



UNODC

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GloACT

Toolkit on the Investigation and Prosecution of Trafficking in Persons for Organ Removal



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MODULE 1: INTRODUCTION

Who is this manual for?

This toolkit is created for criminal justice practitioners who play a key role in addressing trafficking in persons for the purpose of organ removal. Trafficking in persons for the purpose of organ removal (TIP for OR) is one of the least known forms of trafficking but detected in many countries around the world. The handful of prosecuted cases worldwide have revealed a high complexity and unique characteristics of this form of exploitation. Understanding how the crime is commissioned and how to identify deviations from the procedures of legal transplantations are crucial elements of its successful prosecution. In many countries, however, the specialized skills required to investigate cases of TIP for OR removal are not taught to criminal investigators nor to specialized anti-trafficking law enforcement or border management units. Similarly, prosecutors and investigators may face challenges in categorizing the crime and difficulties in the interpretation of the elements of the offence of its means, such as abuse of a position of vulnerability, and the role of consent in determining criminal liability or victimhood.

The goal of this Toolkit is to provide criminal justice practitioners with guidance and practical tools to enhance detection, investigation, and

prosecution of TIP for OR cases domestically and internationally. This Toolkit consists of six modules and seven practical tools which supplement the modules, providing interactive and visual aids to assist criminal justice practitioners in developing comprehensive knowledge and practical skills about how the crime is conducted and how to effectively investigate and prosecute it.

This Toolkit will allow criminal investigators, prosecutors, and law enforcement officials to fully understand the methodology for establishing a complex TIP for OR case, the methods of detecting the crime using investigative techniques, what evidence should be gathered and how, and the most effective ways of proving trafficking in persons cases, including the evidence needed to establish the elements of the crime. Recognizing that TIP for OR is also a violation of human rights, this Toolkit incorporates a victim centered-approach to minimize re-traumatization while empowering victims to pursue redress through the criminal justice system, and a rights-based framework to ensure that comprehensive measures are in place to adequately protect and assist victims of trafficking in persons. The Toolkit may also be relevant for a broader category of stakeholders, such as government officials in the health and transplant sector, anti-trafficking committees or agencies and civil society more broadly.

WHAT DO WE KNOW ABOUT TRAFFICKING IN PERSONS FOR THE PURPOSE OF ORGAN REMOVAL?

What is TIP for OR and why does it happen?

- Trafficking in persons for the purpose of organ removal is a form of trafficking in which an individual is exploited for an organ. This is a serious crime which demeans human dignity and the value of human life by exploiting persons' socio-economic vulnerability for financial or material rewards for the traffickers.
- TIP for OR has its roots in the growing demand for and shortage of supply of organs available for transplant worldwide. Organ transplantation is the preferred, and sometimes the only, treatment for patients who suffer from organ failure. Although more than 150,000 transplants are performed annually worldwide, this represents less than 10% of the global need.¹ Disparity between the need and supply of organs has resulted in sick patients trying to obtain an organ illegally from vulnerable and/or impoverished populations, often with the help of facilitators who organized the illicit transplants.
- It is conservatively estimated that the organ trade, which also includes TIP for OR, generates approximately USD \$840 million to USD \$1.7 billion annually.²

Where and in what context does it occur?

- Trafficking in persons for the purpose of organ removal is a logistically complex and elusive form of exploitation of persons occurring across the globe. Over the last 15 years, UNODC reported over 700 victims of trafficking in persons for the removal of organs. The number of persons reported to be trafficked for the purpose of organ removal is potentially growing.³ While the sample size is too small to be conclusive over a two year spread, it was noted that in 2017 the total number of TIP for OR cases reported to UNODC'S GLOTIP was of about 25 persons, whereas in 2018 it was 40. Most of these victims were reported in 25 countries in North Africa and the Middle East, Western, South Asia, South East Asia, Central America, Western and Central Europe and Eastern Europe. Even though the number of identified victims appears to be low, the scale of the problem is likely to be much larger. Specific factors that impact low rate of identified victims and prosecuted cases of TIP for OR, are discussed below.

How to use it?

The Toolkit is divided into six thematic modules with a number of supporting tools. Each module addresses different aspects of the TIP for OR crime. It is recommended to start with the introductory modules to develop a comprehensive understanding of how TIP for OR is conducted and how to address it, utilizing the TIP for OR framework. However, depending on one's role and interest, some modules will be more applicable than others.

