

HUMAN RIGHTS
and **SOCIAL JUSTICE**
in a **GLOBAL PERSPECTIVE**

An Introduction to International Social Work

SUSAN C. MAPP

Human Rights and Social Justice in a Global Perspective

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*An Introduction to International
Social Work*

Susan C. Mapp

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Preface

The social work profession promotes social change, problem solving in human relationships and the empowerment and liberation of people to enhance well-being. Utilising theories of human behaviour and social systems, social work intervenes at the points where people interact with their environments. Principles of human rights and social justice are fundamental to social work. (International Federation of Social Workers, 2000, ¶1)

As illustrated by this definition of social work, wherever social workers work, they are engaged in problem-solving at all levels. No matter where social workers are or who their clients may be, the fundamental concepts of social work remain social justice and human rights; we believe that all humans have the right to access the same basic essentials no matter what their status, and we work to help them achieve that right. Social workers work most often on local issues—issues pertaining to their clients that live by them, whether this is on the micro, mezzo, or macro levels. However, in this new millennium, the boundaries of social work are expanding as the boundaries of our world do. Issues that are confronted on a local level in countries in the Global North are the same issues faced by people struggling across the world, although they take a different form depending on the cultural context.

While it is easier to prioritize the needs of those who are close to us over those who are further away, this approach will hurt us all in the long run. First, social work's ethic of care requires that no distinction be drawn between "our" poor and "their" poor. Second, with the globalization of our world, social, economic, and political forces in one region of the world can affect other regions of the world, and injustices experienced in local communities can emanate from forces beyond national borders (Diaz, Mama, & Lopez, 2006). Thus the struggles of those who live half a

world away can affect us locally. For example, in Afghanistan and Colombia, poverty lures farmers to grow illegal drugs, while social workers in the Global North combat the effects of drug abuse.

The term “international social work” is becoming more common and encompasses several different concepts. This term can be used to refer to working with immigrants from other nations in one’s home country, but in this book it will be primarily used to refer to conducting social work to help with social issues faced by citizens of other countries in their home nations. One group of nations at high risk in regard to the social issues to be considered are those nations formerly referred to as “Third World” or “developing” nations. These two terms have now been largely discarded. Although the term “Third World” was selected by these nations themselves, over the decades it has come to be associated with such terms as “third class” and “third rate,” denoting a lower status. Likewise, the term “developing” nation implied that the country was evolving to become like the “developed” nations, an ethnocentric notion that has become out of vogue. Therefore the current term, “Global South,” will be used in this text, even though not all of these countries are located in the Southern Hemisphere, nor are all the countries in the Southern Hemisphere included in this term.

Issues pertaining to international social work have been gaining importance, and schools of social work are increasingly adding this context to their classes to give their students the preparation they will need to be the most effective practitioners possible. Even social workers who never leave their country increasingly find themselves working with these topics. For example, social workers in domestic violence shelters are working with clients who have immigration issues, and social workers in mental health settings encounter clients who are traumatized from war and conflict.

We are also seeing the globalization of social issues. The role of social workers is to help improve the human condition, regardless of the social environment, but the social environment can have a major impact on the development of an issue and thus on its resolution. As will be shown in this text, issues that are faced by people all over the world vary from culture to culture, depending on factors within that culture that inhibit or encourage development of the issue. The issues that are faced by clients in the Global North are often the same issues faced by clients in the Global South, although the cultural context may affect their development. For instance, AIDS is a disease that knows no national boundaries, but who is

affected, why, and the impact of the infection vary between cultures. Economic exploitation occurs across the globe, but who, why, and in what form can vary, such as girls trafficked into prostitution in Thailand and men forced to work for little or no wages in Brazil's charcoal camps.

The textbook will help introduce those in the Global North to social problems as they occur in the Global South. There are both similarities and differences to how these issues have developed in different regions of the world due to issues of culture and access to resources. Each of these issues is a violation of the Universal Declaration of Human Rights. The human rights documents developed by the United Nations provide a lens through which these issues will be viewed. Woven throughout each chapter are descriptions and case studies from multiple countries in the Global South to help illustrate their impact. At the end of each chapter is a "Culture Box" in which the issue is described in detail in one specific country so that the reader can understand the impact of culture on the development of a particular issue. The text is written from the orientation of a person located in the United States but is intended to be useful to those from other nations as well. It is aimed at all those who want to learn more about the world around them, both those who have the formal label of "student" and those who are simply seeking to educate themselves.

The book begins with an introduction to international social work and social development. To help illustrate how the way we think about the world affects how we view problems and solutions, the impact of map views and development theories is discussed. In Chapter 2, different human rights documents and the human rights approach are discussed. Chapters 3 through 7 discuss different issues, while Chapter 8 discusses a potential path to developing solutions: the Millennium Development Goals. In Chapter 9, how social workers and social work students can be a part of developing solutions is discussed. The size of the issues does not diminish the importance of attempting to reach solutions, and this book will help provide a path for those who want to be a part of this work.

No book is a product solely of its author. Many thanks go to many people, including Maura Roessner and Mallory Jensen at Oxford for all their help. Thank you to my mother, Carol Singer, for her proofreading and encouragement, and to the rest of my family for their support. My colleagues, Wayne Selcher, Carolyn Field, Jo Bailey, and Needha Boutté-Queen, as well as the social work department at Elizabethtown College, were a great help. A special thank you must go to my students who encouraged me and read drafts and gave me feedback—SW375 and

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Human Rights and Social Justice in a Global Perspective

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International Social Development

As discussed in the preface, the importance and spread of global social problems have been growing rapidly. While the need to see beyond our borders increases, the skills with which to do so may be lacking, particularly for Americans. Currently the United States stands alone as the world's only superpower. Due to this dominant position, Americans often put less emphasis on learning about other countries and cultures than these countries put on learning about the United States. English is considered the international language of business, and Americans traveling abroad typically encounter citizens of other countries who are fluent in English, reducing the perceived need to learn another language. In a recent poll, three quarters of young Americans thought that English was the most common native language. In fact, Mandarin Chinese is the most common first language (National Geographic, 2006). The U.S. Department of Education reports that only 31% of elementary schools teach a foreign language, while only 44% of high school students are enrolled in foreign language classes. These statistics decline further as students enter college, where approximately 8% of students take foreign language classes and less than 2% study abroad each year (U.S. Department of Education, 2006). A 2006 study found that the preparation in world history that American students receive in schools is overall poor, with two-thirds of states receiving a D or F for their world history curriculum (Mead, 2006).

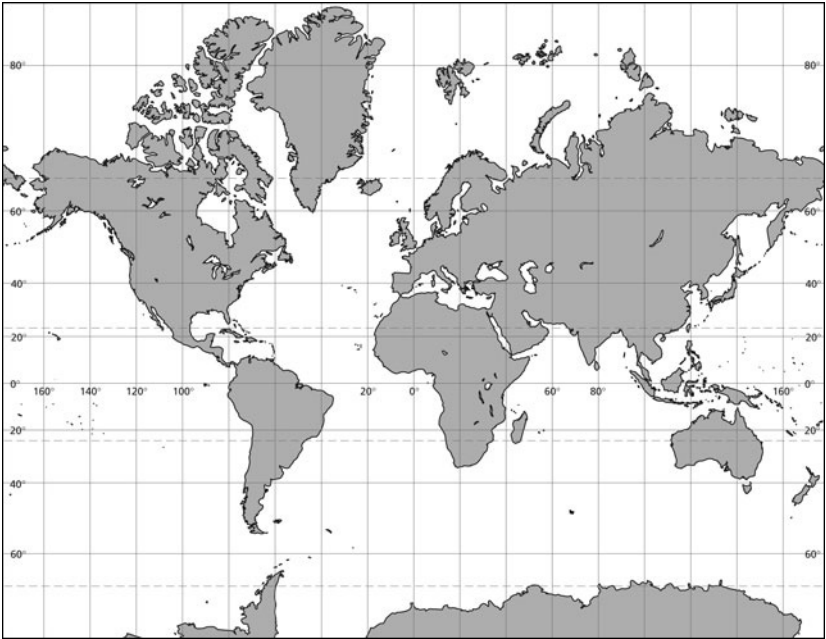
Americans also have a notorious lack of geographical knowledge, both of the world and of the United States itself. A 2002 study of nine major countries found that Americans aged 18 to 24 ranked next to last (after Mexico) in their knowledge of geography. Ten percent were unable to

locate the United States on a world map, and almost 30% could not locate the Pacific Ocean (National Geographic, 2002). If 10% cannot locate their own country on a world map, that does not bode well for knowledge of countries outside its borders. Indeed, 85% were unable to locate current world hot spots Iraq, Afghanistan, or Israel on the map either (National Geographic, 2002). If Americans are to become world citizens, they must know their place in the world, both figuratively and literally. When American aid is sent abroad, either as armed forces or financial resources, Americans should know where they are going. America has fought two wars in Iraq in recent years, but in the National Geographic survey only 13% could find Iraq on a map that depicted only the Middle East and Asia, not even the entire globe.

The Effect of Maps on Our Worldview

Even for those who are geographically knowledgeable, how people learn about geography can influence their perception of the world, even through something as simple as the map used to learn about other countries. When developing a two-dimensional depiction of a three-dimensional object, it cannot be exactly accurate; something must always be sacrificed to preserve another feature accurately. Such is the case with maps; when manufacturing a depiction of reality, only selected features are included. For example, if you draw a map of the route to your house for a friend, it will not include roads that will not be needed. The state map from your Department of Transportation will most likely not include the road on which you live. No one representation can include everything that exists in actuality; no map looks exactly like what it portrays. Thus, each map focuses on a particular feature or features that are considered important. As with any document, a map represents the needs and perspective of the mapmaker. What is preserved and what is lost depend on what is important to the mapmaker. This can be seen clearly in the map with which most Americans are familiar, the Mercator projection.

Developed by a Flemish cartographer in 1569, the Mercator projection preserves longitude and latitude as straight lines. It also is literally Eurocentric, placing Europe in the middle of the map. This map projection was a great benefit to seafaring ships, of particular importance at that time in Europe. Mercator titled his map "A New and Enlarged Description of the Earth With Corrections for Use in Navigation," a very precise and



Mercator Projection

accurate name (Kaiser & Wood, 2001). However, what is lost is relative area, especially near the poles. The correction Mercator described to keep latitude and longitude as straight lines resulted in distortions of relative size. Land masses located near the poles appear much larger than they actually are, especially in comparison to other land masses. This can be seen in the image on page 6 comparing the actual land mass of Greenland and Africa and their depiction in the Mercator projection. Additional comparisons can be seen at <http://www.petersmap.com/table.html>.

To correct this fault, subsequent map styles have been developed. One of the most popular (and controversial) of these is the Peters projection (see page 7). The map preserves relative land mass at the expense of distortion of shape. The Peters projection has been the subject of much debate, and its developer, Arno Peters, was one of the first to declare that mapmaking was inherently political.

His statement causes us to question how maps affect the way in which we view the world. Compare the Peters projection with the Mercator projection. The majority of Americans grew up with the Mercator projection on the wall of the schoolroom and accepted it as the way the world looked. To view such a radically different map can be jarring: suddenly

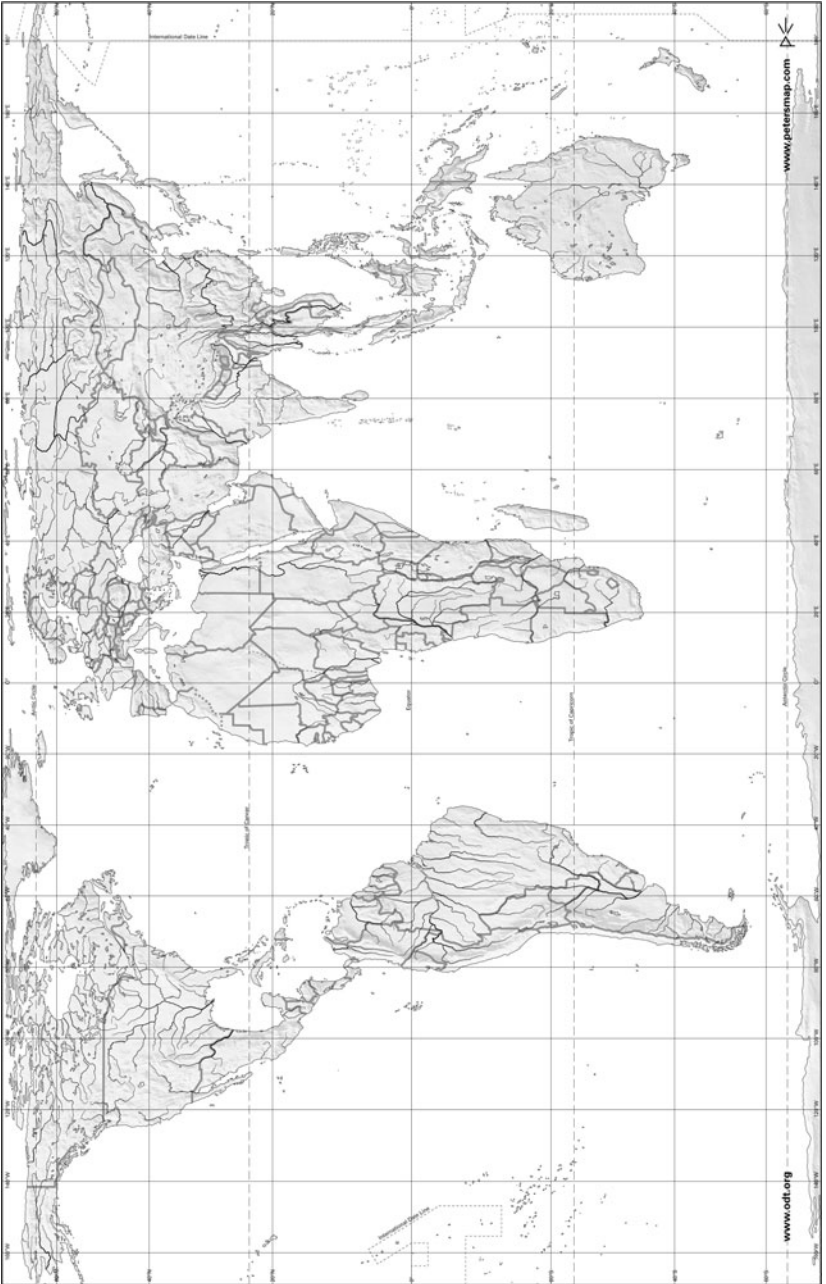


Land Mass Comparisons: Greenland has .8 million square miles and Africa has 11.6 million square miles, but on this Mercator Projection they look as though they are the same size.

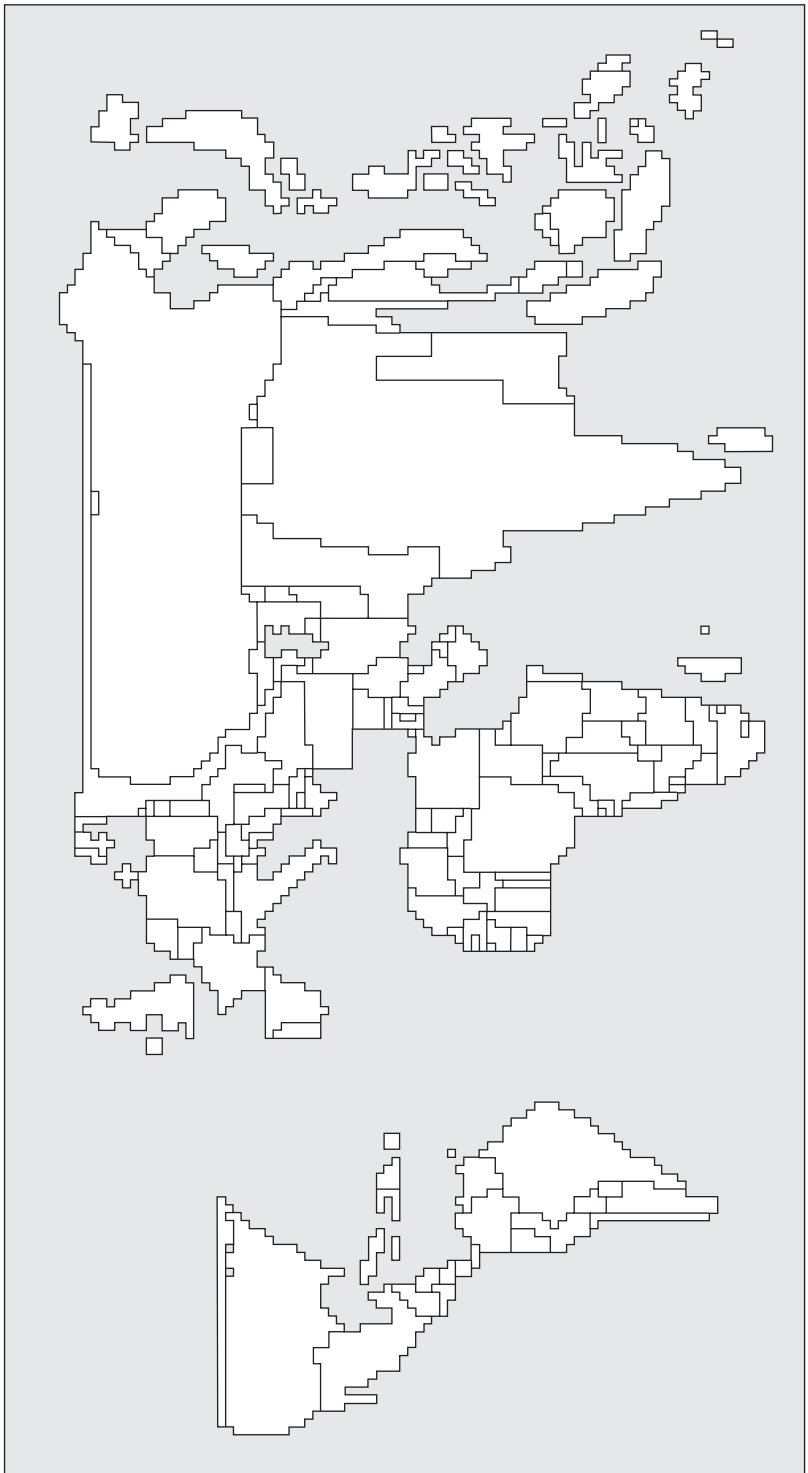
the United States and Europe do not appear so large in comparison with other areas of the world. Human nature tends to equate size with importance, so seeing these areas of the world that have larger roles on the global political stage suddenly shrink in size may cause a perception that they have shrunk in importance.

Since all maps are a depiction of reality rather than the reality itself, they can appear different from the ones to which we are most accustomed in a number of ways. For example, some maps center the world on the Pacific Ocean to illustrate the Eurocentric approach of putting Europe in the middle. Still others, such as McArthur's Universal Corrective Map of the World, rotate the map so that south is on top. Since the Earth is a sphere floating in space, there truly is no such thing as "up"; putting north on top is only a convention. Take a moment to think about how this different perspective might change your viewpoint. How does the notion of choices of what to include on a map affect how people view that which it depicts? Why is it important to recognize conventions of mapmaking are just that—conventions?

Maps can depict whatever the cartographer wants to portray at the expense of other details. They do not need to focus on physical geogra-



Peters Projection



Population Map

phy. Examine the map on page 8 depicting the world by national population. It is an accurate depiction of the world and the information it is portraying, but other information is sacrificed at the expense of this information, thus illustrating how two-dimensional maps are always a win-lose scenario. Another example is the population map by number of people infected by HIV/AIDS located at <http://www7.nationalgeographic.com/ngm/0509/feature4/map.html>.

When examining any map, the Department of Geography at the University of London (n.d.) suggests asking a few questions:

- What are the key features that are included and that are excluded?
- Why do you think the mapmaker made the decision to include and exclude those features?
- How do those decisions regarding the content of the map impact how those viewing the map see the world (e.g., what is considered important and what is considered unimportant)?

Your Geographical Knowledge

How is your geographical knowledge? Can you locate all 50 states? Can you locate countries on a map? Test yourself and work to improve your knowledge. An excellent website for this is www.sheppardsoftware.com/Geography.htm. Try these exercises (these are from an American perspective but can be adapted to citizens of other nations by focusing on knowledge of your own country first and then moving out to other regions with which your country has close ties).

- Label all 50 states on the U.S. map.
- Name the capitals of the U.S. states.
- Once you have mastered the geography of your own country, move on. Label the countries in Europe. Many Americans consider themselves familiar with Europe, but often that is only Western Europe. Can you label the Eastern European nations, especially those which have emerged, or re-emerged, since the fall of the Soviet Union? Europeans are typically familiar with nations on their own continent, but how about those on other continents?
- Now look at other continents around the world. How familiar are you with the location of countries? As globalization increases, the importance of being familiar with the world outside of our borders increases proportionally.

The Social Development Approach

Just as the map we use can affect how we view the world, the lens with which we view its problems will affect how we approach a solution. The values of social work tie closely together with the concept of social development, particularly in relation to the idea of empowerment. Social development can be defined as encompassing interventions and programs to improve social conditions. Social development works to build capacity within a client, often at the macro level, to avert the problem as opposed to helping to alleviate the effects of the problem after it occurs. It is focused on primary prevention—stopping the problem before it starts by addressing it at its roots. Many times efforts of international nongovernmental organizations (NGOs) may focus on relief as opposed to prevention, and intervention will occur after a problem has become severe—tertiary prevention (Herscovitch, 2001). For instance, food assistance will be given after the famine has already occurred; medical assistance will be provided after the epidemic is raging. However, by using a developmental approach, assistance is provided before the problem has metastasized, which is not only more cost-efficient but also more effective. At the world conference on social development held in Copenhagen in 1995, 117 heads of nations agreed that people should be at the center of development. Toward that end, they agreed to “make the conquest of poverty, the goal of full employment and the fostering of stable, safe and just societies their overriding objectives” (United Nations, 1999, ¶1).

Blocking the realization of this pledge is the fact that nations often argue that they must focus on economic development before they turn to social development. However, these two must occur together; social development and economic development are inextricably linked. When one occurs without the other, distorted development will occur. The most frequent type of distorted development is when economic development occurs without social development. This will result in a concentration of wealth and resources and difficulty in economic growth. If citizens are not educated, they will not be able to be as economically productive; if they do not receive adequate health care, they will be too unwell to work; and if they are hungry, they will not be as productive as they could otherwise. However, neither should social development be attempted without economic development. If social development occurs without economic development, there will be a lack of financial resources to pay for the

programs. For human potential to be reached, economic and social development must occur together. This balance is one of the goals of social work in the international arena (Diaz et al., 2006)

Distorted development can occur in several ways: within a country or between countries. When global inequality between countries is examined, a number of theories have been developed to explain why these differences have occurred and some countries have remained “underdeveloped.” We will examine two of the primary theories: modernization theory and dependency theory. These are only two from a multitude of possible theories and were selected to provide contrasting viewpoints.

Modernization Theory

A predominant theory when examining the underdevelopment of certain countries and regions in the world has been modernization theory, also known as the neoclassical approach. This theory states that the reasons for the origins of underdevelopment and poverty in a country are internal; they are located within that country itself and may include the lack of democratic institutions, capital, technology, or initiative on the part of its citizens. Modernists believe that underdevelopment is a state or condition that is synonymous with tradition. They state that the essence of the traditional society is that it is unchanging. Daily work is carried out just as it has always been, not to secure a profit, but to maintain one’s place in society. It is not a negative view, but from an economic viewpoint it is a stagnant one, as there is no hope of gaining wealth. This equilibrium, while stable and predictable, will not generate economic wealth. Capitalism, on the other hand, can. Capitalism has created far higher overall levels of production, income, and wealth than ever before by decentralizing the wealth of nations. In its ideal form, through individuals trying to do the best for themselves, constant change and growth are created, spurring the society on to better things and producing economic changes to the benefit of all socioeconomic classes in the society (Isbister, 2003). In contrast, traditional societies maintain equilibrium. For example, as China has moved from a communist model economy towards allowing more capitalism, prosperity within the country has surged to levels previously unknown.

Modernization theory believes that global inequality exists due to technological and cultural differences between nations and that every country can achieve the level of development seen today in the Global North

through a free market economy tailored to the culture of that country. This development can be a cooperative process with wealthier nations: rich countries can help poorer countries by serving as role models and by providing assistance. The wealthier nations can help these countries overcome the internal limitations that have stagnated economic growth, specifically through helping to limit population growth, increasing food production, increasing technology, and providing foreign aid (Macionis, 2006). As modernization theory operates from a cooperative model, there is no antagonism between nations in this model and all countries can work together to achieve the maximum good for all citizens.

However, all theories have their limitations. Modernization theory does not examine the role of wealthy countries in creating impoverishing conditions in poorer countries; it focuses almost exclusively on internal causes. Modernization theory tends to focus on economic growth as the goal; however, this can result in concentration of wealth in the hands of a few as opposed to economic redistribution. This theory is also inherently optimistic as it believes that any country can find the means from within to achieve the correct “mixture” of savings and investment, which together with foreign investment can achieve development. This optimism ignores limitations that may prohibit economic growth, such as poor agricultural conditions or a poorly educated workforce. By promoting the industrialized countries as the model of optimal development, it has an inherent ethnocentric bias (Macionis, 2006).

Dependency Theory

Dependency theorists believe that currently dominant nations developed to their current level of prosperity because they *depended* on the resources from the less-developed nations—cheap raw materials and a captive market for the goods (Schultz & Lavenda, 2005). They believe that underdevelopment is a process, not a state of being; the underdeveloped nations are in their current state not because of their inherent nature or traditional society, but due to the process of impoverishment they experienced at the hands of the dominant nation-states, and they are now dependent on those dominant nations. Dependency theory does not focus on the conditions within individual nation-states but rather on global interactions between the nation-states by focusing attention on the international context of the Global South. Similar to systems theory, it examines nations in relation to their suprasystems (e.g., their regional

context and relations with the Global North). Dependency theory asserts that as a result of economic growth in advanced capitalist countries, poverty increased in developing nations. It states that poor countries are not poor merely in comparison to countries of the Global North, but that the industrial system impoverished the developing countries to further their own growth (Isbister, 2003). This process occurred not only during colonization but also continues today as the high-income nations continue to block the growth of developing nations.

Dependency was first created through the colonization of countries, with the prime agricultural land and resources being allotted to a concentrated few—the colonists. These colonists used the natural resources of the land for their own benefits, such as the diamonds and gold of South Africa. Goods were produced for export to foreign markets as opposed to use by the country itself. For example, cotton was grown in Sudan and Uganda, but these countries imported cotton goods (Rodney, 2005). Some of the new “cash crops” were much harder on the soil than the sustenance crops, especially when the native Africans were relegated to the poorest soil. This led to further impoverishment, first of the soil and then of the people trying to eke a living from it (Rodney, 2005). Infrastructure was designed to benefit this export-oriented economy, with roads and railroads leading to ports as opposed to internal access (Thomas-Slayter, 2003).

Even though formal colonialism is gone, these orientations remain and poor countries continue to be dependent on wealthy countries. They export raw goods to them, they work for their companies, and they are required to learn their languages. This economic subservience leads to political subservience. For example, the United States provides aid to countries that help us economically by welcoming private enterprise and American businesses. As seen in the Cold War, large established nations played out their ideological battles on the grounds of smaller developing nations such as Panama, Vietnam, and Angola.

Dependency theory asserts that modernization theory is mistaken in stating that traditional societies are unchanged. They are not in an unchanged state; they have been changed through centuries of contact with, and exploitation by, the economically dominant nations. The existing poverty is not traditional or accidental; rather, it is necessary for the enrichment of the dominant nations. Over time, the price of poorer nations' exports has fallen and the price of imports has risen. Trade policies currently favor wealthier nations and their tariffs and subsidies make it difficult, if not impossible, for those in the Global South to compete

economically in the world market. For example, tariffs on goods manufactured by members of the Organisation for Economic Co-operation and Development (OECD) (primarily countries in the Global North) are one-quarter of those on goods manufactured by countries who are not members (primarily countries in the Global South). This makes the goods from countries in the Global South far more expensive and thus less desirable. Agricultural subsidies in wealthy countries total more than \$300 billion each year, again making it more difficult for farmers in the Global South, who do not have such aid, to price their goods at a competitive rate (UNDP, 2003).

Dependency theorists also argue that poor countries are not strangers to capitalism; they have been subjects of it for centuries. They provide the raw materials for the development that has occurred in the “developed” nations. While modernization theorists state that there is a clear path to development for all to follow, dependency theorists disagree, arguing that the current economic powers rose to their current status by exploiting the developing nations, a path not open to those nations today. An obvious example of exploitation is slavery: numerous African societies were destroyed through the theft of their most able members, and it took them centuries to recover. In addition, these nations in the Global South currently face competition from well-established economic superpowers.

In assessing the limitations of dependency theory, it is clear that just as modernization theory focused on internal causes to the exclusion of external ones, dependency theory does just the reverse: it focuses on external causes to the exclusion of internal ones. Internal difficulties such as being a landlocked nation or tolerating internal corruption are not considered. It is a pessimistic theory in its belief that as long as wealthier countries dominate the world, there is little opportunity for developing nations to succeed. It also excludes from its premises the nations that were colonies at one time but now have succeeded in the global marketplace, such as the “Asian Tigers” (South Korea, Hong Kong, Taiwan and Singapore).

Distorted Development Within Countries

Midgely (1997) notes that there are many examples of distorted development in the world. In some countries in the Global South, such as in Latin America, extensive economic growth has occurred without cor-

responding social development. This can also be seen in wealthier nations, such as the United States and the United Kingdom. These countries are among the wealthiest in the world, yet a high percentage of their population still live in poverty with their basic needs unmet.

Certain populations within a country are more likely to be victims of distorted development. Those who are left out of social development frequently share common characteristics. According to the economist Goulet, development should offer three things: life sustenance, self-esteem, and freedom (Thomas-Slayer, 2003). Those who are left out typically lack access to these due to discrimination, poverty, and/or lack of access to education. These barriers make it difficult for these people to make such basic decisions as where to live, whom to marry, how to earn a living, and with whom to engage in sexual relations. The barriers can lead to social problems such as AIDS, refugees, and slavery. For example, women frequently receive less than their share of the benefits of development. Although women perform two thirds of the work in the world, they receive only 10% of the income and own less than 1% of the property (United Nations, 2005). These three barriers are discussed in further detail in chapter 2.

Goals of This Text

This text will provide not only an introduction to common issues in international social work and social development but also frameworks for analyzing these issues. In this chapter, lenses through which the world is viewed were examined. One is physical (how we actually see the world) and one is theoretical (why different parts of the world have achieved higher levels of development and how can the situation be rectified). Depending on which lens is used, different reasons will be perceived for why conditions exist, and this will affect how solutions are devised. An approach from modernization theory standpoint will focus on conditions within that country to overcome internal limitations. It may attempt to create a free market economy to generate greater wealth. A dependency theory standpoint will examine the role of wealthier nations in creating the problem and will be more externally focused in determining the source of the problem. It may focus on creating greater independence for that nation. As each issue in this text is discussed, think about how its existence might be explained from either the modernization or

dependency standpoint. How has the issue developed as a result from forces within the nation or external to it?

Chapter 2 will introduce common human rights documents, the framework that will undergird this work. International human rights documents provide a preliminary way to compare social development across cultures. Each chapter of this text will examine what human right is being violated through the existence of the issue. In the last chapter, a possible roadmap to achieving social development will be discussed, the Millennium Development Goals from the United Nations. Throughout this text, the impact of culture on the development of an issue and how the three common barriers—poverty, discrimination, and lack of education—can foster their growth will be examined. This text will not only increase the reader's knowledge of issues in international social work but will also deepen his or her understanding of how and why the issues vary from culture to culture.

2

Human Rights

Sustainable human development means expanding all people's choices and creating the conditions for equality so that they may realize their full potential. This goal is unrealizable if all human rights—economic, social, cultural, civil and political—are not promoted, preserved and defended. (UNICEF, 1999, p. 1)

In the aftermath of World War II and its atrocities, the fledgling United Nations decided to create a Universal Declaration of Human Rights (UNDR). This document would elucidate the rights to which all humans would be entitled, regardless of nationality, political system, religion, or any other grouping, simply by the fact of their humanity. The United Nations appointed a special commission to draft the document and appointed as its head the United States representative to the UN, Eleanor Roosevelt. Eleanor Roosevelt was the widow of President Franklin D. Roosevelt and a formidable advocate for the poor and disenfranchised in her own right. The final document was presented to the General Assembly of the United Nations and adopted on December 10, 1948.

The full text of the UNDR is in Appendix A of this text (see Box 2.1 for a summary). The rights it defines were intended to be universal and indivisible—that is, all humans have the right to them regardless of culture, political system, ethnicity, or any other characteristic (universal), and a country cannot select which rights it should grant; all humans should have all rights (indivisible).

Within the UNDR, there are three areas of rights: political and civil rights; social, economic, and cultural rights; and collective rights. Political and civil rights are often referred to as “negative freedoms” as they require a government to refrain from an overuse of its power against individuals. Included in this are rights such as freedom of speech and the right to a fair trial. The second grouping of rights—social, economic, and social

BOX 2.1 Summary of the Rights Contained Within the Universal Declaration of Human Rights

- Article 1: All humans are born free and equal in dignity and rights.
- Article 2: Everyone is entitled to all of the rights in the UNDR regardless of any distinction.
- Article 3: The right to life, liberty, and the security of the person
- Article 4: Prohibition of slavery
- Article 5: Prohibition of torture
- Article 6: Right to recognition as a person before the law
- Article 7: All must be treated equally under the law.
- Article 8: Right to a remedy of any violation of these rights
- Article 9: Prohibition of arbitrary arrest, detention, or exile
- Article 10: Right to a fair trial
- Article 11: People shall be presumed innocent until proven guilty.
- Article 12: Right to freedom from arbitrary interference with private life
- Article 13: Right to freedom of movement
- Article 14: Right to seek asylum
- Article 15: Right to a nationality
- Article 16: Right to marry; marriage must be consented to by both parties; the family is entitled to protection from the state
- Article 17: Right to property
- Article 18: Right to freedom of thought, conscience, and religion
- Article 19: Right to freedom of opinion and expression
- Article 20: Right to freedom of assembly and association
- Article 21: Right to participate in the government of one's country
- Article 22: Right to economic, social, and cultural rights necessary for dignity and free development of personality
- Article 23: Right to work and equitable compensation
- Article 24: Right to rest and leisure from work
- Article 25: Right to an adequate standard of living, including food, clothing, housing, and medical care
- Article 26: Right to education
- Article 27: Right to participate in cultural activities and to share in scientific achievements
- Article 28: Right to a world order in which these rights can be realized
- Article 29: Each has duties to their community; rights shall be limited only in regards to respecting the rights of others.
- Article 30: None of the rights may be interpreted as allowing any action to destroy these rights.

rights—are referred to as “positive freedoms” as they require a government to take action for them to be realized for individuals. They include such rights as medical care, the right to an education, and the right to a fair wage. The last group, collective rights, are rights for groups of people and include the rights to religion, peace, and development.

A declaration does not impose on a ratifying government any obligation to fulfill the principles contained within the document; that is the purpose of a covenant, convention, or treaty. To codify the rights within the UNDR, there has been a succession of covenants and conventions that nations must ratify in order to be bound by its provisions. In this process the universality and indivisibility of human rights was immediately called into question. The two most powerful nations in the post-World War II era, the United States and the USSR, had substantially different ideas about the relative importance of the sets of rights and governmental responsibility for them. The United States argued that its Constitution was in concordance with civil and political rights, but the economic, social, and cultural rights went against the American cultural preference for individual responsibility. The USSR had the opposite stance: they had a totalitarian government that granted few civil and political rights, yet its communist ideology supported the importance of economic, social, and cultural rights. This division led to these sets of rights being split into two different covenants (Amnesty International, 2005). The International Covenant on Civil and Political Rights (ICCPR) was ratified by the United States in 1992, but it has not yet ratified the International Covenant on Economic, Social and Cultural Rights (ICESCR). The USSR ratified both in 1973, one of the first countries to do so (UNHCR, 2006a, 2006b), but tended to grant more of the economic, social, and cultural rights than the civil and political rights.

Universal and Indivisible?

There continue to be arguments over the universal and indivisible nature of the human rights in the UNDR. Governments argue that the human rights should not be regarded as indivisible. The United States has yet to ratify the ICESCR, illustrating its lack of support for economic and social rights, while groups of nations in Asia and Africa argue that civil and political rights should be secondary to the more urgent human needs recognized through economic and social rights (Ghai, 2001). China states that while it is vilified for not granting civil and political rights, it does however meet economic, social, and cultural rights, which the United States does not. It argues that it is more important to meet the basic human needs for life than the more abstract political rights (Human Rights Watch, 1996).

Different countries have argued that the rights are not universal and they should not be mandated to abide by that which is not appropriate in their culture. They state that human rights are not “one size fits all,” but vary according to culture. This is known as *cultural relativism*. Some Asian countries argue that the document reflects a Western approach to rights, with a greater emphasis on the individual than on the society. They state that the community should be more important than the individual and prefer a strong government and deference to authority (Muntarhorn, 2005). Freedom of speech may be viewed as a threat to a harmonious society, a key value in Asian culture (Reichert, 2003).

Social workers may find themselves in a bind trying to recognize both the right to one’s culture as well as one’s human rights. George (1999) argues that human rights cannot be both universal and culturally relevant and states that social workers have put themselves in a dilemma by arguing for both human rights and the right to one’s own culture. For example, in some cultures women are treated as subordinate to men, yet the UNDR states that treating any person as less than another due to a characteristic is prohibited; it is discrimination. How can the traditional order of a society and the UNDR both be respected?

The United Nations has stated that these two ideals are not in opposition. The human rights declared in its conventions, covenants, and declarations are a minimum standard, and each culture can choose the most appropriate manner in which to realize those rights. Ife and Fiske (2006, p. 302) state that “universality does not mean ‘sameness,’ rather it is a principle that emphasizes the essential worth of every human being without the need to reach a certain status or fit a certain model of desirable citizen.” However, cultural variations may not be used in order to deny rights. While the right to one’s culture is protected within human rights, that right is limited in that it may not infringe on another protected human right (Ayton-Shenker, 1995). Thus, each culture and the ordering of society within it must be respected, but only to the extent that the traditional order of a society does not impinge on the human rights of another.

Other Human Rights Documents

Even before the development of the UNDR, there were standards for the treatment of people during war and conflict. First developed in 1864, these standards have evolved over the years and are known as the Geneva

Conventions. These conventions have established universal rules to protect victims of war and conflict. The Geneva Conventions state that people who cannot, or do not, take part in the conflict must be protected. This includes civilians as well as military personnel who have been wounded or have surrendered. All sides have an obligation to provide medical assistance to any wounded personnel, regardless of allegiance. Medical personnel are considered neutral and must not be attacked; they are marked by a standard emblem of a red symbol on a white background. In addition, prisoners of war are entitled to be treated with respect and must be allowed to exchange news with their families. An international monitoring body may visit prisoners of war to exchange this news and to ensure that they are being treated with respect.

The volunteers who assisted in the implementation of these new rules are known as the International Committee of the Red Cross. Today, the organization has evolved to include the International Conference of Red Cross and Red Crescent Societies and has recently recognized the Red Crystal from Israel as well. The symbols reflect the religious background of each: predominantly Christian nations use a red cross on the white background, while primarily Muslim nations use the red crescent. Israel uses a red diamond to represent the Star of David. These are the neutral organizations that ensure that the Geneva Conventions are implemented during conflict (International Committee of the Red Cross, 2006; Red Cross of Latvia, n.d.).

In the years since the UNDR was developed, a host of other human rights documents have been written focusing on more specific areas and more vulnerable populations. The first was the Convention on the Elimination of All Forms of Racial Discrimination (CERD) in 1965. This was followed by the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) in 1979, the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT) in 1984, the Convention on the Rights of the Child (CRC) in 1989, and the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families (ICRMW) in 1990 (UNHCHR, 2006c). Each of these has been adopted by enough members of the United Nations to have entered into force as a binding international agreement among the ratifying countries. CEDAW and CRC are particularly relevant to topics discussed in this book and will be discussed in detail in the relevant chapters.

Monitoring Human Rights

Although these conventions and covenants have been ratified by a vast majority of countries, it is clear that not all countries abide by their provisions. Many nations have been accused of violating human rights. The official body responsible for monitoring violations of the UNDR is the United Nations Human Rights Council. This Council was reorganized in 2006 after a series of protests that notorious human rights offenders sat on the council and dissatisfaction with the ineffectiveness of its predecessor, the Human Rights Commission. Although the United Nations has the responsibility for monitoring human rights abuses, there is little it can do in terms of enforcement. This was seen most recently in the genocides in Rwanda and Sudan. Although the United Nations agreed that genocide was occurring, little action was taken. The new council consists of representatives from 47 countries and will meet almost twice as often as the commission did. It is hoped that these changes will improve the ability of the council to monitor human rights, but concerns were immediately raised that human rights abusers such as Russia and China still sit on the council, and the council lacks the backing of the United States, one of the most powerful UN members (Wright, 2006).

The U.S. State Department produces a report each year assessing the level of civil, political, and worker rights, as recognized in the UNDR, in 196 countries. The purpose of this assessment is to promote democracy. Countries that are consistently assessed as faring poorly in these areas are typically non-democracies such as North Korea, Myanmar, and China. China, in response, has developed its own assessment of the United States that emphasizes more of the violations of social and economic rights, but also what it sees as violations of civil and political rights, including the high level of incarceration and government surveillance of its citizens in the fight against terrorism. The 2005 report is available at english.people.com.cn/200603/09/eng20060309_249259.html.

Nongovernmental organizations (NGOs) also take responsibility for monitoring human rights abuses; two of the more well-known in the United States are Human Rights Watch and Amnesty International. Both of the organizations regularly investigate and assess violations of human rights abuses in all countries. Their reports on many different topics are available on their websites. Amnesty International traditionally focused on violations of civil and political rights but recently stated that it has

broadened its mission to monitor economic, social, and cultural rights as well as civil and political ones as “there are many more prisoners of poverty than prisoners of conscience” (Amnesty International, 2005, p. 3).

The Human Rights Approach

These human rights documents and the rights contained within them will provide the undergirding of the discussion of issues in this text. Each issue in this book will be discussed together with the human right that is being violated through the existence of the problem. Jahan (2005, p. 2) states that “human development and human rights are closely linked as they have a common denominator—*human freedom* [emphasis original]. They both relate to choices or the lack thereof for all to live their life as they would.” Looking back on the previous chapter about social development, it becomes clear how lack of social development creates situations in which violations of human rights can thrive.

Three main barriers exist that prevent full access to human rights and the fruits of social development. These barriers are poverty, discrimination, and lack of education. In each chapter, we will discuss how these barriers assist in creating the issue and help to perpetuate it. The existence of poverty violates economic human rights—the right to an income adequate to sustain oneself. Poverty inherently prohibits access to the realization of social human rights. The lack of adequate income typically prohibits adequate housing, nutrition, and other necessities. Money confers independence and autonomy. Those living in poverty find their options are limited due to their lack of financial resources. This can create dependence on others or on the state to help them meet the basics needed for life, the basic human rights guaranteed to all humans. They are placed at further risk of violation of other rights through economic exploitation and discrimination due to their lack of financial resources to meet their basic needs.

Discrimination involves grouping people into a category and denying them full access to human rights based on that category. This category may be sex, gender, ethnicity, race, caste, social class, or any other categorization. While discrimination itself is a violation of human rights, these categories are used to deny access to other rights as well, including access to a job that pays a living wage, adequate medical care, a fair trial, and the right to vote. Lack of access to education is a larger problem than many of us realize: without an education, the individual is not only locked into

poverty but also placed at risk for the issues discussed in this text. This is due not only to their lack of education, but also to the fact that school serves as a protective activity to help shield children from exposure to social risks. Also, a parent's education helps his or her children to be healthier and more prosperous, particularly in the case of mothers.

These three barriers are often intertwined and difficult to separate. People are locked into poverty due to their lack of education, and they do not have access to education due to their poverty. They may be systematically denied education due to discrimination. As you read through the book, notice in each chapter how these issues affect people's lives and inhibit their access to human rights.

Applicability of the Human Rights Approach to Social Work

Contemporary human rights are based upon the ideal of social justice, a concept so central to social work that it is one of six values affirmed in our Code of Ethics. All people should be equal under the law and should have equal opportunities to develop to their potential. The UNDR can serve as a guide to putting into operation the often-vague concept of social justice. Skegg (2005) suggests that an approach to social work based on human rights and empowerment tells oppressed people that they have rights to the basics for life, as opposed to regarding assistance as a charitable handout. In addition, self-determination, a concept for which social workers often advocate, is protected under the UNDR. Focusing on violations of human rights can help social workers focus on social justice as opposed to individual pathology (Healy, 2001).

The concepts and theories typically used in social work can aid in analyzing the issues to be discussed in this text. The systems perspective that is central to the social work perspective will continue to be valuable here. We regard the individual as the micro level, the family as the mezzo level, and communities or nations as the macro level. Try to assess in each chapter how the individual is affected by events occurring on higher levels and how the macro system is affected by events occurring on the mezzo and micro levels. For example, the family of an individual who lacks access to education will be more likely to live in poverty and struggle to meet their basic needs, and it impedes the development of the nation if its workforce is uneducated and struggling with social problems. The macro level will in turn affect the micro level because when the nation

is struggling economically due to the lack of development, it will have difficulty affording adequate education. As you read each chapter, you will see the linking of these issues. An issue in one chapter will often make reference to issues described in detail in other chapters. Just as human rights are universal and indivisible, unfortunately so are the problems.

The following chapters will examine various violations of human rights. These are not the only violations occurring, nor are these the only countries in which they occur—they are simply an illustration of the violations that occur all too often. Using the human rights framework, this text will examine the social issues, how culture has affected their development, and what people are doing to try to solve the problems.

World Wide Web Resources on Human Rights

Access to all United Nations treaties: www.ohchr.org/english/law/index.htm

Amnesty International (www.amnesty.org): One of the world's largest international voluntary organizations dealing with human rights and political repression.

Bayesky.com (www.bayefsky.com): Provides a range of data concerning the application of the UN human rights treaty system by its monitoring treaty bodies since their inauguration in the 1970s.

Global Rights (www.globalrights.org): Nonprofit human rights organization active in more than 20 countries, working directly with organizations and human rights advocates inside each country to help groups and individuals become more effective within existing infrastructures by helping local organizations build their internal capacities for challenging injustice.

Human Rights First (www.humanrightsfirst.org): “Works in the United States and abroad to create a secure and humane world by advancing justice, human dignity and respect for the rule of law,” to guarantee observance of human rights and to strengthen independent human rights advocacy at the local level.

Human Rights Internet (www.hri.ca/index.aspx): An online resource, information, and documentation center for human rights actors, organizations, and interested individuals around the world.

Human Rights Watch (www.hrw.org): Dedicated to protecting the human rights of people around the world by investigating and exposing human rights violations and holding abusers accountable.

HURISEARCH (saw2.nidelven-it.no:8080/search/search.jsp): An excellent limited-area search engine that searches the content on the sites of over 1,300 human rights NGOs in 58 different languages. Allows “one point access to all human rights information published by human rights organisations worldwide, and particularly human rights NGOs.”

Interights (www.interights.org): Aims to enforce human rights through law, providing protection and redress, in particular regions and on issues of strategic focus; to strengthen human rights jurisprudence and mechanisms through the use of international and comparative law; and to empower legal partners and promote their effective use of law to protect human rights.

International Network for Economic, Social and Cultural Rights (www.escr-net.org/EngGeneral/home.asp): A coalition of organizations and activists from around the world dedicated to advancing economic, social, and cultural rights.

Project Diana: An Online Human Rights Archive (www.yale.edu/lawweb/avalon/diana/index.html): The Yale Law School’s segment of the International Human Rights Database project called DIANA (www.law-lib.utoronto.ca/Diana/about.htm), with many documents and links.

Social Watch (www.socialwatch.org): An international NGO watchdog network monitoring poverty eradication and gender equality.

United Nations High Commissioner for Human Rights (www.ohchr.org/english): Publications, documents, treaties, databases, special programs, conferences, links.

United Nations Human Rights Page (www.un.org/rights): Master page for all United Nations sites on human rights, with full documentation and activities.

UN Human Rights Treaty Information Portal (www.humanrightsinfo.com): A site with multiple links to other sites with information on human rights.

United States Department of State (www.state.gov/g/drl/rls/hrrpt): Country Reports on Human Rights Practices: Texts of yearly reports by the U.S. Department of State, and related documents.

University of Minnesota Human Rights Library (www1.umn.edu/humanrts): Contains more than 25,000 documents relating to human rights. Included in this is the Human Rights resource Center at hrusa.org.

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3

Forced Labor

Article Four of the Universal Declaration of Human Rights states, “No one shall be held in slavery or servitude; slavery and the slave trade shall be prohibited in all their forms.” While many people in the United States believe that slavery ended after the American Civil War, the unfortunate truth is that slavery still continues around the world. A relatively small percentage of those enslaved are kept under conditions similar to those with which we are familiar from the southern United States. Currently, most slaves are not bought and sold; there are no ownership papers. Today’s slaves typically are not born into slavery and kept enslaved their whole lives, except for certain countries in Africa (as discussed later in this chapter). Most of those enslaved will be slaves for only a few years of their lives. Slavery now occurs more often as a result of desperation resulting from poverty rather than from one’s freedom status at birth. Modern slavery is much more “cost effective” than old-fashioned slavery in that people are enslaved for only as long as they are productive and able to earn money. After their ability to earn a profit has been exhausted, they are discarded, leading Kevin Bales, author of a book on this topic, to title his book *Disposable People* (2004).

This new type of slavery is often termed “forced labor.” The International Labour Office (ILO), a United Nations agency, defines forced labor as “all work or service which is exacted from any person under the menace of any penalty and for which said person has not offered himself [sic] voluntarily (ILO, 2005a, p. 5). It is important to note the two separate pieces of this definition: first, the work is performed due to the threat of a penalty, and second, the work is not undertaken voluntarily.

BOX 3.1 Identifying Forced Labor in Practice

Lack of consent to (involuntary nature of) work (the route into forced labor)

- Birth/descent into “slave” or bonded status
- Physical abduction or kidnapping
- Sale of person into the ownership of another
- Physical confinement in the work location (in prison or in private detention)
- Psychological compulsion (i.e., an order to work, backed up by a credible threat of a penalty for noncompliance)
- Induced indebtedness (by falsification of accounts, inflated prices, reduced value of goods or services produced, excessive interest charges, etc.)
- Deception or false promises about types and terms of work
- Withholding and no-payment of wages
- Retention of identity documents or other valuable personal possessions

Menace of a penalty (the means of keeping someone in forced labor); actual presence or credible threat of:

- Physical violence against worker or family or close associates
- Sexual violence
- Threat of supernatural retaliation
- Imprisonment or other physical confinement
- Financial penalties
- Denunciation to authorities (police, immigration, etc.) and deportation
- Dismissal from current employment
- Exclusion from future employment
- Exclusion from community and social life
- Removal of rights or privileges
- Deprivation of food, shelter, or other necessities
- Loss of social status

(ILO, 2005a, p. 6)

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These penalties can be financial, psychological, or physical in nature, while the lack of consent can result from a variety of circumstances (see Box 3.1). These threatening conditions differentiate it from poor working conditions and work not performed for a decent wage (ILO, 2005a). In summary, forced labor is defined not by the type of labor performed but by the type of relationship between the worker and the employer (ILO, 2005a) and violates Articles 23, 24, and 25 of the Universal Declaration of Human Rights regarding freedom of employment and the right to fair compensation. The ILO estimates that currently a minimum of 12.3

million people are being exploited through forced labor, the majority of them women and girls.

Bales (2004) defined this type of work as “modern slavery.” He is similarly careful to offer a narrow definition of modern slavery by defining it as “the total control of one person by another for the purpose of economic exploitation” (p. 6). Bales estimates that 27 million people are enslaved in the world today, more than the total number of Africans kidnapped from Africa during the entire trans-Atlantic slave trade. Although this is substantially greater than the minimum 12.3 million estimated by the ILO, he states that this is a conservative figure, pulled together from various reports and used when there seemed verifiable information that this was an accurate count.

What makes people vulnerable to exploitation through slavery is some type of difference from others in their society (Bales, 2004). While in America’s history that difference was based on skin color, in today’s slavery these differences encompass a range of possibilities. As discussed earlier in this book, poverty, lack of education, and discrimination place people at higher risk of a number of social problems. When people have difficulty providing for themselves and their families, they may be more willing to take chances for a job for the money they require for basic needs. Discrimination within a society can limit their opportunities to obtain a wage through safer methods. This chapter will highlight limited opportunities due to discrimination based on caste, sex, socioeconomic status, ethnicity, and citizenship status.

Relationship to Trafficking

Forced labor often has a relationship with trafficking, although they do not have to occur together. The definition of trafficking, as defined in the UN Trafficking Protocol of 2000, is:

“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, 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 shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs.

Pearson (2001) clarifies the three primary defining elements of trafficking. The first is the movement of a person: some kind of migration is involved. Thus, the person must leave, or be taken from, the place in which he or she was residing and moved to a new place. There is much economic migration in the world, but Ehrenreich and Hochschild (2002) identify four main global streams of migration. One travels from Southeast Asia to the Middle East. A 2005 report of the U.S. government cited specifically the countries of Kuwait, Qatar, Saudi Arabia, and the United Arab Emirates as countries with problems involving forced labor and trafficking (U.S. Department of State, 2005a). Another pathway leads from the countries of the former Soviet Union to Western Europe, a third from Mexico to the United States, and the last from Africa to Europe.

The second element of the definition of trafficking is that deception or coercion is involved. Although the migration might be voluntary, the person is not truly aware of what lies ahead. Many people migrate willingly for better-paying work, but it may become trafficking when they arrive at their destination and realize the work is not what they were promised. They may have been promised a good wage for domestic labor but find that they are imprisoned in a house and paid nothing. They may have signed a contract for factory labor only to arrive and find they have been sold into prostitution.

The last condition of the definition of trafficking is that the people are placed in conditions of forced labor or servitude. As previously mentioned, poor economic or working conditions are not sufficient to constitute forced labor or trafficking, as the worker is free to leave if he or she chooses.

