



# HUMAN TRAFFICKING IN SOUTH ASIA: ASSESSING THE EFFECTIVENESS OF INTERVENTIONS

## Rapid Evidence Assessment

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## Preface

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## Executive summary

### Introduction

This Rapid Evidence Assessment (REA) examines current evidence on the effectiveness of interventions to combat human trafficking in four South Asian countries (Bangladesh, India, Nepal, and Pakistan). This REA is being carried out as part of a wider assignment for the UK Department for International Development (DFID), with the overall objective of synthesising evidence on the effectiveness of interventions that tackle modern slavery in South Asia. Two REAs were conducted on different types of modern slavery, one on human trafficking for labour and sexual exploitation, and another on child labour (Idris *et al.*, 2020).

The research question for this REA is:

‘What has been the effect of interventions to combat and/or reduce sexual and labour exploitation in Bangladesh, Pakistan, India, and Nepal?’

Trafficking in persons is a form of ‘modern slavery’, which is an umbrella term for the variety of situations in which someone is forcibly controlled by an individual or group for the purpose of exploitation. The Global Slavery Index estimated that, on any given day in 2016, 40.3 million people were victims of modern slavery, including 24.9 million people in forced labour and 15.4 million people in forced marriage. Of the estimated almost 25 million people in modern slavery in Asia, 66% were exploited for labour (Global Slavery Index, 2018).

### Methods

This review employed an REA methodology to undertake a rigorous synthesis of the evidence base, within a limited timeframe. Full details of the approach are provided in the main report.

The bulk of the studies included in this REA were identified through the Modern Slavery Evidence Map (EM), prepared by the research team for DFID (Oosterhoff *et al.*, 2018). The EM identified the availability of evidence for modern slavery interventions in Bangladesh, India, Nepal, and Pakistan.

A total of 45 studies relating to human trafficking were found as part of the mapping. Based on a review of eligible study designs for this REA, these were filtered down to 35 eligible studies for data extraction, of which 18 were identified as relevant for inclusion in the REA. An additional three studies, collectively referred to as the South Asia Work in Freedom Transnational Evaluation (SWiFT) evaluation, which were published after the EM’s release, were included because of their direct relevance. This equates to a total of 21 studies.

After a second quality appraisal review of the studies (involving a third reviewer), six studies were removed as they were rated as being of low quality. The final REA is therefore based on a total of 15 studies.

To assess the quality of each study identified for inclusion in the REA, we applied a Quality Appraisal Tool (QAT). The QAT scored studies as of low, moderate, or high quality. This tool was designed to be used with all study designs.

Due to the very nascent stages of evaluations of interventions to prevent or respond to modern slavery and human trafficking in the evidence base as a whole, there were few studies identified in the search process that were considered to meet the inclusion threshold as either ‘moderate quality’ (N=10) or ‘high quality’ (N=5) studies. These studies have been included in this REA.

Observational study designs comprise the bulk of studies in this REA. This type of design has inherent limitations, especially in relation to the assessment of intervention effectiveness (e.g. Donger and Bhabha, 2018). We use the term ‘quality’ rather than ‘risk of bias’ to indicate that these studies were assessed based on the quality of the methodology for an observational study rather than theoretical grounds for risk of bias (Liberati *et al.*, 2009). For example, a qualitative trafficking study was assessed according to what a ‘good’ qualitative study design would be generally – it was not assessed relative to an experimental study, which is a stronger design to answer the research question of this REA. Experimental studies can demonstrate an intervention’s effectiveness. Observational studies cannot tell us about effectiveness, but they can offer an indication of the acceptability of an intervention, potential causal pathways, and implementation challenges.

Ultimately, after two rounds of quality appraisal (the second stage of which was conducted by an external reviewer) it was determined that ten of the studies were of moderate quality and five of high quality. Six studies were assessed as being of low quality and were excluded from the REA on this basis.

## Limitations

The evidence base was limited in terms of geographic scope, with the majority of studies from India (seven), followed by Nepal (five), and Bangladesh (four). No studies from Pakistan were included in the review. Other limitations include a lack of disaggregated results by gender and age group, as well as only limited analysis of broad intervention categories (rather than individual activities). Additionally, while some studies do report outcomes, many focus heavily on outputs (rather than outcomes) and therefore the effectiveness of many interventions is unclear. Studies ranked as moderate quality were in some cases limited by low sample sizes (unknown to N=20 for a mixed-methods study) and narrow geographic scope. Due to the gaps in the evidence and methodological limitations in many of the studies reviewed, the outcomes from the reviewed studies alone cannot be used as recommendations for policy and practice on trafficking in general, and nor can they be generalised to other contexts.

