

# Sex Trafficking in Nepal

## Survivor Characteristics and Long-Term Outcomes

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There has been little systematic research on therapy, rehabilitation, and social reintegration of women formerly trafficked into prostitution. This study examines characteristics and outcomes of Nepali sex trafficking survivors. Twenty case files of survivors rehabilitated in the shelter of an antitrafficking NGO were randomly selected. All individuals in the sample suffered somatic and behavioral sequelae. Three quarters of the survivors eventually returned to their villages to live. These results suggest that current rehabilitation and reintegration programs are producing positive results. However, there is need for more systematic diagnosis, record keeping, and outcome studies as well as education to reduce stigma and promote safe migration practices.

**Keywords:** *Nepal; sex trafficking*

Trafficking of girls and women into prostitution is a rapidly expanding global industry. Patterns of trafficking are shaped by inequities in resources and the status of women. In general, countries that are less developed, less wealthy, and less politically stable serve as source countries from which girls and women are trafficked. More developed or affluent countries serve as destination sites, where trafficked girls and women are enslaved in brothels or otherwise constrained to participate in prostitution (Farr, 2005).

The United Nations (2002) protocol on trafficking (see also Doezema, 2002; Raymond, 2002) defines *trafficking* as follows:

- a. The recruitment, transportation, transfer, harbouring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation should include, at a minimum, the exploitation of the prostitution of others or other

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**Authors' Note:** This research was supported by a Fulbright Senior Scholar Grant to the first author and by grants from the University of Connecticut Human Rights Institute to both authors. We thank Durga Ghimire, Rekha Uphadaya, Nirmala Baral, and Deepti Khati for research assistance.

- forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.
- b. The consent of a victim of trafficking in persons to the intended exploitation set forth in subparagraph (a) of this article shall be irrelevant where any of the means set forth in subparagraph (a) have been used.
  - c. The recruitment, transportation, transfer, harbouring or receipt of a child for the purpose of exploitation shall be considered “trafficking in persons” even if this does not involve any of the means set forth in subparagraph (a) of this article.
  - d. “Child” shall mean any person under eighteen years of age. (p. 2)

Victims may be trafficked into exploitative domestic work. They may be sold as young children into dangerous work as circus performers. Other forms of labor exploitation include trafficking of children into Asian garment factories, where they work under conditions of indentured servitude. In source countries, many disadvantaged citizens are vulnerable to trafficking, but children and women are most at risk. Between 700,000 and 2,000,000 girls and women are trafficked across borders annually worldwide (United Nations Population Fund, 2004).

### **Trafficking Into the Sex Trade: The Case of Nepal**

The sex trafficking problem is most acute in Asia, which is currently estimated to contribute some 250,000 cases a year, compared to 175,000 from Central and Eastern Europe and 100,000 from the former Soviet Union (Watts & Zimmerman, 2002). Source countries in this region include Bangladesh, Vietnam, Myanmar (Burma), and Nepal. Destination countries include India and Thailand (Farr, 2005). This research focuses on sex trafficking from Nepal. Although accurate figures are difficult to obtain, the best estimate is that 5,000 to 7,000 Nepali girls and women are trafficked each year, primarily to India, and at least 200,000 Nepali girls and women currently work in Indian brothels (Huntington, 2002).

Nepal’s status as a source country for sex trafficking is not surprising. It is one of the world’s poorest countries, ranking 140 of 177 on the United Nations Human Development Index. The overall poverty rate hovers around 40%, and poverty incidence is almost double in rural areas (46%), where the majority of the population lives, as compared to urban areas (23%). His Majesty’s Government estimates that some 46% of Nepali children are malnourished. Moreover, the economic situation has been worsening for the past decade because of political violence. A Maoist insurgency has led to the deaths of about 20,000 people (CBC News Online, 2005). Many more citizens have been displaced by violence or the threat of violence.

