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Sexual Trafficking in the Canadian Context: Exploring the Political Landscape, Examining Discourse, and Identifying Health Issues among Women with Lived Experience

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Graduate Program in Health and Rehabilitation Sciences
A thesis submitted in partial fulfillment of the requirements for the degree in Master of Science
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SEXUAL TRAFFICKING IN THE CANADIAN CONTEXT:
EXPLORING THE POLITICAL LANDSCAPE, EXAMINING DISCOURSE, AND
IDENTIFYING HEALTH ISSUES AMONG WOMEN WITH LIVED EXPERIENCE

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by

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Graduate Program in Health and Rehabilitation Sciences

A thesis submitted in partial fulfillment
of the requirements for the degree of
Master of Science

The School of Graduate and Postdoctoral Studies
The University of Western Ontario
London, Ontario, Canada

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THE UNIVERSITY OF WESTERN ONTARIO
School of Graduate and Postdoctoral Studies

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Chair of the Thesis Examination Board

Abstract

Although human trafficking has a long history, it has more recently become a topic of profound interest in popular culture, in political debates on sex work and immigration, and among law enforcement and social service providers. However, the widespread interest in human trafficking has not translated into a clear or consistent understanding of the phenomenon or the experiences of those who have been trafficked. This study sought to explore the perspectives of women who have been trafficked for sexual exploitation and the professionals who work with them. Specifically, the study examined three key issues in sexual trafficking: the political and legal climate of sex trafficking in Canada, the discourses on sex trafficking and how it is defined, and the physical and mental health experiences of sexually trafficked women. These topics are explored within the Canadian context with an emphasis on experiences in Southwestern Ontario (where eight of the 12 participants were trafficked or work). Using qualitative research methods, namely semi-structured individual interviews, and approaches informed by critical feminist theory, data was gathered from four participant groups: women who have been sexually trafficked (n=3), service providers who work with sexually trafficked women (n=3), members of law enforcement (n=3), and service providers for other forms of labour trafficking (n=3). Given the lack of data and empirical research on sexually trafficked women, these findings are unique and of direct value to local service providers, policy stakeholders, and women with lived experience.

Keywords

Human trafficking, sex trafficking, sexual exploitation, women's health, sex work, healthcare, service providers, law enforcement, Canada, feminist critical theory

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Chapter 1

1 Introduction

1.1 Introduction

Human trafficking has become an increasingly popular topic in Canada over the past few years. Whether on the news, portrayed in movies, mentioned by celebrities, or warned against in customs offices, the issue has gained recognition, which has contributed to the development of particular ideas about what human trafficking entails. Some of the images that human trafficking may evoke are of red-light districts, prostitution, young foreign women, and entrapment and chains. To what extent these descriptions are accurate will be explored in this thesis; however, one thing is certain, regardless of the source, there is often little or no mention of what life is like for trafficked women or the significant health issues that they encounter as a result of being trafficked for sexual exploitation.

1.2 What is Human Trafficking?

Human trafficking involves the recruitment, transfer, harbour, and receipt of people for the purpose of exploitation (United Nations, 2000). Trafficked individuals are recruited under false pretences, through threat or by force. After being recruited, these individuals may be transported internationally, nationally, or locally and transferred from one

trafficker to another. Then the individuals are held captive (through fear or force) and their labour is exploited. A trafficked individual can be a man, woman, or child. The labour the individual is forced to do (from which the trafficker profits) varies and can include, for example, farm work, construction, and work in the sex trade. Although human trafficking has various forms, the subject of this study is the trafficking of women for sexual exploitation.

The media coverage and widespread discourse of human trafficking in Canada is not only the result of increased awareness of the problem, it is also due to its increased prevalence (Gajic-Veljanoski & Stewart, 2007). The growing presence of human trafficking for sex in Canada necessitates further examination of the subject with specific research into the lived experiences of these women. In 2005, the Royal Canadian Mounted Police (RCMP) estimated that 800 individuals are trafficked into Canada annually (Riordan Raaflaub, 2006). If we are to provide aid and appropriate services to trafficked women, we need to understand their experiences and those among the various social and health agencies who work with them.

Despite the existence of human trafficking for centuries, the international definition of trafficking was first introduced in the 2000 United Nations (UN) Convention Against Transnational Organized Crime:

“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 . . . for the purpose of exploitation. Exploitation shall include, at a minimum, the

exploitation of the prostitution of others or other forms of sexual exploitation . . . (p. 2).

Canada was deeply involved in the negotiations that led to the adoption of this UN Protocol and was among the first nations to sign the Protocol in December 2000, and ratify it in May 2002 (Gozdziak & Collett, 2005). Despite our leading role internationally, it was only in 2005 that Canada incorporated human trafficking into the Criminal Code (Perrin, 2010).

It must be understood that some women willingly migrate to work in the sex trade, which does not constitute human trafficking because it is the woman's desire to migrate and her choice to work in the sex trade. However, if a woman agrees to work in the sex trade but then finds herself in confinement or under threat, this constitutes human trafficking. Furthermore, a person does not need to be moved across an international or national border (or be transported at all) for the constitution of human trafficking.

1.2.1 Scope of Human Trafficking

According to Free the Slaves, a not-for-profit organization based in Washington, D.C., there are currently 27 million slaves worldwide who generate an annual profit of \$32 billion for their exploiters (2010). Of the 4 million people who are trafficked globally each year, an estimated 1 million are trafficked into the sex industry (Farr, 2005). In 2005, the RCMP estimated that 1,500 to 2,200 are trafficked through Canada to the United States (Riordan, 2006). However, in

2007, the RCMP recognized that estimates of human trafficking in Canada are diverging and mixed with numbers of smuggled people (RCMP, 2010), which seems to impede their ability to provide official statistics on its prevalence at the present time.

The annual *Trafficking in Persons* (TIP) Report of the US Department of State classifies countries into the following categories: source (a country of origin or from where victims are taken), transit (a country through which victims are transported), and destination (a country to which victims are taken). Based on this classification, Canada falls into all three categories among other countries, such as Afghanistan, Kosovo, and Zambia (Bernat & Zhilina, 2010). Refer to Appendix A for the geographic route of human trafficking for sexual exploitation.

Human trafficking is demand-driven (Kempadoo, 2005) and its market prospers because of the low cost and reusability of the commodity (the person being trafficked) (Farr, 2005). Many of the causes of human trafficking are rooted in global economics and include poverty, persistent unemployment, rural-urban migration, and gender inequality (Bernat & Zhilina, 2010).

1.3 My Study

When I began thinking about pursuing a Masters program, I knew I wanted to be in the health sciences but I did not know in what field to concentrate or what topic to study. I thought about concentrating in an area in which I had knowledge and experience. Having

completed an undergraduate Business undergraduate (while completing my Health Science undergraduate degree) and working as a market research analyst, it seemed logical to undertake a quantitative study. Specifically, I considered various topics in health management and administration; such as resource allocation and service wait times. However, I soon realized that I wanted to study a topic that I was deeply interested in rather than one that may be less difficult to complete or may lead more easily to procuring a job after graduating. After deciding this, it was very clear to me what area I wanted to examine: women's health.

The year before I began my Masters (2009) I attended a talk by Layli Miller-Muro who founded the Tahirih Justice Center in Washington, D.C. and co-authored a fascinating book on female genital mutilation, *Do They Hear You When You Cry?* This talk was the first time I heard about human trafficking. Being an advocate for women, Layli painfully recounted the stories of several women she had encountered or worked with who had been trafficked into the United States. Layli recounted a time she had visited a woman from Russia who was in the emergency room after being repeatedly beaten and abused by her traffickers, but Layli had to watch painstakingly as the woman was discharged into the hands of one of her traffickers. The woman was too scared to admit what had happened or to testify against her traffickers.

Until I started examining trafficking to apply for my Masters, I thought these were isolated cases in the United States. However, as already mentioned and as will be further discussed in this thesis, human trafficking is widespread globally, and Canada is not an exception. Now that I knew my topic, I began to examine what field within the Health and Rehabilitation Sciences Faculty I would pursue my research. I decided that Health

Promotion was the most appropriate because it examined health from an interdisciplinary perspective that is embedded in a social and political reality. It also aims to increase individual and population health and focuses on raising awareness of health issues and advocacy, which is consistent with my beliefs and goals. Then I looked at faculty members' profiles and Treena Orchard stood out because she had experience in sex research and working with vulnerable populations. Luckily, Treena was kind enough and brave enough to accept me.

1.3.1 Purpose and Importance of this Study

Although literature exists on the health of women working in the sex trade, it cannot be assumed that all women trafficked into the sex trade experience the same health issues. The scarce literature that does exist on trafficked women shows that they suffer from malnutrition, sexually transmitted infections (STIs), and a host of other infections as well as compromised mental health, such as depression and post traumatic stress disorder (Zimmerman et al. 2008). However, there are three major gaps in our knowledge of the health of trafficked women. First, there is very little research into health issues stemming from being trafficked for sexual exploitation. Second, the voices of women themselves are missing in explaining how they experience these health issues. Third, there is a lack of specific research illustrating how women's health is affected by being trafficked in Canada and the services that they are able to receive from the Canadian healthcare system.

My research began with a thorough analysis of current literature pertaining to the subject, such as the dynamics of the sex trade, current trafficking policies, the health status of abused women, and past cases of sexual trafficking. In addition to increasing my knowledge of the subject, the literature review allowed me to identify certain gaps that exist in current knowledge. With this increased understanding, I was able to devise a program of research and interview questions aimed at understanding the health experiences of trafficked women as well as specific questions that could answer some of the voids that exist in current literature. I created two sets of semi-structured interview questions: one for trafficked women and one for professionals who work in the field. By analysing the subsets separately and then comparing across the various groups interviewed, I was able to produce data that included the perspectives of many of the key players involved in the realm of both service provision and the creation of the current discourse relating to trafficking among women. It should be noted, however, that although the laws, policies, and many other issues discussed in this thesis are applicable nationwide, it cannot be assumed that Canada is homogeneous. Many of the participants in this study are from Southwestern Ontario, and, as such, the findings discussed may be more reflective of the experiences in this region than those of the entire country.

1.4 Conclusion

Despite growing concern from the academic community and increasing awareness of trafficking in the media, the women, the traffickers, and the issue of sex trafficking itself remain hidden and very poorly understood. The lack of data obscures the full extent of

the problem, impedes policy development to end trafficking, and hinders the delivery of medical aid and social supports that the women want and need. I believe my research can aid in advancing the understanding of the physical and mental health of this marginalized population, along with increasing an understanding of the legal and political framework of trafficking in Canada and the factors that go into the production of the trafficking discourse within the Canadian, and specifically the Southwestern Ontario, context. I hope that it will also contribute to academic discourses on the subject and inform health professionals in order to positively affect the delivery of health services.

Although the main objectives are to understand trafficked women's experiences of health and to identify the healthcare resources that they require, a wider discussion of the topic is necessary for a thorough investigation. The thesis begins, in Chapter 2, by exploring literature on the sex trade, its origins, its history, and its workers as well as different forms of human trafficking. Chapter 3 features a discussion of my methodology, theoretical orientation, and how I approached gathering my data. Chapter 4 includes a discussion of the political landscape and legal framework of sex work in Canada and introduces a working model that I have developed in order to clarify, and provide more consistency regarding, the basic components of the phenomenon of human trafficking for sexual exploitation. The following Chapter, number 5, features my analysis of the local and national discourse relating to the issue, including the perspectives of my different groups of participants regarding how the system of trafficking operates. The physical and mental health issues that women experience as a result of being trafficked for sexual exploitation are featured in Chapter 6 and the health service provisions that they require will be examined using literature and participant interviews. The thesis concludes with an

overview, in Chapter 7, of my objectives, methods, and main findings, along with a discussion of the implications of the data within the realm of service provision, discourse, and the lives of the women with lived experience.

Chapter 2

2 Background and Literature Review

2.1 Introduction

Sexual human trafficking is part of the larger sex industry and women who are trafficked for sex can work in various segments of the sex trade, such as in prostitution and strip bars. However, sex sold by women who have been trafficked is very distinct from sex sold by other sex workers. Unlike other sex workers, trafficked women do not return to their homes or families after a full day of work nor do they get paid for their labour. Given the connections between sex work and trafficking, a clear understanding of how these phenomena are connected and how I am employing these terms is necessary. The sex trade, broadly speaking, includes a very wide array of activities and arrangements between women (and men, and transgender people) and their customers that most often involves the exchange of sex for money. Trafficking is a unique system within the broader domain of the sex trade. The term “prostitution” is also featured in this thesis, and although it is considered an older term, having been largely replaced in policy, research, and popular discourse by “sex work,” its use has important implications relating to the historical and legal context that informs my work.

This chapter will begin by presenting the process I used to conduct the literature review that has informed the thesis, including helping to develop the research questions that were studied. Next, the chapter will provide a background for sex trafficking by

examining the history of prostitution, including the discursive movement from referring to the women as prostitutes to sex workers. Then, there will be a discussion of the various segments of the sex trade, including the military's contribution to sex tourism and the global sex trade. Finally, there will be a brief overview of human trafficking demonstrating how sexual human trafficking fits into the larger phenomena of human trafficking.

2.2 Review Process

When I began reviewing the literature, my research objective was to examine the health of sexually trafficked women in terms of the health issues that they experience and the resources that they utilize to manage their health. As such, I began my literature review by searching for journal articles related directly to these questions. I had gathered some background information about human trafficking by searching news articles on the Internet, but I began the formal literature review process by visiting databases of peer-reviewed journal articles.

I met with a librarian at the University of Western Ontario who suggested appropriate databases and provided me with a tutorial on how to conduct my literature search. The databases I used were: Cumulative Index to Nursing and Allied Health Literature, PubMed, Proquest, Gender Studies Database, Contemporary Women's Issues, and SocINDEX. I began the search by combining the term "health" or "women's health" with the term "trafficking," "human trafficking," "sex trafficking," or "sex slavery." This

search produced three articles: “Migration, Sexual Exploitation, and Women’s Health: A Case Report from a Community Health Center” (Miller et al., 2007), “The Health of Trafficked Women: A Survey of Women Entering Posttrafficking Services in Europe” (Zimmerman et al., 2008), and “Women Trafficked into Prostitution: Determinants, Human Rights and Health Needs” (Gajic-Veljanoski & Stewart, 2007).

These articles demonstrated that sexually trafficked women suffer from malnutrition, sexually transmitted infections, and a host of other infections as well as compromised mental health, such as depression and post-traumatic stress disorder. However, I discovered three major gaps in knowledge on the health of sexually trafficked women. First, although existent, the literature did not provide significant understanding into the health of women trafficked for sexual exploitation. Second, the existent literature did not provide the perspectives of trafficked women nor of those working in the field of trafficking. The first two articles (mentioned above) only briefly discussed women’s experiences while the last was concerned with sex trafficking as a human rights violation rather than providing data on the health of trafficked women. Finally, the third gap is a lack of specific research illustrating how women’s health is affected by being trafficked in the Canadian context and the healthcare services that the women are able to receive. Although Canadian researchers authored the third article, it does not relate to the Canadian context or experiences but draws from international knowledge of the issues.

The search for journal articles also allowed me to see several gaps in my own knowledge of human trafficking for sexual exploitation and to identify areas where I needed to do further research. The first topic that I needed to conduct research into was the sex trade in general. Therefore, I consulted some books and major works on the topic

of sex work that were recommended by my supervisor. I also conducted a survey of existing literature, in the same manner as described above, examining health issues associated with sex work in general. Then, in order to deepen my understanding of my topic, I used this data to complete five general literature reviews. These reviews, of approximately eight pages each, set the stage and provided context for my research questions. The reviews were on the following topics: health and healthcare in Canada, human trafficking, sex work, history of prostitution, and policies surrounding sex work and human trafficking.

In addition to completing these reviews, which were based in literature from journals and books, I examined news articles, government publications, and conference proceedings to expand my knowledge of sexual trafficking. Simultaneously, I attended conferences and spoke to experts to deepen my understanding of the topic. It was through this process that I developed my research questions and chose an appropriate paradigm for conducting my research (as will be discussed in Chapter 3). In this chapter, I aim to provide the context necessary for understanding issues related to human trafficking for sexual exploitation and the health of trafficked women. This literature review will begin with an examination of prostitution and the history of prostitution because sexual trafficking occurs within the wider context of the sex trade.

2.3 History of Prostitution

Throughout history, prostitutes have been perceived in a number of ways, including priestesses of the gods, whores, victims, and perpetrators of moral decay (Sanger, 1937). In the Ancient Near East, the land that stretches between present-day Egypt and Iraq, the main female goddess, Inanna (later known as Ishtar) was the goddess of fertility and she was also associated with promiscuity and prostitution (Bullough & Bullough, 1987). Women were regarded as creatures that were created to snare and weaken men. Men owned women, much like property, and in this society adultery was considered a trespass against a husband's property. The only occupations for women who wanted to work outside of the house were priestesses, tavern workers, and prostitutes. Even a tavern worker was a type of prostitute and few women could become priestesses. Therefore, prostitution was the only real occupation available to many women (Bullough & Bullough, 1987). Then, during the European reign of the Greeks, the law formally established houses of prostitution at Athens and filled them with female slaves. These slaves were bought with public money and the women were bound to satisfy the demands of all who visited them. In fact, these prostitutes were public servants and their earnings were a legitimate source of revenue to the state, which monopolized prostitution (Sanger, 1937).

To the East, there exist records that indicate prostitution was common among the Jews in the 18th Century B.C.. Prostitutes of the time were distinguishable from other women because they covered their faces, whereas other women did not. It was not dishonourable for a man to attain the services of a prostitute. However, the Old

Testament warns, “Do not prostitute your daughters, lest the land fall to whoredom . . . There shall be no whore of the daughters of Israel” (Sanger, 1937, p. 36). If there was prostitution among the Jews but Jewish women were forbidden to become prostitutes, two scenarios could exist: Jewish men used non-Jewish prostitutes or there were Jewish women who prostituted but they were marginalized. The Bible indicates that both of these situations existed (Sanger, 1937).

In the Christian tradition, women first belonged to their fathers and then to their husbands. After the woman was passed from her father to husband, the husband bore the responsibility of providing food and shelter for the women he acquired. Requiring men to have significant financial resources in order to get married resulted in a large number of men who were too poor to support a wife and a large number of women who were, by extension, denied access to marriageable men and perhaps marriage itself. Inevitably, prostitution began to complement the existing structure of monogamy (Clarkson, 1939). Therefore, the Church tolerated prostitution and Christian emperors regulated it and derived a tax from brothels. In 1254 in France, Louis IX (who later became a Saint) ordered that all courtesans be driven out of the country and deprived of their earnings. In 1269, when he set out for the Crusades, he destroyed the brothels, which resulted in the mixing of prostitutes and prostitution in the general population (Clarkson, 1939).

In Europe in the 16th Century, the emergence of syphilis caused prostitution to be reframed as a public health problem and in many places it was segregated into “red-light” districts (Clarkson, 1939). By the end of the 17th Century, prostitutes were required to undergo medical examinations. Napoleon established legal brothels, which were referred to as “maisons de tolerance” (Clarkson, 1939). The words uttered by German

philosopher, Arthur Schopenhauer, eloquently capture the 18th and 19th Century discourse about prostitution. Clarkson quotes Schopenhauer, “What else are these women than human sacrifices on the altar of monogamy – sacrifices rendered inevitable by the very nature of monogamic institution?” (1939, p. 301).

2.3.1 From Prostitute to Sex Worker

Most societies have categories of “good” and “bad” women, where the “bad” girl becomes the symbol of independent female sexuality (Kempadoo & Doezema, 1998). The bad girl threatens male systems of power because of her presumed ability to seduce and control men. This creates a dichotomy among women where some must conform to virginity and domesticity while others, who transgress these boundaries, are demonized as “whores” (Kempadoo & Doezema, 1998). As an alternative to the Madonna versus whore model, in the 1970s, the concept of “sex work” emerged as a result of the prostitutes’ rights movement in the United States and Western Europe. Sex worker Carol Leigh invented the term “sex worker” out of a feminist priority to end divisions between women (Kempadoo & Doezema, 1998). The conceptualization of prostitutes, strippers, escorts, and others as “sex workers” reflects the idea that working women’s common interests can be articulated within the broader struggle against devaluation of women’s work. The use of the term “sex worker” suggests that prostitution and related work are not a person’s sole identity and that they are engaged in income-generating activities. Sex work is experienced as an integral part of many women’s and men’s lives, but it is not the sole defining activity around which their sense of self is shaped (Kempadoo & Doezema, 1998).

In her 1989 study of prostitution and sex tourism in Southeast Asia, Than-Dam Troung introduced the concept of sexual labour to capture the utilization of sexual body elements as a productive force that is employed by women and men (Kempadoo & Doezema, 1998). She proposed that sexual labour should be considered in a similar fashion to other forms of mental and manual labour, all of which involve specific body parts and particular types of skills. In 1997, Chapkis went further to liken prostitution to the sociological category of “emotional labor;” activities and jobs for which care and feelings are required, commoditized, and commercialized (Kempadoo & Doezema, 1998). The implications of viewing prostitution through this lens are significant because it places sex workers in the same category as other professions that are focused on helping others, such as social workers and nurses. This not only legitimizes the work performed by sex workers but also reflects their importance in society.

2.3.2 Sex Worker or Victim?

Despite the above-mentioned movements, some feminists argue that all prostitution is a violation of human rights and that no woman willingly chooses prostitution (Kempadoo & Doezema, 1998). Although many sex workers may not be physically forced into prostitution, some feminists believe that women would not choose to prostitute if they had other options for income generation. Jeffreys cites MacKinnon on these women’s false sense of free choice:

Women who are compromised, cajoled, pressured, tricked, blackmailed, or outright forced into sex . . . often respond to the unspeakable humiliation . . .

by claiming that sexuality as their own. Faced with no alternative, the strategy to acquire self-respect and pride is: I chose it (1997, p. 128).

The strongest advocate of this “neo-abolitionist” perspective is the Coalition Against Trafficking in Women (CATW) founded by Kathleen Barry (Kempadoo & Doezema, 1998). Kathleen Barry is an out-spoken advocate of abolishing prostitution and is famously known for her 1981 book *Female Sex Slavery*, in which she advances the position that all prostitution is slavery (Johan Ringdal, 2004). Aligned with this school of thought is the UN Convention on the Elimination of All Forms of Sexual Exploitation of Women, which defines prostitution as a form of sexual exploitation similar to rape, genital mutilation, incest, and battery (Kempadoo & Doezema, 1998).

Against the idea that all prostitution is abusive, members of the prostitutes’ rights movement claims that some women willingly choose prostitution (Kempadoo & Doezema, 1998). Jeffreys refers to this concept of free will as verbalized by Susan Brownmiller (1975), author of *Against Our Will*:

The point of feminism is to give women the courage to exercise free will, not to use the “brainwashed victim’s” excuse to explain away the behaviour of a woman who surrenders her free will. Victimhood must no longer be an acceptable or excusable model of female behaviour (1997, p. 141).

In 1985, the World Charter for Prostitutes’ Rights expressed the need to decriminalize adult prostitution that is based on individual choice (Kempadoo & Doezema, 1998).

Margo St. James, an advocate for this school of thought, was famously quoted as stating, “A blow job is better than no job” (cited in Johan Ringdal, 2004, p. 377).

Regardless of whether prostitution is viewed as free choice or forced victimization (or somewhere in between), human trafficking is unequivocally recognized as a human rights violation. For this reason, many of those who work in the trafficking arena (including service providers and government officials) refer to trafficked women as victims. Nonetheless, I will refrain from using this term in describing women who have been trafficked for sex (or women who work in the sex trade) in my thesis. I believe in the strength and autonomy of the women in this population and do not want to use a term that may reflect otherwise.

2.4 The Military and Sex Tourism

During times of war, the purchase of sex is a common feature of men's experiences and very often the "comfort women" or prostitutes belong to poor and marginalized communities; many of which experience profound displacement during and after times of war (Maticka-Tyndale et al., 2005). The prostitution of women within this context is not only connected to the experiences embodied in the iconic images and representations of "rest and recreation" (R&R), it has also contributed to sex trafficking and the global sex market, including sex tourism and sex trafficking.