## Results

The studies reviewed include both pre- and post-trafficking interventions. These include awareness and education programmes, training, border monitoring, worker-led identification and unionisation, and rehabilitation and reintegration. Common outcomes of the studies included increased self-reported knowledge of victim identification and referral, and mitigation of risk factors. Only three of the studies included mention reduced incidence or prevalence of trafficking as an outcome.

Overall, this REA finds there is currently little to no robust evidence about the effectiveness of interventions that target human trafficking in South Asia. Moderate-quality studies were often weak and frequently lacked well-measured outcome indicators and disaggregated data, while rarely monitoring for adverse outcomes. Results from these studies often relied on self-reports rather than external evaluation measurement.

Ultimately, because of the gaps in the overall evidence base and the substantial methodological limitations across most of the moderate-quality studies, findings must be interpreted with caution. Greater consideration should be given to future investments in more rigorously conducted intervention evaluations. From the data that is available, however, several lessons can be considered for programming and future evaluation investment.

**Awareness campaigns and knowledge-building training (n=9).** The strongest studies included in this review were conducted on awareness campaigns and community-based knowledge-building

activities. None of the studies measured the effects of awareness raising and knowledge building on prevalence or incidence of trafficking. Only two studies (United States Agency for International Development (USAID), 2016; Berman and Marshall, 2011) measured people's application of new knowledge. The strongest findings came from the only randomised controlled trial (RCT) (moderate quality), which was conducted using locally designed, heavily piloted multi-media campaigns (radio, community meetings, posters, and graphic novels) with approximately 5,000 individuals in Nepal. This RCT found that narrative-based campaigns with positive appeals that aim to empower the audience were more effective than purely fact-based campaigns and campaigns aimed to scare the audience, on people's perceptions about the magnitude of trafficking in Nepal. Specifically, this evaluation, which included three rounds of data collection, found small intervention effects on individuals' initial perceptions of the risks of human trafficking, that it is an important national problem, but no changes in people's perceptions about its importance for themselves or their community locally—but even these effects nearly completely diminished over time. Campaigns were better at increasing knowledge of simple facts than shifting attitudes (USAID, 2016). One study found that screening activities with children enhanced their ability to identify trafficking situations, access livelihood support, and partnerships with private employers in an awareness programme in Bangladesh did not show outcomes for reduced prevalence. Participants' ability to encourage migrants to check recruiters' credentials and report trafficking cases increased, but the effect of this on prevalence is unknown (Berman and Marshall, 2011).

Another methodologically strong study was the five-year SWiFT multi-country and mixed-methods research and evaluation on community-based knowledge-building training activities. Two SWiFT studies (Blanchet *et al.*, 2018; Kiss *et al.*, 2019) were ranked as high quality, using robust methodology with qualitative interviews and pre- and post-intervention surveys, while one SWiFT study (Mak *et al.*, 2019), a post-intervention-only design with a limited sample, was moderately ranked. SWiFT results indicated that the training alone did not lead to an improvement in women's ability to protect themselves during migration. In some cases, the training messages tended to mislead women to believe they would be safe during migration, could assert their rights, and could rely on hotline services in emergencies. Findings indicate that individual-level interventions may, by themselves, have little effect because migrant workers have little power to assert new knowledge when pitted against systemic drivers of exploitation and widening power differentials along the migration trajectory (compared to recruiters, employers, and the authorities). This body of evidence raises questions about the value for money (VfM) of standalone awareness-raising and knowledge-building interventions as anti-trafficking strategies. Further, the results demand that any future investments in these types of activities be accompanied by economic evaluations and measurement of how activities influence behaviours, and in turn the effects on incidence of exploitation during migration and employment, alongside monitoring for adverse consequences.

Studies that address knowledge of trafficking and risks associated with migration were ranked as being of moderate quality (n=4) and of high quality (n=3). The highly ranked studies conclude that knowledge building alone has not prevented migration-related exploitation or trafficking in these communities. The moderately ranked studies were limited by a lack of ethical consideration, as well as not acknowledging and accounting for their limitations (USAID, 2016) and their study design, sample size, and data collection/analysis (Mak *et al.*, 2019; Ara and Das, 2010; Shrestha, 2013). The USAID (2016) study found that knowledge following awareness-raising interventions only briefly improved and was not sustainable. Because its limitations are not in crucial methodological issues, it remains the case that the outcomes from this study are more reliable than other moderately ranked studies that do have design flaws. It follows that the awareness-raising interventions reviewed above were not effective in improving sustained knowledge concerning modern slavery and migration in the communities in which they were implemented.