- **Module 1:** An introduction to TIP for OR, the key characteristics, including a summary of what is known and unknown.
- **Module 2:** An overview of the international legal framework, including an analysis of the differences between TIP for OR, organ trafficking, and other relevant provisions applicable.
- **Module 3:** An outline of applicable legal and policy framework regarding victim protection, assistance, and taking into account a gender perspective and covers the profile of victims, consequences of organ removal, short-, mid-, and long-term needs of victims, and measures required to ensure their recovery and rehabilitation.
- **Module 4:** A detailed, step-by-step breakdown of the entire legitimate transplant process, encompassing initial assessment practice, transplant procedures, and overview of the roles of medical persons involved.
- **Module 5:** Focused on the investigation phase, this module begins by examining the ethical considerations and risk assessments required before and during the investigation of the crime. The practical (how to) aspects of investigation focus on investigative techniques for trafficking in persons investigations, and the legal and logistical requirements to conduct a cross-border investigation while upholding a victim-centered approach
- **Module 6:** This module discusses the evidence necessary to prove each element of TIP for OR and considers in depth issues of consent, the first line of defense for those accused of trafficking offences. It also looks at the abuse of a position of vulnerability, one of the means that is most frequently used in TIP cases yet least understood.

- According to [2020 UNODC Global Report on Trafficking in Persons](#), North Africa, followed by the Middle East, has the highest share of detections of victims trafficked for the purpose of organ removal, although the overall sample size is limiting in terms of drawing conclusions about regional attribution.⁴
- The situation is different in terms of organ ‘buyers’. Governments in North America, East Asia, West Asia, the Middle East, and Europe have identified their citizens among those who travel abroad to obtain an organ illegally for the purpose of transplantation (in non-legal terms this phenomenon is defined as transplant tourism⁵). In recent years, due to a rapid expansion of dialysis programmes in many African and Asian countries, transplant tourists from neighbouring countries, including West Africa, have been identified.⁶ This confirms that illicitly transplanted organs flow from “the poor to the rich.”⁷
- Due to ongoing humanitarian emergencies and mixed migration flows linked to multiple conflicts, illicit hubs facilitating organ removal have emerged⁸, and new types of vulnerable populations are being targeted, including asylum seekers and refugees.⁹ Refugees and asylum-seekers who have managed to escape their home country may find themselves unable to provide for the basic needs of shelter, food, and healthcare in the host country. As a last resort to obtain money to address their immediate subsistence needs, they may succumb to coercion and the pressure of traffickers. In 2013, the United Nations Special Rapporteur on trafficking in persons, especially women and children, during one country visit revealed how asylum seekers, refugees and persons living in poverty were targeted by traffickers, and, in some cases transferred to other countries to undergo surgery to have an organ removed.¹⁰
- TIP for OR has also been detected in irregular migration hubs. Persons migrating in search for employment or fleeing violence may have to resort to the help of smugglers to enter a country irregularly. In the absence of financial means to pay the smuggling fee, an organ may be sold or claimed by way of payment in kind.

What are the characteristics of TIP for OR?

As compared to other forms of organized crime, trafficking in persons for the purpose of organ removal is exceptional in a number of ways:

- The investigation and prosecution of TIP for OR lies at the intersection of health and transplant law, with criminal law. It requires the involvement of the medical profession and of healthcare facilities. Patients or criminal networks may try to use the services of the regular transplant systems by deceiving medical professionals and the screening mechanisms. Traffickers make use of medical staff for different purposes, including gaining access to hospital laboratories to test the compatibility between donor and recipient, conduct medical procedures such as removing the organs or providing post-surgery recovery or treatment. Alternatively, traffickers may involve transplant surgeons and other healthcare professionals who operate clandestinely.
- TIP for OR has an ever expanding and a quickly changing geographical scope. Organ shortages and long waiting times encourage desperate patients to elude their domestic transplant system to buy organs within national borders or try to circumvent the prohibition of organ trade by travelling to countries where transplantation is poorly regulated or monitored, and where corruption is widespread. Transplant tourism is often categorized and prosecuted as TIP for OR, typically involves the movement of patients from high- and middle-income countries to low-income countries where poor organ donors-victims are recruited, and the surgical procedures take place. Alternatively, organ donors-victims may be recruited in a third country of stay (i.e. not their home country, neither the country of the transplant surgery), and travel to the country where the transplant centre is located.¹¹ To facilitate these complex transplant arrangements, internationally operating organizers and local brokers sometimes work together. In one case, a local broker received US\$2,000 for each of the 12 recruited victims, using online advertisements to look for “kidney donors”. The broker arranged for medical screenings of the newly recruited victims, shared the results with the organizers, and arranged transport for the victims to a third country where the removal of the organ was carried out.¹²
- Organs obtained on the black market usually come from poor, uneducated and vulnerable donors who engage in this illicit act because they are coerced, deceived and/or see it as a last resort to improve their precarious situation.

