughes, and Carol A. Gomez, "Sex Trafficking of Women in the United States: International and Domestic Trends," funded by the US National Institute of Justice (2001). Available online at www.catwinternational.org.
- 7 Richard, "International Trafficking in Women to the United States."
- 8 Coalition Against Trafficking in Women, "Women in the International Migration Process: Patterns, Profiles and Health Consequences of Sexual Exploitation," funded by the Ford Foundation (2002).
- 9 Philip Martin and Jonas Widgren, "International Migration: A Global Challenge," *Population Bulletin*, Vol. 51, No. 1 (April 1996), 1-48.
- 10 Ibid.

- 11 Irene L. Gendzier, "Labour Exodus: Market Forces and Mass Migration," *Global Dialogue* (Summer 1999), 89-101.
- 12 Women's Education, Development, Productivity and Research Organization (WEDPRO), *Halfway Through the Circle*.
- 13 Ibid.
- 14 Philippines National Statistical Office, Survey of Overseas Workers (1994).
- 15 Gendzier, "Labour Exodus." *Global Dialogue*, 89-101.
- 16 Martin and Widgren, "International Migration," *Population* 1-48.
- 17 Human Rights Watch, *A Modern Form of Slavery: Trafficking of Burmese and Girls into Brothels in Thailand* (New York: Human Rights Watch, 1993), 46-52.
- 18 Saskia Sassen, *Globalization and It Discontents* (New York: The New Press, 1998).
- 19 Ibid., 55.
- 20 Ibid., Note 12, xxxvi.
- 21 Ibid.
- 22 Ibid., xxxi.
- 23 Ibid, xxx.
- 24 More than 40,000 sex-related sites exist on the Internet, and it's commonly known that pornography sites have the highest user demand, bring in the most revenues, and literally, *drive the Internet*. "Adult materials account for 69 percent of the \$1.4 billion pay-to-view online-content market, far outpacing video games (4 percent) and sports (less than 2 percent)." Brendan Koerner, "A Lust for Profits," *US News and World Report* (March 27, 2000), 36-42. Indeed, one analyst concludes that the growth of the Internet has been spurred by the immense sex consumption taking place on the Internet, especially at pornography, sex tourism, and mail-order bride Web sites. Donna Hughes, *Pimps and Predators on the Internet: Globalizing the Sexual Exploitation of Women and Children* (North Amherst, MA: Coalition Against Trafficking in Women, 1999).
- 25 S. Tunsarawuth, " 'Thailand's \$44 Billion Underworld Prostitution Heads List of Lucrative Businesses,' Says Study," *Straits Times*, December 3, 1996.
- 26 Richard, "International Trafficking in Women to the United States."
- 27 Michael Ellison, "Atlanta Police Smash Sex Slave Ring," *Guardian*, August 21, 1999.
- 28 R. Robin McDonald, "Human Contraband: Asian Women Expected Jobs, Not Prostitution," *The Atlanta Constitution*, August 31, 1999.
- 29 Richard, "International Trafficking in Women to the United States."
- 30 Ibid., 17.
- 31 Ibid., 19-20.
- 32 Ellison, "Atlanta Police Smash Sex Slave Ring," *Guardian*.
- 33 United Nations Population Fund, *Violence Against Girls and Women: A Public Health Priority* (New York: 1998).
- 34 Lori Heise with Jacqueline Pitanguy and Adrienne Germain, "Violence Against Women: The Hidden Health Burden," World Bank Discussion, Paper 255 (Washington, DC: The World Bank, 1994).
- 35 Ibid., 17.