Globally, only about 20% of forced labor is as a result of trafficking, but this figure varies greatly by region. In Asia, Latin America, and Sub-Saharan Africa, less than 20% of forced labor victims have been trafficked, but in industrialized countries such as the United States, Western Europe, and Japan, as well as the Middle East and Northern Africa, more than 75% of forced laborers are victims of trafficking (ILO, 2005a). A rapidly growing pathway from Eastern Europe to Western Europe has fueled an explosion of sex trafficking of women from Russia and its former satellites

(Malarek, 2004). In an article to educate its members about human trafficking within the borders of the United States, the National Association of Social Workers estimated that 18,000 to 20,000 people are trafficked into the United States every year (Fred, 2004).

Types of Forced Labor

The ILO (2005a) breaks down the types of forced labor into two basic types: that imposed by the state or other armed forces, and that imposed by private citizens. The exploitation committed by private citizens can be further broken down into slavery for economic gain or for sexual exploitation. Additionally, the victims of exploitation by private citizens may also be the victims of trafficking.

Exploitation by the State

Approximately 20% of forced labor victims are exploited by the state or armed forces—approximately 2.5 million people (ILO, 2005a). According to the ILO, states do have some authority to mandate service, but only under certain specific conditions. Those conditions include compulsory military services; normal civic obligations, such as jury service; and emergencies (Anti-Slavery International [ASI], 2001a). The country most infamous for exploitation by the state is Myanmar (formerly known as Burma). Complaints have been filed against Myanmar for many different types of exploitation. Some involve forcible enlistment in the armed services; others involve conscription to other types of labor, including construction projects, sentry duty, and transportation duties. While official law prohibits these actions, they continue, especially in rural areas (ILO, 2005a).

In 2004, the United Nations Committee on the Rights of the Child issued a report about Myanmar's compliance with the Convention on the Rights of the Child. It found a variety of concerns, including the forcible recruitment and enlistment of child soldiers. Myanmar has more child soldiers than any other nation. It is estimated that approximately 70,000 of Myanmar's 350,000 soldiers are under the age of 18 (Human Rights Watch [HRW], 2005a). Myanmar also forces its citizens to provide free labor for the government. Villagers are required to travel from their homes to build roads, dams, and temples as well as act as porters for the

military. Not only are villagers not paid for this compulsory labor, they are forced to provide their own food and face physical consequences, including beatings and death, if they do not fulfill their duties (HRW, 2001; ILO, 2005b).

In some cases, it is not the state that requires the labor, but those fighting against it in rebel or militia groups. Uganda provides an illustration of this problem. The Lord's Resistance Army (LRA), a rebel group, has been kidnapping young boys and girls. It is estimated that in late 2002 and 2003 alone, over 8,000 children were abducted by the LRA (HRW, 2004). The girls become "wives" of the commanders of the LRA, while the boys are forced to become soldiers. To ensure that the boys do not sneak off, they are ordered to commit atrocities such as murdering their own parents, thus rendering the boys emotionally unable of returning to their former lives (Amnesty International, 2005; UNICEF, 2002). This is discussed further in chapter 4 on international child welfare.

Economic Exploitation by Private Citizens

The largest proportion of forced labor victims (64%) are used by private citizens for economic exploitation—approximately 7.8 million people. Fifty-six percent of them are women and girls (ILO, 2005a). There are a number of methods through which people are exploited financially. The primary ones are debt bondage (also known as bonded labor), domestic work, and what we will term "old-type slavery." Approximately one-third of victims of trafficking experience economic exploitation (ILO, 2005a).

Debt Bondage The most common type of forced labor worldwide is debt bondage. Debt bondage occurs when a worker is lent a sum of money by an employer and is unable to leave this employment until the debt is paid. However, through a series of mechanisms, the debt can be impossible to pay. For example, the employer may charge enormous interest rates, ensuring the debt continues to grow. The employer may also charge large sums for (substandard) food, shelter, and clothing while paying the worker below-market wages. Many workers trapped in debt bondage are illiterate and thus unable to track their debt. International law defines debt bondage as:

The status or condition arising from a pledge by a debtor of his/her personal services or those of a person under his/her control as

security for a debt, if the value of those services as reasonably assessed is not applied towards the liquidation of the debt or the length or nature of those services are not respectively limited or defined (“Supplementary Convention,” 1957).

Debt bondage is most prevalent in South Asia, including the countries of India, Pakistan, Bangladesh, and Nepal. Although the ILO (2005a) estimates that there are a minimum of 7.8 million people in economic forced labor, Bales (2004) estimates that 15 to 20 million people are enslaved through debt bondage in South Asia alone. Debt bondage illustrates very clearly how certain segments of society are most at risk. With regard to debt bondage, research has found that women tend to suffer disproportionately to men—through sexual and physical abuse, indirect bondage through their husbands, and heavier workloads (ILO, 2005b). Further, those of the lower castes are much more likely to be in debt bondage. The caste system in India, although outlawed, still permeates the thinking of many Indian citizens. The majority of those in debt bondage (80% to 98%) are from the “Scheduled Castes,” or Dalit people (ASI, 2001b), thus illustrating how discrimination can lead to poverty, which can lead to desperation. People from this low-caste group are traditionally assigned “dirty” jobs such as sweeping, removal of animal and human waste, and snake catching. Historically, higher-caste people would not allow themselves to become unclean through performing these tasks, and thus the Dalits were mandated to do so without any payment. Debt bondage originated in this tradition of giving a service to upper-caste people without payment (ASI, 2001b).

Accurate estimates of the numbers of people trapped in debt bondage are very difficult to obtain, but current estimates are 20 million people in India, between 2 and 7 million in Pakistan, and 3,000 in Nepal (ASI, 2001b). Nepal had an estimated 70,000 and 110,000 bonded laborers, but in 2000, the Nepalese government outlawed debt bondage, which greatly reduced the numbers. Unfortunately, few provisions for transition were made for the freed laborers, and they were either pushed off their land by the landlords or left of their own accord (ASI, 2001b). The instability of the political situation in Nepal has made it difficult for assistance programs to help rehabilitate former bonded laborers (ILO, 2005b).

India has the highest number of people enslaved in the world (Bales, 2004), although bonded labor is illegal in India. The government has set

up programs to assist workers who are freed from bonded labor. When the laborers are identified and registered, they are eligible for a grant of 6,250 rupees in money, land, or livestock. They can receive 500 rupees in cash immediately to help them get home or get started. However, corruption can prevent this system from working as well as it could. In some cases, corrupt officials help the landlord claim the money in the name of the laborer, leaving the laborer still in bondage and no better off (Bales, 2004). A nongovernmental organization, Volunteers for Social Justice (www.vsj-ddva.org), has been working in India to arrange the release of people kept in debt bondage and to punish those who commit crimes against people of the Dalit caste.

Brazil also experiences cases of debt bondage, but it looks quite different than in South Asia. In Brazil, where an estimated 25,000 people are enslaved (Blount, 2005), debt bondage primarily affects men, although women and children may also be affected. The economic boom in the 1960s and 1970s in Brazil caused a large-scale migration from rural to urban areas. This mass migration increased poverty in the urban areas and resulted in the creation of slums known as *favelas*. The economic boom has passed and the poverty in the *favelas* has worsened, increasing the desperation of workers eager to support their families.

Workers, primarily men, are lured to rural areas by promises of good pay for making charcoal. Bales (2004) describes how recruiters from the charcoal makers (known as *gatos*) will go into the slums and announce they are looking for workers. They may use loudspeakers or go door to door to spread the word of these employment opportunities. They promise transportation to the work site, food and salary, and free trips home for family visits. The *gatos* will even give some men money to give to their families before they leave. They transport them to the work site and buy as much food as the men like on the trip. However, when they arrive at the work site, they are informed they must repay the cost of the food and transport, as well as any money they have already been given.

Several factors change this activity from simple economic exploitation to forced labor. The worksites are typically located in the middle of the forest and may easily be 50 miles from the nearest town and perhaps 1,000 miles from their home, which acts to imprison the workers as they have no way to leave. The *gatos* will also collect the worker's state ID card and labor card. As people are unable to gain employment without these

documents, the workers are unable to leave as they will not be able to get another job without them. Third, as with debt bondage in India, there is no honest accounting of what the debt owed is and how the worker's labor counts to reduce the debt.

A fourth factor also acts to keep these men in their enslaved conditions: their cultural beliefs about debt. In Brazil, it is extremely important to repay your debts, and a person who does not do so is looked upon very poorly. Thus, the men are reluctant to leave the worksite while they still believe they owe a debt to their employers for the transportation and food. Although the men were not informed as to how great a debt they owe or how their wages were used to help pay it off, their cultural sense of honor binds them until the debt is repaid. If men did try to escape, they were often chased down by dogs and brought back to the camp (Bales, 2004).

For most men, this slavery is not long-lasting: a typical stint is 3 months to 2 years. The charcoal camps move frequently as they exhaust the surrounding forest, and the work is so physically punishing that most men are not able to perform it for great lengths of time.

The situation in Brazil has been getting more media attention. Articles have appeared in such publications as *Rolling Stone* (Davidson, 2005) and on Bloomberg.com (Blount, 2005). Bales (2004) states that this media attention has helped to lessen the debt bondage in Brazil. This is particularly true when such attention has led to economic pressure. As of September 2004, 2,078 people had been freed from forced labor. Unfortunately, while some workers have been released from these conditions, especially women and children, no provision has been made to meet their still-existent economic needs. Additionally, such activities have led to violence: in January 2004, three labor inspectors and their driver were killed as they were investigating forced labor (HRW, 2005b).

Domestic Workers In certain countries, such as Sri Lanka and the Philippines, women are trained to enter the household service of employers in other countries (Waldman, 2005). They will leave their own families for years at a time so they can travel abroad and earn money they cannot earn in their own country. Their destination countries are often in Asia or the Middle East, although Western European countries and the United States are not uncommon. These workers are typically traveling voluntarily and may even have signed a contract stipulating their work conditions

and salary. However, even with these seeming protections, their travel can turn to trafficking all too easily.

Domestic workers are particularly vulnerable to situations of forced labor due to their isolation. They are in a new country and are working in their employer's household. They may or may not be in the host country through legal channels. Even if they have entered legally, an abusive employer may take their passport, thus rendering them unable to flee. If they have signed a contract, it may be torn up or replaced with a new one with different conditions. The workers are told they cannot go to the authorities of that country about the abuse as they will not be believed. Once they are isolated, the workers work long hours every day and are paid minimal amounts of money, or even nothing at all. They are given poor places to sleep, such as the floor, and are forbidden from leaving the house. A number of domestic workers have been subjected to physical and sexual abuse (Waldman, 2005).

A study conducted of Burmese immigrants employed in Thailand as domestic workers found that most of them had been exploited by their bosses. Most of the women worked more than 8 hours a day with no holidays and received lower compensation than Thai women (if they were paid at all) (Santimatonedol, 2005). Many women and girls emigrate from Indonesia to Malaysia for employment as domestic workers. More than 90% of Malaysia's 240,000 domestic workers are Indonesian. They are vulnerable to abuse in Malaysia because of its harsh immigration policies. If they complain of their abuse, they themselves are typically prosecuted for illegal immigration instead of receiving assistance (HRW, 2005c). The following is a typical story:

“Sujatmi told me that I would take care of her children and would be paid 300,000 rupiah [\$33] a month. I worked at Sujatmi's house for three months. Sometimes I did not get any food. I woke up at 4 A.M. and slept at 10 P.M. I would sweep the floor, wash the clothes, and take care of the children. Sujatmi shouted at me, ‘You are a poor person. You have to know your position, you are here to work.’ I was not allowed to go out of the house. I had not seen my family since I left home. I was not paid any salary. Sujatmi would say to me, ‘I have your 300,000 rupiah with me and I will take you back . . . to see your family.’ She was lying. She never took me home. She hit me when she

was angry. Three times she hit. Once she slapped my face and then kicked me above my right hip. It hurt and swelled up. I did not go to the doctor. She laughed when I asked that I want to see the doctor."

—Asma, 15, Medan (© 2005 Human Rights Watch)

The United States is not immune to these abuses of immigrant domestic labor and other instances of forced labor. There have been a number of cases where women have been brought to the United States as domestic workers only to find themselves imprisoned and forced to work long hours, often over 12 hours a day (Zarembka, 2002). There is no oversight or agency to supervise those on a domestic worker visa as there is for an au pair visa. Other locations for economic exploitation can include factories, farms, and clothing manufacturers (Crary, 2005). In one example from 2007, legal immigrants from Guatemala filed a lawsuit claiming that they had been subjected to forced agricultural labor. Once they entered the United States, their passports were taken, they were forced to work nearly 80 hours a week for less than minimum wage, and they were threatened with jail and deportation if they complained (Bernstein, 2007).

Progress has been made though to protect those in the United States. In 2000, the U.S. Congress passed a law allowing prosecution for those who control trafficking victims not just by physical means, but also through threats, psychological coercion, or deception (Zarembka, 2002). Illinois is the first state to allocate substantial resources to combat the problem of human trafficking within its borders. Chicago has been labeled as a hub for human traffickers, and Governor Blagojevich developed a coalition to address the problem in 2005 (Illinois Department of Human Services, 2005).

"Old-Type Slavery" In certain countries in Western Africa, such as Mauritania and Niger, pieces of the old form of slavery persist. In these areas, slavery is something into which people are born, and it lasts a lifetime. While slavery has been outlawed by the laws of these countries, it continues to exist because the ruling class is not interested in enforcing the law. It is in these areas that slavery based on racism and skin color continues. Slave owners are of Moorish descent, while slaves are of African descent (Bales, 2004). Slaves may be responsible for herding cattle

or performing agricultural labor or domestic work. Slaves are the property of their owners and can be sold or given to a new owner. They are not paid for their labor and are given no choice about their work and lack freedom of movement. A recent study estimates that there are 43,000 slaves in Niger alone (ASI, 2004).

Bales (2004) describes the strange relationship between master and slave in Mauritania. The family of the slave has often served the family of the master for generations; thus, a strong emotional bond can arise between master and slave. While disobedient slaves are punished, elderly slaves are often treated with great care. Religious authorities support the notion that slaves deserve their bondage. They are taught that God has placed them in bondage and that to leave would be to disobey God's will. As there is no official slavery in Mauritania, there is also no assistance available for former slaves. If they leave their master's household, they are often unable to locate other work (Bales, 2004).

National movements have begun to try to stop slavery in these countries. In Niger, a group called Timidria was founded in 1991 to eliminate slavery and all forms of discrimination in Niger through nonviolent means. Although the organization has faced resistance from the slave-owning classes, it has grown into a strong movement with thousands of members. Timidria operates through multiple methods to accomplish its goals. It holds meetings and uses poetry and drama to spread the messages that slavery is illegal and that members of the population do not have to be enslaved. Members also lobby the government and use the media to spread their message. They provide assistance to former slaves, including microcredit and schooling (ASI, n.d.). Timidria worked in collaboration with Anti-Slavery International to conduct the aforementioned study that identified 43,000 enslaved people in Niger. This study led to a new law in Niger in May 2004, making the enslavement of a person punishable by up to 30 years in prison. However, activists in Timidria continue to face governmental intimidation (ASI, 2005).

Sexual Exploitation by Private Citizens

Approximately 11% of forced labor victims are exploited through sexual exploitation—approximately 1.4 million people currently. Ninety-eight percent of these sexually exploited individuals are women and girls. Just under half of victims of trafficking experience commercial sexual ex-

ploitation (ILO, 2005a). While some victims of economic exploitation, such as those in domestic labor, are sexually exploited as well, many others find that sex work is their main “employment.” Sexual trafficking is often an outcome of dual oppression: poverty and gender discrimination. Poor girls often have no other means of economic survival or perceived skills other than the sexual use of their bodies. Gender discrimination and poverty have often barred them from an education or other skills, while cultural expectations in many parts of the world require females to support their families.

Sexual exploitation provides a clear example of how voluntary migration may become trafficking. While some of the women realize that they will be working as prostitutes, many do not until it is too late. One study found that only 25% of the trafficked women who were clients of the Dutch foundation STV were aware that they would be working in the sex trade, and even the 25% who were aware of the nature of their “employment” were misled as to the terms and conditions of their work. Thus, none of the women in this study were aware of the conditions under which they would be working (Jordan, 1997, as cited in Roby, 2005).

Turkey provides another example of this phenomenon. It has become a destination country for women from Eastern Europe seeking better employment. While prostitution is legal in Turkey, many of the immigrating women are forced into it. After they enter the country, their passports are taken away and they are beaten into submission and forced into prostitution. They are kept locked up unless they are being sold to a customer (Smith, 2005).

Thailand has become both a destination and a sending country. Women from China, Myanmar, and Cambodia are trafficked into Thailand, while Thai women are trafficked abroad to places such as Japan and Taiwan. The Thai government is investigating cases of Thai women marrying Taiwanese men only to find that when they move to Taiwan, they are forced into prostitution (Tumcharoen, 2005). Other Thai women have entered Japan legally under “entertainment visas” believing that they will be working in dance clubs, only to find themselves forced into prostitution (ILO, 2005b). Other Thai women who emigrate to Japan are aware that they will be working in the sex trade, but they are unaware they will accumulate large debts to the traffickers, which will place them in servitude. They may have their passports confiscated by the traffickers or be sold to Japanese gangsters after their arrival in Japan (Onishi, 2005).

As stated above, some may realize they will be working in the sex trade, but it is likely they did not realize what it actually means to work as a prostitute. When village girls in Thailand were asked what a prostitute was, the most common answer was “wearing Western clothes and eating in restaurants” (Caye, 1996, as cited in Bales, 2004). These women are typically from rural areas and seeking to avoid poverty. Some girls are sold by their parents into prostitution for the money. While some families are truly desperate, others want the cash for consumer items such as television sets (Ecumenical Council on Third World Tourism, 1992, as cited in Brown, 2000). The Culture Box at the end of this chapter provides a more in-depth look at the sex trade in Thailand.

The money that girls are able to send back to their villages encourages families to send their daughters to work in the sex trade. Yunnan province in China is sending an increasing number of its girls to work in the sex trade in Thailand. Their wages are paying for large new houses with air conditioning for their families (French, 2005). Poor women from Bangladesh and Nepal will emigrate to India to find paying work. While not all women in the sex trade are forced into it, virtually all have gotten into it due to a lack of other economic options. These conditions are illustrated by the following case study summarized from Bales (2004):

Siri was the daughter of poor rice farmers in the north of Thailand. Her parents may have known the conditions to which they were sending her, but selling a daughter, while difficult, is an acceptable way for a family to survive financially. Siri wanted to help her family and went willingly. Siri was sold to a brothel for \$4,000, but was told she must repay \$16,000 in order to earn her freedom. Cost for food, rent and medical care would be deducted from her earning as well. In order to earn this money, she was told she must have sex with 10 to 15 men each night.

Horrified at the prospect, Siri ran away at the first opportunity. However, she was on the street with no money, and she was quickly caught by the slaveholder, dragged back, beaten and raped. That night she was forced to take on a continuous string of clients until morning. The beatings and the work continued night after night until her will was completely broken. Due to the fact that Siri looked younger than her age, men were willing to pay more for her, and she became very profitable for her slaveholder. Despite this extra money she earned for

him, her debt would never be paid off as there was no accurate tracking of the debt and the girls were kept for as long as they were profitable. After a year at the brothel, she no longer wanted to risk escape. Her mother had recently visited her and encouraged her to stay.

While sex tourism has received a lot of media attention, most of the women working in the sex trade who serve foreigners are not working under conditions of forced labor. They face conditions of economic oppression, often due to limited opportunities for females, but they are not enslaved. Most of the trafficked women in the sex trade serve men of their own country (Bales, 2004; Pearson, 2001). Thus, when we focus on eliminating sex trafficking, sex tourism should be only a piece of that focus.

Other cultural factors such as religious customs can also lead to conditions of institutionalized sex slavery. Known as *trokosi* in Ghana or *devadasi* or *devaki* in India and Nepal, young virgin girls are given to the priest at a shrine if a calamity strikes the family. The girl is then bonded to the priest and expected to perform domestic and sexual services to him for no payment for the rest of her life. There is no limit as to the number of girls that can be bonded to each priest, so a “harem” may be developed. The girls can be beaten or denied food for infractions such as refusing sex, running away, or lateness (Pearson, 2001).

The tradition of paying a dowry in South Asia may also lead to sex slavery. If a girl's parents are unwilling or unable to pay a dowry, she may be sent to the city to find work. Typically, the work she is able to find will be in the sex trade. Thus, one is able to see how the double burdens of poverty and discrimination against women can lead to sex slavery in these highly patriarchal cultures.

Armed conflict is yet another condition that can lead to sex trafficking. The Lord's Resistance Army in Uganda will kidnap girls from among civilian populations and assign them to soldiers as “wives.” The girls are then forced to serve as sex slaves to these men, often bearing their children. If they manage to escape, they face numerous barriers in integrating back into society. Even if they are fortunate to have families that accept them back, they will need to recover from their trauma before they can continue their lives. Barriers such as delayed education, children from the rape, and disdain from society can be almost insurmountable (Thernstrom, 2005).

How Governments Affect Forced Labor

All immigration is due to what are termed “push and pull” factors: factors that push people to leave their current situation and factors that pull them to a new place. In economic migration, pull factors are typically promises of better-paying jobs, while push factors are typically the poverty and oppression found in their place of origin. Deep poverty is a common theme in the countries from where people are migrating. However, two countries create different push factors due to their governmental structures. While both Myanmar and North Korea are among the poorest countries in the world, the situation for their citizens is even direr due to the repressive nature of their governments. As discussed earlier in this chapter, citizens of Myanmar are subject to forced labor by the state. Citizens do not have the right of free movement, and if they leave the country without official permission, they are subject to sanctions. This clearly violates Article 13 of the Universal Declaration of Human Rights, which states, “Everyone has the right to leave any country, including his own, and to return to his country.” Thus their citizens are placed in a double bind when they emigrate for a better economic future. Not only are they likely to have legal difficulties with the country to which they move due to their lack of proper papers, but they may also have legal difficulties if they are returned to their home country.

Citizens of Myanmar emigrate across the border to Thailand but will be arrested by Thai police if they are discovered. Thailand has a very restrictive immigration policy and the number of official refugees allowed from Myanmar is very small (discussed further in chapter 5). Thus they are typically limited to jobs in the underground economy, which makes them very vulnerable to exploitation. In the spring of 2005, Thailand announced that all refugees from Myanmar must live in refugee camps by the Thailand/Myanmar border. This was seen as an attempt to weaken the pro-democracy movement and tighten relations between the governments of the two countries (HRW, 2005d). As discussed earlier, a study of Burmese women employed as domestic workers in Thailand found widespread exploitation. Employers ignored labor laws, regardless of whether the women were registered or unregistered immigrants. Their rights in terms of salary, medical care, and holidays were ignored, and some were abused by their employers (Santimatanedol, 2005).

International pressure has had mixed results in Myanmar. In September 2005, 3 months after it was named by the United States one of the three worst countries in Asia for human trafficking, Myanmar passed a law to ban the trafficking of persons with a penalty of life in prison (“Burma enacts,” 2005). However, in November 2005, Myanmar threatened to quit the ILO: it felt that ILO assistance to victims of forced labor by the state was offensive as it was an “invasion of Myanmar’s sovereignty” (as quoted in “Burma threatening,” 2005). The ILO warned Myanmar that it would face stiff sanctions if the situation did not improve (Jagan, 2005) and subsequently the situation did improve, with Myanmar releasing some labor activists from prison and temporarily halting prosecution of those who had complained of forced labor (Parker, 2006).

Citizens from North Korea will emigrate to China in hopes of jobs that will pay enough to allow them to send money back to their families in North Korea. However, 80% to 90% of the refugees from North Korea will become victims of trafficking in China, according to the U.S. State Department (2005b). Women are most at risk as their work tends to leave them isolated within a household. They may become domestic workers or nannies or sold into prostitution. The greatest number of trafficked North Korean women in China, however, are sold into forced marriage (Muico, 2005). China has an imbalance of men to women, and some men have difficulty finding a wife. This imbalance is due in large part to China’s “one child” policy, discussed further in the Culture Box of chapter 4. These women often face physical and sexual abuse in their marriage.

Trafficking victims are reluctant to approach Chinese authorities for fear of repatriation, however. Leaving North Korea without permission is a crime that can result in the death penalty. Typically, returned immigrants will spend 4 to 6 months in a labor camp. In the camp, they receive little food and are forced to work at hard physical labor. If they are pregnant, they are beaten into miscarrying or the newborn infant is killed. The following case study summarized from Muico (2005) illustrates the plight of these people:

My eldest daughter went to China to sell a porcelain bowl at a market but didn't return. To look for her, I took my youngest daughter and crossed the icy Tumen River into China in the middle of the night.

Once there, I worked as a nanny for a Korean-Chinese family. After a week, I was sent out to the market on an errand and when I returned, my younger daughter was gone. The family said they didn't know anything about it. I ran out of the house in despair searching for her. To get her back, I had to pay 4,000 yuan (\$500).

After two years in China, four men came to our house at night and kidnapped us. They were planning to sell us as "brides" to men in a mining town for 10,000 yuan (\$1,200) each. The neighbors suspected foul play and called the police. My daughter and I spent 40 days in a Chinese detention centre before being deported to North Korea. In North Korea, we were stripped naked, checked for hidden money and sent to a labour training camp. My daughter was beaten and interrogated on whether we met any South Koreans or missionaries in China. All we had for food was porridge made from black, rotten flour and watery soup. We worked in the cabbage patches and carried heavy logs from the mountains. The guards threw stones at us if we didn't run fast enough. I escaped after four days, but my daughter remained in prison for two and a half months. (Reproduced with kind permission from Anti-Slavery International.)

The Professional Role of Social Workers

Social workers can wear many of their hats in responding to conditions of forced labor in the world. We are able to work nationally and internationally, on the micro level and on the macro level. Within the United States, social workers can push for effective legislation to assist victims of trafficking in our country. These efforts can include both increasing awareness of the issue among citizens as well as providing effective services to victims, such as legal assistance, financial assistance, and help with food and housing. Social workers can also work for policies that punish those who exploit others into forced labor. In addition, these efforts can be focused on those who commit their crimes within our borders, as well as extraditing citizens who commit crimes in other countries.

In countries and areas from which people are emigrating or experiencing forced labor, social workers can use their education regarding community building and development to work to eradicate the conditions that support forced labor, including poverty and gender discrimination.

By working with indigenous leaders to support the community, social workers will be better able to work in a culturally sensitive fashion that will meet the needs of the community. Social workers can also seek employment at agencies in other countries that assist victims of forced labor.

Pearson (2001) identifies the following conditions as ones that can contribute to situations of trafficking. Many of these fall under the purview of social work:

- Poverty and unemployment
- Globalization of the economy
- Feminization of poverty and migration
- Development strategies such as tourism
- Situations of armed conflict
- Gender-based discrimination
- Laws and policies on prostitution
- Corruption of authorities
- High profits; involvement of organized crime
- Cultural and religious practices

Pearson (2001) also states that when working against trafficking, it is more effective to work on strengthening the rights of those oppressed than to work on oppressive responses such as more restrictive immigration policies or more severe penalties. The first will help eliminate the conditions that drive forced labor, while the second relies on “catching” the person who is committing the crime. The second may also work against those who are victims of forced labor by restricting their freedom of movement and perpetuating the violation of their human rights. For example, the Philippines and Bangladesh barred female citizens of their nations from emigrating for work as domestic workers due to the abuse that former workers had suffered. However, this only served to limit the official freedom of movement and did nothing to eliminate the root causes of why women were emigrating for employment. Therefore, it did not stop the practice but only drove it underground. Once women were forced to resort to illegal means to gain employment, it increased their vulnerability rather than reducing it (Pearson, 2001).

An example of empowering oppressed people, thus reducing their vulnerability to forced labor, can be found in the case of the Self-Employed Women’s Association (SEWA) of India (discussed further in chapter 7). Its goal is to assist self-employed women in South and South-east Asia who face personal barriers such as high rates of illiteracy, having

to care for multiple children, and living in slum conditions, as well as macro barriers such as exploitation by moneylenders and harassment by employers and officials. Today, SEWA is the largest single union in India and has founded a bank with 70,000 accounts in order to provide micro-finance loans to its members. The bank also provides insurance for its members, while the union assists with child care and legal aid. Through methods such as these, the women are able to provide for themselves and their families without resorting to forced labor.

Conclusion

This chapter has illustrated how the three vulnerabilities—poverty, discrimination, and lack of access to education—can lead to human slavery, a horror many thought long dead. Although it is experienced differently in different cultures and the specific vulnerabilities will vary from place to place, the phenomenon of enslavement remains. Social workers can play a unique role in stopping this violation of human rights. We are equipped to work on the micro level with the victim and also on the macro level to stop the conditions that create the atmosphere where this can occur.

What Can I Do Now?

- Use your consumer power. Buy products that are made as “Fair Trade.” This can include rugs marked with the “Rugmark” label to show they were not produced with child labor or coffee, and to show that workers are treated fairly. Boycotts are often not encouraged as that only directly hurts the slaves since the market for the product dries up. You can check companies’ records of human rights at www.responsibleshopper.org. Learn more at www.sweatshopwatch.org.
- Educate others as to the problem. Break the ignorance.
- Support groups that are working to solve the problem. See the section on websites to learn more about these organizations.
- Ask your state representatives to pass anti-trafficking legislation. See www.usdoj.gov/trafficking.htm for a sample law.
- Report suspected cases of trafficking. Approximately 15,000 people are trafficked every year into the United States. Call the hotline at 1-888-373-7888 to report cases of suspected trafficking.

Culture Box

SEX TRAFFICKING AND THAILAND

While prostitution has existed in Thailand for hundreds of years, as it has in many countries, the sex trade expanded greatly during the Vietnam War when American soldiers would visit Thailand on “R&R” (rest and relaxation). Thailand, especially Bangkok, has long had a reputation for its sex trade. It is uncertain how many women and children are currently serving as sex workers in this country: a conservative estimate is 200,000, with 20% of those being children (U.S. Department of State, 2004). While the total number has remained stable, the percentage of children involved has fallen since the 1990s.

In the past, prostitutes were poor Thai women primarily from the northern and more rural areas of Thailand. However, in recent years, they are increasingly from other countries such as Laos and Myanmar. Whether they are from Thailand or other countries, they are typically members of ethnic minorities, such as the Hill Tribes. The girls and women often come to Bangkok of their own accord in search of better opportunities. They may be escaping poverty, searching for a job, or simply looking for more excitement than is found in their village. In some cases, they are aware that they will be working as prostitutes, but they have little idea as to what that will actually entail, such as the conditions of the brothel and the number of customers they will be expected to serve each night. In other instances, they are sold by their parents to a procurer for a brothel. There is an informal network that will arrange for the girl’s transport. Often these brokers are known in the villages and are trusted. Parents sell their daughters to them for a sum of money; however, they may or may not realize they are selling them into prostitution. As noted above, even if they are aware that their daughters will be working as prostitutes, they have little realization as to the horrors that it can entail, such as exposure to AIDS and violence from customers and brothel owners.

Thai culture has had a large impact on the development of the sex trade in Thailand. Traditionally, there has been no stigma placed on men using prostitutes. Thailand was a polygamous society for many years and remnants of that remained in the acceptability of male use of prostitutes. It has been estimated that between 80% and 87% of adult Thai men have visited a prostitute (VanLandingham, Saengtienchai, Knodel, & Pramualratana, as cited in Bales, 2004). While sex tourism in Thailand has received a great deal of press, the vast majority of prostitutes are not enslaved. Those that are serve the “lower” end of the market, Thai laborers (Bales, 2004).

The economic boom in the 1990s added to this. While wealthy men had always been able to afford prostitutes, it was not until the economic boom that men of average and low wages were able to do so as well. This fueled the demand for low-cost prostitutes and resulted in a greater number of girls being brought from the north of Thailand, since that area did not experience the economic boom until many years after central Thailand did. Consequently, these girls were still living in dire poverty and seeking a means to support their family.

In Thai society, the girl is expected to support her family (Brown, 2000). If there is no work near her village, the girl will go to Bangkok to work as a prostitute and send money home to her family. The village perceives no shame in this, and when the girl returns, she is able to marry just as well as other girls.

Theravada Buddhism favors boys over girls, and this can result in a society that regards women as objects to be used (Bales, 2004). Boys are favored because if a boy serves as a monk for a period of time, it is believed this service adds a great deal of good karma towards his parents’ reincarnation. There is no such benefit to having a daughter.

Thailand has been trying to combat sex trafficking through a multi-pronged approach. First, it passed legislation in 1996 that provided stiffer penalties for customers of prostitution, brothel owners, and parents who sell their daughters into prostitution. These penalties are even stiffer if the girl is underage. For example, a brothel owner can receive between 0 and 15 years in jail if the prostitute is over 18 years

old, 5 to 15 years in jail if she is between 15 and 18, and 10 to 20 years if she is younger than 15 (“Thailand legislation,” 2000).

Thailand is also trying to work to prevent trafficking from occurring in the first place by removing underlying conditions that cause it to occur. Recognizing that many children were finishing the mandatory 9 years of school and then had no opportunities for gainful employment, they have now raised the mandatory number of years of schooling to 12. This keeps children in school and consequently lowers their vulnerability to traffickers.

Efforts to create nationwide awareness about the problem of sex trafficking and prostitution are also underway. For example, in the northern Thailand city of Chiang Rai, a nongovernmental organization called Development and Education Program for Daughters & Communities is working to educate parents about the dangers of the sex trade. They are accomplishing this through informing them about HIV and AIDS, brothel conditions, and the legal consequences of selling their daughters to the brothel procurers (Human Trafficking.org, 2005). The Center for the Protection of Children’s Rights, an international human rights group, also focuses its prevention efforts on parents in rural areas in order to educate them about the reality of prostitution. Print, radio, and television are used to convey these messages (Royal Thai Embassy, 1997). For example, UNESCO has created songs in some of the tribal languages that are then played on the radio to educate members of the Hill Tribes about the dangers of the sex trade (you can listen to one at www.unescobkk.org/index.php?id=1462).

Companies are working in cooperation with the Thai Business Initiative in Rural Development (TBIIRD) to increase job opportunities in rural areas so that girls will not need to leave their villages in order to earn an income. In one example, Singer Sewing Machine company donated sewing machines and teachers to train students in industrial sewing (Population and Community Development Association [PDA], n.d.a). Bata, an international shoe company, opened a factory near the participating villages in Buri Ram Province. They hired some of the graduates from the Singer program to be supervisors in their program and train other workers (PDA, n.d.b). In addition, the Thai government has opened vocational training centers in every region of the country in order to increase job potential (Royal Thai Embassy, 1997).

While these efforts have been successful in lowering the number of Thai women in the sex trade, the unfortunate effect of these successful efforts is an increase in Burmese and Laotian women who are trafficked into Thailand. The poverty of these countries and the oppressive regime in Myanmar have increased the desperation of these women, who are even more vulnerable than Thai women as they do not speak the language and are there illegally. When Thai officials discover them, they typically are treated as illegal aliens and are immediately deported. This often places them back in the hands of the people who trafficked them in the first place, and they soon return, willingly or unwillingly.

In addition, members of the Hill Tribes in northern Thailand are not Thai citizens and are thus vulnerable to being trafficked as they cannot legally be citizens. Children born to tribal members are not automatically citizens, and it can take a great deal of paperwork and money (for bribes) to acquire citizenship (stateless children are discussed further in chapter 4). Without citizenship, they cannot own land, work, or even receive a high school diploma (Arnold & Bertone, 2002). This violates Article 15 of the Universal Declaration of Human Rights, which states, “Everyone has the right to a nationality.”

There have been instances of prostitutes who were freed in raids on their brothels. While some of them reported that they had been tricked into working there, others were reportedly angry about their “rescue” as this was the only way for them to earn money. They would escape and return to the sex trade (Jones, 2003). It follows that it is important not only to remove people from prostitution, but also to simultaneously address the issues that cause them to seek it out in the first place. As an example, one U.S. social worker who works with victims of sex trafficking in Thailand uses a beauty salon as her base of operation. By helping the women to earn a new trade, they are able to leave the sex trade (Robb, 2005).

What Can I Do as a Professional Social Worker?

- Work to assist victims of human trafficking within the United States. Various NGOs in cities such as San Diego (Project Safe Haven), New York City (ECPAT-USA), and Washington, DC (Polaris Project) are working in this arena.
- Work for an international humanitarian organization such as Save the Children, World Vision, or Catholic Relief Services.
- Work with a community development organization such as Oxfam to help prevent the conditions that make people vulnerable to trafficking.

World Wide Web Resources on Forced Labor

American Anti-Slavery Group (www.anti-slavery.org): A U.S.-based group dedicated to eradicating modern slavery. They engage in education and advocacy activities, as well as direct assistance to victims of slavery.

Anti-Slavery International (www.antislavery.org): This organization has been working since 1839 to end slavery around the world. It offers a host of reports compiled by its staff.

Coalition to Abolish Slavery and Trafficking (www.castla.org): This organization focuses on the issue of trafficking within the United States. It offers training on trafficking issues as well as providing services to victims of trafficking.

ECPAT (End Child Prostitution, Child Pornography and Trafficking of Children for Sexual Purposes) (www.ecpat.net): One of the best-known international organizations, this is a coalition of agencies working to end commercial sexual exploitation of children.

Forced Migration Online (www.forcedmigration.org): The site offers a variety of electronic resources on topics relating to forced migration.

Free The Slaves (www.freetheslaves.net): An agency in Washington DC working to end global slavery.

Global Alliance Against Trafficking in Women (www.gaatw.org): An international coalition working to end trafficking in women. Their website offers a variety of high-quality resources.

International Labour Office (www.ilo.org): The agency of the United Nations that works to address issues involving worker's rights. An excellent site for resource material.

Polaris Project (www.polarisproject.org): This organization focuses on the issue of trafficking within the United States. It advocates on issues related to trafficking as well as providing services to victims of trafficking.

Project Hope International (phi-ngo.org): This agency provides services for victims of trafficking in Thailand, Cambodia, and the United States. It also advocates with policymakers to improve services.

Save The Children (www.savethechildren.net): The International Alliance of Save the Children offers many high-quality reports and resources on any issue relating to children.

Transfair USA (www.transfairusa.org): This site offers information about fair trade products and ethical shopping.

Volunteers for Social Justice (www.vsj-ddva.org/index.html): This agency in India is working to end bonded labor.

4

International Child Welfare

When Americans think of “child welfare,” they commonly associate the term simply with child abuse and neglect. But globally, children face many other, even more severe, threats to their well-being than abuse and neglect. UNICEF (n.d.a) states that more than 1 billion children do not have access to safe drinking water, adequate food, shelter, education, or health care services. More than 4 million die in their first month of life each year, and nearly 11 million children under the age of 5 die each year (approximately 30,000 every day), mostly from preventable causes (Save the Children, 2006; UNICEF, n.d.b). These children are most often from poor families in nations in the Global South (UNICEF, 2006a). In addition to these mortal threats, approximately 20 million children worldwide are refugees; 143 million children living in the Global South are orphans; 246 million are child laborers; and 1.2 million children are affected by trafficking each year (UNICEF, n.d.a, n.d.c, n.d.d). The majority of threats to children discussed in this chapter will fall into the categories of child labor and child abuse and the conditions that can make children more vulnerable to violations of their human rights.

Convention on the Rights of the Child

The Convention on the Rights of the Child (CRC) was written by the United Nations in recognition of the fact that children under 18 are especially vulnerable to violations of human rights. Children are entitled to the same rights as all people under the UDHR but have the additional

protection of the CRC to recognize the special barriers and threats they may face. This document was based on the Declaration of the Rights of the Child, which was proclaimed by the General Assembly of the United Nations in 1959. The declaration was updated in 1989 and was renamed the Convention on the Rights of the Child. The convention operates from the point of view that children are neither the property of their parents nor are they “helpless objects of charity” (UNICEF, n.d.e, ¶2). UNICEF states that “the Convention offers a vision of the child as an individual *and* as a member of a family and community, with rights and responsibilities appropriate to his or her age and stage of development. By recognizing children’s rights in this way, the Convention firmly sets the focus on the whole child” (¶2).

Currently, all but two nations in the world have ratified the Convention: Somalia and the United States. The United States signed the document in 1995 but has not submitted it to Congress for ratification and states it has no intentions to do so (Human Rights Watch, 2001). While those opposing ratification have stated that the convention would undermine parental authority, the biggest stumbling block was the convention’s prohibition against capital punishment for juveniles, which the United States allowed until the Supreme Court declared it unconstitutional in 2005. In addition, the CRC provides for economic, social, and cultural rights of children. As previously discussed, the U.S. government does not protect this group of rights and the Bush administration has stated this as a reason for non-ratification (Southwick, 2001).

Child Labor

Many of the threats to child well-being fall under the umbrella of child labor. According to Article 32 of the CRC, children have the right to be protected from economic exploitation. It states that children should not perform “any work that is likely to be hazardous or to interfere with the child’s education, or to be harmful to the child’s health or physical, mental, spiritual, moral or social development.” This definition separates out work that assists in the child’s development, such as after-school jobs or assisting on the family farm or apprenticeships for a child of age in that society, from work that is harmful to the child. Approximately 218 million children worldwide were engaged in some form of child labor in 2004—approximately 1 in 7 children worldwide. Of these, about 126

million are engaged in what are defined as “the worst forms of child labor,” including prostitution, participation in armed conflict, and debt bondage. These numbers represent an 11% overall decrease since 2000 and a 26% decrease in those involved in the worst forms (International Labour Organization [ILO], 2006).

The Caribbean and Latin American countries have seen the greatest decrease in child laborers, with numbers falling by two-thirds over the past 4 years. The least progress has been made in Sub-Saharan Africa, which currently has the highest proportion of child laborers of any region. While in the short term child labor appears to add to the economy by increasing production, its long-term impact subtracts more than it adds. To illustrate this, it is estimated that the cost to eliminate all child labor over a 20-year period would be \$760 billion; however, the long-term economic benefit of doing so would be \$4 trillion dollars as a result of the improved education and health workers would gain by not engaging in labor as children (ILO, 2006).

Due to the fact that these economic gains are long term, it is important to maintain a systems perspective when battling child labor. When the status of children engaged in child labor is examined, it is typically the children who experience structural inequalities who are most likely to work. For example, children who are poor or experience discrimination based on their religion or social class are more likely to work. Girls are more likely to be barred from school and thus be forced to work. Children who have been orphaned by the HIV-AIDS epidemic can experience a double blow: they are stigmatized due to the disease and are also often thrust into poverty with the death of their parents (Save the Children, 2003). Many children are working because their families depend on their income to meet basic needs (Save the Children, 2003). If child labor is banned but no attention is given to wages earned by adults or social supports, the situation may worsen through increases in malnutrition and other calamities. It is also important to differentiate child labor that is harmful from child labor that is culturally appropriate and designed to assist children in their long-term goals, such as assistance with household chores or apprenticeships (Ajayi & Torimiro, 2004).

One of the examples of how global attention has helped to reduce the use of child labor is in the use of children as camel jockeys. Thousands of children as young as 2 were trafficked from countries such as Bangladesh, Pakistan, and Sudan to countries in the Persian Gulf region for use as camel jockeys. These children faced numerous risks in this task: they were often

physically and sexually abused, they were at risk of serious injury from the camels, and they were forced to live in camps enclosed in barbed wire by the racetrack (U.S. Department of State, 2005a). However, after the U.S. State Department cited the United Arab Emirates as a destination for trafficked children, that country began enforcing a ban on child jockeys and sent over 1,000 children home to their countries ("United Arab Emirates," 2006). As children who have been trafficked are typically unable to send money home to their families, this did not damage the balance of wages within a family.

Street Children

Children working on the streets, for example as peddlers, shoeshine boys, or prostitutes, are among the most visible of child laborers. Article 27 states that children have the right to a standard of living adequate for their development. However, for some children, their family cannot or does not provide this. While the term "street children" is used as a generic label, there are several subcategories. Children "of the street" work in the streets for income but maintain familial ties and often live at home. Children "on the street" live solely on the street and typically have no family ties (UNICEF, as cited in Lalor, 1999). These are general definitions because, of course, there are always children who do not fit neatly into these categories.

Boys are the majority of street children worldwide for a number of reasons, part of which is definition. For example, girls on the street are often defined as prostitutes, not street children. Further, female child laborers who are not working in the sex trade are often working in jobs located off the streets (such as maids), while male child laborers are more visible on the streets working as shoeshine boys or peddlers (Lalor, 1999). Finally, girls still living with their families are less likely than boys to work on the street as they are more vulnerable to violence on the streets and are more often needed at home for chores (ILO, 2003a).

Worldwide, most children come to the streets due to poverty, being orphaned, or familial conflict. Other reasons may be more regional. For example, in the Congo, there is currently a rise in the number of street children as there has been an increase in accusations of sorcery against these children, which has led to their maltreatment or having been forced to leave their home. The accusation may result from a death in the family or a job loss, but it is often because a family member does not have the financial resources to care for a child and needs a culturally acceptable reason to push

him or her onto the street—thus the accusation of sorcery. These children who are thus accused are rarely being cared for by both biological parents, but more often by stepparents or extended family members, who are less likely to want the responsibility and burden (Human Rights Watch, 2006).

Other reasons why children are in the streets vary by whether the child is “on the streets” or “of the streets.” Children of the street are more likely to be there because of poverty. The children typically need to work to support their families and return home in the evenings (Kombarakaran, 2004). This work will prevent them from attending school. In Mumbai, India (Bombay), it was found that only 40% of the street children had ever been to school, and only 10% had ever progressed past primary school. On the other hand, children on the street are more likely to have experienced familial problems such as parental death, abuse, or other conflict; they live on the street because they have nowhere else to go (Lalor, 1999). The following case study, summarized from Lalor (1999), illustrates the often complex path to the streets:

At age 2 Eshete's mother gave her into the care of relatives because she could not afford to care for her (gudifecha, an Ethiopian custom whereby children are accepted by those willing to raise them if parents are unable to do so). At age 9 Eshete's adopting father died and she went to live with his brother for 2 years. At age 11 she went to Addis Ababa to search for her birth parents, whom she found were separated. She decided to live with her birth father, but he was an alcoholic and often beat her. She ran away and went to stay with her birth mother, but she had two other children and could not afford to look after Eshete. So she left and found work in a rural hotel as a maid but the work was so hard that she soon left. A rural family adopted her and she minded their cattle for 7 months. Eventually she came back to Addis Ababa at age 16 and began living by begging. For a short time she lived as the “wife” of a taxi-boy but he eventually left her and she returned to living on the streets with friends. (Reprinted with permission from Elsevier.)

Street children typically receive attention for being perpetrators of crime, including theft, assault, and drug use (Lalor, 1999). However, children of the streets are typically very vulnerable to being crime victims. For example, Lalor (2000) found that 73% of juvenile prostitutes in his

study in Ethiopia had been raped, 93% had been physically assaulted, and 83% had experienced theft of their belongings. While boys do not frequently experience sexual assault, they are frequent victims of physical assault and theft (Lalor, 1999). While the perpetrators of these crimes are commonly other children, children are also at risk from those assigned to protect society—the police. In the Congo, police have been found to physically and sexually assault street children as well as rob them. They also pressured the children into participating in police operations despite their youth. In addition, leaders of political parties will pay street children to participate in demonstrations prior to elections in order to create disorder. This is perilous for the children as security forces typically respond violently, which has led to the injury and even death of some of the children (Human Rights Watch, 2006). Police brutality against street children has also been documented in Brazil, India, Guatemala, and Colombia (Human Rights Watch, 1997a, 1997b, 1996a, 1994). Street children are also vulnerable to forcible recruitment into armed forces, both governmental and rebel forces (Singer, 2005; UNICEF, 2001). In India in 2006, due to the widespread physical and sexual abuse suffered by children working as maids or waiters in hotels, a law barring employment of children under the age of 14 came into effect (Gentleman, 2007). However, this law has had little effect in its early months due to the growing demand for cheap labor (Gentleman, 2007).

Street children's work typically reinforces their dependence on others. Therefore, when working with them, an empowerment approach is especially important as it can help offset this. While it may be necessary to meet short-term immediate needs such as food, provision of goods should be part of a long-term developmental approach to help children become self-sustaining adults as well as to create a durable approach that will not disappear when the outside funding does (Ennew, 2000).

Children as Farm and Factory Workers

Despite the millions of street children, the majority of child laborers do not work on the streets but rather on farms and in factories. Although agriculture can be productive work for children, it can also be hazardous for children due to the chemicals and heavy machinery often involved. For example, the chemicals used for fertilizer are often more harmful for children's developing bodies than adult systems (ILO, 2003b). Human Rights Watch (2003) estimates that in India, 60 to 115 million children are

employed in some form of labor, the majority of them in agriculture. Many of these children are bonded laborers, pledged against their parents' debt, which is one of the worst forms of child labor (see chapter 3 for a detailed description of bonded labor). Others are employed in factories making silk and weaving it into saris. Below is the story of Yeramma, one of the children working in the silk industry (Human Rights Watch, 2003, ¶1):

At 4:00 A.M. I got up and did silk winding. . . . I only went home once a week. I slept in the factory with two or three other children. We prepared the food there and slept in the space between the machines. The owner provided the rice and cut it from our wages. He would deduct the price. We cooked the rice ourselves. We worked twelve hours a day with one hour for rest. If I made a mistake—if I cut the thread—he would beat me. Sometimes [the owner] used vulgar language. Then he would give me more work.

—Yeramma S., eleven years old, bonded at around age seven for Rs. 1,700 (\$35) Karnataka, March 27, 2002. (© 2003 Human Rights Watch)

Child Prostitution

Another of the worst forms of child labor is the use of children in sexually related activities. Article 34 of the CRC explicitly forbids the use of children in prostitution. Due to the increase in child trafficking, an Optional Protocol to the CRC was ratified by the UN in 2000; it addresses the sale of children, child prostitution, and child pornography. As of this writing, 107 countries have ratified this protocol, including the United States. The number of children experiencing commercial sexual exploitation is difficult to estimate but ranges around 1 million children, the majority of whom are girls (UNICEF, 2006b; U.S. Department of State, 2005b). As discussed in chapter 3, Forced Labor, various factors can push children into prostitution, including poverty, discrimination, and lack of access to education.

The effects of sexually related labor on children can be traumatic. Willis and Levy (2002) estimate that 67% of prostituted children suffer from post-traumatic stress disorder and 16% have attempted suicide. In addition, 50% have suffered physical and/or sexual assault. In an attempt to stem this problem, a number of nations in the Global North have passed laws that

make it illegal for their citizens to travel abroad for the purposes of having sex with a child. In the United States, this law was passed in 2003, and in 2005 a Maryland man was sentenced to 15 years in prison for traveling to Cambodia for the purposes of having sex with a child (Dao, 2005).

Children in Armed Conflict

The last of the worst forms of child labor to be discussed is the involvement of children in armed conflict. Article 38 of the CRC requires that those taking a direct part in combat must be at least 15 years old, and children younger than 15 may not be recruited into the armed forces. An Optional Protocol to the CRC ratified by the UN in 2000 raised these ages to 18. It states that there will be no compulsory recruitment of children under 18 and voluntary recruitment must be truthful, genuinely voluntary, and only with the consent of parents or guardians. As of this writing, 107 countries have ratified this protocol, including the United States.

Currently there are approximately 300,000 child soldiers, both boys and girls, who are involved in more than 30 conflicts worldwide (UNICEF, n.d.c). These children serve as combatants, messengers, and forced sexual partners. In some cases, children voluntarily join the forces, believing in the cause for which they are fighting or searching for stability in the upheaval generated by armed conflict. It may be the only manner by which to get daily food and some semblance of protection from harm. Some child soldiers have said that they joined the fighting to escape the poverty in their families (UNICEF, 2001). Other children join to revenge themselves upon the killers of their families; not to do so would be a great shame in their culture (Singer, 2005). However, in most situations, the children are forcibly recruited in some manner (Singer, 2005).

One of the most infamous users of child soldiers is the Lord's Resistance Army (LRA) in Uganda, a rebel group that has been fighting against the government since 1986 (Briggs, 2005). The LRA has kidnapped as many as 25,000 children since the start of the conflict; 7,500 of them girls (Amnesty International, 2005). The boys are trained to be soldiers and the girls are given to an officer as a "wife" and forced to become sex slaves. Typically the children are coerced into the army by being forced to kill those they know, such as family and friends. They then feel such guilt that they think they cannot return to society after such shame. The following quote from a child kidnapped by the LRA illustrates this method (Human Rights Watch, 1997c):

One boy tried to escape [from the rebels], but he was caught. . . . His hands were tied, and then they made us, the other new captives, kill him with a stick. I felt sick. I knew this boy from before. We were from the same village. I refused to kill him and they told me they would shoot me. They pointed a gun at me, so I had to do it. The boy was asking me, "Why are you doing this?" I said I had no choice. After we killed him, they made us smear his blood on our arms. . . . They said we had to do this so we would not fear death and so we would not try to escape. . . . I still dream about the boy from my village who I killed. I see him in my dreams, and he is talking to me and saying I killed him for nothing, and I am crying. (© 1997 Human Rights Watch)

In order to avoid being captured by the LRA, approximately 30,000 children sleep en masse at their schools, churches, hospitals, and other central locations every night, watched over by the adults in their communities (Amnesty International, 2005). These children have become known as the "night commuters" for their nightly journey and are the subject of a movie entitled *Invisible Children* (www.invisiblechildren.com). A truce was declared between the LRA and the Ugandan government in 2006, but it is uncertain if it will remain in force.

While countries in Africa often receive the bulk of attention for this issue, countries in other regions are among the worst violators. More than 11,000 children fight in Colombia, 80% of them for the paramilitary groups the Revolutionary Armed Forces of Colombia (FARC) and the National Liberation Army (ELN) (Human Rights Watch, 2005). Children as young as 8 years old are recruited by FARC, typically by force, and face severe punishment if they attempt to return home. Children are used to spy, run messages, and place bombs as well as participate in direct combat (Briggs, 2005). Myanmar is estimated to have 75,000 child soldiers fighting within its borders, both in the official army and in the rebel armies (Singer, 2005). The rebel group known as the Tamil Tigers in Sri Lanka has received international condemnation. Approximately 40% to 60% of their forces are under the age of 18, most of them recruited when they were between 10 and 16. The Tamil Tigers are particularly known for their use of girls in direct fighting; about half of the soldiers are female (Singer, 2005).