Nepali women also are disadvantaged because of gender bias and discrimination. Inequities in Nepali law prevent them from inheriting property except under a few rare and restrictive conditions. Citizenship can be conferred to a child only through the father. Educational inequities are rampant. There is a nationwide gender gap in

school enrollment; this is particularly acute in rural areas, where there are twice as many unschooled females as males (Poudel & Carryer, 2000). In sum, the overall status of girls and women in Nepal is very low, and rural girls and women are even more disadvantaged than urban ones are.

All these sociocultural forces put Nepali girls and women at risk for sex trafficking. Most at risk are those who are already disadvantaged on other dimensions than gender. If there is a typical Nepali victim of trafficking, she is from a rural village. She is poor, unschooled, from a low caste or a minority ethnic group, and she may have been displaced or forced to migrate because of poverty, gender discrimination, gender-based violence, or the local effects of the Maoist insurgency.

### Trafficked Women's Experiences

Trafficking is an extreme and sustained form of violence against girls and women. Case studies compiled by various nongovernmental organizations (NGOs) document rape, gang rape, burning of breasts and genitals with cigarettes, beating, and chaining with fetters (Institute for Integrated Development Studies, 2004). One brothel survivor, trafficked from her rural village at the age of 13, described her initiation into prostitution and her living conditions in the brothel (the survivor uses the Nepali word *dhandā*, which means domestic work):

R: For me . . . *dhandā* was like, doing the work of the household, like cleaning, washing dishes, and everything. In Nepali, that is what *dhandā* means, right? But there [in the brothels], it's different. There, it's like when you take a man [provide sex to a customer] they call it *dhandā*. But I didn't know and I was told to go and get ready for *dhandā*. And I went and looked everywhere for a broom, but I couldn't find one. Then they started scolding me in Nepali, saying like, "Will your father earn money and give it to us for you?" [sobbing] I cried so much when they said that. . . . Then I realized that I was sold. [cries again]

I: Were you allowed to go out for shopping, or just, you know, go out?

R: No, not at all. I couldn't even see the light outside. Everywhere, there were high walls and pillars. Only very small windows. If sometime, we wanted to look outside, we looked through that very, very, small window. And sometimes, when we got sick, we were taken outside for injections. That was the only time we could see sunlight. Our only air, inside, was from a fan . . . and that sound of the fan. . . . Nothing feels good. (Crawford, 2005)

Survivors who are rescued from prostitution typically suffer various kinds of posttraumatic effects. Counselors for trafficked women reported cases such as these:

There was one trafficked girl, a Muslim girl. . . . When she came here she was so depressed. All the time she used to cry and fight with other girls. . . . She blamed herself for everything.

There was one girl who came here from India, a trafficked girl. . . . What she did one night, she took out all the cotton from the pillow and inserted all of it into her vagina. . . . She was in an Indian brothel for many years, so maybe she couldn't bear it. (Crawford & Kaufman, 2005)

## Researching the Sex Trade in Nepal

The research reported here is part of a larger project conducted in 2004 and the first half of 2005, during which time the first author lived in Kathmandu, the capital city of Nepal, and conducted research at a leading, nonprofit NGO with a focus on the prevention and remediation of sex trafficking and other forms of violence against girls and women. The NGO, established in 1987, conducts a number of programs aimed at empowering rural women, which include leadership training; educational programs for at-risk villages on such topics as HIV/AIDS, sex trafficking, and domestic violence; and gainful employment programs, which teach marketable skills such as driving, hotel cooking, and community health work. The NGO also has founded and sustained 200 women's microcredit cooperatives in rural areas. Most relevant to trafficking, this NGO maintains six shelters, one in Kathmandu and five in areas where girls and women are at especially high risk for trafficking. These shelters, or transit homes, provide temporary accommodation, basic counseling and medical services, and a supportive community for girls and women who have been trafficked or subjected to other kinds of gender-based violence. The Kathmandu shelter, the largest, usually has about 35 girls and women in residence. The work of the NGO has been supported with external funding from international donor agencies such as the Asia Foundation, Planet Enfant, and United Nations Development Fund for Women.