Studies that address identification or interruption of trafficking situations (n=2) were ranked as being of moderate quality (n=1) (Berman and Marshall, 2011)) and of high quality (n=1) (Gausman *et al.*, 2016). While the Gausman *et al.* (2016) study showed an improvement in labour conditions, it did not sufficiently explain how labour conditions resulted from programme components. The Berman and Marshall (2011) study could have been strengthened by a more robust methodological approach. Although it suggested that participants had an increased ability to check recruiters' credentials and report trafficking cases following the intervention, the study displayed limited methodological strength. The evidence on the effectiveness of awareness interventions in improving the identification and interruption of trafficking situations is, therefore, limited and should not be used alone to inform policy or practice. More robust research in this area is needed.

**Training for law enforcement, government agencies, and non-government organisations (NGOs) showed mixed results (n=3).** The most robust study to date, an RCT among 1,000 police, suggested little post-training knowledge gain and an unintended rise in victim-blaming (Archer *et al.*, 2016). Other less methodologically strong studies suggested positive results among participants, who reported they gained increased knowledge of human trafficking and their own capacity to intervene. None of the studies measured whether learning-based actions were operationalised following the training, while, more importantly, none assessed the outcomes of actions for trafficking victims. Furthermore, the studies did not adequately state how they measured increase in knowledge among participants, which limits the strength of the evidence and suggests that more robust research on the effects of trainings should be conducted. Study authors hypothesised that when trainings were inter-sectoral and combined with other interventions, they may result in capacity building of the trafficking response system (e.g. among NGOs, government, and law enforcement). However, no evidence was presented on systemic effects. Importantly, only one of the studies offered findings on potential adverse outcomes of law-enforcement training, as have been suggested especially in locations where corruption is prevalent. (n=2 (USAID, 2013; USAID, 2016)) and high quality (n=1 (UN Women, 2014)). Both USAID (2013, 2016) studies were limited by lack of ethical considerations in the study design. The USAID (2013) study could also have been improved by a more robust sampling design, data analysis, and reporting of results. Importantly, the studies did not adequately state how they measured increase in knowledge among participants, which limits the strength of the evidence and suggests that more robust research on the effects of trainings should be conducted. The UN Women (2014) study ranked as high quality and showed little increase in knowledge and adverse effects of training. Evidence on trainings for law enforcement therefore does not provide adequate confidence in the effectiveness of training interventions, and in fact shows some adverse outcomes. Studies do not sufficiently explain how the trainings resulted in these outcomes, whether these outcomes were sustained over time, and how they were measured. The reviewed training interventions did, however, show increased knowledge on the part of participants rather than the standalone awareness-raising interventions that were discussed above. More research on training interventions is required to understand their effectiveness. Furthermore, policymakers should continually look for the outcomes of emerging research as more work is done in this field.

There is only one study (Swendeman *et al.*, 2015) of moderate quality on **worker-led interventions** in self-regulatory boards (SRBs). The study found that a banking cooperative for sex workers led to an increase in savings, as well as higher self-esteem and sense of personal autonomy. However, given its methodological weaknesses, it should not be used as concrete evidence that sex worker-led banking cooperatives are effective in this context or others.

Evaluations on **rehabilitation interventions**, particularly short-term residential programmes and medical and **psychotherapeutic/psychosocial interventions** (sometimes referred to as mental health and psychosocial support), were lacking. The three studies on rehabilitation (n=3) were all ranked as being of moderate quality (Crawford and Kaufman, 2008; Deb *et al.*, 2011; Donger and

Bhabha, 2018) and were limited by methodological constraints. Importantly, results from both the Crawford and Kaufman (2008) and Deb *et al.* (2011) studies were self-reported. This presents a significant limitation given that outcomes were not sufficiently investigated by the researchers. The reviewed studies therefore do not provide evidence that psychotherapeutic interventions are effective. Given the importance of psychotherapeutic interventions in assisting victims of trafficking rehabilitate and recover from trauma and other psychological effects of exploitation, the lack of good quality studies is concerning. While there have been evaluations of such interventions in the North American context, researchers should determine the effectiveness of programmes in South Asia, especially since the context and types of trauma from which victims recover in this context are vastly different from those elsewhere.