Once child soldiers have been released from the armed force with which they were fighting, it can be difficult for them to re-integrate into society. Using the biopsychosocial approach common to examining human behavior in the social environment can be a useful tool for examining the barriers to re-integration. Biologically, they may have suffered wounds from combat in addition to having been undernourished. Thus physically they may encounter difficulties. As discussed, they may have been forced to kill family or community members by the group that captured them. This, as well as the other deaths they caused, can create psychological difficulties. There may also be post-traumatic stress disorder from the conflict and the children will have difficulties dealing with stress in a non-violent manner (UNICEF, 2001). Socially, the former child soldiers may encounter resistance in the community to which they are returning due to anger at their actions while in combat. In addition, they will encounter difficulties in education as they are typically substantially older than other schoolchildren at their level due to their lack of educational opportunities while engaged in combat.

UNICEF (2006a) states that reintegration is particularly difficult for girls. One reason is that they are often not viewed as soldiers since they typically do not participate in combat. As a result, they often do not receive the reintegration services that boys do, leaving their psychological trauma unresolved. Additionally, due to the nature of the services they were forced to perform, some will return with children born of the rape, who may be rejected by their family and community.

Child Maltreatment

While child abuse and neglect by caretakers is not the only threat to children's well-being, it certainly cannot be excluded from this discussion. Unfortunately, far too many children worldwide experience child maltreatment; according to the World Health Organization, an estimated 40 million children under age 14 ("WHO calls," 1999). Article 19 of the CRC provides that the state will ensure that all children are protected from child maltreatment. However, even within a culture, there are different definitions of what is "maltreatment." Within the United States, there is no single clear-cut definition of child physical abuse; some would include corporal punishment, while others would not. It has been a concern of many of those working in the area of culture and child maltreat-

ment that a balance be found between respecting a person's culture and not allowing maltreatment to occur. This is similar to the discussion on human rights and cultural relativism in chapter 2. In an attempt to create a cross-cultural definition of child maltreatment, Finkelhor and Korbin (1988, p. 4) define it as "the portion of harm to children that results from human action that is proscribed, proximate, and preventable." Pierce and Bozalek (2004) describe four categories of child maltreatment:

Societal abuse: includes child labor, child marriage, child prostitution

Physical maltreatment: includes physical abuse and neglect

Sexual abuse: includes both sexual contact and exposure to sexual stimuli

Nonphysical maltreatment: includes fostering delinquency, parental alcohol/drug abuse, emotional maltreatment

These definitions allow for cultural variation in child-rearing but are inclusive of child maltreatment as well. Some behaviors might meet a cultural norm but be considered maltreatment by other cultures. For example, some cultures are appalled that Americans have infants sleep in separate rooms from their parents, considering this practice to be detrimental to the child's development (Small, 1998). Other cultures may accept a behavior that is considered abusive by most other cultures, such as using small children to clear a minefield in Iran (Finkelhor & Korbin, 1988). It is important to differentiate between what are cultural differences and what is maltreatment.

Despite some differences in definition about what constitutes maltreatment, there is general agreement that certain acts are definitely maltreatment. Globally, sexual abuse is the type of abuse most commonly considered to be maltreatment, followed by abandonment and physical abuse by a parent (Bross, Miyoshi, Miyoshi, & Krugman, 2000).

International Adoption

While in the United States being available for adoption is often associated with having experienced parental maltreatment, this is typically not the case of children worldwide. Children in other countries are often available for adoption due to disabilities, parental poverty, or governmental policies limiting the number of children per family. In 2004–2005, 22,739 non-American children were adopted by U.S. citizens (U.S.

Department of State, 2006a). The primary nations from which Americans adopted children in 2005 (sending nations) were China (7,906), Russia (4,639), and Guatemala (3,783) (U.S. Department of State, 2006b).

International adoption first began in force after World War II with the adoptions of orphaned children from Germany and Greece by U.S. families. A second wave began after the Korean War with children from Korea (who were often fathered by U.S. soldiers). From these beginnings as a child-focused phenomenon, international adoption has evolved to one that is more focused on meeting the needs of adoptive parents. As fertility has declined in Western nations, as well as the number of healthy White infants available for adoption, interest in international adoption has risen. International adoption is regulated by the Hague Convention on Intercountry Adoption. Developed in 1993, its goal is to regulate procedure and set minimum standards for international adoptions in order to protect all parties—birthparents, adoptive parents, and the children being adopted. There are currently 69 contracting states to this convention, including the United States. The United States passed the legislation needed to ratify it in 2000 and is in the process of ratification. As of this writing, it is expected to be ratified in 2007.

Despite efforts to provide safety for children during the adoption process, conditions in orphanages in some countries have been found to be abusive in themselves. Extraordinary neglect and abuse has been documented in orphanages in countries such as Russia, Romania, and China (the situation in China is discussed in this chapter's Culture Box). Human Rights Watch (1998) states that the majority of children in Russian orphanages are not truly orphans but have been abandoned. In Russian culture, it is assumed that an abandoned child must be "defective" in some way, and due to this prejudice, Human Rights Watch found that in some cases babies were never removed from their cribs and older children were often physically and sexually abused.

In Romania at the end of the Cold War, it was found that hundreds of thousands of children had been abandoned due to their parents' inability to care for them. There had been a prohibition on birth control and abortion, causing parents to have more children than they could afford to raise. The conditions in these orphanages were squalid and the children were typically severely neglected (Hunt, 1990). As a condition of being able to join the European Union, Romania promised to move the children from orphanages without resorting to international adoption for them (Laffan, 2005). However, thousands of children are still living in govern-

mental institutions in horrific conditions: they simply have been moved from orphanages to psychiatric institutions and other state-run facilities (Mental Disability Rights International, 2006). In an effort to reduce poor adoption practices in international adoptions and increase domestic adoption, Romania has stopped all international adoptions (“Romania,” 2006; Rosenthal, 2005).

International adoption has become a controversial topic. As with any enterprise, it is vulnerable to abuses. For example, UNICEF (n.d.) estimates that between 1,000 and 1,500 infants from Guatemala are trafficked to the United States and Europe each year. In 2007, the U.S. State Department issued a caution to prospective adoptive parents to be wary due to unethical practices that have occurred in some instances (U.S. Department of State, 2007). Further, the United States has suspended adoptions from Cambodia since 2001 due to rampant child trafficking. In addition, children in Cambodia were being purchased, or even stolen, from birthmothers for adoption by Americans (Corbett, 2002; Mydans, 2001).

However, international adoption is of concern due not only to illegal practices such as these but also because of overall social justice issues. Hollingsworth (2003) questions whether social justice is served by international adoption by families in the United States. On the one hand, children are being brought from conditions that are at the best impoverished and at the worst harmful. On the other hand, the question remains of whether it is the best method to remove a few select children from these circumstances and leave the circumstances unchanged. The Hague Convention requires governments to make it the first priority that children are able to remain with their birthparents and that international adoption is an option only after attempts at familial reunification, as well as domestic placement, have failed. However, in some countries, international adoptions are perceived as favored over domestic adoptions due to the greater revenue they provide. For example, in China, each international adoption brings a payment of \$3,000 to the orphanage; this is not true for domestic adoptions (Johnson, 2002).

Many times, children adopted from other countries are sought due to their lack of disabilities. However, at least one social worker is working to help children available for adoption in other countries who do have special needs such as physical or mental disabilities. Candace Abel founded Brittany’s Hope (www.brittanyshope.org) to facilitate adoptions of these children. While Brittany’s Hope does not place children for adoption, it works diligently to raise awareness of these children through

child-specific advocacy. In 7 years, Brittany's Hope has now helped place almost 150 children with adoptive families.

Stateless Children

Article Seven of the CRC states that all children should be registered at birth and that they have the right to a nationality. UNICEF (2006c) estimates that in 2003, over one-third of all births, about 48 million, went unregistered and that each year more than half of all births in the Global South are unregistered. South Asia is the most severely affected region: 70% of all births there are estimated to go unregistered (UNICEF, 2006c). Birth registration is important as it provides access to the other rights that can come with citizenship, such as access to education, employment, and the right to vote. It can also help protect children from trafficking, underage military conscription, and child labor. Therefore, it helps children achieve the other rights ascribed to them in the CRC. Birth registration is also important on the macro level as it helps a government plan accurately for the needs of its population (Mouravieff-Apostol, 2006).

There are a number of reasons why a child's birth may not be registered. While the international community believes that birth registration should be free, a number of countries charge a fee, shutting out those too impoverished to pay it. There may also be a lack of funds for a national birth registration program, limiting offices and services. In some countries there are registration centers only in major cities. This can impose transportation difficulties for those in rural areas. Additionally, rural dwellers may not understand why birth registration is important because they traditionally do not use government services, therefore necessitating education for parents on its importance (Mouravieff-Apostol, 2006; UNICEF, 2006c, n.d.f).

Migration can also affect birth registration. In certain countries, such as Malaysia, a child is not automatically given citizenship upon birth within its borders. If the mother has migrated there without the appropriate documents, the child will be left in limbo, as the country in which it was born will not grant citizenship and the mother's home country is often reluctant to grant citizenship to a child born outside its borders. In Malaysia, the problem of these stateless children has grown to the point where the children, some now adults, have turned to crime to earn a living since they cannot do so in the legal labor market (Hamid, 2006). Children

of refugees from Myanmar who are born in Thailand are denied a nationality. As discussed in chapter 3, it is illegal to leave Myanmar without governmental permission; therefore, the Burmese government will not grant citizenship to these children. However, since few have official refugee status from Thailand, they are also denied Thai citizenship (Refugees International, 2004).

In some cases, lack of birth registration can be political. Certain ethnic groups who do not have equal standing in societies may be denied the right to register their child's birth, such as Kurds in Syria and Russians in Estonia and Latvia (UNICEF, n.d.f). In the Dominican Republic, although the constitution grants citizenship to those born within its borders, children of Haitian migrant workers are considered ineligible and thus cannot attend school past the seventh grade, do not have freedom of movement, and are unable to work legally (Amnesty International, 2006). Governments may refuse to register children whose names do not conform to expectations (Mouravieff-Apostol, 2006). Another barrier to birth registration for ethnic groups is that information may not be available in their native language (UNICEF, 2006c). Cultural stigma attached to children who are born out of wedlock or from polygamous unions can lead to the lack of their birth registration; boys are also more likely to be registered than girls (Mouravieff-Apostol, 2006).

Although much work needs to be done, a concentrated effort can be very effective. Demonstrating the power of a coordinated campaign, India registered 30 million births in 1 year after a national campaign (Bloemen & McBride, 2006).

Access to Education

Article 28 requires primary education to be offered free of cost to all children, that secondary education appropriate to the child's interests and abilities (i.e., vocational or college preparatory) be made available and accessible, and that higher education be made accessible. However, UNICEF (n.d.g) estimates that globally, 121 million primary school-aged children are not enrolled in school, the majority of whom are girls. The ILO states that lack of access to education increases child labor by reducing options for these children and their families (ILO, 2003a). Barriers to school enrollment include safety concerns, poverty, and traditions that do not emphasize schooling. Safety concerns can include danger walking

to school and harassment at school. Many schools in rural Africa do not have private toilet facilities, and after girls experience their first menstrual cycle, there is no private place for them to tend to these needs and they will drop out of school rather than be shamed (LaFraniere, 2005).

Three-quarters of the children not in primary school in the Global South are from the poorest 60% of households (UNICEF, 2006a). Poverty inhibits schooling in two fashions. First, the family may need the children to stay home and help earn a living. Second, many countries charge fees for school attendance. Even if the country does not charge fees, there are still often costs for supplies and uniforms. In the 1990s the World Bank encouraged its debtor nations to charge fees for textbooks and other school expenses to reduce the amount of federal money spent on social and educational services in these countries. However, this substantially reduced the number of children able to attend school, and in 2002, the World Bank reversed its policy (Dugger, 2004). A number of countries, such as Kenya, Malawi, and Ghana, have now eliminated school fees (UNICEF, n.d.h). Kenya's "cost-sharing" program under the World Bank plan, where families were expected to "share" in the costs of education, resulted in higher rates of dropouts and students repeating a grade while simultaneously lowering graduation rates (Nafula, 2001). When Kenya eliminated fees in 2003, the schools were inundated with students: over 1 million students sought enrollment at school, in some cases almost literally beating down the door to get in. Examples such as this show that it is not that parents do not want their children educated, but financial barriers prohibit it. The risk associated with eliminating fees is that the rapid increase in students can overwhelm the system. Kenya had to make an international appeal for aid as their class sizes soared to 90 students and supplies such as texts and chalk were limited (Chinyama, n.d.).

As stated above, the majority of children who are not enrolled in school are girls. For every 100 boys not in primary school, 117 girls are not enrolled, and this gap becomes even wider in secondary school (UNICEF, 2006a). Some cultures believe it is not useful to educate girls as they will "only" grow up to marry and have children. Other girls may start school but may not be able to finish due to early marriage or a need to help with the housework at home. However, research has found that education of girls has an impact far beyond the immediate learning. Children of mothers who have been educated have lower child mortality rates due to improved nutrition and immunization rates (UNICEF, n.d.i). As explained in chapter 6, education serves as a protective factor for girls, not

only by educating them about potential risks such as HIV but also by serving as a productive activity that reduces high-risk activities.

In some cases, foreign NGOs have focused on educational imbalances and have sought to help overcome them. The Cambodian Arts and Scholarship Fund (www.cambodianscholarship.org), based in Maine, sends girls in Cambodia on to high school and university at the minimal cost of \$360 per student each year. Another NGO helps Burmese child refugees in Thailand, many of whom are there without documentation and are thus unable to attend school. "Children of the Forest" is an elementary school that has been set up to teach these children. It is not an official school, but staff can teach children how to speak and write Thai (www.childrenoftheforest.com). Foreign governments are also assisting: for instance, in 2006, Britain pledged to double its aid to assist education in the Global South (Dugger, 2006).

The Professional Role of Social Workers

When social workers in the Global North are employed in child welfare, they are almost always working with issues of child abuse and neglect. However, the brief sections in this chapter are designed to give an overview of the additional issues that may affect a child's well-being. As has been demonstrated, the topic of child welfare encompasses more issues than maltreatment. Many things that children in the Global North may take for granted, such as freedom from military service, education, and citizenship, may be concerns that threaten the welfare of millions of children around the globe. By the same token, other issues, such as maltreatment, threaten children worldwide. Social workers can work on reducing these threats to child well-being by working on the micro level to help individual clients or their families to attain child well-being. Social workers in the Global North may also often work with international adoption, performing home studies and helping parents and children to adjust to each other and overcoming cultural differences. Social workers can also work on the macro level to make education and birth registration more accessible. They can work to help families be able to provide for their children so that the children do not need to be given up for adoption or be sent to work at an early age. Working with multiple system levels enables social workers to help those who are currently experiencing the problem while helping to prevent others from suffering the same problem in the future.

Culture Box

INTERNATIONAL ADOPTION AND CHINA

China is one of the largest nations in the world and has the largest population of any country, with 1.3 billion citizens (CIA, 2006). It became a communist country in 1949 and has maintained strict controls over its people. In recent years, there has been loosening in the economic sector, with capitalist-like ventures such as a stock market being introduced. However, in terms of personal control, the government still regulates citizens' lives. One way in which the government does this is by attempting to control the size of the population. In 1979, a policy was introduced that is commonly referred to in the West as the "one-child policy." This name is misleading as the policy is not strictly "one child." Urban families are restricted to one child, but rural families may have two if the first child is a girl, and ethnic minorities are typically exempt altogether from the policy. Families may also pay large penalties for having additional children past their limit if they wish additional children. In the Confucian culture that still predominates in China, sons are needed for the family. When a couple marries, they live with the husband's parents and take care of them in their old age. Therefore, a daughter grows up to take care of someone else's parents, not her own.

The consequence of this policy was a sharp rise in the number of abortions, infanticides, and infant abandonments. In the 1980s and 1990s, when the government began enforcing the policy more strictly, the number of abandonments increased sharply (Johnson, Banghan, & Liyao, 1998). Children who were abandoned were most often girls or disabled boys, due to the need for a son to care for their parents (Johnson et al., 1998). The vast majority of abandoned girls were not abandoned to die but were typically placed where they would be found by someone else whom the parent believed would be able to care for the child, such as an orphanage or potential adoptive family (Johnson, 2004). The orphanages in China became overwhelmed and were unable to adequately care for all of the children. Human Rights Watch (1996b) found that the mortality rate in the orphanages was frighteningly high, with over 50% of admissions dying in the first year from the lack of proper care; in some institutions, the mortality rate was closer to 90%. The orphanages were also unable to pay high-quality staff to care for the children, and thus high rates of abuse were documented as well.

International adoption has both helped and hurt China. The large number of adoptions from China, particularly Chinese girls, has helped to raise money for the orphanages and therefore raise the quality of the care. Each adoption raises \$3,000 for the orphanage (Johnson, 2002). However, these adoptions also removed a large number of its citizens from its borders: the United States adopted 7,906 Chinese babies in 2005 alone (U.S. Department of State, 2006b). According to the Hague Convention, the first priority should be to help the children find a home within their own culture. Until recently, Chinese law has inhibited this. Prior to 1999, if a Chinese couple wished to adopt a child, they had to be at least 35 years old and childless. This was to reduce the number of "illegal" children who violated the one-child policy; the government did not want couples to "hide" the birth of a daughter as an adoption so that they could try again for a son. However, it is a great shame in Chinese society to remain childless so late in life, and this policy greatly reduced the number of potential adoptions. In 1999, the law was changed to allow couples 30 years and older to adopt, and if the child was abandoned and living in an orphanage, the couple is permitted to already have one other child as well. These changes have helped substantially increase the number of domestic adoptions (Johnson, 2002).

The communal living provided in orphanages fit the traditional communist model well, and only in the past few years has China begun to develop a foster care system similar to that in the United States where non-relatives are paid to help care for children in need (Shang, 2002). The program did not really

get underway until international adoption agencies—first Holt International and then the Amity Foundation—supplemented the meager governmental stipend (Shang & Wu, 2003). There have been several different foster care projects in different regions of the country, and so far they appear to have been quite successful. In Nanchang, 98% of the children placed in foster care were adopted (Shang & Wu, 2003). However, since the requirements for being a foster parent are not as stringent as those for being an adoptive parent, the vast majority of foster parents are unable to adopt the children in their care (Lihua, 2001). This reduces the number of potential adoptive families even further.

Although the quality of care in the orphanages has been much improved (“China paying more attention,” 2001; Johnson, 2004; Platt, 2000), there is still more work to be done. A ranking Chinese government official stated in 2006 that orphans were still not receiving adequate care (“China’s orphans,” 2006). The growing number of children who have been orphaned by AIDS are having difficulty receiving services as well (“Thousands of AIDS orphans,” 2005).

It appears that in recent years, the sex of the child is becoming less important to parents. While some believe that the Chinese are reluctant to adopt non-related children, many Chinese families have been found to be willing to adopt, including daughters, if they could. The “ideal” family in China is often seen to have one child of each sex (Johnson, 2002). While families believe they need a son in order to care for them, they believe that a daughter is more loving, loyal, and obedient (Johnson, 2002; Johnson et al., 1998). The tradition of honoring the elderly and one’s parents has been lessening in recent years, and as a result, the city government of Nanjing has even taken to publicly shaming people who do not visit their elderly parents often (“Penalties for neglecting,” 2006). Daughters are seen as more willing to care for their parents and have a closer emotional bond, thus reducing the concern that elderly parents will have no one to care for them.

Another impact of the one-child policy and its resulting gender preferences has been to create a severe gender imbalance in China. While worldwide there are 105 boys to 100 girls, in China this has become 119 boys to 100 girls (“Retreat on criminalizing,” 2006). This results in there not being enough women for the men to marry when they age and can result in the marriages to trafficked women described in chapter 3. In an effort to stem this imbalance, China has outlawed sex-selective abortions and has piloted programs to pay the school tuition for poor families with a girl or from a family with two girls in an effort to reduce the prejudice against daughters (Yardley, 2005).

In sum, the fertility control policy, in combination with the traditional need for a son, resulted in substantial increases in the number of girls and children with disabilities being abandoned to orphanages due to their parents’ inability to raise them. China is now increasing its efforts to have these children adopted by families in their own country as opposed to parents from other countries, but the impact of the sex ratio imbalance will continue to have severe consequences for China. Due to the economic boom currently occurring in China, many more families will be able to afford the fine for an additional child, and it is likely that more families will be able to keep their girl child (P. Leung, personal communication) and it is hoped this will help rectify the imbalance. However, the control in population growth has resulted in a situation where there are now many more elderly persons who need to be supported than there are workers supporting them. This may affect China’s rapidly growing economy as the workforce shrinks (French, 2006).

What You Can Do Now

- Work with an organization such as the Coalition to Stop the Use of Child Soldiers that is trying to prevent the use of children in combat.
- Sponsor a showing of “Invisible Children” about the Night Commuters in Uganda.
- Raise money to help UNICEF or Save the Children in their work to help children.

What You Can Do as a Professional Social Worker

- Work with international adoptions.
- Conduct psychosocial counseling for children caught up in combat, either as soldiers or as victims.
- Work for an international NGO such as UNICEF or Save the Children.
- Raise awareness of the problems surrounding birth registration within your agency, particularly if you are employed in a development agency.

World Wide Web Resources on International Child Welfare

Children’s Rights Information Network (www.crin.org): This is a global network whose purpose is to disseminate information concerning the rights of children. They have information on a broad variety of topics relating to children and their rights.

Childwatch International Research Network (www.childwatch.uio.no): A network of institutions that conduct research relating to children. The research is aimed at improving children’s lives and well-being. They provide links to information from sites worldwide.

Coalition to Stop the Use of Child Soldiers (www.child-soldiers.org): An international coalition that works to stop the use of child soldiers. They have a number of resources on the issue.

Human Rights Watch (hrw.org/children): Human Rights Watch children’s section. Provides reports on a number of different issues.

International Labour Organization: International Programme on the Elimination of Child Labour: IPEC (www.ilo.org/public/english/

standards/ipec/index.htm): Provides information and statistics relating to child labor and the organization's work to eliminate it.

PLAN International (www.plan-international.org): An international NGO that works from a developmental approach to improve the lives in children in poor nations.

Save the Children (www.savethechildren.net; www.savethechildren.org [U.S. Branch]): An international NGO with branches in a number of countries. It works to improve the lives of children worldwide, including in the Global North. Its website offers a number of reports on issues that affect the lives of children.

Street Kids International (www.streetkids.org): A Canadian-based NGO that works around the world to help street children.

UNICEF (www.unicef.org): The United Nations agency that focuses on children; its website offers a huge amount of information concerning their different projects and reports. A wealth of information.

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5

War and Conflict

The nature of war and conflict has changed greatly over the years. It was after World War I, then known as the “Great War,” that social workers became aware of “shell shock,” the trauma that many soldiers experienced after participating in battle. This knowledge helped prompt the move of many social workers into the provision of mental health treatment, away from their traditional focus of services to the poor. Shell shock has now received the formal diagnostic name of post-traumatic stress disorder (PTSD). As our knowledge regarding the impact of violence and conflict on the human psyche has expanded, so have the categories of people experiencing it. Those affected by war are no longer primarily soldiers. No longer are there clearly defined battle lines in wars between nations; the impact of conflict spreads far beyond the battlefields. Today, 90% of those dying as a result of conflict are non-combatants, half of whom are children, reflecting the changing nature of conflict (UNICEF, n.d.).

As discussed in chapter 2, the Geneva Conventions of 1949 are the central documents for the humane treatment of people involved in conflict, whether they are combatants or civilians. The American Red Cross (2006, ¶9) states that “the conventions apply in all cases of declared war or in any other armed conflict between nations,” and as of 2005 all nations in the world except Nauru were parties to the conventions. These treaties are categorized under a branch of law known as international humanitarian law; this section of law is founded on the principles of humanity, impartiality, and neutrality (American Red Cross, 2006).

The central tenets of the conventions require that warring parties make distinctions between combatants and civilians and provide protection for

those civilians. Soldiers “placed out of combat” by sickness, wounds, or detention must be given medical care and treated humanely, regardless of on which side they fought. The taking of hostages and the torture of prisoners of war is expressly forbidden. Additionally, a representative from a neutral “protecting power” must have access to any person detained; this power is most commonly the International Committee of the Red Cross (Rogers, 2005). The Universal Declaration of Human Rights supports these principles found in the Geneva Conventions. Article Five states that “No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.” The impact of conflict on civilians is also addressed in the Universal Declaration of Human Rights; Article 14 provides rights to refugees and asylum-seekers: “Everyone has the right to seek and to enjoy in other countries asylum from persecution.”

Impact in Affected Countries

The impact of violence and conflict today goes far beyond the battlefield in terms of death and injury. Coghlan et al. (2006) estimated that the 6-year conflict in the Democratic Republic of the Congo [DRC] has caused almost 4 million deaths; the majority were caused by malnutrition and preventable illnesses rather than by violence. These deaths were an indirect result of the conflict due to its impact on the availability of good food and water, as well as medical care. Children under 5 are at special risk and in the study were found to constitute almost 50% of deaths, despite representing only 19% of the population. It was estimated that for every violent death in the DRC’s war zone, there were 62 nonviolent deaths as an indirect result of the conflict (Lacey, 2005).

Refugees

A refugee is legally defined as a person who has fled his or her country because of a well-founded fear of persecution based on race, religion, nationality, political opinion, or membership in a particular social group (UNHCR, 2004). Chapter 2 discussed how the Universal Declaration of Human Rights focuses on the rights of the individual rather than on community-level rights. The same is true of the definition of refugee: it focuses on the persecution of the individual and neglects community-wide persecution. Additionally, this definition excludes those who are fleeing

their country for other reasons related to their individual well-being, including war or natural disaster. It also excludes those who flee their home but remain within the borders of their nation, known as internally displaced persons (IDPs).

The U.N. High Commissioner for Refugees (UNHCR) monitors the condition of people it identifies as members of “populations of concern.” In addition to refugees, this definition includes asylum-seekers, stateless persons, and returned refugees as well as IDPs and people fleeing a broad threat such as war or a natural disaster. Representing the change in current warfare, the size of the “population of concern” to the UNHCR increased in 2005 to 20.8 million, but the proportion of refugees within that population decreased to 40%. The top five countries hosting populations of concern to the UNHCR are (in order) Colombia, Iraq, Pakistan, Sudan, and Afghanistan. Afghanistan is the source country for the largest number of populations of concern to the UNHCR, with 2.9 million affected people; these people are spread throughout Afghanistan, Pakistan, and Iran. Pakistan is the country providing refuge to the most refugees, followed by Iran (UNHCR, 2005). The occupied Palestinian territories have the largest actual population of concern, but they are not served by the UNHCR, but another agency. The countries with the largest populations of IDPs are Sudan, DRC, and Colombia (UNHCR, 2005). While many people are not aware of the situation in Colombia, the violence that has been occurring for decades has resulted in a high number of IDPs, a situation addressed in the chapter’s Culture Box.

Refugee camps, while affording some protection from the upheaval caused by conflict, are not ideal situations. The camps often do not have adequate sanitation, food, or medical care. To give some idea of the situations within these camps, Doctors Without Borders has created a picture essay of refugee camps at www.refugeecamp.org. MTV has created an online video game called “Darfur is Dying” to raise awareness of the genocide occurring in Darfur and the tenuous security situation. Players are in a refugee camp and must try to complete everyday tasks such as fetching water without being found by the *janjaweed*, the roving militia. It is extremely difficult to do, both in the game and in reality (www.darfurisdying.com).

Mental Health Impact

The mental health impacts of conflict can last long past the physical impacts if intervention is not provided. In recognition of this fact, Doctors

Without Borders now offers psychosocial services as well as medical services. As one staff member stated, “What do you do if there is enough food, but no one wants to eat?” (Doctors Without Borders, 2005a, ¶2). The core of Doctors Without Borders’ psychosocial approach is for their mental health workers to work with local residents to build the community’s capacity to resolve the trauma in a culturally appropriate manner. In Bosnia, the first place where Doctors Without Borders offered mental health services, they developed radio programs to educate people about common emotional reactions to trauma. This helped to lessen the stigma surrounding these reactions in order to allow people to acknowledge their suffering. Methods of providing services are adapted to community preferences: in Sierra Leone, people preferred informal group sessions for counseling, but in Chechnya, people were reluctant to participate in groups and counselors used an individual approach (Doctors Without Borders, 2005a). Social workers are among the mental health professionals who volunteer to work with Doctors Without Borders. These volunteers are experienced in working with trauma issues and PTSD (Doctors Without Borders, 2006).

Impact on Men, Women, and Children

The impact of violence and conflict differs by population: men, women, and children are affected differently by the same phenomenon.

Men Men are more likely to experience direct acts of violence. Coghlan et al. (2006), in their survey of the impact of the conflict in the DRC, found that 71% of those who died as a result of violence were men. In Colombia, the murder rate for men is an astonishing 221 per 100,000 deaths, as compared to the worldwide average of 8.8 per 100,000 deaths (Médecins Sans Frontières, 2006). It is common for a man to be forced to witness the rape of his wife or daughter, or be forced to commit the act himself, in order to degrade and humiliate him (Ward & Marsh, 2006). The stress placed upon men, including the shame of the rape of their wives, can lead to domestic violence, causing further problems within the household (Suárez-Orozco, 2001).

The failure to fulfill the male gender role can be detrimental to the mental health of men in times of armed conflict. Men are often unable to provide for their families and may see their families suffer from lack of

food or shelter. Men may also be unable to protect their families from the ravages of the conflict, including injury, sexual assault, or death. This failure to meet culturally accepted norms can hurt their well-being and may damage their standing in their family or in the community.

For young men, who have traditionally had more freedom than young women, the restraints imposed by conflict can be oppressive. Tavernise (2006) reports that in Iraq, the ongoing conflict has resulted in young adults being kept inside their houses. Their parents do not allow them out even for school or work for fear they will be killed. The nature of the sectarian violence has caused the loss of friends, due to death as well as increased sectarian allegiances. Tavernise states that due to the lack of jobs and little faith in governmental justice, more young men are joining armed gangs and militias, further increasing their risk of death as well as the death of others.

Women Women face many risks during times of conflict, but one of the largest is the risk of sexual assault. Despite the long history of rape as a tool of war, only since the Bosnian conflict has rape been recognized as a war crime for its tactical use during warfare. It is used as a form of torture to humiliate and degrade the opposing side in a conflict. Many cases of sexual assault are not reported as the victims fear retribution in the form of “honor killings” (see chapter 7) and social stigmatization. It creates terror in a population and can cause civilians to flee. It can also be used as a form of “ethnic cleansing” by impregnating women from the opposing side (Machel, 1996). During the last rule of the mujahideen in Afghanistan, rape was so common in Kabul that women were terrified to go outside, and in the beginning the rise of the Taliban was seen a welcome event (Benard, 2002). Human Rights Watch (2003a) found a similar situation in Iraq: women and girls reported that they were too frightened to go outside to work, school, or on errands due to their fear of sexual assault.

The current conflicts in Africa highlight the use of sexual violence as a war tactic. The United Nations’ top relief official stated in 2005 that “organized, premeditated sexual attack had become a preferred weapon of war . . . , with rapists going unpunished and victims of rape shunned by their communities” (Hoge, 2005, June 22, ¶1). He stated that the United Nations had documented more than 25,000 rape victims in the region of the DRC in 1 year. In northern Uganda, 60% of the women in a displaced

persons camp were known to be victims of sexual violence (Hoge, 2005, June 22), while a report assessing human rights abuses during the conflict in Sierra Leone found that over 50% of females interviewed had been subjected to sexual violence, including 26% who had been gang-raped (UNICEF, 2005).

The genocide occurring in the Darfur region of Sudan has caused a high level of chaos and sexual violence. A report compiled by Doctors Without Borders (2005b) stated that as a result of the violence, almost 2 million people in the region have fled their homes. However, even when they reach a camp for displaced persons, the violence continues. Women must leave the relative safety of the camp to collect firewood and water, and they are attacked while pursuing these daily activities. In a 6-month period, Doctors Without Borders treated almost 500 rape victims and believed that number was only a portion of the actual victims. In more than half of the cases, physical assault accompanied the sexual assault, and almost one-third were raped more than once. Eighty-one percent of the women were assaulted by military or militia forces that were armed. There is great pressure from the Sudanese government not to report rape; women are typically discouraged from reporting by police and can face great shame in their community if the attack is known. After the release of the Doctors Without Borders report, a director of Doctors Without Borders was detained by the Sudanese government and charged with spying, but the charges were dropped after a protest by the United Nations (Hoge, 2005, July 30). Doctors Without Borders included the following case study in its report to illustrate the repercussions of sexual assault:

In 2004, a 16-year-old girl was collecting firewood for her family when three armed men on camels surrounded her, held her down and raped her, one after the other. When she arrived home, she told her family what had occurred. They threw her out of the house and she had to build her own hut away from them. Her fiancé broke their engagement, stating that she was now disgraced and spoiled. When she was eight months pregnant as a result of the rape, the police came to her home and they asked about the pregnancy; she told them she had been raped. They told her that since she was not married, this was an illegal pregnancy. They beat her with a whip and placed her in jail for 10 days in a cell with 23 other women in the same position. These women were forced to clean, cook and fetch water for the

police officers. The only food and water she had was that which she could scrounge in the course of her duties. (Reprinted from Doctors Without Borders, 2005b.)

Although awareness of sexual violence during times of war and conflict has risen and it is now recognized as a war crime, for the most part perpetrators continue to act with impunity. As discussed above, they are often in league with the government, which is therefore reluctant to call attention to their actions. Even UN peacekeepers have been found to sexually exploit women, such as exchanging food for sexual intercourse (Martin, 2005). In addition, due to the lower status of women in these societies, women have difficulty receiving justice for the violence inflicted upon them, even in times of peace; war and conflict only exacerbate this difficulty. As many societies do not allow women to have control over their bodies, including the right to decide when and with whom to have intercourse, this makes the prosecution of rape during conflict even less likely (Jefferson, 2004).

The mental health impact of these sexual assaults can be long-standing and require targeted interventions to heal. These women often face great difficulty in coping with this trauma, not only because of the stigma in admitting what is seen as a shameful act, but also because they may be grieving over the death of loved ones. UNICEF has established programs in affected countries to provide counseling to affected women and to help decrease the stigma associated with their assault (UNICEF, 2005). Medica Mondiale (www.medicamondiale.org/_en) is a German organization dedicated to helping women and girls heal from the trauma of rape during times of war and conflict. Founded in 1993 in reaction to the mass rapes occurring at that time in Bosnia, it currently operates in a number of countries, including Afghanistan and Iraq. Through networking of women and advocacy, they are helping to create change to heal those affected by wartime sexual violence.

The end of conflict does not necessarily mean the end of difficulties for women. Women may face additional burdens due to the death of their husbands. In countries where women do not have equivalent legal standing, they may be prohibited from inheriting their husband's possessions, lowering them into further poverty. They may also lack social protection as unmarried women, increasing their vulnerability. Women who have

moved into positions of leadership or employment during the conflict due to the lack of men may lose those positions at the end of the conflict. Women who were involved in the conflict, serving as combatants or sex slaves for example, can have difficulty re-integrating into the community after the conflict. There may be a backlash against them in the community for their actions during the conflict, regardless of whether their participation was voluntary or not (UNICEF, 2005).

Children UNICEF (as cited in Machel, 1996, ¶1) states that “Even if they have never seen a gun, millions of children suffer from wars, as resources that could have been invested in development are diverted into armaments.” As discussed earlier, the majority of deaths that occur as a result of armed conflict are not violent deaths but result primarily from malnutrition and poor medical care, to which children are particularly vulnerable. In camps for those who have fled the violence, communicable disease is common; in fact, it is the most common cause of death for children in the camps. Malnourishment is a frequent reason why they cannot fight these illnesses (Machel, 2001).

The direct impact of conflict on children has been alarming. UNICEF estimates that more than 2 million children have died and at least 6 million have been permanently disabled or seriously injured as a direct result of armed conflict; another 1 million have been orphaned or separated from their families. Twenty million children have been forced to flee their homes due to armed conflict and are now living as IDPs in their own country or as refugees in another country (UNICEF, n.d.).

War and armed conflicts also disrupt children’s education. Even children who are not combatants or who flee the conflict often have their educations affected. During times of violence, parents are more apt to keep children home in order to protect them. Even for children who are able to attend school, the trauma they have witnessed and the state of fear can inhibit them from concentrating and learning (Kohli & Mather, 2003). Malnutrition can hinder their cognitive development and thus their ability to learn (Machel, 2001). In rural areas, the school building may be the only permanent structure, making it a target for capture or destruction. Teachers can also be a target for armed forces due to their high status in the community or their strong political views (Machel, 1996).

The impact of conflict on education is starkly clear in Somalia. Lacking a functioning national government since 1991 and beset by warring regional factions, Somalia’s educational attendance is the lowest in the world:

12% for boys and 10% for girls. These correlations between armed conflict and school attendance are echoed throughout the world (UNICEF, 2006).

Land mines have been identified as a special threat to children. Land mines often remain in place long after the end of a conflict. It takes approximately 100 times longer to clear a mine than to place it; the initial cost of a land mine is about \$3, but they can cost up to \$1,000 to clear. Children are at special risk for being land mine victims because some of the land mines are brightly colored and can resemble toys. The “butterfly” mine, once common in Afghanistan, came in several colors and had a “wing,” attracting young children (Machel, 2001). Many children cannot read and may not be educated about the dangers of land mines. Children from poor families are at particular risk: they are more likely to be in mined areas when scavenging for firewood, fetching water, cultivating crops, or herding animals (Machel, 2001).

Due to these risks, the International Campaign to Ban Landmines (ICBL), comprising over 1,000 NGOs, 60 governments, the International Committee of the Red Cross, and UN agencies, developed the 1997 Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines, and on their Destruction. In 1997, the ICBL and its coordinator, Jody Williams, received the Nobel Peace Prize for their efforts. Since this convention in 1997, the global production of land mines has greatly decreased; the number of producing countries has dropped from 54 to 16. However, the United States remains on the list of producing countries, together with such countries as China, Cuba, Iran, Iraq, and Pakistan (Machel, 2001). The U.S. government states that it will not be a party to the convention as land mines remain a tactical weapon in warfare that it perceives as irreplaceable. Instead, it plans to convert to the use of “non-persistent” land mines that will turn themselves off after the end of the conflict (U.S. Department of State, 2004).

The issue of children serving in armed conflict was discussed in detail in chapter 4. The opposite side of this coin is the issue of children as refugees from war and conflict. Article 22 of the Convention on the Rights of the Child requires nations to provide protection and assistance to child refugees. Children of impoverished families are more likely to be caught in the conflict as child soldiers or refugees, while wealthier families are able to send their children abroad to escape the conflict. However, the arrival of children as unaccompanied minors in a third country creates additional issues, including the impact of trauma-related mental health issues.

Children will often have psychological issues as a result of combat, regardless of whether they were a combatant or not. After the genocide in Rwanda, for example, nearly 80% of children had lost immediate family members and more than one-third of those children had witnessed the murder (Machel, 1996). In Afghanistan between 1992 and 1996, 72% of surveyed children had lost a family member and 40% had lost a parent (Wali, Gould, & Fitzgerald, 2005). These statistics make it clear how conflict can affect children, even if the children themselves were unharmed.

Living in a state of fear can create permanent trauma for children if it is not addressed. Children can overcome this trauma, but it requires culturally sensitive care, including supportive caregivers and a secure community (Machel, 2001). In some cases, parents will send their children away from the conflict in order to protect them, but this separation can create additional issues for the child. The separation can exacerbate trauma as well as create concerns about unaccompanied children seeking asylum in third countries (discussed in more detail in the next section).

Impact on Receiving Countries

Refugees and Asylum Seekers

A refugee is a person outside of his or her country who has a well-founded fear of persecution in the home country due to political beliefs, race, religion, nationality, or membership in a particular social group. The condition of being a refugee is determined by the UNHCR. U.S. law also specifically states that a person fleeing, or who has suffered, a forced abortion may be considered a refugee. In some cases, refugees are unable to return to their home country and are assisted with resettlement in a new country. The United States has accepted refugees from a number of countries over the years. However, the new laws created as a result of the attack in the United States on September 11, 2001, have reduced the number of refugees eligible to resettle in the United States. The Patriot Act and the Real ID Act both ban entry to the United States to anyone who belongs to, or has provided material support to, armed rebel groups. This requirement does not vary if the rebel groups fought alongside American troops or opposed governments to which the United States government was opposed, or if the group is not considered to be a ter-

rorist organization. Thus, the number of refugees from countries such as Myanmar, Vietnam, Laos, and Cuba has been substantially reduced. For fiscal year 2006, the United States had expected to resettle 54,000 refugees but actually resettled only 41,200 (Swarns, 2006, September 28).

The status of being an asylum-seeker is different from that of being a refugee, although the same criteria of the five areas of persecution are applied. A person who has a fear of persecution in his or her home country may apply to another country for asylum in that nation. The principle of *non-refoulement* forbids any nation from returning a person to a country where he or she would face persecution because of any of the five areas of persecution. However, this persecution must be proved in court, and the evidence required for asylum is much greater than that of refugee status and therefore has a much higher rate of denial. For example, those seeking asylum due to gender-based persecution claims have traditionally had great difficulty in proving their case in many Global North countries, where it can be difficult to prove that the discriminatory treatment of women in such areas as domestic violence and female genital cutting can rise to the level to be considered persecution (Human Rights Watch, 2004). Due to the skepticism with which most refugees and asylum-seekers are viewed, their treatment in host countries has often been questionable in terms of violations of human rights. This text will examine conditions in two Global North countries (Australia and the United States) and two Global South countries (Thailand and Pakistan).

Thailand is host to refugees from Myanmar fleeing the repressive government there; the majority of these refugees are of Karen ethnicity (Refugee Council USA, n.d.). There are approximately 140,000 Burmese individuals living in refugee camps and 2 to 3 million living outside of them in Thailand (International Rescue Committee, 2006). Under Thai law, all foreign nationals without proper documents are considered illegal immigrants, and those who are not officially registered as refugees are considered in violation of Thai law. This is despite the fact that the 1951 Refugee Convention specifically states that people fleeing persecution often cannot follow regular procedures for entering a country and should not receive adverse treatment for arriving in a country without proper paperwork or approval. Those who are registered must remain in the refugee camps set up on the Thailand/Myanmar border and are not allowed to leave. If they do leave, they are considered to be in violation of the law and may be arrested and deported. As a result, these refugees are

unable to seek employment or go to school outside of the camps, limiting their prospects for improving their lives and becoming self-sufficient. The camps are overcrowded, some severely so, and typically lack adequate water and sanitation, raising public health concerns (Refugee Council USA, n.d.).

Pakistan is host to approximately 1 million refugees from Afghanistan, making it the country hosting the largest number of refugees. This number includes only those refugees living in camps who are assisted by UNHCR, making the actual number of refugees in Pakistan much higher (UNHCR, 2005). Pakistan and Iran (the other country to which Afghans have fled in large numbers) have resisted integrating Afghan refugees into their populations, due in part to the large number of people involved. Pakistan and Iran, even before the fall of the Taliban, stated these people were economic migrants, not refugees, in order to avoid responsibility for providing services guaranteed to refugees. Instead they were contained within refugee camps or struggling in the community fearing identification. It was not until 2006 that Pakistan agreed to register and provide identification for Afghan refugees in their country (UNHCR, 2006a, 2006b).

While approximately half of Afghans who had fled their country have returned home, large numbers remain in the countries of refuge (UNHCR, 2006b). Despite the fall of the Taliban in 2001, many Afghans, especially those from areas in the south, southeast, and central highlands, have been reluctant to return home due to continuing security concerns, as well as drought and extreme poverty in those regions, and therefore remain in their host countries (UNHCR, 2006b).

In countries in the Global North, the process of obtaining asylum is a long and difficult one. In the United States, when persons are found to have entered the country without the proper documents, they are supposed to be asked if they fear being sent home. Those who say yes are to be given a hearing before a judge to assess if this is a credible fear that would qualify that person for asylum. However, studies have found growing use of "expedited removal," in which those who do not evidence fear are immediately returned and those who do are housed in detention facilities (Swarns, 2006, February 20).

A federal study found extreme variation in the treatment of asylum-seekers between U.S. airports and concluded that a person's chance of obtaining asylum may depend on where he or she entered the country. Kennedy Airport was the most difficult; personal interviews assessing fear

of return were typically conducted at public counters (inhibiting disclosure) and shackles were routinely used on asylum-seekers. The study found that in general the question-and-answer forms used during these preliminary interviews were “unreliable and incomplete” and were later used by immigration judges to impeach the testimony of the asylum-seeker. In some cases, although the person stated he or she had a fear of returning to his or her country, the immigration officer recorded on the interview form that the person stated no fear. In approximately half of all cases, the officers did not inform the person of the protections afforded them by U.S. law, although it is mandatory to do so. The study found that asylum-seekers were typically treated in the same manner as criminals: being strip-searched, shackled, and put in detention centers while their claims were evaluated was common (Bernstein, 2005; Swarns, 2007).

The commission made five recommendations to improve the process, but they have yet to be implemented (Swarns, 2006, February 20; 2007). Even when an asylum-seeker is granted a hearing before a judge, there is no guarantee of a fair hearing. Federal appeals judges, who review the asylum decisions upon appeal, state there is a pattern of biased and incoherent decisions in asylum cases (Liptak, 2005). The courts are regarded as swamped, with each judge having up to 70 cases scheduled at a time without law clerks, stenographers, or sufficient competent lawyers (Bernstein, 2006). The following case study illustrates some of the legal difficulties faced by people seeking asylum in the United States:

Joseph is an Egyptian man, but does not follow the religion of the majority in Egypt; rather, he is Christian. Muslim fundamentalists, with the full cooperation of Egypt's secret police, tried to forcefully convert him and members of his family, including trying to force him to marry a Muslim woman. Due to his refusal to convert and accept the forced marriage, he was detained and tortured. Due to the injuries sustained during the torture, they had to seek treatment for him at a hospital. At this time, Joseph was able to escape from them and flee the country. However, upon landing in the United States, he found that Egyptian authorities had declared him wanted for murder and he was detained upon arrival. During his detention, he came to the attention of Kathleen Lucas, founder of CIRCLE, an agency to assist refugees and asylum-seekers. Kathleen helped lead an effort

to prevent him from being deported and to obtain his release from prison, including research missions which found the woman Joseph was accused of murdering to be alive. Yet despite this evidence, Joseph remained detained. They secretly flew Joseph's mother to the United States so that she could testify as to the persecution they had faced in Egypt due to their religion at a hearing under the Convention Against Torture. Joseph was granted relief under the Convention Against Torture and his mother was granted asylum due to her testimony, yet still Joseph remained in prison. Finally, after over eight years of detention, Joseph was allowed to move into the community, but still lives with the threat of being deported to a third country.

The removal of people from the United States who have been deemed to have violated immigration law by committing crimes has also raised concerns. There are currently over 1,000 people housed in long-term detention who have been ordered to be deported by U.S. authorities but are unable to be returned to their home countries because the U.S. lacks diplomatic relations with that country (such as Cuba) or because there is no functioning government (such as Somalia) (Wilgoren, 2005). These people remain in limbo: they cannot return to American society but cannot return to their home country either.

In Australia, all persons attempting to enter the country without proper documents are detained. As in Thailand, this is despite the fact that the 1951 Refugee Convention specifically states that people fleeing persecution often cannot follow regular procedures for entering a country and should not receive adverse treatment for arriving in a country without proper paperwork or approval. The convention states that detention should be used only as a last resort, not as a routine policy (Fiske, Watkinson, & Briskman, 2006). An inquiry into immigration detention by social workers found that the system for determining refugee and asylum-seeker status appeared to be arbitrary, with some people housed for a month and others for years with no indication of differences between the cases. Detention was found not only to exacerbate existing mental health issues, but also to cause issues where none had existed before, and a thorough government inquiry was called for (Fiske et al., 2006).

The issue of unaccompanied children seeking refuge in third countries has concerned human rights activists for some time. Children may have

been sent without their parents or other caregivers for a number of reasons: in a bid to keep them safe, because they were separated from their family during the conflict, or because their caregivers may have died in the conflict (Mitchell, 2003). A common problem that arises is that of documentation of minor status. Minors must supply documents to prove their age if their appearance does not substantiate their claimed age. Due to the nature of their flight and the conflict they are fleeing, many lack documentation and may be erroneously referred to adult services, where they will not receive services appropriate to their age (Cemlyn & Briskman, 2003; Mitchell, 2003). In Britain, although it is against policy to detain unaccompanied minors longer than 24 hours, in practice it does occur, especially if there is a difficulty in documenting age (Cemlyn & Briskman, 2003). In Australia, some unaccompanied minors are placed in detention facilities, while those in the community lack access to post-secondary education and counseling services (Cemlyn & Briskman, 2003).

Services for Affected Populations

While all immigrants to a new country face challenges in adapting to a new culture, refugees and asylum-seekers face special barriers (Suárez-Orozco, 2001). They have not chosen to leave their home country but were forced to migrate. All that was familiar and comfortable has been lost. Asylum-granting countries, typically those within the Global North, often have very different cultures than those from which the refugee is fleeing. These cultural differences, including differences in the treatment of women and expectations of children, can create strife within the family as some family members become more acculturated than others. Refugees who look different from the majority in the host country may experience discrimination (Suárez-Orozco, 2001). There is often an economic impact, as professionals in their home country are often not granted equivalent status in their new country and may be forced to work multiple low-wage jobs for economic survival, resulting in financial stress as well as emotional stress from the loss of status.

Because they have been granted the status of refugee or asylum-seeker, it can typically be assumed that they have suffered trauma. The trauma may have been inflicted upon them or upon those dear to them and often results in long-term impacts such as PTSD. The basic trust in humankind has often been lost, and survivors will be mistrustful, especially of those in

positions of authority. This group may also have suffered torture, and this should be assessed. Engstrom and Okamura (2004) note that the experience of torture often goes undocumented, and the unaddressed trauma can cause problems for the individual and family.

The Professional Role of Social Workers

Social workers can work with refugees and asylum-seekers in countries in the Global North, as well as in countries from which people are fleeing and their neighboring countries. The issues will vary depending upon where one engages them. In countries of refuge in the Global North, the immediate fears of danger have ebbed and cultural difficulties will dominate.

The ability of social workers to work on the macro level to develop effective policy or coordinate culturally appropriate services combines well with our abilities on the mezzo and micro levels to work with people who have experienced trauma to help them resolve it. Social workers can work with many different types of organizations in this field. The United Nations, international NGOs such as Doctors Without Borders, and advocacy organizations and local service providers are all potential employers. Due to our broad training, social workers are able to work directly with victims of war and conflict, advocate for better policies affecting this population, and conduct research on issues of concern; these are only a few options. As with most areas of international social work, starting as an intern or volunteer is an excellent way to get experience in this competitive area. Another strong skill is the ability to speak a language other than English.

Conclusion

The impact of a regional conflict is felt worldwide in our globalized world. Social workers in the United States work with refugees and asylum-seekers and must be knowledgeable about the impact that conflict has had on their lives and the trauma they may have suffered. The impact will vary by where they are from and whether they are male or female, adult or child. We must be prepared to help them resolve their trauma so they can begin to reconstruct their lives.

Culture Box

COLOMBIA

Although Colombia's ongoing conflict among the government, the guerrillas (also called rebels), and paramilitary groups does not receive much attention in the world press, Colombia has the world's largest population of IDPs due to this conflict. At the end of 2005, 2 million IDPs were being assisted by UNHCR, compared to 1.2 million in Iraq and 841,000 in Sudan (UNHCR, 2006c).

The roots of the violence in Colombia are difficult to untangle and stem from a variety of sources, but the social and political exclusion of the poor is a driving force (Refugees International, 2005a). During colonialism, land was unequally divided, with the wealthy colonists having the largest proportion of the best land. The upper class consisted of predominately White, locally born landowners, while those in the lower class were primarily *mestizo* (mixed-race) laborers and farmers (Loughna, 2002). This inequality continued after independence from Spain in 1810: as recently as 2004, 0.4% of the landowners owned 61% of the rural land and more than 50% of the population lived below the poverty line (Internal Displacement Monitoring Centre [IDMC], 2006). Colombian society also continues to be highly stratified, with divisions based on types of employment, wealth, and Spanish heritage. It is one of the countries with the worst inequality levels in the world (Kline & Gray, 2000). This social stratification has helped drive the violence. What follows is a basic explanation of a complex problem.

After independence, two political parties were formed: the Liberals and the Conservatives. The Liberals supported free trade, a federal government, and secularism; in contrast, the Conservatives wanted a centralized authoritarian government and strong Roman Catholicism and tended to favor the landed elite (Loughna, 2002). In the late 1940s, the assassination of the leading Liberal party presidential candidate resulted in a mass uprising. This helped trigger a period known as *La Violencia* (The Violence) from 1948 to 1958. In 1958, the Liberal and Conservative parties developed a power-sharing system known as the National Front, which ended *La Violencia*, but due to its elite nature it shut out the disenfranchised (the peasants). The peasants had survived *La Violencia* by moving to uninhabited areas of the country. They cleared their land for farming only to have it taken by the government. These rural dwellers decided that their only chance to achieve social justice was to wage a guerrilla war. The basic goal was agrarian reform, but they also were fighting for improved services, social equality, and improved distribution of income. The organization was formalized in 1964 as FARC (Colombian Revolutionary Armed Forces). In that same year, another rebel group, ELN (National Liberation Army), was formed by university students on the principles of guerrilla warfare. During the 1960s these rebel groups remained in the rural areas of the nation and focused on achieving their goals of social justice.

However, they controlled these areas through terror and intimidation of local peasants, including such acts as kidnapping, murder of civilians, torture, and forced recruitment (IDMC, 2006). In 1974, the National Front power-sharing scheme was dissolved, but fundamental issues affecting the poor remained unresolved and the rebel groups fought on. In the 1970s and 1980s the coca trade boomed, fueled by Americans' and Europeans' desire for cocaine as well as the drop in coffee prices (IDMC, 2006). Many of the rural peasants migrated to FARC-controlled areas to grow coca and to make money. This source of wealth provided the income they had long sought. However, the drug trade soon brought increased problems: drug-related violence increased, drug barons bought up large farms to grow coca, and the production of food decreased as fields were used to grow coca instead of crops.