With roots stretching as far back as colonial times and the presence of foreign troops in various dispossessed countries and regions, during times of war and military occupation local women and those brought in from other parts of the world have been made or made themselves sexually available to both native and foreign troops for

economic compensation. The implications of this global reality is not the focus of my work, but I include this overview of military presence and different experiences of sex work because in many ways these experiences, perhaps especially in relation to WWII and the Vietnam War, have had profound and significant effects on the emergence of global sex work and sex trading networks; including sexual trafficking. The issue of trafficking is not new, and some mention of its historical presence is important in understanding its emergence during different points in time, and also how or if the contemporary trafficking discourse borrows from or is impacted by these earlier examples of the globalization of prostitution in the 20th century (Jeffreys, 2009).

2.5 Human Trafficking

Human trafficking is thought to date back to prehistoric times and includes such human activities as the trafficking and exploitation of Africans in the colonial slave trade. Similar to the forces of capitalism today, increasing globalisation and capitalism led to the trade of humans in the 17th and 18th centuries. This slave trade began as a result of labour shortages in the plantations and mines in America, which created a lucrative opportunity for the state sanctioned movement of mass numbers of black Africans to America. Eventually, the British outlawed slavery in the nineteenth century, in what can be described as the first global prohibition of trafficking and slavery. Nevertheless, some US states either retained or allowed some forms of the slave trade to continue despite the formal abolishment through legal instruments and conventions. For example, in the

nineteenth century, Chinese labourers were put into debt bondage schemes and brought to the United States to work on the transcontinental railroad (Lee, 2011).

In addition to sex trafficking, contemporary forms of human trafficking include labour trafficking and trafficking of body parts. When it comes to trafficking for labour exploitation, the UN Trafficking Protocol does not have an explicit definition of forced labour. Some common characteristics of labour trafficking include the lack of a contract, time off, insurance, and access to health and social services; working excessively long hours; illegal and excessive deductions for accommodations and transportation; and an increase in the labourers' indebtedness to the trafficker, which can continue to accumulate and holds the labourer in debt-bondage. The UN Protocol identifies coercion, deception, abuse of power, and exploitation as actions taken to constitute forced labour. The trafficking of human organs follows modern routes of capital and labour flow (from South to North, from poor to rich, and from women to men). Within this route, brokers pay impoverished "donors" very little for organs (for example 1,000USD) and charge wealthy patients who receive the organs substantially more (for example 100,000USD). These brokers or traffickers range from doctors who benefit from the development of a global economy of transplant tourism in addition to criminal organisations who are also active in the areas of labour and sex trafficking (Lee, 2011).

2.6 Conclusion

Investigating the various literatures and representations of a series of topics relating to sex work and its history and forms, including human trafficking, provides essential background for and understandings of this thesis and the ensuing primary data; as featured in Chapters 4 to 6. Sexual trafficking is a complex topic that intersects with both sex work and human trafficking. In order to set the stage for a discussion of the chapters that follow in this thesis, the wider realities of the sex industry had to be examined.

Chapter 3

3 Methodology

3.1 Introduction

This chapter attends to issues of methodology and the manner in which the research was conducted and the data was interpreted. I discuss the methodology and theoretical perspectives that provide the framework of the study, specifically feminist theory and critical theory. I examine each theory separately and discuss how they, in combination, produce what I and other researchers refer to as feminist critical theory. I will also discuss the ethical principles that I strived to uphold throughout my study, including the factors I considered in determining compensation for participants. Next I will explain how I analysed the data using an elemental coding method through first cycle and second cycle coding. In the final section of this chapter, I will discuss the eight criteria that I used in assessing the quality of the research study.

3.2 Methodology

As Mills, Bonner, and Francis (2006) assert, researchers must choose a paradigm that fits with their beliefs about reality. By examining my beliefs about epistemology and ontology, it became apparent that my research philosophy is one that is critical (Finlay & Ballinger, 2006). In order to determine this paradigm, first, I reflected on epistemology,

which is concerned with the constitution of knowledge. I determined how I know what I know by asking what I am trying to learn and by determining my role, as a researcher, within the study (Finlay & Ballinger, 2006). I concluded that as a researcher, I am part of the research process rather than an objective observer (Mills et al., 2006). Next, I considered ontology to determine if I believe in a realist or relativist existence. In order to do so, I introspected about whether there is a real world where objects and structures have a cause-effect relationship or if there can be diverse interpretations of the world (Finlay & Ballinger, 2006). I concluded that the world has multiple realities that are influenced by context rather than one ultimate truth (Mills et al., 2006) and I believe that this context is shaped by the political and economic realities of society (Agger, 2006). Finally, I believe that these political and economic conditions affect women differently than they do men. Consequently, considering the above analysis of my beliefs in a subjective epistemology and relative ontology, my paradigm of inquiry is feminist critical theory.

The methodology I chose had to be consistent with a feminist critical paradigm and produce data that accomplishes the goal of my study: to understand how physical and mental health issues develop and are experienced by women who are trafficked for sexual exploitation and the healthcare resources they require to manage these health issues. I will fully elaborate on my paradigm by examining feminism and critical theory. As there are variations among feminist theories and critical social theories, my examination will reveal the intersection of these two schools of thought that have contributed to the particular lens through which I conducted my research and analysed my data.

3.2.1 Feminism

Feminism at its roots is about equity between the two sexes and not the domination of one over the other. Feminism is complicated and diverse, and refers to both a theoretical perspective and a social movement that are at the most basic designed to use gender as a key vehicle through which to understand social behaviour and forces related to (in)equity (Renzetti, 2008).

Although there is no unified definition of feminist theory, according to Renzetti (2008), there are three common elements among the various forms. First, feminism positions gender as socially created rather than innately determined. Biological factors are not altogether absent, but it is believed that biological traits are modified by the environment and social conditions; therefore creating a complex relationship between biology and culture. Second, feminism considers gender as a central organizing factor in the social world. Third, feminism recognizes that gender inequality does not have the same consequences for all women and all men. Gender inequality intersects with other types of inequality to affect various groups of women and various groups of men differently. Some of these other types of inequality include racism, social class biases, heterosexism, and ageism (Renzetti, 2008). The interaction between gender and other types of inequality is paramount in the study of human trafficking for sexual exploitation. The women in my study are not vulnerable only as a result of being women but as a combination with other vulnerabilities, such as being part of certain social and economic groups.

It is important to examine feminism as a social movement in addition to the theoretical perspectives developed by its proponents. The various stages in the history of

feminist social movement are described as “waves” (Renzetti, 2008). The first wave spans 1848-1920 as women began to take up the issue of slavery. In the United States, Great Britain, and other parts of Europe, women working against slavery became angry with their male peers who prohibited them from speaking in public. Over time, however, the focus of the first wave narrowed to women’s right to vote, which led to a lull in feminism when women in the United States gained the right to vote in 1920. However, the movement was reinvigorated in the 1960s as a result of labour force discrimination, the civil rights movement, the war in Vietnam, and the development of reproductive technologies like The Pill. This time those participating in the movement were not a homogeneous group of women but included men and people of various sexual orientations. Nevertheless, it still failed to involve women of colour, those from low social economic status, and younger women. The third wave, the one that began in the 21st century and is ongoing, has a multicultural emphasis and addresses other problems, such as racism, social class inequality, and homophobia, in addition to its primal focus: gender. In this new wave of feminism, three particular issues are celebrated and brought to the fore: sexuality, autonomy, and multiculturalism (Renzetti, 2008).

According to Scholz (2010), feminist schools of thought can be categorized into eight groups: liberal feminism, Marxist feminism, radical feminism, socialist feminism, cultural feminism, womanist theory, postmodern feminism, and Third World and postcolonial feminism. The school with which I am most aligned is socialist feminism, which works to infuse feminist politics into theory and practice while avoiding some of the extremes of both the Marxist feminists and the radical feminists. Marxist feminist believe that the oppression of women is due to capitalism while radical feminists believe

it is due to women's biological role in reproduction or women's place in a sex-divided society. As a socialist feminist, I believe that aspects of both theories are valid: both capitalism and patriarchy play a role in determining gender roles and the place that women occupy in society. Socialist feminism also emphasizes the self-determination of individuals while advocating for a balance between the individual and the community. Finally, socialist feminism is consistent with my relativist paradigm because it ascribes to a "standpoint epistemology" (Scholz, 2010, p. 25), the idea that knowledge claims are affected by the standpoint or social position that one occupies.

3.2.2 Critical Theory

Those working within the paradigm of critical theory regard the pursuit of knowledge as a political activity. Critical theorists believe that theory is not objective and it always takes sides; therefore, critical theorists explicitly state their position on issues (West, 2011). What these researchers are critical of is the pervasive inequalities and injustices that exist in social relationships. Critical theory does not isolate issues and look at them independently; it examines issues in their historic context, the relations of power, and economic inequities, which is necessary when investigating trafficking of women for sexual exploitation (Freeman & Vasconcelos, 2010). My research topic is also well aligned with one of the ultimate aims of this paradigm: to give a voice to those subjected to domination and who are under the influence of another's power (West, 2011).

Critical theory has a long history that can be traced back to the work of Karl Marx. In 1923, a group of Western Marxists founded a school in Frankfurt, Germany,

which became known as the Frankfurt School. Following the Russian Revolution, Marxist parties either maintained a theoretically pure (but ineffectual) isolation or went towards a reformist social democracy, which is the route chosen by the followers of Frankfurt School (West, 2011). These critical theorists believe that knowledge generated by oppressive systems has become so embedded in everyday practices that it has caused a distortion and misrepresentation of human experiences. The solution is to engage in ideology critique that is both critically reflective of people's roles and experiences and historically grounded in an analysis of how these practices have developed and been supported by modern systems (Freeman & Vasconcelos, 2010).

A divide in critical theory occurred and was precipitated by the work of Michel Foucault, which became a postmodernist form of critical theory (Freeman & Vasconcelos, 2010). In the traditional (or modernist) form of critical theory, those associated with the Frankfurt School rely on a grand theory of how society changes and the necessity of its evolution toward democracy; giving voice to individuals is impossible without structural changes. They also rely on a critical form of reason as the solution to human emancipation. The Foucauldian theorists, on the other hand, reject evolutionary visions of society and cast aside a focus on the structures of knowledge and instead trace the way knowledge and power is produced in discursive formations. They believe knowledge must be understood contextually within local practices and that language itself carries history, meaning, and knowledge. They also challenge the idea that a critical form of reason is the solution to human equality (Freeman & Vasconcelos, 2010). As a critical researcher, I rely on both schools of thought and believe that equality and

listening to the voices of the oppressed must occur on a societal level as we evolve but that progress is also necessary on the level of the individual in his or her local context.

3.2.3 Feminist Critical Theory

After exploring feminism and critical theory as separate schools of thought, it is necessary to examine feminist critical theory (FCT) as a unified paradigm. First, according to Agger (2006), FCT makes the politics of sexuality and the sexual division of labour central to understanding oppression. Second, FCT argues against the separation of a private sphere from the public sphere and believes that the personal is political. Third, FCT addresses the politics of sexuality and domesticity on both the personal and the public levels and recognizes that women's subordination in the labour market, polity, and culture reflects and accentuates their subordination in the household. Fourth, FCT proposes that the sexual division of labour makes way for the objectification of women by men; women are seen as objects for men in the family (acting as sexual partners and helpmates) and, by extension, women are also objectified in the public sphere. Finally, FCT criticizes the compulsory heterosexuality that is central to the Victorian concept of femininity, which deems that women acquire their value in terms of their emotional and sexual value to men (Agger, 2006).

3.3 Method

Now that I have thoroughly explained my paradigm and the lens through which I see my research (feminist critical theory), I will discuss the specific methods that I used. I will do this by first presenting the research questions that I set out to answer through the study and how these questions changed and developed over time.

3.3.1 Research Questions

When I first began the study, I generated the following two research questions to provide the framework for the project:

1. What health issues (physical and mental) do women experience as a result of being trafficked for sexual exploitation?; and
2. What resources do women who have been trafficked for sexual exploitation draw on to manage their health after leaving the trafficking situation?

However, as I began conducting interviews, a few things became evident. First, the issue of human trafficking is politically charged and legally significant and cannot be examined without discussing the laws that surround it and sex work. Second, it became obvious that responses to human trafficking in Canada, including resources in the healthcare system, are based on the laws of the land. Third, I realized that there is not a consistent or formal response to sexual trafficking in Canada but a network of individuals who work together to address the issue. Therefore, my first research question became:

What is the political and legal landscape of sexual trafficking and what is the response to sexual trafficking in Canada?

As a result of my exposure to service providers and law enforcement officers in conferences and during my first few interviews, I found another set of issues that needed further investigation in order to conduct meaningful research into the health issues of sexually trafficked women. First, there was a wide variation among different individuals' definition of trafficking and what sexual trafficking entails. Second, it seemed that this difference in definition and discourse was based on the beliefs of the individual and his or her role in the fight against human trafficking. Third, there appeared to be some common factors among different individuals' definitions of human trafficking. Therefore, my second research question became: What is the discourse surrounding sexual trafficking and what does sexual trafficking entail?

Addressing these two questions became necessary in order to fully examine the questions that I originally set out to answer, which were: what are the health issues that women experience as a result of being sexually trafficked and what healthcare resources do they utilize? As will be explained in Chapter 6, health is multifaceted and dependent on many social factors and determinants. Politics and law have significant effects on both women's health and the resources that are available to them. Additionally, discourse surrounding sexual trafficking is indicative of the environment in which sexually trafficked women must live and the manner in which others will interact with them. Examining these two questions is also necessary because of the methodological paradigm of this study, which was described above. In order to conduct research that is consistent

with a FCT framework, it is essential to include the examination of issues related to politics, economics, power relations, and gender roles.

Therefore, based on the complex nature of sexual trafficking, my initial research, and the paradigm of the study, the research questions had to be altered to more accurately capture the purpose of the study and the information I had to gather. The research questions became:

1. What is the political and legal landscape of sexual trafficking and what is the response to sexual trafficking in Canada?;
2. What is the discourse surrounding sexual trafficking and what does sexual trafficking entail?; and
3. What health issues (physical and mental) do women experience as a result of being trafficked for sexual exploitation and how do they manage their health after leaving the trafficking situation?

3.3.2 Data Collection

Critical social theory rejects the notion that quantitative survey research is the only legitimate form of investigation (Agger, 2006). Not only does critical social theory give qualitative research validity and legitimacy, it also asserts that qualitative research is necessary for understanding the depth in participants' experiences. Stemming from this belief, the most important contribution of critical social theory to research methodologies is its valorization of narratives as a legitimate research tool. As such, critical theorists not

only treat people's words of their experiences as valid but also as sources of theoretical insight (Agger, 2006). My aim was to elicit participants' experiences of trafficking for sexual exploitation in a meaningful manner that contained depth and was truly reflective of what participants' experienced. With that in mind, the most suitable qualitative method for my paradigm was to conduct semi-structured interviews one-on-one with participants. I devised a list of interview questions that could elicit responses that would answer my research questions, would produce results that were in-depth and richly reflective of the participants' experiences, and would be best for addressing some of the current gaps in knowledge about sexual human trafficking. I devised these interview questions by using the knowledge I gained through literature, attending talks and conferences on trafficking, and speaking to people who work in the field.

I considered it necessary to interview two distinct participant groups: women who have been trafficked for sex and those who work in the field of human trafficking (which includes those in law enforcement, service provision, and activists). I devised a separate set of interview questions for each group, as displayed in Appendices B and C. I chose to interview those who work with trafficked women because although a woman with personal experience of trafficking knows her life and story better than anyone else, those working with trafficked women also have a broad range of experiences from working with multiple women that are of significant importance in understanding the complex issue of human sexual trafficking from different perspectives. Also, by selecting experts who cover different aspects of trafficking I could gain in-depth knowledge on particular aspects within trafficking, such as immigration, law enforcement, and social and health service provision. Finally, as I discuss below, I was aware of the multiple barriers that

exist in recruiting women who have been trafficked; therefore, I needed this second participant group to both add a different perspective as well as richness to my data.

I used these interviews as the primary source of data collection, which provided the basis for the dialectic construction of knowledge between the participants and myself. I conducted one interview with each participant and followed up in-person or through email if I required clarification after the interview. In total, I interviewed 12 participants composed of women trafficked for sexual exploitation (n=3), officials in the legal arena (two members of law enforcement and one immigration official), service providers (n=3), and those working to end other forms of human trafficking (n=3). Of these participants, 10 were women and two were men (one member of law enforcement and one immigration official) and all participants ranged in age from 25 to 65 years old. Of the 12 participants, four gained their experiences in London, Ontario (by being trafficked in this city, by working as a service provider, or as a member of law enforcement). Four participants had their experiences in other Southwestern Ontario locations, one participant was trafficked in Toronto, and one service provider works in Western Canada. Finally, one of the members of law enforcement interviewed is responsible for the province of Ontario and the participant from Immigration is responsible for Canada-wide policies and activities.

The interviews lasted approximately between 8 minutes and 90 minutes, with an average length of 45 minutes. I did not impose a time limit because I wanted to ensure that participants were able to share with me everything they wanted and at a pace that was comfortable for them. Although the interviews lasted an average of approximately 45 minutes, there were a few exceptions. With two of the interviews, both with service

providers working to end other forms of trafficking, the participants did not have direct experience with women trafficked for sexual exploitation. Although the interviews provided context for the issue of human trafficking, these two participants could not comment on questions that pertained specifically to sexual trafficking thus leading to shorter interview durations. On the other hand, the two longest interviews were with a sexually trafficked woman and a service provider for trafficked women, which lasted approximately 70 and 90 minutes, respectively. Both of these participants had extensive experience, one from a personal level and the other on a professional level, and were able and willing to answer all of the questions in detail, which led to longer interviews.

Sexual trafficking experiences are difficult for both the participants to talk about and for me to listen to and analyse. Therefore, prior to beginning interviews, I familiarized myself with resources in the community who offer psychological counseling, such as the Women's Community House and Sexual Assault Centre London, to be able to refer participants who may experience distress as a result of the interview. I also spoke to a counselor prior to commencing my interviews for guidance and coping strategies and was able to go back to her if I needed ongoing support in undertaking these emotional interviews. Additionally, by remaining empathetic and demonstrating my knowledge of their experiences (although I can never fully understand how they feel), I created rapport and an environment where participants could feel safe to tell me about their experiences.

3.3.3 Recruitment

I planned to begin my research with women residing in Southwestern Ontario who had been sexually trafficked into or within Canada. As a result of the underground nature of sex trafficking and the illegality of activities associated with it, it was very difficult to gain direct access to trafficked women. Although I had immersed myself in literature about the sex trade and trafficking, I was unfamiliar with the local context of the trade and lacked local contacts. Even with local contacts, the sensitivity of the issue, both as an emotional topic and an illegal market, could make individuals hesitant to trust me. I realized that I had to immerse myself within the field of anti-trafficking activities and services to make contacts and build trust and to use these opportunities as sources of knowledge that would inform my research.

I recruited participants mainly from contacts that I made while attending conferences and participating in local organizations. At these events, I distributed my contact information, as displayed in Appendix D, to those who were willing to speak with me or knew of others who might participate. I ensured not to tell those making referrals if the person with whom they had put me in contact participated in the study or not. Through these experiences, as mentioned, I recruited 12 participants: women who had previously been trafficked (n=3), law and government officials (n=3), service providers (n=3), and activist for other forms of human trafficking (n=3). The interviews with all of the women occurred in public venues (coffee shop and park bench) and the interviews with law enforcement and the governmental official occurred in their respective offices. With participants from the service sector (both for sexual trafficking and other forms of trafficking), the interviews took place in their offices, in coffee shops, and at conferences.

My first connection with those involved in the anti-trafficking movement locally was through my supervisor's referral to attend two events in the fall of 2009. The first event I attended featured Victor Malarek, a Canadian journalist and author, who had just released *The Johns: Sex for Sale and the Men Who Buy It*, in which he examines men who buy sex and their attitudes towards women. At this presentation I met the RCMP's Anti-trafficking Coordinator for Ontario, **Mark**, and connected with a University of Western Ontario campus club for ending human trafficking. Next I attended a forum to raise awareness about the targeting of Aboriginal women by traffickers. My supervisor also gave me the contact information for a police officer, **Laura**, who works with women in the sex trade and trafficked women in Southwestern Ontario.

In 2010, I took part in an Interprofessional Health Education program at the University of Western Ontario to gain a placement at the Women's Community House (a shelter for abused women and their children) where I made further community contacts. One outcome was being introduced to a local initiative, called SafeSpace, which serves as a drop-in centre for women in the sex trade. I began volunteering at SafeSpace and learned about My Sister's Place, a local centre that provides outreach and support for low income and homeless women (including those in the sex trade). Although none of the interviews I conducted resulted from this experience, I was able to work with those in the field and directly interact with women who have worked or been forced to work in the sex trade. This provided me with valuable knowledge and understanding of the women and their experiences.

In October 2010, I attended two presentations: one featured Benjamin Perrin and the other Timea Nagy. Benjamin Perrin is an assistant professor of Law at the University

of British Columbia and a senior policy analyst on human trafficking for the Canadian government and has written *Invisible Chains: Canada's Underground World of Human Trafficking* (2010). Timea Nagy is a woman who was trafficked to Toronto from Hungary, in 1998, for sexual exploitation. Timea works with law enforcement, provides crisis relief to victims, and has authored *Memoirs of a Sex Slave Survivor* (2010).

In January 2011, I joined the London and Area Anti-Human Trafficking Committee through my contacts at the anti-trafficking club at the University of Western Ontario. Through this committee I met two participants: **Anne**, a service provider, and **Carrie**, a formerly trafficked woman. Carrie was instrumental in the recruitment of the other two women who participated in the study, **Melissa** and **Shauna**. Carrie told the women about my research and gave them my card (and they later contacted me).

Also in January 2011, I attended the inaugural conference of the Alliance Against Modern Slavery in Toronto. This student-led group at York University (Alliance Against Modern Slavery) sponsored a two-day conference, which featured several speakers who are knowledgeable in the area of human trafficking and slavery. I was able to take notes, make observations, and increase my knowledge of trafficking. However, no interviews resulted from the contacts that I made at this conference.

In March 2011, I attended a three-day conference organized by Canadian law enforcement, *Moving Forward Together – National Human Trafficking Conference*. Although it was organized by law enforcement, this conference endeavoured to bring together governmental groups, such as various levels of law enforcement and Immigration Canada, with those who work in the non-profit sector, such as local shelters

and the Salvation Army. In addition to gaining much knowledge about human trafficking in Canada, through this conference I met many individuals in the field of anti-trafficking work. Specifically, I met four participants through this event with whom I conducted interviews either during the conference or at a later date. These participants were two service providers for other forms of human trafficking, **Karen** and **Sherry**, one service provider for trafficked women, **Janice**, and a governmental member, **Dennis**.

In May 2011, I attended a workshop that was organized by the Sisters of St Joseph in London, Ontario to raise awareness of human trafficking for service providers in the London area and to allow the providers to learn about one another's work against human trafficking. Both Anne and Carrie attended this conference. At the workshop, Anne introduced me to **Joyce**, a service provider who agreed to participate in the study. I also met another participant, **Stacey**, at this workshop. Then, in October 2011, I attended a conference on Sex Work in London, which featured speakers who work in service provision and law enforcement.

3.3.4 Barriers to Recruitment

I encountered several barriers in recruitment, some of which I anticipated and others that I found surprising. I had expected that it would be difficult to identify and locate trafficked women; therefore, I worked to make connections in the community that would help me to identify trafficked women. I also knew that my topic is sensitive and that women may be hesitant to trust me and speak with me. However, I also encountered challenges that I had not foreseen; such as the reality that women who have been

trafficked often do not self-identify themselves as having been trafficked. I also realized that some individuals who work with sexually trafficked women identify all women in the sex trade as having been trafficked. This tendency of some service providers to identify all women in the sex trade as having been trafficked is an important issue that will be examined in Chapter 5.

