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Elizabeth Cafferty, MSc, has managed human rights projects and undertaken advocacy and awareness raising work on international development and refugee and women's rights issues in both the U.S. and U.K. Ms. Cafferty oversees the Division's trafficking program, which recently completed a major international research study examining sex trafficking of women and girls from a public health perspective. At Women for Women International (WFW), she undertook community and government relations work and also worked closely with WFW's Kosovo office on the extension of their rights based training and small business skills classes for local women..



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# Addressing Sex Trafficking through the Public Health and Human Rights Lens

## *A Case Study Research Project*

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# Current Health System Response

- Victims find it difficult to access the right to health care. These rights also vary country to country, and sometimes city to city. Services can be confusing and/or insufficient.
- Victims often do not seek health care due to:
  - Traffickers
  - Fear of deportation
  - Lack of trust in service providers/fear of discrimination
  - Lack of understanding of entry points and entitlements
  - Geography/clinic hours/language barriers
- Health-care workers' response dependent upon the attitudes/awareness of individual providers and service providers' informal relationships with health care.

# Recommendations: Potential Roles for Health

- Raise awareness amongst health-care workers via trainings at clinics, hospitals, and health professional schools.
- Identify victims in health-care settings, including emergency care & community clinics.
- Provide tailored and comprehensive care for survivors, including culturally-sensitive mental health care.
- Use knowledge of prevention to address trafficking in source areas.

# Recommendations: Working with Non-Health Actors

- Engage in prevention efforts to stop trafficking and re-trafficking.
- Advocates for underserved populations have better access to social services.
- Inform local and national anti-trafficking policy.
- Draw on experience of anti-DV, child abuse, and HIV communities.

# Country-Specific Recommendations

- India: Work with community groups and government agencies to include trafficking component to HIV awareness efforts targeted at out-of-school youth and vulnerable families.
- Brazil: Incorporate training on violence against women in health professional schools and for those practicing. Health can be the gateway for other services (referral and counter-referral).
- U.S.: Build on DV/sexual violence knowledge and protocols to encourage health to engage in anti-trafficking work.