While the rebels and the drug lords were originally in sympathy with each other, this ended as the drug lords became rich, bought land, and became the wealthy landowners against whom the rebels were fighting. The guerrillas began kidnapping family members of the drug lords as a good source of income, and the drug

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lords and other large landowners formed their own paramilitary armies to fight the guerrillas. However, the paramilitary did not restrict itself to only fighting the guerrillas: they also used this as an excuse to displace whole villages on the premise of fighting rebels, but in actuality to clear the land for the drug lords. These paramilitary forces were also aligned with the government, but the government forces were unable to control them. In 1989, membership in paramilitary groups was made illegal, but this did little to diminish their numbers or influence. The paramilitary forces have also become known for human rights violations, including massacres, torture, and mass displacement. They have engaged in "social cleansing," killing those of whom they disapproved, including homosexuals, the homeless, prostitutes, and drug addicts (IDMC, 2006).

All three of the factions fighting in Colombia use child soldiers, but the guerrilla groups and the paramilitary forces are worse offenders than the government. Human Rights Watch (2005b) has singled out these groups as some of the worst offenders globally, with 80% of Colombian child soldiers in the guerrilla groups and the other 20% fighting for the paramilitary groups. Human Rights Watch (2005b) estimates that more than 11,000 children are fighting in Colombia in these groups, constituting approximately one in four combatants. Some children are coerced into joining the fighting, but most join voluntarily, seeking food, affection, safety, or the perceived glamour of fighting (Human Rights Watch, 2003b, 2005b). One quarter to one half of the guerrilla groups' soldiers are females, including girls as young as eight (Human Rights Watch, 2003b). The paramilitary groups had promised in 2002 to release all of their child soldiers but failed to do so. FARC has refused to even engage in talks on their use of child soldiers. FARC and ELN have now largely abandoned their original social justice goals and are focused on the wealth and power to be obtained through the drug trade.

In the late 1990s, Plan Colombia was introduced by the then-president in conjunction with the United States to battle the drug trade; Colombia is the fifth largest recipient of American foreign aid (Congressional Research Service, 2005). Plan Colombia's most notorious feature is aerial fumigation to eradicate coca. However, this fumigation damages all crops, not just coca, and appears to have negative health effects on those exposed to it. The spraying has caused an increase in poverty in affected regions and helped to drive legal farmers off their land. The aerial fumigations are also typically preceded by military operations by the army against other armed groups, causing the local population to flee for safety (Refugees International, 2006). In recent years, the violence has abated somewhat, but the impact of the decades-long fighting continues to hurt the people.

As discussed above, rural villagers have been displaced (by both guerrilla groups and paramilitary groups) in large numbers so that the land can be cleared for economic gain. In violation of the Geneva Conventions requiring that armed factions distinguish between soldiers and civilians, much of the violence is deliberately aimed at civilians in order to displace them from their land (IDMC, 2006). Since 1985, it is estimated that between 2 and 3 million Colombians have been displaced, with 75% of them being women and children (UNHCR, 2006b). Because Colombia began registering displaced people only in 1994, its official numbers are much lower (Refugees International, 2005a). Additionally, many displaced Colombians do not like to register as it makes them vulnerable to attacks by armed groups. They fear if they identify being attacked by one group, they will be labeled as sympathizing with the other side (Refugees International, 2006). Some have fled over the border to nearby countries such as Ecuador and Costa Rica or sought asylum in the United States, but the vast majority remain in Colombia.

Colombia's laws governing services to those who have been internally displaced are among the most advanced in the world, but they have not been fully implemented and Colombia's Constitutional Court has decreed the governmental response to be inadequate and unconstitutional (UNHCR, 2006b). The government of Colombia stated that services especially for the displaced would discriminate against other poor people in the country, but studies have found that the displaced are worse off than other impoverished

people as they have been forced to abandon all that they had accumulated (Human Rights Watch, 2005a). Seventy percent of IDPs have two or more unmet basic needs, including housing, basic sanitation, and school enrollment, compared to only 10% of urban dwellers (IDMC, 2006).

While in the past there were mass displacements when whole villages were affected, in recent years this has changed as it becomes more common for individuals to be targeted and threatened. These individuals then flee, causing a steady flow of displaced individuals, in contrast to the movement of large groups. Colombians call this *deplazamiento gota a gota* (drop by drop displacement). Due to this change in the flow of displacement, the numbers of those fleeing are no longer as noticeable to the Colombian authorities (Refugees International, 2005b). Those who have fled to the cities have difficulty re-establishing themselves. Those who do register receive only 3 months of assistance, such as emergency food and supplies. The displaced typically experience stigmatization in the urban areas to which they have fled; residents believe that these displaced persons are trying to “take advantage of the situation and try to get some free assistance.” They wonder what the displaced “have done to feel so threatened. Maybe they are guerrillas themselves” (Médecins Sans Frontières, 2006, p. 30). This stigma makes it even more difficult for them to re-establish themselves after displacement.

Those most disproportionately affected by displacement are the traditionally most vulnerable and stigmatized groups: the indigenous people and Afro-Colombians. Although indigenous persons constitute only 2% to 3% of the nation’s population, they represent approximately 8% of those who have been displaced (UNHCR, 2006b). Together with Afro-Colombians, they constitute one third of IDPs, despite representing only 11% of the population (IDMC, 2006). This disproportionate impact is due largely to the fact that these peoples were the most likely to be living in the affected rural areas, where there is commercial interest or the potential for drug production. One survey found that nearly half of the municipalities affected by aerial fumigation were inhabited by indigenous and Afro-Colombian people (IDMC, 2006). Additionally, their skills are ill-suited for the urban environments to which they fled for safety, and they struggle to survive.

The displacement and persecution threatens the loss of their traditional culture. Many of these people traditionally have not had government identification, but in the current environment, they are considered by paramilitary groups to be rebel sympathizers and face persecution if they cannot show identification (Spindler, 2003). One group noted that in the city to which they had fled, they lived in substandard conditions, families broke up, girls began working in the sex trade, and employment was difficult to find. They desperately wanted to return to their land, stating, “A *campesino* without land is like a fish without water. We need land to survive and maintain ourselves” (Refugees International, 2005c, ¶18). Therefore, some decided to return even though it was not yet safe.

The aim of the government of Colombia is to return to their homes those who have been displaced, but this is difficult due to the continuing violence. Many do not want to return, and those who do have too little support to ensure their safety. Many returned civilians have been forced to flee again due to continuing instability in their home regions or because their land has become occupied by someone else in their absence (Refugees International, 2006). Some people do not want to return and would prefer to remain in the cities but are forced to return. One study found that 61% of IDPs do not want to return and an additional 21% were ambivalent due to the increased safety, as well as educational opportunities, in the cities (Lidchi, Tombs, Magalheas, & Lopez, 2004).

The Colombian government has had the army lead in returning people to the areas from which they have fled. However, this strategy has not helped but typically has only worsened these returns. The presence of the army creates difficulties for those returned, as they draw attacks by the rebels. Additionally, the Army conducts military operations in the area to try to fight the guerrillas, including interrogations of whole villages. Women who have lost their husbands to the violence have difficulty re-establishing

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themselves in the village without the man's labor (Refugees International, 2005d). Many villagers have found upon return that all of their possessions are gone. For some villages that have been abandoned, the jungle has reclaimed the land, destroying the roads and buildings that had been established. Mental health needs have been found to be highest among those who have returned compared to those who did not flee or those remaining in the urban areas to which they fled (Médecins Sans Frontières, 2006). The villagers have stated they require basic social services such as schools and medical care, but they do not receive these (Refugees International, 2005e).

The physical and mental health of these IDPs has obviously been affected. A 2006 report by Médecins Sans Frontières found that violence is the leading cause of death for both men and women in Colombia and the second leading cause of death for children aged 5 to 14. Due to the conflict, it is difficult for health providers to reach rural residents, increasing their health needs. Those who have fled their homes will settle in urban slums, with the health risks associated with such living conditions. The mental health implications of this trauma are far-reaching. Médecins Sans Frontières notes that Colombians, when referring to displacement, do not use the phrase *estar desplazado*, which would indicate a temporary displacement. Instead they use *ser desplazado*, which indicates a permanent state of being, for even those who are able to return home are permanently affected by the displacement.

Médecins Sans Frontières (2006) has noted the high level of physical symptoms associated with stress during medical examinations; patients frequently state that they have headaches, neck pain, back pain, and difficulty sleeping, among other symptoms. Rural villagers live in a high state of fear due to the frequent acts of violence that occur in their area. The children often have behavioral issues, such as being highly aggressive or withdrawn, and have difficulty concentrating in school. Patients of Médecins Sans Frontières frequently state that they need to tell their story, indicating the high need for mental health services to assist in resolving the trauma. Médecins Sans Frontières psychologists have found that half of their consultations in the urban areas are triggered by experiences of violence; 37% of patients had experienced the murder of a close family member and 10% had a family member "disappear." One study found that 52% of displaced women had suffered physical violence and 36% had suffered sexual violence (IDMC, 2006). More than 1 million children are among the displaced, and one-third are unable to access the national educational system, often due to associated costs such as uniforms, books, or transportation (IDMC, 2006).

Mental health service providers in Colombia have found the family biogram to be useful in working with those who have been internally displaced (Lidchi et al., 2004). This tool maps medical, socioeconomic, employment, and housing data over a longitudinal period. Themes have included changes in family structure, living conditions, trauma and loss, and available resources. Plotting this information allows service providers to determine common experiences of displaced persons. They have been able to determine that key factors affecting the desire to return to the home village include changes in family status after displacement, the family's economic vulnerability, and the evaluation of their safety in the new community in relation to the old community. This tool is also useful to the family as it helps them examine how they have coped.

The needs in Colombia are great. The violence has been going on so long that most citizens cannot remember a time when it did not occur. It is complicated by pressure from other governments as well as multinational corporations that would prefer certain outcomes. But while the poverty continues and the demand for coca remains high, the path to peace will be difficult.

What You Can Do Now

- Volunteer to teach English as a Second Language.
- Intern at an agency serving refugees and asylum-seekers.
- Visit asylum-seekers detained in prisons.
- Lobby for humane laws for asylum-seekers.
- Write letters to media outlets asking them to cover stories relevant to refugees and asylum-seekers to help others become aware of their plight.

What You Can Do as a Professional Social Worker

- Work for an organization helping to resettle refugees and asylum-seekers in the United States.
- Work to create policies for more humane treatment of asylum-seekers.
- Work for an international organization such as UNHCR or ICRC.
- Work in refugee areas to provide services in or near the refugees' home countries.
- Provide mental health services through an organization such as Doctors Without Borders.

World Wide Web Resources

Bridging Refugee Youth and Children's Services (www.brycs.org):

Provides information for social service practitioners working with refugees.

Doctors Without Borders/Médecins Sans Frontières (www.dwb.org;

www.msf.org): Their website provides information about the countries in which they work and the services they provide.

Forced Migration Online (www.forcedmigration.org):

Provides access to a variety of online resources relating to forced migration. Offers a variety of resources, including a focus on international law.

Internal Displacement Monitoring Centre (www.internal-displacement.org):

The leading international body monitoring conflict-induced internal displacement worldwide. They provide information regarding people who have been internally displaced.

International Rescue Committee (www.theirc.org): Works around the world to provide assistance to refugees, both in emergency situations and assisting in resettlement programs.

Refugee Council USA (www.refugeecouncilusa.org): A coalition group of U.S. agencies concerned with refugees and asylum-seekers. The website has numerous links to information for advocates of this population.

Refugees International (www.refugeesinternational.org): An agency that works as an advocate for refugees both within their home countries and in receiving countries, such as the United States. Provides information about their projects and the situations of refugees around the globe.

United Nations High Commissioner for Refugees (www.unhcr.org): The UN agency in charge of refugee issues. Its main purpose is to lead and coordinate international action to aid refugees to help ensure their rights.

6

AIDS

Article 25 of the Universal Declaration of Human Rights states that all people have the right to medical care adequate for their health and well-being. Without this right, people's access to their other rights, including the right to life, is limited. In many nations, including the United States, a person's access to medical care is based on his or her personal financial resources. Examining AIDS in a global context sharply highlights this social injustice.

AIDS, first identified in 1981, has become a worldwide epidemic, growing far beyond initially infected populations. U.N. AIDS (2006a) states that almost 40 million people are currently living with HIV/AIDS. Over half of those infected live in sub-Saharan Africa; South and Southeast Asia is the next most affected region. Reflecting the shift in affected populations, on World AIDS Day in 2005, U.N. AIDS issued a statement stating that women and girls "bear the brunt" of AIDS (U.N. AIDS, 2005a). Women are at increasing risk of this disease for both biological and social reasons. The proportion of women infected has risen in every region worldwide and is nearing 50% globally; in sub-Saharan Africa, it is approaching 60% (U.N. AIDS, 2004a). In sub-Saharan Africa, for every two men infected, there are three women. Among people aged 15 to 24, this widens to three women for every man (U.N. AIDS, 2006a). The disease is also affecting younger populations, with young people aged 15 to 24 making up nearly half of all new infections worldwide (U.N. AIDS, 2004b).

AIDS exists in a broad socioeconomic situation that must be considered when developing responses to the disease (Commission on HIV/AIDS and Governance in Africa [Commission], n.d.). In an analysis of the

potential paths for the development of HIV/AIDS in Africa between now and 2025, U.N. AIDS (2005b) stated that if AIDS is viewed in isolation as only a medical illness, the epidemic will greatly worsen. They state that what must be done to eradicate the epidemic is to reduce poverty and increase development and address the roles of men and women in society, in addition to other macro level interventions. These issues, seemingly unrelated to a medical disease, are vital to stopping the epidemic. McCoy et al. (2005) raise the concern that the current focus on pharmaceutical treatment of AIDS will divert attention and resources away from the fundamental roots of the disease, such as poverty. Therefore, first to be addressed is the relationship between AIDS and poverty.

The Intertwining of AIDS and Poverty

In many parts of the world, high infection rates are caused by factors related to living in poverty. AIDS can also cause a vicious cycle in which it creates further poverty, leading to increased vulnerability. In nations around the world, people in rural areas struggle with poverty and dream of moving to urban areas where they believe they will be able to earn more money. Unfortunately, this economic migration has also led to an increase in HIV infection. China, Thailand, Haiti, and some countries in sub-Saharan Africa have all found this migration to be a risk factor.

Often it is the men of the family who will migrate for labor. While they are away from their families, they may engage in activities that put them at high risk for contracting HIV, such as using intravenous drugs and visiting prostitutes. When they return to their villages, they bring the disease back with them. The common belief is that AIDS first became widespread in this fashion. A main highway in southern Africa served as a primary trucking route; infected sex workers worked at the main rest areas and subsequently many truck drivers became infected with HIV. Upon returning home, these husbands gave the disease to their wives, posing a risk to subsequent children (Sunmola, 2005).

When women migrate for economic reasons, they are also vulnerable to HIV infection. Often these women end up in the sex trade, since it is typically the highest paid work available to women. Once employed as a sex worker, they earn more money if they engage in intercourse without using a condom, raising the risk of infection. For example, in Swaziland,

sex with a condom earns a sex worker the equivalent of about \$4.50; without a condom, she can earn about double that (Wines & LaFraniere, 2004).

Similarly, during the economic boom of the 1990s, many Thai workers left the rural countryside for the urban areas to find higher-paying work. While in the cities, a number of them were infected with AIDS. When these workers returned to the countryside, they also transported the infection (Lim & Cameron, 2004). This economic migration pattern is now being seen in India. Truck drivers travel long distances on the highways and employ sex workers while away from home. They then return home to their wives and spread the HIV infection (Waldman, 2005).

In China, what is considered to be “the third wave” of AIDS in that country (from about 1994 to 2001) targeted the rural poor. Due to the poverty in China’s rural areas, these citizens earned extra money by donating blood and plasma to illegal traveling blood banks. These blood banks not only reused needles from donor to donor, but would also mix all the blood together before giving it to the recipient. Therefore, if there was any infected blood, both donors and recipients were certain to receive it, causing high rates of infection in these areas (Kanabus, 2005).

Examining the impacts from the macro level, in Africa, the structural adjustment policies dictated by the World Bank in order to increase exports and imports for participation in the world economy were financed through large cuts in social services, including education and health care (Commission, n.d.). In general, this lack of social services caused by the shift in funding results in less knowledge about HIV/AIDS, fewer protective factors (as will be discussed), and less ability to assist people who have been infected (Tilane, 2004). The imbalance in global trade resulted in spreading, not reducing, poverty levels, increasing again the risk factors for AIDS (McCoy et al., 2005).

Continuing the cycle of AIDS and poverty, AIDS spreads poverty, which further increases vulnerability on all systems levels. On a macro level, a high HIV infection rate can threaten the development of a nation. As AIDS attacks the working-age population, the impact of the disease can result in loss of economic productivity due to illness and death. There are also fewer consumers to participate in the economy. Children orphaned by AIDS are forced to leave school, reducing the number of potential educated workers and thus the country’s economic output. Top officials in three African nations have predicted that their countries would

soon cease to exist if the epidemic continues at its present pace, as they will not have the workforce to maintain essential governmental functions (Feachem, 2004).

On the mezzo level, increased familial poverty is due not only to the money that must be spent on health care and medicine, but to lost income as well. AIDS is a unique disease in that it is centered not in children and the elderly, typically the most vulnerable, but in young and middle-aged adults. As discussed, it is often the men in the family who are infected first. With no access to treatment, the family's income is sharply reduced when the primary breadwinner becomes too ill to work. Even if the breadwinner is not the first to become ill, he often loses income when taking time off from work to care for the person who is ill (Rajaraman, Russell, & Heymann, 2006). Mothers are often the next in the family to fall ill. With parents too ill to work, the family is in a desperate situation. The loss of a father often results in lowered income and decreased access to resources such as land; the loss of a mother typically results in increased malnourishment and less care for the children (Commission, n.d.). Among the agrarian societies in southern Africa, many fields go untended due to the dire illness of the workforce. This pattern has increased the famine occurring in the early 21st century, already exacerbated by drought (Commission, n.d.; Harman, 2002). This famine increases malnutrition and poverty, feeding back into the epidemic as medications must be purchased and then taken on a full stomach for optimal effectiveness (Panos, n.d.).

Adding to this poverty and malnutrition is the custom in some African societies that when a man dies, his property reverts not to his wife, but to his family of origin. This custom developed from the idea that the man is the breadwinner of the family and the property of a married couple represents the fruits of his labor and thus should return to his family, as his wife did not contribute to it. Fights between wives in a polygamous household are also eliminated through this custom. However, this loss of material goods pushes a family further into poverty and has now been outlawed in multiple African countries. However, even if the widow is aware of her rights, she is typically unable to secure legal representation to assert those rights due to lack of availability or poverty. Organizations such as the Zimbabwe Widows and Orphans Trust and the Rwanda Women's Network have been formed to help women in these matters (U.N. AIDS, n.d.a).

The death of middle-aged parents causes a rise in the number of orphans, straining the traditional kinship care systems. Children are doubly

affected by AIDS: they are at risk of contracting it from their mothers, and when their parents die from the disease, they are left even closer to poverty. Illustrating this impact, 5 million children worldwide are infected with HIV or AIDS, but an additional 15 million have lost one or both parents to the disease. The vast majority of these children are living in sub-Saharan Africa, putting a huge strain on traditional support systems within the family (U.N. AIDS, 2006a). Caregivers of these children have reported concerns about the ability to afford food, clothing, health care, and school fees; in addition, the health of the caregivers has often deteriorated due to the added stress and burden of their caretaking duties (Commission, n.d.). One study in Thailand found that caring for children orphaned by AIDS placed a large financial and physical burden on caregivers in the extended family, traditionally grandparents or aunts. Grandparents were returning to the formal labor market to earn additional funds, and aunts reported a financial burden for caring for children in addition to their own. Childcare was difficult to find due to fears of contracting the disease; children who lost a parent to AIDS were assumed to be HIV positive (Safman, 2004).

The increased poverty in the families of children who have been orphaned often forces the children to leave school for two reasons. First, they often must work to help replace family income; second, they can no longer afford the cost of school. Although some countries, such as Kenya and Malawi, have eliminated school fees, these fees remain in other countries. Even if there is no tuition, there may still be fees for uniforms, texts, and supplies. Some children own only one threadbare outfit and are too embarrassed to attend school due to their lack of adequate clothing. This loss of educational opportunity is especially true for girls due to gender disparities in education and societal expectations for caretaking and household duties. Girls are also more likely to be removed from school due to poverty or marriage than boys, raising their risk of contracting HIV. Orphaned girls are at even higher risk, as girls in Africa who have been orphaned are more likely to be withdrawn from school than girls whose parents are alive (LaFraniere, 2005, June 3). In a study conducted in eight countries in sub-Saharan Africa, girls with 8 or more years of schooling were 87% less likely to have sexual intercourse before the age of 18 compared to girls who did not attend school. In addition, the HIV infection rate of youths who did not finish primary school was at least double that of those who did (U.N. AIDS, 2005c). Girls whose parents are deceased are three times more likely to be infected with HIV than girls whose

parents are alive (UNICEF, 2005). Correlations have been found between education and delayed sexual initiation, higher HIV awareness, fewer sexual partners, higher rates of condom usage, and more communication between sexual partners about disease prevention (U.N. AIDS, 2005c).

These increased infection rates are due in part to the cycle between AIDS and poverty. Girls who are not in school typically have to earn their livelihood in some manner. This may include marriage to an older man who will pay a good bride price for a young wife, or it may include "survival sex." Survival sex is when a female begins a relationship with a "sugar daddy" to help acquire goods she needs or desires. A man will offer to care for or marry her. This is not prostitution, in that she does not engage in intercourse with a variety of men for money, but she will have intercourse with one man who will help provide for her financially. However, all too often the girl begins a relationship only to find that those promises go unfulfilled and she has been placed at risk for contracting HIV, as the man is rarely faithful to her and she will not have the power in the relationship to insist that he use a condom. Older men are more likely to be infected with AIDS than boys of the same age of the girl (U.N. AIDS, 2006a). A study in Kenya found that if a man was at least 10 years older than the girl and provided more than the average amount of financial assistance, there was a significantly lower use of condoms in the relationship (Luke, 2005).

School also acts to provide a productive activity for children, keeping them away from high-risk activities, in addition to educating them about the risks of sexual activity. One Ugandan legislator has taken to offering "virginity scholarships," offering proven female virgins the opportunity to attend university for free, in hopes of encouraging poor girls not to engage in survival sex or give in to the lures of older men (Wax, 2005).

Some girls leave the household and move to a city in the hope that there will be better opportunities there. However, as one study from Tanzania illustrates, they are placed at greater risk through this economic migration, as girls living on the streets are at risk for sexual assault. Despite this, most of the programs for street children in Dar es Salaam, the capital of Tanzania, are almost exclusively for boys, since they make up the vast majority of street children (Evans, 2002).

Male street children are also at high risk for HIV infection through intravenous drug use or survival sex. They may migrate to cities for financial reasons or due to the loss of their parents. For example, Pham Huy Hoang, a 17-year-old boy in Vietnam, left his home to live in Hanoi, the

capital city, so that he could work to financially assist his family. Some of his new friends in the city convinced him to try injecting drugs. Due to his lack of education, he did not know that this activity could give him HIV. In time, he discovered he had become HIV positive. He now lives in a shelter in Hanoi for HIV patients, but the ignorance of other street children about the dangers of HIV continues around the world (Van & Dung, 2006).

The following story, adapted from Paul Farmer (2005) (see Box 6.1 later in this chapter), illustrates how personal poverty and structural factors in the culture led one young Haitian woman to die from AIDS:

Acephie was born in the small village of Kayin. The Riviere Artibonite, Haiti's largest river, ran through this village. Her family was initially relatively well off. However, her village was flooded to make a dam to provide electricity for the urban Haitians and the villagers were forced up into the stony hills on the sides of the new lake. This new land was not nearly as fertile as their old land and they struggled to survive. Acephie would carry the family's meager agricultural produce to the local market to earn money. The road to the market led past a military barracks and the soldiers often flirted with the girls as they passed. This flirtation was rarely openly rejected, as the soldiers were among the few men with an income in this now poor region. When a captain, Jacques, began to pursue Acephie, she eventually agreed, even though she knew that Jacques was married and had several other partners. The sexual relationship lasted less than a month, as Jacques fell ill and died a few months later of unexplained fevers.

Acephie eventually moved to Port-au-Prince and found a servant's job. She also began seeing a boy, Blanco, with whom she once attended school. He was doing comparatively well chauffeuring a small bus, and they planned to marry. However, when Acephie became pregnant, Blanco was not happy and eventually disappeared from her life. Due to her pregnancy, Acephie lost her job. She returned to her hometown to give birth to her daughter. Shortly thereafter, she soon fell ill and eventually died of AIDS.

The story of this one Haitian woman illustrates a number of the concepts discussed. Events on the macro level, in this case the building of the

dam and the flooding of her family's farm, sharply increased the poverty within the family. This increased poverty increased her vulnerability to a relationship with the captain. This brief liaison eventually led to her death from his "mysterious illness." Her story also illustrates how the female gender role increased her risk of becoming infected. It was the man who had greater social power, while she relied on either her family's attempts at farming in the poor soil to which they have been relegated or to a servant's job, which she lost when she became pregnant. Acephe's story demonstrates how factors on the micro, mezzo, and macro levels all contributed to her eventual death.

Cultural Impacts

A major factor that shapes the progress of AIDS within a nation is the country's specific culture. Cultural traditions and beliefs can affect the transmission of HIV/AIDS within an ethnic group. Cultural practices that developed to meet traditional needs can become harmful in a rapidly changing society. These traditional beliefs can deter prevention and treatment efforts due to cultural clashes if the intervention efforts are not conducted with knowledge and respect of these traditions. If the information is not presented in a manner that enables the intended recipient to accept it, the lack of accurate knowledge about how AIDS is transmitted results in increased infection rates. As an example of the impact of traditional beliefs on the spread of HIV, in Haiti and some parts of Africa, some believe that people are infected with HIV through sorcery when they anger others (Human Rights Watch, 2006; Kidder, 2003). The belief that sex with a virgin can cure AIDS has been documented in both China and parts of Africa (Renwick, 2002; Rosenberg, 2006). In some parts of sub-Saharan Africa when a husband dies, his wife must have intercourse with a designated "widow cleanser" to ensure that his spirit does not return to the village and haunt them. However, if the husband died of AIDS, his wife will typically be infected as well. She can pass the infection to the widow cleanser, who can infect subsequent widows (LaFraniere, 2005, May 11). Some areas practice the tradition of "widow inheritance" in which the widow is taken as a wife by a relative of her deceased husband. While this is intended to act as a social and financial safety net for the widow and her children (Phiri, 2002), it can act to spread HIV to new partners. The practice of female genital cutting (described in more

detail in chapter 7) can also lead to the spread of AIDS due to the lack of sanitary instruments. This procedure, which involves the cutting of the girl's genital region, is typically performed with an unsterilized instrument, thus passing blood from girl to girl, possibly spreading infection.

The stigma associated with HIV/AIDS in many cultures has also led to its spread. As has been seen in the United States, some cultures stigmatize homosexuals, believing them to be immoral or sinful. This, in conjunction with the early link between gay men and AIDS, causes a rise in infections for a number of reasons. First, the stigma against homosexuality causes many homosexuals to lead a double life in which they are married but engage in homosexual acts outside the marriage. This non-monogamous relationship can lead to an increase in infections. Second, the link between stigmatized homosexual behavior and the disease has caused people to stigmatize those with HIV/AIDS. Thus, people did not want to be tested for the disease for fear that they would be stigmatized. In China, families that did not reject their HIV-positive family members were themselves stigmatized (Kanabus, 2005). In some cases in China, patients were refused treatment by the very hospitals that were supposed to help them (Doctors Without Borders, 2005, November 21). It was not until 2005 that China passed a law banning discrimination against those with HIV or AIDS (Kanabus, 2005). Due to the extensive stigma associated with AIDS, some family members in South Africa denied that their relative had AIDS to the extent that they would not allow health workers to visit the patient or refused to collect a body from the mortuary (Campbell, Foulis, Maimane, & Sibiyi, 2005).

Due to the stigma in Haiti against those with AIDS, an orphanage has been founded for orphans infected with HIV, called *La Maison l'Arc en Ciel* (Rainbow House) (UNICEF, n.d.a). It was founded by a Canadian woman and her Haitian husband, Danielle and Robert Penette, and 30 of the 36 children housed there are HIV positive. They are currently able to provide antiretroviral medication to only 15 of these children. They also provide an outreach center for families affected by HIV/AIDS as well as a community education program (Haitian Ministries, n.d.).

Extensive stigma against those with HIV/AIDS in India has been documented. A study integrating findings from six countries in Asia found discrimination against those infected throughout the region, including the refusal of medical treatment and inferior treatment (Reidpath & Chan, 2005). Sudha et al. (2005) found that 50% of their respondents in India felt that the names of those infected with AIDS should be made public so

that people could avoid them, 70% would keep it secret if their family member had AIDS, and 41% felt a child infected with HIV should not be allowed to attend school. Human Rights Watch (HRW) (2004) reported that government discrimination against AIDS orphans and HIV-positive children in India includes the children not being allowed to attend school and being denied treatment at medical clinics due to actual or perceived HIV infection. HRW reported the following case of denial of the right to education:

Two children, Bency and Benson, were being cared for by their grandparents after the deaths of their parents from AIDS. In 2002, the grandfather attempted to enroll Bency in several private schools to no avail. The school either refused her admittance or she was dismissed after complaints by the other parents. In 2003, after a public fast by the grandfather, the Chief Minister of Education directed the local government school to admit both Bency and Benson. After one week of enrollment, the other parents began to complain. The school held a meeting for the community in which the medical authorities gave conflicting stories as to how HIV can be transmitted. One doctor said it could not be transmitted through razors, while the other said it could. The school then provided a teacher for the children to be schooled at their home, but the teacher refused to enter the house, instead remaining outside. Eventually, due to the media attention, a medical company agreed to provide antiretroviral medication for five years. In early 2004, the children were admitted to a public classroom.
(© 2004 Human Rights Watch)

This stigma and discrimination in India is important, as India recently became the nation with the highest number of HIV-positive persons. It has a low prevalence rate (less than 1%), but due to its sizable population this translates to a large number of individuals: 5.7 million as of 2005 (Altman, 2006, May 31).

Many governments tried to ignore AIDS when it first began developing in their country. In Thailand, AIDS was initially seen in foreigners and then some injecting drug users; therefore, it was not seen as a “Thai problem.” Thailand initially did not want to mount a large anti-AIDS campaign because a large portion of its revenue is derived from tourism,

and it believed that attention to the AIDS problem would deter tourism (D'Agnes, 2001). It was not until after the millennium that Saudi Arabia began to face the AIDS epidemic within its borders, as the association of the disease with homosexual behavior made it anathema in this Muslim nation (Fattah, 2006).

China for many years denied that it had an AIDS problem but has now acknowledged it and is working aggressively to decrease the infection rate. The current "fourth wave" of AIDS in China has seen new openness and action on the part of the government. It has also seen a growing number of cases transmitted through heterosexual intercourse, including an increasing proportion of females who are infected. In 1995, the ratio of males to females was nine to one, but by 2004 the ratio had decreased to 3.4 to one (Thompson, 2005). A 2006 survey conducted in China in conjunction with WHO and U.N. AIDS found that there were fewer cases than expected; this was surprising, as many had believed that China had underreported its rate of infection. It found an estimated 650,000 persons living with HIV/AIDS as opposed to the earlier reported figure of 840,000 and unofficial estimates of 1.5 million. However, grassroots workers in China still feel that the actual number of cases is underestimated due to the low rate of testing and the stigma associated with being publicly HIV positive (Yardley, 2006).

Populations at Highest Risk

Unlike in the early days of the disease, women and young adults are now the fastest-growing population of those infected. Many youths do not perceive themselves to be at risk and continue to engage in risky practices. Globally, an average of only one third of males and one fifth of females aged 15 to 24 can correctly identify methods of HIV prevention and reject common myths about its transmission (U.N. AIDS, 2006a). A 2004 United Nations Development Programme (UNDP) poll in Thailand found that 80% of young people believed they are not at risk of being infected and only 20% used condoms consistently (UNDP, 2004) and in South Africa, two thirds of young people who test positive for HIV do not believe they are at risk for the disease prior to receiving their results (Rosenberg, 2006). The British Medical Association states that youths in Britain have become complacent about safe sexual practices and the risk of sexually transmitted diseases, and thus Britain is launching a new social

marketing campaign to raise awareness and knowledge ("Record SHI/STI rate," 2002). Students in Japan and China are becoming targeted for prevention efforts as sexual activity is increasing among young people, and so is the HIV infection rate ("Fighting AIDS in China," 2003; Kakuchi, 2006). Exposure to sexual health interventions such as peer education has been demonstrated to lead to increased knowledge and risk awareness among youth (Agha, 2002; Pettifor et al., 2005), and it is hoped that expanding these approaches will be effective.

As previously stated, India is an area of particular concern due to its large population and rising HIV prevalence. Due to changing cultural norms, Indian youths today are more likely than previous generations to engage in premarital sex ("Activists urge," 2002). This may be especially true in the urban areas, where a study found that one in four Indian girls aged 10 to 14 have had sex ("One in four urban girls," 2005). Illustrating the global lack of youth knowledge about HIV and AIDS, the knowledge of Indian college students has been found to be lacking. One survey found that 40% believed that AIDS can be cured if treated early and 42% believed that you cannot get the disease from someone who is HIV positive but has not yet progressed to AIDS. While 80% considered AIDS to be a personal risk, 40% reported using condoms only "sometimes" during intercourse (Sachdev, 1998).

The risk is particularly high for young women. In sub-Saharan Africa, 75% of those 15 to 24 who are infected are female (U.N. AIDS, 2006a). Women of all ages are at greater biological and social risk for contracting HIV than men. Biologically, women are two to four times more likely than men to become infected during heterosexual intercourse due to the larger surface area exposed to contact (National AIDS Commission, 2003). This is especially true for young women, who are more apt to become infected than older girls due to their immature physical development (U.N. AIDS, n.d.b).

For men who are knowledgeable about methods of transmission of AIDS, young girls and virgins are seen as a safe recourse. Men will marry as young a girl as possible in order to have a wife with the best likelihood of being disease-free. This has the effect of pulling girls out of school at a young age, reducing not only their educational opportunities but also the aforementioned protective factors that school provides. In some cultures, grooms will pay the bride's family a bride price; currently, the younger the bride, the higher the bride price (Rinaldo, 2004). Again, the link

between poverty and increased vulnerability to HIV infection becomes evident, as impoverished families are more likely to need the funds and agree to the early marriage.

These early marriages in sub-Saharan African nations often place girls at higher risk for contracting HIV rather than offering them protection from it. In addition to these young girls being at higher risk biologically for contracting HIV after exposure to it, their older husbands are more likely to be infected with HIV and less willing to use a condom. Due to these acts, it has been found that married, sexually active girls ages 15 to 19 are significantly more likely to be HIV positive than unmarried, sexually active girls of the same age (U.N. AIDS, n.d.b). Girls who remain unmarried are more likely to engage in relationships with males of their same age, who are less likely to be HIV positive and are more willing to use a condom. These unmarried girls are also more likely to be in school.

Women of all ages are at higher risk of HIV infection than their male counterparts. Socially, women are all too often not in a position to control what happens to their bodies due to cultural traditions and financial difficulties. Cultural preferences regarding sexual intercourse can increase the transmission risk for women. In Zambia, for example, men prefer vaginal intercourse without lubrication and women will use herbs to prevent lubrication prior to intercourse. Without the vaginal secretions, infection protection is reduced and vaginal tears are more likely, increasing the risk of HIV infection (van Amerongen & van Kesteren, 2000).

Practices described earlier in this chapter such as female genital cutting, widow cleansing, and early marriage expose females to the risk of HIV infection. Women are also often in a position of social inferiority, which limits their ability to protect themselves against infection, including following HIV-prevention strategies such as insisting on monogamy or condom use. The public health motto that has been used to help promote the prevention of HIV infection is the ABC model: A, abstinence; B, be faithful; C, use condoms. This model is effective if both partners abide by its tenets. However, women often do not have the cultural standing to insist on abstinence, faithfulness, or condom use. Due to epidemic violence against women, including domestic violence, women often find themselves impotent when it comes to HIV prevention (Rosenberg, 2006). Whether their sexual partner is their husband or a paying partner, they are often not in a position of power to negotiate safer sexual practices, and marriage can actually become a risk factor for HIV

infection. U.N. AIDS (2005d) reports that many women who develop new HIV infections are in a relationship, typically marriage, in which they are faithful to that partner. However, that partner is often not faithful to them and the woman is unable to insist on the use of condoms. This is supported by a study conducted in South Africa that found that women who reported low control in their relationship were more likely to report inconsistent use of condoms than those who reported high control in their relationship (Pettifor, Measham, Rees, & Padian, 2004). The World Bank (1997) notes that due to a lack of power, a woman who is poor will find it more difficult to insist that her partner be monogamous or use a condom.

Therefore, to prevent infection, a more macro approach must be used. For example, a study in Botswana found that women's economic independence was positively correlated with their condom use, offering a potential avenue for prevention (Grieg & Koopman, 2003). This was also true in South Africa, where the higher the average wages for teenagers, the less likely teenage girls were to engage in sexual intercourse (Kaufman, Clark, Manzini, & May, 2004). Cultural traditions that place women at biological risk of HIV infection, such as widow cleansing and widow inheritance, or social risk, such as loss of property upon their husband's death, have been targets for intervention. However, Gausset (2001, p. 511) notes that Westerners are often quick to point fingers at African cultural traditions and practices that can increase the risk of HIV/AIDS while being less willing to look at their own practices. He states, "Today in the West, AIDS prevention campaigns do not suggest that homosexuals or drug addicts have to stop being homosexuals or drug addicts; rather they advise them to make their practices safer—to use condoms and clean needles." He states that similarly, the problem is not about whether people practice monogamy or polygamy; the problem is unfaithfulness outside of the marital arrangement. Unfortunately, the public health message to be faithful or to use a condom equates the concept of condom use with unfaithfulness, thus increasing the stigma associated with condom use.

Many countries have had to face issues about the use of condoms to spread the prevention message. In China, this has been difficult due to the traditional stigma against condom use; it is believed that those who use condoms must be promiscuous. Women in China, including sex workers, typically do not have the social power to insist on the use of condoms (Renwick, 2002). Mechai Viravaidhya, an internationally known Thai AIDS activist and politician, worked in Thailand to de-stigmatize condoms by sponsoring contests to blow up condoms and having police officers

pass them out in traffic in his “Cops and Rubbers” program (D’Agnes, 2001).

However, there have been difficulties with access to condoms. Worldwide, less than half of the people who are considered to be at risk of becoming infected with HIV have access to condoms, and only about 5% of married women of reproductive age use them (U.N. AIDS, n.d.b). For example, there has been difficulty in Uganda with having enough condoms available at a reasonable price. Uganda, an early success story in the fight against AIDS, has been struggling recently. In mid-2005, a shortage of condoms in Uganda was reported; the UN Special Envoy on HIV/AIDS in Africa said it was driven by the policies of the Bush administration in the United States (Berry, 2006). The Bush administration has been ambivalent in its support of condoms due to some of the same concerns as in Chinese culture. Much of the money coming to Uganda from the United States is through pro-abstinence organizations, which can also be anti-condom. Some Ugandan teachers report that they are instructed by U.S. contractors not to discuss condoms (Human Rights Watch, 2005). This has sparked fears of a resurgence in the infection rate.

In some cultures, the value of a woman depends on how many children she can bear, greatly limiting the incentive to use a condom, as it would inhibit conception (Plusnews, 2003). In India, it has been found that the association of condoms with family planning reduces the likelihood that married women will use them, even though married women are considered a risk group due to the extramarital sexual activity of their husbands (Bhattacharya, 2004). In Malawi, AIDS was originally said to stand for “American Invention Depriving Sex” and was viewed as an American family planning plot, family planning being contrary to indigenous cultural values (Lwanda, 2005). Condoms are also frequently associated with extramarital and/or promiscuous sex, leading to reluctance to use them. In India, the social stigma associated with condom use acts as a barrier to their purchase due to the lack of privacy in stores (Roth, Krishnan, & Bunch, 2001).

Fighting Back

Progress is being made in the worldwide battle against the AIDS epidemic, and these victories give hope for the future that this war can be won. Countries around the world have been developing campaigns to

stem new HIV infections. Thailand has been recognized worldwide for its battle against HIV/AIDS. The most prominent figure in this effort has been Mechai Viravaidhya. Known internationally for his anti-AIDS crusade, he was initially unsuccessful in getting his government to start a public health campaign against AIDS, as they insisted there was no “Thai to Thai” transmission. He re-focused his target and was successful in getting the military to support him in fighting AIDS due to the rising infection rates among new recruits. The military leaders supported broadcasting AIDS awareness messages and stopped the stigmatizing of HIV-infected soldiers.

He then broadened his focus and convinced businesses to support his efforts by reminding them that “sick people cannot work and dead people cannot buy” (D’Agnes, 2001). When a new government came to power, he was given the support, including a large budget, to develop a broad campaign. He developed a widespread public awareness campaign including radio and TV ads, subsidized songs and movies about AIDS, and educational programs in both schools and businesses. He also made certain to include the Buddhist monks, a very important sector of Thai society. He launched the “100% condom program” in an attempt to get Thailand’s sex workers to use a condom 100% of the time (D’Agnes, 2001). Thailand achieved remarkable success in the battle against AIDS and saw its rate of new infections fall from 140,000 in 1991 to 21,000 in 2003 (Kanabus & Fredriksson, 2005). However, he and other activists warn of complacency, stating that with decreased government spending and awareness, infection rates are again rising (Tang, 2005).

China has developed a policy entitled “Four Frees and One Care” under which people are provided with free antiretroviral drugs, free prevention of mother-to-child transmission, free testing and counseling, free schools for AIDS orphans, and care for people infected with HIV or AIDS at sites across the country (UNICEF, n.d.b). UNICEF tells the story of a boy benefiting from these policies:

Xian Dongfei, age 16, lost his parents to AIDS-related illnesses. A local family took him in and he assisted them with farming and housework. This family had a business in which they sold noodles and soon their business began dropping off as villagers were afraid to buy noodles from them for fear they would become infected with AIDS. People from the Women’s Federation began to publicly eat noodles with

Dongfei's adoptive family to educate others that the disease cannot be transmitted in that manner. The feeling among the villagers changed and with the assistance of the four frees and one care policy, Dongfei returned to school. (Used with permission of UNICEF.)

Targeting the earlier-discussed cultural traditions that increase risk factors for HIV infection, more countries are adopting laws that increase the rights of women. Swaziland and Zimbabwe both passed laws in 2005 that provide more rights to women. In Swaziland, the new constitution makes women the legal equivalents of men, while Zimbabwe's law allows them to inherit property from their husbands and fathers (LaFraniere, 2005, December 30). U.N. AIDS has been funding projects to help women gain access to their property rights (U.N. AIDS, 2006b). However, the struggle continues, as law does not quickly translate into practice.

To combat the reluctance to be tested for HIV due to the stigma associated with the disease, Botswana has implemented mandatory testing of everyone who seeks medical care. While this would seem to violate Western medical ethics, it works well in Botswana. Botswana is in a fight for its very survival as a nation: with a 40% prevalence rate, if it cannot turn the tide against AIDS, it will cease to exist. Due to its recent diamond wealth, Botswana had the resources to fight the disease but was still faring poorly. Pretesting counseling as practiced in Western nations, with its full disclosure about the impact of the disease if the person were positive, did not work well in Botswana, as no one wanted to be tested by the end of the session. With mandatory testing, people are identified earlier in the progression of the disease, making it more likely that medication can assist them. Wives who suspect their husbands may have infected them no longer have to be tested surreptitiously; they are tested as a routine procedure, freeing them from potentially violent repercussions at home. This has all helped to reduce the stigma associated with testing and with the disease, leading to increased ability to fight it (LaFraniere, 2004).

New prevention strategies are also being developed. As discussed, women often lack sexual decision-making power, and most current prevention strategies rely on male cooperation. A microbicide, typically a gel or cream, is being developed that women can insert in their vagina to help prevent HIV infection. There are currently several in clinical trials that show promise in preventing HIV transmission (Russell, 2005). Women

who tried it in South Africa liked the fact that it could be hidden from their boyfriends and it was under their control (Rosenberg, 2006). It is estimated that a 60% effective microbicide, used by 20% of the women already in contact with health services, would prevent 2.5 million new infections (U.N. AIDS, n.d.c). This method would rely only on the woman to protect herself and she would be able to do so unobtrusively. In 2007, medical trials were stopped due to safety concerns, but it is hoped the issues will be resolved and a safe product developed (Altman, 2007).

Targeting the link between AIDS and poverty, Oxfam has developed a program that provides dairy cows to families, particularly women, in need. The local director of Oxfam states that they hope to “prevent girls from becoming sex workers, at high risk of contracting HIV/AIDS, while also helping to relieve the burden on grandparents who are left trying to care for their grandchildren without the means to do so (Greene, 2006, ¶11). A project in Kenya found that if rural impoverished girls were given the \$6 uniforms needed for school, they were significantly less likely to drop out and become pregnant. This same project also found that if adolescent girls were informed of the fact that older men were much more likely to be infected with HIV than boys their own age, they were again significantly less likely to become pregnant; however, a classroom-based approach that emphasized abstinence until marriage had no impact on pregnancy. Pregnancy was assessed in this study rather than HIV infection, as the participants were minors (Dugger, 2006).

It has been recently discovered that male circumcision can help prevent the transmission of HIV. Studies have found that circumcised men can lower their risk of infection by about two-thirds and that infected men can reduce the odds of transmitting the virus to their partners by about 30% (LaFraniere, 2006, April 27). Typically African men are not circumcised. However, there are cultural beliefs that support circumcision, such as the belief that circumcised men derive more pleasure from intercourse and give more pleasure to their partners (Mattson, Bailey, Muga, Poulussen, & Onyango, 2005). Programs that offer free or low-cost circumcision have been overwhelmed with men who desire the procedure (LaFraniere, 2006, April 27).

UNICEF launched a campaign in 2005 named *Unite for Children, Unite Against AIDS*. UNICEF is focusing on this issue due to the fact that every day there are almost 1,800 new HIV infections in children under 15 (mostly from mother-to-child transmission), 1,400 children under 15 die of AIDS-related illness, and more than 6,000 young people aged 15 to 24

are newly infected with HIV (UNICEF, n.d.c). The goals of this campaign are focused around the “four P’s:”

1. Prevent mother-to-child HIV transmission
2. Provide pediatric treatment
3. Prevent infection among adolescents and young people
4. Protect and support children affected by HIV/AIDS

Countries throughout the world have developed their own strategies under this banner. For example, China, among other activities, has used a direct mail campaign to help raise funds and awareness and has conducted a mass media campaign to highlight the issues about HIV/AIDS and what is being done to solve them (UNICEF, n.d.d).

Children require a special focus, as diagnosis and treatment present special barriers in young children. It is difficult to detect HIV early in children, especially in the Global South, because the mother’s antibodies are still in the child’s bloodstream, which may render blood test results incorrect in children (Doctors Without Borders, 2005, November 1). The majority of children are not diagnosed until at least 18 months of age; however, if untreated, the disease kills half of infected children before their second birthday (Doctors Without Borders, 2005a). An additional problem is that there are few pediatric medications for AIDS. Current pediatric medications typically must be refrigerated or mixed with clean drinking water or are split from adult dosage pills (difficult to do accurately) (Doctors Without Borders, 2005a). Even with the recent rapid increase in access to medications, children do not have the same access to medications that adults do. Children make up 14% of deaths from AIDS, yet they are only 6% of those receiving the most effective medications, antiretroviral treatment (discussed below) (Altman, 2006, August 16). On a positive front, to increase access to pediatric medications for HIV/AIDS, the Clinton Foundation donated \$5 million to open clinics and increase access to medications (McNeil, 2005, April 12). Additionally, in 2006, the price of pediatric AIDS medications dropped by half (La-Franiere, 2006, March 8).

Treatment of AIDS Worldwide

Despite the discouraging growth of AIDS, there have been several positive developments in its treatment. Antiretroviral treatment (ART) has

been developed and has proven very effective in helping those infected with the disease to maintain their health. In the earlier days of treatment, patients had to take numerous pills (sometimes as many as 20 a day) to try to maintain their health. The expense and burden of this was a barrier for many people. With ART, the drugs are often combined within one pill, thus greatly reducing the number of pills the patient needs to take on a daily basis.

AIDS medications have traditionally been very expensive, but several countries have developed generic alternatives that are much cheaper. Brazil, India, Cuba, and Thailand have all developed generic medications for their own populations; India sells theirs to countries in Africa as well. Indian pharmaceutical companies helped lower the price for AIDS treatment from \$15,000 per patient in the mid-1990s to about \$200 in 2005, while also simplifying treatment by combining three medications into one pill, known as “triple therapy” (McNeil, 2005, March 24). In 2005, the U.S. Food and Drug Administration approved triple therapy generic medication for use outside the United States, enabling American aid dollars to be spent on it and thus reaching many more people (McNeil, 2005, January 26). Brazil is planning to expand treatment to reduce maternal–child transmission (Osava, 2005), and India is planning to offer free antiretroviral drugs to citizens living below the poverty line, about 25% of its citizens (Kumar, 2005).

However, India has recently passed a law limiting its production of generic drugs as a condition for its membership in the World Trade Organization. This new law will limit the ability of drug manufacturers to sell generic drugs. They are still allowed to make them but must pay licensing fees and must wait for 3 years after the drug is first marketed (McNeil, 2005, March 24). It is feared that this limitation will increase the price of medications and thus reduce the number of people who are able to receive them, particularly in the impoverished nations in Africa who have been their customers. It is also feared that generic medications manufactured in Thailand will be limited due to a proposed trade agreement with the United States (Macan-Markar, 2006). As Thailand is currently leading the way for access to HIV medications, this restriction on the manufacture of generic second-line medications would limit the number of people it could serve in a cost-effective manner.

Due to patent regulations, patients have limited access to “second-line” medications. Almost all patients need to switch medications after a few years (due to reduced effectiveness) from more common “first-line”

medications to stronger “second-line” medications. Although generics have helped greatly reduce the cost of first-line medications, this is not true for second-line medications due to lack of generic equivalents. For example, in Kenya, Doctors Without Borders pays \$200 per year per patient for a first-line drug but \$1,400 per year for a second-line drug (Doctors Without Borders, 2005, December 10). In low-income countries, if people have to pay for their medication, many cannot afford it and will die. The more expensive the medications, the fewer people that can be treated, again increasing the number of people who will die. To help solve this problem, the Clinton Foundation has helped negotiate lower prices for these medications as well as lower prices for rapid test kits. The Clinton Foundation does not have the money to make the purchases but has acted as a collective bargaining agent on behalf of 50 countries as well as NGOs, including Doctors Without Borders and U.N. AIDS (McNeil, 2006).

Unfortunately, these new medications did not initially find favor with all governments. Some South African officials did not support the effectiveness of the medications. South Africa has the second largest number of infected individuals in the world—5.5 million as of 2006 (Altman, 2006, May 31)—but had been hesitant about a full-scale ART program. Instead, their minister of health promoted good nutrition as equivalent to ART medication in fighting HIV (Nullis, 2005), prompting the former U.N. special envoy to target South Africa in his book, stating that it neglected the health of its citizens by failing to offer ART to those who need it (LaFraniere, 2005, October 25). South Africa has now begun to reverse course and offers free ART to AIDS patients and is actively promoting medications to reduce mother-to-child transmission (Rosenberg, 2006), but it still has far to go. The South Africa government was singled out at the 2006 International AIDS conference for criticism in its handling of the epidemic (Altman, 2006, August 19).

The medicines can have severe side effects due to their potency, especially for people who cannot afford food to help digest the medicine. Dr. Paul Farmer has pioneered an approach in Haiti called directly observed treatment (DOT). He employs village members to serve as *accompagneurs* who observe the patient taking the medicine at least once a day. This helps improve compliance with medication and offers the patient a local liaison if he or she is having difficulty with the side effects of the medication (Kidder, 2003) (see Box 6.1 for further information on Dr. Farmer and his work). This approach has proven so successful that the Clinton Foundation, established by former President Clinton, has set

BOX 6.1 Paul Farmer

It is thanks to the work of Dr. Paul Farmer, a Harvard-trained physician, that ideas about treating patients in poor countries have been changed. Prior to his work, the common belief in the global health arena was that offering treatment to impoverished people in poor countries would not only be ineffective, as they would not be compliant in taking medications, but it would also worsen the epidemic by increasing medication-resistant illnesses. In the early 1980s in rural Haiti, Farmer and his organization, Partners in Health (PIH), established a medical clinic where fees were nominal or nonexistent. Haiti has the highest adult HIV infection rate in the Western Hemisphere: 5.6% (PIH, 2005a).

Farmer developed a model known as the directly observed treatment model (DOT). In this model, local community members are trained to assist and support HIV/AIDS patients. The DOT model has a third person (who is a local resident) responsible for observing the patient swallowing his or her medication. This local liaison helps the patient with particularly complicated prescriptions or medications with adverse side effects in order to help maintain medication compliance. In Farmer's model, since the third person is also a fellow village member, it decreases the power structure and helps increase trust and community support (D'Adesky, 2004). This person is known as an *accompagnateur* (one who accompanies) to emphasize the equal relationship. This model had great success and demonstrated that if a program was properly structured, individuals in impoverished countries could have higher treatment compliance rates than those in industrialized nations.

PIH has developed a "four pillars" approach to health. The first pillar is to integrate HIV care and treatment with primary health care. For example, PIH has helped to build houses, develop potable water projects, and help people gain access to education (PIH, 2005b). The second is a focus on maternal and child health and the third is to establish tuberculosis control. The fourth is the detection and treatment of sexually transmitted infections.

In 2005, the Clinton Foundation offered \$10 million to expand treatment for children as well as the PIH methods to Rwanda (McNeil, 2005, April 12). PIH first sought to establish the four pillars approach that was successful in Haiti. A second priority was to build a system of community-based care by identifying, hiring, and training local health workers as was done in Haiti. The final goal is to strengthen the public health infrastructure. This includes recruiting and training administrative and medical staff, rebuilding and equipping clinics, and securing reliable electricity, water, and communications systems (PIH, 2005b).

Within 6 months of its establishment, the Rwandan clinic was treating 300 HIV-positive patients with antiretroviral medications, and it was planning to treat 1,000 by spring 2006. Each patient was given medications, assigned an *accompagnateur*, and given enough food for himself or herself and his or her family. This ensured the medications would be well digested and that there would be no competition for the food. The medications were subsidized by the Global Fund, but international donors have been reluctant to contribute to ongoing food aid (Elmer-DeWitt, 2005), raising concerns about the efficacy of the medication. PIH then expanded to Lesotho, which has the world's third highest infection rate; it is establishing nine rural health centers in this small country, which is located entirely within South Africa (PIH, 2006).

up a program to help expand it to Rwanda, especially focusing on treatment of children. Children have a more difficult time being treated due to the previously discussed difficulties with pediatric medications.