3.3.5 Memoing

Memos are informal notes a researcher keeps about his or her thoughts throughout the research process. There is no set method of memo writing and the researcher can use whatever means best captures his or her thoughts and reflections about the data and overall progression of the project (Charmaz, 2006). I kept memos throughout my research to capture my thoughts about literature, popular media, conversations with experts, interviews with participants, and all other situations in which an idea occurred to me about my research. Memos not only allowed me to summarize and visualize my thoughts on paper, but they also offered me an opportunity to write about research that is emotionally charged. By writing how I was feeling, I found the process of memo-writing cathartic.

3.4 Ethics

Before commencing my research I applied to the Office of Research Ethics at the University of Western Ontario for approval from the Research Ethics Board. The Board approved the study as indicated by the approval form found in Appendix E. It is essential to seek ethical approval when conducting any research, especially when the subject matter is human health and wellbeing. In addition to the many ethical challenges that researchers face, qualitative researchers are under even greater pressure because of the unpredictability of their research progression and outcomes (Finlay & Ballinger, 2006). Additionally, researchers must be more cautious when studying a vulnerable population. A vulnerable population possesses certain characteristics, or belongs to a social group, that makes it susceptible to coercion. Individuals from vulnerable populations are presumed more likely to be misled, mistreated, or taken advantage of as a research participant (Levine et al., 2004). As Levine et al. (2004) explain, research ethics policies focus on two types of vulnerability. First, participants can be vulnerable in terms of having limited capacity to provide informed consent. For example, young children and those with mental disabilities may be constrained in fully understanding and therefore consenting to research. Second, participants may be vulnerable when there are unequal power relationships (between the researcher and participants) because of the political or economic disadvantage of the participants. It is to this latter group that my population belongs.

3.4.1 Ethical Principles to Uphold

It was imperative for my study to adhere to the following ethical principles: free consent, informed consent, ongoing consent, and consent prior to research. As such, I fully informed participants of these rights prior to beginning the interviews and verbally explained the purpose and procedure of the study. In order to give free and informed consent, participants must possess an appropriate level of decision-making capacity, which all participants exhibited. The participants freely gave their consent and, as the interviews progressed, I continued to inform participants about their right of ongoing consent (Tri-Council, 2008). I gave professional participants (those working with trafficked women and in the field of human trafficking) a letter of information, as displayed in Appendix F, explaining the study. Then I sought their written consent using the consent form exhibited in Appendix G. However, in order to decrease the anxiety associated with conducting the interviews and as a reminder of their anonymity, I did not seek written consent from trafficked women. Nevertheless, they received a letter of information about the study (Appendix H) and I verbally explained the study using the script displayed in Appendix I. After reading the script and obtaining the women's verbal consent, I signed the script to keep a record that I had indeed received verbal consent.

In addition to free and informed consent, three other ethical issues are paramount in my research study: privacy, confidentiality, and anonymity (Tri-Council, 2008). The principle of privacy dictates that individuals have the right to be free from intrusion. Confidentiality implies that I must safeguard my participants' information including their identities; therefore, I assigned pseudonyms to all participants. I also protected the data I collected by keeping hard copies of transcripts and information in a locked cabinet and

keeping a security code on my computer. It is essential to uphold these principles for the safety and security of my participants, in order that traffickers and others cannot identify them. Finally, I recognized that I was asking participants to remember and recount horrific experiences that may be psychologically difficult. Therefore, I had contact information for psychological services if my participants required it.

3.4.2 Research Compensation

An important consideration in research with human subjects is payment to participants for partaking in the research. Three models of compensation that have been proposed by Dickert and Grady (1999) are the Market Model, the Wage-Payment Model, and the Reimbursement Model. The Market Model is based on the principle of supply and demand where the researcher can increase his or her payment according to the difficulty of recruiting participants, which allows money to be the incentive of participation. The Wage-Payment Model assumes that participation in research does not require any skills and participants should be compensated at the level of an unskilled labourer. Finally, the Reimbursement Model makes payments simply to cover participants' expenses, such as travel, meals, and parking, or reimbursing them at the rate they would typically be paid at their work.

My approach was a hybrid of the Wage-Payment and Reimbursement Models. I compensated all trafficked women with the same amount of money (\$20.00 CDN), as is customary in the Wage-Payment Model. I believe that the women who participated in my research did so because they wanted their voices to be heard and to raise awareness about

the ordeals they have endured; therefore, I did not use compensation as an inducement for research participation. I did not provide compensation to the professional participants in the study. First, the majority of the professional participants (seven out of nine) did not incur any travel expenses because I interviewed them at their offices or a conference that they were already attending. Second, I did not think it was necessary or appropriate to compensate those whose profession is in the field of human trafficking and did not want to risk insulting them with such compensation.

3.5 Data Analysis

I analysed my research data by transcribing my interviews verbatim and using coding methods that are consistent with a feminist critical theory paradigm and semi-structured interview questions. According to Saldana (2009), a code is a word or short phrase that symbolically assigns an essence-capturing attribute for a portion of language-based or visual data gathered from participants. In the first cycle of coding, codes can range from a single word to a full sentence or an entire page of text. In the second cycle of coding, the codes can be the same units, longer passages of text, or a reconfiguration of the codes. I recognized from the outset of my data analysis that my coding cycles would be an interpretive act to which I would bring my subjectivities, personality, and predisposition (Saldana, 2009). It is as a result of the interpretative nature of data analysis that I extensively described my paradigm and the lens through which I see the world. Acknowledging that data analysis is interpretative is especially significant in this study

because I did not conduct a member check. That is, I did not provide my interpretations of the data to participants for their feedback.

Before beginning the coding process, I read through all 12 transcripts to gain an overall perspective prior to delving into the details and finding patterns. I adopted an elemental coding method, specifically descriptive coding, which summarizes in a word or short phrase the basic topic of the passage. By utilizing this method, I was able to develop a “basic vocabulary” of the data (Saldana, 2009). Some of the basic vocabulary that was generated included: sex work, trafficking, violence, relationships, health, services, law enforcement, immigration, and growing up. In Descriptive Coding, it is important to ensure that these words or codes are an identification of the topic of the passage and not a summary of its content (Saldana, 2009).

After the First Cycle of coding, I realized that some codes were redundant, some were too broad, and some were too detailed and would not serve as effective codes. Therefore, I undertook a Second Cycle of coding to filter and focus the data for generating themes and concepts (Saldana, 2009). For example, in a case of redundancy, I found that the codes “services” and “healthcare” were often used to identify the same data. I also found that codes such as “sex work” and “relationships” were too broad and contained other significant themes. Therefore, I divided sex work into “entry” and “exit” and relationships into “violence,” “partner,” and “children.” Additionally, I found that a code such as “law enforcement” is actually a subcategory of “legal,” which also encompasses “immigration.” This Second Cycle allowed me to group my codes into categories based on pattern coding. From here, I moved passages around within each transcript to visually represent these categories together. This allowed me to see in some

cases the necessity for simultaneous coding in which the same passage can be identified by more than one code and fall into more than one category.

Through this pattern coding, I was able to see that certain codes were more prevalent in one participant group than another. I decided to check the validity of my perceived pattern by visually representing the frequency of each code within each participant group. This would allow for a consistent comparison of the categories between the participant groups. A copy of the file I used to analyse the frequency of codes is exhibited in Appendix J. As Saldana (2009) states, word frequency does not necessarily suggest significance but it is worth exploring to search for undetected patterns. I did this by ranking each code by the number of participants who discussed the code. This resulted in a ranking of the highest appearing code as number one and the lowest appearing code as number 28. For example, six participants discussed structural barriers in access to healthcare for trafficked women making the code “structural barriers” tied for the third most frequently appearing code.

3.6 Research Quality

If my research were conducted with a quantitative methodology, I would judge it based on its validity, reliability, generalizability, and objectivity. On the other hand, when assessing qualitative research there is much controversy and many researchers criticize the idea of quality assessment in this type of research citing an impossibility of universal criteria (Tracy, 2010). However, I believe that it is both possible to analyse the quality of

qualitative research and also necessary to do so. Guidelines in research quality will help novice qualitative researchers, such as myself, to learn, practice, and improve my research techniques. At the same time, quality assurance will help all qualitative researchers in framing our research and provides us with the opportunity to better communicate among ourselves as well as the research community at-large (Tracy, 2010). Finally, when conducting research with a vulnerable population, such as women who have been trafficked, I must hold myself accountable to participants that my research is worthwhile and useful. In assessing my research, I will use a model proposed by Tracy (2010) that includes eight criteria of quality in qualitative research. These criteria are: (1) worthy topic, (2) rich rigour, (3) sincerity, (4) credibility, (5) resonance, (6) significant contribution, (7) ethical, and (8) meaningful coherence.

First, a worthy topic is one that is relevant and timely while being significant and interesting. Considering the growing coverage of human trafficking, the alleged rise in its prevalence, and significant consequences that affect those involved, it is a worthy topic of investigation. Second, rigour can be judged by the study's richness; a rigorous study entails a variety of theoretical constructs, data sources, and contexts. As explained in the recruitment section, I used many sources of data and went to great lengths in order to recruit a variety of participants. Rigour is also achieved by providing the reader with an explanation of how data is collected and analysed as I explained extensively in the recruitment and analysis sections. Third, sincerity is based on self-reflexivity and transparency of the research process. In reflecting on my research, I was both honest with myself and honest with the research process through practicing self-reflexivity and being transparent (by disclosing the challenges of my research process). Fourth, I achieved

credibility, which refers to a study's trustworthiness, by expressing "a reality that seems true" (Tracy, 2010, p.842) through giving a thick description of my research and by using multiple sources of data. Fifth, I achieved resonance by relaying my findings in a manner that promotes empathy among my readers. Sixth, my research can have a significant contribution by extending knowledge of trafficking, having the ability to improve practice among social service providers, and encouraging ongoing research about and empowering women who have been trafficked and sexually exploited. Seventh, I held my research to a high ethical standard as I demonstrated above. Finally, my research had meaningful coherence by answering my research questions, using methods (interviews) that were consistent with my theoretical paradigm (critical theory), and by interconnecting literature with my purpose, methods, and findings (Tracy, 2010).

3.7 Conclusion

This chapter discussed issues relating to the methodology and the manner in which the research was conducted and the data was interpreted. As I established, the paradigm through which I view the world and the lens through which I conducted this research is feminist critical theory. Qualitative data was gathered through semi-structured interview questions from 12 participants. I analysed the data by transcribing the interviews verbatim and using descriptive coding (a type of elemental coding) through two cycles of coding.

This chapter also reviewed many of the ethical considerations in conducting the research. In addition to the ethical challenges that researchers face, this study had the added responsibility associated with conducting research with a vulnerable population. Individuals from vulnerable populations are presumed more likely to be misled, mistreated, or taken advantage of a research participant (Levine et al., 2004). Therefore, my study adhered to ethical principles of consent, privacy, confidentiality, and anonymity. Finally, this chapter assessed the quality of the study by examining eight different criteria, which can be used in assessing qualitative research. The aim of the following chapter is to address the first research question on the political and legal climate of human trafficking for sexual exploitation in Canada.

Chapter 4

4 Political and Legal Landscape of Trafficking in Canada

4.1 Introduction

In this chapter I explore the political and legal environment of sexual human trafficking in Canada, which is contextualized in relation to the wider political realities of prostitution and its regulation in Canada and globally. Such a discussion is critical because the subject of this thesis is women who have been trafficked for sexual exploitation, which is intimately bound up with the issue of prostitution. Next, I will examine Canadian prostitution laws from their British roots to the current position that the country holds. Then I will discuss the challenges brought forth in court (in 2010) against Criminal Code laws dealing with prostitution (*Bedford v. Canada*, 2010). Following this I present my primary data regarding the opinions of trafficked women and members of law enforcement on legalizing prostitution in Canada and what that would mean in the fight against human trafficking. Then I will review exotic dancing visas in Canada and explore the opinions given by service providers on the topic and its relation to human trafficking.

In the second half of this chapter, I will examine the enforcement of laws for prostitution and human trafficking in Canada from the perspectives of various participants closely tied to the field: police, Citizenship and Immigration Canada, and

non-governmental organizations. It is important to examine these opinions because the actions of these groups directly impact the lives of trafficked women. A final and critical player in law enforcement whose roles I will discuss are trafficked women. In the last section, I will summarize the current state of law enforcement for human trafficking in Canada, including the number of prosecutions and the government's commitment to ending this practice.

4.2 Political and Legal Landscape

Policies to eliminate the exploitation of women through prostitution have a long history. In 1949, the UN Convention for the Suppression of Traffic in Persons and Exploitation of the Prostitution of Others stated:

Prostitution and the accompanying evil of the traffic in persons for the purpose of prostitution are incompatible with the dignity and worth of the human person and endanger the welfare of the individual, the family and the community (Barnett, 2008).

This Convention outlawed sexual trafficking and condemned all forms of prostitution. However, Canada did not rebuke all forms of prostitution in an absolute manner; therefore, it did not sign the Convention at that time (Barnett, 2008).

The next UN Convention to take a stance against human trafficking was in 1979 through the Convention on the Elimination of All Forms of Discrimination against Women. In 1982, Canada ratified this Convention because, unlike the 1949 convention

against prostitution, this Convention focused solely on trafficking. In 1995, the Beijing Declaration and Platform for Action highlighted the idea that forced prostitution is a form of violence against women. In 2000, the Protocol to Prevent, Suppress and Punish Trafficking in Person, Especially Women and Children, condemned trafficking in humans and asked states to criminalize the practice, which Canada ratified in 2002. Viewed historically, international conventions have moved from condemning all forms of prostitution to focusing on sexual exploitation that takes place in the context of trafficking (Barnett, 2008). This shift in discourse (from condemning prostitution to condemning human trafficking for sexual exploitation) will be discussed in more detail in Chapter 5.

4.2.1 Legal Perspectives on Prostitution

Currently, there are four internationally recognized legal systems for the control of prostitution: abolition, criminalization, decriminalization, and regulation. All of these modes of regulation share two main policy concerns: the protection of prostitutes from third parties and the protection of the public from the adverse effects of prostitution (Davis & Shaffer, 1994). Prostitution is not illegal in Canada; however, it is nearly impossible to carry out an activity associated with the trade without breaking the law. This leads to a two-tiered Canadian system: prostitution is criminalized but it is tolerated. While this quasi regulation of sex work has allowed workers space to operate, it has also left them without any protections under the law (Jeffrey & Sullivan, 2009).

Abolitionism, the first paradigm, positions prostitutes as victims and criminalizes the activities of those seen to be exploiting prostitutes, such as the customers and pimps. Abolitionism seeks to protect prostitutes from abusive treatment while working towards the final abolition of prostitution. This is the system the UN endorsed in 1949 through the Convention for the Suppression of the Traffic in Persons and the Exploitation of the Prostitution of Others. Abolitionism is also popular with some feminists because it is believed to free prostitutes from criminalization while simultaneously giving them protection under the law. However, research has shown that abolitionist laws do not increase the safety of prostitutes nor do they lead to its eradication because there continues to be a demand for prostitution (Davis & Shaffer, 1994).

The second paradigm is criminalization. As mentioned, Canada employs a quasi-criminalization approach: prostitution is theoretically legal but practicing it is not. While other Western countries are moving away from these kinds of criminal sanctions, Canada legislated tougher anti-communication laws into the Criminal Code in 1986. This section of the Criminal Code (s. 213) increases the vulnerability of prostitutes because the emphasis is on arrests rather than the health and safety of sex workers (Davis & Shaffer, 1994). Criminalization causes an additional problem for prostitutes because it is almost impossible to practice prostitution in Canada without getting a criminal record and getting a criminal record makes it difficult for the women to obtain legal employment and leaves them with few economic options but to continue to work in the sex trade. Viewing prostitution as a criminal activity also isolates prostitutes from their families by increasing the stigma of prostitution and because contact with a prostitute can lead to criminal charges (Davis & Shaffer, 1994). Through the criminalization perspective,

prostitution is deemed “deviant behaviour” as supporters of this system assign what is and is not appropriate behaviour for a woman, which can lead both the public and the police to feel justified in perpetuating violence towards prostitutes (Davis & Shaffer, 1994).

Decriminalization, the third paradigm, entails the complete removal of prostitution and prostitution-related offenses from the Criminal Code and would allow prostitutes to perform their work within the boundaries of the law (Davis & Shaffer, 1994). However, if the decriminalization of prostitution is the legal system in place, it should not include those who are trafficked and held against their will or minors who are not legally able to give consent. That is, in the practice of decriminalization, the distinction needs to be clear between those women who are consenting to be in the sex trade and those who are unable to give consent. When viewed from a law enforcement perspective, decriminalization has the positive effect of freeing resources that are dedicated to enforcing prostitution laws to be used to increase capacities in locating and aiding women who are forced into prostitution and trafficked.

Finally, regulation allows prostitution to occur by using zoning or licensing. Regulation holds the perspective that prostitution is a necessary evil and thus aims to control it rather than eradicate it. The only instance when regulation was suggested in Canada was through the 1986 Fraser Committee recommendation, but the Conservative federal government did not act on it. However, it has been found that in countries where regulation is practiced (such as New Zealand), under-ground prostitution still continues to exist (Davis & Shaffer, 1994).

4.2.2 An Overview of Canadian Prostitution Laws

Being a former British colony, Canada's first laws on prostitution were imported from Britain, and the first Canadian statute to mention prostitution was passed in Lower Canada in 1839 (Backhouse, 1985). Although criminal law in Canada was modeled upon the British system, Canadian laws were significantly harsher in their treatment of prostitutes than their British counterparts. In 1865, the united provinces of Upper and Lower Canada passed the Contagious Diseases Act, which was virtually identical to the one passed in Britain in 1864 (Backhouse, 1985). This Act required that prostitutes submit to mandatory medical examinations and were to be removed from the public sphere and isolated from the general population if venereal disease was detected. Although the British version of the Act covered garrison and dock towns where the military was stationed, the Canadian Act covered all of the urban centres in Upper and Lower Canada (Backhouse, 1985).

At the time of the Confederation, women and children were typically perceived of as being the property of men. In the latter part of the 19th Century, however, attitudes towards women changed as women began to be seen as the moral guardians of the family and deserving of protection from men and men's vices (such as alcohol, prostitution, and gambling). In the 20th Century, reformers pressed police to abandon toleration in favour of vigorous law enforcement. Police often targeted prostitutes, not customers, in order to boost their number of charges (Lowman, 2009).

In Canada, Parliament has jurisdiction over prostitution laws through its criminal law power, which was derived from section (s.) 91(27) of the *Constitution Act* of 1867. Prostitution offences are primarily found in the Criminal Code s. 210-213 and can be divided into four categories: bawdy houses, procurement, offences in relation to prostitution, and prostitution abroad (Barnett, 2008). First, a common bawdy house is a place that is kept or occupied by one or more persons for the purpose of prostitution or to practice acts of indecency. Indecency, or inappropriate exposure of one's body, depends on context and takes into account factors such as consent. Second, procurement involves the toughest penalty for prostitution-related offences (up to 14 years of imprisonment) and refers to any act of persuasion (Barnett, 2008). Third, offences that relate to prostitution revolve around solicitation and the use of public space. Thus, it is not illegal to exchange sexual gratification for consideration, but obtaining the services of a prostitute and procuring and soliciting for these purposes in a public place is illegal. Finally, Canadian law on prostitution abroad extends Canada's territorial reach regarding offences against minors. That is, Canadians who purchase sex with girls or boys under the age of 18 abroad, regardless of the country in which the transaction takes place, will be held to Canadian laws upon their return (Barnett, 2008).

Although provinces and municipalities do not have jurisdiction in criminal law (which is federal), they control the enforcement of that law. At the provincial level, the government also has provincial legislation that it enforces through four measures: highway and traffic, community safety, child protection, and secure care, which allows for the involuntary detention of children involved in prostitution (Barnett, 2008). In turn, municipalities receive their authority from the provincial legislation. Police are more

likely to use municipal by-laws to regulate prostitution because it is easier than collecting evidence for a criminal charge. The by-laws that municipal police use can also be categorized into four sections: regulating the use of streets, regulating prostitution-related services, licensing prostitution-related services, and zoning, provided the by-law does not create the prohibition of adult entertainment in general or attempts to regulate public morality (Barnett, 2008).

4.2.3 Significant Events for Canadian Sex Work Laws

Although laws that deal directly with prostitution are found in the Criminal Code, there are other legislative events with significance to the prostitution and sex work landscape of this county. I will discuss two of these events: the creation of the Exotic Dancer Visa Program (EDVP) and the recent Ontario court ruling on the legality of activities surrounding prostitution. The first instance (EDVP) deals with one segment in the sex trade, exotic dancing, which is also referred to as “stripping.” The second instance is the challenges brought forth in an Ontario court against key provisions in the Criminal Code surrounding prostitution. Both of these events have been used in the discourse against human trafficking for sexual exploitation in Canada. First I will explain what each event was, how it came about, and its current state. Then I will discuss why participants think these legal occurrences are of significance in the fight against human trafficking.

4.2.3.1 Exotic Dancer Visas

In 1998, the Canadian government established a visa program for foreign women wishing to come to the country to work as exotic dancers (CBC News, 2004), the Exotic Dancer Visa Program (EDVP) (Rimniceanu, 2007). While other employers had to apply for work visas for a specified prospective employee and show that there are no Canadians who are able or willing to fill that specific position, EDVP enabled bars to bypass those steps in Canadian immigration policy. Bar owners had appealed to the government that there were not enough Canadian women to fill the demand for exotic dancers. Therefore, instead of having to apply for a work visa each time they wanted to hire a foreign woman, under the EDVP bars simply brought whomever they wanted to Canada to fill the position (Rimniceanu, 2007). Joyce, a service provider, explained how simple it was to bring women to Canada under this program:

For who was going to be dancing they were allowed to, for example, bring in ten girls, right? And they'd let Immigration know who those ten girls were later. But they were allowed to bring in say, ten girls, and I said to Immigration 'well, why is it – everyone else coming in has to go through this point system', and they said – to be evaluated, they said 'oh, well no one else would do the job. There's a shortage of people willing to do that type of job in Canada'. You see? That's considered a job where there's a shortage of people here to do the job, the same as agricultural workers. So in many ways they consider it the same as agricultural workers where farmers

will have permission to bring in for example, twenty farm labourers from the Caribbean.

On the surface, this practice seems legitimate. If stripping is entertainment for which there is a large demand, which is not being met with domestic labour, the demand could be met by bringing large numbers of foreign workers to fill the positions. However, according to Rimniceanu (2007), it is unclear whether there even was a shortage of Canadian women in the industry. She states that bar owners were asking women to work longer hours for less pay, which may have caused these women to leave the job. With the EDVP, bar owners were able to recruit foreign women who were willing to adhere to the demands imposed by the stripping facilities and replaced their Canadian counterparts.

A problem that exists with mass visa programs is that it gives employers much power over their employees because employees know that leaving the employer is cause for deportation. Although all employers who sponsor foreign workers have this power, with mass visa programs such as EDVP, employees are easily replaceable, which increases the power of the employers. Although the law, in theory, allows an employee who is being exploited to change employers, as a service provider explained to me, the reality of the situation is much different. She also alluded to the fact that no one else in that industry would want to hire a foreign employee who was seen as having caused problems for an employer by blowing the whistle. When I asked this participant, Stacey, about foreign workers' ability to switch employers, she said:

So technically yes, the answer is yes, they could change their visa to reflect a new employer. The reality I think of doing that is pretty difficult. The same thing as – it's not that whistle blowing would automatically mean they were deported but there's certainly a fear that if they blow the whistle no one's really going to take care of them after that, even if we say 'oh, that's great. I'm so glad somebody told us that this was going on'. Ultimately, if they're here on just some sort of temporary permit, there's not a lot of support. They might be able to stay for a while and fight it out in the courts but finding a lawyer to do that, seeing if Legal Aid will cover you, all of those realities get in the way of what technically might be possible.

