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Human Trafficking and Infectious Disease:

A Critical Reflection on International Cooperation

The H1N1 outbreak triggered a worldwide coordinated response led by the World Health Organization. Although the full impact of this influenza pandemic has yet to be determined, the scenario in general is one of optimism because the response of the international community suggests solidarity. However, the same cannot be said on the issue of human trafficking where international response appears disjointed. Why the differentiated response? Why are states more cooperative in mitigating infectious disease as opposed to human trafficking? This edition of NTS Insight examines states behaviour in the context of international cooperation.

By Nur Azha Putra

Introduction

In her speech at a high-level meeting on Influenza A in Mexico in June 2009, the Director-General of the World Health Organization (WHO), Dr Margaret Chan, pointed out that in addition to modern scientific, communication and information technology which are unprecedented in their power, the international community has demonstrated 'collaboration and solidarity' in their fight against the influenza pandemic.

In the larger scheme of things, Dr Chan has every reason to be optimistic. After all, despite the high infection rate, the mortality rate has remained somewhat modest. At the time of publication, out of the 134,503 cases worldwide, there have been 816 reported cases of mortality which is

approximately 0.6 per cent (WHO Pandemic (H1N1)-update 59). Although states were unable to contain the spread of the H1N1 virus, perhaps more reassuringly is the nature of collaboration amongst states particularly in their strategic national response.

Preceding Dr Chan's remarks and in contrast, the U.S. Secretary of State, Hillary Rodham Clinton, announced at the release of the annual "Trafficking in Persons Report" that the department has added 12 more states to its watchlist of nations which it regarded as having failed in implementing satisfactory measures to address the problem of human trafficking. This represents a 30 per cent jump from the 40 countries on the list in 2008.

Understandably, Mrs Clinton has every reason to be pessimistic. Citing the International Labour Organization (ILO) figures, the U.S. State Department estimates that there are at least 12.3 million adults and children in forced labour, bonded labour, and commercial sexual servitude at any given time. Of these victims, at least 1.39 million are victims of commercial sexual servitude, both transnational and within countries. The ILO further estimates that 56 per cent of all forced labour victims are women and girls.

In light of both statements, why does the international community's response towards these two issues remain largely differentiated? Why are states more coordinated in responding to the influenza pandemic while at the same time, appear segregated in dealing with human trafficking despite the reported high number of victims? How do we rationalise the different approaches towards mitigating human trafficking and global health security? After all, both pose significant threats to national interests and human security.

The Securitisation of Issues

One may argue that states' response towards threats are determined by how vulnerable its respective society deems itself to be. This then raises the question of how an issue is designated as a matter of security. Hough points out in his book, *Understanding Global Security*, that traditional Realists regard non-military issues as 'low politics' and would thus frame military issues as security issues which governments must prioritise and hence accord 'national security' status.

This narrow perspective on security was eventually contested by the security 'wideners' who argued that non-military issues could also be securitised and accorded 'national security' status as well. This was clearly a response to the observation that states are also vulnerable to non-military threats. Hough adds that the Copenhagen School went further in using the methodology of the 'speech act' to define when an issue becomes a security issue. This analytical framework includes non-state actors and securitising agents but particular emphasis is given to the urgency attached to these issues in the political discourse.

Thus, in securitising a threat, the securitising actor would first identify an issue and articulate its existential threat to a particular audience. To successfully convince the target audience, the securitising actor would have to demonstrate the linkages between the risks and the survival of the audience. A state's willingness to mobilise its resources to mitigate these risks depends on the perceived vulnerabilities.

The Copenhagen School approach is a useful framework in trying to understand why states behave differently towards certain threats but it does not explain why states collaborate on the issue of infectious disease and yet remain segregated as in the case of human trafficking.