The use of local residents as health workers can be especially helpful in Africa as the medical infrastructure is lacking. Not only is there a lack of physical buildings and roads to transport medications, but trained medical personnel have been leaving their home countries for better working conditions and pay in the Global North, especially Britain. It is estimated that 23,000 African health professionals leave their home countries every day for work opportunities in other countries (Mitchell, 2005). Due to this exodus, it is estimated that Africa needs triple its current number of health professionals to meet the needs of its citizens (Dugger, 2004). Doctors Without Borders is training nurses in Lesotho to work in clinics to treat HIV/AIDS patients in an attempt to reduce the reliance on hospitals and doctors. In 2006, there was only one pediatrician working in the entire nation of Lesotho (LaFraniere, 2006, March 8).

Professional Role of Social Workers

While many challenges remain in the global battle against HIV/AIDS, there are also signs of hope as well. Many more people await diagnosis or treatment, but effective, affordable medications can be made available. With the rapid increase in funds dedicated to the fight since 2001, there has been a slowing in the epidemic, offering hope for the future. Large-scale treatment efforts in Zambia have shown marked success in stemming the deaths from AIDS (Altman, 2006, August 14). But it will be a long battle that must be fought on many fronts in order to win.

Social workers can help fight this battle. Social workers can work on the macro level to help develop culturally appropriate interventions to help stem transmission, assist those who are already infected, and help to reduce stigma against the disease. Social workers can assist in the case management of those who are battling the disease, as well as helping to create a system of social supports to assist those who are indirectly affected by the disease, such as orphaned children. Traditional methods such as kinship care are being overwhelmed by the epidemic, and social workers can assist in the creation of formal services to help care for those left behind. By focusing on social development, as opposed to a strictly medical approach, social workers can help turn the tide against HIV/AIDS.

Culture Box

THE FIGHT AGAINST HIV/AIDS IN MALAWI

Malawi is a small country in Southern Africa. Its official languages are English and Chichewa, with other dialects of Bantu spoken as well (Rankin, Lindgren, Rankin, & Ng'ona, 2005). According to the Central Intelligence Agency's *World Factbook* (CIA, 2005), Malawi was established as a British colony in 1891 and achieved independence in 1964, with the first democratic elections held in 1994. It has a total area of 118,480 square kilometers, making it slightly smaller than Pennsylvania. Women bear an average of six children and have a lower literacy rate than men (50% vs. 76%). Eighty percent of the population is Christian and 13% is Muslim, with the rest declaring other (3%) or none (4%).

It is one of the world's least developed nations, ranking 165 out of 177 countries on the Human Development Index and 176 out of 177 on gross domestic product per capita (UNDP, 2005). More than half of the population lives below the poverty line. Malawi is a landlocked nation, dependent on its agriculture for economic production. Less than half of the people have access to clean drinking water (Irish Red Cross, 2003), and approximately one-third are considered malnourished (World Food Programme, 2006). In December 2005, flash-flooding rendered approximately 40,000 people homeless, increasing the already high levels of need within the country (World Food Programme, 2006).

Malawi is considered to be one of the 10 countries most affected by AIDS (U.S. Agency for International Development [USAID], 2005). As of 2005, it had a prevalence rate of 14.1%, with 900,000 people (adults and children) infected (U.N. AIDS, 2006a). In urban areas, approximately 25% of the population is infected (USAID, n.d.). Due in part to this high prevalence, the current life expectancy in Malawi is 41 years (CIA, 2005). There is a severe shortage of health workers, facilities, and equipment to care for the affected population (USAID, 2005). However, there is hope, as the HIV prevalence rate appears to have stabilized (U.N. AIDS, 2006a).

The two primary methods of HIV transmission in Malawi are heterosexual sex and mother-to-child transmission (USAID, 2005). Despite the high rate of mother-to-child transmission, pregnant women in Malawi are reluctant to be tested for HIV, even though free drugs are available to reduce the likelihood of infecting their newborn child. This is due to the stigma against those infected with the disease. The women fear being shunned if it is discovered they are HIV positive. Further, many women fear that their husbands will leave them if they are found to be HIV positive (Sumbuleta, 2005).

Economic migration assisted in the spread of AIDS in Malawi as it did in other nations. Between 1985 and 1993, the Malawi Army fought in Mozambique to defend a railway line. This army, consisting primarily of single men, took its "rest and relaxation" with sex workers in Malawi and Mozambique. Similarly, Malawian men emigrated to work in the South African gold mines and visited sex workers while there. Upon their return to Malawi, these gold miners were favored as husbands due to their comparatively high income. When both groups of these men returned to Malawian society, they transmitted the disease they had obtained while working outside of the country (Lwanda, 2004).

The government was reluctant to acknowledge the AIDS crisis at first. Even in 1994, when 20% to 30% of those hospitalized had HIV-related illnesses, the government continued to deny the crisis (Lwanda, 2005). There is a strong taboo in Malawian culture against speaking about sexual subjects not only in public but also within the family, even between husband and wife (Rankin, Lindgren, Rankin, & Ng'oma, 2005).

The cycle of AIDS increasing poverty can be seen easily in Malawi. As stated, it is dependent on its agriculture. As adults of working age are disabled or killed by the disease, familial poverty increases. Children are pulled from school for caretaking or farming duties. On a macro level, the decreasing agricultural output due to the disabled workforce increases food insecurity. In addition, the structural adjustment policies of the World Bank mandated that Malawi switch its agriculture to more exportable goods, as opposed to those that

would feed its nation, again resulting in greater food insecurity. These policies also mandated the elimination of the subsidy for fertilizer (Bryceson & Fonseca, 2005), reducing its accessibility and thus lowering agricultural output. In addition, Malawi (as well as much of sub-Saharan Africa) has been suffering from a drought, decreasing the food production even further. It was estimated that nearly half of Malawians would need food aid in 2006 (Reed, 2005). This lack of food further weakens those infected with HIV and AIDS, pushing the cycle to start again.

Under colonial rule by the British, health care was highly segregated. "European-only" hospitals were in existence until 1972 (despite independence in 1964), and many of the qualified medical personnel focused on the care of the small European population. Therefore, people living in rural areas continued to rely on traditional medicine for their health care. In the early days of the AIDS epidemic, Malawians believed that talk of an epidemic was a family planning plot of the Americans, family planning being contrary to the values of their culture. Early public health interventions, with their reliance on condoms, violated both these values and the economic realities of the nation (Lwanda, 2004).

John Lwanda (2003, 2005), a physician from Malawi, notes the following cultural practices among ethnic groups in Malawi that can lead to HIV infection: *nthena*, when a widower is given his deceased wife's younger sister; *m'bvade*, a practice in which the abstinence after childbirth of an unmarried woman is ceremoniously ended by surrogate sex with a designated man; *chokolo*, widow inheritance; and the use of *fisi* (surrogates) in infertility rites and in initiation ceremonies. There is also a strong faith in traditional medicine to protect against and heal HIV. However, he states that the strongest cultural contributor to the spread of HIV is the weak position of women in Malawian society. Rankin et al. (2005) note that the Chichewa term for sexually transmitted infections translates as "women's disease." If a man discovers he has an infection, he will tell his wife he has a "women's disease," thus blaming her for the infection.

In Malawian society, women are expected to be subordinate to men. A woman is socialized never to refuse having sex with her husband, even if she suspects him of being unfaithful or of being infected with HIV (National AIDS Commission, 2003). It is seen as unnatural for men to go without sex: "manhood without sex is considered incomplete" (Lwanda, 2005, p. 134). Among younger people, females have a much higher infection rate than males. Among those aged 20 to 24, approximately 3% of males are reported to have AIDS compared to over 10% of females. By their early 30s the infection rate becomes approximately equal, and in later years men have a higher infection rate than women (National AIDS Commission, 2003). Due to the food insecurity within the nation, women are also engaging in transactional sex to secure food for their families (Bryceson & Fonseca, 2005).

Despite its struggles, Malawi has been a leader among African nations in many areas, including the care of the children left orphaned by AIDS. In 1992, it became the first nation in the region to develop guidelines for the care of these children, recommending that orphans be kept within their home communities (Mutume, 2001). Malawi has eliminated school fees and other educational costs to enable more students to attend schools (UNICEF, n.d.e). Education still remains problematic, however, due to familial poverty. Children are often needed to help bring money into the family rather than attending school, and Malawi has had difficulty retaining teachers due to the high number of deaths among working-age adults.

In 2004, Malawi elected a new government focused on fighting corruption. This, together with the appointment of national leaders for the fight against HIV/AIDS and the development of a national framework for fighting the disease, has increased the confidence of international donors. Malawi was the first nation in the region to develop and implement a national system for monitoring and evaluating the responses to HIV/AIDS within its borders (U.N. AIDS, 2004c). These factors together have greatly expanded the fight against AIDS in Malawi. In 2004, Malawi expanded antiretroviral treatment from 4 sites to 23, reaching almost 10,000 people (U.N. AIDS, 2004c). The treatment is free, supported by the internationally funded Global Fund to Fight AIDS, Tuberculosis and Malaria (Panos, n.d.).

(continued)

To address behavioral factors leading to HIV infection, Johns Hopkins University in the United States has paired with Save the Children to run a program entitled “The Bridge” in Malawi (Johns Hopkins University, 2005). Bridge stands for:

Belief in a better future (Hope)

Risk is shared by everyone (Personalized risk)

I can stop AIDS (Personal responsibility, action, self-efficacy)

Discussion about HIV/AIDS (Openness, de-stigmatization)

Gender equity (Girls’ empowerment and changed men’s behavior)

Emphasis on the positive (Action oriented, community assets, positive-deviant role modeling)

This collaboration is designed to work on the individual, community, and national level to effect behavioral change to reduce the transmission of HIV. On the individual level, they plan to reach people through radio segments, sports interventions, and youth events. On the community level, the goal is to strengthen community supports and use change agents within the community. On the national level, environments will be created that will support a sense of hope and efficacy in fighting HIV transmission (Johns Hopkins University, 2005). Save the Children has been working to help young women avoid relationships with older men that can lead to risky sex and HIV infection (the “G” in BRIDGE) (Weissman et al., n.d.).

Doctors Without Borders works around the world to help increase access to medical care. In Malawi, they estimate that 90% of public health facilities cannot offer even basic health care. They have implemented a number of programs around the country to increase access to health care and ART drugs. They are conducting these programs in conjunction with traditional medical practitioners as well as tea plantation owners (Doctors Without Borders, 2005b). There are an estimated 5,000 professional (full-time) traditional medical practitioners compared to 500 doctors (Lwanda, 2005); thus, they are an essential part of any effort. Additionally, Doctors Without Borders is working to expand pediatric treatment. Children have their own appointment day at the clinic; this helps to create a focus on children for the doctors as well as building bonds between the affected children (Doctors Without Borders, 2005, November 1).

USAID sponsors an NGO known as MACRO (Malawi AIDS Counseling and Research Centre). This organization has established centers that offer free testing and counseling. The introduction of rapid testing kits in 2000 markedly increased the number of people receiving results. Prior to that, there were long waiting periods and 25% of patients did not return for their test results (USAID, n.d.).

Malawi offers a microcosm of the global epidemic of AIDS. The disease is furthered by poverty, discrimination, and certain cultural traditions, but targeted, culturally relevant interventions can stem the tide and offer hope for the future.

What Can I Do Now?

- Advocate to reduce the impact of HIV and AIDS on women and girls:
 - Remove financial barriers that keep girls out of school
 - Reduce violence against women
 - Secure women's rights to own and inherit property
 - Provide equal access to treatment, care, and prevention
 - Develop an effective microbicide (a gel, cream, sponge, or suppository that women can use to protect themselves from HIV)
- Call on leaders—politicians, religious leaders, corporate managers, community leaders—to get engaged in the fight against AIDS. Make a call, write a letter, or go to a meeting. Ask them to advocate for support to the Global Fund to Fight AIDS, Tuberculosis and Malaria.
- Advocate for low-cost access to life-saving medicines.
- Give your time to an organization or program that helps people affected by HIV and AIDS.
- Donate money to an organization that is working to reduce the impact of HIV and AIDS.
- Become knowledgeable about how the disease spreads, and then spread the word. Ignorance is the enemy.

What Can I Do as a Professional Social Worker?

- Work for an organization within the United States such as PSI (www.psi.org) that works to promote health in the Global South. They use social marketing techniques to address a broad range of health issues, including HIV/AIDS, malaria, and safe water.
- Work for an international organization in the countries that are directly affected. Doctors Without Borders (Médecins Sans Frontières) (www.doctorswithoutborders.org) seeks mental health workers, including social workers, to assist in its work. Save The Children operates a number of projects in affected countries.
- Work against stigmatizing those with HIV/AIDS, as this creates a barrier both to testing and to treatment.

World Wide Web Resources on AIDS

AIDS Media Center (www.aidsmedia.org): Provides links and reports on AIDS and HIV in many countries.

Avert (www.avert.org): An international AIDS charity that provides basic information on AIDS around the world.

Doctors Without Borders/Médecins Sans Frontières (www.doctorswithoutborders.org; www.msf.org): An international humanitarian organization that send doctors and other professionals, including social workers, to provide emergency aid where it is needed. Their website also provides reports related to their work.

Kaiser Family Foundation, Global Health Facts (www.kff.org/hivaids/index.cfm): GlobalHealthFacts.org provides the latest country- and region-specific data on HIV/AIDS; demographic and economic indicators; program funding and financing.

Partners in Health (www.pih.org/index.html): The organization of Dr. Paul Farmer and his colleagues. It provides information on their work and a few related reports.

U.N. AIDS (www.unaids.org): The United Nations agency that is responsible for coordinating the UN response to the AIDS epidemic. They have an abundance of information on their website.

UNICEF (www.unicef.org/uniteforchildren): The UNICEF website that has information on their campaign for children affected by AIDS.

7

Issues Particularly Affecting Women

A major theme of this text is that while the issues discussed are experienced by members of all groups, certain forces can act to place some people more at risk. These forces include discrimination, poverty, and lack of access to education. Due to widespread discrimination, women are more likely to live in poverty and more likely to lack an education than men. Although women perform two-thirds of the work in the world, they receive only 10% of the income and own less than 1% of the property (United Nations, 2005). These financial factors place them more at risk for the issues discussed in this text. In addition, there are issues that are unique to women due to their lower societal position. It is these issues that will be discussed in this chapter. There are many areas in which women experience harmful or unequal treatment, and this chapter will not attempt to discuss them all. What will be covered in this chapter are some specific types of violence experienced by women throughout their lives, unique concerns relating to women's health, and a discussion of how gender can play a role in social development.

Due to these unique burdens borne by women and their vulnerable position in many societies, a human rights document focusing specifically on the rights of women was adopted by the United Nations in 1979—the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). CEDAW defines what constitutes discrimination against women and what nations must do to eliminate discrimination. Discrimination includes both intentional discrimination as well as acts that have a discriminatory effect (Association for Women's Rights in Development, 2002a). Countries are also required to work to eradicate

harmful practices based on discriminatory attitudes towards women, such as female genital cutting and lack of access to education (Dauer, 2001). As of 2006, CEDAW had been ratified by 184 countries, over 90% of the membership of the United Nations (United Nations, 2006a).

Despite ratification, a country is allowed to post reservations to certain parts of the document. CEDAW has had more substantive reservations posted than any other international treaty, with countries claiming that pieces of it violate their cultural norms (Merry, 2001). A number of countries have expressed reservations to Articles 2 and 16 concerning the equality of men and women under the law and in marriage. As these are considered to be core principles of CEDAW, the UN considers these “impermissible reservations” (United Nations, 2006b).

The United States signed CEDAW in 1980 but has not ratified it, the only country in this situation (United Nations, 2006a) and the only country in the Global North that has not (Human Rights Watch, 2005). This is not the only international document for the equality of women from which United States has withheld support in recent years. In 1994, an international meeting in Cairo developed a plan of action to address reproductive health concerns in order to increase sustainable development and decrease poverty. This document was based on the concepts of gender equality and human rights (United Nations Population Fund [UNFPA], 2004). The United States was a signatory to this 1994 action program. In 2004, on the 10-year anniversary of the Cairo meeting, a statement was developed that was designed to show support for the UN plan to ensure women’s rights to an education, health care, and family planning. However, the United States refused to sign the 2004 statement, claiming that the statement indicated support for “sexual rights.” The U.S. government has expressed reservations about the statement as they see it as endorsing abortion, the rights of gays and lesbians, and the use of condoms by unmarried couples to prevent the spread of AIDS (Lederer, 2004).

Equity Versus Efficiency

When examining the quest for equal treatment of women, Van Soest and Crosby (1997) note that arguments tend to fall in one of two areas: equity and efficiency. Arguments for equity state that women should have equal rights because it is the morally correct position that women should be

considered the equal of men and should have the same rights and opportunities as they do. Proponents in favor of efficiency argue that empowering women and increasing their rights is the correct thing to do because it benefits society as a whole. As will be discussed in this chapter, social development that focuses on women tends to have large payoffs beyond the individual female. Research has found that focusing on the social development of women leads to lower child mortality, increased education, and lower rates of HIV/AIDS (Coleman, 2005). The UN has stated that poverty cannot be eliminated until discrimination against women (social, economic, and physical) is eradicated (UNFPA, 2005).

Violence Against Women

One example of the discrimination that is experienced uniquely by women is the pervasive violence that threatens them throughout their life solely as a result of their gender. Women are much more likely to experience violence based on their gender than are men. The violence can take a variety of forms throughout their lives. It begins even before birth, as female fetuses are more likely to be aborted than male ones in some regions of the world, such as India and China. Male children are preferred over female children in these countries to the extent that if the parents can afford an ultrasound, they may choose to abort the fetus if the scan shows the fetus is female. A recent study in India concluded that 10 million girls were “missing” over the past 20 years due to sex-selective abortion (Jha et al., 2006), although this procedure has been officially illegal since 1994 (Sheth, 2006). Wealthy couples in India will even fly to the United States, which is one of the few countries where it is legal to test for gender in embryos prior to implantation, so that they can be sure to have a son (Kaur, 2006). China has been closing and fining medical clinics that conduct sex-selective abortions but has not criminalized the procedure (Kahn, 2006; “Retreat on criminalizing,” 2006).

Once the child is born, some poorer families resort to infanticide rather than bear the expense of raising a female child. As will be discussed later in this chapter, the tradition of paying a dowry upon the marriage of a female child in India has grown to the extent that simply paying the expected dowry can impoverish a family. If a family already has several daughters, the anticipated expense of raising another girl and then paying for her wedding and dowry can lead parents to the hard decision that they

cannot afford to raise her. Girls are also seen as a burden to the family as they are perceived as needing constant protection. A son is needed in a family as only a male successor can light the funeral pyre of his father, an important cultural tradition (Devraj, 2003).

Sex-selective abortion and female infanticide occur primarily among families living in deep poverty who cannot afford the expense of this child. In a number of cultures, the female moves to her husband's family upon marriage. Thus, she does not contribute any money to her parents' household but only costs money. Impoverished families cannot afford to raise a girl, particularly if they already have a daughter. As discussed in the Culture Box in chapter 4, the number of children born to each family in China is limited. While wealthy families are able to pay the fine for having "excess" children, this is not true for poorer families.

In early childhood, sons are shown preferential treatment and are given more and better food and are more likely to receive medical care than daughters. As a result, boys are more likely to live to their fifth birthday than girls. Through sex-selective abortion, female infanticide, and poorer care of daughters, it is estimated that the world is "missing" 60 million girls who would be alive if not for these practices (Amnesty International, 2004a).

Female Genital Cutting

The next type of violence that girls may experience is female genital cutting (FGC), a procedure that involves partial or total removal of a girl's external genitalia for cultural or nonmedical reasons (UNICEF, n.d.). This was previously known as female circumcision, but it is not equivalent at all to male circumcision; thus, currently it is more commonly referred to as female genital cutting or female genital mutilation. Between 100 million and 140 million women living today have undergone the procedure; about 3 million girls undergo the procedure each year (UNICEF, 2005). The majority of girls undergo FGC between 4 and 14 years of age, but it is sometimes performed on infants (UNICEF, n.d.). It is practiced in about two dozen countries in Africa, as well as countries with immigrants from those countries (Bruni, 2004). It is most common in northeast Africa: prevalence rates range from 80% to 97% in countries such as Egypt and Eritrea (UNICEF, 2005).

The procedure may be conducted for several reasons. A primary one is to increase chastity among women and to reduce sexual pleasure for

them. The procedure is seen as an important rite of passage in some cultures. The external female genitalia are seen as unhygienic and unsightly in certain societies, and thus their removal is seen as beautifying and hygienic (UNICEF, n.d.). Although often performed in Muslim countries, FGC is not based in that religion and in fact predates it.

There are three basic types of FGC, differentiated by the extent of the cutting: clitoridectomy (type I), excision (type II), and infibulation (type III). Type I involves the removal of the clitoral hood and may include the removal of part or all of the clitoris. Type II is the removal of the clitoral hood, the clitoris, and part or all of the labia minora. The most severe form, type III, is the removal of part or all of the external genitalia (clitoris, labia minora, and labia majora) with a stitching or narrowing of the vaginal opening. Only a very narrow opening is left (about the diameter of a matchstick) for the passage of urine and menstrual blood (U.S. Department of State, 2001).

The reason that FGC is not equivalent to male circumcision, nor considered a cultural tradition that should be protected as such, is the extensive damage that can result from the procedure. The procedure is traditionally performed not in a medical facility by medical personnel but by traditional practitioners using nonsterile instruments (although it is becoming more medicalized in recent years) (UNICEF, 2005). Outcomes can include painful sexual intercourse and menstruation, increased susceptibility to HIV and other sexually transmitted diseases, infertility, increased risk during childbirth, hemorrhaging, and death (UNICEF, n.d.). One study found that women who have experienced FGC are more than 50% more likely to die, or have their infants die, during childbirth than women who have not experienced the procedure. Women who had undergone more severe forms of FGC were more at risk than women who had experienced less severe types. The authors of the study believe that the results actually underestimate the risk to women, as only births in hospitals were included in their study; women giving birth at home are more at risk than women giving birth in the hospital due to lower levels of medical care and higher levels of poverty (World Health Organization, 2006).

While in some places efforts have been made to reduce these potentially negative outcomes by performing the procedure in a medical facility, many of the risks remain. Thus, most countries are looking to eradicate the procedure. It has been found that women with higher levels of education are less likely to have the procedure performed on their

daughters, again demonstrating the power of education for women (Hayford, 2005).

*Fauziya Kassindja was a 16-year-old girl in Togo when her father died. A progressive man, he had not forced her to be circumcised. He sent all his daughters to school and allowed them to marry the man of their choice. However, after his death, her aunt took over the family; according to custom, a man's property reverts to his birth family upon his death. Her aunt tried to force her to marry an older man who already had three wives and to undergo FGC. Fauziya fled the country rather than submit, eventually seeking asylum in the United States. No one had ever been granted refuge on this basis before. Asylum laws were established originally to protect political and civil rights and were based on a male model of dissent. She was placed in prison during the evaluation of her appeal. After spending 16 months in prison, she was eventually granted asylum with the help of an American law student and a women's advocacy group. It was determined that having one's clitoris cut off against her will is an act of persecution. She tells her story in the book *Do They Hear You When You Cry* (Kassindja, 1998).*

Family Violence

While home is often perceived as safe shelter from the troubles of the world, for women it can be a dangerous place. At least one in every three women in the world (about 1 billion women) has been beaten, coerced into sex, or otherwise abused in her lifetime. The perpetrator of this violence is most commonly a member of her family or another person known to her, and approximately 70% of women who are murdered are killed by their husband or male intimate partner (Amnesty International, 2004a). Such violence would be considered illegal if it were perpetrated against someone who was not an intimate partner, but in an intimate relationship it is often condoned. A global study of partner violence conducted in 15 sites in 10 countries throughout the world found that the prevalence of partner violence varied widely, but it was widespread. Between 15% and 71% of women in the study had experienced physical

and/or sexual violence at the hands of an intimate partner, with most sites reporting between 30% and 60% (World Health Organization, 2005).

The violence takes different forms in different cultures. For example, in Pakistan, acid throwing is a common form of violence against women. If a man is angry with his wife, he will pour acid on her, resulting in disfigurement and blindness in many cases. As a result, the woman is confined to the home, leading to social isolation and depression. In 2002, there were over 1,000 cases of acid throwing documented in Pakistan, and about one-quarter of the victims were killed (Human Rights Watch, 2006).

A common denominator throughout the world has been linked to partner violence: traditional gender roles and the inequality of women in society (McCloskey, Williams, & Larsen, 2005; Wipatayotin, 2005; Xu et al., 2005). Studies have also found that a low level of education for women is linked with a higher likelihood of experiencing partner violence (McCloskey et al., 2005; Rani, Bonu, & Diop-Sidibé, 2004). Violence against women is often seen as acceptable due to their lower societal status (Surtees, 2003). Leaving the relationship is not an option for women in many cultures. Divorce may not be legal or acceptable, and even if the woman did leave the relationship, she is likely to have difficulty surviving financially due to her lower status and education, making it difficult for her to obtain good-paying work. In many cultures, a woman's status is tied to her role as wife and mother, and if she leaves that, she loses the little status she did have (Surtees, 2003).

Dowry Deaths

As discussed earlier, the importance and amount of a bride's dowry has been growing in India, even though the giving and receiving of a dowry has been illegal in India since 1961. To give an "appropriate" amount, many families are now driven into debt. However, some grooms and their families are not satisfied with the dowry and ask for more. If they do not receive it, they may kill the bride so that the groom is free to marry again and get another dowry. According to the BBC, Indian government statistics show that nearly 7,000 women were killed by their husbands and in-laws in 2001 over dowry; the director of domestic violence shelters in Delhi believes that about 70 cases a month are related to dowry issues (Ash, 2003). In many cases, the families try to disguise these deaths as "accidental deaths from kitchen fires." As with all domestic violence cases,

the stated reason for the violence is often simply an excuse (Kishwar, 2005): men may offer as an excuse for the violence that dinner was late or poorly cooked, but they are not called “lousy cooking murders.”

A dowry was originally intended as an inheritance for the woman so that she would have her own wealth separate from her husband's. Women traditionally married out of their birth villages and moved away from the protection of their families. The dowry was developed to give her money and goods for her pleasure and possibly for times of need. It was intended to show the appreciation for, and the status of, the bride in her home village (Oldenburg, 2002). However, with the advent of the British colonialism and laws, inheritance for women waned. The British concept of inheritance was that land was passed down to first-born sons; thus, land was no longer passed down to women and they lost their traditional inheritances. This led to the concentration of land in the hands of a few wealthy landowners rather than many smaller farmers, increasing poverty. This increase in familial poverty led to difficulties in giving daughters a dowry and they began to be seen as liabilities (Kishwar, 2005).

A campaign in India has started urging couples to pledge to abstain from giving or receiving a dowry. The “Say No to Dowry” campaign began in 2002 and has been growing since (www.indiatogether.org/women/dowry/pledge.htm) (“No Dowry campaign,” 2002).

The link between dowries and the lower status of women is not a direct link, as even groups that did not practice the tradition of dowry were found to have committed female infanticide, demonstrating the low status of women in the culture regardless of the dowry burden (Oldenburg, 2002). As further evidence of the weaker link between dowry and “dowry death” and the stronger link with women's lower status, in Pakistan women are victims of deliberate burnings blamed on stoves; these deaths are not linked with dowries in that country but represent general violence within the family (Human Rights Watch, 2006). In Afghanistan, some women even set themselves on fire so that they can escape from the violence experienced at the hands of their husbands and in-laws (Gall, 2004).

Honor Killings

Women are at risk for violence from their husbands and other family members. One example of this is “honor killings.” In some cultures, if a female is seen to have besmirched the family honor by acting in a dis-

honorable way, the only way for the family to regain its honor is to kill her. The offense may be an extramarital affair, being seen in the company of a man who is not her husband, or even being raped. These violations may not even be proven but may be only a suspicion of her family. In some cases of rape, women have not been killed but have been forced to marry their rapist to preserve honor (Zaman, 2005). These situations have been documented in Turkey, Pakistan, and Egypt as well as in countries in Europe where people from these countries have immigrated. While these are all predominately Muslim nations, the crime is not sanctioned by Islam and predates the development of Islam as a religion (Homolo, 2006; Sev'er & Yurdakul, 2005).

Although honor killings are outlawed, they are frequently not punished severely. The family will also commonly have the youngest male in the family commit the murder so that the courts will be more lenient with him due to his age. Turkey has begun prosecuting these murders more harshly as part of its bid to join the European Union. As a result, families have moved to pressuring women perceived to have tarnished the family honor to commit suicide, or they will kill her in a manner that looks like suicide (Bilefsky, 2006).

In a famous case in Pakistan, Mukhtar Mai (also known as Mukhtaran Bibi) fought back against this system of honor. Her 12-year-old brother had allegedly committed transgressions and a village council decreed that she should be gang-raped as punishment for her brother's actions. She was taken outside and raped by four men while others watched. It is typically expected that after she had been shamed in such a manner, she should commit suicide to reclaim honor. Instead she pressed charges against the rapists. The men were found guilty in court and she was awarded monetary compensation from the government. She used this money to open schools in her village. She received pressure from the Pakistani government to remain silent, but with the help of Nicholas Kristof, a *New York Times* columnist, her story has become known worldwide. She now has a book telling her story: *In the Name of Honor* (Kristof, 2005; "In the Name of Honor," n.d.; "Person of the week," 2005).

The limited role of women in these societies often creates situations in which the male is seen as the absolute ruler of the household, and the cultural prescriptions for appropriate dress and action for women can create situations in which women are seen to step out of line and men must discipline them. Thus discrimination is a clear factor in this violence, but poverty has also been found to play a role. Families in which

honor killings occur are often very poor; as one father who killed his daughters due to an adulterous affair of one stated, “We are poor people and we have nothing else to protect but our honor” (Tanveer, 2005, p. A9). Honor is seen as a valuable possession, and in the case of impoverished families, it may be the only thing of value they have. Therefore, when it is seen as damaged, it is extremely important to reclaim this only possession of value (Sev’er & Yurdakul, 2005).

Unequal Under the Law

In 2003, at least 54 countries had laws under which women had fewer legal rights than men (Amnesty International, 2004a) and 79 countries have no law against domestic violence. Examples include Israel, where since divorce is a religious and not a civil matter, a woman may not initiate a divorce without the consent of her husband (Amnesty International, 2004a), and Thailand, where Thai women have less access to divorce than men (“Watana wants amendment,” 2005). In Saudi Arabia, women are not permitted to vote, drive, or appear in public without a male relative escorting them (Amnesty International, 2004b), and in Iran, women have seen their rights eroding after the 2004 elections in that country (Faith, 2004). The Algerian Family Code, passed in 1984, treats adult women as minors under the law, stating that women are legally obliged to obey their husbands and that a man may have up to four wives (Salhi, 2003). A number of nations have limitations on property ownership, inheritance rights, and credit access for women, therefore restricting their ability to earn income (UNFPA, 2005).

The concept of cultural relativity comes into question in this discussion. A common argument is that these laws are in keeping with the tenets of Islam and should be respected. However, the merits of this argument do not hold up to close examination. Afkhami (2001) notes that these restrictions rely on a particular interpretation of the tenets of Islam—a strain of fundamentalism that exists in all religions, including Christianity, Judaism, and Buddhism. When women are kept silent, as occurs in many fundamentalist religions, their differing opinions cannot be heard. However, many of the women under these systems state that this inequality is not what they want, an opinion echoed by a number of the men (Benard, 2002). The term “gender apartheid” is sometimes used in these discussions to draw parallels to the differing systems that existed

in South Africa for people for different races. This differential treatment was not considered to be a natural part of their culture and deserving of respect, but a system imposed specifically to benefit one group of people over another. As stated in chapter 2, human rights protect the right to one's culture, but that right is limited in that it may not infringe on another protected human right (Ayton-Shenker, 1995).

The most infamous current cases of discriminatory treatment occurred in Afghanistan under the rule of the Taliban. During this period, women were not allowed to leave the house without a close male relative; when they did leave, they had to be completely covered. They could not seek medical care, even in an emergency, without being escorted by a close male relative. The windows of a house were required to be painted black so that any women inside could not be seen. Women were not permitted to be educated and could not work. This drove many women into desperate poverty as their husbands and other male relatives had been killed during the internal fighting. Being barred from working or from leaving the house forced many to the brink of starvation and even death. Men also had a strict dress code and were required to grow beards of a certain length. Violators of the Taliban rules could be beaten or killed (Mansoor, 2002).

Brodsky (2003, p. ix) states that "the oppression of Afghanistan and particularly Afghan women did not start with the Taliban nor has it ended with their defeat." Women in Afghanistan have been fighting for equal treatment for decades and still have not achieved it, even after the fall of the Taliban. As an illustration of the battles women in Afghanistan still face, a leading women's advocate who was the chief of the Women's Affairs department was assassinated in 2006 (Gall, 2006). To help achieve equality, the Revolutionary Association of Women of Afghanistan (RAWA) was founded in the late 1970s by an Afghan woman named Meena (many Afghan women use only their first name). This organization continues its work today despite Meena's murder in 1987 (see their web site at www.rawa.org). The goal of the organization was originally to involve the women of Afghanistan in the struggle for the attainment of human rights and to help establish a democratic government in their country, but after the Soviet invasion of their country in 1979, they became directly involved in the resistance movement. After the rise of the Taliban, this resistance movement was directed against that regime. RAWA worked to provide civic services during the Taliban regime and received numerous international awards for their work, yet they were

excluded from the regime change after the U.S.-led campaign toppled the Taliban. In contrast, the *mujahideen* are notorious for the numerous human rights violations they committed while in power previously, yet they were the partner of choice in establishing a new government (Benard, 2002; Mansoor, 2002).

Currently, RAWA is continuing its social and relief work despite the lack of support from international NGOs or any government. Although only women can be members of RAWA, they enjoy the support of many men as well (Benard, 2002). RAWA runs schools, hospitals, and orphanages among other projects. The fall of the Taliban has not abated the need for women's equality and the fight for human rights in Afghanistan. With the fundamentalist *mujahideen* back in power, the rights of women are still extremely limited and RAWA's work continues, despite extremely limited funding (RAWA, n.d.).

Women's Health

Due to their reproductive abilities, women are at risk for health issues that do not affect men. Since women are seen as being of lower class than men and their reproductive capacity is often seen as "different," these medical issues typically do not receive the attention that they should, on the micro, mezzo, or macro level. This is also true in terms of defining human rights: many documents do not include reproductive health, an issue that can be a matter of life and death (Agosin, 2001). Many women do not have access to contraceptives, which thus increases the likelihood of an unintended pregnancy. Approximately one in six women in the Global South is estimated to have an "unmet need" for family planning: she would prefer not to become pregnant but is not using any form of contraception (Population Reference Bureau, 2005). As discussed in chapter 6, in a number of cultures it is considered inappropriate for a woman to refuse to have intercourse with her husband for any reason; thus, even if she would prefer not to become pregnant, she cannot refuse him.

When women experience an unintended pregnancy, some will opt to have an abortion, whether it is legal or not in their country, and such illegal abortions can be fatal. Unsafe abortion is defined by the World Health Organization as "a procedure for terminating an unwanted pregnancy either by persons lacking the necessary skills or in an environment

lacking the minimal medical standards, or both” (Population Reference Bureau, 2005, p. 3). More than half a million women and girls die each year from pregnancy-related causes, and about 13% of these deaths result from unsafe abortion. This figure is much higher in some regions of the world; in sub-Saharan Africa it can be up to 50% of maternal deaths (Population Reference Bureau, 2005).

Ninety-nine percent of the world’s maternal deaths occur in the Global South, typically due to lack of access to medical care, which may be needed to treat severe bleeding or infection (Population Reference Bureau, 2005). Every day 1,400 women and girls die giving birth, with the risk much higher in the Global South. In sub-Saharan Africa, for example, the risk of dying in childbirth is 1 in 13, compared to 1 in 4,085 in the Global North. Complications from childbirth are the leading cause of death for women and girls in the Global South. Even more common, though, are long-lasting infections, injuries, and disabilities resulting from childbirth; 30 times more women suffer from these complications than from maternal death (UNICEF, 2003).

One example of an injury resulting from childbirth that has become extremely rare in the Global North, but is still common in other areas, is a fistula. Typically experienced by young mothers, especially those who are small (as is typical in females who are poor and undernourished throughout their lives), it occurs during extended labor. During contractions, the tissues between the uterus and the bowel, as well as between the uterus and bladder, rub against each other. When labor is protracted, this friction can result in tissue tearing, creating an opening between the two organs. In smaller women, the baby may be too large compared to her body for the birth to proceed easily. Due to the lack of access to medical facilities, the tear is not repaired, and the woman becomes incontinent. The leakage of urine and/or excrement causes a severe rash and a foul odor. As a result, the woman is typically cast off from her husband and her village. If she does not receive surgery to repair the tear, she will often die sooner as a result of this societal neglect.

It is estimated that approximately 2 million women are currently living with a fistula and 50,000 to 100,000 new cases occur every year. These numbers are based on women seeking treatment, and thus the actual numbers are likely much higher (UNFPA, 2006a). The problem is concentrated in sub-Saharan Africa due to a combination of reasons: poverty, lack of access to modern health care, the tradition of home birth, and

early pregnancy. However, it also occurs in other nations where these factors cluster, such as Bangladesh and Afghanistan (LaFraniere, 2005; Leidl, 2006; Ryan, 2006).

The surgery to repair the fistula is relatively easy, but few doctors perform it. In Mozambique there are only three doctors in the country who perform the surgery; Niger has six. Although a number of doctors have been trained to perform the surgery, as described in chapter 6, many doctors leave Africa for positions in the Global North that offer better pay and better working conditions (LaFraniere, 2005). The following story helps illustrate the common scenario (Kristof, 2002):

Aisha Idris was 13 when she was married and 14 when she gave birth. Her birth was unassisted by even a midwife, and after three days of labor, the baby was born dead. Aisha suffered a fistula to both her urethra and rectum. She therefore leaked urine and feces and was unable to control it. Her husband promptly divorced her and she was shunned by her village. Her attempts at corrective surgery have failed and she cannot afford further health care. (Adapted from "Devastated women" by Nicholas Kristof, originally published April 26, 2002. Text has been modified to facilitate reading comprehension.)

These issues help illustrate how discrimination against women in other arenas can lead to permanent injury and death. As mentioned, women who are small are more at risk. Since girls are more likely to be malnourished than their brothers, this creates a risk factor. The stereotype that girls should not be educated but should be married as soon as possible to reduce the cost to their birth family again creates a risk factor, as younger women are more at risk for fistulas. Onolemhemen (2005) states that to prevent fistulas, long-term solutions must include the education of girls and delaying their marriages until they reach maturity.

The UNFPA works around the world to try to reduce these numbers of maternal deaths and injuries. However, in recent years its work has been more difficult as the Bush administration has refused to pay the American share of dues, stating that UNFPA supports the one-child policy and forced abortion in China. Data supporting this claim have never been found; in fact, the U.S. State Department stated they had investigated and

found no evidence to support it. UNFPA does not support abortion in any country (UNFPA, 2006b). To continue to try to save the lives and health of women around the globe, citizens of the United States formed the 34 Million Friends of UNFPA in an effort to raise the funds being withheld by the American government (www.unfpa.org/support/friends/34million.htm).

Access to Education

As discussed in chapter 4, it is more common for girls to be denied access to an education than boys. Thus, the majority of children out of school are girls, leading to the fact that the majority of illiterate adults in the world are female (United Nations Girls' Education Initiative [UNGEI], 2006). This disparity exists for several reasons, including gender roles that assign girls to household chores and caretaking of younger children, concerns about the safety of girls attending school, and the belief that education is wasted on a girl, as she will not be employed for wages as a grown woman. Familial poverty may also influence school attendance: girls are seen as being valuable at home, where they can assist with household chores, so the family may believe it would be more expensive to send a girl to school than a boy in terms of lost labor (United Nations, 2005).

However, the importance of education of girls can be argued under both the equity and efficiency arguments. The United Nations has stated that not only does education for girls have the greatest payoffs for the empowerment of women, but it also pays off throughout their lives in ways that benefit society as a whole (UNFPA, 2005). Research has concluded that the education of women has a greater positive impact on social and economic development of a country than the education of men (e.g., Balachandirane, 2003; UNFPA, 2005). Educated women have increased economic capabilities and are more able to play a role in society and have a voice in their life. Education of girls has been found to reduce infant mortality rates and lower fertility rates, linking to the previous discussion regarding reproductive health (UNICEF, 1999).

In an effort to reduce the disparity in education, the UN has started a program focused on increasing the proportion of girls enrolled in school. The United Nations Girls' Education Initiative aims to equalize the proportion of girls and boys enrolled in school. In accordance with the

Millennium Development Goal, they aim to have all children complete primary school by the year 2015 (see chapter 8 for details). Thus, by focusing on women, men benefit as well, since broad societal improvements are realized.

Women and Development

Previously, the unique impacts of development on women were not considered and actually increased their hardships rather than relieving them. This is due in part to the fact that women's traditional contributions to society are unpaid and thus are unmeasured in terms of economic growth. What is unmeasured is cast as unimportant (see the work of Marilyn Waring for more information on this topic). For example, structural adjustment policies discussed in chapter 6 had a disproportionate impact on women. As women's gender role casts them as caregivers, they were typically the ones who shoulder the additional burden when governmental services such as medical care or childcare are cut (Association for Women's Rights in Development [AWRD], 2002b). Van Soest and Crosby (1997) give the example of how an agricultural intervention enabled men to double the acreage of planting, which then doubled the workload of women who were responsible for weeding the fields by hand. Due to examples such as these, the World Bank, as well as other institutions, has now implemented a policy of "gender mainstreaming" in which the impact of policies on each gender is examined prior to implementation (AWRD, 2002b).

Some of the most successful examples of empowerment and increased equity in development (both social and economic) have originated within nations rather than as a result of international development. The Self-Employed Women's Association (SEWA), mentioned in chapter 3, is a labor union in India founded in 1972 by Ela Bhatt (see their web site at www.sewa.org). SEWA's goals are employment and self-reliance for its members. It is an unusual labor union in that its members consist of poor, self-employed female workers. These women are employed in such labor as selling vegetables, picking out recyclable materials from trash heaps, and weaving. They were excluded from India's labor laws as these were not recognized professions by the government (Bhatt, 2006). Bhatt, an experienced labor organizer, helped them organize and advocate for their rights. By organizing and working together, the women are able to ad-

vocate for higher wages and less harassment. They are no longer as afraid to stand up for their rights as they know that there are many others who will help them (Bhatt, 2006).

To achieve these goals, SEWA has organized a number of support services, including a microfinance bank, childcare, health care, and legal services. These services also help SEWA members as those who provide the service charge for it, thus earning income at the same time they are helping other in their quest for employment (SEWA, n.d.). SEWA developed a bank in which these women, who previously could not access traditional financial institutions, can save money as well as borrow it. Traditional institutions would not lend to them as they were illiterate and without formal collateral. The only place they had been able to borrow money was from moneylenders, who charged usurious rates, keeping the women in poverty. At the SEWA Bank they can borrow money at reasonable rates once they have established themselves, helping them on the path out of poverty. This system is similar to that of microcredit.

Microcredit, in which small loans are made to those living in poverty, has been successful in helping to alleviate poverty and empower women. Originating with the Grameen Bank in Bangladesh (and discussed in more detail in the Culture Box), it has spread to other countries, although access remains highly uneven: 90% of microcredit participants are in Asia (Gooneratne, 2005). In recognition of the far-reaching impact of microfinance, the founder of the Grameen Bank, Muhammad Yunus, was awarded the Nobel Peace Prize in 2006. Oxfam has started a program in Senegal based on a Grameen Bank approach combined with traditional savings and loans groups (Damore, 2004). The founder of eBay and his wife, Pierre and Pamela Omidyar, gave \$100 million to Tufts University with the provision that it be invested in microfinance organizations. Tufts may then use only half of the investment returns; the other half must be reinvested in these organizations (Arenson, 2005).

Professional Role of Social Workers

Throughout this chapter, different issues that affect women solely because of their gender have been discussed, but the impact of poverty and lack of education has also been clear. The research findings of multiple international organizations support the fact that for global social and

economic development to occur, women must become empowered. Due to our ethical grounding in empowerment, social workers are an ideal group to help empower disenfranchised groups. We are able to work both with international NGOs and local movements to help women achieve a culturally relevant model of equality.

Due to varied means in which women are discriminated against, there are a variety of methods that social workers can use to help alleviate the situation. Social workers can work on the macro level to help change laws to allow women equal rights under the law; they can also work on the mezzo and micro levels to increase acceptance of the new laws and open up opportunities for women. The vision of equality for women should not be based on a Western model but should evolve from within the society and should take into account what those citizens would like to achieve. Recognizing the client as the expert is another method in which social workers can help achieve a culturally relevant, more equitable world.

What You Can Do Now

- Raise awareness about the status of women worldwide and why this is important to social development.
- Raise funds to help an organization such as RAWA continue its work. What is small money to Americans can make a major difference in a country such as Afghanistan.
- Understand the strengths and weaknesses of arguments relating to women's issues and cultural relativity. Be able to respond articulately to those who state, "That's just their culture; we shouldn't interfere."
- Help to donate goods such as computers and digital cameras to organizations that need them.

What You Can Do as a Professional Social Worker

- Work for an NGO such as CARE (www.care.org) that fights global poverty, with a special emphasis on women. The International Center for Research on Women (www.icrw.org) gathers research to advocate for women on an international basis. MADRE (www.madre.org) is an international women's human rights organization where you can work for the rights of women around the world. They operate programs in a number of countries around the world.

Culture Box

MICROFINANCE IN BANGLADESH

Bangladesh is located in south Asia to the east of India. After India received its independence from Britain, Pakistan (located to the west of India) and Bangladesh (then known as East Pakistan) separated from India due to religious differences and were one nation. Due to its wide geographical separation from Pakistan, however, Bangladesh declared independence in 1971. The majority of the country is Muslim (83%), with a minority Hindu population (16%). Forty-five percent of the population lives below the poverty line (CIA, 2006). This high poverty rate is due in part to the fact that most Bangladeshis live in rural areas where they have little access to paid employment and must rely on agriculture or self-employment (Bernasek, 2003).

As is true all over the world, Bangladeshi women are more likely than men to be poor and have fewer opportunities for moving out of poverty. Some of the reasons for this are that inheritance rights favor men and that cultural norms emphasize *pardah* for women (female seclusion) and strict adherence to the appropriate gender role: caregiver in the home. Any monetary contributions to the household by women tend to be devalued (Bernasek, 2003). Poor women were often engaged in small-scale economic activities to help feed their families but lacked access to credit to expand these businesses. As was true for most Bangladeshis living in poverty, they did not have access to traditional banks due to lack of collateral and could not get financing for self-employment enterprises. Women faced additional barriers in obtaining financing as they were not considered credit-worthy and needed a male relative to co-sign the loan (Bernasek, 2003). Their only options were moneylenders and loan sharks who charged exorbitant interest rates.

In 1976, Muhammad Yunus of the University of Chittagong in Bangladesh started an enterprise to help impoverished people gain access to loans at market rates to help them pull themselves out of poverty. This is known as microfinance (Grameen Bank, 2002). Microfinance is defined as “offering very small loans to poor people, usually women, to help grow their small-scale businesses or start new ones” (UNFPA, 2006c, p. 6). Although loans were initially made to men and women equally, women now represent 96% of the more than 6 million borrowers (Bernasek, 2003; Grameen Bank, 2006a). Women are preferred as borrowers as research has found that they are more likely to invest income in their families, resulting in increases in child survival rates and child growth. They are also more likely to repay their loans (Coleman, 2005). The Grameen Bank has been joined by another organization in Bangladesh, the Bangladesh Rural Advancement Committee (BRAC), and they operate in a similar manner. To take advantage of the cultural importance of social networks, villagers interested in participating are gathered into groups of five. One loan at a time is given to one member of the group and the entire group is held responsible for repayment. This helps create peer pressure and solidarity for increasing the rate of repayment. As repayment rates have been above 90% for both organizations, this appears to be a highly successful method (Develtere & Huybrechts, 2005).

One example of a Grameen Bank project is the Village Phone Scheme. Phone service in rural Bangladesh is extremely limited. Through the Grameen Bank, a villager can buy a mobile phone and then sell the use of it to her neighbors. This has helped to alleviate poverty in the villages as the residents can now call around to determine the best price for their goods; it has also helped reduce the need to travel long distances to conduct business. It also earns money for the person who is selling the minutes (Aminuzzaman, Baldersheim, & Jamil, 2003).

The bank has also created social development goals known as the Sixteen Decisions by which participants must agree to abide (see below). These decisions are designed to help influence all aspects of their lives, not just the financial part (Grameen Bank, 2006b).

(continued)

The Sixteen Decisions of the Grameen Bank

We shall follow and advance the four principles of Grameen Bank—Discipline, Unity, Courage, and Hard Work—in all walks of our lives.

Prosperity we shall bring to our families.

We shall not live in dilapidated houses. We shall repair our houses and work towards constructing new houses at the earliest.

We shall grow vegetables all the year round. We shall eat plenty of them and sell the surplus. During the plantation seasons, we shall plant as many seedlings as possible.

We shall plan to keep our families small. We shall minimize our expenditures. We shall look after our health.

We shall educate our children and ensure that they can earn to pay for their education.

We shall always keep our children and the environment clean.

We shall build and use pit-latrines.

We shall drink water from tubewells. If it is not available, we shall boil water or use alum.

We shall not take any dowry at our sons' weddings, neither shall we give any dowry at our daughters' wedding. We shall keep our centre free from the curse of dowry. We shall not practice child marriage.

We shall not inflict any injustice on anyone, neither shall we allow anyone to do so.

We shall collectively undertake bigger investments for higher incomes.

We shall always be ready to help each other. If anyone is in difficulty, we shall all help him or her. If we come to know of any breach of discipline in any centre, we shall all go there and help restore discipline.

We shall take part in all social activities collectively.

While the microcredit operations of the Grameen Bank and BRAC have been given credit for everything from reducing poverty to empowering women to increasing education, in reality the research findings have been more mixed. Develtere and Huybrechts (2005) analyzed the research to date and offered the conclusions discussed in the following paragraphs. In terms of poverty reduction, most studies have found that microcredit does reduce poverty, and the more loans that a person has taken out, the greater the reduction of poverty. This finding, though, has been criticized, as some of those who use the Grameen Bank are comparatively wealthy and may be influencing the findings. Microcredit schemes have been criticized for including the “wealthier” poor among their members; however, research finds that the vast majority of members of BRAC and Grameen Bank are among the poorest of the poor. Researchers do agree that microcredit has helped to reduce the vulnerability of users. As most are engaged in work related to agriculture, this work is obviously cyclical and tied to the season. Microcredit helps smooth out the family's finances during less productive times of the year.

The findings on the impact of involvement in microcredit on the lives of women have also been mixed, which may be a result of differing research methodologies. When assessing the impact of microcredit, it is important to remember the context of Bangladesh. It is a deeply patriarchal society in which education of girls is considered unnecessary and *purdah* is practiced, along with the practice of giving a dowry (discussed earlier in conjunction with India). Women are not supposed to have income independent of their husbands. Thus, the very involvement of women in microcredit is a step outside of the traditional culture. Research has found that women involved with BRAC and the Grameen Bank have a larger role in

decision-making in the household and are better treated by their husbands than women who are not involved. This concept is supported by the experiences of SEWA; they found that their members are often treated better by their husbands once they are contributing economically to the household and are no longer considered to be a burden (Bhatt, 2006). Children of these women, both boys and girls, are more likely to be enrolled in school.

However, in some cases it is not actually the women who are using the money for their businesses; they are simply taking the loan in their name and giving the money to their husbands for their use. About 63% of the women stated that had only partial, very limited, or no control over the loan; the status of women involved in microcredit looks good only when compared with women who are not involved, not when compared to the status of men in the society. However, again using systems theory to consider the context, this could be re-configured to a positive evaluation by noting that 61% of women state they have full, significant, or partial control over their loan, notable progress for a traditional patriarchal society. Even women who have no control over the loan must still fulfill its requirements, such as attending weekly group meetings. This has the effect of removing a woman from *pardah* and introducing her to new people and new ideas, which can have a significant effect on her empowerment.

Thus, overall, Develtere and Huybrechts (2005) concluded that microcredit has had positive effects on its members, even if it has not been an unqualified success. Bernasek (2003) concludes that the Grameen Bank has improved the well-being of women borrowers and their families in terms of income, poverty status, nutrition, education, and other variables. However, only mild success has been achieved in improving women's social status and empowerment, and there has been little success in altering the social systems that act to limit women's options, such as the giving of dowry.

World Wide Web Resources

Association for Women in Development (www.awid.org): An international organization committed to achieving gender equality, sustainable development, and human rights for women. The goal is to create policy, institutional, and individual change to improve the lives of women and girls.

DAWN (Development Alternatives with Women for a New Era) (www.dawnorg.org): A network of women scholars and activists from the Global South who engage in feminist research and analysis and are committed to working for economic justice, gender justice, and democracy.

One-by-One (www.fightfistula.org): A U.S.-based campaign to raise awareness and money to reduce the incidence of fistulas.

Renew: The Campaign to End Fistula (www.endfistula.org): The website of the UNFPA campaign to raise money and awareness concerning fistulas.

United Nations Womenwatch (www.un.org/womenwatch): This UN site provides information and resources on gender equality and empowerment of women.

Women's Commission for Refugee Women and Children (www.womenscommission.org): Part of the International Rescue Committee, this commission works to monitor the care and condition of refugee women and children. It gathers information and advocates on issues as needed.

Women's Human Rights Resources (www.law-lib.utoronto.ca/Diana/index.htm): "Collects, organizes and disseminates information on women's human rights law to facilitate research, teaching, and cooperation." There is a database with links to hundreds of documents relating to women's human rights as well as bibliographies and research guides.

8

Millennium Development Goals

Thinking about how to solve the issues discussed in this text can be overwhelming. The scope of the issues and their interlinking nature can create a hydra's head: when one problem appears to be solved, two more grow to take its place. But it is precisely the interlinking nature of these issues that can lead to solutions. By examining the root causes of these issues and addressing them, the problem can be addressed before it grows.