They can be recruited through advertisements in local newspapers, through various social media platforms, or they are approached by recruiters who work for organ brokers. Sometimes desperate individuals willing to sell an organ may themselves take the initiative and present themselves directly to known recruiters. To have their organ removed, these donors receive anything between US\$500 and US\$10,000, if they are paid at all.¹³ Often, organ donor-victims only cooperate because they are deceived, coerced and/or their economic or other existing vulnerability is taken advantage of.

- TIP for OR invariably results in a very serious violation of physical integrity and significant negative consequences for organ donors. Many donor-victims reported that their physical condition deteriorated significantly and that they also suffer from severe stigmatization and depression. This in turn may cause a further decline in their standard of living.
- Implantation of illicitly obtained organs results in increased post-transplant risks to organ recipients, mainly attributed to infections, severe infectious diseases, including antibiotic-resistant bacteria, which also pose a major public health threat.¹⁴
- The operational structure of the criminal groups which engage in illicit organ removal and transplantation is extremely flexible and complex. TIP for OR may require the involvement of a large variety of actors, organ recipients, and healthcare professionals. The roles of these actors may not always be clearly delineated, and they may operate as part of ad hoc mobile networks without any clear criminal structure¹⁵ or, alternatively, they may belong to highly specialized and organized criminal groups.¹⁶ These actors may include brokers who co-ordinate logistics, such as connecting to organ sellers, arranging the price and actual payments, recruiting transplant surgeons and other healthcare professionals, preparing fraudulent documents, and arranging travel and accommodation.¹⁷ In addition, success often depends upon the support of a wide range of facilitators, such as healthcare officials, hospital administrators, customs officers, embassy officials, police officials, local recruiters, drivers, translators, and minders, who accompany the recruited organ donor-victim and act as enforcers. In other cases, traffickers organize the pairing of donors with recipients in an advanced logistical operation involving language interpretation for foreigners arriving at local hospitals, medical screenings for ensuring compatibility between donor and recipient, medical procedures, and post-surgery treatment. Traffickers may deceive donors into signing

documents falsely stating they are related to the recipient with the purpose of circumventing legislation prohibiting the sale of organs.

- Traffickers may operate over prolonged periods of time with high numbers of victims. One case showed that one trafficking group managed to conduct up to 500 kidney operations in different private homes and hospitals over a period of seven years.¹⁸ At the same time trafficking networks maintain a high level of operational flexibility – they can easily shut down their operation in one location, and move on to another. The reason is that they do not maintain control over one specific person over a long period of time. The entire procedure of organ removal, including the necessary arrangements, can take between a few days to a few months.
- Over the last 15 years TIP for OR has shifted from geographic to online networks.¹⁹ In early 2000, when it became apparent that vulnerable persons are being targeted for their organs, most of those donor-victims could not afford or did not have access to internet. Traffickers had to physically approach them and find medical facilities, or surgeons willing to participate in the illicit process. This way of brokering and trafficking has been heavily supplemented, in some cases, replaced by a digital method of operation. Networks of traffickers have increased their presence and use of social media²⁰, online trading platforms and the dark web to contact, recruit and advertise their operation in more open and accessible ways. Technology is used to proliferate, and improve their operations, and to hide the evidence of trafficking. Similarly, persons in a desperate life situation take to well-known social media platforms to advertise their willingness to donate an organ in exchange for money, consequently becoming an easy target for traffickers. This method also opens a possibility for recipients (buyers) and donors to connect directly, evading brokers. It does not mean that brokers and traffickers became obsolete. They might be contacted by recipients later on to help arrange the illicit transplant and logistical details required for the donor-victim and the recipient to be in the same location. This changing modus operandi results in the 1) appearance of smaller networks and occasionally independent brokers/suppliers (micro-brokers), and 2) new challenges in detecting trafficking networks. On the upside, it is not always possible to erase all electronic evidence (footprint) completely, allowing the investigation of those involved.

Are human organs the only traded type of bodily material?

- The most common organs and tissue sought on the 'organ market' that are obtained from living donors are kidneys, followed by livers and corneas. In recent years other forms of trafficking in human body parts came to light, including human egg trafficking²¹; skin trafficking; trafficking in human embryos; and blood plasma. The UN Trafficking Protocol, in its definition, does not cover trafficking of tissues and cells. Considering that the definitions of exploitation are "a minimum," some States have added to their domestic definition the removal of tissues, cells, and fluids.
- Trafficking in persons for the purpose of organ removal can also occur in cultural and ritualistic contexts that may involve the removal of body parts in addition to organs. In some States, counter-trafficking legislation goes beyond organ removal to also include body parts (to capture cultural and ritualistic practices).