In providing direct services to girls and women who have been trafficked, the ultimate goal of this and other antitrafficking NGOs is to reintegrate the survivor into Nepalese society, preferably her home community. Reintegration is a difficult task because of the extreme stigma attached to those who are even suspected of having engaged in commercial sex (Ghimire, n.d.). This account is by a young woman who was abducted for sale at the age of 16 and taken to her abductor's village, probably en route to India. She managed to escape by contacting an antitrafficking NGO working in the district, and she stayed at their shelter for some time. Although this young woman had never engaged in prostitution, she was still stigmatized as a trafficked girl:

At Dasai (festival) time my mother came to take me home, so she told me that in our village there was a lot of gossiping going on, that A. is with this man, she's been sold, and all this and that. So when I went back to my village, even my friends wouldn't talk to me, the villagers used to backbite and my parents were really depressed. Because of that, they even started to beat me and scold me, and they didn't eat food that I'd

touched. . . . The people from the village used to peep from the windows to see if my parents are eating the food I cooked or not. . . . My father was a little supportive but my mother was not at all. My father said, "Yes, you can cook like your sisters, but if your mother comes, call one of your sisters to take your place." . . . My mother listened to whatever the villagers said, and scolded and beat me. And once, she threw out all my clothes and threw me out too, and said, "Just go away." (Crawford, 2005)

How effective are interventions aimed at reintegrating girls and women who have been rescued from brothels into Nepalese society? There is an almost total lack of empirical data on how often reintegration efforts succeed and, if they do, what factors are related to positive outcomes. Because there is little government funding and coordination for reintegration efforts, record keeping is sometimes haphazard, and what records are kept is determined more by the requirements of funding agencies than out of concern for scientific research (Crawford, 2005). For example, individual funding agencies may request that the NGO keep different measures of outcomes. Thus, outcomes measured in different funded projects may not be directly comparable. Moreover, grant reports and NGO publications tend to focus on "success stories" in the form of case studies rather than a systematic reporting of project outcomes because this is what the writers believe that funding agencies and antitrafficking supporters desire to hear.

The lack of outcome assessment has fostered a great deal of controversy over whether reintegration is possible or even advisable to attempt. Some within the development community believe that reintegration efforts are largely futile and that all antitrafficking interventions should be aimed at prevention (e.g., educational programs for at-risk girls) and prosecution of the perpetrators. Because trafficked girls are so stigmatized once they have been prostituted, it is extremely difficult for them to regain acceptance in their communities (Frederick & Kelly, 2000). They have a very low probability of ever getting married (a cultural imperative for Nepali women) and are often treated as outcasts. Oftentimes, it is not only the girl who is disgraced upon her return home but also her family and sometimes even her entire community (Mahendra, Bhattarai, Dahal, & Crowley, 2001). In line with this view, one senior official at an international aid agency in Kathmandu described girls and women who have been trafficked to brothels as "dead meat." On the other hand, many who provide services to survivors believe that reintegration, though difficult, can be achieved with sufficient preparation and support. At the NGO we studied, preparation included gradual reintroduction of the survivor to her family, family visits, job training for the survivor, and seed money for her to establish her own source of livelihood back in her village.

There is clearly a need for systematic evaluation of reintegration efforts. This study attempts to address the basic question of reintegration outcomes with systematic analysis of case files. The NGO kept detailed records of all shelter residents from 1996 onward. From these records, we generated a random sample of cases,

coded comparable information on each case, and summarized survivor characteristics and long-term outcomes. Thus, this study contributes empirical data to the debate over rescue and reintegration. By establishing what proportion of survivors given a particular care regime was successfully reintegrated, we hope to provide the beginning of an empirical basis for policy decisions about the care and rehabilitation of trafficking survivors.