Carpet weavers like this family are usually Dalits or "Untouchables," the lowest caste in South Asian society. In many instances, the children are helping a family member, or someone else in their village who has fallen into debt. An offer is made to place a loom in their hut so they can pay off their debt, but this only ensures their enslavement, sometimes for generations.*

Reflections on the Treatise of 'Society of States'

Perhaps, it is useful to refer to Hedley Bull's treatise on the *Society of States* in unpacking states' behaviour towards global security issues. Bull attributes inter-state cooperation to the existence of *common interests* and *common values* which are achieved through the workings of *common institutions,* and that states' behaviour are driven by material and social needs rather than just political interests, as perceived by Realists.

In *The Anarchical Society: A Study of Order in World Politics*, Bull asserts that a '*society of states'* (or international society) exists when a number of states coexist and cooperate on the grounds of common interests, common values and are bound by a common set of rules in inter-state relations. States collaborate through a common institution. Bull added that this 'international society' remains functional due to shared common goals. First, these goals are primarily in the preservation of recognition that states remain the principal actors in world politics and are primarily responsible in discharging the relevant rights and duties; especially in relation to supra-states, sub-states and trans-states actors. Second, this international society preserves the independence and sovereignty of its member states. Third, preserving peace (absence of war) between member states and finally, in the pursuit and preservation of common goals of all social life.

The last point is perhaps most relevant to our analysis because it suggests that states could be driven by material and social needs rather than just 'high politics'. Although Bull did not explicitly claim that the 'common goals of all social life' includes human trafficking and infectious disease, he did qualify later by claiming that 'human interdependence on material needs leads states to perceive a common interest in ensuring respect for agreement' and that 'common interests may be the consequence of fear' due to human altruism and resource scarcity.

Three factors emerge here which are useful in analysing states response towards global security and they are *common interests, common values* and *common institutions*. What follows henceforth is a brief analysis of how these factors have shaped international community behaviour towards human trafficking and H1N1.

Common Interests

States have declared, via their participation in the WHO and the United Nations (UN) Trafficking Protocol, a common interest to mitigate global security threats. However, a common interest does not necessarily lead towards full cooperation and collaboration particularly on the issue of human

trafficking. In this instance, a common interest signifies intent but not necessarily commitment because unlike infectious disease, the impact of human trafficking on social life is not universal as illustrated below.

Visual Impact

The impact of human trafficking varies from one state to another depending on region, level of economic development and socio-cultural norms. On the other hand, the universality of infectious disease lies in its direct impact on human lives and therefore delivers an unequivocal sense of vulnerability for states and societies. For instance, the consequences of H1N1 infection are deterioration of health and in certain instances, mortality. Furthermore, influenza pandemics in the past have claimed million of lives as in the case of the Spanish Flu and Hong Kong Flu. Thus, the fear of death is a potent tool in securitising infectious disease.

Contrary to this, the victims of human trafficking are usually 'invisible'. Victims usually come from poor families, lured into promises of a better life for themselves and their families. They might be offered a job or an education, while others are kidnapped and sold by friends and family members for profit. The United Nations Children's Fund (UNICEF) estimates that in the past 30 years, trafficking of women and children in Asia for sexual exploitation has victimised over 30 million people.

Furthermore, sex workers are not a common sight to the average people because brothels and red-light districts have its own specific clientele and do not cater to the public. It is thus 'hidden' from public scrutiny. Other forms of human trafficking such as forced labour, bonded labour, debt bondage, child labour and involuntary domestic servitude also thrive under the condition of anonymity. In short, the human costs of human trafficking are far less visible than infectious disease although the repercussions on human security are just as devastating. Perhaps, due to its anonymity, human trafficking is perceived as a lesser threat to social life and thus tolerated and relegated in the order of priority within the scheme of national interest.

Economic Impact

Arguably, a threat is not a threat unless it can be quantified within the maxim of 'clear and present' danger. With regard to infectious disease, the World Bank (WB) announced that a global pandemic could impact the world economy in unprecedented ways. In a 2008 report entitled Evaluating the Economic Consequences of Avian Influenza, the WB estimated that a flu pandemic could cost US$ 3 trillion and result in a nearly five per cent drop in world gross domestic product.