Gender aspect

- From a gender perspective, out of 100 victims of trafficking for organ removal detected and reported to UNODC during the 2014-2017 period, two thirds were men.²² The situation is the opposite in the case of legitimate living donations. International data revealed that 65% of living donors are women and approximately 65% of recipients are men.²³
- Some forms of trafficking in persons are gender specific. This applies, for example, to human egg trafficking, or trafficking in human embryos (mentioned above). In both forms women are required as donors. If they are recruited through illicit means their experience could amount to exploitation, especially if the domestic TIP framework includes human embryos and egg cells.
- Additionally, women have been disproportionately affected in terms of dealing with the consequences of TIP for OR. A 2015 pilot study conducted by UNODC, in partnership with the NGO Coalition for Organ Failure Solutions, found that although men were the primary source of organs, after the surgery the burden of providing financial support and care is disproportionately put on women. This is inter alia because men often suffer from negative psychological effects and turn to addictive substances to cope with shame and deteriorating health.

Are children trafficked for their organs?

- While the majority of trafficking in persons cases involve adults, who have fully developed organs, there are also cases of organ removal from minors, including reported cases from Africa and Eastern Europe.

What has been done so far to address the problem?

Measures to address demand:

- With regards to the prevention of TIP for OR, beyond introducing TIP for organ removal as a form of TIP in their domestic countertrafficking legislation, states are beginning to address the demand for organs for transplantation by launching awareness-raising campaigns about the risks of paid organ donation to warn and deter vulnerable donors.
- To address the demand for organs, Member States are introducing specific policy and health measures, including maximizing the pool of potential donors through changing the legal regime for deceased organ donation from an opt-in to an opt-out system (where citizens are considered to be organ donors unless they explicitly declare that they refuse to donate their organs after death); introducing paired exchanges for kidneys linking willing donors with suitable matches; guaranteeing equitable allocation of organs; restricting unrelated living donation and transplant services to foreign nationals, focusing on national self-sufficiency in transplantable organs; improving transparency, traceability and accountability in transplantation; improving quality and safety in procedures; providing reimbursement of actually incurred costs to organ donors and providing follow-up care to living donors; and prohibiting insurance reimbursement for illegal transplant services. Most recently, the World Medical Association issued a Statement on Measures for the Prevention and Fight against Transplant-Related Crimes, which in addition to advocating for self-sufficiency and better reporting, they called on health professionals to report and refrain from participating in unethical and illegal organ transplantations.²⁴

Measures to address supply:

- UNODC has been delivering technical and legislative assistance to support criminal justice responses to TIP for organ removal for a number of years as part of its role as guardian of the UN Trafficking in Persons Protocol and mandate to support Member States in its implementation. Expert Group Meetings were

convened in 2010 and 2013, followed by the publication of [the Toolkit for the Assessment of Trafficking in Persons for Organ Removal in 2015](#). UNODC, along with WHO and OHCHR, were jointly tasked in General Assembly resolutions in 2017²⁵, 2018²⁶ and 2020²⁷ with the development of research and capacity building programmes as well as guidance to strengthen national capacities of States in tackling TIP for organ removal and organ trafficking. A UN Secretary General's report was issued in 2020 providing information on the progress of the implementation of the 2018 resolution, highlighting, among others, activities undertaken by the three organizations in areas of capacity-building, data collection, policy development and guidance, as well as inter-agency cooperation.²⁸

- In 2021, through the Inter-Agency Coordination Group against Trafficking in Persons (ICAT), the UN mechanism to enhance cooperation and coordination within the United Nations system and beyond on the problem of trafficking in persons, UNODC, OHCHR, OSCE and WHO contributed to the development of [an Issue Brief on Trafficking in Persons for the Purpose of Organ Removal](#).²⁹ This policy paper reflects the views of ICAT's 30 member agencies, in addition to WHO, on specific issues that have been identified as critical to addressing this crime and provide collective policy recommendations and guidance for Member States and relevant stakeholders.
- Considering the above-mentioned efforts to address TIP for OR and to protect vulnerable persons from exploitation, it should be noted that the global COVID-19 pandemic made this task much harder.³⁰ The UN's Framework for the Immediate Socio-Economic Response to COVID-19 warned that "the pandemic is far more than a health crisis: it is affecting societies and economies at their core. While the impact of the pandemic will vary from country to country, it will most likely increase poverty and inequalities at a global scale (...)." The massive global infection rate plunged domestic economies into recession and, in some instances, pushed countries to the brink of economic collapse. Within a short period of time, millions of people gained the status of 'vulnerable'. Without job prospects, financial assistance from states, opportunity to travel to other countries to seek employment, the scenario of selling an organ to address a financial emergency became real for thousands of people. The COVID-19 pandemic also resulted in a decline in legitimate organ removal and transplantation. A study published in May 2020, analyzing the data on organ removal and transplantation from the National Organ Procurement Agency in France

and the United Network for Organ Sharing in the USA, found a direct and strong correlation between the increase in COVID-19 infections and a striking reduction in overall solid-organ transplantation procedures.³¹ More specifically, this reduction amounted to 90,6% in France and 51,1% in the USA. In both countries this reduction was mostly noticeable in kidney transplantation.