In response to media coverage of the EDVP, members of the public criticized the permit for several reasons. Chief among the criticisms was that it allowed exotic dancers to fast track through the visa procedure, for which other workers had to apply and go through an extensive application process (Rimniceanu, 2007). A second major criticism came from anti-trafficking advocates who raised allegations that the visas were being used to traffic women into the country. The critics alleged, by issuing these visas, the government was complacent in harbouring the trade of humans (Rimniceanu, 2007). Despite all of the criticisms surrounding the program, it was not until 2004 that the EDVP was cancelled. The Minister of Immigration, Judy Sgro, faced allegations that she had personally given a visa to an exotic dancer, Alina Balaican, in exchange for the woman's work on the Minister's election campaign. The scandal led to the Minister's resignation and to the eventual cancellation of the EDVP (Rimniceanu,

2007). Although the government did not release how many visas it had issued under the EDVP, media estimates put the number issued in the final year of the program (2004) alone at 601, of which 582 were women from Romania (LifeSiteNews, 2004).

It is difficult to estimate how many of the women who entered Canada through the EDVP found themselves in situations of exploitation and as victims of human trafficking. Timea Nagy was definitely one woman who entered Canada through the EDVP to end up working against her will in the sex trade. At the age of 19, Timea was recruited from her hometown in Hungary for what she thought was a short-term modeling job in Canada. Her traffickers used a visa obtained through the EDVP to easily and legally bring her into the country. Not speaking English, Timea did not know she was entering Canada with a visa for exotic dancing. Once in the Toronto region, she was forced to work as an exotic dancer, raped, and sold into prostitution by her traffickers (Nagy, 2010). Some women used the EDVP as a viable form of immigration and chose to enter exotic dancing as a profession. However, by giving employers so much power, the EDVP facilitated the exploitation of women working as exotic dancers. Additionally, by the mere ease of obtaining a visa for exotic dancing, the EDVP allowed traffickers to take advantage of the program to bring women into Canada specifically for exploitation in the sex trade.

4.2.3.2 Recent Ontario Ruling

On September 28, 2010, the Ontario Superior Court, in an unprecedented move, struck down three key provisions in the prostitution law: communicating for the purpose of prostitution, living off the avails of prostitution, and keeping a common bawdy house (Makin, 2010). The ruling follows a 2009 constitutional challenge by three women involved in the sex trade, the Applicants (Terri Jean Bedford, Amy Lebovitch, and Valerie Scott). The Respondent in this case was the Attorney General of Canada. Mirroring the position of the Respondent (i.e., against the Applicants), the Attorney General of Ontario (AG) was present in the court case as an Intervener (Bedford v. Canada, 2010). Nearly a year after the hearing, Judge Susan Himel concluded that the provisions of the Criminal Code brought forth by the Applicants do violate the women's rights of security and freedom of expression under the Charter of Rights (Kari, 2010). The ruling meant that these provisions, which had gone unchallenged for decades, could no longer be enforced in Ontario. As a result of the significance such change in the law could have on both the public and law enforcement, Judge Himel gave until November 27, 2010 before her decision would take effect in Ontario (Bedford v. Canada, 2010).

Following this ruling, the Attorney General of Canada and AG sought a stay on Judge Himel's ruling (meaning it would not go into effect) while they appealed the decisions made in Bedford v. Canada to the Court of Appeal for Ontario (Bedford v. Canada (Attorney General), 2010). Judge Marc Rosenberg heard the Respondents' case for a stay on November 22, 2010, on which day he granted a stay until he released his decision. On December 2, 2010, Judge Rosenberg concluded that it was in the public interest that the judgment be stayed until April 29, 2011. Nevertheless, he stated this

decision did not indicate that he disagreed with Judge Himel whose judgment had been thorough and had taken into account all relevant information (*Bedford v. Canada (Attorney General)*, 2010).

In the summer of 2011, in a week-long hearing, those representing the government appealed Judge Himel's decision in front of the Court of Appeal for Ontario. After nine months of deliberation and examination of over 25,000 pages of evidence, on March 26, 2012 the Appeal Court upheld two of the provisions that Himel had deemed unconstitutional: living off the avails of prostitution and keeping a bawdy house. The Appeal Court, however, determined that the law against solicitation for sex should remain in effect (Humphreys, 2012). Additionally, they gave a 30-day stay for the law against living off the avails of prostitution and a one-year stay to the law against bawdy houses, which would give the federal government an opportunity to amend the Criminal Code (Nixon, 2012). One day prior to the expiration of the stay for the bawdy house ruling, on April 25, 2012, the government asked to extend the stay until it determines how it will move forward with its overall appeal (Press, 2012).

Although the case for the unconstitutionality of the Criminal Code provisions for prostitution were raised in Ontario and subsequently appealed in Ontario, the decision has significant implications for the country. If a case against these provisions is raised in another province, Judge Himel's decision will be used as having set a precedent for other judges to follow because the Criminal Code is national law. The Federal Justice Minister, Rob Nicholson, has weighed in stating, "It is our position that the Criminal Code provisions are constitutionally sound" (Press, 2012). This case has brought prostitution to the federal stage as the government decides whether it will amend the Criminal Code,

which seems unlikely from its stance on the issues, or if it will appeal the case to the Supreme Court of Canada, a ruling that will take nearly two years (Press, 2012).

Bedford v. Canada (2010) cites many benefits that legalization of the prostitution provisions will provide to women who work as prostitutes. For example, eliminating the law against brothels allows sex workers the option of working from a common location. By working with other sex workers, women can alert those around them if a john is being violent or does not pay. In another example, by being allowed to live off the avails of prostitution, women can hire security guards that ensure their safety traveling between clients or with their clients.

However, some participants and experts think that these changes would have a negative outcome on women in the sex trade. Laura, a member of law enforcement, said that she uses the provisions on prostitution to try and help women leave the sex trade. She argues that many women in the sex trade become addicted to drugs and are dependent on remaining in sex work in order to pay for drugs. She believes that arresting women for prostitution charges and temporality incarcerating them allows her to provide the resources the women need for exiting the sex trade. Her argument is that these addicted individuals would not voluntarily leave sex work while they are addicted. She said:

. . . if you take the law away and these women are no longer arrestable, we won't have as many successes in helping them exit. We have 18 women now that we have successfully exited as a result of the work that we're doing. Every single one of those successes has come from being incarcerated, because what incarceration does, it breaks that chain of addiction, it gives

them a chance to get medical attention. As much as they don't want to go into jail, they get medical attention in there, they get back on medication if that's something they need to go on, three square meals a day, they get to be able to sleep. I love when I go to the jail and I see a woman that I'm used to seeing on the street and all of a sudden it's like 'Wow, look at you. You're gorgeous, you're healthy.' They love it. And, they've detoxed and now they're making clear judgments, right? And that's when they'll say 'Can you call my mom? Can we look at rehab? Can we start to move forward on that?'

However, it must be noted that Laura's argument is only applicable to sex workers who have addictions that keep them in the sex trade. The changes in the law could decrease opportunities for women who want to exit, vis-à-vis the positive opportunities that arise from incarceration, but the changes do not necessarily pose greater risk to all sex workers.

A formerly trafficked woman, Carrie, raised the point that legalizing all prostitution could actually have negative consequences on trafficked women. She said that in the Netherlands the legalization of prostitution actually led to an increase in the cases of trafficked women in the sex trade. She said:

It's bullshit. I'm sorry about my language, ok? It's absolute bullshit, it's bullshit. I mean even Amsterdam is doing away with legal prostitution, ok? Because it's not working. Sex trafficking is just, leaps and bounds it's growing. The demand is more, so it doesn't work. And I think this judge had the best of intentions but I think she made an ignorant and uninformed

decision, and I'm hoping that she's been informed properly by the time that this – I don't know who makes this overall decision as to whether it stays or goes, that law (Carrie).

Carrie's statement that legalizing prostitution will increase the prevalence of human trafficking is supported by some literature. According to a study by Jakobsson and Kotsadam (2010), the prevalence of human trafficking in a country is positively correlated with the legal status of prostitution in that country. The authors not only used currently available data to demonstrate a correlation between their variables but they quantified levels of trafficking and, by performing a regression analysis, supported their hypothesis that legalizing prostitution increases the prevalence of human trafficking.

According to Benjamin Perrin, author of *Invisible Chains*, legalization of prostitution also has a direct impact on law enforcement's ability to combat human trafficking. At a book launch event in Toronto in October 2010, Perrin argued that law enforcement needs the provisions against prostitution in the law to help them locate women who have been trafficked. For example, law enforcement may enter a house using the law of the illegality of keeping a bawdy house to discover that the sex workers are in fact trafficked women. Therefore, although changing the prostitution laws in Canada may be of benefit to some sex workers, it may pose increased threats to more vulnerable sex workers, such as those with drug addictions, and negatively impact the fight against human trafficking.

4.3 Enforcement of the Law

Now that I have examined Canadian laws on prostitution, it is necessary to investigate how these laws are actually enforced and the role of trafficked women in the legal process. By using data obtained from interviews, I will look at the key players involved in the fight against human trafficking: the police, Citizenship and Immigration Canada (CIC), and non-governmental organizations. Next, I will explore the relationship among these players and their relationships with trafficked women. Finally, through published sources, I will assess the current state of human trafficking law enforcement in Canada.

4.3.1 Police

The police in the fight against human trafficking are in forces both at the federal level (RCMP) and the local level. With increased awareness that human trafficking exists in Canada, the RCMP established a national task force in September 2005 within the Immigration and Passport Branch Headquarters in Ottawa, called the Human Trafficking National Coordination Centre (HTNCC). The objective of HTNCC is, “To provide a focal point for law enforcement in their efforts to combat and disrupt criminal organizations involved in [human trafficking] activities” (RCMP). HTNCC endeavours to meet this objective by developing law enforcement tools and guidelines, coordinating national awareness campaigns, developing national and international partnerships, and coordinating and facilitating the dissemination of intelligence (RCMP).

HTNCC has five regional coordinators throughout the country (Ontario, Quebec, Atlantic Region, Pacific Region, and Northwest Region). As the coordinator for Ontario (and former RCMP officer) told me:

The primary function of this job is to provide awareness and training to law enforcement groups, anti-trafficking groups, general public, and to kind of get a triage of how human trafficking is affecting us here in Ontario and elsewhere in Canada and in the world, and provide the appropriate advice to law enforcement agencies that are involved with human trafficking investigations (Mark).

Therefore, HTNCC is a main point of contact for the RCMP on issues relating to human trafficking with local police, CIC, and NGOs. HTNCC also has several other federal partners with whom it works and advises on the legal issues surrounding human trafficking. These partners include the Department of Justice, Canada Border Services Agency, Department of Foreign Affairs and International Trade, Public Prosecution Service Canada, Public Safety Canada, and the Status of Women Canada (RCMP).

Among local police forces there are different levels of involvement in addressing human trafficking. For some police forces (such as Peel Police), human trafficking is part of their mandate and they are active in identifying and arresting traffickers (Moving Forward Together, 2011). There are other police forces that are not trained in identifying cases of human trafficking. As James Zuccherro of Peel Police indicated at *Moving Forward Together*, awareness about

human trafficking needs to be raised among police officers that are not members of vice units. There are also police forces that actively avoid tackling cases of suspected human trafficking. As the Ontario Provincial Crown, Toni Skarica, told attendees of the *Moving Forward Together*, he had been informed by an officer from a major Southern Ontario police force that they were told by their superiors not to press charges in cases of human trafficking because of the high cost associated with pursuing these cases.

4.3.2 Citizenship and Immigration Canada

CIC and its agencies are involved in cases of international human trafficking in Canada. When trafficked women who are not Canadian citizens or who are in the country illegally are discovered, immigration services must determine whether the person can remain in Canada. Some women may have been illegally smuggled into the country while others may have had legitimate visas upon entering but they may have expired or been taken away by traffickers.

CIC officers can encounter two scenarios regarding a woman who has been trafficked: she may want to return to her homeland or she may want to remain in Canada. In the first case, some women may want to return home to their families and to the lives they had prior to being trafficked. However, several issues may arise that make this option impossible or unfavourable. For instance, a woman may not have a home to which to return if her family was responsible for selling her to the traffickers. In the second case, women may want to remain in the

country because moving to Canada for non-exploitative work is what they initially came to do. In other cases, they may want to remain in Canada because they fear the traffickers who had recruited them in their home countries will find them upon their return. Finally, some women may feel ashamed of what has happened to them and fear the stigma that will surround them if they return home. As a service provider who works with foreign workers stated:

I can't imagine the shame that a woman feels when she comes here from let's say an eastern European country or from any Middle Eastern country, any other country, are told they're going to do something, even exotic dancing and they're not too sure about it but they're like 'ok', if they can make money, and all of a sudden they're basically being told they're in prostitution. And now not only can't they turn around and say no but the whole stigma, how can you go home after that? How do you go home and say 'yeah, mom, dad, cousins, brothers, whatever, I had to prostitute myself' considering the stigma that surrounds women in prostitution and in the sex trade. So you end up in an untenable situation. You know, there's no resources here and you can't go home (Stacey).

For those women who wish to remain in Canada, the government has created what is called a Temporary Resident Permit (TRP). A member of CIC, Dennis, explained in an interview that the TRP was established in 2002 and one group to whom it is issued is trafficked individuals. According to the CIC, the TRP program was created for individuals who do not meet the requirements of the *Immigration and Refugee Protection Act* (and are refused permanent or temporary

resident visas) but have compelling reasons to remain in Canada. As Dennis mentioned in his interview, one of the benefits of receiving a TRP is gaining access to healthcare services. When a sexually trafficked woman obtains a TRP she gains access to medical services covered by the province in which she resides for the duration of the permit.

In order to obtain a TRP, the immigration officer must determine eligibility for the permit by following the instructions given by the Minister of CIC. Section 16 of the Ministry's TRP document describes the procedures to be used with trafficked individuals, including a checklist of indicators to be assessed in determining eligibility. Dennis describes how those who have been trafficked reach the stage of receiving a TRP:

To date, most of our TRP holders have been referred by law enforcement. Either the RCMP or a local law enforcement, I believe Peel has been quite active, or the Canada Border Services Agency. So CBSA has responsibility for managing our ports of entry and they'll look into cases where they may believe there may be foreign nationals who are here illegally. So in massage parlours, etcetera, they may be involved with the raid. And so if they find people there who they believe have been victimized, then they'll refer them on to us. Same thing with the RCMP. So that's how, by far and away, the majority have been referred to us. A victim can approach CIC directly but it's – given the status and the situation of the victim we don't get too many of those to date. A social services agency could refer them to us as well.

Although those who have been trafficked can end up at a CIC office in multiple ways, when it comes to receiving a TRP, it is favourable to be referred by law enforcement. There is much judgment in determining who is and who is not a victim of human trafficking (even with the use of the checklist). Therefore, if police refer a person to CIC as someone who has been trafficked, the immigration officer has the police's recommendation to rely upon. As well, police may be using the testimony of these individuals against traffickers, which implies that they have deemed the individuals as having been trafficked. As a participant from CIC explained:

It's important to realize though that Canada's a little bit different, well some people would say a lot a bit different – a lot different than other countries because it's not a requirement that you cooperate with law enforcement to get the permit. . . . The involvement of law enforcement helps, like if law enforcement comes and brings the person with them and says 'we found this person in this situation, this, this, this, this and this happened', then we've got a police officer there verifying their story (Dennis).

4.3.3 Non-Governmental Organizations

The last major player in the response triangle for human trafficking in Canada is non-governmental organizations. Although human trafficking is a crime, only some trafficked individuals come into contact with the police. A member of law enforcement explained why the police are not a central organizing body for addressing trafficking:

Many people look at law enforcement as that body, and it's really not. We only see a very small fraction of human trafficking victims because a lot of trafficking victims don't want to get involved with law enforcement because they're scared to testify, or they're scared of law enforcement in general (Mark).

Therefore, rather than go directly to law enforcement, many women will seek services and aid from NGOs. As Mark explained, one reason women avoid the police is a fear that police will force them to testify against the traffickers who they fear. Another reason, according Timea Nagy, is the fear of police itself. Her traffickers had told her repeatedly that the police in Canada are corrupt and that the police would rape her if she sought the police's help.

There are numerous NGOs at the local, regional, national, and international levels. They range from centres for abused women to the Salvation Army to organizations whose sole purpose is to combat human trafficking. Organizations that are large enough may offer in-house physical and psychological health services for women while other organizations will make referrals to resources in the local community. Often these organizations are a safe haven for those who have been trafficked and service providers act as the women's advocates. A list of some of the non-governmental organizations that work with trafficked women, in Canada and internationally, is displayed in Appendix K.

4.3.4 Relationship Among the Players

As I have previously mentioned, in March 2011, I attended a conference in Ottawa entitled *Moving Forward Together*. This event brought together dozens of organizations from across the country, law enforcement from all levels, various branches of immigration, and law enforcement and NGOs from abroad. The purpose of the conference was to have law enforcement and service providers share their experiences of various forms of human trafficking. The aim was to learn from one another in order to improve Canada's response to human trafficking.

Although I learned many things at this three-day conference, the most important and salient point for me was observing the distrust that existed between law enforcement and NGOs. Perhaps it was my outside perspective and lack of belonging to any one group that allowed me to see these dynamics. Each group seemed to keep separate and associate and network among itself, which I observed from people's choice of tables and with whom they socialized over breaks. At one point the two groups separated into two rooms to cover topics pertaining to their respective areas and I noticed another difference – law enforcement was almost exclusively men and service providers were women. Difference between the groups was also evident by their choices of language. For example, at one point a service provider asked a member of law enforcement to refer to trafficked women as women and not girls. The service provider said that using the term girl did not acknowledge the agency that the women have over their lives and bodies. Finally, some service providers were very blunt in their speeches by admitting that they

did not trust law enforcement. A common theme for mistrusting the police and government officials was the service provider's wariness that these officials may sacrifice the women's best interests for the interests of their own agencies (enforcing the law and obtaining arrests and pressing charges). For example, one service provider at the conference voiced her distrust of immigration officials in her presentation. This distrust was echoed in an interview, which I later conducted, with a service provider. Joyce said:

So the RCMP are heavily into this whole anti-trafficking thing. But I mistrust their motives, and they're into law enforcement strictly, right, whereas what I was doing wasn't law enforcement. You know, we've been doing this social service work, right? We were doing settlement counseling, 'settlement and adaptation counseling' is what they called it. So, you know, we had a strict policy at our agency that we did not call the authorities.

That said, there are cases of cooperation between the two groups. In March 2012, I attended a conference on human trafficking in London, Ontario entitled *One Voice, One Hope*. This conference was organized by the London Anti-Human Trafficking Committee, which is composed of members of law enforcement, service providers, and formerly trafficked women. At the conference, Timea Nagy (who founded Walk-with-me and was formerly trafficked), spoke about how she is traveling across Canada to provide training to law enforcement on identifying and providing aid to those who have been trafficked. At the same conference, a member of law enforcement, Lepa Jankovic, spoke about the cooperation she received from the Salvation Army after she rescued a group of men who had been trafficked from Hungary to Hamilton, Ontario. Therefore, it is evident

that the relationship between the various players in the response triangle for human trafficking is complicated and varies between situations. In some instances the players mistrust each other's intentions and actions while in other cases they cooperate to provide all of the necessary resources for trafficked women.

4.3.5 The Role of Trafficked Women in the Legal System

In a discussion about the players involved in trafficking, the most important stakeholders are the women who have been trafficked. In terms of the justice system and prosecuting traffickers, the women cannot be ignored because their testimony is required. Although some power may be given to the women because they are vital in the prosecution process, a trafficked woman may feel threatened about testifying against her traffickers. One member of law enforcement describes how he thinks trafficked women may feel:

Most human trafficking victims don't want to get involved in law enforcement, either because they're scared of the people that have victimized them and they really don't want to testify against them in court, they're ashamed of the situation that they're actually in and they just don't want to have to live through that, or maybe because they don't have the mental capacity they don't even realize that they're human trafficking victims (Mark).

A woman who had been trafficked also told me about the fear she had about her traffickers if she was to involve the police. She said, "So I can't involve the cops. Rats die. I will be killed" (Carrie).

Unfortunately it is not just the fear of traffickers that prevents women from approaching law enforcement but it is the fear of law enforcement itself. As previously stated, Timea was told by her traffickers that she would be raped by the police if she sought their help. The fear of law enforcement may also be a result of women coming from cultures where police corruption is abundant. Or, women may fear going to the authorities if they are not in Canada legally. A service provider told me about the fears of deportation some trafficked women have. She said:

Like, if they're dancing at the [local strip club] for example, you're only a block from the Police Station. They know darn well where the Police Station is [local street] is only a block away, right? They know they could walk in there and get some help, right? But that's not what they want, they want to stay in Canada and get permanent papers and get another kind of job, right? (Joyce).

On the other hand, formerly trafficked women can also have positive relationships with police and help the police in the fight against human trafficking. At *Moving Forward Together*, a woman from Québec (known only as Valerie) expressed her gratitude to the police for finding her. She said that the only reason she was alive was because the police had the house where she was being held under surveillance and eventually rescued her. Also at the conference, Josée Mensales of the Montréal Police said that many women want to help the police after being trafficked. There are other examples, such as Timea Nagy (as was previously stated), who founded an NGO to provide services to those who have been trafficked and works to train police in identifying trafficking cases.

Timea mentioned at *Moving Forward Together* that if she needs help in providing services to trafficked individuals, she just picks up the phone and calls one of the police officers she knows. In another example, one formerly trafficked woman I interviewed works with local authorities and NGOs to organize and deliver a program for johns who have been caught by police.

Therefore, women who have been trafficked hold a unique and essential role in the legal system and in law enforcement in Canada. First, the women's testimonies are required in cases against human traffickers. That is, without them there would be no way of prosecuting traffickers in this country. Sometimes fear of traffickers or the police makes it difficult to obtain the women's cooperation in the case against traffickers. However, there are many cases of formerly trafficked women working with members of law enforcement and with NGOs to bring traffickers to justice and to assist others who have been trafficked.

4.3.6 In Canada Thus Far

As previously mentioned, Canada was deeply involved in the negotiations that led to the adoption of the UN Convention Against Transnational Organized Crime and was among the first nations to sign the Protocol in December 2000, and ratify it in May 2002 (Gozdziaik & Collett, 2005). However, it was only in 2005 that Canada incorporated human trafficking into the Criminal Code. As Perrin (2010) states, “. . . Canada's record in dealing with human trafficking is lethargic” (xxiii). And even the most thoroughly written and pertinent laws are of no avail if they are not properly enforced and the Justice

System does not convict criminals. To date, very few perpetrators have been prosecuted in Canada and even fewer have been convicted. According to Perrin, in its 2008 Trafficking in Persons Report, the US State Department criticized Canada for its “limited progress on law enforcement efforts against trafficking offenders” (p. 136).

As of June 2011, the RCMP reported that nine traffickers have been convicted and 74 traffickers are being prosecuted for exploiting 141 victims (Perrin, 2011). And, although hundreds of permits have been issued under the TRP program (based on my interview with the CIC), according to Perrin, between 2006 and 2010 only 68 foreign victims of human trafficking were given a TRP (2011).

As a result of the research I have done into human trafficking (through studying literature and Canadian laws in the present and the past, conducting interviews with those affected by or working in the field of trafficking, and attending several conferences and hearing dozens of experts speak on the topic), I think there are a few factors that have led to the lack of progress in the fight against human trafficking in Canada. First, I think there is an overall misunderstanding among Canadians about what trafficking entails. As will be discussed extensively in the following chapter, there are many differing opinions on what constitutes trafficking. Some people (including experts) wrongfully equate all work in the sex trade to human trafficking, which muddies the legal scene and prevents identifying and isolating traffickers from pimps. Second, until the media took up the issue in the last couple of years, many Canadians and Canadian politicians did not even know that human trafficking existed in this country. Third, even with the human trafficking laws in place, Canada does not have all of the resources and funding required for enforcing the law. Many members of law enforcement do not know how to identify cases

of trafficking and if they do, they may not have the funding to investigate the case. Fourth, in Canada, it is required that the trafficked individual testifies against the trafficker for a conviction to be possible. And, as I discussed earlier in this chapter, many women are afraid or unwilling to testify against their traffickers. Fifth, Canada does not have Crown attorneys dedicated to prosecuting human trafficking cases. It is difficult for members of the Crown to prosecute a crime that is not well understood by them or the courts.