## Limitations and research gaps

This REA reviewed 15 studies (ten of which were of moderate quality and five of high quality). Some moderately ranked studies still lack key aspects of robust evaluation (as set out above). Additionally, there are several remaining gaps in the overall body of evidence. Therefore, the conclusions that can be drawn about the effectiveness of the interventions considered and the findings from this REA on trafficking in general are limited.

Synthesis of data was conducted to understand the components and outcomes of evaluated interventions, as well as the amount and quality of evidence that point toward their effectiveness, within the geographic, cultural, and economic context of the interventions. This REA therefore reports and analyses evidence in the respective contexts of where interventions have been implemented (and subsequently evaluated) and does not report outcomes in a way that is generalisable to other actors and contexts.

There are currently very few methodologically robust evaluations of interventions that address modern slavery in South Asia. There is a very limited body of studies and evaluations that assess intervention effectiveness. There are no systematic reviews or rigorous evaluations of programme effectiveness (as opposed to process evaluations). This review primarily identified studies addressing community-based or individually targeted prevention interventions, which may have limited benefit because of the extreme power imbalances between individuals and the dominant economic, political, and social structures. Moreover, only a few studies articulated the unintended harm that may occur from pre-departure training and knowledge-building (Kiss and Zimmerman, 2019).

Importantly, interventions covered in this REA reflect the currently limited evidence base, which does not include some of the crucial intervention areas operating at meso and macro levels, some of which are emerging and some of which are operating but with little evidence. These include:

- Recruitment practices, including migrant worker networks;
- Trade unions;
- Business, corporation, and supply chain interventions (e.g. CSR, blockchain);
- Labour inspections (e.g. training, victim detection tools);
- Legislative and regulatory actions (e.g. related to recruitment, corporate reporting, criminal/civil penalties for violations, including victim compensation); and
- Macro policies (e.g. sanctions such as European Union (EU) red/yellow cards, Trafficking in Persons report rankings).

There is insufficient data on **anti-human trafficking units** implemented by police units, while widely practised, to suggest whether they are effective at reducing the prevalence of human

trafficking. The shortage of robust data for these interventions, robust programme theory and concept measurement, presents challenges for practitioners and policymakers to develop effective programs.

Few studies in this review focused on systemic drivers or structural determinants of trafficking, instead focusing primarily on interventions targeting individuals and communities. There is also a lack of research on short-term residential rehabilitation, therapeutic programmes, vocational training, reintegration, recruitment and intermediaries, legal interventions, and meso- and macro-level drivers of exploitation.

Many studies measuring awareness or capacity typically relied on participants' perceptions of how much they learnt, or how they felt about the training, rather than objective measures of knowledge and absorption of and ability to apply the programme messages. Evaluations of awareness-raising or capacity-building interventions must include objective measures of programme impacts versus solely dissemination and uptake rates.

The current literature base is lacking in both systematic reviews and rigorous evaluations of programme effectiveness. Most of the studies included in this REA were observational rather than experimental (resulting in a limited ability to assess effectiveness). There was also a general inability on the part of moderate-quality studies to adequately describe intervention components, to explain and measure outcomes (rather than outputs), and to include disaggregated data on the study population.

Importantly, the findings of this REA do not include evidence from Pakistan. This again highlights that the evidence base is lacking and suggests that the findings from this REA do not represent the unique forms of sexual and labour exploitation in Pakistan, nor the economic, cultural, and migratory systems that affect modern slavery in Pakistan.

## **Lessons and implications**

To ensure future intervention investments reap adequate VfM, policymakers and aid agencies will benefit from supporting stronger research and evaluations of variously targeted interventions, including actions that operate alongside or beyond the individual and community levels. Moreover, given the importance of greater intervention development, and to avoid unintended adverse consequences, upcoming intervention research should integrate monitoring and feedback mechanisms to inform implementation.

Practitioners should be supported to adopt evidence-based approaches to service provision and collaborate with researchers to conduct robust evaluations and maintain easy-to-apply monitoring mechanisms. Interventions should be context specific, incorporating multiple agencies and based on knowledge from NGOs on the unique aspects of the characteristics of trafficking in particular areas (including methods for recruitment, types of individuals and communities affected, individuals who become trafficked after voluntarily migrating, and routes for trafficking). Practitioners should ensure that referral and reintegration procedures prioritise accurate identification and victim safety.

Researchers and evaluators should seek to address the gaps in the evidence base, particularly beyond individual-level risk factors and behaviours. Researchers should consider state- and national-level policies, linkages between social protection and anti-human trafficking programmes, and reducing stigma. Overall, there is a need for more robust, context- and population-specific research that reports the effectiveness of interventions on reducing the incidence and prevalence of human trafficking.