What we do not know

- The exact scale of TIP for OR is unknown. In 2007, the World Health Organization estimated that 5 to 10% of all transplants worldwide were performed using an organ from the black market.³² However, in light of growing and aging populations, the globalization of unhealthy lifestyles, and increased mobility, current numbers might well be much higher.
- Relatively few studies were conducted into the nature of TIP for OR and were based on extensive and reliable data and prosecuted cases. This impedes determining the true scope of TIP for OR.
- Data collection and verification are very difficult due to the clandestine nature of this form of trafficking. Additionally, trafficking for the purpose of organ removal raises unique identification challenges, for instance because the exploitative act occurs only once, as opposed to other forms of exploitation that may occur multiple times over much longer periods of time.
- Information regarding exploited organ donors is hard to verify as victims are cautious to report the crime out of fear of being prosecuted for organ selling and possible retaliation from traffickers. Additionally, victims of organ removal are also unlikely to be identified through the existing channels used to identify other victims of trafficking such as those subjected to forced labour or sexual exploitation. These factors, combined with the social stigma associated with selling an organ, result in relatively low numbers of reported victims.
- The absence of reliable and factual statistics can also be attributed to the fact that organ removal, in comparison to other forms of trafficking, seems to constitute only a marginal problem. As a result, there is a considerable gap in effective and coordinated counter-trafficking responses. For example, there is only a handful of specialized services, including NGOs, which work to identify and assist victims of trafficking for the purpose of organ removal.
- It is hard to assess to what extent the TIP framework is utilized to address illicit organ removal domestically. Compared to other forms

of trafficking, there are relatively few detected and successfully prosecuted cases of trafficking in persons for organ removal worldwide. This does not necessarily mean that organ removal was not prosecuted in the past. Organ removal for commercial transplant purposes that exploits vulnerable persons has been and still is, prosecuted under domestic provisions prohibiting organ selling and buying. Awareness raising about the TIP framework and a better understanding of the nature of this form of exploitation could increase the number of cases prosecuted as TIP (and thus the number of victims receiving assistance and protection), and provide a better understanding of the scale of the problem.

transplant-related crimes. Module 3 provides a clear overview of the legal definition of the crime of trafficking in persons for the purpose of organ removal and the similarities and differences between TIP for OR and organ trafficking. Relevant transplant safeguards and criminal law provisions will also be discussed to facilitate a broader understanding of the TIP for OR crime and to complement the TIP framework to improve prosecutorial efforts while upholding the rights of victims.

IMPORTANCE OF TIP FOR OR FRAMEWORK

The importance of addressing organ removal as a form of exploitation through the trafficking in persons framework is relevant when the adult donor does not consent to the removal of the organ, or this consent is obtained by means of coercion, deception, abuse of vulnerability, or any other means included in the trafficking in persons definition.³³ It becomes clear that traffickers target organ donors and recruit them by exploiting their socio-economic vulnerability. Because of financial difficulties or lack of job opportunities or resources (land, livestock), donors may tend to accept whatever monetary offer is proposed to them.

The lack of education or access to reliable information as to the nature of the procedure makes the process much easier for traffickers. One of the well documented tactics of traffickers is to claim that kidneys grow back after being removed, that a person has three not two kidneys, or that a person does not need two kidneys.³⁴ In other cases, traffickers deceived victims in other ways, telling them they were to receive a routine medical check-up, that a medical examination or surgery is part of the process of obtaining a legitimate job, or that the donation of their organs was for altruistic reasons.³⁵

Approaching illicit organ removal as trafficking in persons crime highlights the severe violation of donors' dignity and their exploitation. This in turn enables more severe punishment for those involved and allows the victims to access protection and assistance services they are entitled to. However, due to the clandestine and dynamic character of the crime, the identification, investigation and consequent prosecution of the crime may pose challenges in using the trafficking in persons framework. Additionally, the crime of TIP for OR might overlap with other forms of organ- and