## Method

The NGO case files for the years 1996 (when its first shelter opened) through December 2004 showed that during this time period 321 girls and women entered the NGO's shelters because they had been rescued from a trafficking situation. Other shelter residents were survivors of domestic violence ( $n = 236$ ), rape ( $n = 85$ ), other forms of sexual exploitation ( $n = 95$ ), or child victims of trafficking into circus work ( $n = 102$ ). Overall, this NGO had sheltered 839 girls and women since 1996.

From the 321 cases of trafficking survivors who were admitted to the NGO's shelters, 80 cases were selected as the population for analysis. These 80 cases were girls and women who were trafficked directly into prostitution, the majority into brothels in India. The remaining 241 cases were those in which trafficking was intercepted by police or NGO workers, the victim managed to escape during the process, or the victim was trafficked within Nepal to a private household or workplace other than a brothel. The brothel trafficking cases were selected as the population of interest because they represent the form of trafficking that is the most extreme, associated with the greatest psychological and physical trauma, most stigmatized, and most controversial with respect to reintegration.

From the population of 80 cases, a random sample of 20 was generated for detailed analysis. These cases were assigned code numbers. A senior NGO staff member fluent in both Nepali and English transferred the information from each anonymous case file onto a standard form prepared by the first author. The form recorded the victim's caste, home district, age when trafficked, mode of trafficking, HIV status, symptoms, counseling and medical treatment received, number of family visits, and measures of current status. Thus, records from projects funded at different times and by different grants were standardized for purposes of analysis.

The first author and the staff member then reviewed the information together. In cases where information was incomplete or its meaning unclear, the staff member interviewed the counselor responsible for that particular client to answer questions posed by the author and thus fill in the gaps. This method succeeded in clarifying the information on the data forms while guaranteeing the survivor's privacy; the authors of this article did not have direct access to the files. Thus, our method respected the NGO staff's need to maintain confidentiality and control over their case files.

**Table 1**  
**Survivors' Average Time in Prostitution per Age Group**

<i>n</i>	Age When Trafficked	Mean Time in Prostitution
6	12 to 13	2 years
10	14 to 15	1 year, 9 months
3	16 to 17	2 years, 1 month
1	18 to 19	1 year

## Results

### Survivor Characteristics

The age when trafficked ranged from 12 to 19, with a median of 15 years. The majority were trafficked through the promise of a fake job ( $n = 10$ ); the next most common method was the staging of a marriage ( $n = 4$ ). It is unknown whether family members were involved in the trafficking process in any of the cases. The time spent in prostitution before rescue ranged from 3 months to 4 years, with a median of 2 years (see Table 1). All of the survivors experienced somatic and behavioral sequelae. The frequency and types of these symptoms are shown in Table 2.

### Rehabilitation and Reintegration Efforts

As part of the rehabilitation process, girls returned from prostitution received training in various skills to foster their economic independence. Skills learned included candle making ( $n = 15$ , 75%), sewing or cutting ( $n = 13$ , 65%), fabric painting ( $n = 10$ , 50%), processing food such as jam or *achar* (pickles) ( $n = 9$ , 45%), knitting ( $n = 4$ , 20%), bakery training ( $n = 2$ , 10%), leadership training ( $n = 2$ , 10%), and bag making ( $n = 1$ , 5%). These skills are practical ones within the Nepalese context. For example, almost all clothing worn by Nepalis is cut and sewn by local people operating small tailor shops, and there is a ready market for candles in rural areas where electricity is unreliable or unavailable.

Of the 20 cases in the sample, 17 (85%) experienced visits with their families during their stay in the transit home. The average number of visits with family members was 2.4. Information on family visits was missing for one case. In one of the two remaining cases, family visits were not possible because of the threat of violence due to the Maoist insurgency.