The Millennium Development Goals (see Box 8.1) were developed in 2000 by the United Nations in an attempt to address the primary issues and provide a roadmap to solutions. The goals were derived from the UN's Millennium Declaration, which affirmed a collective responsibility for global equality and equity and was signed by 189 nations (UNDP, n.d.). The Millennium Development Goals set clear and precise targets for achieving the commitments made in the Millennium Declaration; the objective is to accomplish them by 2015. While in the past development goals tended to focus on economic growth, these goals focus on social development (UNDP, 2003). They also are aligned with the human rights guaranteed by the UNDR (UNDP, 2003). The goals are connected in that the achievement of one makes it easier to achieve the others. As noted throughout this text, poverty, lack of education, and discrimination are risk factors for many social problems, and therefore reducing them can reduce other issues as well.

Worldwide partnerships will be needed if the goals are to be achieved. At the pace established in the 1990s, sub-Saharan Africa would not achieve the goal of halving poverty until 2147 and would not reach the

BOX 8.1 The UN Millennium Development Goals

Goal 1: Eradicate extreme poverty and hunger

- Reduce by half the proportion of people living on less than a dollar a day
- Reduce by half the proportion of people who suffer from hunger

Goal 2: Achieve universal primary education

- Ensure that all boys and girls complete a full course of primary education

Goal 3: Promote gender equality and empower women

- Eliminate gender disparity in primary and secondary education, preferably by 2005, and at all levels by 2015

Goal 4: Reduce child mortality

- Reduce by two thirds the mortality rate among children under five

Goal 5: Improve maternal health

- Reduce by three quarters the maternal mortality ratio

Goal 6: Combat HIV/AIDS, malaria, and other diseases

- Halt and begin to reverse the spread of HIV/AIDS
- Halt and begin to reverse the incidence of malaria and other major diseases

Goal 7: Ensure environmental sustainability

- Integrate the principles of sustainable development into country policies and programmes; reverse loss of environmental resources
- Reduce by half the proportion of people without sustainable access to safe drinking water
- Achieve significant improvement in lives of at least 100 million slum dwellers by 2020

Goal 8: Develop a global partnership for development

- Develop further an open trading and financial system that is rule-based, predictable and non-discriminatory, includes a commitment to good governance, development, and poverty reduction—nationally and internationally
- Address the least developed countries' special needs. This includes tariff- and quota-free access for their exports; enhanced debt relief for heavily indebted poor countries; cancellation of official bilateral debt; and more generous official development assistance for countries committed to poverty reduction.
- Address the special needs of landlocked and small island developing States
- Deal comprehensively with developing countries' debt problems through national and international measures to make debt sustainable in the long term
- In cooperation with the developing countries, develop decent and productive work for youth
- In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries
- In cooperation with the private sector, make available the benefits of new technologies—especially information and communication technologies

goal of reducing child mortality until 2165 (UNDP, 2003). Clearly stronger methods than have been used in the past are required. Countries currently working to meet the goals must take a strong look inward at factors that have impeded their progress, such as the lack of strong national governance and the presence of corruption. The primary responsibility for the achievement of Goals One through Seven lies within these nations themselves, although wealthier nations play a part in helping to achieve these goals, as demonstrated in Goal Eight. In addition to sharing knowledge and technology such as water purification and advanced medicines, the wealthier nations must also examine the structures that make it difficult for other nations to develop. As discussed in Chapter 1, current trade policies favor nations in the Global North through the use of tariffs and subsidies.

Modernization theory states that more industrialized nations can give aid to other countries to help them develop. However, although the nations of the Organisation for Economic Co-operation and Development (primarily nations in the Global North) have pledged to donate 0.7% of their gross domestic product to the countries in the Global South to help them develop, the vast majority do not. Five countries (Denmark, Luxembourg, the Netherlands, Norway, and Sweden) currently meet the 0.7% target, and 11 more European Union countries have pledged to meet this goal by 2015. The United States, although its aid has increased markedly under President Bush, still donates only 0.22% of GDP and has set no plans to meet the target (UNDP, 2006; U.N. Millennium Campaign, 2006).

Progress on the Millennium Development Goals

Progress on the goals has been mixed. Some goals are closer to being achieved than others, and some regions are closer to achieving the goals than others. Progress towards each goal is discussed below. In some cases, countries needed to spend time preparing reports on their progress as opposed to spending their efforts on achieving the goals themselves. Therefore, one limitation to this data is that reporting is subject to the limits of the data provided by the countries themselves. An additional limitation is that examining a country's or a region's progress can mask inequalities within that country or region. For example, China has shown remarkable progress towards achieving the goals, but the bulk of this

progress has been felt by urban dwellers in eastern China and has excluded rural residents for the most part (UNDP, 2003).

All information below concerning progress toward the goals was gathered from the United Nations Development Programme (UNDP) (2006) and the UN site for Millennium Goals Indicators (2006), except as noted. These agencies are an excellent resource for current information on progress toward the goals.

Goal 1: Eradicate Extreme Poverty and Hunger

The first target under this goal is to halve the number of people whose income is less than \$1 a day. Eastern Asia and Southeast Asia have already achieved this goal, although they continue to have moderate poverty. Sub-Saharan Africa and Southern Asia are still far from reaching the goal, and other regions, such as Northern Africa/Western Asia and the countries in transition in Southeastern Europe, have seen their levels of extreme poverty increase.

The second target under this goal is to halve the number of people who suffer from hunger. No region has yet achieved its goal, although several are on track to do so by the target date of 2015. The most-suffering regions, sub-Saharan Africa and South Africa, have seen their hunger rates improve, but due to increases in population, the actual number of people who are hungry has still increased. Much work remains to achieve this target. Microfinance, as discussed in Chapter 7, is seen as a key strategy in helping to eradicate poverty. In the home of microfinance, Bangladesh, microfinance accounts for 40% of the reduction in poverty (Gooneratne, 2005).

Goal 2: Achieve Universal Primary Education

The one target under this goal is that by 2015 all children, both boys and girls, will complete primary school. Almost all regions have shown progress towards this goal, Eastern Asia and the countries of the former Soviet Union in Europe being the only exceptions. Sub-Saharan Africa has made substantial progress, increasing the proportion enrolled from 53% to 64%, but still has low enrollment. Underlining the importance of examining diversity with a region, although sub-Saharan Africa as a whole has made progress, fewer than half of the children in Burkina Faso, Djibouti, Eritrea, Ethiopia, Mali, or Niger are enrolled in school. Additional inequalities

include those based on residence and sex. Eighty-two percent of children not in school in countries in Global South live in rural areas. This is typically due to poverty; the children's income from labor is needed and the families cannot afford school. On a macro level, the country's poverty will limit the number of schools available and there may be no school close enough even if the child is able to attend. As discussed in the chapter on child welfare, girls are much more likely to be out of school than boys, especially in southern Asia, western Asia, and Oceania.

Goal 3: Promote Gender Equality and Empower Women

The target under this goal is to eliminate gender disparity in all levels of education. As discussed under the previous goal, this goal is not yet met, but the majority of regions appear to be on track to meet it by 2015. UNDP also tracks other measures as well to evaluate the progress of women. When examining the percentage of women in non-agricultural wage employment, progress has been made in every region, but substantial disparities still exist in almost all regions, particularly southern Asia, western Asia, and northern Africa. The Commonwealth of Independent States, comprising the former satellite nations of the Soviet Union, has already met this goal. UNDP also notes that women's political power has been growing, although it is still dismal and no region is on track to meet the goal by 2015. While all regions except eastern Asia have seen the proportion of women in government increase, it ranges from a low of 3% in Oceania to a high of 20% in Latin America and the Caribbean. The world average is only 17%; the United States is even lower, with 15% of those serving in Congress in 2006 being women (Center for American Women and Politics, 2006).

Goal 4: Reduce Child Mortality

The target under this goal is to reduce by two-thirds the mortality rate of children under 5. Global progress has been made toward this goal, but no region has yet achieved it. Sub-Saharan Africa has the highest rate of child mortality: 168 children per 1,000 live births do not live to see their fifth birthday (17%). This region is considered off track for achievement of this goal. This is followed by southern Asia, with a rate of 90 children per 1,000 live births; this region is also not considered likely to achieve the goal. It is estimated that microfinance can help play a role in achieving this

goal. In Bangladesh, more progress has been made toward this goal than in India, although India has much higher economic growth. If India had kept pace with Bangladesh, 732,000 fewer children a year would have died (United Nations Population Fund, 2006).

It has been found that the education level of mothers and household wealth have an impact on this: the higher the education of mothers and the greater the household income, the higher the child survival rate. This is also true when examining child deaths from measles: the greater the income and education of the mothers, the lower the death rate of children. Almost half a million children died in 2004 of this disease, which can be prevented with a vaccine. Countries that already have high vaccination rates have met their goal, while Oceania, with very low vaccination coverage, is off track. Two-thirds of the world's children who are unvaccinated live in six countries: China, the Democratic Republic of the Congo, India, Indonesia, Nigeria, and Pakistan.

Goal 5: Improve Maternal Health

The target for this goal is to reduce by two-thirds the maternal mortality ratio. Trend data on this are not available, but currently only those regions that already have low mortality rates are believed to be on track to achieve it. One of the things that can help to achieve this target is to have a skilled attendant present during the birth. Some regions have shown remarkable increases in assisted deliveries. For example, southeastern Asia increased its rate from 38% to 68% and northern Africa increased it from 40% to 71%. However, for the regions most in need, there has not been substantial improvement: southern Asia increased it from 30% to 36% and sub-Saharan Africa increased it from 42% to 46%. It has also been found that poor women and women in rural areas are much less likely to have a skilled attendant at the birth. Another factor that has limited the progress toward this goal is the limited availability of contraceptives to those women who desire to limit or space their children.

Goal 6: Combat HIV/AIDS, Malaria, and Other Diseases

The first target under this goal is to halt and begin to reverse the spread of HIV/AIDS by 2015. The progress on this goal is mixed, although there is reason for hope. On the negative side, both the number of new infections and the number of deaths continued to increase in 2006, and no region

is considered on track to meet the goal. However, in the most severely affected region, sub-Saharan Africa, rates of new infections peaked in late 1990s, and the prevalence rate in some countries in the region is declining. Overall, the infection rate appears to be stabilizing, but it is stabilizing at an extremely high level.

The second target under this goal is to halt and begin to reverse the incidence of malaria and other major diseases by 2015. The fight against malaria has rapidly increased in recent years, with funds coming from the Global Fund, the Gates Foundation, and the U.S. Malaria Initiative to purchase and distribute malaria nets. The impact of this will be determined in upcoming years, but currently half of the regions are considered on track to meet the goal. The rate of tuberculosis is also measured under this target: its rate has been increasing overall, with the largest increases in sub-Saharan Africa. Only regions that already have low mortality are considered on track to meet the goal, with sub-Saharan Africa and both regions of the Commonwealth of Independent States considered off track. Tuberculosis is curable with proper treatment but is currently the second deadliest disease, second only to AIDS (Duff-Brown, 2006).

Goal 7: Ensure Environmental Sustainability

The first target under this goal is to integrate the policies of sustainable development into the policies and programs of countries and to reverse the loss of environmental resources. As part of the measurement of this goal, the proportion of land area covered by forests is measured. The progress on this target within regions was mixed: some regions gained ground, others lost ground, and still others remained the same. However, most regions were considered unlikely to achieve their targets; only eastern Asia and the Asian portion of the Commonwealth of Independent States are considered likely to meet it. The largest decrease was in southeastern Asia, which decreased its forested areas from 56% to 47% between 1990 and 2005. On the positive side, the consumption of substances that deplete the ozone layer has decreased by an extraordinary amount, and energy use in most regions has become more efficient, although carbon dioxide emissions continue to rise.

The second target under this goal is to halve the proportion of people without sustainable access to safe drinking water and basic sanitation. Basic sanitation availability increased in the Global South to 50% but is still off track toward meeting the overall target. Four regions are not

expected to reach the target: Oceania, the Commonwealth of Independent States-Asia, southern Asia, and sub-Saharan Africa. Only 37% of people in sub-Saharan Africa have basic sanitation coverage. The overall target for safe drinking water is on track to be met, with 80% of people in the Global South having access as of 2004. However, Oceania, the Commonwealth of Independent States-Asia, and sub-Saharan Africa are expected to miss the target. There are also wide disparities between those in urban and in rural areas in their access to safe drinking water.

The last target under this goal is to achieve a “significant improvement” in the lives of at least 100 million slum-dwellers by 2020. This is an important target because by 2007 the majority of the world’s people will live in urban areas for the first time in the world’s history. In most of the Global South, this urban migration will translate to an increase in the growth of slums; this effect has been seen particularly in sub-Saharan Africa and western Asia. Northern Africa is the only developing region that has seen an increase in the quality of life for urban residents. It and southeastern Asia are the only regions expected to make their targets.

Goal 8: Develop a Global Partnership for Development

This is the only goal that addresses the role that wealthy nations play. There are seven targets under this goal. Two of them include addressing the special needs of the least-developed nations, landlocked countries, and small island developing countries. Global development assistance has been increasing markedly, the majority of it through debt relief. However, only one-third of it has gone to the 50 officially designated “Least Developed Countries.” Particularly in the case of the United States, a larger percentage of development assistance goes to middle-income countries to help achieve foreign policy goals than to poor countries for development (Millennium Campaign, 2006a).

The second target is to further develop a nondiscriminatory trading and financial system. Three-quarters of the exports from countries with developing economies now enter markets duty-free, but the most important exports (clothing and agricultural products) are still heavily taxed. As of 2006, trade talks to reduce the subsidies given by wealthy nations to increase the ability of more impoverished nations to compete in the world market collapsed without an agreement (Millennium Campaign, 2006b).

The next target is to deal comprehensively with the debt of nations in the Global South. Debt payments have fallen substantially for 29 heavily

indebted countries. In 2005, following the attention focused on debt relief by the “Live8” concerts held across the world, the Group of 8 nations agreed to substantial debt relief and debt cancellation to qualifying countries (those who have shown a history of good governance, economic performance, and payments) (One.org, n.d.).

The fourth goal is to develop and implement strategies to increase productive work for young people. Progress on this goal has not yet been achieved; in fact, in most regions unemployment rates have actually risen. Oceania, which has low youth unemployment, is the only region in which the target is expected to be met.

The fifth goal is to provide access to affordable essential medications for the Global South. Access has substantially increased, particularly for medications that treat HIV. This was most notable in sub-Saharan Africa. In addition, prices have decreased and generic equivalents have become more broadly available. However, the goal of reaching 3 million people with the medications by 2005 (known as “3 by 5”) was missed by a broad margin, and currently antiretroviral drugs reach only one in five people globally who need them.

The last goal is to help broaden access to advances in technology, especially information and communication. Access to communication technology has risen rapidly: the number of telephone subscribers, both fixed and cellular telephones, has increased markedly. Access to the Internet continues to be defined by the wealth of a country: less than 1% of those in the 50 least developed countries have access to the Internet. However, most regions are on track to meet this target, with only the progress of sub-Saharan Africa and southern Asia in doubt.

Criticism of the Goals

The goals have not been universally accepted as a positive innovation. It is extremely unlikely that all nations will be able to achieve the goals by the target date of 2015. Some countries will miss their targets by a small margin, while other are struggling even to maintain what progress had been made. Under these conditions, some have wondered whether the goals are simply a set-up for failure. The UN has argued that they are not, and that even if the goals are not achieved, it is beneficial to have them. Having a target to work toward helps encourage progress as well as providing a benchmark of progress (UNDP, 2003). UNDP states that while

in the past some development goals have not been met, others have been extremely successful—for example, the vaccination of children and the eradication of smallpox.

Other criticism has come from women's groups, objecting to the exclusion of targets addressing issues that particularly affect women, such as gender-based violence, reproductive health care, and equal access to paid employment. Previous UN documents have placed the concerns of women at the forefront. The Cairo Programme made access to reproductive health services a top priority, and gender equality was seen as central to development at the 1995 Summit on Social Development (Barton, 2005). Ignoring these previous agreements in creating the goals was seen as evidence of gender bias. For example, the agreement from Cairo set a goal of ensuring universal access to sexual and reproductive health care for all by 2015. While this would seem to be an important indicator for Goal Five, reducing maternal mortality, it is not tracked as such.

The only goal that explicitly focuses on women's progress is Goal Three, which aims to eliminate gender disparity in education. While this is an important step toward equality, it is not sufficient in itself. For example, in Central America, there is gender parity in education, but there is still wide disparity in wealth and power (Hayes, 2005; Johnson, 2005). On the other hand, women's share of paid employment and representation in the government is tracked in the indicators for this goal, indicating that it has not been completely forgotten. Additionally, women on the task forces that seek to implement the goals are working to incorporate gender perspectives in their work (Barton, 2005).

The goals also focus more on efforts by the Global South as opposed to the Global North. The first seven goals, as discussed, focus on work to be done by the Global South. This would appear to relieve the Global North of the responsibility for relieving poverty, ensuring environmental sustainability, and so forth within their own nations. There is also no accountability for the Global North if they do not fulfill their part of the bargain (Barton, 2005). As discussed, the United States has no plans to increase its foreign aid to the promised level, nor to redirect it toward the poorest nations most in need of the assistance. Additionally, as mentioned in the discussion of Goal Eight, there has been little effort to address youth unemployment in the Global South, yet this has been a factor linked to the growth of terrorism and thus would seem to be of major importance to the wealthier nations (Fowler, 2004; Lacqueur, 2004).

Future of the Millennium Development Goals

People from around the world are using the Millennium Development Goals to help chart a path to a future in which people have equal access to choices about their lives. Some of these projects are focused on a specific goal, such as increasing access to HIV medications, while others are taking a more systematic, developmental approach. Jeffery Sachs, a leading economist currently at the Earth Institute at Columbia University, has developed a scheme called Millennium Development Villages (Earth Institute, n.d.). Villages in countries across sub-Saharan Africa have been selected for intensive intervention to help them escape extreme poverty. The first projects were in Kenya, Ethiopia, and Tanzania; it is hoped that within 5 years the villagers will be able to live in environmentally sustainable ways. These projects are expected to spread; type 1 villages are the focus of intensive interventions, while type 2 villages are neighbors to type 1 villages, and it is expected that the knowledge and benefits from the interventions will spread, thus exponentially increasing the number of beneficiaries. Type 3 villages will replicate the results from villages of types 1 and 2.

To achieve this, Earth Institute scientists and development experts in a variety of fields, including agriculture, nutrition and health, economics, water, and environment work, with the villagers to help them pull themselves out of poverty. The projects are based on ideas of community empowerment, sustainable development, and high participation of the intervention community. Beneficiaries are expected to pay part of the costs, which can include cash or in-kind contributions, in order to increase sustainability and community participation. The village must agree as a whole to participate and the needs assessment is carried out in full cooperation with the village in make sure the interventions are meeting their needs in a culturally appropriate manner. Local residents are typically trained in areas such as improved agriculture, health care, and improving infrastructure.

Examining the results 1 year later, the projects are going well. For many villagers, it was the first time they had learned about better farming methods. The village in Kenya (Sauri) had a record harvest and donated part of it to the local school for the school feeding program. The food children are given at school has helped to boost the test scores of the

children from 198th out of 354 schools to 7th. Malaria nets have been distributed, and no one has had malaria in a year. While not all villagers have had outstanding success, as a whole the project appears on track.

Whether one regards the Millennium Development Goals as a road map to global equity or a set-up for failure, their existence has helped to chart the progress toward the improvement of people's lives as well as serving as a focal point for intervention projects. Social workers have an ethical responsibility to help achieve this vision. According to Jeffrey Sachs, every year that slides by without intervention has a cost of 10 million lives; no one can afford to wait to help (Nolen, 2006).

What Can I Do Now?

- Wear a white band from one.org to show your support for the eradication of global poverty.
- Contact your representatives in Washington to tell them you support the Millennium Development Goals and an increase of development aid to 0.7%
- Get involved with the Millennium Campaign (www.millenniumcampaign.org) as it works to help make the goals a reality.

What Can I Do as a Professional Social Worker?

- Work with a project such as the Millennium Villages to help include local communities in their rise from poverty.
- Any of the suggestions from previous chapters will help achieve the goals as well.

World Wide Web Resources

Center for Social Development (gwbweb.wustl.edu/csd): This center at the George Warren Brown School of Social Work takes a global approach to working from an asset-building approach as opposed to a deficit model.

Millennium Campaign (www.millenniumcampaign.org): Coordinated by the UNDP. This site "informs, inspires and encourages people's involvement and action for the realization of the Millennium Development Goals. An initiative of the United Nations, the Campaign supports citizens' efforts to hold their government to account for the Millennium promise."

Millennium Villages Project (www.earthinstitute.columbia.edu/mvp): The main site for this project at the Earth Institute at Columbia University.

One.org (www.one.org): The American branch of the project to make global poverty and AIDS history.

Social Watch Indicator Map (www.socialwatch.org/en/indicadoresDesarrollo/flash_content/index.html?lan=en&ind=A4): Provides information by country on progress towards the Millennium Development Goals.

United Nations Development Programme (www.undp.org/mdg): Provides background information as well as current information on the Millennium Goals.

United Nations Millennium Development Indicators (unstats.un.org/unsd/mi/mi_worldmillennium_new.asp): Provides information by region and by country on progress toward each of the goals.

United Nations Millennium Project (www.unmillenniumproject.org): The Millennium Project's goal is to develop a concrete plan to realize the Millennium Goals. This site offers information about the goals and plans to achieve them.

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9

A Call to Action

Never doubt that a small group of thoughtful, committed people can change the world. Indeed, it is the only thing that ever has.

—Margaret Mead

This text has focused on issues as they occur in the Global South to help those living in the Global North to understand how these issues can be both similar to and different from what occurs in their own nations. The enormity of these issues and the distance between the nations often provoke the response that an individual cannot help solve these problems. However, at the end of each chapter discussing an issue, there was a list of actions that a student could take right now to help create change, as well as what he or she could do professionally.

Homan (2004) discusses factors that can prevent someone from taking action to create macro level change. Examples include “it’s so large and I’m only one person,” “I really don’t know enough about the situation,” and “I really don’t know what to do.” While it is true that a single person cannot solve all the problems of the world, people gathered together to create change can be extraordinarily effective. As systems theory teaches us, a system is greater than the sum of its subsystems. As the introductory quote by Margaret Mead illustrates, this is precisely the power of change that is needed to make a difference in the issues discussed in this text.

We currently see a dramatic rise in awareness of issues related to international social work and social development within the United States. The Council on Social Work Education (CSWE), the accrediting body for social work programs in the United States, has established the Katherine A. Kendall Institute to increase international content in social work education (CSWE, 2007). Katherine Kendall is one of the social workers in the United States who have helped to bring these issues to the forefront of

academia and raise our awareness. Dr. Kendall was one of the founders of CSWE and was the first salaried Secretary-General for the International Association of Schools of Social Work.

Other social work academics, such as Lynne Healy, M. C. Hokenstad, Karen Lyons, and James Midgely, have written books and articles to help broaden knowledge and awareness of social work and social work issues around the world. A growing number of Masters in Social Work programs are offering international social work concentrations and international placements. On both the bachelor's and master's level, there is an increasing amount of integration of international material in classes across the curriculum, as well as classes focusing specifically on international social work and social development. For those who are interested in global issues, there has never been a better time to be able to step forward and make a contribution.

As discussed in the preface of this book, international issues affect not only social workers practicing outside of the Global North, but also those within the Global North countries. The increasing global migration, both voluntary and forced, brings these issues to those working with the countries of the Global North. Whether it is helping a child refugee adjust to her new country, assisting a woman who has been trafficked for sexual purposes, or working with an undocumented worker who is being abused, international issues touch all social workers. Therefore, to uphold the core value of social work of practicing with competence, social workers must be educated about these issues that touch all of our lives on a growing basis.

Just as we saw social work develop as a profession at the end of the 19th century largely in response to immigration, so today we see a new era of social work developing due to this new wave of migration. The effects of technology make our interconnections with those around the world clearer than ever. The importance of understanding social work issues from a global context is important even for those who will never leave our hometown. The international has now come to us, whether we are prepared or not. To practice ethical social work, therefore, we must be prepared to help effect change.

In working to create solutions to these problems, the suggestions at the end of each chapter offer ideas that are "do-able" for students as well as potential career paths. However, the ideas should not be viewed as the only ways to make a difference; they are simply ways to get started. The role that social workers can play in creating a more equitable world is an

important one. Social workers offer vital, unique skills that can be used toward this goal. Diaz, Mama, and Lopez (2006) and Van Soest and Crosby (1997) note the following skills that social workers can offer in the international arena:

- Social worker's skills are portable to any area or level of practice. Social workers are trained to consider a problem at the micro, mezzo, and macro levels.
- Social workers are task-oriented and know how to develop and implement solutions in full partnership with the client.
- Social workers understand the role of culture.
- Social workers can analyze a situation and use all variables to effect change (problem-solving skills).
- Social workers have the ability to bring the human element to planning, policy, and service development. They understand the connection between a client's well-being and the political, economic, and social context in which he or she lives.
- Social workers have the training to bring all the actors and elements together to develop strategies and plans and implement programs (coordination).
- The principles of social work mirror those of social development, including empowerment of the client (having the client define his or her own needs and develop his or her own solutions).

Social work clearly has much to offer as social issues around the globe grow in importance. Social workers of all levels, whether experienced practitioners or first-year BSW students, can help to create positive change. Operating from a human rights standpoint and advancing social justice, we can "promote social change and problem-solving in human relationships and the empowerment and liberation of people to enhance well-being," as specified in the International Federation of Social Workers definition of social work (International Federation of Social Workers, 2000, ¶1).

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Appendix A: Universal Declaration of Human Rights

PREAMBLE

Whereas recognition of the inherent dignity and of the equal and inalienable rights of all members of the human family is the foundation of freedom, justice and peace in the world,

Whereas disregard and contempt for human rights have resulted in barbarous acts which have outraged the conscience of mankind, and the advent of a world in which human beings shall enjoy freedom of speech and belief and freedom from fear and want has been proclaimed as the highest aspiration of the common people,

Whereas it is essential, if man is not to be compelled to have recourse, as a last resort, to rebellion against tyranny and oppression, that human rights should be protected by the rule of law,

Whereas it is essential to promote the development of friendly relations between nations,

Whereas the peoples of the United Nations have in the Charter reaffirmed their faith in fundamental human rights, in the dignity and worth of the human person and in the equal rights of men and women and have determined to promote social progress and better standards of life in larger freedom,

Whereas Member States have pledged themselves to achieve, in cooperation with the United Nations, the promotion of universal respect for and observance of human rights and fundamental freedoms,

Whereas a common understanding of these rights and freedoms is of the greatest importance for the full realization of this pledge,

Now, therefore,

The General Assembly,

Proclaims this Universal Declaration of Human Rights as a common standard of achievement for all peoples and all nations, to the end that every individual and every organ of society, keeping this Declaration constantly in mind, shall strive by teaching and education to promote respect for these rights and freedoms and by progressive measures, national and international, to secure their universal and effective recognition and observance, both among the peoples of Member States themselves and among the peoples of territories under their jurisdiction.

ARTICLE 1

All human beings are born free and equal in dignity and rights. They are endowed with reason and conscience and should act towards one another in a spirit of brotherhood.

ARTICLE 2

Everyone is entitled to all the rights and freedoms set forth in this Declaration, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.

Furthermore, no distinction shall be made on the basis of the political, jurisdictional or international status of the country or territory to which a person belongs, whether it be independent, trust, non-self-governing or under any other limitation of sovereignty.

ARTICLE 3

Everyone has the right to life, liberty and security of person.

ARTICLE 4

No one shall be held in slavery or servitude; slavery and the slave trade shall be prohibited in all their forms.

ARTICLE 5

No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment.

ARTICLE 6

Everyone has the right to recognition everywhere as a person before the law.

ARTICLE 7

All are equal before the law and are entitled without any discrimination to equal protection of the law. All are entitled to equal protection against any discrimination in violation of this Declaration and against any incitement to such discrimination.

ARTICLE 8

Everyone has the right to an effective remedy by the competent national tribunals for acts violating the fundamental rights granted him by the constitution or by law.

ARTICLE 9

No one shall be subjected to arbitrary arrest, detention or exile.

ARTICLE 10

Everyone is entitled in full equality to a fair and public hearing by an independent and impartial tribunal, in the determination of his rights and obligations and of any criminal charge against him.

ARTICLE 11

1. Everyone charged with a penal offence has the right to be presumed innocent until proved guilty according to law in a public trial at which he has had all the guarantees necessary for his defence.
2. No one shall be held guilty of any penal offence on account of any act or omission which did not constitute a penal offence, under national or international law, at the time when it was committed. Nor shall a heavier penalty be imposed than the one that was applicable at the time the penal offence was committed.

ARTICLE 12

No one shall be subjected to arbitrary interference with his privacy, family, home or correspondence, nor to attacks upon his honour and reputation. Everyone has the right to the protection of the law against such interference or attacks.

ARTICLE 13

1. Everyone has the right to freedom of movement and residence within the borders of each State.
2. Everyone has the right to leave any country, including his own, and to return to his country.

ARTICLE 14

1. Everyone has the right to seek and to enjoy in other countries asylum from persecution.
2. This right may not be invoked in the case of prosecutions genuinely arising from non-political crimes or from acts contrary to the purposes and principles of the United Nations.

ARTICLE 15

1. Everyone has the right to a nationality.
2. No one shall be arbitrarily deprived of his nationality nor denied the right to change his nationality.

ARTICLE 16

1. Men and women of full age, without any limitation due to race, nationality or religion, have the right to marry and to found a family. They are entitled to equal rights as to marriage, during marriage and at its dissolution.
2. Marriage shall be entered into only with the free and full consent of the intending spouses.
3. The family is the natural and fundamental group unit of society and is entitled to protection by society and the State.

ARTICLE 17

1. Everyone has the right to own property alone as well as in association with others.
2. No one shall be arbitrarily deprived of his property.

ARTICLE 18

Everyone has the right to freedom of thought, conscience and religion; this right includes freedom to change his religion or belief, and freedom,

either alone or in community with others and in public or private, to manifest his religion or belief in teaching, practice, worship and observance.

ARTICLE 19

Everyone has the right to freedom of opinion and expression; this right includes freedom to hold opinions without interference and to seek, receive and impart information and ideas through any media and regardless of frontiers.

ARTICLE 20

1. Everyone has the right to freedom of peaceful assembly and association.
2. No one may be compelled to belong to an association.

ARTICLE 21

1. Everyone has the right to take part in the government of his country, directly or through freely chosen representatives.
2. Everyone has the right to equal access to public service in his country.
3. The will of the people shall be the basis of the authority of government; this will be expressed in periodic and genuine elections which shall be by universal and equal suffrage and shall be held by secret vote or by equivalent free voting procedures.

ARTICLE 22

Everyone, as a member of society, has the right to social security and is entitled to realization, through national effort and international co-operation and in accordance with the organization and resources of each State, of the economic, social and cultural rights indispensable for his dignity and the free development of his personality.

ARTICLE 23

1. Everyone has the right to work, to free choice of employment, to just and favourable conditions of work and to protection against unemployment.
2. Everyone, without any discrimination, has the right to equal pay for equal work.
3. Everyone who works has the right to just and favourable remuneration ensuring for himself and his family an existence worthy of human dignity, and supplemented, if necessary, by other means of social protection.
4. Everyone has the right to form and to join trade unions for the protection of his interests.

ARTICLE 24

Everyone has the right to rest and leisure, including reasonable limitation of working hours and periodic holidays with pay.

ARTICLE 25

1. Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.
2. Motherhood and childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection.

ARTICLE 26

1. Everyone has the right to education. Education shall be free, at least in the elementary and fundamental stages. Elementary education shall be compulsory. Technical and professional

- education shall be made generally available and higher education shall be equally accessible to all on the basis of merit.
2. Education shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms. It shall promote understanding, tolerance and friendship among all nations, racial or religious groups, and shall further the activities of the United Nations for the maintenance of peace.
 3. Parents have a prior right to choose the kind of education that shall be given to their children.

ARTICLE 27

1. Everyone has the right freely to participate in the cultural life of the community, to enjoy the arts and to share in scientific advancement and its benefits.
2. Everyone has the right to the protection of the moral and material interests resulting from any scientific, literary or artistic production of which he is the author.

ARTICLE 28

Everyone is entitled to a social and international order in which the rights and freedoms set forth in this Declaration can be fully realized.

ARTICLE 29

1. Everyone has duties to the community in which alone the free and full development of his personality is possible.
2. In the exercise of his rights and freedoms, everyone shall be subject only to such limitations as are determined by law solely for the purpose of securing due recognition and respect for the rights and freedoms of others and of meeting the just requirements of morality, public order and the general welfare in a democratic society.

3. These rights and freedoms may in no case be exercised contrary to the purposes and principles of the United Nations.

ARTICLE 30

Nothing in this Declaration may be interpreted as implying for any State, group or person any right to engage in any activity or to perform any act aimed at the destruction of any of the rights and freedoms set forth herein.

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Appendix B: Opportunities in International Social Work

JOBS

AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH

<http://www.aei.org>

The American Enterprise Institute for Public Policy Research (AEI) is a nonprofit institute focused on research and education on issues of government, politics, economics, and social welfare. AEI works to defend the principles and improve the institutions of American freedom and democratic capitalism. AEI offers research and staff assistant positions in economic policy studies, foreign and defense policy studies, and social and political studies. Openings are posted as they become available.

AMERICAN FRIENDS SERVICE COMMITTEE

<http://www.afcs.org>

The American Friends Service Committee (AFSC) is an organization based on the expression of the faith of the Religious Society of Friends (Quakers). The AFSC stands committed to the principles of nonviolence and justice and works to draw on the transforming power of human and divine love. AFSC regularly posts available positions on its Web site.

AMERICAN REFUGEE COMMITTEE

<http://www.arcrelief.org>

The American Refugee Committee (ARC) works with refugees, displaced persons, and those at risk of being displaced to help them survive

crises and rebuild lives of dignity, health, security, and self-sufficiency. Employment opportunities may be searched according to geographic location, as ARC works throughout the world. Positions are posted as they become available.

BERESFORD BLAKE THOMAS

<http://www.bbtworldwide.com>

Beresford Blake Thomas serves as a recruiting consultancy, providing both temporary and permanent staff members to organizations across the globe. Candidates in health and social care may search for jobs based on country, location, and specialization. Beresford Blake Thomas also provides job placement assistance, including consultations regarding placement options, career direction, and procurement of necessary documentation.

BIENESTAR HUMAN SERVICES, INC.

<http://www.bienestar.org>

Bienestar is a grassroots nonprofit organization dedicated to enhancing the health and well-being of the Latino community and other underserved communities.

CARE

<http://www.care.org>

CARE is an international organization dedicated to eradicating global poverty. Specializing in working with impoverished women, CARE strives to improve basic education, prevent the spread of HIV, increase access to clean water and sanitation, protect natural resources, and expand economic opportunity. Information about short-term, part-time, and full-term positions can be accessed through the Web site. Regions include Africa, Asia, Europe, and the United States.

COOPERATIVE HOUSING FOUNDATION

<http://www.chfinternational.org>

The Cooperative Housing Foundation (CHF) is an organization dedicated to being a catalyst for sustainable positive change in low- and moderate-income communities around the world. CHF strives to help these communities improve their economic, social, and environmental conditions. CHF offers consultancy positions, as well as employment both at headquarters and in the field. Openings are posted along with descriptions as they become available.

COUNCIL ON FOREIGN RELATIONS

<http://www.cfr.org>

The Council on Foreign Relations is a national membership organization and scholarly center that is dedicated to the production and dissemination of ideas that allow for a better understanding of the world and foreign policy choices facing both the United States and other governments. The Council on Foreign Relations offers positions in both the New York and Washington DC offices. Available positions and descriptions are posted as openings arise.

DOCTORS WITHOUT BORDERS/MÉDECINS SANS FRONTIÈRES

<http://www.dwb.org>

<http://www.msf.org>

Doctors Without Borders/Médecins Sans Frontières (MSF) is an independent and international medically based humanitarian organization that delivers emergency aid to global citizens adversely affected by armed conflict, epidemics, natural or manmade disasters, or poor health care in more than 70 countries throughout the world.

Available positions are updated regularly.

FOREIGN POLICY ASSOCIATION

<http://www.fpa.org>

The Foreign Policy Association (FPA) is a nonprofit organization that is committed to inspiring the American public to educate themselves about the world. FPA offers independent publications as well as programs and forums that increase public awareness of and encourage participation in matters relating to policy issues. FPA offers a job board database; available positions may be located by category. Open positions may be with a variety of FPA's affiliate organizations.

GRASSROOTS INTERNATIONAL

<http://www.grassrootsonline.org>

Grassroots International is an organization that works to promote global justice through its partnerships with social change organizations. Through these partnerships, Grassroots International strives to advance political, economic, and social rights and support development alternatives in developing nations. Programs include grant-making, education, and advocacy. Positions are available at the Boston headquarters and are posted as they become available.

INTERNATIONAL JUSTICE MISSION

<http://www.ijm.org>

International Justice Mission is a human rights agency that rescues victims of violence, sexual exploitation, slavery, and oppression. It is based in the United States and has agencies around the world.

INTERNATIONAL MEDICAL CORPS

<http://www.imcworldwide.org>

The International Medical Corps (IMC) is a nonprofit organization that works to save lives and relieve suffering through health care training and relief and development programs. IMC offers training and health care to high-risk populations and rehabilitates health care systems. A variety of positions are available; positions are posted regularly.

INTERNATIONAL RESCUE COMMITTEE

<http://www.theirc.org>

The IRC works around the globe to deliver lifesaving aid in emergencies, rebuild shattered communities, and provide other social services. For refugees afforded sanctuary in the United States, IRC offices across the country provide a range of assistance to help new arrivals get settled and acquire the skills to become self-sufficient.

MENNONITE CENTRAL COMMITTEE, SERVICE TREE

<http://www.mcc.org>

The Mennonite Central Committee endeavors to demonstrate God's love through working with those suffering from poverty, conflict, oppression, and natural disaster. MCC maintains a goal of establishing peace, justice, and dignity for all people by sharing experiences, resources, and faith in Jesus Christ. The Service Tree portion of MCC's Web site provides an area for international service workers. Available positions are sorted into sectors and updated as they become available.

OXFAM AMERICA

<http://www.oxfamamerica.org>

<http://www.oxfam.org>

Oxfam aims to end global poverty through saving lives, strengthening communities, and campaigning for change. Positions are available both in the United States and in regional offices throughout the world. Additionally, Oxfam allows partner organizations to post available positions on the Web site.

STRATEGIC ACTIONS FOR A JUST ECONOMY

<http://www.saje.org>

Strategic Actions for a Just Economy is an economic justice and education center that works to build economic power for working-class people in Los Angeles. SAJE posts available employment opportunities on a regular basis.

WORLD VISION

<http://www.worldvision.org>

World Vision is a Christian relief and development organization dedicated to eliminating the causes of poverty and helping children and their communities worldwide. Both domestic and international positions are available.

INTERNSHIPS

ACADEMY FOR EDUCATIONAL DEVELOPMENT

<http://www.aed.org>

The Academy for Educational Development (AED) is a nonprofit organization dedicated to finding solutions to critical programs and building the capacity of individuals, communities, and institutions to become more self-sufficient. While AED works in all major areas of human development, it maintains a focus on improving education, health, and economic opportunities for the least advantaged individuals around the world. AED offers both paid and unpaid internships. Interns participate in research and writing, coordination of itineraries and meeting schedules, and proposal preparation and production.

AFRICA ACTION

<http://www.africaaction.org>

Africa Action is the oldest organization working on African affairs in the United States. Africa Action works alongside activists and civil society organizations in the United States and Africa to change U.S. foreign policy and the policies of international institutions. Africa Action offers internships throughout the academic year and during the summer. Interns focus on campaigns to end HIV/AIDS in Africa, cancel Africa's debt, and stop genocide in Darfur, Sudan.

AMERICA-MIDEAST EDUCATIONAL AND TRAINING SERVICES, INC.

<http://www.amideast.org>

America-Mideast Educational and Training Services, Inc. (AMIDEAST) is a nonprofit organization dedicated to strengthening mutual understanding and cooperation between citizens of the United States, Middle East, and North Africa. AMIDEAST offers English language and professional skills training, educational advising, and testing services to individuals throughout the Middle East and North Africa. AMIDEAST offers internships based on the needs of the organization, generally a total of four to six positions yearly.

AMERICAN ENTERPRISE INSTITUTE FOR PUBLIC POLICY RESEARCH

<http://www.aei.org>

The American Enterprise Institute for Public Policy Research (AEI) is a nonprofit institute focused on research and education on issues of government, politics, economics, and social welfare. AEI works to defend the principles and improve the institutions of American freedom and democratic capitalism. AEI offers approximately 50 internship positions throughout the fall, spring, and summer in the Washington, DC office.

AMERICAN FRIENDS SERVICE COMMITTEE

<http://www.afcs.org>

The American Friends Service Committee (AFSC) is an organization based on the expression of the faith of the Religious Society of Friends (Quakers). The AFSC stands committed to the principles of nonviolence and justice and works to draw on the transforming power of human and divine love. AFSC offers internships to high school and college students at offices across the nation. Positions are posted as they become available.

ATLANTIC COUNCIL OF THE UNITED STATES

<http://www.acus.org>

The Atlantic Council of the United States works to promote constructive leadership and engagement in international affairs in the United States based on the central role of the Atlantic community in meeting global challenges in a modern world. The Council comprises a network of leaders who strive to bring ideas to power and give power to ideas. The Council offers the John A. Baker internship program, providing 10 to

15 volunteer positions during the fall, spring, and summer. John A. Baker interns assist with Council projects, attend briefings and seminars, and complete independent research projects.

BREAD FOR THE WORLD

<http://www.bread.org>

Bread for the World is a national Christian movement that lobbies the nation's decision-makers, seeking justice for hungry people around the world. Bread for the World offers internships in the fall, spring, and summer in the Washington DC office. Interns are matched to specific jobs based on background, skills, interests, and the needs of the organization.

CARE

<http://www.care.org>

CARE is an international organization dedicated to eradicating global poverty. Specializing in working with impoverished women, CARE strives to improve basic education, prevent the spread of HIV, increase access to clean water and sanitation, protect natural resources, and expand economic opportunity. Available internships can be accessed through the Web site. Regions include Africa, Asia, Europe, and the United States.

THE CARTER CENTER

<http://www.cartercenter.org>

The Carter Center is an organization working in partnership with Emory University that, guided by its commitment to human rights and the alleviation of human suffering, seeks to prevent and resolve conflicts, enhance freedom and democracy, and improve health. The Carter Center offers internship positions to college juniors, seniors, recent graduates, or graduate students. Interns are involved in a wide range of duties focusing on issues addressed by their particular program but may also be involved in office administration or other issues that span across programs.

CENTER FOR STRATEGIC AND INTERNATIONAL STUDIES

<http://www.csis.org>

The Center for Strategic and International Studies (CSIS) is a nonprofit organization that seeks to advance global security and prosperity by offering insights and policy solutions to decision-makers. CSIS conducts research and analysis and develops policy initiatives for the U.S. government. CSIS offers both full- and part-time internships in the fall, spring,

and summer. Interns participate in a variety of activities that support individual programs.

CHRISTIAN REFORMED WORLD RELIEF COMMITTEE

<http://www.crwrc.org>

The Christian Reformed World Relief Committee (CRWRC) is a relief, development, and educational ministry of the Christian Reformed Church in North America. As a ministry, CRWRC partners with local agencies throughout the world that understand the local needs, then works with these partners to provide lasting change. CRWRC offers Program Hope!, a 30-month internship program in which individuals work in community-level projects in a variety of areas, including agriculture, income generation, health, and education. Interns may also have the opportunity to train leaders of local churches in need. Interns receive a small stipend each month, training, insurance, transportation, and field supervision.

COMMISSION ON SECURITY AND COOPERATION IN EUROPE

<http://www.csce.gov>

The Commission on Security and Cooperation in Europe (CSCE), also known as the Helsinki Commission, is an independent government agency that monitors and encourages compliance with the Helsinki Final Act, as well as other commitments. CSCE offers the Helsinki Commission Internship, a program that allows students to research Helsinki Final Act-relation issues regarding human rights, religious liberties, corruption and rule of law, and free media. Additionally, interns assist staff advisors and the communications director, compile press clippings, communicate with the House and Senate regarding pending foreign policy initiatives, and conduct office duties. Internships last for one academic semester.

COUNCIL ON FOREIGN RELATIONS

<http://www.cfr.org>

The Council on Foreign Relations is an organization and nonpartisan center for scholars that is committed to producing and disseminating ideas that will better allow members, policymakers, journalists, students, and U.S. and world citizens to understand the foreign policy choices facing the United States and other governments. The Council on Foreign Relations offers fall, spring, and summer internships at both the New York and Washington DC offices. Internships available at each location are posted as openings arise.

COUNCIL OF THE AMERICAS

<http://www.americas-society.org>

The Council of the Americas is a business organization composed of members who share a common commitment to free trade and open markets throughout the Americas. The Council of the Americas' programs and advocacy aim to educate, encourage, and promote free trade and integrated markets for the benefit of the member companies, as well as companies throughout the Americas. The Council of the Americas offers internships at its New York and Washington DC locations. Positions are posted as they become available.

DEVELOPMENT ASSOCIATES

<http://www.devassoc.com>

Development Associates is a firm specializing in economic and social development programs both in the United States and overseas. Development Associates provides nations around the world with counsel, technical assistance, training, and management services that help them to achieve results. Development Associates offers internships year round. Potential topics are posted on the firm's Web site.

DOCTORS WITHOUT BORDERS/MÉDECINS SANS FRONTIÈRES

<http://www.dwb.org>

<http://www.msf.org>

Doctors Without Borders/Médecins Sans Frontières (MSF) is an independent and international medically based humanitarian organization that delivers emergency aid to global citizens adversely affected by armed conflict, epidemics, natural or manmade disasters, or poor health care in more than 70 countries throughout the world. Interns with DWB/MSF obtain experience in development, human resources, communication, executive, or program departments, in addition to a valuable basic introduction to the field of international medical humanitarian aid and advocacy. Terms are available in the fall, spring, and summer and take place in the New York office. All internships are unpaid, but work-study funds and course credit may be provided to qualifying students.

ETHIOPIAN COMMUNITY DEVELOPMENT COUNCIL, INC.

<http://www.ecdcinternational.org>

Ethiopian Community Development Council, Inc. (ECDC) is an organization that works to resettle refugees, promote educational, cultural,

and socioeconomic development in the refugee and immigrant populations in the United States, and carry out humanitarian and development programs in the Horn of Africa.

FELLOWSHIP OF RECONCILIATION

<http://www.forusa.org>

The Fellowship of Reconciliation (FOR) is an international, interfaith movement with branches and groups in over 40 nations. FOR works to replace violence, war, racism, and economic injustice with nonviolence, peace, and economic justice. To achieve these goals, FOR educates, trains, builds coalitions, and engages in nonviolent and compassionate actions on a local, national, and global front. FOR offers the Freeman Peace Internships. Freeman interns commit to an 11-month position during which they will receive a monthly stipend, medical insurance, housing, 4 weeks of vacation, experienced mentors, and expanding opportunities.

FOOD FOR THE HUNGRY

<http://www.fh.org>

Food for the Hungry is an international relief and development organization striving to meet the physical and spiritual needs of those in need in more than 45 nations. Food for the Hungry works alongside churches, leaders, and families to bring forth the resources needed to help communities become self-sufficient and self-sustaining. Food for the Hungry offers internships in the fall, spring, summer, and entire academic year in Washington DC, Phoenix, and abroad. Interns receive training and coaching, mentorship, community interaction, and a placement based on personal interest and talents.

FOUNDATION FOR SUSTAINABLE DEVELOPMENT

<http://www.fsdinternational.org>

The Foundation for Sustainable Development (FSD) supports grassroots development organizations that are working to better their communities, environments, and the economic opportunities around them. FSD upholds the philosophy that economic development begins with community development and is sustainable only if it comes from and is continually supported by the members of those communities. FSD also works to raise awareness about international issues. FSD offers both summer and long-term international internships. Interns may work in health, human rights, education, women's issues, environmental issues, microfinance, community development, or other areas.

FREEDOM HOUSE

<http://www.freedomhouse.org>

Freedom House is an NGO that works to support the expansion of freedom throughout the world. By supporting nonviolent civic initiatives around the world, Freedom House acts as a catalyst for freedom, democracy, and the rule of law. Freedom House accepts volunteers through its American Volunteers for International Development (AVID) program. This program identifies, mobilizes, and sponsors American professionals who will then work in conjunction with counterparts in emerging democracies. Volunteers receive basic living expenses, roundtrip air transportation, and medical evacuation insurance.

GLOBAL EXCHANGE

<http://www.globalexchange.org>

Global Exchange is a membership-based human rights organization working to promote social, economic, and environmental justice around the world. Global Exchange is dedicated to increasing public awareness of the root causes of injustice while establishing international partnerships and mobilizing for change. Global Exchange offers structured internships in the summer, with more informal positions in the fall, winter, and spring. Interns work in the San Francisco office on campaigns and programs and are expected to bring some knowledge and experience to the position.

GLOBAL SERVICE CORPS

<http://www.globalservicecorps.org>

The Global Service Corps is an international nonprofit volunteer organization that provides service-learning opportunities to live and work in Thailand and Tanzania. Programs include HIV/AIDS prevention, sustainable agriculture, health care, English instruction, Buddhist immersion, and the Seeds of Sustenance Fellowship. Global Service Corps offers internships for a period of 9 weeks throughout the year.

GRASSROOTS INTERNATIONAL

<http://www.grassrootsonline.org>

Grassroots International is an organization that works to promote global justice through its partnerships with social change organizations. Through these partnerships, Grassroots International strives to

advance political, economic, and social rights and support development alternatives in developing nations. Programs include grant-making, education, and advocacy. Grassroots International offers internships at its Boston office. Interns must commit to at least 10 hours of service per week, and a two-semester commitment is preferred.

HUDSON INSTITUTE

<http://www.hudson.org>

The Hudson Institute is a nonpartisan policy research organization that is dedicated to innovative research and analysis that promotes global security, prosperity, and freedom. The Hudson Institute works to challenge convention thinking and manage strategic transitions to the future through interdisciplinary and collaborative studies. The Hudson Institute offers internships in its Washington DC office, working in areas such as campaign reform, economic and employment policy, Middle East studies, philanthropy and civic renewal, national security studies, and science in public policy.

INSTITUTE FOR POLICY STUDIES

<http://www.ips-dc.org>

The Institute for Policy Studies uses independent research, visionary thinking, and links to the grassroots, scholars, and elected officials to strengthen social movements. IPS's projects are divided into three clusters: democracy and fairness, global justice, and peace and security. IPS accepts interns into a variety of their ongoing projects. Details regarding the positions and contact information are posted regularly.

INTERNATIONAL CENTER FOR RESEARCH ON WOMEN

<http://www.icrw.org>

The International Center for Research on Women is a private, non-profit organization that is dedicated to improving the lives of women living in poverty, as well as advancing equality and human rights and contributing to broader economic and social well-being. To achieve these goals, ICRW works in partnership with other agencies to research and to build capacity and advocacy on issues affecting women's economic, health, and social status in low- and middle-income nations. ICRW accepts interns into the Sally Yudelman Internship program each summer in the Washington DC office.

INTERNATIONAL INSTITUTE

<http://www.intlinst.org>

The International Institute is a nonprofit agency and United Way member that works to assist refugees and immigrants into independence by providing English lessons, finding employment, and providing adjustment services. The International Institute offers internships in a variety of different sections/departments, including education, employment, health/mental health, individual development accounts, micro-enterprise, senior VP for individuals and families, and social services.

INTERNATIONAL JUSTICE MISSION

<http://www.ijm.org>

International Justice Mission is a human rights agency that rescues victims of violence, sexual exploitation, slavery, and oppression. It is based in the United States and has agencies around the world.

INTERNATIONAL RESCUE COMMITTEE

<http://www.theirc.org>

The IRC works around the globe to deliver lifesaving aid in emergencies, rebuild shattered communities, and provide other social services. For refugees afforded sanctuary in the United States, IRC offices across the country provide a range of assistance aimed to help new arrivals get settled and acquire the skills to become self-sufficient.

LIFELONG EDUCATION ALTERNATIVES AND PROGRAMS NOW

<http://www.leapnow.org>

Lifelong Education Alternatives and Programs Now (LEAP Now) specializes in alternative education programs in the United States and abroad. LEAP Now offers 3-month and longer internships around the world. Internships are available in arts and crafts, schools and teaching, social service, environment and ecology, animals, outdoor work, and more. Positions, along with details, are posted as they become available.

MADRE

<http://www.madre.org>

MADRE is an international women's human rights organization that works in conjunction with community-based women's organization across the globe to confront the issues of health and reproductive rights, economic development, education, and other human rights. MADRE

provides these organizations with resources, training, and support to ensure that they will be able to meet the concrete needs of their communities while striving to shift the balance of power to encourage long-term development and social justice. Internships are available at the New York City office in the fall, spring, and summer. Interns receive a small daily stipend and must be available for at least 2 to 3 months.

OXFAM

<http://www.oxfamamerica.org>

<http://www.oxfam.org>

Oxfam America is an affiliate of Oxfam International. As a nonprofit organization, Oxfam America aims to end global poverty through saving lives, strengthening communities, and campaigning for change. Internships are available at both the Boston and Washington DC offices.

Positions are posted, along with descriptions, as they become available.

PAN-AMERICAN DEVELOPMENT FOUNDATION

<http://www.padf.org>

The Pan-American Development Foundation stems from an agreement between the Organization of American States and the private sector. As an organization, the PADF facilitates the creation of public-private partnerships that will assist the least advantaged individuals in Latin America and the Caribbean. PADF selects interns for the fall, spring, and summer to assist in different departments throughout the organization. Descriptions of internships are posted as positions become available within certain programs.

PARTNERS OF THE AMERICAS

<http://www.partners.net>

Partners of the Americas upholds the philosophy that working together across borders builds understanding and improves the lives of all people in the Western Hemisphere. As an organization, Partners of the Americas creates opportunities that inspire hope and celebrate diversity. Internships are available at the Washington DC office in a variety of programs. Positions are posted as they become available.