According to Perrin (2010), as of 2009, all human trafficking convictions in Canada were based on guilty pleas with sentencing judges giving their oral reasons, which means these convictions do not appear in databases commonly used by lawyers and judges. This makes it difficult for individual Crown prosecutors to find the guidelines they need for further prosecutions. Finally, as Mark (a member of law enforcement) told me, sentences for human trafficking have been light in Canada because “we're built on a rehabilitative model where people are recognized that if you take the proper processes, people can be rehabilitated and made back into constructive members of society” (Mark). Therefore, even if a trafficker is identified and successfully prosecuted and convicted, he or she may be back on the streets in months.

Despite Canada's poor showing in the fight against human trafficking, there is still hope for the country. As part of his re-election platform, Prime Minister Stephen Harper pledged to commit \$20 million to implement a National Action Plan to Combat Human Trafficking. Additionally, in February 2011, the government of Ontario announced \$2 million in funding over 3 years for the fight against trafficking. This money will go specifically towards assisting trafficking victims, paying for new

specialized Crown prosecutors, creating a crisis hotline for victims, and funding to help police investigate and dismantle trafficking operations (Perrin, 2011).

4.4 Conclusion

This chapter explored the political and legal perspectives on human trafficking in Canada. In order to examine the current climate for trafficking, first I used literature to assess global perspectives, politics, and policies surrounding sex trade in general. Next, I focused on the Canadian context by examining Canadian sex work laws – both historically and current laws. Then, I reviewed the recent ruling of an Ontario court that deemed the illegality of the activities surrounding sex work to be unconstitutional. An important factor in the discussion of this ruling is the opinions of the stakeholders. Therefore, I examined the perspectives of women who have been trafficked and members of law enforcement on the legalization of prostitution. Then, I assessed the exotic dancers visa program that existed in Canada until 2007 and its relation to human trafficking. This examination is essential to the study of the health of sexually trafficked women because politics and law have significant effects both on women's health and the resources that are available to them.

In the second half of this chapter, I examined Canadian law enforcement efforts against human trafficking. In doing so, I looked at the various players involved in the fight against human trafficking in Canada: the police, Citizenship and Immigration Canada, and non-governmental organizations. I also assessed the complex relationships

that exist between these players. Next, I examined the critical role of trafficked women in the fight against human trafficking. Finally, I reviewed the current state of law enforcement in Canada and the country's efforts to combat human trafficking going forward. This examination of the response cycle and players involved in the fight against human trafficking is necessary in understanding the social support networks and health services that are available to aid women in managing their health after coming out of the trafficking situation.

Chapter 5

5 What it Means to be Trafficked – Official Definitions, Participants' Perspectives, and Key Elements

5.1 Introduction

When I first began my research into the trafficking of women for sexual exploitation, I had a specific image in mind of what trafficking entailed. These impressions were based on popular media, such as television shows, movies, and even the news. For example, the 2008 movie *Taken* portrayed sexual trafficking by showing affluent white American girls being kidnapped overseas and chained up in brothels. However, through research of the literature, it became evident that not all of these stereotypical dimensions of trafficking, such as kidnapping, foreign countries, and chains, are required for the crime to occur. When I began speaking to experts and conducting interviews with service providers and women who had been trafficked, the definition of trafficking and sexual exploitation became increasingly unclear.

In addition to an already complex picture of trafficking, I found that there is tremendous variation among different organizations and individuals I spoke with during my research in defining and characterizing the phenomena. Some view trafficking as a specific act where a woman is taken against her will, physically forced to enter prostitution, and held in a brothel unable to escape. Others view all sex work as trafficking because they believe women, if given the choice, would not choose to enter

the sex trade. As will be discussed in this chapter, the reality of what trafficking is lies somewhere between these polemic perspectives.

This chapter aims to explore the various definitions of human trafficking for sexual exploitation, their meanings, and their implications. First is an investigation of the definition of trafficking based on how international and national governing bodies define it, such as the UN and the Canadian Criminal Code. This section includes two participants' reflections (law enforcement and service provider) on these official definitions. Next is an exploration of how other participants define trafficking and what they believe constitutes becoming a trafficked person. This section will examine the similarities and differences among participants groups (trafficked women, law enforcement, and service providers) regarding the definition of trafficking. An additional note about the presentation of the data: findings from those in law enforcement and service provision are included in separate sections relative to their unique population group within the study. The women with lived experience, on the other hand, are not featured in a separate section because their ideas about the various components and factors that inform trafficking criss-cross between and are in some ways similar to the perspectives of those from other participant groups. In the final part of this chapter I feature a working model that, based on the literature and my primary data, provides a discussion of what emerge as the three definitive characteristics of trafficking: lack of consent from the woman, control of the woman by the trafficker, and profit or monetary gain by the trafficker from the exploitation. This is done in an attempt to bring both clarity and consistency to the arguably very confusing ideas and discourse about sexual trafficking that exists within social and academic realms.

5.2 Definitions of Trafficking

The term “human trafficking” is imprecise and highly disputed. The definitions are multiple, constantly changing, and even oppositional depending on who is defining the phenomena. These struggles in establishing a definition tend to be dominated by government officials and other powerful organizations with little input from those who have been trafficked (Lee, 2011). One of the main aims of my research and this thesis is to understand human trafficking from the perspective of those whose lives are affected by it, including women who have been trafficked and those who work with them.

5.2.1 Official Definitions of Trafficking

Historically, human trafficking has been equated to prostitution and conflated with illegal migration (Kempadoo, 2005). However, in 2000, the United Nations created a comprehensive international definition of human trafficking in its Convention Against Transnational Organized Crime. The Convention states:

‘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 . . . for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation . . . (p. 2).

The Convention aimed to end various forms of transnational crime and included a

protocol specifically aimed at the trafficking of humans. This was a change from the 1949 UN Convention for the Suppression of the Traffic in Persons and Exploitation of Prostitution of Others that focused exclusively on prostitution. Thus there has been a shift from the conceptualization of trafficking from prostitution to unregulated migration and forced labour. Although the protocol of the new Convention continues to criminalize the exploitation of others through prostitution, it does not criminalize all prostitution (Kempadoo, 2005).

The protocol of this Convention that deals specifically with human trafficking is the Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children. The Protocol states the purpose of the provisions, defines trafficking and other terms associated with the crime, lists the many responsibilities that nation states have towards victims of trafficking, and garners the pledge of member states to be resolute in the prevention of trafficking. For example, the Protocol affirms, “States Parties shall endeavour to undertake measures such as research, information and mass media campaigns and social and economic initiatives to prevent and combat trafficking in persons” (p. 46).

Canada was among the first nations to sign this Convention in Palermo, Italy in December 2000, but it took us until July 2005 to introduce trafficking in persons into the Criminal Code through Bill C-49 (Perrin, 2011). One limitation that arises from the definition of human trafficking in the Criminal Code is its restrictiveness in defining what constitutes human trafficking. In section 279.01 of the Criminal Code, a crime of Trafficking in Persons has been committed by:

Every person who recruits, transports, transfers, receives, holds, conceals or harbours a person, or exercises control, direction or influence over the movements of a person, for the purpose of exploiting them or facilitating their exploitation is guilty of an indictable offence and liable to imprisonment for life if they kidnap, commit an aggravated assault or aggravated sexual assault against, or cause death to, the victim during the commission of the offence; or to imprisonment for a term of not more than fourteen years in any other case.

Regarding the definition set out in the Canadian Criminal Code, one law enforcement officer expressed that it is not the same as the definition set forth by the UN. He said that this difference limits the convictions that can be made for human trafficking in Canada. Mark stated:

I would invite you to look at the Criminal Code Definition of human trafficking, and then look at the Palermo Protocol definition of human trafficking, and you'll see there's a variance. They're not the same. The Palermo one would be a lot easier to get convictions on than the Canadian Criminal Code definition of human trafficking.

Another participant, Stacey (a service provider for foreign workers), echoes similar concerns about what constitutes trafficking in persons under Canadian Criminal Code laws. However, she articulates that not all organizations in Canada (including governmental organizations) define trafficking the same way as the Criminal Code or the UN Convention. She uses the situation of Temporary

Resident Permits (TRPs) to illustrate the discretion that can exist in defining if a person has been trafficked. She says that when a person seeks a TRP to remain in Canada because he or she has been trafficked (and is now in the country illegally), the definition that the Ministry of Immigration uses to determine whether such a permit should be issued can be broader than the one used in the Criminal Code in prosecuting cases of human trafficking. She said:

So I think only like six people have been prosecuted under that section. It's a very narrow definition. It tends to be more towards – person has to be in danger, the trafficker... it's almost more of a smuggling type definition, not just trafficking. So criminal, definitely law enforcement is very narrow. Immigration, the hard part about immigration is that the TRPs, yes they have some standards, you have to show some sort of danger, especially in returning home, but the TRP itself is a discretionary act or law so it ultimately – it's not clear to anybody the reason. It just says the TRP is an option under the discretion of the Minister or Immigration, which basically means his office and his staff. So the staff will take a look at it but it's not like a lot of other laws where it's very clear, this is the definition of refugee, these are the people who meet this category and then there's a lot of case law that further develops that aspect. The TRP is, because it's discretionary, it's totally up to the Minister to decide who to give it to, or the office at least (Stacey).

Later in the interview, the same participant (Stacey) stated why many individuals and organizations that work with trafficked women maintain a broader definition of

trafficking than the Criminal Code. She stated that these organizations want to define human trafficking to include cases where the woman may have consented to come to Canada or to work in the sex trade but now finds herself in an exploitative situation.

Stacey said:

There's movement now to make trafficking include whether – what does consent look like? Because for the most part most people would say 'well she consented to come here,' you know, 'she consented even to the type of work she was doing, and then other things arose'. So does that make her a victim of trafficking? The new wave, you know, and the group that I work with would say absolutely, wherever you have a lack of choice, whether that lack of choice is because of the extreme poverty the person is in or once they arrive in Canada they're told 'you know, you have debts to repay, you have to do this kind of work.'

5.2.2 Participants' Definitions of Trafficking

During the course of my research, it became increasingly evident that there is a phenomenon among those who work with trafficked women, including law enforcement and social services, to subscribe to a very broad definition of what trafficking entails.

This was both fascinating and confusing. Why was there so much variation? Why did the organizations not just adhere to the definition put forth by the UN? Why was the Criminal Code definition narrower than the international convention that Canada agreed to follow (a code that was written after the UN protocol)?

By analysing the interviews, it became obvious that participants' beliefs about who has been trafficked can be broadly defined or it can be narrow and very specific. Reasons participants gave for adhering to broad definitions of human trafficking can be separated into practical reasons and philosophical reasons, after which I feature the perspectives of different participants who prefer to employ a more narrow definition. Although the participants referenced in this section include those outside of the Southwestern Ontario region, this thesis is not claiming to reflect voices and discourse from the entire country, but only those expressed and found through this study.

5.2.2.1 Broad Definitions – Practical Reasons

A practical reason for using a broad definition of human trafficking was given by a service provider for foreign workers, Stacey. She said that service organizations define what comprises human trafficking in a broad manner (as opposed to the Criminal Code) to ensure everyone who needs help receives it. She stated:

So what defines consent and at what point a person becomes a victim of trafficking is a bit of a grey area, but I think it's best to keep the definition as wide as possible because if you narrow the definition too much then there's going to be a whole group of people who are not going to be able to access resources even though they should because they're being exploited.

Another service provider, Anne, gives another example to demonstrate why some service providers find it necessary to keep a wide definition of trafficking. She said that a broad definition of human trafficking is necessary in order to identify and provide services to

women who need them (even in cases where women may not identify themselves as having been trafficked). She stated:

But . . . all this information doesn't come up, you sit down with, have a nice little quiet interview with the girl and all of a sudden she tells you everything that's been going on, she doesn't. She comes in looking for a bus ticket or a meal or a place to stay or 'I don't have a place to stay tonight so where can I go?' and... Or they'll come in looking for personal hygiene products, or deodorant or something like that, you know. 'Lost all my stuff, can you help me out?' that kind of thing. And it's only through the progressive ongoing relationship that you eventually uncover the whole thing, or at least as much as she's willing to tell you, she may not disclose everything.

5.2.2.2 Broad Definitions – Philosophical Reasons

There are also philosophical perspectives to which some individuals and organizations adhere that cause them to employ a broader definition of human trafficking for sexual exploitation. Data from the interviews with service providers and law enforcement show that some participants believe it is a woman's life circumstances that force her to enter the sex trade. Since these circumstances are out of the direct control of the woman, the participants believe that these women are victims of human trafficking for sexual exploitation because they have not freely chosen to work in the sex trade. Specifically, two factors were discussed repeatedly as they talked about what they believe make

women victims of trafficking, a history of abuse or having been abused as a child and having a drug addiction.

Based on the first factor cited in interviews (a woman's history of abuse), two service providers stated that women who have been abused do not choose to enter the sex trade on their own volition. According to this belief, if women are working in the sex trade it is because their history of abuse has caused them to be easily manipulated and, therefore, they are victims of trafficking. When I asked a service provider to differentiate between women who have been trafficked and those who may enter the trade by choice, she stated:

The choice versus not choice? From the perspective of domestic trafficking versus exploitation, if you're talking about an early childhood trauma history, there is no choice involved, because of the problem of trauma reenactment. Even if as an adult at the age of 20 they say they're making a choice, what we know in terms of trauma research is that there is a brain lock that occurs in people who are traumatized very early in life, and it's almost like a compulsive behaviour that they repeat over and over and over and over again. So choice is not an option if you're almost in an altered state of consciousness. The other thing that a lot of women that I work with meet the clinical criteria for dissociation. Psychological dissociation is actually a neurological malfunction. It means their neurons aren't firing correctly, and so there's nobody home. They can't feel. One of my women actually used to see her clients and she was crying the whole time, sobbing her eyes out, and some customers really liked that and some really didn't (Janice).

The second factor that two members of law enforcement view as driving women to enter the sex trade is addiction to drugs. They believe that this addiction forces some women to work in the sex industry in order to make money to obtain drugs. That is, they believe women who are clean can choose to enter the trade whereas those who have an addiction will do whatever it takes to obtain drugs including entering the sex trade. As Laura said, it is this lack of choice due to addictions that forces women to enter the trade:

You obviously know about the stay on the legislation that came from Toronto, and that was put forward and argued by two sex workers. So it is their choice, you know, but there's a fine line I think. The women I'm working with, this is not a choice for them. Absolutely not. They're doing it for quick, easy money. It's the addiction that are driving it. The escorts, I believe that is their choice and that's something that they want to make their livelihood by doing. Unfortunately the laws don't decipher between escorts, street-level sex workers, massage parlours, the strip joints with the VIP rooms. The law is the law right now and I think hopefully the government's going to look at this opportunity to really revamp the laws, but we'll see.

5.2.2.3 Narrow Definitions

Contrary to these broad notions of who has been trafficked, one service provider and one governmental official adhered to narrow definitions of human trafficking for sexual exploitation. The service provider stated that only someone who is physically confined and chained could be defined as being trafficked. She said:

Yeah, because trafficked – to me trafficked suggests that they're trapped in a locked cage somewhere . . . They have no freedom to go out, all of their meals were being brought in. So the boss kept the passport . . . for example the Venezuelan woman I thought was definitely trafficked, where these guys come, these slick sales types come to the Venezuelan village and scoop up the pretty young girls, right, and bring them back to Canada, they're going to dance in the folklore thing. Meanwhile, they're holding their passports, they're not allowing them any contact with the outside community, have them totally controlled and under their thumb. They could only stay in housing they provide. They're driven in vans straight from the clubs to the place where they're staying, and then straight back to the clubs again, all their meals sent in so they're not allowed any contact whatsoever outside . . . (Joyce).

A government official also used very specific criteria to define what it means to be trafficked for sexual exploitation. He said:

. . . you've got these stereotypical situations and I don't mean to minimize it by saying that but they're locked in a room, you've got a dominant male who's physically abusing them, they're either directly in fear or if it's a foreign national they may be saying that their family at home may be at risk, etcetera, and so they've got to do what they've been told to do over and over again. And that's where the analogy to enslavement is really right on. The person has no choice, they're in a slavery situation (Dennis).

5.3 Elements of Trafficking

Through my primary and secondary research I have concluded that regardless of the variation in definitions, whether officially prescribed or personally held by participants, there are three key distinguishing factors that constitute trafficking: consent, control, and profit. These factors are common among the official definitions and are alluded to by all participants. In this section I examine each of these pieces of the trafficking phenomena in, as mentioned above, an effort to bring clarity and consistency to this polemic and often confusing discourse.

5.3.1 Consent

The word “consent” originates from the Latin “con” (meaning “together”) and “sentire” (meaning “feel”) (Oxford Dictionary). As previously discussed, two members of law enforcement and two service providers argued that women with a history of abuse or women with drug addictions are not freely choosing to work in the sex trade. However, there is a difference between a woman who feels that she has no “choice” because of her circumstances and one who is not “consenting.” A woman who needs to support a drug addiction may perceive no viable options other than working in the sex trade. However, in the case of trafficking, there is direct coercion or force by another individual for the woman to enter the trade. Dennis, a governmental member, spoke about the lack of consent that exists in trafficking as he referred to the definition put forth in the 2000 UN Convention. He said:

A person who's in a situation who cannot get out of that situation because of the way they've been exploited or manipulated. And their reason of having little choice is usually related to fear. It's almost always related to fear. They either fear for themselves, their own well being, or fear for their family. To me it doesn't really matter, sexual or labour, the fear is the same thing.

He also explained that this lack of consent is not the result of external factors, such as poverty or drug addiction, but is imposed on a woman by another individual:

Yeah, according to the definition the exploitation, the direct exploitation in my understanding is necessary. Someone's got to be there directly removing your choice, putting fear into your heart and profiting off of your activities.

A particular aspect of consent that may be missing in cases of trafficking is that of "informed consent." When informed consent exists, the woman has full knowledge of the consequences of what she is choosing (Oxford Dictionary). But if a woman consents to being in the sex trade because of misinformation or a lack of knowledge of what it entails, her consent is not informed consent, and therefore is invalid. Interestingly, one formerly trafficked woman believes that even when women consent to entering the sex trade, their consent is not informed because they are not fully aware of the consequences. She said:

You know, even if you had chosen to go into the industry, you could never foresee the ramifications. Like, I walk around all the time and wonder who knows me, who's seen me naked . . . If I want to get married, most guys

don't want to have anything to do with somebody who's been in the sex industry. There's just so many ramifications. Plus, the psychological issues that carry . . . I'm less tolerant now. I'm not the same person, and not for the better . . . And there's still stuff I'm sure that I'm gonna find that I didn't think about that's still going to come up . . . (Carrie).

The UN, in their definition of human trafficking, assumes that individuals under the age of 18 cannot consent to working in the sex trade. This means that when a woman under the age of 18 consents to entering the sex trade, by definition her consent cannot be informed. Canada, in an amendment in 2010, introduced a similar stance in the Criminal Code where consent from an individual under the age of 18 is invalid. However, assuming that all women under this age are incapable of consenting to working in the sex trade removes these women's sense of agency over their own bodies and the choices that they make. According to Kempadoo (2005), this type of reasoning is patronizing and akin to statements made about white-slavery a century ago. Kempadoo quotes Jeannette Young Norton's statement from 1913 stating, "The big sisters of the world [want the] chance to protect the little and weaker sisters, by surrounding them with the right laws for them to obey for their own good" (Kempadoo, 2005, p. 116). Therefore, assuming young women's consent is not informed may be a protective measure to protect these women from exploitation but it risks removing agency from these women and imposing others' will upon them.

Women may begin working in the sex trade by consenting to it but this consent must be ongoing. If a consenting woman in the sex trade withdraws her

consent and wants to exit but is prevented from doing so, the person preventing her exit is trafficking her. A service provider talked about a woman who consented to enter the sex trade for the money and lifestyle but then realized how dangerous it is and wanted to leave but was prevented from doing so. Anne said:

At first it seemed maybe glamorous and make a lot of money and so on, but that doesn't last very long when you realize just how dangerous it is, the life that you've gotten yourself into . . . So off they go to do this one-off thing and it becomes increasingly dark and increasingly sinister . . . And if she did try to get out they would find her. You know, there would be hu- like threats, there was threats of finding her and killing her, threats of finding her and cutting off the tattoo, so – you know, with a knife, that was one of the threats against her.

5.3.2 Control

The second essential characteristic of human trafficking for sexual exploitation that I have identified, which sets it apart from working in the sex trade, is the control that traffickers exercise over the woman being trafficked. There is a distinction between a person who acts as a woman's agent, manager, or pimp and a person who is trafficking a woman. In the first case, the woman retains the services of this person to find her clients and that person may also help to keep her safe while she is working in the sex trade (Farr, 2005). In the latter case, the traffickers are controlling the woman's actions and she is unable to leave. One

participant, who works for CIC, spoke about the role that a pimp plays for a woman working in the sex trade. He said:

You know 'ok, this person will go out and find me customers, they'll protect me from those customers if that customer's going to mistreat me, you know, they'll make sure that I get paid when I go in there because if I don't they'll beat the person up, but they'll give me – and they'll garnish my wages in return for that', right, that service that the agent is providing to them (Dennis).

The control that traffickers exercise over women can take many forms and may be subtle (as with the case of psychological control tactics) or may be overt and obvious (such as physical and sexual violence against the women). According to Kathryn Farr (2005), there are three general categories of control mechanisms utilized by traffickers: social isolation and deprivation of agency, place and space restrictions, and violence and threat of violence.

There are many ways in which traffickers isolate a woman and try to take away her sense of agency. One way to both isolate her and deprive her of her agency is to take away the woman's legal documents that identify who she is, such as her passport (Perrin, 2010). By doing this, if she is not a Canadian citizen it will become very difficult for her to go to authorities or seek help, especially if she does not speak English. Even in the case of domestic trafficking it makes it more difficult for a woman to leave if she has no form of identification to prove

who she is or a health card to seek the care she requires. One service provider discussed this:

I think being trafficked, there's an element of control, ok? You're controlling, you're holding the person's documents, the person is indentured to you to pay off the airfare, right, when you're trafficked. There's that element of control. And you can only work through one place, you don't have freedom to work other places. You know, there's an element of control in being trafficked that wouldn't be there if you just came to work at a job (Joyce).

As a formerly trafficked participant identified, another way to deprive a woman of her agency is to force her to take drugs. This is an efficient way to decrease a woman's sense of agency because not only is she being forced to take drugs that she does not want to do, but if she becomes addicted she can be further controlled by the trafficker who supplies the drugs. Carrie, a formerly trafficked woman, told me about how her trafficker used drugs to control her:

. . . I used to say I never believed somebody could force another person to do drugs, you do drugs because you – he wouldn't let me sleep. I would be up for three days straight not being allowed to sleep until I did it, and once I did it then he'd relax.

In the case of using place and space in order to control women, traffickers typically confine women to the premises where they work (Farr, 2005). If women need to be moved from one area or another or to leave the premises for any

reason, a trafficker or someone who works for the trafficker accompanies them. According to Timea Nagy, a woman trafficked to Canada from Hungary, her traffickers would drive her from club to club and would wait there until she was done her work to take her back to the motel where she lived. Through this, her traffickers controlled where she was and with whom she had contact at all times. With respect to restricting a woman's movement or keeping her from leaving a specific place, a formerly trafficked woman (Carrie) told me, "A lot of the girls have got tattoos, 'Property Of...' on them. I didn't have that, but I know a lot who've got that." I asked her for clarification: "So they couldn't run away, or?" And her response was:

Well, no they can't. If they go to another city and [gang name] or [gang name] or [gang name] will see that and know she belongs to somebody and it's not one of them, so "What's your problem? Why are you here?", you know what I mean? It's really hard. They've got to cover the tattoos or leave the country, you know (Carrie)?