Policymakers will also need to make clearer distinctions about what constitutes a victim of trafficking and how this differs from a voluntary worker. In particular, this applies to the common conflation of sex work and sex trafficking. Confusion may also occur when delineating trafficking versus smuggling.

## Findings vs. previous research

This REA is generally consistent with the existing literature on commonly studied interventions, notably awareness interventions. The lack of rehabilitation, reintegration, legal, worker-led, border monitoring, and medical and psychotherapeutic interventions in this review reflects the gaps in the evidence base, as well as the lack of robust studies on these types of intervention. This REA is largely consistent with previous reviews of intervention effectiveness in South Asia, which have mainly concluded that there is not enough evidence to state which interventions are effective and why. In regard to the global evidence base, in the past five years there have been evaluations of psychotherapeutic interventions for victims of commercial sexual exploitation and trainings for law enforcement in the United States, as well as on multidisciplinary task forces and referral mechanisms in the United Kingdom. There is also a growing global interest in modern slavery and trafficking among researchers, policymakers, and practitioners. It is therefore useful to keep looking out for new evaluations and research reports that are being produced that can add depth or new insights to this REA.

## Conclusion

This REA contributes to the current evidence base by providing an overview of interventions that have been evaluated to date. It supplements the existing literature by identifying gaps in evidence, such as the dearth of evaluations of rehabilitation and reintegration interventions. The REA is consistent with other reviews in suggesting that individual and community-based awareness interventions may increase knowledge but have only limited impact on behavioural change, particularly in the face of structural drivers of exploitation (Zimmerman and Kiss, 2017).

The current evidence base provides little data on interventions' effectiveness in reducing the incidence or prevalence of human trafficking in South Asia. The body of literature is variable in quality and has many gaps, including in regard to psychotherapeutic, rehabilitative, and reintegration interventions, which present barriers for policymakers and practitioners seeking to implement an evidence-based approach in their programmes.

Knowledge-building and awareness-raising programmes that do not have components that enable people to act and overcome structural drivers of exploitation have not been shown to be effective in preventing exploitation. Caution should also be used when implementing law-enforcement trainings, which in some cases have been shown to produce adverse outcomes. Additionally, practitioners and policymakers should continually monitor their programmes for adverse outcomes. More research is needed on law-enforcement training, rehabilitation and reintegration, psychotherapeutic, and border monitoring interventions to understand their components and effectiveness in South Asian countries.

Programmes with unproven effectiveness, such as standalone awareness-raising interventions, should be evaluated for their strengths, limitations, and potential unintended consequences. While studies show that awareness has increased, they do not show that behavioural change results from awareness-raising activities. However, data saturation in this area has not been reached, and until more studies are conducted on the effectiveness of awareness-raising interventions in South Asia the effectiveness of awareness-raising interventions as a whole is unknown. Caution should be used when implementing these interventions, especially knowledge-building and law-

enforcement training interventions. Practitioners should consider the unintended consequences of such interventions and their VfM. Consideration must also be given to strategies that target structural barriers to safe migration and decent work and how these might operate to reduce trafficking prevalence and individual risk and outcomes.

Further research should focus on describing and evaluating specific activities within broader comprehensive programmes, such as individual programmes and interventions within larger portfolios of projects. More research should be conducted on ecological factors above individual-level factors of trafficking (e.g. recruitment, labour, and international sanctions). Additionally, another evidence review that includes search terms on worker-led actions and business responses could uncover evidence on these topics. Research should also be conducted on the following: unintended consequences of anti-trafficking interventions, such as vigilance groups that may hinder migration; rehabilitation programming in low-resource settings; development of search terms that can be used to identify interventions on recruitment, worker-led interventions, and private-sector response; and effectiveness of knowledge-building and law-enforcement training interventions in South Asia.

This REA suggests that current research is insufficient to provide clear, evidence-driven directions on ‘what works’ to prevent or intervene in trafficking. The current evidence base does not offer sufficiently robust findings on the impact of different intervention packages or multi-component interventions or detect the interventions’ interactions within the local context and larger structural forces. Given these limitations, this REA suggests that intervention investments cannot be well targeted based exclusively on the evidence reviewed here. For future programme design and investment, stronger intervention evaluation evidence is needed, in particular intervention development research that operates alongside promising activities. Promising interventions should be implemented in parallel with robust evaluations to determine the effectiveness of these programmes. Programme evaluation investments should be based on field visits with local actors and discussions with policymakers, law enforcement, researchers, practitioners, and survivors.<sup>1</sup>

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<sup>1</sup> These survivors would need to have experienced sustainable liberation, and robust consent and safeguarding procedures would need to be followed.