Myth	Myth debunked	Reality	For more information see
<p>A story commonly circulating globally is of a person who is given some kind of drug, and upon taking it, wakes up in a bath of ice with his/her kidney missing.</p>	<p>Organ removal procedure is a complex procedure and needs a lot of preparatory work.</p> <p>It might occur that a person is trafficked for ritualistic purposes or for ‘medicine murder’ (muti murder). Muti murder is defined as a murder in which body parts are removed from a live victim for the sole purpose of using the victim’s body parts medicinally.³⁶ Often times victims suffer from serious bodily harm, or even might be killed.</p>	<p>A 2018 prosecuted case in South Asia involved recruiting and moving an organ donor to another city under the pretense of a well-paid job. Upon arrival in the city the victim was given medication that kept him unconscious for the time required to move him across the border to a neighboring country. He woke up in a clinic with a fresh surgical wound on his side. He was informed by the person who was part of the trafficking network that he was attacked in the street and sustained an injury that required surgical intervention. He found out about the missing organ months later only after returning home, where he was medically examined because he was not feeling well.</p> <p>There are reported cases of persons lured by traffickers with the promise of a better paid job that requires medical tests. These persons may be subjected to organ removal without their knowledge.</p>	<p>What do we know? (Module 1)</p> <p>Typology of cases (Tool 2)</p>
<p>Organ donor needs to be physically forced, coerced, blackmailed or incapable of resisting the traffickers to be considered a victim of trafficking for the purpose of organ removal.</p>	<p>While there are textbook cases of trafficking where a person is physically incapacitated and cannot provide consent, the majority of cases of TIP for OR are situations where organ donor-victims have some awareness of the type of exploitation they are being recruited for and may even have consented to it or have been promised a financial incentive.</p>	<p>Such cases are challenging in terms of the classification and prosecution of the crime, and in terms of recognizing organ donors as victims. The most important aspect in such cases is a comprehensive assessment of the donors’ circumstances, specifically the existence of vulnerabilities that have been taken advantage of by traffickers. (“Consent to the intended exploitation is irrelevant where any of the means have been used.”)</p>	<p>Tool 2, Module 5 and 6</p>
<p>Trafficking for the purpose of organ removal occurs in unprofessional circumstances (basement-like facilities) in developing countries.</p>	<p>While there might be cases of organ removal in transplant clinics that might not present themselves to be of the highest standards, illicit organ removals are also performed in state-of-the-art transplant clinics around the world.</p>	<p>Several prosecuted cases of TIP for OR show that they are often made to resemble fully authorized organ transplants performed in legitimate transplant facilities, both private and public. This is done so that insurance companies could reimburse the cost of the organ transplant to organ recipients. In this way recipients also obtain complete medical documentation that allows them to access post-transplant care upon returning to their countries, without risk of facing any inquiries.</p>	<p>Module 4, 5 and 6.</p>

Myth	Myth debunked	Reality	For more information see
<p>All vulnerable persons from whom an organ was removed are victims of trafficking in persons.</p>	<p>Although vulnerable organ donors are the most frequently targeted by traffickers, persons whose organ was removed illicitly are not necessarily trafficked. For adult donors to be considered as victims they must be recruited, harbored and/or received, often also transported and transferred, through fraud, sometimes also through force and coercion, often through deceit and abuse of a position of vulnerability for purposes of exploitation by removal of an organ.</p>	<p>The TIP definition sets out criteria as to what requirements need to be fulfilled for illicit organ removal to be classified as trafficking in persons.</p>	<p>Module 6</p>
<p>Someone who received money in exchange for an organ cannot be a victim of trafficking in persons.</p> <p>A further myth is that a person that has sold an organ and believes their life is easier or economically improved, cannot be considered a victim of trafficking.</p>	<p>While it seems counter intuitive to assume exploitation when a person has received some monetary or other benefit, this does not preclude him/her from being a victim of trafficking.</p> <p>Someone may be a victim of trafficking for organ removal even if they have received some money and/or might appear to be better off than they did prior to being trafficked. Exploitation must be assessed objectively.</p>	<p>Very often persons trafficked for the purpose of organ removal are exploited irrespective of what they have received. In this situation it is important to consider how their consent was obtained. Pre-existing vulnerabilities, the power dynamic between the traffickers and the donor, and the level of personal agency in decision-making will play a key role in determining if exploitation took place and the person should be considered a victim. The UN TIP Protocol states clearly that the consent of a victim to their exploitation, in the presence of the illicit means such as deceit, coercion and abuse of a position of vulnerability, is vitiated or irrelevant.</p>	<p>Modules 5, 6</p>
<p>It is extremely hard to find organ brokers or paid organ donors, and/or to organize illicit organ removal and transplantation.</p>	<p>Identification of and access to desperate organ donors and facilitators of illicit organ removal and transplantation is relatively easy. The difficulty lies in prosecuting brokers and traffickers.</p>	<p>Digitalization and proliferation of social media platforms, has made searching for facilitators and advertising willingness to sell or buy an organ much easier. Because of the virtual character of those connections/transactions, and the mobility of international networks, the investigation and prosecution of traffickers is more challenging.</p>	<p>Module 1</p>