The final technique of control is violence or threats of violence against the woman or someone in her life. Farr (2005) identifies several purposes that violence against trafficked women serves. First, there is a "breaking-in violence" where a newly recruited woman is subjected to repeated beatings, rapes, and other torture, which is to create or ensure submission among trafficked women who try to resist working in the sex trade. Second, there is "routine violence" where traffickers use routine beatings and sexual assault to maintain a woman's ongoing submission and to remind the woman who is in charge. Third, women are beaten

or otherwise harmed as punishment for something the trafficker deems to be a misdeed or an offense the woman has committed. Finally, traffickers use violence against others as an example to deter trafficked women from being disobedient or attempting to escape. According to Timea Nagy, one day a woman she had worked with disappeared and her traffickers pointed to a garbage bag in the trunk as evidence that they had killed her for not obeying them.

From an interview with Carrie, a formerly trafficked woman, it could be seen that her trafficker utilized all three forms of control (social isolation and deprivation of agency, place and space restrictions, and violence and threats of violence). Carrie said:

. . . at one point when I refused to do it he jumped on my feet and broke all my toes, so I couldn't walk. Then he brought the people home. There was no out . . . He took away all my friends, he took away my family, he took away the phone, he took all doors off the inside of the house, I had no keys, he took away my passport and all my I.D., it's all gone.

Then I asked her: "For nothing, eh? You couldn't leave to go see anyone." She responded:

Nope, and no one could come see me. I was allowed on occasion to go one block to the counter store, but he could see me from the front step of the house to the store. When I got back I would be accused of giving sexuals to the neighbours for free when all I did was walk to the store and back. It was literally one block and you could see me, that's it. For nine weeks, nine

straight weeks I never left the house at one point, never went outside. I wasn't allowed to garden in the daytime, I could garden at night by flashlight with him watching, that's it.

5.3.3 Profit

The final distinguishing element of trafficking is the profit that is made by a person (or people) other than the woman who is performing the sexual acts. Human trafficking is a demand-driven market (Kempadoo, 2005) and prospers because of the low cost and reusability of the commodity (the person being trafficked) (Farr, 2005). The large demand that exists for sexual services coupled with the low cost associated with acquiring and maintaining the supply of women leads to a lucrative business model. Some costs that traffickers may incur include travel, immigration, falsifying documents, and housing, food, and clothing for the women (Kara, 2009). Traffickers often tell a woman that they have incurred these expenses on her behalf, and thus she must work in the sex trade until her debts are paid. This practice is known as debt bondage and traffickers set the fees at a rate that will make it virtually impossible for the women to pay it off and guarantee the traffickers' ongoing profits (Farr, 2005).

According to the International Labour Organization (ILO), the profits made from all trafficked individuals globally amounts to 31.6 billion USD per year. Of this, 15.5 billion USD in profits come from industrial countries (including Canada), followed by Asia (9.7 billion USD), transition countries (3.4

billion USD), the Middle East and North Africa (1.5 billion USD), Latin America (1.3 billion USD), and finally Sub-Saharan Africa (0.1 billion USD) (Belser, 2005). Although an estimate, when profits from human trafficking for sexual exploitation are isolated from other forms of human trafficking, the figure becomes 27.8 billion USD in profits per year (Belser, 2005). At the same time, the ILO estimates that 43% of all trafficked individuals are trafficked for sexual exploitation. This means that 80% of human trafficking profits are made in the sex industry (from 43% of trafficked individuals) demonstrating the lucrative nature of sexual trafficking.

Although monetary profit is the goal and purpose of human trafficking, it is not widely discussed in literature. I think there are several reasons for the absence of discourse on profits in discussions on human trafficking: lack of interest among researchers, lack of knowledge of the profits accrued, and the implicit understanding that profits are a driving force behind human trafficking. First, those who research human trafficking are typically academics in the social or health sciences (whose area of expertise and interest is not economics), politicians (who are more concerned about the legal and political aspects of trafficking), or service providers (whose priority is typically providing aid to women). Second, a discourse on profits almost seems futile without the facts and numbers to support it, but the difficulty in estimating the prevalence of human trafficking coupled with variations in revenues and costs among traffickers (based on location and type of sex work) make economic calculations imprecise. Finally,

profits may be an implicit aspect of trafficking that makes emphasizing it seem unnecessary.

Study participants often made brief references to profits in different parts of their interviews. Participants from three of the groups (government and law enforcement, service providers, and trafficked women) referred to profits. Two participants in the governmental group (one member of law enforcement and one participant from CIC) spoke about profits in giving a definition of trafficking. Mark, a member of law enforcement, said, “Human trafficking? Three words: control, exploitation, and profits. You control somebody to exploit their labour for profits.” Dennis, a member of CIC, used profits to express what human trafficking does not include. He said, “. . . if there’s not a person directly over them profiting from it to me that’s not trafficking . . .”

The two service providers spoke about profits in reference to women having the money they made in the sex trade taken away from them by their traffickers. When talking about one of her clients, Anne said, “So she was being forced to continue dancing, she wasn’t allowed to leave, she had to make them money, she had to dance, she had to perform sexual acts, she had to perform sexual services . . .” Joyce spoke about her clients who were held in debt bondage by their traffickers, “. . . they’ve worked with him long enough that their airfare is paid off by now but he says it isn’t . . .” Anne also used profits in defining what human trafficking entails. She said, “. . . But what is happening is if she’s been incarcerated by these guys and forced to serve clients and they’re getting the money for it, then she’s been trafficked . . .”

Trafficked women were the only set of participants that consistently all mentioned profits. In their reference to profits, the women indicated how it was the driving force behind traffickers' actions in forcing women to work in the sex trade. Carrie spoke about women she worked with at a strip bar and the way their traffickers forced them to work. She said:

. . . guys come in there and smack them around and then leave, and these girls are just desperate. They're like "I need more money, I need more money, I need more money". I've seen it quite a few times. I've seen the guys come in, pick the girl up, put her in his car, drive away for like 20 minutes and bring her back and she's a different person when she gets back . . .

Shauna also mentioned profits in reference to the work of other trafficked women. She said:

That's why you know, they've got the escort services. But still, that's still someone making – that's still trafficking, human trafficking, the escorting services, because they're making money . . .

Melissa used profits to explain why her trafficker forced her to work in the sex trade. In reference to her female trafficker, Melissa said:

I'm like 'wow, why did I do that?' but you know, she had a drug issue too and I guess that's why she wanted me to help with the money too, hence get tips for her...

5.4 Conclusion

Human trafficking is a complex phenomenon, the definition of which varies among and between governments, organizations, and individuals. It is further complicated by external factors, such as the media and popular discourse. The definition of human trafficking was examined from two different perspectives: governing bodies and the study's participants. In exploring official definitions of human trafficking, the UN Convention Against Transnational Organized Crime and the Criminal Code of Canada were considered. Participants' definitions of human trafficking were analysed and found to either be broad and general or narrow and specific in their scope. The broad definitions were further divided into those definitions that arose from participants' practical needs or their philosophical beliefs. It is important to examine discourse surrounding sexual trafficking because it is indicative of the environment in which sexually trafficked women must live and the manner in which others, including health practitioners, will interact with them.

The second half of this chapter was dedicated to clarifying what human trafficking for sexual exploitation means by identifying its key elements: consent, control, and profit. These factors were brought forth by participants and supplemented by literature as necessary elements in determining human trafficking. First, human trafficking for sexual exploitation and sexual slavery differs from working in the sex trade by the former's lack of consent. Second, in human trafficking, an individual or group of individuals practices direct control over the person being trafficked. Third, the trafficker stands to make a profit from the enslavement of the trafficked individual. All

three of these elements are necessary in the definition of human trafficking for sexual exploitation. It is essential to clarify what does or does not comprise human trafficking from an academic perspective, for research purposes and to further examine the topic, as well as a practical perspective, to determine health services and resources for trafficked women.

Chapter 6

6 Health-related Issues and Service Provision

6.1 Introduction

Very little research has been conducted into the lives of the women to see how trafficking affects their health. In this chapter I examine health, health issues, and healthcare provision for trafficked women. This examination begins by defining what health means and briefly explaining the health promotion movement. In the second section of this chapter, I present my study findings on the health issues of women who have been trafficked for sexual exploitation. The data obtained from participants has been organized into physical health issues, mental health issues, and violence and drug use. The final section of this chapter is an analysis of barriers to service provision, as identified by participants, for women trafficked into or within Canada.

6.2 Health and the Health of Trafficked Women

The World Health Organization (WHO) introduced a definition of health in 1946, which came into force in 1948. Canada, along with 60 other nations, agreed to this definition, which has not been amended since 1948. The definition states: “Health is a state of complete physical, mental and social well-being and not merely the absence of disease or

infirmity.” Based on this definition, a person or population’s health is not simply determined by the presence or absence of diseases but must take into account the physical, mental, and social aspects of its health and well-being. Therefore, it is crucial that an examination of sexually trafficked women’s health take all of these aspects into account.

The Public Health Agency of Canada lists several of the social factors of health: income and social status; social support networks; education and literacy; employment/working conditions; social environments; physical environments; personal health practices and coping skills; healthy child development; biology and genetic endowment; health services; gender; and culture (2010). Several of these social determinants of health are of pertinence to the health of trafficked women. As Rekart (2005) contends, women entering the sex trade are often predisposed to poor health determinants. This includes being disadvantaged at many of the social determinants that lead to poor health, such as income and social status, personal health practices and coping skills, and, of course, gender. This personal vulnerability combined with a risky environment, such as exposure to violence and drug use, can lead to many physical and mental health problems that sex workers experience (Rekart, 2005).

The aim of this chapter is to examine the health of women who have been trafficked for sexual exploitation in terms of the illnesses they experience, how they perceive their health issues, and the manner in which they cope with illness and endeavour to manage their health. In organizing the study findings and analysing the data, two clear categories emerged: physical health issues and mental (or psychological) health

issues. Intertwined within these two categories are the effects of violence and drug use, which cannot be discretely or clearly isolated from other health issues or categorized into either category. However, these are significant issues affecting the health of trafficked women and were discussed by the trafficked women, service providers, and members of law enforcement in this study. Violence and drug use also serves as an example of the complexity of the health concerns faced by trafficked women and the compounding effects on women's lives when factors that affect health come together.

6.2.1 Physical Health Issues

Each participant discussed several health consequences that women face as a result of being trafficked for sexual exploitation that can be categorized as physical health issues. First, women can encounter infections such as hepatitis, sexually transmitted infections (STI), and bladder infections. Second, trafficked women may lose weight because their traffickers withhold food from them. Third, as one service provider stated, women's hygiene may suffer because of the lack of time and resources available for self-care. Finally, participants discussed how the combination of health problems and the inability of trafficked women to seek the aid they require, could lead to further health issues.

One health concern cited by Mark, a member of law enforcement, was infections. Mark spoke about the high risk of STIs that women trafficked for sexual exploitation experience as a result of the work they do. He also mentioned that these infections could become worse from the lack of medical care. Mark said:

Of course, if you look at the type of work that they do, they're susceptible to multiple diseases, especially if there's unprotected sex. There's all kinds of venereal diseases that are potentially there, STD's, those type of things, depending on what type of sex is involved . . . not a lot of them get the aftercare that they require. It kind of permeates in their body and their body gets worse and worse all the time.

Carrie, a formerly trafficked woman, also cited infections as a health concern for trafficked women. Although Carrie spoke about infections that could be categorized as STIs, she did not use that term but instead named the specific infections. When speaking about the health problems that being trafficked cause her, Carrie said:

Well I've had bladder infections from doing this, all kinds of infections, and you don't get time off for that. I had pelvic inflammatory disease, bladder infections, I had lots of lung infections just through my health being run down, and the migraines. And now they're suggesting the colitis irritable bowel is a byproduct or a product from this environment. Food was withheld, so my teeth are all rotted, they're falling out.

The second physical health issue that trafficked women face is weight loss. At a talk for her book, *Memoirs of a Sex Slave Survivor* (2010), Timea Nagy explained that food was one of the first things her traffickers used to control her. During her first night of exotic dancing and not having eaten in over a day, she used \$5 from her earnings to purchase a sandwich at the club. When her traffickers realized that she used her earnings to buy food, they were furious. She was punished and told that only they could give her

food. By doing this, the traffickers made her dependent on them and gave her just enough food to be able to perform her job. Timea mentions that this lack of food combined with the physically demanding work that she had to do as a sex worker, led her to lose significant weight in the first few days of being trafficked. Another formerly trafficked woman, Shauna, spoke about weight loss. Shauna's account of her weight loss demonstrates the psychological effect on her self-image:

I was 100 pounds soaking wet. I was 100 pounds soaking wet. I used to wear two bras to make it look like I had tits. Yeah, I was really bad. I had really bad teeth, I got dentures now. Yeah, it was really bad. But I thought I was the shit, you know, like I thought I was all that. But yeah, I was wrong. I was so wrong.

Joyce, a service provider, also iterated the control that traffickers have on the food that women are able to consume. She said:

Ok, so I've found that their health is not very good because of the lifestyle issue, the food they were getting, the owners of the club supply the food. The women can't just go out. But they come in under these entertainment licenses and the bosses holding the passports so the women can't just go out and make their own meals, they're not living at home, they're living in a place the bosses set them up with, you know.

A service provider raised the third issue, personal care. Anne mentioned that women who have been trafficked could have challenges in maintaining high levels of personal hygiene. Traffickers control every aspect of women's lives; therefore, the

women may not have the time or resources to care for themselves and their bodies as they otherwise would. It can also score low on a priority list that includes avoiding punishment and trying to stay alive. Anne stated:

Their hair could fall out, they have personal hygiene issues, at that point they don't really care about their personal hygiene . . . maybe they don't have clothing, maybe they have to throw out their clothing because they've had – they don't have any place to wash it. They'll be sick all the time, they won't be able to keep good food down, they'll be throwing up from stomach disorders. So there's all kinds of stuff that goes along with that. And... so the self-esteem just goes in the tank by the time they have to deal with all of that stuff, they just can't deal with it all at once.

Finally, trafficked women face multiple and varying physical health problems that are not only individually threatening to the women's health but in combination can create even further complications. Anne, a service provider, spoke about this:

So they've got all kinds of diseases that they get, from sexually transmitted diseases and blood disorders and HIV and hepatitis and skin disorders and liver, it impacts their liver and their kidneys and their organs, it impacts their skin and their teeth, their teeth become rotten and they fall, and if they've been using drugs for a long period of time, if they're in their forties, a lot of women have black or missing teeth or no teeth at all by the time they're in their forties.

Another factor that contributes to the poor physical health status of women who have been trafficked is their inability to seek immediate medical help, which causes complications stemming from the original health problem. A member of law enforcement, Mark, talked about one woman who was unable to receive aid for her gun shot wounds. When referring to sexually trafficked women, he said, “Well they just self-medicate, or the people around them do what they can to patch them up I guess, poor choice of word, but they do what they can to fix themselves.”

6.2.2 Mental Health Issues

The second category of health issues for sexually trafficked women is mental health. This section describes anxiety and anxiety-related disorders as defined in literature. Then there is a discussion of anxiety from the perspective of trafficked women by presenting the women’s descriptions of their symptoms and the effect that anxiety has had on their relationships. Next, I will discuss some other mental health issues that were briefly discussed by participants (women and service providers), such as post-traumatic stress disorder (PTSD), which can be categorized as an anxiety disorder (Kahn and Fawcett, 2001). Finally, other concerns pertaining to the mental health of trafficked women will be explored, which were explained by a service provider who is a psychologist working specifically with trafficked women.

After analysing the data and researching mental illness, it became evident that all of the women either said they experienced anxiety or described symptoms consistent with anxiety, including PTSD. Anxiety can be defined as an uneasiness, apprehension, or

tension that stems from anticipating danger (Kahn and Fawcett, 2001). Anxiety is different from fear in that anxiety is anticipation of a danger from a source that may be unknown. Fear, on the other hand, is a response to a known and mainly external danger (Kahn and Fawcett, 2001). The 4th Edition of the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-IV) (1994), divides anxiety into six different categories: (1) generalized anxiety disorder, (2) phobias, (3) agoraphobia, (4) panic attacks and panic disorder, (5) obsessive-compulsive disorder, and (6) post-traumatic stress disorder. During the interviews, the women self identified themselves as having anxiety (i.e. generalized anxiety disorder), panic attacks, and PTSD.

Anxiety can have many physical manifestations. Shauna, a formerly trafficked woman, spoke about how her anxiety may be the cause of her seizures. She said, “I thought that they were only caused by, because of my drug use. But I’ve had a couple since I’ve been clean, so we’re thinking maybe stress seizures.” Another formerly trafficked woman, Melissa, spoke about her anxiety and the medications that she must take in order to sleep. She said, “Yeah, that’s why I take 300 mg of it at night, because I’m traumatized from it, from all what I’ve seen and this experience . . .”

When describing anxiety, trafficked women often spoke about how anxiety has affected their relationships with others and their outlook on life. For example, Melissa spoke about getting angry with others. She said, “Actually, I just lost my place on Wednesday due to my – I snapped and had an anxiety attack. And I lost my place and I attacked somebody.” Melissa also described how her anxiety leads her to mistrust others, which has led her to avoid entering into romantic relationships:

Anxiety. I got anxiety disorders now, I got panic disorders, I get scared around people now, like you know? Like just because I don't know what kind of situation I'm going to get into. That's why I'm single now, I got no one, with no girls right now. I'm like "uh oh."

Carrie, a trafficked woman, spoke about being diagnosed with PTSD and depression. She also spoke about her hesitance and mistrust of those around her, including her neighbours. She gave a description of many of the symptoms from which she now suffers:

I've been diagnosed with post-traumatic stress disorder and depression . . . I have flashbacks, I have terrible nightmares, I have to take meds to sleep, and I got the hypervigilance. I'm always looking over my shoulder, if I'm the only woman in the room I start freaking out, freaking freaking right out. I lock all my doors . . . every day I have to actually disassociate. A lot of the time when you see me I'm disassociating just to survive walking, because otherwise I won't be able to go outside. I've got colitis but they're wondering if it isn't caused by this. I've also got – I get migraines and they're thinking it's from that too . . . I was walking around in a bubble afterwards. I'd be on the bus and I'd be looking at people thinking "Gee, I bet they have a normal life. I bet they're allowed to go to the movies". Or sometimes I'd sit in the bar and I'd think if I just look at someone, if they look at me they'll know and they'll be able to take me away, but they don't care. They don't give a shit.

One of the participants, Janice, is a psychologist who works specifically with women who have been trafficked for sex. During an interview Janice identified several of the mental health issues from which the women suffer. She said, “So all of them, PTSD, major depression, generalized anxiety disorder, probably all of them also meet the clinical criteria for antisocial personality disorder.”

Antisocial personality disorder is characterized by behaviour that is intolerant to conventional behaviours of society, an inability to keep a job, disregard for others, and frequent physical fights (Kahn and Fawcett, 2001). However, according to DSM-IV, diagnosis of antisocial personality disorder may be misapplied to individuals in settings where what seems like antisocial behaviour is actually part of a protective survival strategy (1994). As mentioned by participants who have been trafficked, they may become aggressive towards another person. This behaviour may be caused by anxiety, but it may also be a defense mechanism. Therefore, even professionals must heed caution when characterizing trafficked women into such categories.

As mentioned above, PTSD is a type of anxiety disorder. According to Kahn and Fawcett (2001), PTSD is “produced by an unusual or extremely stressful event, such as assault, or an act of violence, rape, natural disaster or physical injury” (p. 308). Those suffering from PTSD experience the trauma again in painful recollections or recurrent dreams. Some sufferers have diminished emotional response, feelings of estrangement, insomnia, and difficulty concentrating or remembering. Carrie described having trouble concentrating and remaining still while Melissa spoke about her difficulties with sleeping at night. According to DSM-IV (1994), “the severity, duration, and proximity of an individual’s exposure to the traumatic event are the most important factors affecting the

likelihood of developing the disorder” (p. 426). In the case of trafficked women who have been exploited for sex, all three of these factors are present; the trauma (being raped and held against their will) is severe, it can last for years, and the proximity is as close as it can be (it is against the woman herself). Janice described this type of PTSD, complex PTSD. She said:

All of them met the clinical criteria for post-traumatic stress disorder. In the traumatology field there is a difference between simple PTSD and complex PTSD. Simple PTSD means that basically it's a one-time hit and up until now you've been doing quite well and then something really bad happens ...

In her interview, Janice discussed two other concerns pertaining to or having an effect on the mental health of women who have been trafficked for sexual exploitation. The first is the effect of a woman's age (at the time of being trafficked) on her mental health. The second is what a trafficked woman may do to manage her mental health during the time she is being trafficked and exploited. Janice said that women who are younger at the time of being trafficked have a more difficult time recovering mentally from the trauma:

If they're forced in at a younger age their likelihood of full recovery is massively reduced because they've got so many things going against them. The key is resiliency and resources. We know that some people are just born more resilient . . . so some people do come back. The earlier the trauma begins the less likely that is to happen, although it can (Janice).

Janice also said, in response to how trafficked women manage their mental health while

they are still in the trafficking situation, that the women are unable to do so. However, she mentioned that women could experience psychological dissociation while they are being held in the trafficking circumstance in order to cope with their situation. She said:

They don't. No, they don't. How can they? They're just trying to stay alive. Survival is the prime imperative. Most people, if they're managing their psychological health at all, they're using a pathological strategy of psychological dissociation. It comes in two flavours . . . the brain moves into an altered state of consciousness where there's a perceptual distortion where the environment kind of feels dream-like. Some people . . . disconnection from their own physical bodies. So they will actually look in the mirror and they don't recognize their own face. That's actually a neurological breakdown, but it does keep them in a numb state, so that they are not able to really process a lot of the trauma that their bodies are experiencing . . . A huge portion of my clients actually dissociate constantly. The problem is that, although transient dissociation happens to everybody, in a trauma survivor the brain can lock in and they can stay there for 50 years and never come back.

6.2.3 Violence and Drug Use

Intertwined within physical and mental health issues are the effects of violence and drug use on the health of women who have been trafficked for sexual exploitation. These are two significant factors affecting the health of sexually trafficked women, but it is not a

linear relationship where being trafficked leads to violence, which leads to illness. Nor is it a relationship in which drug use alone makes women susceptible to traffickers, which then affects their health. It is far more complex than that. Violence and drug use may exist in women's lives prior to being trafficked, perhaps contribute to a woman's vulnerability of being trafficked, and also arise as a result of being trafficked.

When discussing violence, Shauna spoke about the brain injuries she endured as a result of her trafficker's violence and abuse. Although she was found unconscious and does not know exactly what happened, she believes her trafficker (with whom her relationship had begun as a romantic one) attacked her. Shauna said, "I came to and I had a breathing tube. I was at [hospital name] and I had a breathing tube up my mouth and everything. . . I was out for I would say three days . . . some people said that, you know, I was attacked . . ."

Another participant, Anne, spoke about the critical role of violence in the lives of trafficked women when she spoke about one young woman who sought shelter at her organization. The woman had been able to escape her traffickers and seek Anne's help because she had jumped or been pushed out of a moving vehicle while being moved from one hotel to another. Although the woman did not tell Anne if she had jumped to escape or if her traffickers had pushed her out, Anne described the situation:

Initially she presented as being battered and bruised and just needing a place to stay, so the story didn't come out right away . . . So she was suffering from addiction and malnutrition and . . . terrible physical condition . . . she had also contracted some sexually transmitted diseases through this

experience. So she's dealing with a lot of significant health issues as a result of that . . .

Traffickers frequently use drugs to control women they have trafficked. If a woman is addicted or becomes addicted to drugs, the trafficker is able to control the woman by being her only source of obtaining drugs. According to Mark, a member of law enforcement, traffickers often use cocaine derivatives or crystal meth with trafficked women because these drugs are highly addictive. Carrie, a formerly trafficked woman, stated that her trafficker forced her to use crack cocaine. She also mentioned that some women are forced to take Percocet, but her trafficker stopped forcing her to use the drug because of her reaction to it (vomiting).