- 36 Ibid., 19-20.
- 37 Wendy Taylor and Jacquelyn Campbell, "Treatment Protocols for Battered Women," *Response*, Vol. 14, No. 4 (1991), 16.
- 38 Ibid. This body of research and the professional activism of feminist health care providers has resulted in more recent written policy and protocols for medical providers in clinic, office, and emergency room settings to assess injured women for battering, to document the physical findings, to inform the woman of her rights, and to give her referral information for counseling and shelters.
- 39 Raymond, Hughes, and Gomez, "Sex Trafficking of Women in the United States."
- 40 Sachi Sri Kanta, *Prostitutes in Medical Literature* (Westport, CT: Greenwood Press, 1991).
- 41 Ibid., 173-176.
- 42 Taylor and Campbell, "Treatment Protocols for Battered Women," *Response*, 16-21.
- 43 Ruth Parriott, *Health Experiences of Twin Cities Women Used in Prostitution: Survey Findings and Recommendations* (1994), Available from Breaking Free, 1821 University Ave., Suite 312, South, St. Paul, Minnesota 55104.
- 44 Council for Prostitution Alternatives, 519 Southwest Park Avenue, Suite 208, Portland, Oregon 97205.
- 45 Parriott, *Health Experiences of Twin Cities Women Used in Prostitution*, 21. These studies are cross-sectional interviews based on self-reporting and recall in a select groups of women survivors. They are not case control studies like those cited in the significant body of medical literature on prostitution and sexually transmitted diseases amassed by Kanta. Historically, health professionals have designed case control studies which single-mindedly envisaged prostituted women as vectors of sexually transmitted disease. The health intervention designed from the findings of those studies prescribed a regimen of antibiotics for prostituted women. Other harm and trauma were ignored, and prostitution was "protected" for the buyers.
- 46 Martin Foreman, "A Global Epidemic Driven by Men Puts Women at Risk," *The Gazette* (Montreal), November 28, 1998, B1.
- 47 Gena Corea, *The Invisible Epidemic* (New York: HarperCollins, 1992).
- 48 Kanta, *Prostitutes in Medical Literature*.
- 49 Jodi Jacobson, "Women's Reproductive Health: The Silent Emergency," *Worldwatch*, Paper 102 (Washington, DC: Worldwatch Institute, June 1991).
- 50 Mary Caron, "The Politics of Life and Death," *WorldWatch* (May/June 1999), 30-38.
- 51 Ibid.; *Southeast Asian Population in Crisis* (New York: UNFPA, 1998); Murray Feshbach, "Dead Souls," *The Atlantic Monthly* (January 1999), 26-27.
- 52 Caron, "The Politics of Life and Death," *WorldWatch*, 34.
- 53 Coalition Against Trafficking in Women, *Women in the International Migration Process: Patterns, Profiles and Health Consequences of Sexual Exploitation*, funded by the Ford Foundation (2002).

- 54 One interview was discounted for this question because of a contradictory response.
- 55 Sharon Edwards, "Condom Breakage in Brothels," *International Family Planning Perspectives*, Vol. 20, No. 1 (March 1994), 2.
- 56 Mary O'Brien, *Making Better Environmental Decisions: An Alternative to Risk Assessment* (Cambridge, MA: MIT Press, 2000).
- 57 Ibid.
- 58 Ibid.
- 59 Robert I. Friedman, "India's Shame: Sexual Slavery and Political Corruption are Leading to an AIDS Catastrophe," *The Nation* (April 8, 1996), 4.
- 60 Environment and Research Foundation, "The Precautionary Principle," *Rachel's Environment and Health Weekly*, No. 586 (February 20, 1998), 3. Questions attributed to Joel Tickner.
- 61 Caron, "The Politics of Life and Death," *Worldwatch*; Geoffrey Cowley, "Fighting the Disease: What Can be Done," *Newsweek* (January 17, 2000), 38.
- 62 Richard Levins, et al., "The Emergence of New Diseases," *American Scientist*, Vol. 82 (January-February 1994), 52-60.
- 63 Richard Levins, "Toward an Integrated Epidemiology," *Trends in Ecology and Evolution*, Vol. 10, No. 7 (July 1995), 304.
- 64 Sarah Wynter, "Prostitutes, Politicians & Prophylactics," *WHISPER Newsletter*, II, 3, (Summer 1987), 2.
- 65 *Report of the Special Body of Experts on Traffic in Women and Children*, League of Nations Document (1927) and *Report to the Council of the Commission of Inquiry into Traffic in Women and Children in the East*, League of Nations Document (1932).
- 66 Janice G. Raymond, "Trafficking for Prostitution," in Eve Landau, ed., *Women in the 21st Century*, (Paris: UNESCO, 2002).