

# Operational Guidance to Address

# **Humanitarian Trafficking in Humanitarian Crises**

# A Radcliffe Institute for Advanced Study Exploratory Seminar Harvard University

April 2017, Cambridge, MA, U.S.A.

#### **Seminar Leaders**

Hanni Stoklosa, MD, MPH

Executive Director, HEAL Trafficking Harvard Medical School Department of Emergency Medicine, Brigham and Women's Hospital

#### Cathy Zimmerman, MA, MSc, PhD

Professor, Gender Violence & Health Centre The London School of Hygiene & Tropical Medicine

## **Participants**

Sarah Craggs

Senior Programme Coordinator/ Head of

Programmes, Afghanistan

International Organization for Migration (IOM)

Hani Mansourian

Coordinator

Alliance for Child Protection in Humanitarian

Action/UNICEF

Julie Freccero

Director, Health & Human Rights Initiative

Human Rights Center,

University of California Berkeley School of Law

Amy Mahoney

Head of Unit, Counter-Trafficking and Protection

International Organization for Migration (IOM)

Quinn Kepes

Program Director, Verité

Rapporteur

Nirma D. Bustamante, MD

International Emergency Medicine Fellow

Division of International Emergency Medicine and Humanitarian Programs

Department of Emergency Medicine, Brigham and Women's Hospital

Michela Macchiavello

Assistance to Vulnerable Migrant Specialist

Migrant Assistance Division,

Department of Migration Management

International Organization for Migration (IOM)

Hernan del Valle, Msc, JD

Head of Advocacy and Operational Communication

Communications

Medecins Sans Frontieres (MSF) / Doctors Without

**Borders** 

Megan Hjelle-Lantsman

U.S. Department of State

Janet Zinn

Program Analyst, U.S. Department of State

As a result of conflict, poverty, and other complex social, cultural, and political factors, the world today is facing greater rates of displacement and larger numbers of migrants than ever before. This increase of dislocation driven by humanitarian crises, unfortunately, also presents growing opportunities for human trafficking to occur. In spite of the scope of this problem, there is little dependable data on human trafficking in humanitarian crises settings. Furthermore, there is a severe lack of resources offering operational guidance for humanitarian workers, nongovernmental organizations (NGOs), and United Nations (UN) agencies on how to detect, respond, and prevent human trafficking. Humanitarian workers, including all practitioners and providers working directly with displaced urban populations, are well-positioned to identify and intervene in cases of human trafficking. NGOs and UN agencies are instrumental in managing service delivery and coordinating overall humanitarian responses in crisis settings. The seminar convened an interdisciplinary stakeholder group of experts to explore multifaceted approaches and solutions to create a plan to bridge gaps in the current research to enhance the humanitarian response.

#### **Objective**

Create research agenda that would help inform operational field guidance in the prevention and response of human trafficking in humanitarian crises that is succinct and implementable through discussion of:

- participant current and prior experiences;
- characteristics, dynamics among different types of exploitation, vulnerable groups and perpetrators in selected context;
- current aid worker and international organization practice of addressing exploitation, if at all, in various contexts;
- potential opportunities and barriers in that context to both prevent exploitation and respond to survivors who have been trafficked.

#### Aims

- Learn to identify human trafficking cases early. Subsequently, have the tools to know what to do, not to do, and how to link to other structures on the ground.
- Identify and understand gaps in current literature.
- Achieve funding priority on work that is doing focused and intentional programming.
- Evaluate concepts looking at harm and outcomes and not only narrow legal parameters in definition of trafficking.
- Discuss current data to identify gaps and development research that will guide rapid screening tools to ensure humanitarian responders have minimum knowledge and tools to provide air to human trafficking victims.

#### **Challenges Specific to Research**

- Human trafficking has no direct sub-cluster in OCHA Cluster Coordination system to engage trafficking. Affects funding during acute crisis.
- Division between policy and operational level. Coordination among organizations to make policy level topics operational is necessary.



- · Lack of awareness and recognition of issue among aid workers and international agencies of human trafficking as an independent issue from gender-basedviolence.
- Lack of data associating human trafficking to health outcomes.
- Tendency for providers to be reluctant to address human trafficking given perception of danger, complexity, as well as lack of training available.
- Research considerations are complex and require specialized methodology.
- Funding structures for research are not completely clear or freely available.

# **Future Research Agenda**

#### Prevention (individual/community) - reducing risks of trafficking

- 1. What are the universal vulnerability assessment tools that are feasible and effective across humanitarian crisis? And how do we adapt them for specific contexts?
- 2. What increases risk of trafficking?
- 3. What reduces risk of trafficking?
- 4. At what time point do theses risks increase/decrease?
- 5. What prevention interventions increase/decrease adverse outcomes? are they effective and feasible?
- 6. Who, when, how should vulnerability assessment take place?
- 7. What are the most succinct/accurate ways of assessing vulnerability?
- 8. How do we get people to pay attention? Get champions? How do we mainstream?
  - a. Frame as live-saving?

## Prevention (structural) - to reduce structural drivers

- 1. What policies work in preventing trafficking? Increase risk of trafficking?
- 2. What are the minimum level of state structures necessary to mitigate trafficking? And which ones have to be in place?
  - a. What about civil society structures?
- 3. Which structural mechanisms have the most influence over the prevalence and incidence of trafficking?
- 4. What are the characteristics of crisis/context that lead to greater risk of trafficking?
  - a. Pre-existing trafficking? Tourists?
- 5. Could there be a predictive tool?
  - a. What pre-crisis anti-trafficking preparedness can mitigate the effects of crisis?

#### Response (Identification, treatment, referral) to a victim/survivor

- 1. What are the universal trafficking screening tools that are feasible and effective across humanitarian crisis? And how do we adapt them for specific contexts and stages of
- 2. Who, when, how should screening be done (by)?
- 3. How does it change based on resources/lack of resources?
- 4. What are the ethics around screening when there is no referral?
- 5. How do we reduce harm/do safety planning?
- 6. What are the most succinct/accurate ways of screening (for identification and data collection)?



7. How do we measure the impact of "psychosocial support"?

### Implementation by aid workers, in different contexts

- 1. What factors to consider in implementation and adaptation?
- 2. What does the response look like for mainstream vs specialized responders?
  - a. What is the minimum amount of training needed?
  - b. What are the boundaries of their role?
- 3. Prioritizing of trafficking screening
  - a. Do you screen everyone? Is it feasible?
    - When is it most appropriate and when and by whom?
  - b. How do we prioritize basic need provision?
- 4. If we don't have enough funding/time available how do you doscreening
  - a. Do you do rapid screening?
- 5. How do we ensure not overlook vulnerable populations? How do not burden already overburdened system?
- 6. What capacity is needed (\$, time, human resources)? Are they necessary for adaptation/implementation?
- 7. What adaptations are necessary at various stages of acrisis?
- 8. What are the other relevant thematic frameworks that we are able to drawfrom?
  - a. Including their tools and guidance
  - b. Domestics vs gender based violence vs emergency medicine vs disaster response, etc
- 9. What are the current gaps in the UN cluster system?
  - a. How are clusters coordinating right now?
  - b. What is the most effective coordination model?
- 10. How do we implement effectively in and outside the UN clustersystem?
  - a. Since not activated most of the time
  - b. Every sector should have some responsibility
- 11. What tools can we use to track program and policy implementation?
  - a. What are the outcomes we are looking at?
  - b. Labeling the benefit beyond just trafficking mitigation alleviation of suffering.