The use and abuse of drugs are not recent phenomena in society; in fact, they probably predate written language (Gwinnell & Adamec, 2008). It is important to note that using drugs to control others has a long history. This history is rife with accounts of drugs being used to control minorities, women, and both groups' labour. According to Gwinnell and Adamec (2008), in the late 19th and 20th centuries, employees who engaged in physical labour (often minorities) were encouraged and provided with cocaine by their employers.

The women with lived experience, service providers, and law enforcement participants all mentioned drug use throughout their interviews. Two members of law enforcement spoke about the cycle of being trafficked because of the vulnerabilities caused from addictions, which causes the addiction to become even worse as a result of being trafficked. The first law enforcement member, Laura, said:

For them to be able, a lot of the women, for them to be able to continue to work the addiction gets that much stronger. To be able to survive the work, to be able to get themselves through it. It's unbelievable when you talk to some of these women and they tell you some of the stories.

The second law enforcement member, Mark, echoed the same sentiment as Laura. However, he also mentioned that some traffickers do not want women to be addicted to drugs because it is not what customers want. Mark used the term “pimp” to refer to the trafficker who is directly in charge of a woman. He said:

Some of the girls would be addicted before they get brought on-board by their pimps, and of course then they get controlled by their pimps through the addiction. And there's also information that suggests that pimps will get girls addicted so they have a hold or a mechanism to keep them in place, and they provide the drugs and alcohol or whatever it is, and the girl will provide the type of labour that the individual actually wants. There's also some pimps that are highly opposed to the girls being addicted because they want the girls to be clean and sober so that they can provide the best type of labour that the pimps want and that the johns are actually looking for. So there's two sides to the story.

In addition to leading to addictions, drug use among trafficked women can lead directly to physical problems. A member of law enforcement spoke about how infections from drug use affected one woman who had been trafficked:

And then you've got dirty needles and infections from the dirty needles, not just diseases but also blood infections that they can get just from putting a dirty needle into their body. One girl had an infection in her arm and they wound up – it was so bad that she nearly lost her arm – they had to cut away so much flesh that you could see the tendons and muscles on her arm . . . Or it could have been the effect of the drug itself and what it did to her arm, maybe the drug was bad, the drug itself may have been bad and not just the needle (Mark).

Another participant, a service provider, spoke about the physical health problems she had seen in one woman as a result of drug use.

. . . a myriad of health issues just from taking the drugs. Like, one girl wound up having to go to the hospital because she had – her skin had broken out in enormous scabbed-over sores, almost like ulcers. . . . it was some kind of a skin bacteria infection that they get from taking crystal meth (Anne).

In addition to discussing the role of drugs as a mechanism of control used by traffickers and exploring some of the physical health issues that arise from drug use, it is important to examine the effect that drugs have on a woman's mental health. Carrie's account of her struggle with drugs, including her beliefs about drug usage, how she was forced to use drugs, and what it was like to become addicted, demonstrate some of the mental health issues associated with drug use. As she mentioned, some people believe that it is impossible to have one person force another to start using drugs and

subsequently become addicted. However, her riveting account refutes that notion and shows how traffickers use drugs as a tool of control. She said:

Yes he forced me to . . . I never believed somebody could force another person to do drugs, you do drugs because you – he wouldn't let me sleep. I would be up for three days straight not being allowed to sleep until I did it, and once I did it then he'd relax . . . Yes you can be forced to do anything . . . every day I still struggle with not wanting to do it, still. I've been off it for two years but it's still, every day is a struggle. And where I live in housing I can smell the drugs, I can see it, you know what I mean, so I've got to trap myself in my apartment, the blinds are always shut, the doors are locked, because I walk out the door and I'm back in the environment, to a degree. So that's going to be with me for the rest of my life.

6.3 Providing Care

Despite the array of health problems that women who have been trafficked for sexual exploitation encounter, the care that they receive through health services is very limited. This is the result of many factors, including barriers in accessing healthcare and the lack of culturally appropriate healthcare. Both of these factors will be discussed in the context of the Canadian health system. This section begins with an examination of the current health system and provision of health services in Canada. Then there will be a discussion of various barriers to obtaining health services including women's inability to seek the

aid they need, health practitioners' lack of knowledge in identifying who has been trafficked, and practitioners' attitudes towards trafficked women.

6.3.1 Canadian Healthcare System

According to Health Canada, the Canadian Health Act establishes five criteria that the provinces must meet. First, healthcare must be publically administrated, which means that the plan must operate on a nonprofit basis by a public authority that is accountable to the provincial government. Second, the system must be comprehensive meaning that all insured services provided by medical practitioners and hospitals must be covered by the plan. Third, the services must be universal; that is, 100% of the insured population is entitled to the insured services provided by the province. Fourth is the principle of portability that requires health coverage for insured persons when they move within Canada or travel within Canada or abroad. And, finally, the principle of accessibility requires that health services must be provided to those insured without barriers (Health Canada, 2000). This system is predominately publicly financed - by both federal and provincial governments - and privately delivered.

The Health Act also sets as its primary objective, “to protect, promote and restore the physical and mental well-being of residents of Canada and to facilitate reasonable access to services without financial or other barriers” (Health Canada, 2000). Currently, however, based on participants' responses, the Canadian healthcare system is failing to protect or to promote the health of women who have been trafficked mainly because of the lack of accessibility to services. The women either go unidentified by service

providers or, if they are identified, health practitioners do not know how to provide tailored services for this population.

Healthcare providers are generally untrained in terms of how to provide care to women who have been trafficked. Despite their training in screening for partner abuse and violence, healthcare providers have to confront multiple layers of violence among women trafficked for sex, which they may not be expecting or know how to handle. There are many differences between trafficked women and victims of domestic violence, such as the presence of multiple perpetrators acting against a trafficked woman, which means helping her would not only endanger her but also her family. Language and cultural barriers create yet another challenge that healthcare providers must overcome in order to provide care to women who have been trafficked (Miller et al., 2007). The lack of research into the health of sexually trafficked women makes it impossible to create effective models of healthcare delivery. Filling this gap by understanding the conditions under which sex trafficking occurs and women's experience of health is one of the objectives of this research. That is, in order to devise effective models of healthcare delivery for women who have been trafficked we must first understand who they are and how to identify them, what health issues they encounter, and what services they require.

6.3.2 Service Provision Barriers

There are several factors that prevent women from receiving the care that they require from health services. The first is a woman's inability to seek healthcare services while she is being held in the trafficking situation. Second, many healthcare practitioners do not

have the knowledge to identify trafficked women or the experience in providing care to them. Finally, even if a woman is able to obtain the services of a health practitioner who knows that she has been trafficked, the practitioner's attitude can be a barrier to her care.

First, there is a barrier to accessing care resulting from a trafficked woman's inability to seek the care that she requires while she is being trafficked. Mark, a member of law enforcement, explains that traffickers take a woman's documents away so that she is unable to seek the care she needs. He discussed one trafficked woman:

. . . she indicated that during the time that she was a sex worker she had been shot three times and physically abused a number of times, and generally wasn't allowed to seek any kind of medical assistance because the people that were controlling her wouldn't let her to do that.

Second, it is difficult, if not impossible, to help a trafficked woman within the healthcare setting if she is not appropriately identified. According to one service provider, Anne, it takes much probing on the part of the service providers to recognize that a woman has been trafficked because most women will not identify themselves as having been trafficked. Therefore, it is imperative that health practitioners have the knowledge to recognize when probing is required and when a woman has been trafficked. Researching health practitioners' knowledge of trafficking for sex was not an objective of this study; therefore, I did not do formal research on health practitioners' understanding of human trafficking. However, I asked one women's health specialist in a Southwestern Ontario medical facility what his experience was in treating women who had been trafficked for sexual exploitation. He said that he did not believe there were any such cases in the

region. This finding is consistent with a study of University of Toronto medical students conducted by Wong et al. (2011) where 88.9% of participants were unfamiliar with the signs and symptoms of trafficking in people. Nonetheless, 76.0% of this same research population stated that it was important for them to learn how to identify and provide care to those who have been trafficked.

Finally, participants (especially formerly trafficked women) stated that the negative attitude of some healthcare practitioners towards women who have been trafficked for sexual exploitation is a barrier to care. One previously trafficked woman, Shauna, spoke about not being able to get a family doctor when she moved from one city in Southwestern Ontario to another. Therefore, she started to see a physician at a health centre whose mandate is to help vulnerable individuals, but even at this centre the doctor judged her. We had the following conversation:

S: Yeah, Dr. [Physician]. He's my family doctor for right now. But I'm trying to get a new doctor.

H: Do you find that he's receptive to your needs?

S: No.

H: Is he judgmental?

S: I find so, yeah.

H: He knows your history?

S: Dr. [Physician]? Yeah, he knows my history. He doesn't even look at me when he talks to me. I feel there's nothing there. There's just like, he just whatever. And it's just useless. I want a doctor like I used to have . . . in [Southwestern Ontario City], she was awesome. There's eye contact, there's... you know what I mean? Dr. [Physician], he's just behind his computer, and whatever, he just talks, like there's nothing there, I just don't like going to see him.

Another previously trafficked woman stated that she needed a social worker to advocate for her in order to receive the care that she needed. She said:

. . . I had to have somebody with some sort of authority behind them to advocate for me, which is absurd. I would have thought if they'd known my story they would be more inclined to help me because no I'm not playing a game. I wasn't asking for any favours, just help me be normal again, help me get my life back (Carrie).

Although a service provider, Anne, concurred with the notion that some health practitioners can judge women who have been trafficked, she also indicated that there are others who are receptive and willing to help. She said:

. . . you would get some who are able to grasp the enormity of what the girl is dealing with, but there will be some who just don't and just look down on people who are in the sex trade and look down on people who are addicted, and don't realize that they may have some guy waiting outside, impatiently waiting for them to come back and start working again . . .

Anne also stated that the women might be in circumstances that cause them not to be completely cooperative with healthcare staff. This can create a cycle; if members of the medical staff do not understand the special needs of trafficked women they may treat the women in inappropriate ways, which further agitates the women and may cause the women to display disruptive behaviour. Anne said:

. . . there's always one or maybe two [healthcare staff] who . . . the first thing they see, instead of seeing a woman who's in pain and taking her at her word, they immediately see a drug addict who's trying to score some dope . . . So the girls can't go down there or they just habitually lie about why they're there because they get so much flack . . . So they could get loud and be irritated by other patients waiting or be irritated by something that a nurse says flippantly to them and then use bad language back to the nurse, and of course then of course they don't get treated. So it's difficult, the attitude towards women who are in addiction, the attitude towards women who are in the sex trade is generally very disdainful and not compassionate. So why would they go there, why would they go there for help?

6.4 Conclusion

This chapter began with a definition of health and the various facets of health. Study findings on the health issues of women who have been trafficked for sexual exploitation were presented in the second part of this chapter. The data obtained from participants was

organized into physical health issues, mental health issues, and violence and drug use. The final section of this chapter discussed healthcare in Canada and analysed barriers to service provision for trafficked women, specifically in Southwestern Ontario. This chapter also demonstrated that health issues experienced by trafficked women are not straightforward medical conditions with straightforward medical solutions. There must be an understanding of sexually trafficked women's health issues and their needs in order to identify who has been trafficked and to provide appropriate care. Filling this gap in knowledge is the main purpose of this study.

Chapter 7

7 Conclusion

7.1 Introduction

I believe the trafficking of persons, particularly women and children, for forced and exploitative labour, including for sexual exploitation, is one of the most egregious violations of human rights that the United Nations now confronts. It is widespread and growing. It is rooted in social and economic conditions in the countries from which the victims come, facilitated by practices that discriminate against women and driven by cruel indifference to human suffering on the part of those who exploit the services that the victims are forced to provide. The fate of these most vulnerable people in our world is an affront to human dignity and a challenge to every State, every people and every community (United Nations Convention Against Transnational Organized Crime and the Protocols Thereto, 2004, p. iv).

Kofi Annan stated this, in 2004, while serving as the Secretary-General of the United Nations. Unfortunately, nearly a decade later, women are still being trafficked for sexual exploitation in all parts of the world, including into and within Canada. Therefore, it is crucial to understand the experiences of trafficked women including the effects that being trafficked for sexual exploitation has on their health.

This chapter is divided into two parts: a review of the research that was undertaken and the implications of the study. In the first part, there will be a review of the study, including its purpose, how it was conducted, and the main findings. This section will also assess the limitations of the study. In the second part of the chapter, there will be a discussion on how the findings from this research can be used to inform policy and the delivery of health services for trafficked women in Canada. Finally, there are suggestions for future areas of research into the health of sexually trafficked women.

7.2 This Study

For reasons that were considered in this thesis, the prevalence of human trafficking is difficult to calculate. As discussed extensively in Chapter 5, governmental bodies and other organizations have varying definitions of human trafficking for sexual exploitation. In some cases, these definitions have begun to group women working in the sex trade with the population of domestically trafficked women. These numbers are further complicated when some organizations combine women who are willingly smuggled to work in the sex trade with women who have been trafficked for sexual exploitation. Additionally, the underground nature of human trafficking along with women's fear of admitting that they have been trafficked for sexual exploitation make calculating a prevalence extremely difficult and inaccurate. Despite the debatable nature of the definition of human trafficking for sexual exploitation and the concealed nature of its occurrence, its existence is certain. The purpose of this thesis was not to quantify human trafficking but to understand the experiences of women, specifically those in

Southwestern Ontario, who have been sexually trafficked and the professionals who work with them. A crucial aspect of women's experiences of being trafficked for sexual exploitation is the effect that it has had on their physical and mental health. In order to provide appropriate services and healthcare, it is essential to have an understanding of the health issues that trafficked women experience. There must also be a comprehension of the wider political and legal context in which sexual trafficking occurs along with how individuals in the field are defining sexual trafficking in their everyday work.

7.2.1 Purpose

The purpose of this study was to examine the health experiences of women who have been sexually trafficked in terms of the health issues they encounter and the healthcare resources they require. Additionally, this study aimed to describe the wider political and legal context in which sexual trafficking occurs in Canada and to examine the discourse around sexual trafficking, specifically in Southwestern Ontario. Some research already exists on the health of women who work in the sex trade but very little information is available on the health of women who are trafficked for sexual exploitation. The research that does exist on the health of sexually trafficked women (as discussed in Chapter 2) has demonstrated that they suffer from malnutrition, dehydration, poor hygiene, and sexual abuse and rape (Zimmerman et al., 2008). The literature also asserts that sexually trafficked women endure abuses that lead to compromised mental health, such as depression, dementia, and post traumatic stress disorder (Zimmerman et al., 2008). However, current understanding of the health of sexually trafficked women as an

independent population (apart from women who work in the sex trade) is scarce and limited in its depth.

My study's primary aim was to address the lack of research into the health of women who have been sexually trafficked by examining this population separate from women who work in different segments of the sex trade because their experiences are somewhat unique when compared to other sex workers. Second, my research aimed to contextualize these health issues by examining different facets of sexual trafficking that affect health, such as the legal framework in which human trafficking occurs. Third, my research endeavoured to increase the experiential understanding of human trafficking for sexual exploitation by investigating the phenomena from the perspectives of those who have been trafficked or those who work with sexually trafficked women. Finally, my research aimed to provide a uniquely Canadian perspective of sexual trafficking, including how we are responding to the problem of human trafficking and providing services to women who have been sexually trafficked in this country.

7.2.2 Methodology

My research began with a thorough analysis of current literature pertaining to the subject, such as the dynamics of the sex trade, current trafficking policies, and past cases of sexual trafficking. In addition to increasing my knowledge of the subject, the literature review allowed me to identify certain gaps that exist in current knowledge. From this research and reflection on where I stand with respect to fundamental issues like epistemology, gender, and power, I determined that an appropriate paradigm for the study

was feminist critical theory. Critical theory examines issues in their historic context, the relations of power, and economic inequities, which is necessary when investigating sexual trafficking (Freeman & Vasconcelos, 2010). Feminist theory posits that gender is socially constructed and that gender inequality intersects with other types of inequality (Renzetti, 2008). The sexual trafficking of women is situated in a complicated history of politics, power relations, and economic disparity that has taken advantage of women. Therefore, I determined that feminist critical theory was the paradigm most suited to examining human trafficking and the lives of trafficked women.

I created semi-structured interview questions aimed at understanding the health experiences of sexually trafficked women because, as asserted by Agger (2006), in critical theory, people's words of their experiences are both valid and a source of theoretical insight. I devised two sets of interview questions: one for trafficked women and one for professionals who work in this field. I interviewed 12 participants: three women who have been trafficked, three participants from the legal sector (law enforcement and immigration), three service providers to trafficked women, and three individuals working to end human trafficking in Canada for other types of labour. Of these participants, 10 were women and two were men who ranged from 25 to 65 years of age.

I analysed the data by transcribing the interviews verbatim and using coding methods that are consistent with a feminist critical theory paradigm and of semi-structured interview questions. I utilized descriptive coding (a type of elemental coding), and summarized in a word or short phrase the basic topic of the passage. By using this method (Saldana, 2009), I was able to develop a "basic vocabulary" of the data in the first

cycle of coding. Then I followed this analysis with a second cycle of coding to eliminate codes that were redundant and codes that were too broad or too detailed. This methodology proved to be successful for my research because it fits my paradigm of the world, the subject matter, and my goal of producing research that can help in creating social change.

7.2.3 Limitations

Although the research was carefully designed and conducted, there were still some unavoidable limitations. First, the sample size was limited to 12 participants, of whom only three were sexually trafficked women. Although acceptable for a qualitative study based on feminist critical theory methodology, if there were more participants, greater richness and scope of data could have been gathered about the population. Also, if there were more individuals in each of the participants groups, greater comparisons would have been possible between participants' groups. Second, participants were mainly recruited from Southwestern Ontario making the data perhaps most reflective of women's experiences in this part of Canada. If the geographic scope of recruitment were increased, data gathered could be more reflective of the country and allow for comparisons between different regions of Canada.

7.3 Discussion

Despite growing concern from the academic community and increasing coverage of the issue of trafficking in the media, the women, the traffickers, and the issue of sex trafficking itself remain hidden and very poorly understood (Gajic-Veljanoski & Stewart, 2007). The lack of data obscures our understanding of the full extent of the problem, impedes policy development to end trafficking, and hinders the healthcare and social supports that the women want and need. The research on the health of sexually trafficked women is scarce, as was discussed in Chapter 2, which was the impetus for this research and what makes its findings significant. From the time I began this study, the only significant research to be added to the available literature on the health of sexually trafficked women is on sex workers in Thailand whose entry into the sex trade began by being trafficked (Decker et al., 2011).

When comparing my study on the health of sexually trafficked women, the findings are consistent with available research on the health issues of this population. Additionally, as I analysed the data, it became evident that these findings are also similar to those experienced by women working in the sex trade (not just sexually trafficked women) as evidenced in other research, such as a study by Burnette et al. (2008). However, my study remains distinctive and necessary because it contextualizes the health of sexually trafficked women by examining broader political issues and discourse on sexual trafficking, by providing a uniquely Canadian perspective, and by gathering data directly from trafficked women as well as service providers and law enforcement. This research can aid in advancing the understanding of the physical and mental health of

sexually trafficked women and has implications in five specific areas: local discourse, academia, sex work laws, policy development, and healthcare delivery, as will be discussed below.

7.3.1 Research Implications

The first implication of this research is for local discourse on human trafficking for sexual exploitation. As was demonstrated in Chapter 5, there are varying definitions of what it means to be trafficked and who is considered to have been trafficked. This can create problems and obstacles in communication on the local level between different individuals and organizations. As was discussed in Chapter 4, there are various players who are involved in the enforcement of human trafficking laws and in providing services for women who have been trafficked. My research has demonstrated that differences in beliefs and language exist and has also highlighted some of the commonalities in discourse among the players. Therefore, service providers and law enforcement who are fighting against human trafficking can use the findings on discourse to understand what their counterparts consider to be sexual trafficking. In order to work together in the fight against human trafficking, the players must first understand what others in the field believe about sexual trafficking and how that can effect their communication on the issues.

This study also has significant implications in academia and in the creation of knowledge about human trafficking for sexual exploitation in Canada. To date there has been very little formal research conducted into sexual trafficking, especially into the

health concerns related to women who have been trafficked for sexual exploitation. The findings from this research address gaps in knowledge and create a starting point for other research that can further examine more specific topics within the field of sexual trafficking in Canada.

The third implication of this research relates to policy development and the law. At a time when sex work and prostitution laws are in flux in the country, courts and politicians should consider the topic of sexual trafficking as it relates to and may be affected by changing sex work laws in Canada. As was discussed in Chapter 4, after the Supreme Court of Canada considers the appeal of *Bedford v Canada*, Parliament may have to amend the Criminal Code. Lawmakers should take into account the opinions of the women whose lives may be affected (trafficked women) and the opinions of experts that are found in this thesis.

The fourth implication of this research relates to organizations' policies regarding sexual trafficking. As was discussed, not all government organizations, such as CIC, need to use the definition of human trafficking that is found in the Criminal Code. These organizations have the flexibility of defining human trafficking in a manner that is most applicable to the services that they provide, such as issuing TRPs. These government organizations, as well as non-governmental organizations, can use the elements of sexual trafficking identified through this study to inform their regulations and policies.

Finally, the primary purpose of this study was to identify the types of health problems that women who have been trafficked for sexual exploitation experience and the healthcare services that they require. As was discussed, sexually trafficked women are

a unique group whose social circumstances and physical working conditions lead to complicated health issues that are further compounded by their inability to obtain health services while they are being held by traffickers. Many healthcare practitioners in Canada are not familiar with cases of sexual trafficking (Wong et al., 2011), which make identifying the women difficult and providing care for them ineffective. By discussing the health issues of sexually trafficked women and identifying some of the barriers that they experience when seeking services, specifically healthcare, this research can inform new policies and practices in healthcare provision that address the needs of this unique population. The findings in this thesis can be used to change and develop policies in healthcare institutions that better identify and provide appropriate care to sexually trafficked women. The findings can also be used to train healthcare providers whose desire to provide effective care to this marginalized population may be impeded by the lack of knowledge on the population and its health issues.

7.3.2 Future Research

In addition to addressing the limited knowledge about human trafficking for sexual exploitation in Canada and the health issues of sexually trafficked women, this study also highlights many important issues that have yet to be fully examined by researchers. There remains much confusion and misunderstanding surrounding what comprises human trafficking for sexual exploitation. Greater research into the elements of what constitutes sexual human trafficking is required in order to develop a consistent definition that is based on evidence and not different organizations' opinions about sex work or their moral stance. Second, because many of the studies have small sample sizes, perhaps

researchers could create appropriate approaches that would enable them to access larger numbers of women; providing the quantitative findings that are often more persuasive than qualitative data with respect to policy development.

Third, comparative study of sexually trafficked women from across the country should be conducted that can compare how their experiences differ in various parts of the country. Canada is diverse and the manner in which healthcare is delivered varies in different provinces; therefore, a larger study that examines women trafficked in different parts of the country can shed light on women's experiences of health, disease, and healthcare services. Fourth, future research should also include participants who are healthcare providers because their insight and expertise is different from the groups that were interviewed in this study. Finally, the results of this study can be used to inform changes in healthcare delivery and access to care for sexually trafficked women. These changes, in turn, need to be studied furthered and followed over time with future research to ensure their effectiveness.

7.4 Conclusion

The purpose of this study was to explore the complex and emotive issue of human trafficking and to provide data that addresses some of the gaps in the academic literature and general societal knowledge about human trafficking for sexual exploitation, especially the experiences of women who have been trafficked. Among the most instructive things that I have learned during the course of this study is that there are many

discourses related to trafficking and that their proliferation is linked with larger political processes and power structures. I have also learned that health is a complex phenomenon that cannot be examined in isolation. To understand trafficked women's health, one must view the full extent of the women's experiences and how political and societal forces affect their lives.