Myth	Myth debunked	Reality	For more information see
<p>Donors must cross international borders to be considered victims of trafficking for the purpose of organ removal.</p>	<p>Although many donors are trafficked across international borders, trafficking in persons can also occur within a country's borders, a phenomenon known as internal (or domestic) trafficking.</p>	<p>Cases of domestic TIP for OR have been reported in a number of states. Most high-profile cases involve cross-border trafficking of organ donors to a third country where the transplant facilities are based. Sometimes organ recipients are flown to states where organ donors only have to be moved domestically.</p>	<p>Module 2</p>
<p>People who are related to, or in a relationship with, their trafficker cannot be considered victims of trafficking.</p>	<p>Victims are often lured or groomed into a trafficking situation by a friend, relative, or a member of the same community. Marriage, employment, and other intimate relationships are also a means by which traffickers may control their victims.</p>	<p>It is not uncommon that the recruiters know their victims and know of their financial struggles. Often, they come from the same village or community. Additionally, a family member can play a role in coercing or forcing their spouses or children into organ removal.</p>	<p>Tool 2</p>
<p>Allowing economically vulnerable persons to sell an organ to organ recipients who are waiting for a suitable donor is a 'win – win' situation.</p> <p>Persons who sell an organ are looking for an easy opportunity to make money.</p>	<p>Allowing poor and extremely vulnerable persons to resort to such drastic measures as accepting any monetary offer they might be presented with for their organ, and later to be moved domestically or internally with very little, if any, control or agency over the situation is not economic empowerment, but exploitation. Abuse of their position of vulnerability that leads to exploitation often results in long-term consequences that reduce the quality of life for persons whose organ was removed.</p>	<p>The existing perception regarding 'fairness' of paid donations, often caused by a misunderstanding as to the nature of TIP for OR, might have a significant impact on addressing this crime. If the stigmatization of persons, whose lives are shaped by profound inequality, continues while those who facilitate the crime are excused, the identification of victims and addressing the root causes will remain challenging.</p>	<p>Tool 2</p>