### Outcomes

Records show that 17 of the 20 survivors (85%) returned to their village of origin after leaving the shelter. Only one girl in the sample could not be reintegrated into

**Table 2**  
**Somatic and Behavioral Symptoms Reported by Survivors**

Symptom	<i>n</i>	%
<b>Somatic</b>		
Sexually transmitted infections	7	35
Headaches	7	35
Stomach pain	5	25
Lower abdominal pain	3	15
Skin disease	2	10
Body itching	2	10
Fatigue	2	10
Other	4	20
<b>Behavioral</b>		
Social withdrawal	3	15
Altered behavior in front of males	2	10
Lack of motivation	2	10
Aggression	2	10
Other	3	15

her community, as her family refused to accept her upon her return. One girl remained in the transit home long term, and one could not be located for follow-up data. The NGO had records of follow-up contact with all 17 reintegrated survivors for periods of time ranging from 3 months to 5 years after they left the shelter. Of these, 16 were reported to have satisfactory adjustment. One outcome was reported as unsatisfactory because family members failed to accept the survivor despite two pre-reintegration family visits. However, the survivor did marry and generated income by maintaining a tea shop. Rehabilitation success could not be evaluated in relation to length of time spent in prostitution because outcomes were not scaled and because of the small sample size.

After returning to their villages, 11 survivors (55%) were employed in income-generating activities typical of the microbusinesses found in rural Nepal. Of these women, 5 managed their own small retail shops, which typically sell items such as tea, biscuits, batteries, candles, and small quantities of staple foods; 2 ran their own tailoring shops, sewing clothing for village women; 1 ran a village tea shop; 1 ran her own small hotel; 1 was occupied in goat raising; 1 worked for wages in a garment factory; 1 returned to school as a fifth-grade student. Ten women married after returning to their villages (59% of 17 returned); 1 was married before being trafficked. Of the 10 who married after being returned, 9 (90%) were women who were also engaged in income-generating activities.

The survivors' health status on follow-up was mixed. Two survivors continued to suffer from sexually transmitted infections. One had an unspecified skin disease. One survivor who arrived at the shelter suffering from hypochondria and unspecified



mental illness was reported to still be suffering from mental illness at a 3-month follow-up in March 2005. The remainder of those for whom follow-up records were available (76%, 13 of 17) were reported to be in satisfactory health.

## Discussion

Girls and women trafficked into prostitution have experienced an extreme and sustained form of gender-based violence. They typically suffer physical and psychological trauma. Our analysis of a random sample of case files from a single anti-trafficking organization shows that the girls were often trafficked at a very young age and endured forced prostitution for a time ranging from a few months to several years and that virtually all survivors experienced physical, psychological, and behavioral symptoms as a result of the trauma they were forced to endure. In the context of Nepalese culture, the trauma is often compounded by societal rejection upon their rescue or return from sex slavery.

Sex trafficking of girls and women in South Asia has become a focus of attention for governmental offices, international aid agencies, and local service organizations only quite recently. The standards for victim care, rights, and rehabilitation are all evolving as nonprofit organizations and governmental agencies gain experience in working with girls and women returned from brothels. There is an ongoing debate about whether it is possible to reintegrate trafficking survivors into Nepalese society and, if so, what factors might foster successful rehabilitation and reintegration. The goal of this research was to add empirical data to the debate over reintegration by systematically analyzing a random sample of actual cases from one typical NGO. By excluding cases of trafficking within Nepal and trafficking to private settings, we generated a random sample from the population of toughest cases—girls and women who had been trafficked to brothels in India. This form of trafficking is considered the most extreme because of the associated trauma and stigma; it is also the most controversial in the debate over reintegration.

The results of our analysis were surprisingly positive: Three quarters of the survivors returned to their native villages and were accepted by their families of origin. Many married and established independent sources of income in small businesses. We suggest that these positive outcomes could be attributable to several factors deserving independent study. First, educational programs conducted in rural Nepal by antitrafficking NGOs may be succeeding in reducing the stigma associated with having been trafficked. Second, only one survivor in this sample was HIV positive, which provides an independent source of stigma. It would be interesting and important to document reintegration outcomes for a sample of HIV-positive brothel returnees.