As with many avenues of research, the more one knows the more one realizes that there is still much more to learn and question. This is certainly the case with this study, which has opened up not only new avenues for future research and service provision but also new insights into the lives of women, who have experienced what this distressing and profoundly oppressive phenomenon is really like. Drawing conclusions upon the completion of this transformative experience is difficult. However, I hope that this thesis achieves my primary goal of contributing to and generating deeper understandings of the issue of human trafficking for sexual exploitation.

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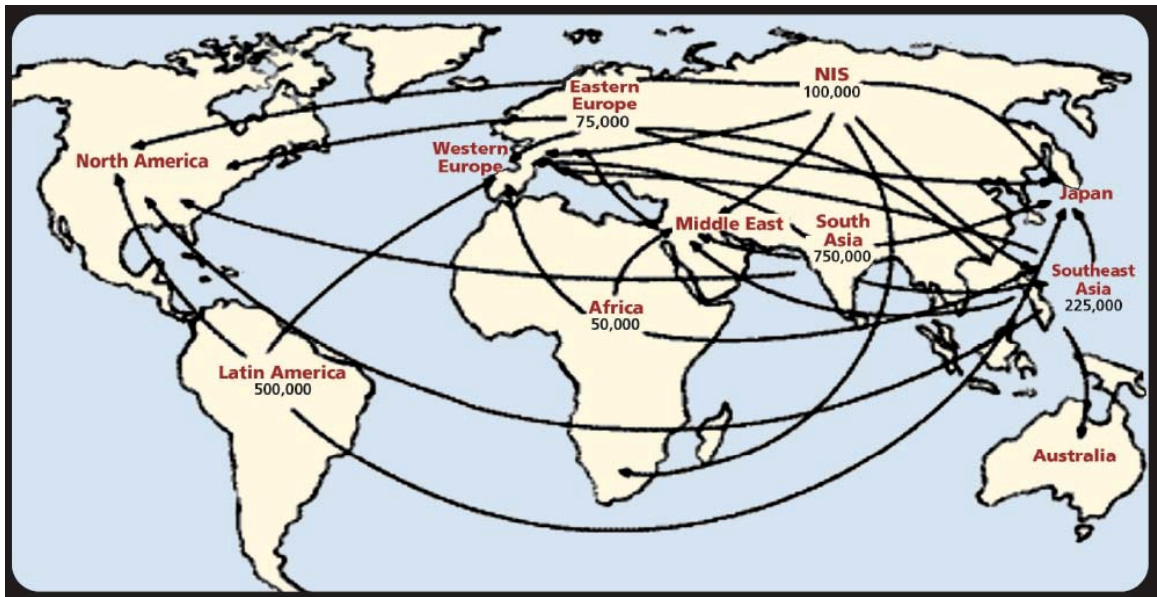
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59.

Appendices

Appendix A: Human Trafficking Routes



The main routes used by traffickers have been mapped by The Protection Project, John Hopkins University (<http://www.protectionproject.org>).

Appendix B: Interview Questions - Women

INTERVIEW QUESTIONS – WOMEN

1. Background

How did you get into the sex trade?

*How old were you?

Who recruited you?

What did you think you would be doing?

2. Trafficking

What was your experience when you were first taken?

How did you find out you were deceived?

From where to where were you trafficked?

How old were you at this time?

3. Health/Health Problems

How was your health affected by being trafficked and enslaved?

What was your health like prior to being taken?

What health issues did you encounter?

What caused these health problems?

At what stage of being trafficked or enslaved did this occur?

4. Managing Health

When you became ill, how did you handle it?

5. Others involved in Managing Health

Did you do this by yourself?

Did you tell the pimp/employer?

Did you get professional or outside help? If so, from whom and how did you get it?

Did any of your co-workers help you in managing your health?

6. At Present

Do you continue to experience any of these physical, sexual, and mental health issues after escaping enslavement?

If so, how do you manage it today?

7. Questions/Comments

Anything else you want to tell me?

*Questions following the first question will only be asked if required as probing questions.



Appendix C: Interview Questions - Professionals

INTERVIEW QUESTIONS – PROFESSIONALS

1. Background

What does your organization do?
What is your role at this organization?

2. Trafficking

What is your experience with trafficking and trafficking victims?

How did you get involved with trafficking?
How many trafficking victims have you seen/worked with?

3. Health/Health Problems

In your opinion, what kind of effect does trafficking and enslavement have on the health of women who have been sexually trafficked?

What health issues did the women encounter?
What caused these health problems?

4. Managing Health while Enslaved

How did the women manage their health and illness while enslaved?
Did they seek help from anyone else in dealing with health issues?

5. Managing Health after Enslavement

Did the women seek/receive services to manage their health after leaving sexual enslavement?

What type of services?
Were these services helpful?

6. At Present

Do you think Canadian health policy and health care delivery is well equipped to help these women?

What is good and what needs improvement?
Do other provinces deliver services/care that is different from Ontario?

7. Into the Future

What would you change about Canadian/Ontario health policy to improve the health of women who escape enslavement?

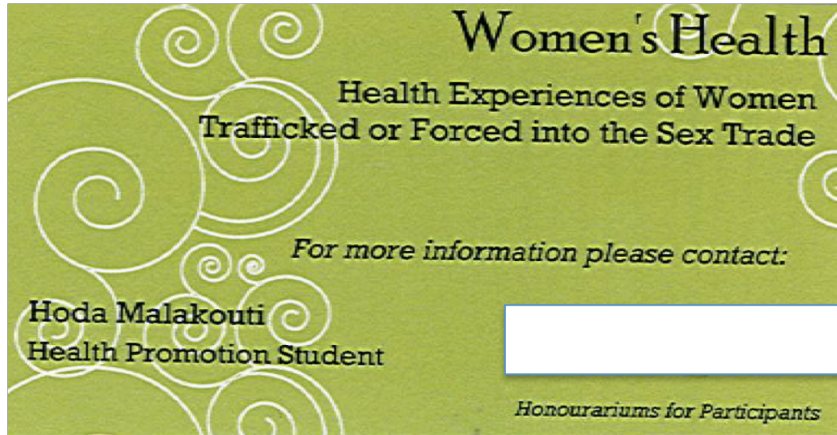
8. Questions/Comments

Anything else you want to tell me?

*Questions following the first question will only be asked if required as probing questions.



Appendix D: Contact Card



Appendix E: Ethics Approval



Office of Research Ethics

The University of Western Ontario
 Room 5150 Support Services Building, London, ON, Canada N6A 3K7
 Telephone: (519) 661-3036 Fax: (519) 850-2466 Email: ethics@uwo.ca
 Website: www.uwo.ca/research/ethics

Use of Human Subjects - Ethics Approval Notice

Principal Investigator: Dr. T. Orchard

Review Number: 17718S

Review Date: January 07, 2011

Review Level: Full Board

Approved Local # of Participants: 15

Protocol Title: The Health Issues of Female Sex Slaves Trafficked into an within Canada

Department and Institution: Health & Rehabilitation Sciences, University of Western Ontario

Sponsor:

Ethics Approval Date: March 02, 2011

Expiry Date: January 31, 2012

Documents Reviewed and Approved: UWO Protocol. Letter of Information. Letter of Information and Consent (Professionals). Script of Information.

Documents Received for Information:

This is to notify you that The University of Western Ontario Research Ethics Board for Non-Medical Research Involving Human Subjects (NMREB) which is organized and operates according to the Tri-Council Policy Statement: Ethical Conduct of Research Involving Humans and the applicable laws and regulations of Ontario has granted approval to the above named research study on the approval date noted above.

This approval shall remain valid until the expiry date noted above assuming timely and acceptable responses to the NMREB's periodic requests for surveillance and monitoring information. If you require an updated approval notice prior to that time you must request it using the UWO Updated Approval Request Form.

During the course of the research, no deviations from, or changes to, the study or consent form may be initiated without prior written approval from the NMREB except when necessary to eliminate immediate hazards to the subject or when the change(s) involve only logistical or administrative aspects of the study (e.g. change of monitor, telephone number). Expedited review of minor change(s) in ongoing studies will be considered. Subjects must receive a copy of the signed information/consent documentation.

Investigators must promptly also report to the NMREB:

- a) changes increasing the risk to the participant(s) and/or affecting significantly the conduct of the study;
- b) all adverse and unexpected experiences or events that are both serious and unexpected;
- c) new information that may adversely affect the safety of the subjects or the conduct of the study.

If these changes/adverse events require a change to the information/consent documentation, and/or recruitment advertisement, the newly revised information/consent documentation, and/or advertisement, must be submitted to this office for approval.

Members of the NMREB who are named as investigators in research studies, or declare a conflict of interest, do not participate in discussion related to, nor vote on, such studies when they are presented to the NMREB.



Chair of NMREB: Dr. Riley Hinson
 FDA Ref. #: IRB 00000941



This is an official document. Please retain the original in your files.

Appendix F: Letter of Information - Professionals

LETTER OF INFORMATION Professionals' Experiences



Invitation to Participate

My name is Hoda Malakouti and I am a Masters student in the Faculty of Health and Rehabilitation (Health Promotion) at the University of Western Ontario. I am currently conducting research into how being trafficked and enslaved in the sex industry affects women's health. I would like to invite you to participate in my study and share your experiences.

Purpose of the Study

Despite the increasing number of women trafficked into the sex trade and growing research in examining various aspects of human trafficking, very little is known about the health experience of trafficked women. My research aims to fill this gap by focusing on the health of trafficked women and their experiences of illness and disease.

Specifically, I plan to answer the following two research questions:

1. How do trafficked women experience health and health issues while in sexual enslavement?
2. What resources do the women draw on to manage these health issues during and after enslavement?

Eligibility to Participate

This study consists of two participant groups: women who have been sexually trafficked and individuals working for agencies involved in providing care or working with trafficked women.

If you agree to Participate

Types of Questions

You will be asked to discuss your role, your experiences with trafficking, and the trafficked women with whom you have worked. Then you will be asked about the effects of trafficking and enslavement on the women's health and resources they may have used to manage their health. Finally, I would like to know how you feel about health services in Ontario for trafficked women and what, in your opinion, needs to change.

Duration

You will be asked to participate in an interview that will take approximately 45 minutes.

Confidentiality

The information you provide will be respected and protected. Following our interview, I will transcribe our dialogue and destroy the tape. The transcribed version will be kept on a protected computer and destroyed following the study.

Risks & Benefits

I do not anticipate any risks associated with your participation in this study. The study will benefit academic understanding, policy evaluation, and health and service delivery in Ontario by increasing our knowledge about the health of trafficked women. Additionally, it is an opportunity to raise awareness of the oppressive crime of human trafficking into Canada, and specifically Ontario.

Voluntary Participation

Participation in this study is voluntary. You may refuse to participate, refuse to answer questions, or withdraw from the study at any time.

Questions

If you have questions or concerns about your treatment or rights as a research participant, you may contact:

The Office of Research Ethics
Room XXXX Support Services Building
The University of Western Ontario
London, Ontario N6A 5C1
Tel:
Fax:
E-mail:

I thank you for your time and willingness to share such important experiences. If you have any questions or concerns about the study, feel free to contact my supervisor or me:

Treena Orchard, PhD
Assistant Professor
Faculty of Health Sciences
The University of Western Ontario
Room XXX - Arthur and Sonia Labatt Health Sciences Bldg.
London, Ontario N6A 5B9
Tel:

Hoda Malakouti
Masters Student
Faculty of Health and Rehabilitation Sciences
The University of Western Ontario
Room XXXX – Elborn College
London, Ontario N6G 1H1
Cell:

Appendix G: Consent Form - Professionals**Health of Trafficked Women****CONSENT FORM FOR PROFESSIONALS**

I have read the Letter of Information, I have had the nature of the study explained to me, and I agree to participate. All of my questions have been answered to my satisfaction.

Name (please print):

Signature:

Date:

Record of Obtaining Consent

Name: Hoda Malakouti

Signature:

Date:

Appendix H: Letter of Information – Women

Health of Trafficked Women

LETTER OF INFORMATION

Women's Experiences



Invitation to Participate

My name is Hoda Malakouti and I am a Masters student in the Faculty of Health and Rehabilitation (Health Promotion) at the University of Western Ontario. I am currently conducting research into how being trafficked and enslaved in the sex industry affects women's health. I would like to invite you to participate in my study and share your experiences.

Purpose of the Study

Despite the increasing number of women trafficked into the sex trade and growing research in examining various aspects of human trafficking, very little is known about the health experience of trafficked women. My research aims to fill this gap by focusing on the health of trafficked women and their experiences of illness and disease.

Specifically, I plan to answer the following two research questions:

1. How do trafficked women experience health and health issues while in sexual enslavement?
2. What resources do the women draw on to manage these health issues during and after enslavement?

Eligibility to Participate

This study consists of two participant groups: women who have been sexually trafficked and individuals working for agencies involved in providing care or working with trafficked women.

The first participant group is women trafficked for sexual exploitation into or within Ontario who are between the ages of 18 and 65 years old at the time of the interview. Non-English speaking participants can have a translator accompany them or ask the researcher, prior to the interview, to provide a professional translator.

The second participant group is individuals (of either sex and any age) who have worked in a professional capacity with women (of any age) who have been trafficked for sexual exploitation into or within Ontario.

If you agree to Participate

Types of Questions

You will be asked to discuss your experiences of being trafficked, such as how old you were, who recruited you, and from where you were recruited. Then you will be asked about your health: how it was prior to being trafficked, how being sexually trafficked affected your health, and what you did and continue to do today to manage your health. Finally, I would like to know how you feel about health services in Ontario for trafficked women and what, in your opinion, needs to change.

Duration and Site

You will be asked to participate in two interviews. Each interview will take approximately 45 minutes to complete. The second interview consists of questions that will allow you to expand in more detail than the first interview. With the second interview, I want to make sure you have sufficient time to address any issues you think I should know.

The interviews will take place in an environment (other than private residence) that is most comfortable for you. For example, we can conduct the interview in a private room at the Public Library. In selecting a location, the confidentiality of your responses is important.

Confidentiality

The information you provide will be respected and protected. I will not report your name or information that identifies you in any way in my thesis, publications, or

presentations. After our first interview, I will assign a letter to represent you (for example: A, B, or C) and will only make reference to you and the information you provide by your letter. Only I will know what letter corresponds to each participant and will at no time (during or after the study) release this information to anyone.

Following our interview, I will transcribe what we discussed and destroy the tape. The transcribed version will be kept on a protected computer and destroyed following the study.

If you have been referred to me through someone else, I will not tell that person whether or not you have participated in the study or any information you may have shared with me. I will also keep confidential your participation in this study from immigration authorities.

If during the course of the study, information comes to light that a person under the age of 16 has been abused or at risk of being abused the researcher must report this to the appropriate authorities.

Risks & Benefits

Your experiences may be difficult to talk about, may trigger previous trauma, or cause emotional and psychological stress. If this occurs, I can provide you with contact information for services commonly used by trafficked women.

The main benefit of this study is that it will capture the experiences of trafficked women and honour their voices. Because there is currently little information about the health of trafficked women, this study will also benefit academic understanding, policy evaluation, and health and service delivery in Ontario.

Voluntary Participation

Participation in this study is voluntary. You may refuse to participate, refuse to answer questions, or withdraw from the study at any time.

Reimbursement

In recognition of your help, I would like to show my appreciation for your time with a \$20 honourarium for each interview. Additionally, if you have any transportation or parking costs for participating, I will reimburse you. And if you decide to withdraw from the study at any time, it will not affect the honourarium or reimbursement.

Questions

If you have questions or concerns about your treatment or rights as a research participant, you may contact:

The Office of Research Ethics
Room XXXX Support Services Building
The University of Western Ontario
London, Ontario N6A 5C1
Tel:
Fax:
E-mail:

I thank you for your time and willingness to share such important experiences. If you have any questions or concerns about the study, feel free to contact my supervisor or me:

Treana Orchard, PhD
Assistant Professor
Faculty of Health Sciences
The University of Western Ontario
Room XXX - Arthur and Sonia Labatt Health Sciences Bldg.
London, Ontario N6A 5B9
Tel:

Hoda Malakouti
Masters Student
Faculty of Health and Rehabilitation Sciences
The University of Western Ontario
Room XXXX – Elborn College
London, Ontario N6G 1H1
Cell:

Record of Obtaining Consent

I verify that I have explained the nature of the study to the participant. I have also answered any questions the participant may have had to her satisfaction.

Signature:

Date:

Appendix I: Script of Information – Women

Health of Trafficked Women

SCRIPT OF INFORMATION

Women's Experiences



My name is Hoda Malakouti and I am a Masters student in Health Promotion at the University of Western Ontario. I am conducting research into how being trafficked and enslaved in the sex industry affects women's health. I would like to invite you to participate in my study and share your experiences.

Currently, very little is known about the health experiences of trafficked women and my research aims to fill this gap by asking you about your experiences of health and illness. The study consists of two participant groups: women who have been sexually trafficked and individuals working for agencies involved in providing care to the women.

To be eligible, you will have been trafficked for sexual exploitation into or within Ontario and are currently 18 to 65 years old. You may use the services of a translator if you need it. I will ask about your experiences of being trafficked, your health now and prior to being trafficked, and what you think can improve health services for trafficked women in Ontario.

You will be asked to participate in two 45-minute interviews. The second interview consists of questions that will allow you to expand in more detail than the first interview. The interviews will take place in an environment (other than private residence) that is most comfortable for you.

The information you provide will be respected and protected. I will not report your name or information that identifies you in any way. Following our interview, I will transcribe what we discussed and destroy the tape. The transcribed version will be kept on a protected computer and destroyed following the study.

If you have been referred to me through someone else, I will not tell that person whether or not you have participated in the study or any information you may have shared with me. I will also keep confidential your participation in this study from immigration authorities.

If during the course of the study, information comes to light that a person under the age of 16 has been abused or at risk of being abused the researcher must report this to the appropriate authorities.

Your experiences may be difficult to talk about, may trigger previous trauma, or cause emotional and psychological stress. If this occurs, I can provide you with contact information for services commonly used by trafficked women.

Participation in this study is voluntary. You may refuse to participate, refuse to answer questions, or withdraw from the study at any time. I would like to show my appreciation for your time with a \$20 honourarium for each interview. Additionally, if you have any transportation or parking costs for participating, I will reimburse you. And if you decide to withdraw from the study at any time, it will not affect the honourarium or reimbursement.

I thank you for your time and willingness to share such important experiences. Do you have any questions for me?

Do you agree to participate?

Appendix J: Coding Frequency

Code	Women	Law	Service Providers	Other Trafficking	Total	Rank Overall Appearance
Sex Work	3	2	2	1	8	1
Entry	2	1	3		6	3
Exit	2	1	2		5	7
Trafficking	1	2	3	1	7	2
Johns	1	1	1		3	12
John Schools	1	1			2	17
Violence			1	1	2	17
Relationships		1			1	24
Violence	3				3	12
Partner	3				3	12
Children	2				2	17
Health	2	2	2		6	3
Mental health	3		2		5	7
Drugs	2	2			4	9
Structural Barriers	2	1	2	1	6	3
Service Provision						
Current		2	1		3	12
Future		1	2		3	12
Legal	1	2		1	4	9
Law Enforcement	1	3	2		6	3
Immigration		1		3	4	9
Social Factors						
Growing Up			1		1	24
Identity	1				1	24
Social Attitudes	1	1			2	17
Living Arrangements	1		1		2	17
Foreign Workers				1	1	24
Health				2	2	17
Mental Health				2	2	17

Appendix K: Non-Governmental Organizations

Canadian

Alliance Against Modern Slavery

Website: <http://www.allianceagainstmodernslavery.org/>

ACT Alberta

Website: <http://www.actalberta.org/>

Beyond Borders

Website: <http://www.beyondborders.org/wp/>

Chab Dai Canada

Website: www.chabdai.org/canada.html

Chrysalis Network & National Human Trafficking Support Line

Website: <http://www.chrysalisnetwork.org/>

Defend Dignity

Website: <http://www.defenddignity.ca/>

End Modern Slavery - Canadian Advocacy

Website: <http://www.endmoderndayslavery.ca/>

Face It Canada

Website: <http://www.faceitcanada.ca>

FREE-tHEM

Website: <http://www.freethem.ca/>

Help Us Help The Children Anti-Trafficking Initiative (HUHTC-ATI)

Website: www.chornobyl.ca

Hope For The Sold

Website: <http://www.hopeforthesold.com>

International Justice Mission Canada

Website: <http://www.ijm.ca/>

Invisible Chains by Benjamin Perrin

Website: <http://www.invisiblechains.ca>

MAST - Men Against Sex Trafficking

Website: <http://mast-canada.com/>

Ottawa Coalition to End Human Trafficking

Website: <http://www.endhumantrafficking.net/>

PACT Ottawa - Persons Against the Crime of Trafficking in Humans

Website: <http://www.pact-ottawa.org/index.html>

RCMP Human Trafficking National Coordination Centre

Website: <http://www.rcmp-grc.gc.ca/ht-tp/index-eng.htm>

REED - Resist Exploitation Embrace Dignity

Website: <http://www.defenddignity.ca/>

Salvation Army Canada

Website: <http://salvationist.ca/action-support/human-sexual-trafficking/>

Sextrade 101

Website: <http://www.sextrade101.com>

The Future Group

Website: <http://www.thefuturegroup.org/>

The Ratanak Foundation

Website: <http://www.ratanak.org>

Walk With Me

Website: <http://www.walk-with-me.org>

Windsor Essex Fighting the International Growth of Human Trafficking

Website: <http://westophumantrafficking.ca/>

International

Coalition to Abolish Slavery and Trafficking

Website: <http://www.castla.org/>

ECPAT

Website: <http://www.ecpat.net/>

Free the Slaves

Website: <http://www.freetheslaves.net/>

Love 146

Website: <http://love146.org/>

Not For Sale Campaign

Website: <http://www.notforsalecampaign.org/>

Polaris Project

Website: <http://www.polarisproject.org/>

Stop Child Trafficking

Website: <http://www.sctnow.org/>

Stop the Traffik

Website: <http://www.stophetraffik.org/>

Ukrainian World Congress Taskforce to Stop Human Trafficking

Website: www.ukrainianworldcongress.org (click on Councils and Committees)

Curriculum Vitae

Name: Hoda Malakouti-Nejad

Post-secondary Education and Degrees:

The University of Western Ontario
London, Ontario, Canada
2009-2012 MSc.

The University of Western Ontario
London, Ontario, Canada
2005-2006 (Minor in Psychology)

Richard Ivey School of Business
London, Ontario, Canada
2002-2004 B.A. (HBA)

The University of Western Ontario
London, Ontario, Canada
1999-2004 BHSc. Hons.

Université de Montréal
Montréal, Québec, Canada
1999-1999 (French Language)

Honours and Awards:

Western University Caucus on Women's Issues
Graduate Essay Award
2012

Ontario Graduate Scholarship
2010-2011

Faculty of Health and Rehabilitation Sciences
Scholarship
2009-2010

Honours and Awards (cont.):

Bruce Dodds Scholarship
(Richard Ivey School of Business)
2003

The University of Western Ontario
Dean's Honour List
2000-2002, 2003-2004, 2005-2006

International Teamsters Scholarship
1999-2004

Western Scholarship of Excellence
1999

Related Work Experience

Teaching Assistant
The University of Western Ontario
2010-2012

Health Sector MBA Recruiter
Richard Ivey School of Business
2008-2009

Research Analyst
Millennium Research Group
2004-2005, 2006-2007

Research Assistant
Richard Ivey School of Business
2003

Health Promotion Research Assistant
West Elgin Community Health Centre
2002

Research Assistant
Robarts Research Institute
2001

Publications:

Japanese Markets for Electrophysiology Mapping and Ablation, 2007
Published by Millennium Research Group, Decision Resources

US Markets for Electrophysiology Mapping and Ablation, 2006
Published by Millennium Research Group, Decision Resources

Japanese Markets for Electrophysiology Mapping and Ablation, 2005
Published by Millennium Research Group

European Markets for Electrophysiology Mapping and Ablation, 2005
Published by Millennium Research Group

US Markets for Electrophysiology Mapping and Ablation, 2004
Published by Millennium Research Group