The WB has estimated that more than 70 million people could die worldwide in a severe pandemic. In 2007, an influenza pandemic as severe as the great flu of 1918 could cost the United States US$ 683 billion and plunge its economy into the second-deepest recession since World War II, warned a U.S. based non-profit health advocacy group. 'If rates of illness and death matched those of 1918—when one third of the population fell ill and 2.5 per cent of those who were sickened died—U.S. production of goods and services could shrink 5.5 per cent in a year', according to an analysis released by the Trust for America's Health. Earlier in 2006, an Australian independent think-tank, Lowy Institute for International Policy, estimated that in the worst-case scenario, a flu pandemic could wipe US$ 4.4 trillion off global economic output.

Overall, the impact of a global pandemic could cost the world economy anywhere between US $683 billion to US$ 4.4 trillion. In comparison, quoting the ILO statistics, human trafficking is estimated to affect 12.3 million people which generated transactions amounting to US$ 32 billion. This is an increase from its 2005 report which estimated US$ 28 billion.

Kay Chernush for the U.S. State Department

An advertising board outside a club in Hong Kong that promotes illicit services. According to U.S. Government statistics, the majority of victims of human trafficking moved across international borders - about 65% - are trafficked for the purpose of sexual exploitation.

However, how far true is this distinction on account of human costs?

Critical theorists such as Nobel Laureate, Amartya Sen, and political historian, Jacques Barzun, have argued that aggregating the collective impact on society tends to normalise social differences and exclude social inequalities and thus treat the individual human experience with indifference.

Therefore, building upon this argument, one may conclude that framing the impact of threats on human collectivities rather than on individuals has the effect of nullifying individual interests in favour of the collective interests or the 'greater good'.

Consequently, the interests of minority groups who are also usually 'voiceless' and 'invisible', as in the case of victims of human trafficking, may be considered as marginal or secondary and reduced to the level of 'low-politics'.

Nonetheless, on account of the number of victims and monies involved, the general impression is such that global pandemics appear far more threatening than human trafficking. Understandably, due to the nature of transmission of infectious disease, states have a common interest to cooperate towards mitigating the threat since state's health and global health are inextricably linked.

Common Goals

One glaring trend in human trafficking is that it nearly always flows from poor to rich countries with transit points falling somewhere in the areas in-between. These poor-to-rich flows occur in similar patterns at the regional level as well, with the poorest regions acting as suppliers to satisfy demand in richer regions, facilitated by the transit regions in the middle.

For example in Asia, Japan is a major destination country for women and children who are trafficked from China, Southeast Asia, Eastern Europe, and to a lesser extent Latin America for sexual and labour exploitation. Many of the trafficking victims were coerced into commercial sexual exploitation in strip clubs, sex shops, hostess bars, private video rooms, escort services, and mail-order video services. In Southeast Asia, both Thailand and Malaysia are a destination for trafficked victims from the poorer countries of the region like Laos, Cambodia and Burma.

Following this scenario, the consensus amongst states is that the most effective strategy is that of collaboration and cooperation especially in terms of law enforcement. However, this is perhaps where the similarity or common goal ends because unlike the universal 'image' of infectious disease, human trafficking as a concept enumerates threats such as sexual exploitation, forced labour and child labour, amongst others. These sub-categories pose unique problems and

challenges which require specific strategies and resources and which are relevant according to regional trends. Even the legal framework has to be customised to reflect the specific challenges of the respective countries. A transit country cannot be expected to mirror the strategies of a destination country. In short, states only share a common goal as far as the larger objective is concerned, but this commonality ends nearer to home.

In the case of infectious disease however, the common goal is clear; that the general objective is to control the outbreak, curb the spread and to provide swift medical treatment, amongst other things.

Common Institutions

One of the oft-lamented problems in dealing with human trafficking lies in the application of a common legal framework amongst states. The difficulties encountered in data collection reflect an inherent problem in the fight against human trafficking -- that is, the varying definitions of what constitutes human trafficking itself.