ENDNOTES

- 1) Global Observatory on Donation and Transplantation, 2020.
- 2) Global Financial Integrity Transnational, Crime and the Developing World, March 2017.
- 3) Global Report on Trafficking in Persons 2018 (United Nations publication, 2018), p. 30
- 4) Global Report on Trafficking in Persons 2020 United Nations publication, 2018), p.202
- 5) According to the Declaration of Istanbul on Organ Trafficking and Transplant Tourism “travel for transplantation becomes transplant tourism, and thus unethical, if it involves trafficking in persons for the purpose of organ removal or trafficking in human organs, or if the resources (organs, professionals and transplant centres) devoted to providing transplants to non-resident patients undermine the country’s ability to provide transplant services for its own population” (2018 version).
- 6) Umezurike H Okafor, “Transplant Tourism among Kidney Transplant Patients in Eastern Nigeria”, *BMC Nephrology* vol. 18, No. 1 (2017), p. 215.
- 7) Nancy Scheper-Hughes, “The Global Traffic in Human Organs”, *Current Anthropology*, vol.41, no.2 (2000).
- 8) Global Report on Trafficking in Persons 2018 - in the context of armed conflict (United Nations publication, 2018).
- 9) Kristof Van Assche, *Organ Transplant Tourism*, Committee on Social Affairs, Health and Sustainable Development, Council of Europe (AS/Soc/Inf (2018) 07) 5 February 2019.
- 10) A/68/256.
- 11) Yosuke Shimazono, “The state of the international organ trade: a provisional picture based on integration of available information” *Bulletin of the World Health Organization* vol. 85 (2007), p. 955.
- 12) Global Report on Trafficking in Persons 2014 (United Nations publication, 2014), p 30.
- 13) Lopez-Fraga, “Human Trafficking for the Purpose of Organ Removal” (footnote 5); Assya Pascalev and others., ‘Trafficking in Human Beings for the Purpose of Organ Removal: A Comprehensive Literature Review’, in F. Ambagtsheer and W. Weimar, eds., *Trafficking in Human Beings for the Purpose of Organ Removal: Results and Recommendations* (Lengerich: Pabst, 2016).
- 14) Ashley E. Anker, Thomas H. Feeley, ‘Estimating the Risks of Acquiring a Kidney Abroad: A Meta-Analysis of Complications Following Participation in Transplant Tourism’, *Clinical Transplantation* vol. 26, no.3 (2012), p. 232; Nicholas Inston and others, “Living Paid Organ Transplantation Results in Unacceptably High Recipient Morbidity and Mortality”, *Transplantation Proceedings* vol.37, no. 2 (2005).
- 15) Sylwia Gawronska, “An Analysis of Recent Case Law and the Adequacy of the Regulatory Framework”, 2021 (forthcoming); Pascalev, “Trafficking in Human Beings for the Purpose of Organ Removal”.
- 16) Office of the Special Representative and Co-ordinator for Combating Trafficking in Human Beings. “Trafficking in Human Beings for the Purpose of Organ Removal in the OSCE Region: Analysis and Findings”, (OSCE, 2013) (OSCE Paper); Jean Allain, “Trafficking of Persons for the Removal of Organs and the Admission of Guilt of a South African Hospital”, *Medical Law Review* vol. 19, no. 1 (2011).
- 17) OSCE Paper, p. 27-33.
- 18) European Parliament, *Trafficking in Human Organs*, (EP/EXPO/B/DROI/FWC/2013-08/Lot8/03, 2015), p. 36-37
- 19) Cambel Fraser, “An analysis of the emerging role of social media in human trafficking: Examples from labor and human organ trading”, *International Journal of Development Issue* vol.15, no.2 (2016).
- 20) Gowri Kabbur, “Can Social Media Help Increase the Organ Supply While Avoiding Exploitation and Trafficking?” *AMA Journal of Ethics, American Medical Association Journal of Ethics*, vol.8, no. 2 (2016), p. 115-121
- 21) Ben Jones ‘Human egg-trafficking scam uncovered in Romania’ (BioNews, 3 August 2009); Luminita Monica Alexandru, “Human Eggs, Embryos and Surrogate Mothers Trafficking in Romania, POLIROM & Universitatea București, *Sociologie și Asistența Socială* (2014).
- 22) Global Report on Trafficking in Persons 2018, p. 29
- 23) Francis Delmonico, “Council of the Transplantation Society. A Report of the Amsterdam Forum On the Care of the Live Kidney Donor: Data and Medical Guidelines”, *Transplantation* vol. 79 (2005), S53-66.
- 24) World Medical Association, *Statement on Measures for the Prevention and Fight against Transplant-Related Crimes*, Adopted by the 71st WMA General Assembly, October 2020.
- 25) UN General Assembly resolution 71/322 (A/RES/71/322).
- 26) UN General Assembly resolution 73/189 (A/RES/73/189).
- 27) UN General Assembly resolution 75/195 (A/RES/75/195).
- 28) See the Report of the Secretary-General on Strengthening and promoting effective measures and international cooperation on organ donation and transplantation to prevent and combat trafficking in persons for the purpose of organ removal and trafficking in human organs. (A/75/115).
- 29) Please see ICAT Issue Brief, ‘Trafficking in Persons for Organ Removal’, available at: [icat_brief_tip_for_or_final.pdf](#) (un.org)

30) UNODC, *Impact of the COVID-19 Pandemic on Trafficking in Persons, COVID-19*; Special Rapporteur on trafficking in persons, especially women and children, *The impact and consequences of the COVID-19 pandemic on trafficked and exploited persons*, Position paper, 8 June 2020.

31) Alexandre Loupy and others “Organ procurement and transplantation during the COVID-19 pandemic” *Lancet* vol.395 No. 1023 (2020).

32) Shimazono, “The state of the international organ trade” (footnote 5).

33) The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered ‘trafficking in persons’ even if this does not involve any of the means set forth in the definition.

34) United Nations Office on Drugs and Crime, *Assessment Toolkit: Trafficking in Persons for Organ Removal* (Vienna, 2015) (UNODC Assessment Toolkit), p. 28.

35) Federike Ambagtsheer, et al. “Trafficking in Human Beings for the Purpose of Organ Removal: a Case Study Report”, pp. 97-102, in Ambagtsheer, F. and Weimar, W., 2016, *Trafficking in Human Beings for the Purpose of Organ Removal: Results and Recommendations* (Pabst Science Publishers, 2016).

36) Gérard Labuschagne, “Features and investigative implications of muti murder in South Africa”, *Journal of Investigative Psychology and Offender Profiling* 1, 2004.



Contacts

Human Trafficking and Migrant Smuggling Section
Vienna International Centre, PO Box 500, 1400 Vienna, Austria

Website: https://www.unodc.org/unodc/glo_act2/

Email: unodc-glo.act@un.org

Twitter: [@glo_act](https://twitter.com/glo_act) | [@htmss_unodc](https://twitter.com/htmss_unodc)