PEARL S. BUCK INTERNATIONAL

<http://www.psb.org>

Pearl S. Buck International works to continue the vision of Pearl S. Buck, including her deep commitment to improving quality of life of and

expanding opportunities for children, promoting understanding of the values and attributes of other cultures, and the need for humanitarianism throughout the world. Internships are available through the Welcome House Adoption Program.

SISTER CITIES INTERNATIONAL

<http://www.sister-cities.org>

Sister Cities International is a nonprofit diplomacy network that generates and strengthens partnerships between communities in the United States and abroad to increase global cooperation at the local level. The mission of Sister Cities International is to promote peace through mutual respect, understanding, and cooperation: one individual, one community at a time. Internships are available in communications and sustainable development.

UNITARIAN UNIVERSALIST SERVICE COMMITTEE

<http://www.uusc.org/index.shtml>

The Unitarian Universalist Service Committee aims to advance human rights and social justice around the world through partnership with those who experience unjust power structures and mobilizing these individuals to challenge oppressive policies. Internships with the UUSC are available at the Cambridge, Massachusetts, location. Potential interns work in conjunction with UUSC staff and their advisors to design their own internship. Interns are considered for all departments.

U.S. COMMITTEE FOR REFUGEES AND IMMIGRANTS

<http://www.refugees.org>

The U.S. Committee for Refugees and Immigrants works to address the needs and rights of migrants worldwide by advancing fair and humane public policy, facilitating and providing direct professional services, and promoting the full participation of migrants in community life. Internships are available in the Washington DC office in a variety of sectors. A small stipend is provided and academic credit can be arranged.

VOICES ON THE BORDER

<http://www.votb.org>

Voices on the Border is an organization that builds solidarity between communities throughout the United States and El Salvador to promote sustainable and equitable development in the latter. Special emphasis is placed on promoting Salvadoran activism on all levels and educating

U.S. citizens about the impact of U.S. policy abroad. Internships are available at the Washington DC office; interns work closely with the executive director. Hours and start dates for the internship are arranged between the executive director and the intern.

WITNESS FOR PEACE

<http://www.witnessforpeace.org>

Witness for Peace is a nonprofit grassroots organization dedicated to protecting human rights and establishing economic justice through non-violent means. The organization's mission is to change U.S. foreign and economic policies in Latin America and the Caribbean while providing just alternatives. Internships are available in three areas: legislative/grassroots organizing, delegation planning and support, and development.

WOMEN'S INTERNATIONAL LEAGUE FOR PEACE AND FREEDOM

<http://www.wilpf.org>

The Women's International League for Peace and Freedom strives to achieve world disarmament, full rights for women, racial and economic justice, an end to all forms of violence, and the establishment of political, psychological, and social conditions that ensure peace, freedom, and justice for all world citizens. A variety of internships are available throughout the year at the Philadelphia, New York, and Geneva, Switzerland, offices.

WORLD VISION

<http://www.worldvision.org>

World Vision is a Christian relief and development organization dedicated to eliminating the causes of poverty and helping children and their communities worldwide. Internships are available at World Vision headquarters in Federal Way, Washington. Interns work in a variety of departments and participate in weekly intern gatherings.

VOLUNTEER WORK

AGRICULTURAL COOPERATIVE DEVELOPMENT INTERNATIONAL

<http://www.acdivoca.org>

Agricultural Cooperative Development International (ACDI/VOCA) is a nonprofit organization working to promote broad-based economic

growth and the development of civil society in developing nations. ACDI/VOCA offers a range of technical assistance services. ACDI/VOCA offers 2- to 4-week volunteer placements around the world. Volunteers are typically mid-career and senior professionals who work side by side with farmers and entrepreneurs in developing countries.

AMERICAN FRIENDS SERVICE COMMITTEE

<http://www.afcs.org>

The American Friends Service Committee (AFSC) is an organization based on the expression of the faith of the Religious Society of Friends (Quakers). The AFSC stands committed to the principles of nonviolence and justice and works to draw on the transforming power of human and divine love. AFSC offers volunteer positions across the globe. Openings are posted as they become available.

AMERICAN JEWISH WORLD SERVICE

<http://www.ajws.org>

The American Jewish World Service (AJWS) is an international development organization dedicated to the alleviation of poverty, hunger, and disease among the citizens of the developing world. AJWS, with the assistance of grants to grassroots organizations, volunteer service, advocacy, and education, fosters civil society, sustainable development, and human rights for all people. AJWS Volunteer Corps places Jewish professionals with grassroots organizations throughout the world to provide skills training to NGOs. The volunteers also train staff members in their area of expertise. Placements last from 3 to 12 months.

AMERICAN REFUGEE COMMITTEE

<http://www.arcrelief.org>

The American Refugee Committee (ARC) works with refugees, displaced persons, and those at risk of being displaced to help them survive crises and rebuild lives of dignity, health, security, and self-sufficiency. ARC offers volunteer positions in locations throughout the world. Opportunities are posted as they become available.

BRETHREN VOLUNTEER SERVICE

<http://www.brethren.org/genbd/bvs>

The Brethren Volunteer Service (BVS) is a ministry of the Church of the Brethren, General Board. BVS works to provide hope to shattered lives

and to establish understanding between individuals, groups, nations, and humanity. BVS offers placements in the United States and abroad. Volunteers receive room, board, medical insurance, transportation to the project site, and a small stipend.

CHRISTIAN FOUNDATION FOR CHILDREN AND AGING

<http://www.cfcausa.org>

The Christian Foundation for Children and Aging (CFCA) is a lay Catholic organization dedicated to creating relationships between sponsors in the United States and children and aging individuals in 26 developing countries across the globe. CFCA offers volunteer positions both at its headquarters in Kansas City and at its international mission sites. International volunteers must be able to serve for at least a 6-month period.

CHURCH WORLD SERVICE, IMMIGRATION AND REFUGEE PROGRAM

<http://www.churchworldservice.org>

The Church World Service (CWS) Immigration and Refugee Service Immigration and Refugee Program is a network of denominations and local affiliate offices that serves the needs of refugees and immigrants. Co-sponsor congregations across the United States welcome the uprooted and displaced and create a hospitable community. Volunteer opportunities are available at the local affiliate offices throughout the United States. Volunteers may work directly with refugees as well as assist with office duties.

CROSS-CULTURAL SOLUTIONS

<http://www.crossculturalsolutions.org>

Cross-Cultural Solutions is a nonprofit organization and leader in the field of international volunteering. Volunteers with Cross-Cultural Solutions assist with Partner Programs, each of which is a dynamic, community-led initiative. These community programs include caring for children/infants, teaching children, teaching English, assisting teachers, medical and HIV/AIDS work, caring for the elderly and disabled, providing special education, and empowering women. Volunteer sites include Brazil, China, Costa Rica, Ghana, Guatemala, India, Peru, Russia, Tanzania, and Thailand. A fee and specific dates apply to each volunteer program. College credit may be provided for extended stays.

DIRECT RELIEF INTERNATIONAL

<http://www.directrelief.org>

Direct Relief International is an international organization that provides material medical aid, including medicines, medical supplies, and equipment, to impoverished people around the world. The mission of Direct Relief International is to improve the health of people living in developing nations, as well as those who are victims of natural disasters, war, and civil unrest. Direct Relief International offers volunteer positions at its office and warehouse in Santa Barbara, California. Volunteers assist with a wide variety of tasks, including administrative, clerical, research, and writing, as well as providing staffing at special events.

DOCTORS WITHOUT BORDERS

<http://www.dwb.org>

<http://www.doctorswithoutborders.org/volunteer/field/index.cfm>

Doctors Without Borders/Médecins Sans Frontières (MSF) is an independent and international medically based humanitarian organization that delivers emergency aid to global citizens adversely affected by armed conflict, epidemics, natural or manmade disasters, or poor health care in more than 70 countries throughout the world. MSF seeks volunteers with mental health training. Volunteer opportunities include working with individuals suffering from PTSD stemming from conflict situations, increasing mental health programs, providing mental health care for people living with HIV/AIDS, and training local mental health workers. The recruitment process is competitive, and specific criteria must be met.

ETHIOPIAN COMMUNITY DEVELOPMENT COUNCIL, INC.

<http://www.ecdcinternational.org>

Ethiopian Community Development Council, Inc. (ECDC) is an organization that works to resettle refugees, promote educational, cultural, and socioeconomic development in the refugee and immigrant populations in the United States, and carry out humanitarian and development programs in the Horn of Africa. Volunteer positions are available.

FELLOWSHIP OF RECONCILIATION

<http://www.forusa.org>

The Fellowship of Reconciliation (FOR) is an international, interfaith movement with branches and groups in over 40 nations. FOR works to

replace violence, war, racism, and economic injustice with nonviolence, peace, and economic justice. To achieve these goals, FOR educates, trains, builds coalitions, and engages in nonviolent and compassionate actions on a local, national, and global front. FOR offers volunteer positions at its office in Nyack, New York. Volunteers assist with a variety of tasks and programs.

FOOD AND AGRICULTURE PROGRAM OF THE UNITED NATIONS

<http://www.fao.org>

The Food and Agriculture Organization of the United Nations (FAO) endeavors to defeat hunger by serving as a forum where both developed and developing nations gather to reach agreements and debate policies. FAO also stands as a source of knowledge and information and helps developing nations to improve agriculture, forestry, and fishery practices, modernize, and ensure good nutrition for citizens. FAO offers volunteer opportunities in several locations throughout the world. Volunteers must be a citizen of an FAO member nation and fluent in at least one of FAO's working languages. Applications must submit an assignment proposal outlining objectives and expected results of a volunteer position with FAO.

FOSTER PARENTS PLAN

<http://www.fosterparentsplan.ca>

Foster Parents Plan is an international development organization centered on children. It currently works in 45 developing nations to bring about effective, lasting change in all aspects of the well-being of children, including health, education, shelter, and livelihood. Volunteer positions are available at its Toronto office. Openings are posted, along with details, as they become available.

FOUNDATION FOR INTERNATIONAL COMMUNITY ASSISTANCE

<http://www.villagebanking.org>

The Foundation for International Community Assistance (FICA) is a nonprofit agency known for the innovation of the "village banking method," which provides microcredit to developing nations. FICA's other programs include education loans, home improvement loans, revolving lines of credit, and services such as insurance, savings, and basic business training. FICA accepts volunteers at its headquarters in Washington DC, as well as in affiliate offices in developing countries.

Volunteers help with a variety of projects and assignments in the areas of human resources, administration, finance, legal, marketing, or information technology.

FOUNDATION FOR SUSTAINABLE DEVELOPMENT

<http://www.fsdinternational.org>

The Foundation for Sustainable Development (FSD) supports grass-roots development organizations that are working to better their communities, environments, and the economic opportunities around them. FSD upholds the philosophy that economic development begins with community development and is sustainable only if it comes from and is continually supported by the members of those communities. FSD also works to raise awareness about international issues. FSD offers short-term international volunteer positions that last from 1 to 6 weeks. Participants volunteer with local organizations and stay with local families.

GLOBAL SERVICE CORPS

<http://www.globalservicecorps.org>

The Global Service Corps is an international nonprofit volunteer organization that provides service-learning opportunities to live and work in Thailand and Tanzania. Programs include HIV/AIDS prevention, sustainable agriculture, health care, English instruction, Buddhist immersion, and the Seeds of Sustenance Fellowship. Volunteer positions are available for 2, 4, or 6 or more weeks.

HEIFER INTERNATIONAL

<http://www.heifer.org>

Heifer International works with communities to end hunger and poverty and to care for the Earth in order to bring about a world of communities that live together in peace and equitable sharing of resources. Heifer International brings resources into needy communities that will provide a source of nourishment and income. Heifer International offers two types of volunteer positions: community volunteers and learning center volunteers. Community volunteers work closely with regional offices to assist with educational programs, training programs, and community outreach. Learning center volunteers immerse themselves at one of Heifer International's three locations: Ceres Center in California, Heifer Ranch in Arkansas, and Overlook Farm in Massachusetts. Learning center

volunteers view Heifer International's theory in practice by tending gardens, helping with livestock, and assisting in educational programs.

INTERNATIONAL CULTURAL YOUTH EXCHANGE

<http://www.icye.org>

The International Cultural Youth Exchange (ICYE) is an international nonprofit exchange organization for youth that works to promote mobility, intercultural learning, and international voluntary service. ICYE organizes both short- and long-term volunteer exchanges in more than 34 nations around the world.

INTERNATIONAL JUSTICE MISSION

<http://www.ijm.org>

International Justice Mission is a human rights agency that rescues victims of violence, sexual exploitation, slavery, and oppression. It is based in the United States and has agencies around the world.

INTERNATIONAL MEDICAL CORPS

<http://www.imcworldwide.org>

The International Medical Corps is an international nonprofit organization that is dedicated to saving lives and relieving suffering through providing health care training and relief and development programs. The mission of the International Medical Corps is to improve quality of life through planned health interventions and related activities that serve to build the local capacity in areas throughout the world. It accepts both domestic and general international volunteers. International volunteers must serve for at least 2 months, and they receive a per diem during their time of service. Domestic volunteers serve at IMC's offices in Los Angeles, London, or Washington DC.

JESUIT VOLUNTEER CORPS

<http://www.jesuitvolunteers.org>

The Jesuit Volunteer Corps offers individuals an opportunity to work for justice and peace in a full-time volunteer placement. Those who choose to serve with the Jesuit Volunteer Corps are called to the mission of directly serving the impoverished, working for structural change in the United States, and accompanying citizens of developing nations. Applicants for volunteer positions should be at least 21 years old and have a college degree or applicable work experience. Positions are available in the United States and internationally.

LUTHERAN VOLUNTEER CORPS

<http://www.lutheranvolunteercorps.org>

The Lutheran Volunteer Corps works to uphold its mission of being a community of faith that unites people to work together for peace and justice. LVC offers a 1-year domestic volunteer program. Volunteers must be at least 21 years of age. Placements are posted as they become available.

MENNONITE VOLUNTARY SERVICE

<http://www.mennonitemission.net>

The Mennonite Voluntary Service is the mission agency of the Mennonite Church in the United States. MVS works with the disadvantaged and those suffering from injustice, participates in the issues and activities crucial to local neighborhoods and faith communities, and encourages volunteers to live simply in shared households in order to affirm and nurture relationships and serve as an extension of the local congregation. Volunteer positions require a 1- or 2-year commitment. Most positions are in the United States, with some openings in the United Kingdom. Available volunteer sites are posted regularly.

OPERATION USA

<http://www.opusa.org>

Operation USA is a nonprofit disaster relief agency based in Los Angeles. For 27 years, Operation USA has assisted developing communities both in the United States and abroad in confronting problems related to natural and manmade disasters and chronic poverty. By providing essential materials, training, advocacy, and financial support, Operation USA promotes sustainable health and nutrition and aids in disaster response. Volunteer opportunities are available at Operation USA's Port of Los Angeles Warehouse in Wilmington, California. Volunteers assist in processing, loading, and unloading shipments.

OXFAM AMERICA

<http://www.oxfamamerica.org>

Oxfam America is an affiliate of Oxfam International. As a nonprofit organization, Oxfam America aims to end global poverty through saving lives, strengthening communities, and campaigning for change. Volunteer positions are available at both the Boston and Washington DC offices. Openings are posted, along with descriptions, as they become available.

PROJECT CONCERN

<http://www.projectconcern.org>

Project Concern is an international organization that strives to prevent disease, improve community health, and promote sustainable development. Lifesaving programs are provided to individuals in Africa, Asia, and the Americas. Project Concern offers both domestic and international volunteer opportunities. Positions in the United States are available at the international office in San Diego, as well as the Mexican border region. Responsibilities vary and openings are posted as they become available. For international volunteer opportunities, duties typically include research development and writing, public health education, and community-level interventions.

RURAL UPGRADE SUPPORT ORGANISATION

<http://www.interconnection.org/ruso>

The Rural Upgrade Support Organisation (RUSO) is an NGO dedicated to empowering local communities and contributing sustainable grassroots solutions to rural challenges in Ghana. RUSO also uses volunteers to provide health care, education, and social development. Placements with VOLU vary in length according to volunteer preference and nature of the project. All volunteers must be at least 18 years of age, in good health, and willing to work hard and live in the rural community.

SERVICE CIVIL INTERNATIONAL

<http://www.sci-ivs.org>

Service Civil International promotes short-term and long-term volunteer placements to work on political, social, and humanitarian issues across the globe. Both summer work camps and long-term placements are available in many nations. Availability can be searched according to country and program type.

SEVA FOUNDATION

<http://www.seva.org>

Seva is an international organization driven by “compassionate capitalism:” the perception that Western technology and skills must be applied abroad in ways that are sustainable and that can be shared with those individuals and communities that lack access to capital and resources. Seva aims to serve an ever-changing vision that incorporates the ancient and modern in ways that promote health and human harmony. Seva

offers both domestic and international volunteer opportunities. Volunteers within the United States staff information tables at festivals and concerts and assist with data entry, mailings, filing, and packaging merchandise. International volunteers are needed to work with the Sight Program and other development programs in Africa and Asia.

STUDENTS PARTNERSHIP WORLDWIDE

<http://www.spw.org>

Students Partnership Worldwide (SPW) is an international development charity that recruits and trains young people (aged 18–28) to be volunteer peer educators. Peer educators lead programs that address pressing health and environmental issues in Africa and Asia. SPW offers volunteer programs in India, Nepal, South Africa, Tanzania, Uganda, and Zambia. Openings, along with position details, are posted as they become available.

UNITED METHODIST COMMITTEE ON RELIEF

<http://gbgm-umc.org/umcor>

The United Methodist Committee on Relief (UMCOR) is a nonprofit humanitarian aid organization. With open hearts and minds, UMCOR works to alleviate all forms of human suffering, regardless of the source. Volunteers with UMCOR may participate in disaster relief, ranging from immediately following the disaster to several years later. Further opportunities are available processing disaster relief supplies at the Sager Brown Depot. International volunteer placements are available through the United Methodist Volunteers in Mission.

UNITED NATIONS VOLUNTEERS FOR PEACE AND DEVELOPMENT

<http://www.unv.org>

The United Nations Volunteers is the UN organization that encourages global sustainable human development by promoting volunteerism. Volunteer positions are available both in the United States and abroad and vary according to sector and responsibilities. Positions are posted as they become available.

UNITED STATES CONFERENCE OF CATHOLIC BISHOPS MIGRATION AND REFUGEE SERVICES

<http://www.nccbuscc.org>

Migration and Refugee Services serves and advocates for immigrants, refugees, and people on the move. The Conference of Catholic Bishops

works with the federal government and local churches in the resettlement process, providing caring and supportive communities. Volunteers with Migration and Refugee Services may assist with social services, such as finding appropriate housing, English translation/tutoring, job search assistance, and so forth. Volunteers may also provide pastoral care, helping the newcomer into the community, settling the newcomer into a worship community, and aiding in cultural orientation and transition.

VISIONS IN ACTION

<http://www.visionsinaction.org>

Visions in Action is a nonprofit international organization with a commitment to achieving social and economic justice throughout the developing world by placing communities of volunteers. Volunteer types are divided according to sector (agriculture, education, small business, human rights and law, etc.). Placements are available in Africa and Mexico.

VOLUNTARY WORKCAMP ASSOCIATION OF GHANA

<http://www.volu.org>

Membership in the Voluntary Workcamps Association of Ghana (VOLU) is open to all persons age 16 and over. VOLU has numerable partner organizations throughout Europe, North America, and Asia. VOLU offers two cycles of workcamps, winter and summer. Volunteers with VOLU work on a variety of projects, including constructing schools, hospitals, and roads, in addition to cocoa plantation, literacy projects, community development, oil palm production, reforestation, and AIDS awareness campaigns. Camps vary in length from 3 to 4 weeks.

VOLUNTEER AFRICA

<http://www.volunteerafrica.org>

Volunteer Africa is an international nonprofit organization run by a team of volunteers who are stationed around the world. Volunteer Africa links people from around the world with community-initiated projects in developing nations. Volunteer Africa offers 4-, 7-, and 10-week programs in three locations in Africa. Program dates and costs are updated regularly.

VOLUNTEER IN ASIA

<http://www.viaprograms.org>

Volunteer in Asia (VIA) is a nonprofit organization that is dedicated to increasing understanding between United States and Asia. VIA

strives to offer young Americans the opportunity to work and live within an Asian culture while meeting the needs of an Asian host organization. VIA offers both summer and long-term (1- and 2-year) programs. Most participants work in Asian nations teaching English.

VOLUNTEER MATCH

<http://www.volunteermatch.org>

Volunteer Match is an organization offering online services that support a community of nonprofit, volunteer, and business leaders committed to civic engagement. Volunteer Match offers a search function for volunteer positions: those seeking placements enter their ZIP code, distance willing to travel, and area of interest.

WORLD CONCERN

<http://www.worldconcern.org>

World Concern is a Christian humanitarian organization whose goal is to provide emergency relief and community development throughout the world. Volunteer opportunities include volunteer prayer advocacy and assisting in the seed shipping process.

WORLD NEIGHBORS

<http://wn.org>

World Neighbors is an international organization dedicated to the development of remote and marginalized communities in poverty-stricken areas of Africa, Asia, and Latin America. Local people are assisted in developing, managing, and sustaining their own programs. These programs incorporate food security, farming, literacy, community health, environmental conservation, water and sanitation, nonformal education, savings and credit, and income-generation activities. Volunteers assist in planning and execution of annual events as well as providing support in the Oklahoma City Village Volunteer Program.

WORLDTEACH

<http://www.worldteach.org>

WorldTeach is a nonprofit organization that offers opportunities for individuals to volunteer as teachers in developing nations. Most volunteers teach English, although other opportunities are available. Both summer and full-year placements are available at a variety of locations throughout the world.

WORLD VISION

<http://www.worldvision.org>

World Vision is a Christian relief and development organization dedicated to eliminating the causes of poverty and helping children and their communities worldwide. Volunteer opportunities are available at World Vision headquarters in Federal Way, Washington, as well as in offices across the nation. World Vision does not currently send volunteers abroad.

YMCA GO GLOBAL

http://www.internationalymca.org/GoGlobal/Go_Global_Service_Corps.shtml

YMCA Go Global is a voluntary service and capacity-building program that places young Americans at YMCAs and community organizations around the world. The Go Global Service Corps is a long-term opportunity to share individual skills with YMCAs and community organizations in developing countries, ranging from 6 months to 1 year.

SEARCH ENGINES

DEVNETJOBS

<http://www.devnetjobs.org>

DevNetJobs serves as a database of positions available in the international development, NGO, and environmental sector. Potential employees may access availability information free of charge or post their résumé for a small fee.

FOREIGN POLICY ASSOCIATION

http://www.fpa.org/jobs_contact2423/jobs_contact.htm

Jobs are listed on this Web site and are available in a weekly e-mail in areas such as development assistance, environment, health, and youth.

HUMAN RIGHTS INTERNET

<http://www.hri.ca/jobboard>

This Web site is designed to facilitate the transfer of information in the human rights community, including the posting of jobs.

IDEALIST.ORG

<http://www.idealists.org>

Idealist.org is part of Action Without Borders, an organization that connects people, organizations, and resources to help to build a world where people live free and dignified lives. Idealist.org lists available employment, internship, and volunteer opportunities. Openings may be searched by country, state or province, town, area of focus, and project description.

INTERACTION

<http://www.interaction.org>

Interaction is an alliance of international development and humanitarian NGOs. They have an e-mail newsletter with job opportunities available by subscription.

INTERNATIONAL JOBS

<http://www.internationaljobs.org/>

Offers information on international jobs to its members; information on “hot jobs” is available to all.

RELIEFWEB

<http://www/reliefweb.int/w/rwb.nsf>

ReliefWeb is run by the UN Office for the Coordination of Humanitarian Affairs and provides a job listing for international jobs from a host of different types of employers.

VOLUNTEERS FOR PEACE

<http://www.vfp.org>

Volunteers for Peace is a nonprofit organization that provides consultation and placement services for international workcamps. Workcamp availability may be searched according to dates of availability, country, or type of camp.

VOLUNTEER MATCH

<http://www.volunteermatch.org>

Volunteer Match is an organization offering online services that support a community of nonprofit, volunteer, and business leaders committed to civic engagement. Volunteer Match offers a search function for

volunteer positions: those seeking placements enter their ZIP code, distance willing to travel, and area of interest.

WORLD VOLUNTEER WEB

<http://www.worldvolunteerweb.org/>

The World Volunteer Web stems from the United Nations' volunteer program. With an overall goal of serving as a global clearinghouse for information and resources linked to volunteerism, the World Volunteer Web may be effectively used for campaigning, advocacy, networking, and mobilizing volunteer action. Information may be accessed according to nation of interest, sector of work, or the particular volunteer issue at hand.

References

Preface

- Diaz, L., Mama, R., & Lopez, L. (2006, August). *Making the social work profession an essential partner in international development*. Paper presented at the biennial conference of the International Federation of Social Workers, Munich, Germany.
- International Federation of Social Workers. (2000). *Definition of social work*. Retrieved July 19, 2006, from <http://www.ifsw.org/en/p38000208.html>

Chapter One

- Diaz, L., Mama, R., & Lopez, L. (2006, August). *Making the social work profession an essential partner in international development*. Paper presented at the biennial conference of the International Federation of Social Workers, Munich, Germany.
- Herscovitch, L. (2001). International relief and development practice. In L. Healy (Ed.), *International social work: Professional action in an interdependent world* (pp. 170–192). New York: Oxford University Press.
- Isbister, J. (2003). *Promises not kept: Poverty and the betrayal of Third World development* (6th ed.). Bloomfield, CT: Kumarian Press.
- Kaiser, W. L., & Wood, D. (2001). *Seeing through maps*. Amherst, MA: ODT Incorporated.
- Macionis, J. J. (2006). *Society: The basics* (8th ed.). Upper Saddle River, NJ: Pearson/Prentice Hall.
- Mead, W. R. (2006). *The state of state world history standards*. Retrieved July 26, 2006, from <http://www.edexcellence.net/doc/State%20of%20State%20World%20History%20Standards%202006.pdf>

- Midgley, J. (1997). Social work and international social development: Promoting a developmental perspective in the profession. In M. C. Hokenstad & J. Midgley (Eds.), *Issues in international social work: Global challenges for a new century* (pp. 11–26). Washington, DC: NASW Press.
- National Geographic. (2002). *2002 global geographic literacy survey*. Retrieved February 24, 2006, from <http://geosurvey.nationalgeographic.com/geosurvey/download/RoperSurvey.pdf>
- National Geographic. (2006). *2006 global geographic literacy survey*. Retrieved July 26, 2006, from <http://www.nationalgeographic.com/roper2006/pdf/FINALReport2006GeogLitSurvey.pdf>
- Rodney, W. (2005). How Europe underdeveloped Africa. In P. S. Rothenberg (Ed.), *Beyond borders: Thinking critically about global issues* (pp. 107–125). New York: Worth Publishers.
- Schultz, E. A., & Lavenda, R. H. (2005). *Cultural anthropology: A perspective on the human condition* (6th ed). New York: Oxford University Press.
- Thomas-Slayter, B. P. (2003). *Southern exposure: International development and the global south in the twenty-first century*. Bloomfield, CT: Kumarian Press.
- United Nations. (1999). *About the World Summit for Social Development*. Retrieved May 30, 2007 from <http://www.visionoffice.com/socdev/wssd.htm>.
- United Nations Development Programme. (2003). *Human development report 2003*. New York: Oxford University Press.
- United Nations–Division for the Advancement of Women. (2005). *Creating an enabling environment for girls' and women's participation in education*. Retrieved July 20, 2006, from <http://www.un.org/womenwatch/daw/egm/enabling-environment2005/docs/EGM-WPD-EE-2005-EP.8%20%20A.pdf>
- University of London, Department of Geography (n.d.) *The power of maps: Bias and distortion on a world map*. Retrieved April 8, 2006, from <http://www.geog.qmul.ac.uk/map>
- U.S. Department of Education. (2006). *Teaching language for national security and global competitiveness: U.S. Department of Education fact sheet*. Retrieved April 8, 2006, from <http://www.ed.gov/news/pressreleases/2006/01/01052006.html>

Chapter Two

- Amnesty International. (2005). *Human rights for human dignity: A primer on economic, social and cultural rights*. Retrieved July 7, 2006, from [http://web.amnesty.org/library/pdf/POL340092005ENGLISH/\\$File/POL3400905.pdf](http://web.amnesty.org/library/pdf/POL340092005ENGLISH/$File/POL3400905.pdf)

- Ayton-Shenker, D. (1995). *The challenge of human rights and cultural relativism*. Retrieved June 24, 2005, from <http://www.un.org/rights/dpi1627e.htm>
- George, J. (1999). Conceptual muddle, practical dilemma: Human rights, social development and social work education. *International Social Work*, 42(1), 15–26.
- Ghai, Y. (2001). *Human rights and social development: Toward democratization and social justice*. Geneva: United Nations Research Institute for Social Development. Retrieved July 7, 2006, from [http://www.unrisd.org/unrisd/website/document.nsf/\(httpPublications\)/ECD0417EB1177C5280256B5E004BCAFA?OpenDocument](http://www.unrisd.org/unrisd/website/document.nsf/(httpPublications)/ECD0417EB1177C5280256B5E004BCAFA?OpenDocument)
- Healy, L. (2001). *International social work: Professional action in an interdependent world*. New York: Oxford University Press.
- Human Rights Watch. (1996). *Death by default: A policy of fatal neglect in China's state orphanages*. Retrieved June 27, 2006, from <http://www.hrw.org/summaries/s.china961.html>
- Ife, J., & Fiske, L. (2006). Human rights and community work. *International Social Work*, 49(3), 297–308.
- International Committee of the Red Cross. (2006). *International conference paves the way for Red Crystal*. Retrieved July 9, 2006, from <http://www.icrc.org/web/eng/siteeng0.nsf/html/geneva-news-220606?opendocument>
- Jahan, S. (2005). *Human rights-based approach to poverty reduction: Analytical linkages, practical work and UNDP*. Retrieved July 7, 2006, from <http://www.undp.org/poverty/HRPR.doc>
- Muntarbhorn, V. (2005, September 14). Human rights and globalisation. *The Bangkok Post*. Retrieved September 14, 2005, from <http://www.bangkokpost.com>
- Red Cross of Latvia. (n.d.). *International humanitarian law*. Retrieved September 22, 2005, from <http://www.redcross.lv/en/conventions.htm>
- Reichert, E. (2003). *Social work and human rights*. New York: Columbia University Press.
- Skegg, A. (2005). Human rights and social work: A Western imposition or empowerment to the people? *International Social Work*, 48(5), 667–672.
- UNICEF. (1999). *Human rights for children and women: How UNICEF helps make them a reality*. Retrieved October 30, 2006, from http://www.unicef.org/publications/index_5587.html
- United Nations. (1999). *About the World Summit for Social Development*. Retrieved July 10, 2006, from <http://www.visionoffice.com/socdev/wssd.htm>
- United Nations High Commissioner for Human Rights (2006a). *International Covenant on Civil and Political Rights*. Retrieved July 6, 2006, from <http://www.ohchr.org/english/countries/ratification/4.htm>

- United Nations High Commissioner for Human Rights (2006b). *International Covenant on Economic, Social and Cultural Rights*. Retrieved July 6, 2006, from <http://www.ohchr.org/english/countries/ratification/3.htm>
- United Nations High Commissioner for Human Rights (2006c). *International law*. Retrieved July 9, 2006, from <http://www.ohchr.org/english/law/index.htm>
- Wright, T. (2006, June 20). Annan cautions rights council to avoid rifts. *New York Times*. Retrieved July 13, 2006, from www.nytimes.com

Chapter Three

- Amnesty International (2005). *Childhood denied: Child soldiers in Africa*. Retrieved September 8, 2005, from <http://web.amnesty.org/pages/child-soldiers-africanchild-eng>
- Anti-Slavery International (n.d.). *About Timidria*. Retrieved October 29, 2005, from <http://www.antislavery.org/homepage/antislavery/award/timidria-background2004.htm>
- Anti-Slavery International. (2001a). *Forced labor in the 21st century*. Retrieved on October 5, 2005, from <http://www.antislavery.org/homepage/resources/PDF/PDFforcedlabour.htm>
- Anti-Slavery International. (2001b). *The enslavement of Dalit and indigenous communities in India, Nepal and Pakistan through debt bondage*. Retrieved October 5, 2005, from <http://www.antislavery.org/homepage/resources/goonesekere.pdf>
- Anti-Slavery International. (2004). *Slavery in Niger*. Retrieved October 5, 2005, from <http://www.antislavery.org/homepage/antislavery/award/nigerbackground2004.htm>
- Anti-Slavery International. (2005). *Niger's leading anti-slavery activists freed on bail*. Retrieved October 29, 2005, from <http://www.antislavery.org/archive/press/pressrelease2005weila4freed.htm>
- Arnold, C., & Bertone, A. M. (2002). Addressing the sex trade in Thailand: Some lessons learned from NGOs. Part I. *Gender Issues, Winter*, 26–52. Retrieved June 24, 2005, from <http://phi-ngo.org/USA/Papers.htm>
- Bales, K. (2004). *Disposable people: New slavery in the global economy*. Los Angeles: University of California Press.
- Bernstein, N. (2007, February 8). Suit to charge that nursery mistreated laborers. *New York Times*. Retrieved February 8, 2007, from <http://www.nytimes.com>
- Blount, J. (2005, November 4). *Brazil's anti-slavery chief steps up raids to free workers*. Retrieved November 4, 2005, from http://www.bloomberg.com/apps/news?pid=10000086&sid=aZfAqGDt9qgl&refer=latin_america

- Brown, L. (2000). *Sex slaves: The trafficking of women in Asia*. London: Virago Press.
- Burma enacts anti trafficking in persons law (2005, October). Retrieved October 12, 2005, from http://www.humantrafficking.org/countries/eap/burma/news/2005_09/burma_enacts_ht_law
- Burma threatening to quit ILO. (2005, October 28). Retrieved November 3, 2005, from <http://news.bbc.co.uk/go/pr/fr/-/2/hi/asia-pacific/4385362.htm>
- Crary, D. (2005, October 29). Groups target human trafficking in the U.S. *Washington Post*. Retrieved November 4, 2005, from <http://www.washingtonpost.com>
- Davidson, O. G. (2005, September 8). In the land of slavery. *Rolling Stone*, 74–80.
- Ehrenreich, B., & Hochschild, A. R. (Eds.) (2002). *Global woman*. New York: Henry Holt and Company.
- Fred, S. (2004, September). Human trafficking: Snaring the spirit. *NASW News*, p. 4.
- French, H. W. (2005). A village grows rich off its main export: Its daughters. *New York Times*, p. A4.
- Human Rights Watch. (2001). *Burma violates own ban in use of forced labor*. Retrieved October 5, 2005, from http://hrw.org/english/docs/2001/03/07/burma347_txt.htm
- Human Rights Watch. (2004). *Children as weapons of war*. Retrieved on October 5, 2005, from <http://hrw.org/wr2k4/11/htm>
- Human Rights Watch. (2005a). Burma. In *Human Rights Watch World Report 2005*. Retrieved October 5, 2005, from http://hrw.org/english/docs/2005/01/13/burma9826_txt.htm
- Human Rights Watch. (2005b). *Brazil*. Retrieved October 5, 2005, from http://hrw.org/english/docs/2005/01/13/brazil9845_txt.htm
- Human Rights Watch. (2005c). *Malaysia: Migrant workers fall prey to abuse*. Retrieved October 5, 2005, from http://hrw.org/english/docs/2005/05/17/malays10959_txt.htm
- Human Rights Watch. (2005d). *Thailand: Burmese democracy activists targeted by Thai government*. Retrieved November 5, 2005, from <http://hrw.org/english/docs/2005/03/29/thaila10381.htm>
- Human Trafficking.org. (2005). *Prevention*. Retrieved on April 10, 2005, from <http://www.humantrafficking.org/prevention/index.html>
- Illinois Department of Human Services. (2005). *Gov. Blagojevich takes lead in effort to combat human trafficking in Illinois*. Retrieved September 26, 2005, from <http://www.dhs.state.il.us/newsPublications/pressReleases/releases/2005-03-20-01.asp>

- International Labour Office. (2005a). *A global alliance against forced labour*. Geneva: International Labour Office. Retrieved June 2, 2005, from <http://www.ilo.org/declaration>
- International Labour Office. (2005b). *In Asia: Debt bondage, trafficking and state-imposed forced labour*. Retrieved October 14, 2005, from http://www.ilo.org/public/english/bureau/inf/features/05/debt_asia.htm
- Jagan, L. (2005, November 21). Junta faces sanctions over forced labour. *Bangkok Post*. Retrieved November 20, 2005, from http://www.bangkokpost.com/News/21Nov2005_news17.php
- Jones, M. (2003, Nov/Dec). Thailand's brothel busters. *Mother Jones*. Retrieved September 23, 2005, from http://www.motherjones.com/news/outfront/2003/11/ma_570_01.html
- Malarek, V. (2004). *The Natashas: Inside the new global sex trade*. New York: Arcade Publishing.
- Muico, N. K. (2005). *An absence of choice: The sexual exploitation of North Korean women in China*. Retrieved October 5, 2005, from <http://www.antislavery.org/homepage/resources/PDF/Full%20Korea%20report%202005.pdf>
- Onishi, N. (2005, February 16). Japan, easygoing till now, plans sex traffic crackdown. *New York Times*, p. A3.
- Parker, C. (2006, October 25). ILO advisor concludes Burma visit. *BurmaNet News*. Retrieved October 30, 2006, from <http://www.burmanet.org/news/2006/10/25/irrawaddy-ilo-advisor-concludes-burma-visit-clive-parker>
- Pearson, E. (2001). *Human rights and trafficking in person: A handbook*. Bangkok, Thailand: Global Alliance Against Traffic in Women. Retrieved June 29, 2005, from http://gaatw.net/books_pdf/Human%20Rights%20and%20Trafficking%20in%20Person.pdf
- Population and Community Development Association (n.d.a). *Singer (Thailand) Ltd*. Retrieved on April 10, 2005, from <http://www.sli.unimelb.edu.au/pda/singer.htm>
- Population and Community Development Association (n.d.b). *Bata Shoe Company of Thailand Ltd*. Retrieved on April 10, 2005, from <http://www.sli.unimelb.edu.au/pda/batashoe.htm>
- Robb, M. (2005). International social work—Go global! *Social Work Today*, 5(1), 14.
- Roby, J. L. (2005). Women and children in the global sex trade: Toward more effective policy. *International Social Work*, 48(2), 136–147.
- Royal Thai Embassy (1997). *Child prostitution*. Retrieved October 21, 2006, from <http://www.thaiembdc.org/socials/childprs.htm>
- Santimatanelol, A. (2005, October 29). Migrant workers exploited: Study: Burmese maids get treated like 'slaves.' *Bangkok Post*. Retrieved October

- 29, 2005, from http://www.bangkokpost.com/News/29Oct2005_news14.php
- Smith, C. S. (2005, June 26). Turkey's growing sex trade snares many Slavic women. *New York Times*, p. A4.
- Supplementary Convention on the Abolition of Slavery, the Slave Trade, and Institutions and Practices Similar to Slavery (1957). Retrieved October 29, 2005, from <http://www.ohchr.org/english/law/slavetrade.htm>
- Thailand Legislation (2000). Retrieved on April 4, 2005, from http://www.world-tourism.org/protect_children/legislation_country/thailand.htm
- Thernstrom, M. (2005, May 8). Charlotte, Grace, Janet and Caroline come home. *New York Times*. Retrieved May 30, 2007, from <http://www.nytimes.com>.
- Tumcharoen, S. (2005, September 12). Thai women 'lured' into prostitution. *Bangkok Post*. Retrieved September 12, 2005, from <http://www.bangkokpost.com>
- UNICEF. (2002). *Adult wars, child soldiers*. Retrieved October 19, 2005, from http://www.unicef.org/publications/index_4269.html
- United Nations. (2000). *Protocol to prevent, suppress and punish trafficking in persons, especially women and children, supplementing the United Nations convention against transnational organized crime*. Retrieved October 22, 2006, from http://www.uncjin.org/Documents/Conventions/dcatoc/final_documents_2/convention_%20traff_eng.pdf
- U.S. Department State (2004). *Thailand: Country reports on human rights practices*. Retrieved September 10, 2005, from <http://www.state.gov/g/drl/rls/hrrpt/2004/41661.htm>
- U.S. Department of State (2005a). *Victims of trafficking and violence protection act of 2000: Trafficking in persons report, 2005*. Retrieved October 15, 2005, from <http://www.state.gov/g/tip/rls/tiprpt/2005>
- U.S. Department of State (2005b). *North Korean refugees frequent victims of human trafficking*. Retrieved October 15, 2005, from <http://usinfo.state.gov/eap/Archive/2005/Jul/21-514072.html?chanlid=eap>
- Waldman, A. (2005, May 8). Sri Lankan maids pay dearly for perilous jobs overseas. *New York Times*, pA1, pA6.
- Zarembka, J. M. (2002). America's dirty work: Migrant maids and modern-day slavery. In B. Ehrenreich & A. R. Hochschild (eds.), *Global woman* (pp. 142–153). New York: Henry Holt and Company.

Chapter Four

- Ajayi, A. O., & Torimiro, D. O. (2004). Perspectives on child abuse and labour: Global ethical ideals versus African cultural realities. *Early Child Development and Care*, 174(2), 183–191.

- Amnesty International. (2005). *Uganda: Child "night commuters."* Retrieved June 24, 2006, from <http://web.amnesty.org/library/print/ENGAFR590132005>
- Amnesty International. (2006). No papers, no rights. *Amnesty International, Fall*, 18–23.
- Bloemen, S., & McBride, R. (2006). *At Asia-Pacific birth registration conference, a pledge to reach every child.* Retrieved June 5, 2006, from http://www.unicef.org/infobycountry/Thailand_31752.html
- Briggs, J. (2005). *Innocents lost: When child soldiers go to war.* New York: Basic Books.
- Bross, D. C., Miyoshi, T. J., Miyoshi, P. K., & Krugman, R. D. (2000). *World perspectives on child abuse: The fourth international resource book.* Denver, CO: University of Colorado.
- Central Intelligence Agency (CIA). (2006). *The world factbook—China.* Retrieved July 1, 2006, from <http://www.cia.gov/cia/publications/factbook/geos/ch.html>
- China paying more attention to orphans. (2001, February 5). *The Straits Times.* Retrieved June 28, 2006, from <http://www.hartford-hwp.com/archives/55/337/html>
- China's orphans not adequately looked after: official. (2006, January 5). *Agence France Presse.* Retrieved June 28, 2006, from LexisNexis Database.
- Chinyama, V. (n.d.). *Kenya's abolition of school fees offers lessons for rest of Africa.* Retrieved April 26, 2006, from http://www.unicef.org/infobycountry/kenya_33391.html
- Corbett, S. (2002, June 16). Where do babies come from? *New York Times.* Retrieved June 24, 2006, from <http://www.nytimes.com>
- Dao, J. (2005, May 26). Maryland: 15-year sentence in molesting case. *New York Times*, p. A21.
- Dugger, C. W. (2004, October 24). In Africa, free schools feed a different hunger. *New York Times.* Retrieved July 2, 2006, from <http://www.nytimes.com>
- Dugger, C. W. (2006, April 11). Britain: \$15 billion for third world schools. *New York Times*, pA12.
- Ennew, J. (2000). *Street and working children: A guide to planning.* London: Save the Children.
- Finkelhor, D., & Korbin, J. (1988). Child abuse as an international issue. *Child Abuse and Neglect*, 12(1), 3–23.
- French, H. W. (2006, June 30). As China ages, a shortage of cheap labor looms. *New York Times.* Retrieved July 1, 2006, from <http://www.nytimes.com>
- Gentleman, A. (2007, March 4). Stricter law fails to diminish the demand for child laborers in India. *New York Times.* Retrieved March 6, 2007, from <http://www.nytimes.com>

- Hamid, J. (2006, July 26). Sabah's 'undocumented' children in stateless limbo. *The Bangkok Post*. Retrieved July 26, 2006, from <http://www.bangkokpost.com>
- Hollingsworth, L. D. (2003). International adoption among families in the United States: Considerations of social justice. *Social Work*, 48(2), 209–217.
- Human Rights Watch (1994). *Generation under fire: Children and violence in Colombia*. Retrieved July 2, 2006, from <http://www.hrw.org/reports/pdfs/c/crd/colombia94n.pdf>
- Human Rights Watch (1996a). *Police abuse and killings of street children in India*. Retrieved July 2, 2006, from <http://www.hrw.org/reports/1996/India4.htm>
- Human Rights Watch. (1996b). *Death by default: A policy of fatal neglect in China's state orphanages*. Retrieved June 27, 2006, from <http://www.hrw.org/summaries/s.china961.html>
- Human Rights Watch (1997a). *Police brutality in urban Brazil*. Retrieved July 2, 2006, from <http://www.hrw.org/reports/1997/brazil>
- Human Rights Watch (1997b). *Guatemala's forgotten children: Police violence and abuses in detention*. Retrieved July 2, 2006, from <http://www.hrw.org/reports/1997/guat1>
- Human Rights Watch. (1997c). *Voices of child soldiers*. Retrieved June 3, 2006, from <http://hrw.org/campaigns/crp/voices.htm>
- Human Rights Watch. (1998). *Cruelty and neglect in Russian orphanages*. Retrieved June 27, 2006, from <http://www.hrw.org/reports98/russia2/Russ98d-02.htm>
- Human Rights Watch. (2001). *Questions and answers on the U.N. special session on children, the United States and the rights of children*. Retrieved June 26, 2006, from <http://www.hrw.org/press/2001/09/childqa.htm>
- Human Rights Watch. (2003). *Small change: Bonded child labor in India's silk industry*. Retrieved June 18, 2006, from <http://www.hrw.org/reports/2003/india>
- Human Rights Watch. (2005). *Colombia: Armed groups send children to war*. Retrieved June 3, 2006, from <http://hrw.org/english/docs/2005/02/22/colomb10202.htm>
- Human Rights Watch. (2006). *What future: Street children in the Democratic Republic of the Congo*. Retrieved April 18, 2006, from <http://hrw.org/reports/2006/drc0406>
- Hunt, K. (1990, June 24). Romania's lost children. *New York Times*. Retrieved June 28, 2006, from <http://www.nytimes.com>
- International Labour Organization. (2003a). *Facts on children working in the street*. Retrieved June 20, 2006, from http://www.ilo.org/public/english/standards/ipecc/publ/download/factsheets/fs_streetchildren_0303.pdf

- International Labour Organization. (2003b). *Facts on child labour in agriculture*. Retrieved June 20, 2006, from http://www.ilo.org/public/english/standards/ipecc/publ/download/factsheets/fs_agriculture_0303.pdf
- International Labour Organization. (2006). *Facts on child labour*. Retrieved June 19, 2006, from <http://www.ilo.org/dyn/declaris/DECLARATIONWEB.INDEXPAGE>
- Johnson, K. (2002). Politics of international and domestic adoption in China. *Law and Society Review*, 36(2), 379–396. Retrieved June 29, 2006 from LexisNexis database.
- Johnson, K., Banghan, H., & Liyao, W. (1998). Infant abandonment and adoption in China. *Population and Development Review*, 24(3), 469–510.
- Johnson, K. A. (2004). *Wanting a daughter, needing a son: Abandonment, adoption and orphanage care in China*. St. Paul, MN: Yeong & Yeong Book Company.
- Kombarakaran, F. A. (2004). Street children of Bombay: Their stresses and strategies of coping. *Children and Youth Services Review*, 26, 853–971.
- Laffan, G. (2005). Romania's policy of emptying its orphanages raises controversy. *British Medical Journal*, 331, 1360.
- LaFraniere, S. (2005, December 23). Another school barrier for African girls: No toilet. *New York Times*. Retrieved June 26, 2006, from <http://www.nytimes.com>
- Lalor, K. (1999). Street children: A comparative perspective. *Child Abuse and Neglect*, 23(8), 759–770.
- Lalor, K. (2000). The victimization of juvenile prostitutes in Ethiopia. *International Social Work*, 43(2), 227–242.
- Lihua, H. (2001). Chinese adoption: Practices and challenges. *Child Welfare*, 80(5), 529–540.
- Mental Disability Rights International. (2006). *Hidden suffering: Romania's segregation and abuse of infants and children with disabilities*. Retrieved June 26, 2006, from <http://www.mdri.org/projects/romania/romania-May%209%20final.pdf>
- Mouravieff-Apostol, E. (2006). The significance of birth registration in today's world. In N. Hall (Ed.) *Social work: Making a world of difference* (pp. 103–113). Berne, Switzerland: International Federation of Social Workers.
- Mydans, S. (2001, November 5). U.S. interrupts Cambodian adoptions. *New York Times*. Retrieved June 24, 2006, from <http://www.nytimes.com>
- Nafula, N. N. (2001, July). *Achieving sustainable universal primary education through debt relief: The case of Kenya*. Paper presented at the World Institute for Development Economics Research, Helsinki, Finland. Retrieved February 3, 2005, from <http://www.wider.unu.edu/conference/conference-2001-2/poster%20papers/Nafula.pdf>

- Penalties for neglecting elderly parents. (2006, January 12). *New York Times*. Retrieved July 1, 2006, from <http://www.nytimes.com>
- Pierce, L., & Bozalek, V. (2004). Child abuse in South Africa: An examination of how child abuse and neglect are defined. *Child Abuse and Neglect*, 28(8), 817–832.
- Platt, K. (2000). Children of quake thrive in China's improved orphanage conditions. *Christian Science Monitor*, 92(67), 8. Retrieved July 1, 2006, from EbscoHost database.
- Refugees International. (2004). *Stolen futures: The stateless children of Burmese asylum seekers*. Retrieved June 20, 2005, from <http://www.refugeesinternational.org/content/article/detail/3014/>
- Retreat on criminalizing gender abortions. (2006, June 27). *New York Times*. Retrieved July 1, 2006, from <http://www.nytimes.com>
- Romania: Closing the door on foreign adoptions. (2006, April 19). *New York Times*, pA6.
- Rosenthal, E. (2005, June 23). Law backfires, stranding orphans in Romania. *New York Times*, pA1, A6.
- Save the Children. (2003). *Save the Children's position on children and work*. Retrieved June 30, 2006, from <http://www.savethechildren.net/alliance/resources/publications.html>
- Save the Children. (2006). *State of the world's mothers 2006: Saving the lives of mothers and newborns*. Retrieved June 25, 2006, from http://www.savethechildren.org/publications/SOWM_2006_final.pdf
- Shang, X. (2002). Looking for a better way to care for children: Cooperation between the state and civil society in China. *Social Service Review*, 76, 203–228.
- Shang, X., & Wu, X. (2003). The changing role of the state in child protection: The case of Nanchang. *Social Service Review*, 77, 523–540.
- Singer, P. W. (2005). *Children at war*. New York: Pantheon Books.
- Small, M. F. (1998). *Our babies, ourselves: How biology and culture shape the way we parent*. New York: Anchor Books.
- Southwick, E. M. (2001, February 1). *Statement by Ambassador E. Michael Southwick, Deputy Assistant Secretary of State for International Organization Affairs, in the Preparatory Committee for the General Assembly Special Session on the Children's World Summit*. Retrieved June 24, 2006, from http://www.un.int/usa/01_015.htm
- Thousands of AIDS orphans destitute in China. (2005, January 14). *National Catholic Reporter*. Retrieved June 30, 2006, from EbscoHost database.
- UNICEF. (n.d.a). *Fact sheet*. Retrieved June 5, 2006, from http://www.unicef.org/voy/explore/sowc06/explore_2463.html
- UNICEF. (n.d.b). *Early childhood*. Retrieved June 26, 2006, from http://www.unicef.org/media/media_9475.html

- UNICEF. (n.d.c). *Armed conflict*. Retrieved June 4, 2006, from http://www.unicef.org/protection/index_armedconflict.html
- UNICEF. (n.d.d). *Trafficking and sexual exploitation*. Retrieved June 5, 2006, from http://www.unicef.org/protection/index_exploitation.html
- UNICEF. (n.d.e). *Convention on the Rights of the Child*. Retrieved June 5, 2006, from http://www.unicef.org/crc/index_30166.html
- UNICEF. (n.d.f). *Birth registration*. Retrieved June 5, 2006, from http://www.unicef.org/protection/index_birthregistration.html
- UNICEF. (n.d.g). *Fact sheet*. Retrieved June 5, 2006, from http://www.unicef.org/voy/explore/education/explore_166.html
- UNICEF. (n.d.h). *The school fee abolition initiative*. Retrieved June 5, 2006, from http://www.unicef.org/infobycountry/247_712.html
- UNICEF. (n.d.i). *Girls' education*. Retrieved June 5, 2006, from http://www.unicef.org/media/media_4408.html
- UNICEF (2001). *Adult wars, child soldiers*. Retrieved June 28, 2006, from http://www.unicef.org/publications/pub_adultwars_en.pdf
- UNICEF (2006a). *State of the world's children 2006*. Retrieved June 21, 2006, from http://www.unicef.org/publications/index_30398.html
- UNICEF (2006b). *Commercial sexual exploitation*. Retrieved June 28, 2006, from http://www.unicef.org/protection/files/sexual_exploitation.pdf
- UNICEF (2006c). *Birth registration*. Retrieved June 4, 2006, from http://www.unicef.org/protection/files/birthregistration_2006.pdf
- United Arab Emirates says all child jockeys sent home. (2006, June 13). *New York Times*. Retrieved June 18, 2006, from <http://www.nytimes.com>
- U.S. Department of State. (2005a). *The facts about children trafficked for use as camel jockeys*. Retrieved June 3, 2006, from <http://www.state.gov/g/tip/rls/fs/2005/50940.htm>
- U.S. Department of State. (2005b). *The facts about child sex tourism*. Retrieved June 28, 2006, from <http://www.state.gov/documents/organization/51459.pdf>
- U.S. Department of State. (2006a). *Implementation of the Hague Convention on Intercountry Adoption*. Retrieved June 18, 2006, from <http://www.state.gov/r/pa/prs/ps/2006/61274.htm>
- U.S. Department of State. (2006b). *Immigrant visas issued to orphans coming to the U.S.* Retrieved June 17, 2006, from http://travel.state.gov/family/adoption/stats/stats_451.html#
- U.S. Department of State. (2007). *Intercountry adoption: Guatemala*. Retrieved March 16, 2007, from http://travel.state.gov/family/adoption/country/country_389.html
- WHO calls child abuse major public health problem. (1999, July/August). *Public Health Reports*, 114, 296.