Until the mid-1990s, trafficking has been regarded as a form of human smuggling and a type of illegal migration. It was only in December 2000 with the signing of the UN Protocol to Prevent, Suppress, and Punish Trafficking in Persons when a more distinct global definition emerged.

This UN document, now referred to as the Trafficking Protocol (TP), therefore provides the first internationally accepted definition of the term 'trafficking in persons' and remains the primary international legal instrument which address human trafficking as a crime. Despite this breakthrough, efforts at combating human trafficking have been hampered by a host of challenges. These include the conflation of criminal acts—smuggling with trafficking, the absence and or lack of legal framework for protection of victims, the massive violation of human rights, plus the elusiveness of tracking amorphous groups that perpetuate such exploitation and abuse that are often outside state control.

Actual data often contradict each other since there is no broad agreement regarding the methodology that should be used to calculate such numbers. One possible explanation is that unlike the WHO, there is no international organisation that is charged solely with mitigating human trafficking issues.

At the global level, four organisations have databases on trafficking in persons: The United States Government, ILO, the International Organization for Migration (IOM) and the United Nations Office for Drugs and Crimes (UNODC). Of these, only the United States Government and ILO estimate the global number of victims, while IOM collects data on assisted victims and UNODC traces the major international trafficking routes of the victims.

Perhaps, the absence of an international actor that deals primarily with human trafficking in the same capacity WHO deals with global health security leaves a gap too big to be filled by separate actors.

Consequently, the lack of coordination at the international level results in a lack of leadership amongst states. But the issue of international leadership is not simply a matter of political will. There must be legitimacy to provide moral authority in the eyes of the international community, which at present seems hardly attainable.

As it stands, full international support has yet to be achieved although human trafficking has been around for centuries. The TP was only adopted by the UN in 2000 and entered into force in 2003 and by 2006, the number of member states that implemented the TP has increased from

A 9-year-old girl toils under the hot sun, making bricks from morning to night, seven days a week. She was trafficked with her entire family from Bihar, one of the poorest and most underdeveloped states in India, and sold to the owner of a brick-making factory. With no means of escape, and unable to speak the local language, the family is isolated and lives in terrible conditions.*

54 to 125. However, it does not imply that these states have instituted sufficient national legal frameworks and socio-political processes within their respective countries.

Furthermore, the lack of clear leadership could be easily construed as the ill-effect of competing interests amongst stakeholders. For instance, there are states which are more concerned with issues of human trafficking-induced labour and there are states which are more concerned with sexual exploitation while in other regions, states are more concerned about child soldiers. Each issue poses unique challenges and are further complicated when contextualised within other issues such as internal and cross-border conflict , which fall under the ambit of other international agencies.

On the other hand, the WHO enjoys such legitimacy and recognition on several grounds. To begin with, it was set up by the international community in 1948 specifically on the grounds of promoting the general health of the people of the world. Established on 7 April 1948, the agency inherited the mandate and resources of its predecessor, the Health Organisation, which had been an agency of the League of Nations.

Despite several hiccups along the way, the WHO has largely been effective and successful in combating diseases culminating in the eradication of the infectious disease smallpox in 1979. Inevitably, this enhanced the WHO's reputation and legitimacy amongst member states. More importantly, the WHO enjoys an almost if not entirely unanimous support from member states which are bound by a common interest.

Final Analysis

Therefore, in comparing the international community response towards human trafficking and infectious disease, it is clear that individual states have thrown their weight behind the WHO befitting Bull's concept of 'a society of states' and this is due to the prevalence of a common interest and a common goal which is in the preservation of their 'social life'.

Meanwhile, the problem of human trafficking has deteriorated over the years because of the conflicting interests amongst states have hindered any meaningful progress at both national and international levels. The situation is even more daunting due to a lack of clear and legitimate leadership that could galvanise support and rally resources, which the WHO has effectively performed for decades.

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*** Note**: *All pictures and captions were sourced from the U.S. State Department's Global Report on Trafficking in Persons 2009 and are used appropriate to the terms and conditions.*

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