Equally important is that the NGO from which we sampled, founded and run by Nepalese women, had considerable experience and a great deal of local knowledge. For example, they relied on gradually reintroducing the survivor to her family and

village. Typically, a staff member working in or near the village would approach the family and ask if they would like news of their daughter should it become available. If the response was positive, they would arrange a first visit of the family members to the shelter without revealing that their daughter had been engaged in prostitution. If the visit was productive, the next step might be a visit to the village by the survivor and the gradual disclosure, by the survivor herself, of her history. In this way, the organization fostered the regrowth of family bonds and eased the survivor's reintegration.

Finally, and perhaps most important, the NGO's policy and practice included providing survivors with income-generating skills. The ability to provide for oneself and help one's family in the daily struggle for economic survival is a large source of status and prestige in Nepal, and it surely contributed to the survivors' acceptance in their home villages. Beyond these speculations, the specific reasons for so many positive outcomes for reintegration of survivors from this particular NGO are unknown. We are unable to say whether the NGO chose specific survivors as good candidates for reintegration efforts or if the NGO's method of counseling and reintegration is particularly successful. It is likely that both selection and treatment factors played a role. However, more evaluation research is needed to determine what drives the large number of positive outcomes for this particular NGO's survivors.

Our study has obvious limitations. The sample is small and based on the population of cases admitted to the shelters of only one organization. The available records were minimal; for example, diagnoses were made by counselors with only basic training, and they are not based on standard diagnostic criteria. We also were not able to evaluate the success of survivors' adjustments based on the continued presence of mental and/or physical health problems because of a lack of information in the case files used in this study. On the other hand, the organization is representative in its structure, goals, and methods of other antitrafficking organizations in Nepal. Moreover, in this study we systematically analyzed comparable data from each case, and the case files were a random sample of the population of shelter residents who had been trafficked to brothels. There is very little other research on trafficking in Nepal that has used systematic sampling and analysis.

Although our results suggest that current best practices of rehabilitation and reintegration for survivors of sex trafficking are producing positive results, there is a need for further systematic evaluations. However, given the political chaos and poverty in Nepal, it is unlikely that there will be more systematic diagnosis, record keeping, and outcome studies in the near future. Most pressing is the need for intervention evaluation. For example, little is known about how length of time in prostitution affects rehabilitation outcome and how psychological effects are measured as part of outcome. Because sex trafficking has become a trend social issue, there is considerable international funding available for antitrafficking efforts. In-country and international NGOs working in antitrafficking need to develop a universal system of outcome assessment to be used by both researchers and funders. This system should foster empirical evaluation of intervention effectiveness for both

prevention and remediation efforts, using both attitudinal and behavioral outcomes. Ideally, donor international NGOs should take the lead on developing such a system and requiring it as a prerequisite for funding in their calls for research proposals. Of course, this would require a donor's willingness to fund local staff and local training in program evaluation.

Within the Nepali context, reintegration efforts may be hampered by the extreme stigma attached to girls and women who have been trafficked and worked in prostitution. As a result, reintegration may be impossible because the families and communities of these girls and women reject them outright. Without addressing the stigma of trafficking survivors, those who attempt to return to their communities will never be fully accepted. Independent living is hardly an option; in the extended-family structure of Nepali society, living alone is an extreme norm violation in itself. Some survivors have been able to live in women's cooperatives, such as that available to women through at least one other NGO in Kathmandu, but resources such as this are limited.

There is also a need for continuing attention to the prevention of sex trafficking. An important component of prevention of trafficking is to educate rural villagers about safe migration. In a country in a state of political unrest, where people are living in fear of being involved in the violence between the Nepali army and the Maoist insurgents, migration has been very often the only option for survival. Because girls and women are most at risk for trafficking during migration and social upheaval, more programs need to be developed that teach rural villagers how to reduce risk and use social networks to migrate in relative safety. In addition, these programs could alert women to the tactics used by traffickers and provide them with practical strategies to avoid deception and exploitation.

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