- Willis, B. M., & Levy, B. S. (2002). Child prostitution: Global health burden, research needs, and interventions. *The Lancet*, 359, 1417–1422.
- Yardley, J. (2005, January 31). Fearing future, China starts to give girls their due. *New York Times*, p. A3.

Chapter Five

- American Red Cross. (2006). *Fact sheet: Summary of the Geneva Conventions of 1949 and their additional protocols of 1977*. Retrieved September 22, 2006, from http://www.redcross.org/static/file_cont5230_lang0_1902.pdf
- Benard, C. (2002). *Veiled courage: Inside the Afghan women's resistance*. New York: Broadway Books.
- Bernstein, N. (2005, February 10). Airports treat asylum cases differently. *New York Times*. Retrieved February 10, 2005 from <http://www.nytimes.com>
- Bernstein, N. (2006, October 8). In New York immigration court, asylum roulette. *New York Times*. Retrieved October 8, 2006, from <http://www.nytimes.com>
- Cemlyn, S., & Briskman, L. (2003). Asylum, children's rights, and social work. *Child and Family Social Work*, 8, 163–178.
- Coghlan, B., Brennan, R. J., Ngoy, P., Dofara, D., Otto, B., Clements, M., & Stewart, T. (2006). Mortality in the Democratic Republic of Congo: A nationwide survey. *The Lancet*, 367, 44–51.
- Congressional Research Service. (2005). *Foreign aid: An introductory overview of U.S. programs and policy*. Retrieved October 30, 2006, from <http://italy.usembassy.gov/pdf/other/98-916.pdf>
- Doctors Without Borders. (2005a). *Mental health*. Retrieved September 29, 2006, from <http://www.doctorswithoutborders.org/news/mentalhealth.htm>
- Doctors Without Borders. (2005b). *The crushing burden of rape: Sexual violence in Darfur*. Retrieved September 29, 2006, from <http://www.doctorswithoutborders.org/publications/reports/2005/sudan03.pdf>
- Doctors Without Borders. (2006). *Working in the field: Mental health specialists*. Retrieved October 6, 2006, from <http://www.doctorswithoutborders.org/volunteer/field/mentalhealth.cfm>
- Engstrom, D. W., & Okamura, A. (2004). A plague of our time: Torture, human rights, and social work. *Families in Society*, 85, 291–300. Retrieved June 14, 2005, from WilsonWeb database.
- Fiske, L., Watkinson, A., & Briskman, L. (2006, July). *The people's inquiry into immigration detention: Social workers exposing unjust and harmful practices*. Paper presented at the biennial conference of the International Federation of Social Workers, Munich, Germany.

- Hoge, W. (2005, June 22). U.N. relief official condemns use of rape in African wars. *New York Times*, p. A4.
- Hoge, W. (2005, July 30). U.N. charges Sudan ignores rape in Darfur by military and police. *New York Times*. Retrieved September 29, 2006, from <http://www.nytimes.com>
- Human Rights Watch. (2003a). *Climate of fear: Sexual violence and abduction of women and girls in Baghdad*. Retrieved October 1, 2006, from <http://hrw.org/reports/2003/iraq0703/iraq0703.pdf>
- Human Rights Watch. (2003b). "You'll learn not to cry:" *Child combatants in Colombia*. Retrieved October 13, 2006, from <http://www.hrw.org/reports/2003/colombia0903>
- Human Rights Watch. (2004). *Refugee and internally-displaced women: Gender-based asylum claims*. Retrieved October 10, 2005, from <http://www.hrw.org/women/refugees.html>
- Human Rights Watch. (2005a). *Colombia: Discarded and displaced. The plight of internally displaced persons in Bogotá and Cartagena*. Retrieved October 7, 2006, from <http://hrw.org/reports/2005/colombia1005/colombia1005.pdf>
- Human Rights Watch. (2005b). *Colombia: Armed groups send children to war*. Retrieved June 3, 2006, from <http://hrw.org/english/docs/2005/02/22/colomb10202.htm>
- Internal Displacement Monitoring Centre. (2006). *Colombia: Government "peace process" cements injustice for IDPs*. Retrieved October 7, 2006, from [http://www.internal-displacement.org/8025708F004BE3B1/\(httpInfoFiles\)/2F1618E6C169F2EBC125719C002F6421/\\$file/Special%20Country%20Report%20Colombia.pdf](http://www.internal-displacement.org/8025708F004BE3B1/(httpInfoFiles)/2F1618E6C169F2EBC125719C002F6421/$file/Special%20Country%20Report%20Colombia.pdf)
- International Rescue Committee. (2006). *The IRC in Thailand*. Retrieved September 24, 2006, from http://www.theirc.org/where/the_irc_in_thailand.html
- Jefferson, L. R. (2004). *In war as in peace: Sexual violence and women's status*. Retrieved October 5, 2006, from <http://hrw.org/wr2k4/15.htm>
- Kline, H. F., & Gray, V. J. (2007). Colombia: A resilient political system with intrasigent problems. In H. J. Wiarda & H. F. Kline (Eds.). *Latin America: Politics and development* (pp. 199–233). Boulder, CO: Westview.
- Kohli, R., & Mather, R. (2003). Promoting psychosocial well-being in unaccompanied asylum-seeking young people in the United Kingdom. *Child and Family Social Work*, 8, 201–212.
- Lacey, M. (2005, March 20). Beyond the bullets and blades. *New York Times*, Section 4, p. 1, 14.
- Lidchi, V., Tombs, N., Magalhaes, T., & Lopez, J. (2004). Hidden voices: The family biogram for working with families forcibly displaced in Colombia

- [electronic version]. *Australian and New Zealand Journal of Family Therapy*, 25(4), 212–221.
- Liptak, A. (2005, December 26). Courts criticize judges' handling of asylum cases. *New York Times*. Retrieved February 6, 2006, from the LexisNexis database.
- Loughna, S. (2002). *FMO country guide: Colombia*. Retrieved October 7, 2006, from <http://www.forcedmigration.org/guides/fmo003/fmo003.pdf>
- Machel, G. (2001). *The impact of war on children*. New York: Palgrave.
- Machel, G. (1996). *The impact of armed conflict on children*. Retrieved June 24, 2005, from <http://www.un.org/rights/impact.htm>
- Martin, S. (2005). *Must boys be boys? Ending sexual exploitation and abuse in UN peacekeeping missions*. Retrieved October 6, 2006, from http://www.refugeesinternational.org/files/6976_file_FINAL_MustBoys.pdf
- Médecins Sans Frontières. (2006). *Living in fear: Colombia's cycle of violence*. Retrieved October 13, 2006, from http://www.msf.org/source/countries/americas/colombia/2006/report/living_in_fear.pdf
- Mitchell, F. (2003). The social services response to unaccompanied children in England. *Child and Family Social Work*, 8, 179–189.
- Refugee Council USA. (n.d.). *OPE Thailand: Tham Hin camp*. Retrieved September 7, 2006, from <http://www.refugeecouncilusa.org/ms-thamhin-ircfctsh.pdf>
- Refugees International. (2005a). *Colombia*. Retrieved October 7, 2006, from <http://www.refugeesinternational.org/content/country/detail/2934>
- Refugees International. (2005b). *Colombian refugee voices: Urban displacement in Soacha*. Retrieved October 7, 2006, from <http://www.refugeesinternational.org/content/article/detail/5342>
- Refugees International. (2005c). *Saiza voices: Massacre and return*. Retrieved October 7, 2006, from <http://www.refugeesinternational.org/content/article/detail/5044>
- Refugees International. (2005d). *Refugee voices: Internally displaced in Chocó, Colombia*. Retrieved October 7, 2006, from <http://www.refugeesinternational.org/content/article/detail/6877>
- Refugees International. (2005e). *Colombia: Alternatives to coerced returns needed for internally displaced*. Retrieved October 7, 2006, from <http://www.refugeesinternational.org/content/article/detail/6988>
- Refugees International. (2006). *Colombia: Thousands of displaced people face destitution in urban areas*. Retrieved October 7, 2006, from <http://www.refugeesinternational.org/content/article/detail/8978>
- Rogers, O. (2005, February). *Human rights and war: Incorporating the Geneva Conventions in social work curriculum*. Paper presented at the 51st annual program meeting of the Council on Social Work Education, New York.

- Spindler, W. (2003). Indigenous Colombians: "We are here today and tomorrow we disappear." *Refugees Magazine*, 132. Retrieved October 7, 2006, from <http://www.unhcr.org/publ/PUBL/4135ca574.html>
- Suárez-Orozco, C. (2001). Psychocultural factors in the adaptation of immigrant youth: Gendered responses. In M. Agosin (Ed.), *Women, gender and human rights: A global perspective* (pp. 170–188). New Brunswick, NJ: Rutgers University Press.
- Swarns, R. L. (2006, February 20). Rights groups criticize deportations. *New York Times*, p. A9.
- Swarns, R. L. (2006, September 28). Terror laws cut resettlement of refugees. *New York Times*, p. A21.
- Swarns, R. L. (2007, February 8, 2007). U.S. may be mishandling asylum seekers, panel says. *New York Times*. Retrieved February 8, 2007, from <http://www.nytimes.com>
- Tavernise, S. (2006, October 8). Sectarian havoc freezes the lives of young Iraqis. *New York Times*. Retrieved October 18, 2006, from <http://www.nytimes.com>
- UNICEF. (n.d.). *Fact sheet: Protection and conflict*. Retrieved January 11, 2006, from www.unicef.org/protection/files/childrenconflict.pdf
- UNICEF. (2005). *The impact of conflict on women and girls in west and central Africa and the UNICEF response*. Retrieved June 30, 2006, from http://www.unicef.org/publications/index_25262.html
- UNICEF (2006). *State of the world's children 2006*. Retrieved June 21, 2006, from http://www.unicef.org/publications/index_30398.html
- United Nations High Commissioner for Refugees. (2004). *Helping refugees: An introduction to UNHCR*. Retrieved September 22, 2006, from <http://www.unhcr.org/cgi-bin/texis/vtx/basics/opendoc.htm?tbl=BASICS&id=420cc0432>
- United Nations High Commissioner for Refugees. (2005). *UNHCR Global Report 2005*. Retrieved October 8, 2006, from <http://www.unhcr.org/cgi-bin/texis/vtx/template?page=publ&src=static/gr2005/gr2005toc.htm>
- United Nations High Commissioner for Refugees. (2006a). *Afghans in Pakistan get registered for first ever identification*. Retrieved October 18, 2006, from <http://www.unhcr.org/news/NEWS/453391fd4.html>
- United Nations High Commissioner for Refugees. (2006b). *The state of the world's refugees 2006: Human displacement in the new millennium*. Retrieved October 8, 2006, from <http://www.unhcr.org/cgi-bin/texis/vtx/publ/opendoc.htm?tbl=PUBL&id=4444d3cc2>
- United Nations High Commissioner for Refugees. (2006c). *2005 Global refugee trends*. Retrieved September 22, 2006, from <http://www.unhcr.org/cgi-bin/texis/vtx/statistics/opendoc.pdf?tbl=STATISTICS&id=4486ceb12>

- U.S. Department of State. (2004). *New United States policy on landmines: Reducing humanitarian risk and saving lives of United States soldiers*. Retrieved September 29, 2006, from <http://www.state.gov/t/pm/rls/fs/30044.htm>
- Wali, S., Gould, E., & Fitzgerald, P. (2005). The impact of political conflict on women: The case of Afghanistan. In P. S. Rothenberg (Ed.), *Beyond borders: Thinking critically about global issues* (pp. 311–315). New York: Worth Publishers.
- Ward, J., & Marsh, M. (2006). *Sexual violence against women and girls in war and its aftermath: Realities, responses, and required resources*. Retrieved August 30, 2006, from <http://www.unfpa.org/emergencies/symposium06/docs/finalbrusselsbriefingpaper.pdf>
- Wilgoren, J. (2005, June 4). Refugees in limbo: Ordered out of U.S., but with nowhere to go. *The New York Times*, p. A1, A9.

Chapter Six

- Activists urge action against HIV/AIDS for India's young. (2002). *Contemporary Sexuality*, 36(12), 9.
- Agha, S. (2002). An evaluation of the effectiveness of a peer sexual health intervention among secondary-school students in Zambia. *AIDS Education and Prevention*, 14(4), 269–281.
- Altman, L. K. (2006, May 31). Report shows AIDS epidemic slowdown in 2005. *New York Times*. Retrieved June 7, 2006, from <http://www.nytimes.com>
- Altman, L. K. (2006, August 14). AIDS effort in Zambia hailed as a success. *New York Times*. Retrieved August 14, 2006, from <http://www.nytimes.com>
- Altman, L. K. (2006, August 16). An official puts focus on children at AIDS talks. *New York Times*. Retrieved August 16, 2006, from <http://www.nytimes.com>
- Altman, L. K. (2006, August 19). U.N. official assails South Africa on its response to AIDS. *New York Times*, p. A3.
- Altman, L. K. (2007, February 1). Tests of drug to block H.I.V. infection are halted over safety. *New York Times*. Retrieved February 1, 2007, from <http://www.nytimes.com>
- Berry, S. (2006). *HIV and AIDS in Uganda*. Retrieved February 24, 2006, from <http://www.avert.org/aidsuganda.htm>
- Bhattacharya, G. (2004). Sociocultural and behavioral contexts of condom use in heterosexual married couples in India: Challenges to the HIV prevention program. *Health Education and Behavior*, 31(1), 101–117.
- Bryceson, D. F., & Fonseca, J. (2005). *Risking death for survival: Peasant response to hunger and HIV/AIDS in Malawi*. Retrieved February 24, 2006, from <http://www.ifpri.org/events/conferences/2005/durban/papers/brycesonWP.pdf>

- Campbell, C., Foulis, C. A., Maimame, S., & Sibiyi, Z. (2005). "I have an evil child at my house": Stigma and HIV/AIDS management in a South African community. *American Journal of Public Health*, 95(5), 808–815.
- Central Intelligence Agency (CIA). (2005). *Malawi*. Retrieved December 31, 2005, from <http://www.cia.gov/cia/publications/factbook/geos/mi.html>
- Commission on HIV/AIDS and governance in Africa. (n.d.). *The impacts of HIV/AIDS on families and communities in Africa*. Retrieved March 18, 2006, from http://www.uneca.org/chga/doc/impact_family.pdf
- D'Adesky, A. (2004). *Moving mountains: The race to treat global AIDS*. New York: Verso.
- D'Agnes, T. (2001). *From condoms to cabbages: An authorized biography of Mechai Viravaidya*. Bangkok: Post Books.
- Doctors Without Borders. (2005a). *MSF's projects for people with HIV/AIDS*. Retrieved February 11, 2006, from <http://www.doctorswithoutborders.org/news/hiv-aids/hiv-aids.htm>
- Doctors Without Borders. (2005b). *Improving AIDS care*. Retrieved February 11, 2006, from <http://www.doctorswithoutborders.org/news/malawi.cfm>
- Doctors Without Borders. (2005, November 1). *AIDS in Malawi: Tuesday is children's day*. Retrieved August 19, 2006, from http://www.doctorswithoutborders.org/news/2005/11-01-2005_1.htm
- Doctors Without Borders. (2005, November 21). *Living with HIV/AIDS in China*. Retrieved February 11, 2006, from <http://www.doctorswithoutborders.org/news/2005/11-21-2005.cfm>
- Doctors Without Borders. (2005, December 10). *The second wave of the access crisis: Unaffordable AIDS drug prices ... again*. Retrieved February 11, 2006, from http://www.doctorswithoutborders.org/news/hiv-aids/briefing_doc_12-10-2005.htm
- Dugger, C. W. (2004, November 26). Africa needs more health workers, report says. *New York Times*, p. A18.
- Dugger, C. W. (2006, August 6). Cheap solutions cut AIDS toll for poor Kenyan youths. *New York Times*, p. A13.
- Elmer-DeWitt, P. (2005, November 7). Champion of the poor. *Time*. Retrieved February 11, 2006, from Academic Search Premier database.
- Evans, R. (2002). Poverty, HIV, and barriers to education: Street children's experiences in Tanzania. *Gender and Development*, 10(3), 51–62.
- Farmer, P. (2005). *Pathologies of power: Health, human rights, and the new war on the poor*. Los Angeles: University of California Press.
- Fattah, H. M. (2006, August 8). Saudi Arabia begins to face its hidden AIDS problem. *New York Times*, p. A3.

- Feachem, R. (2004). *Financing global public health: Innovation and investment*. Retrieved February 23, 2006, from http://www.theglobalfund.org/en/media_center/speeches/speech_feachem_040411.asp
- Fighting AIDS in China. (2003). *Asia Pacific Biotech News*, 7(19), 1206–1209.
- Gausset, Q. (2001). AIDS and cultural practices in Africa: The case of the Tonga (Zambia). *Social Science and Medicine*, 52, 509–518.
- Greene, S. (2006). Dairy cows fuel hopes of young and old Ethiopians. *Oxfam America*. Retrieved August 12, 2006, from http://www.oxfamamerica.org/whatwedo/where_we_work/ethiopia/news_publications/feature_story.2006-02-09.7528638719
- Grieg, F. E., & Koopman, C. (2003). Multilevel analysis of women's empowerment and HIV prevention: Quantitative survey results from a preliminary study in Botswana. *AIDS and Behavior*, 7(2), 195–208.
- Haitian Ministries for the Norwich Diocese. (n.d.). *La Maison l'Arc-en-Ciel (Rainbow House)*. Retrieved June 9, 2006, from http://www.haitianministries.org/la_maison_larc-en-ciel.php
- Harman, D. (2002, November 15). How AIDS brings famine nearer. *Christian Science Monitor*. Retrieved January 7, 2005, from <http://www.csmonitor.com>
- Human Rights Watch. (2004). *Future forsaken: Abuses against children affected by HIV/AIDS in India*. Retrieved February 24, 2006, from <http://hrw.org/reports/2004/india0704>
- Human Rights Watch. (2005). *The less they know, the better: Abstinence-only HIV/AIDS programs in Uganda*. Retrieved March 18, 2006, from <http://hrw.org/reports/2005/uganda0305/uganda0305.pdf>
- Human Rights Watch. (2006). *D.R. Congo: Election poses dangers for street children*. Retrieved June 7, 2006, from http://hrw.org/english/docs/2006/04/01/congo13111_txt.htm
- Irish Red Cross. (2003). *Malawi needs our help*. Retrieved January 3, 2006, from <http://www.redcross.ie/news/review/2003/0303c.html>
- Johns Hopkins University. (2005). *Malawi*. Retrieved February 26, 2006, from <http://www.jhuccp.org/africa/malawi>
- Kakuchi, S. (2006, January 9). HIV breeds on complacent attitudes among youth. *Inter Press Service News Agency*. Retrieved January 9, 2006, from <http://www.ipsnews.net/print.asp?idnews=31235>
- Kanabus, A. (2005). *HIV and AIDS in China*. Retrieved on August 25, 2005, from <http://www.avert.org/aidschina.htm>
- Kanabus, A., & Fredriksson, J. (2005). *HIV and AIDS in Thailand*. Retrieved on August 25, 2005, from <http://www.avert.org/aidsthai.htm>
- Kaufman, C. E., Clark, S., Manzini, N., & May, J. (2004). Communities, opportunities, and adolescents' sexual behavior in KwaZulu-Natal, South Africa. *Studies in Family Planning*, 35(4), 261–274.

- Kidder, T. (2003). *Mountains beyond mountains: The quest of Dr. Paul Farmer, a man who would cure the world*. New York: Random House.
- Kumar, S. (2005, December 30). Gov't may gift free drugs to the poor in the new year. *Mumbai Mirror*. Retrieved January 2, 2006, from <http://www.mumbaimirror.com>
- LaFraniere, S. (2004, June 14). Mandatory tests bolster Botswana's war on AIDS. *New York Times*. Retrieved February 24, 2006, from <http://www.nytimes.com>
- LaFraniere, S. (2005, May 11). AIDS now compels Africa to challenge widow's 'cleansing.' *New York Times*. Retrieved January 3, 2006, from <http://www.nytimes.com>
- LaFraniere, S. (2005, June 3). AIDS, pregnancy and poverty trap ever more African girls. *New York Times*. Retrieved June 8, 2005, from <http://www.nytimes.com>
- LaFraniere, S. (2005, October 25). U.N. envoy sharply criticizes South Africa's AIDS program. *New York Times*, p. A9.
- LaFraniere, S. (2005, December 30). Women's rights laws and African custom clash. *New York Times*. Retrieved January 3, 2006, from <http://www.nytimes.com>
- LaFraniere, S. (2006, March 8). Slowly, Africa starts to care for AIDS children. *New York Times*, pA1, A8.
- LaFraniere, S. (2006, April 27). Circumcision studied in Africa as AIDS preventive. *New York Times*. Retrieved June 9, 2006, from Lexis/Nexis Database.
- Lim, S., & Cameron, M. (2004). *Reducing HIV/AIDS prevalence: A dynamic model of labour migration in Northeast Thailand*. Paper presented at the annual conference of the New Zealand Association of Economists, Wellington, New Zealand. Retrieved June 7, 2006, from <http://www.nzae.org.nz/conferences/2004/95-Lim-Cameron.pdf>
- Luke, N. (2005). Confronting the 'sugar daddy' stereotype: Age and economic asymmetries and risky sexual behavior in urban Kenya. *International Family Planning Perspectives*, 31(1), 6–14.
- Lwanda, J. (2003). The (in)visibility of HIV/AIDS in the Malawi public sphere. *African Journal of AIDS Research*, 2(2), 113–126.
- Lwanda, J. (2005). *Politics, culture and medicine in Malawi: Historical continuities and ruptures with special references to HIV/AIDS*. Zomba, Malawi: Kachere Series.
- Lwanda, J. L. (2004). Politics, culture, and medicine: An unholy trinity? Historical continuities and ruptures in the HIV/AIDS story in Malawi. In E. Kalipeni, S. Craddock, J. R. Oppong, & J. Ghosh (Eds.), *HIV and AIDS in Africa: Beyond Epidemiology* (pp. 29–42). Malden, MA: Blackwell Publishers.

- Macan-Markar, M. (2006). *Thailand: Free trade with US will hurt health care*. Retrieved February 11, 2006, from <http://www.ipsnews.net/news.asp?idnews=31978>
- Mattson, C. L., Bailey, R. C., Muga, R. Poulussen, R., & Onyango, T. (2005). Acceptability of male circumcision and predictors of circumcision preference among men and women in Nyanza Province, Kenya. *AIDS Care*, 17(2), 182–194.
- McCoy, D., Chopra, M., Loewenson, R., Aitken, J., Ngulube, T., Muula, A. et al. (2005). Expanding access to antiretroviral therapy in Sub-Saharan Africa: Avoiding the pitfalls and dangers, capitalizing on the opportunities. *American Journal of Public Health*, 95(1), 18–22.
- McNeil, D. G. (2005, January 26). A path to cheaper AIDS drugs for poor nations. *New York Times*. Retrieved January 26, 2005, from <http://www.nytimes.com>
- McNeil, D. G. (2005, March 24). India alters law on drug patents. *New York Times*. Retrieved March 24, 2005, from <http://www.nytimes.com>
- McNeil, D. G. (2005, April 12). Clinton starts AIDS drug plan. *New York Times*, p. D2.
- McNeil, D. G. (2006, January 12). Clinton Foundation strikes deal on cutting AIDS treatment costs. *New York Times*, p. A11.
- Mitchell, A. (2005, January 27). Doctors leave poor nations, report says. *The Patriot News*, p. A10.
- Mutume, G. (2001). Malawi battles AIDS orphan nightmare. *Africa Recovery*. Retrieved January 3, 2006, from <http://www.un.org/ecosocdeve/geninfo/afrec/vol15no3/153chil5.htm>
- National AIDS Commission. (2003). *HIV/AIDS in Malawi*. Retrieved January 3, 2006, from http://www.synergyaids.com/documents/MAL_AIDS.pdf
- Nullis, C. (2005, May 6). South African official touts nutrition over anti-AIDS drugs. *The Patriot News*, p. A12.
- One in four urban girls less than 14 yrs old has experienced sex. (2005, December 30). *Mumbai Mirror*. Retrieved January 2, 2006, from <http://www.mumbaimirror.com>
- Osava, M. (2005, November 30). Brazil: Well on the way to eliminating maternal transmission of HIV. *Inter-Press Service News Agency*. Retrieved January 9, 2006, from <http://www.ipsnews.net/print.asp?idnews=31243>
- Panos. (n.d.). *UNGASS monitoring: Malawi*. Retrieved August 8, 2006, from http://www.panosaid.org/publications/ungass_malawi_prelim.pdf
- Partners in Health. (2006). *Next stop: Lesotho*. Retrieved August 9, 2006, from <http://www.pih.org/Lesotho-july2006.html>

- Partners in Health. (2005a). *Haiti: Zanmi Lasante*. Retrieved February 11, 2006, from <http://www.pih.org/wherewework/haiti/index.html>
- Partners in Health. (2005b). *Rwanda: Project overview*. Retrieved February 11, 2006, from <http://www.pih.org/wherewework/rwanda/index.html>
- Pettifor, A. E., Measham, D. M., Rees, H. V., & Padian, N. S. (2004). Sexual power and HIV risk, South Africa. *Emerging Infectious Diseases*, 10(11). Retrieved March 17, 2006, from <http://www.cdc.gov/ncidod/eid/vol10no11/04-0252.htm>
- Pettifor, A. E., Rees, H. V., Kleinschmidt, I., Steffenson, A. E., MacPhail, C., Hlongwa-Madikizela, L., et al. (2005). Young people's sexual health in South Africa: HIV prevalence and sexual behaviors from a nationally representative household survey. *AIDS*, 19(14), 1525–1534
- Phiri, Z. (2002). *Inculturing African widowhood rites*. Retrieved January 22, 2006, from <http://www.jctr.org.zm/bulletins/incult-widows.htm>
- Plusnews. (2003, March 28). *Traditional culture spreading HIV/AIDS*. Retrieved January 3, 2006, from <http://new.hst.org.za/news/index.php/20030401>
- Rajaraman, D., Russell, S., & Heymann, J. (2006). HIV/AIDS, income loss and economic survival in Botswana. *AIDS Care*, 18(7), 656–662.
- Rankin, S. H., Lindgren, T., Rankin, W. W., & Ng'oma, J. (2005). Donkey work: Women, religion and HIV/AIDS in Malawi. *Health Care for Women International*, 26, 4–16.
- Record HIV/STI rates prompt government ads in England. (2002). *Contemporary Sexuality*, 36(7), 7–8.
- Reed, J. (2005, December 29). Stumbling towards tragedy in Malawi. *Business Week*. Retrieved January 3, 2006, from <http://allafrica.com/stories/printable/200512290392.html>
- Reidpath, D. D., & Chan, K. Y. (2005). HIV discrimination: Integrating the results from a six-country situational analysis in the Asia Pacific. *AIDS Care*, 17(Supplement 2), S195–S204.
- Renwick, N. (2002). The 'nameless fever': The HIV/AIDS pandemic and China's women. *Third World Quarterly*, 23(2), 377–393.
- Rinaldo, R. (2004, February 18). *Culture-Uganda: A price above rubies*. Inter-Press Service. Retrieved August 7, 2006, from <http://www.aegis.com/news/ips/2004/IP040219.html>
- Rosenberg, T. (2006, August 6). When a pill is not enough. *New York Times*. Retrieved August 7, 2006, from <http://www.nytimes.com>
- Roth, J., Krishnan, S. P., & Bunch, E. (2001). Barriers to condom use: Results from a study in Mumbai (Bombay), India. *AIDS Education and Prevention*, 13(1), 65–77.

- Russell, S. (2005, November 1). 4 drugs hold promise for new HIV preventative. *San Francisco Chronicle*. Retrieved January 22, 2006, from Lexis/Nexis database.
- Sachdev, P. (1998). AIDS/HIV and university students in Delhi, India: Knowledge, beliefs, attitudes and behaviors. *Social Work in Health Care*, 26(4), 37–57.
- Safman, R. M. (2004). Assessing the impact of orphanhood on Thai children affected by AIDS and their caregivers. *AIDS Care*, 16(1), 11–19.
- Sudha, R. T., Vijay, D. T., & Lakshmi, V. (2005). Awareness, attitudes and beliefs of the general public towards HIV/AIDS in Hyderabad, a capital city from south India. *Indian Journal of Medical Sciences*, 59(7), 307–316.
- Sumbuleta, A. (2005, May 17). Mums-to-be shun Malawi HIV tests. *BBC News*. Retrieved January 21, 2006, from <http://news.bbc.co.uk/1/hi/world/africa/4551767.stm>
- Sunmola, A. M. (2005). Sexual practices, barriers to condom use and its consistent use among long distance truck drivers in Nigeria. *AIDS Care*, 17(2), 208–221.
- Tang, A. (2005, October 3). AIDS believed on the rise again in Thailand. *Associated Press*. Retrieved February 12, 2006, from Lexis/Nexis database.
- Thompson, D. (2005). *China confronts HIV/AIDS*. Retrieved October 18, 2005, from <http://www.prb.org/pdf05/ChinaConfrontsHIVAIDS.pdf>
- Tlilane, N. K. (2004). Healthcare funding problems in Algeria. *International Social Security Review*, 57, 91–110.
- U.N. AIDS. (2004a). *Women and AIDS—A growing challenge*. Retrieved December 31, 2005, from http://www.unaids.org/NetTools/Misc/DocInfo.aspx?LANG=en&href=http://gva-doc-owl/WEBcontent/Documents/pub/Publications/Fact-Sheets04/FS_Women_en.pdf
- U.N. AIDS. (2004b). *2004 report on the global AIDS epidemic*. Retrieved March 17, 2006, from http://www.unaids.org/bangkok2004/GAR2004_html/ExecSummary_en/Execsumm_en.pdf
- U.N. AIDS. (2004c). *UNAIDS at country level*. Retrieved March 19, 2006, from http://www.unaids.org/en/Regions_Countries/Countries/malawi.asp
- U.N. AIDS. (2005a). *Women and girls bear brunt of AIDS worldwide, UN rights experts recall*. Retrieved December 31, 2005, from <http://www.unhcr.ch/hurricane/hurricane.nsf/view01/74F1E47D756C89E5C12570CA003357F7?opendocument>
- U.N. AIDS. (2005b). *AIDS in Africa: Three scenarios to 2025*. Retrieved January 3, 2006, from http://www.unaids.org/unaidresources/images/AIDSScenarios/AIDS-scenarios-2025_report_en.pdf

- U.N. AIDS. (2005c). *Educate girls, fight AIDS*. Retrieved January 3, 2006, from http://www.ungei.org/docs_resources/gwca_fs_girls_education_issue_eng.pdf
- U.N. AIDS (2005d). *The female AIDS epidemic: 2005*. Retrieved March 11, 2006, from <http://womenandaids.unaids.org/womenandaidsnovfin.doc>
- U.N. AIDS. (2006a). *2006 report on the global AIDS epidemic*. Retrieved June 9, 2006, from http://www.unaids.org/en/HIV_data/2006GlobalReport/default.asp
- U.N. AIDS. (2006b). *Economic security for women key to HIV prevention*. Retrieved April 19, 2006, from <http://www.unaids.org/en/MediaCentre/PressMaterials/FeatureStory/20060308-economicsecurity.asp>
- U.N. AIDS (n.d.a). *Economic security for women fights AIDS*. Retrieved March 11, 2006, from http://data.unaids.org/pub/BriefingNote/2006/20060308_BN_GCWA_en.pdf
- U.N. AIDS. (n.d.b). *Preventing HIV infection in girls and young women*. Retrieved January 3, 2006, from <http://womenandaids.org/resources/default.html>
- U.N. AIDS. (n.d.c). *Microbicides, women and AIDS*. Retrieved January 3, 2006, from <http://womenandaids.org/resources/default.html>
- UNICEF. (2005). *Zimbabwe's HIV infection rate falls, but much still to be done*. Retrieved June 7, 2006, from http://www.unicef.org/infobycountry/media_28660.html
- UNICEF. (n.d.a). *HIV/AIDS is Haiti's constant crisis*. Retrieved January 2, 2006, from http://www.unicef.org/emerg/haiti/index_haitis_constant_crisis.html
- UNICEF. (n.d.b). *China: 'Four frees and one care.'* Retrieved January 21, 2006, from http://www.unicef.org/uniteforchildren/press/press_29119.htm
- UNICEF. (n.d.c). *About the campaign*. Retrieved March 18, 2006, from http://www.unicef.org/uniteforchildren/makeadifference/makediff_29274.htm
- UNICEF. (n.d.d). *At a glance: China. AIDS campaign gather momentum in China*. Retrieved January 21, 2006, from http://www.unicef.org/infobycountry/china_30750.html
- UNICEF. (n.d.e). *Malawi: Monica's struggle for education*. Retrieved January 21, 2006, from http://www.unicef.org/uniteforchildren/press/press_29116.htm
- United Nations Development Programme (UNDP). (2004). *Opinion poll on HIV/AIDS Thailand*. Retrieved February 23, 2006, from <http://www.undp.or.th/docs/OpinionPollAIDS.pdf>
- United Nations Development Programme (UNDP). (2005). *Country fact sheets: Malawi*. Retrieved December 31, 2005, from http://hdr.undp.org/statistics/data/country_fact_sheets/cty_fs_MWI.html

- U.S. Agency for International Development (USAID). (2005). *Health profile: Malawi*. Retrieved January 3, 2006, from http://www.usaid.gov/our_work/global_health/aids/Countries/Africa/malawi_05.pdf
- U.S. Agency for International Development (USAID). (n.d.). *Macro: Offering free HIV testing and meeting growing demand for information on AIDS*. Retrieved January 3, 2006, from http://www.usaid.gov/mw/news_and_press/events_news.htm
- Van, K., & Dung, T. (2006, February 8). Street children miss HIV/AIDS fight. *VietNam News*. Retrieved February 10, 2006, from http://www.asianews.net.net/print_template.php?news_id=52190&13sec=12
- van Amerongen, A., & van Kesteren, G. (2000). *Mwendanjangula! AIDS in Zambia*. Cape Town, South Africa: David Philip.
- Waldman, A. (2005, December 6). On India's roads, cargo and a deadly passenger. *New York Times*. Retrieved March 18, 2006, from LexisNexis database.
- Wax, E. (2005, October 7). Virginity becomes a commodity in Uganda's war against AIDS. *Washington Post*. Retrieved October 10, 2005, from <http://www.washingtonpost.com>
- Weissman, A., Cocker, J., Sherburne, L., Powers, M. B., Lovich, R., & Mukaka, M. (n.d.). *Cross-generational relationships: Using a 'continuum of volition' in HIV prevention work among young people*. Retrieved January 11, 2006, from http://www.savethechildren.org/publications/Cross_Generational_Relationships.pdf
- Wines, M., & LaFraniere, S. (2004, November 28). Hut by hut, AIDS steals life in a southern Africa town. *New York Times*, p. A1, A14, A15.
- World Bank. (1997). *Confronting AIDS: Public priorities in a global epidemic*. Retrieved February 23, 2006, from <http://www.worldbank.org/aids-econ/confront>
- World Food Programme. (2006). *World hunger—Malawi*. Retrieved March 19, 2006, from http://www.wfp.org/country_brief/indexcountry.asp?region=3§ion=9&sub_section=3&country=454
- Yardley, J. (2006, January 25). New survey reduces estimate of AIDS and HIV cases in China. *New York Times*. Retrieved January 25, 2006, from <http://www.nytimes.com>

Chapter Seven

- Afkhami, M. (2001). Gender apartheid, cultural relativism, and women's human rights in Muslim societies. In M. Agosin (Ed.), *Women, gender and human rights: A global perspective* (pp. 234–245). New Brunswick, NJ: Rutgers University Press.

- Agosin, M. (2001). Introduction. In M. Agosin (Ed.), *Women, gender and human rights: A global perspective* (pp. 1–11). New Brunswick, NJ: Rutgers University Press.
- Aminuzzaman, S., Baldersheim, H., & Jamil, I. (2003). Talking back! Empowerment and mobile phones in rural Bangladesh: A study of the Village Phone Scheme of Grameen Bank. *Contemporary South Asia*, 12(3), 327–348.
- Amnesty International. (2004a). *Making violence against women count*. Retrieved August 25, 2006, from [http://web.amnesty.org/library/pdf/ACT770362004ENGLISH/\\$File/ACT7703604.pdf](http://web.amnesty.org/library/pdf/ACT770362004ENGLISH/$File/ACT7703604.pdf)
- Amnesty International. (2004b). *Saudi Arabia: Women's exclusion from elections undermines progress*. Retrieved September 9, 2006, from <http://web.amnesty.org/library/index/engMDE230152004?open&of=eng-SAU>
- Arenson, K. W. (2005, November 4). Tufts is getting gift of \$100 million, with rare strings. *New York Times*, p. A16.
- Ash, L. (2003, July 16). *India's dowry deaths*. Retrieved August 26, 2006, from http://news.bbc.co.uk/2/hi/programmes/crossing_continents/3071963.stm
- Association for Women's Rights in Development. (2002a). *The convention on the eliminations of all forms of discrimination against women and the optional protocol*. Retrieved September 11, 2006, from <http://www.awid.org/publications/primers/factsissues2.pdf>
- Association for Women's Rights in Development. (2002b). *The World Bank and women's rights in development*. Retrieved September 9, 2006, from <http://www.awid.org/publications/primers/factsissues5.pdf>
- Ayton-Shenker, D. (1995). *The challenge of human rights and cultural relativism*. Retrieved June 24, 2005, from <http://www.un.org/rights/dpi1627e.htm>
- Balatchandirane, G. (2003). Gender discrimination in education and economic development: A study of South Korea, China and India. *International Studies*, 40(4), 349–378.
- Benard, C. (2002). *Veiled courage: Inside the Afghan women's resistance*. New York: Broadway Books.
- Bernasek, A. (2003). Banking on social change: Grameen Bank lending to women. *International Journal of Politics, Culture and Society*, 16(3), 369–385.
- Bhatt, E. (2006). *We are poor but so many: The story of self-employed women in India*. New York: Oxford University Press.
- Bilefsky, D. (2006, July 16). How to avoid honor killing in Turkey? Honor suicide. *New York Times*. Retrieved July 18, 2006, from <http://www.nytimes.com>
- Brodsky, A. (2003). *With all our strength*. New York: Routledge.
- Bruni, F. (2004, February 1). Doctor in Italy tries to ease pain of an African tradition. *New York Times*, p. A3.

- Central Intelligence Agency (CIA). (2006). *The world factbook: Bangladesh*. Retrieved September 8, 2006, from <http://www.cia.gov/cia/publications/factbook/geos/bg.html>
- Coleman, I. (2005). Development: The payoff from women's rights. In R. J. Griffiths (Ed.), *Developing World 05/06: Annual editions* (pp. 191–196). Dubuque, IA: McGraw/Hill.
- Damore, K. (2004). *Pulling their own purse strings*. Retrieved February 10, 2006, from http://www.oxfamamerica.org/whatwedo/where_we_wrok/west_africa/news_publications/art7176.html
- Dauer, S. (2001). Indivisible or invisible: Women's human rights in the public and private sphere. In M. Agosin (Ed.), *Women, gender and human rights: A global perspective* (pp. 65–82). New Brunswick, NJ: Rutgers University Press.
- Develtere, P., & Huybrechts, A. (2005). The impact of microcredit on the poor of Bangladesh. *Alternatives*, 30, 165–189.
- Devraj, R. (2003). *A murderous arithmetic*. Retrieved August 26, 2006, from <http://www.indiatogether.org/2003/jul/wom-girls.htm>
- Faith, N. (2004, September 19). Iran moves to roll back rights won by women. *New York Times*, p. A17.
- Gall, C. (2004, March 8). For more Afghan women, immolation is escape. *New York Times*, p. A1.
- Gall, C. (2006, September 25). Gunmen kill Afghan women's advocate. *New York Times*. Retrieved September 26, 2006, from <http://www.nytimes.com>
- Gooneratne, A. (2005, December 8). Microcredit poised to reach 100 million families. *Inter Press Service News Agency*. Retrieved January 9, 2006, from <http://www.ipsnews.net>
- Grameen Bank. (2002). *A short history of Grameen Bank*. Retrieved September 2, 2006, from <http://www.grameen-info.org/bank/hist.html>
- Grameen Bank. (2006a). *Grameen Bank*. Retrieved September 2, 2006, from <http://www.grameen-info.org/bank.index.html>
- Grameen Bank. (2006b). *The 16 decisions of Grameen Bank*. Retrieved September 2, 2006, from <http://www.grameen-info.org/bank/the16.html>
- Hayford, S. R. (2005). Conformity and change: Community effects on female genital cutting in Kenya. *Journal of Health and Social Behavior*, 46(2), 121–140.
- Homolo, V. (2006, April 14). Turkish man sentenced in “honor killing” of sister. *New York Times*. Retrieved August 27, 2006, from <http://www.nytimes.com>
- Human Rights Watch. (2005). *CEDAW: The women's treaty*. Retrieved August 24, 2006, from <http://www.hrw.org/campaigns/cedaw>
- Human Rights Watch. (2006). *Forms of violence against women in Pakistan*. Retrieved August 26, 2006, from <http://www.hrw.org/campaigns/pakistan/forms.htm>

- In the name of honor: A memoir.* (n.d.). Retrieved September 11, 2006, from <http://www.simonsays.com/content/book.cfm?tab=3&pid=521668>
- Jha, P., Kumar, R., Vasa, P., Dhingra, N., Thiruchelvam, D., & Moineddin, R. (2006). Low male-to-female sex ratio of children born in India: National survey of 1.1 million households. *Lancet*, 367, 211–218.
- Kahn, J. (2006, June 1). Crackdown on abortion of girls. *New York Times*. Retrieved August 26, 2006, from <http://www.nytimes.com>
- Kassindja, F. (1998). *Do they hear you when you cry?* New York: Dell.
- Kaur, G. (2006). *Foeticide journeys*. Retrieved August 26, 2006, from <http://www.indiatogether.org/2006/aug/wom-usfoet.htm>
- Kishwar, M. P. (2005). Destined to fail. *Manushi*, 148. Retrieved August 26, 2006, from <http://www.indiatogether.org/manushi/issue148.dowry.htm>
- Kristof, N. (2002, April 26). Devastated women. *New York Times*. Retrieved September 13, 2006, from <http://www.nytimes.com>
- Kristof, N. (2005, March 5). When rapists walk free. *New York Times*. Retrieved September 13, 2006, from <http://www.nytimes.com>
- LaFraniere, S. (2005, September 28). Nightmare for African women: Birthing injury and little help. *New York Times*. Retrieved September 28, 2005, from <http://www.nytimes.com>
- Lederer, E.M. (2004). Eighty-five nations endorse U.N. population agenda, but Bush administration refuses to sign. *Associated Press*. Retrieved August 24, 2006, from LexisNexis database.
- Leidl, P. (2006). *Dying to give life: Maternal mortality in Afghanistan*. Retrieved August 26, 2006, from <http://www.unfpa.org/news/news.cfm?ID=822&Language=1>
- Mansoor, W. (2002). The mission of RAWA: Freedom, democracy, human rights. In S. Mehta (Ed.), *Women for Afghan women: Shattering myths and claiming the future* (pp. 68–83). New York: Palgrave.
- McCloskey, L. A., Williams, C., & Larsen, U. (2005). Gender inequality and intimate partner violence among women in Moshi, Tanzania. *International Family Planning Perspectives*, 31(3), 124–130.
- Merry, S. E. (2001). Women, violence, and the human rights system. In M. Agosin (Ed.), *Women, gender and human rights: A global perspective* (pp. 83–97). New Brunswick, NJ: Rutgers University Press.
- “No Dowry” campaign launched. (2002). Retrieved October 10, 2005, from <http://www.indiatogether.org/women/dowry/campaign.htm>
- Oldenburg, V. T. (2002). *Dowry murder: The imperial origins of a cultural crime*. New York: Oxford University Press.
- Onolemhemhen, D. N. (2005). *A social worker's investigation of childbirth-injured women in northern Nigeria*. New York: University Press of America.

- Person of the week: Mukhtar Mai. (2005, October 21). *ABC News*. Retrieved September 11, 2006, from <http://abcnews.go.com/WNT/print?id=1237950>
- Population Reference Bureau. (2005). *Unsafe abortion: Facts and figures*. Retrieved October 18, 2005, from <http://www.prb.org/Template.cfm?Section=PRB&template=/ContentManagement/ContentDisplay.cfm&ContentID=12766>
- Rani, M., Bonu, S., & Diop-Sidibé, N. (2004). An empirical investigation of attitudes towards wife beating among men and women in seven sub-Saharan African countries. *African Journal of Reproductive Health*, 8(3), 116–136.
- Retreat on criminalizing gender abortions. (2006, June 27). *New York Times*. Retrieved July 1, 2006, from <http://www.nytimes.com>
- Revolutionary Women's Association of Afghanistan (RAWA). (n.d.). *About RAWA*. Retrieved September 10, 2006, from <http://www.rawa.org/rawa.html>
- Ryan, W. A. (2006). *Fistula repair facility brings hope to the outcast*. Retrieved August 26, 2006, from <http://www.unfpa.org/news/news.cfm?ID=818>
- Salhi, Z. S. (2003). Algerian women, citizenship, and the “family code.” *Gender and Development*, 11(3), 27–35.
- Self-Employed Women's Association. (n.d.). *SEWA: Self-Employed Women's Association*. Retrieved September 1, 2006, from <http://www.sewa.org>
- Sev'er, A., & Yurdakul, G. (2005). Culture of honor, culture of change: A feminist analysis of honor killings in rural Turkey. In P. S. Rothenberg (Ed.), *Beyond borders: Thinking critically about global issues* (pp. 288–306). New York: Worth Publishers.
- Sheth, S. S. (2006). Missing female births in India. *Lancet*, 367, 185–186.
- Surtees, R. (2003). Negotiating violence and non-violence in Cambodian marriages. *Gender and Development*, 11(2), 30–41.
- Tanveer, K. (2005, December 29). Pakistani father admits slaying 4 over “honor.” *The Patriot-News*, p. A9.
- UNICEF. (1999). *The state of the world's children 1999: Education*. Retrieved September 8, 2006, from http://www.unicef.org/publications/files/pub_sowc99_en.pdf
- UNICEF. (2003). *Every day, 1400 girls and women die giving birth*. Retrieved April 20, 2005, from http://www.unicef.org/media/media_7594.html
- UNICEF. (2005). *Changing a harmful social convention: Female genital mutilation/cutting*. Retrieved August 30, 2006, from <http://www.unicef-icdc.org/publications/pdf/fgm-gb-2005.pdf>
- UNICEF. (n.d.). *Factsheet: Female genital mutilation/cutting*. Retrieved January 11, 2006, from <http://www.unicef.org/protection/files/FGM.pdf>

- United Nations. (2005). *Creating an enabling environment for girls' and women's participation in education*. Retrieved July 24, 2006, from <http://www.un.org/womenwatch/daw/egm/enabling-environment2005/docs/EGM-WPD-EE-2005-EP.8%20%20A.pdf>
- United Nations. (2006a). *CEDAW: States parties*. Retrieved August 24, 2006, from <http://www.un.org/womenwatch/daw/cedaw/states.htm>
- United Nations. (2006b). *Reservations to CEDAW*. Retrieved August 24, 2006, from <http://www.un.org/womenwatch/daw/cedaw/reservations.htm>
- United Nations Girls' Education Initiative (UNGEI). (2006). *UNGEI fact sheet*. Retrieved September 9, 2006, from http://www.ungei.org/resources/files/ungei_fact_sheet.pdf
- United Nations Population Fund (UNFPA). (2004). *State of the world population 2004*. Retrieved August 30, 2006, from <http://www.unfpa.org/swp/2004/english/ch1/index.htm>
- United Nations Population Fund (UNFPA). (2005). *State of the world population 2005*. Retrieved August 30, 2006, from http://www.unfpa.org/upload/lib_pub_file/493_filename_en_swp05.pdf
- United Nations Population Fund (UNFPA). (2006a). *Fast facts: Fistula and reproductive health*. Retrieved August 26, 2006, from http://www.endfistula.org/fast_facts.htm
- United Nations Population Fund (UNFPA). (2006b). *34 million friends of UNFPA*. Retrieved September 1, 2006, from <http://www.unfpa.org/support/friends/34million.htm>
- United Nations Population Fund (UNFPA). (2006c). *From microfinance to macro change: Integrating health education and microfinance to empower women and reduce poverty*. Retrieved August 30, 2006, from http://www.unfpa.org/upload/lib_pub_file/530_filename_advocacy.pdf
- U.S. Department of State. (2001). *Egypt: Report on female genital mutilation (FGM) or female genital cutting (FGC)*. Retrieved August 26, 2006, from <http://www.state.gov/g/wi/rls/rep/crfgm/10096.htm>
- Van Soest, D., & Crosby, J. (1997). *Challenges of violence worldwide*. Washington, DC: NASW Press.
- Watana wants amendment to family law. (2005, October 16). *Bangkok Post*. Retrieved October 16, 2005, from <http://www.bangkokpost.com>
- Wipatayotin, A. (2005, November 29). Abuse of women, children soars. *Bangkok Post*. Retrieved November 29, 2005, from <http://www.bangkokpost.com>
- World Health Organization. (2005). *WHO multi-country study on women's health and domestic violence against women*. Retrieved August 26, 2006, from http://www.who.int/gender/violence/who_multicountry_study/summary_report/summary_report_English2.pdf

- World Health Organization. (2006). Female genital mutilation and obstetric outcome: WHO collaborative prospective study in six African countries. *Lancet*, 367, 1835–1841.
- Xu, X., Zhu, F., O'Campo, P., Koenig, M. A., Mock, V., & Campbell, J. (2005). Prevalence of and risk factors for intimate partner violence in China. *American Journal of Public Health*, 95(1), 78–85.
- Zaman, A. (2005, May 24). Where girls marry rapists for honour. *Los Angeles Times*. Retrieved October 10, 2005, from <http://www.kwahk.org/index.asp?id=71>

Chapter Eight

- Barton, C. (2005). Where to for women's movements and the MDGs? *Gender and Development*, 13(1), 25–35.
- Center for American Women and Politics. (2006). *Women officeholders: Fact sheets and summaries*. Retrieved August 15, 2006, from <http://www.cawp.rutgers.edu/Facts.html#congress>
- Duff-Brown, B. (2006, August 17). Most HIV patients still lack medicine, scientists say. *The Patriot-News*, p. A13.
- Earth Institute. (n.d.). *About the Millennium Villages project*. Retrieved August 15, 2006, from <http://www.earthinstitute.columbia.edu/mvp/about/index.html>
- Fowler, J. (2004, August 11). U.N. labor agency: Record youth joblessness could boost crime, terror. *Associated Press*. Retrieved August 19, 2006, from LexisNexis Database.
- Gooneratne, A. (2005, December 8). Microcredit poised to reach 100 million families. *Inter Press Service News Agency*. Retrieved January 9, 2006, from <http://www.ipsnews.net>
- Hayes, C. (2005). Out of the margins: The MDGs through a CEDAW lens. *Gender and Development*, 13(1), 67–78.
- Johnson, R. (2005). Not a sufficient condition: The limited relevance of the gender MDG to women's progress. *Gender and Development*, 13(1), 56–66.
- Lacquer, W. (2004). The terrorism to come. *Policy Review*, 126. Retrieved August 19, 2006, from <http://www.policyreview.org/aug04/laqueur.html>
- Millennium Campaign. (2006a). *What about the United States?* Retrieved August 15, 2006, from <http://www.millenniumcampaign.org/atf/cf/{D15FF017-0467-419B-823E-D6659E0CCD39}/WA%20-%20USA%20-%2031-07-06%20-%20POSTED.DOC>
- Millennium Campaign. (2006b). *Collapse of WTO trade talks on the Doha Round*. Retrieved August 15, 2006, from http://www.millenniumcampaign.org/site/apps/nl/content3.asp?c=grKVL2NLE&b=1111865&content_id={8D0915E5-FE60-448E-B70F-6B02A8C66DCA}¬oc=1

- Nolen, S. (2006, March 11). Millennium man. *The Globe and Mail*. Retrieved August 15, 2006, from <http://web.theglobeandmail.com/servlet/story/RTGAM.20060311.wxno1en0311/BNSStory/Front/home>
- One.Org (n.d.). *About the campaign*. Retrieved August 15, 2006, from <http://www.one.org/about>
- United Nations Development Programme. (2003). *Human development report 2003*. New York: Oxford University Press.
- United Nations Development Programme. (2006). *The Millennium Development Goals report 2006*. Retrieved August 14, 2006, from <http://mdgs.un.org/unsd/mdg/Resources/Static/Products/Progress2006/MDGReport2006.pdf>
- United Nations Development Programme. (n.d.). *About the MDGs: Basics*. Retrieved August 12, 2006, from <http://www.undp.org/mdg/basics.shtml>
- United Nations Millennium Campaign. (2006). *The 0.7% target: An in-depth look*. Retrieved August 13, 2006, from <http://www.unmillenniumproject.org/involved/action07.htm>
- United Nations Millennium Goals Indicators (2006). *Millennium Development Goals: 2006 progress chart*. Retrieved August 15, 2006, from <http://millenniumindicators.un.org/unsd/mdg/Resources/Static/Products/Progress2006/MDGProgressChart2006.pdf>
- United Nations Population Fund. (2006). *From microfinance to macro change: Integrating health education and microfinance to empower women and reduce poverty*. Retrieved August 30, 2006, from http://www.unfpa.org/upload/lib_pub_file/530_filename_advocacy.pdf

Chapter Nine

- Council on Social Work Education [CSWE]. (2007). *Katherine A. Kendall Institute for International Social Work Education*. Retrieved February 23, 2007, from <http://www.cswe.org/CSWE/centers/kendall>
- Diaz, L., Mama, R., & Lopez, L. (2006, August). *Making the social work profession an essential partner in international development*. Paper presented at the biennial conference of the International Federation of Social Workers, Munich, Germany.
- Homan, M. S. (2004). *Promoting community change: Making it happen in the real world* (3rd ed.). Belmont, CA: Wadsworth/Thomson.
- International Federation of Social Workers. (2000). *Definition of social work*. Retrieved July 19, 2006, from <http://www.ifsw.org/en/p38000208.html>
- Van Soest, D., & Crosby, J. (1997). *Challenges of violence worldwide: A curriculum module*. Washington, DC: NASW Press.

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