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## List of abbreviations

BCURE	Building Capacity to Use Research Evidence
DFID	Department for International Development
FCDO	Foreign, Commonwealth and Development Office
ECPAT	End Child Prostitution and Trafficking
EM	Evidence Map
EU	European Union
ILO	International Labour Organization
IRB	Institutional Review Board
NGO	Non-governmental organisation
NHLBI	National Heart Lung and Blood Institute
NIH	National Institutes of Health
QAT	Quality Assessment Tool
RCT	Randomised controlled trial
REA	Rapid Evidence Assessment
SD	Standard deviation
SME	Small and medium-sized enterprise
SRB	Self-Regulatory Board
SWiFT	South Asia Work in Freedom Transnational Evaluation
UNODC	United Nations Office on Drugs and Crime
USAID	United States Agency for International Development
VfM	Value for Money

# 1 Introduction

This REA examines current evidence on the effectiveness of interventions to combat human trafficking for the purpose of sexual and labour exploitation in four South Asian countries (Bangladesh, India, Nepal, and Pakistan).

Trafficking in persons is a form of ‘modern slavery’, which is an umbrella term for the variety of situations in which someone is forcibly controlled by an individual or group for the purpose of exploitation. The United Kingdom’s Modern Slavery Act of 2015 defines modern slavery as including slavery, servitude, forced and compulsory labour, and human trafficking. These crimes involve holding a person in a position of slavery or forced labour, or facilitating their travel with the intent of exploiting them (Modern Slavery Act, 2015). While definitions of modern slavery differ, it includes slavery and forced labour, debt bondage, bonded labour, human trafficking, domestic servitude, forced or servile marriage, the worst forms of child labour, and other forms of exploitation, including sexual and broader child exploitation. The consent of any child under 18 years of age to any of these activities does not alter their classification as modern slavery (Oosterhoff *et al.*, 2018).

Trafficking in persons is a form of modern slavery that targets individuals for the purposes of sexual and labour exploitation. The United Nations Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, also known as the Palermo Protocol, defines *trafficking* as:

- a) The recruitment, transportation, transfer, harboring 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.
- b) The recruitment, transportation, transfer, harboring or receipt of a child for the purpose of exploitation shall be considered "trafficked in persons" even if this does not involve any of the means set forth in subparagraph (a) of this article.
- c) "Child" shall mean any person under eighteen years of age (United Nations, 2000).

Individuals are trafficked for the purpose of engaging in both forced labour as well as sexual exploitation. According to the International Labour Organization (ILO) Forced Labour Convention, 1930 (No. 29), forced or compulsory labour is defined as ‘all the work or service which is exacted from any person under the threat of penalty and for which the person has not offered himself or herself voluntarily’ (ILO, 2017). Forced labour is observed in many economic activities and industries, including domestic work, construction, agriculture, manufacturing, and forced begging. Sexual exploitation includes forced labour in brothels as well as commercial sexual exploitation of both adults and children, which may take place in both private and public spaces. It should be noted that the sexual exploitation of children is not always sex trafficking, but it can be defined as sex trafficking if it takes place under the circumstances of the Palermo Protocol (End Child Prostitution and Trafficking (ECPAT), 2016).

## 1.1 Magnitude and impact of trafficking

The Global Slavery Index estimated that, on any given day in 2016, 40 million people were victims of modern slavery, including 25 million people in forced labour and 15 million people in forced marriage. Of the estimated 25 million people in modern slavery in Asia, 66% were exploited for labour (Global Slavery Index, 2018). Around 71% of all victims of modern slavery were women and girls, and 25% were children. There were 7.6 victims of modern slavery for every 1,000 people in Africa, 6.1 per 1,000 in Asia and the Pacific, 3.9 in Europe and Central Asia, 3.3 in the Arab states, and 1.9 in the Americas (ILO, 2017). In 2014, the ILO estimated that global profits from human trafficking amount to US\$ 150 billion per year, two-thirds of which is from commercial sexual exploitation and one-third of which comes from forced economic exploitation (including domestic work, agriculture, and other industries) (ILO, 2014).

While they are useful to provide an indication of scale, global figures on the prevalence of modern slavery are contested. Statistics on modern slavery and human trafficking prevalence should be considered with caution, since reporting by government agencies and NGOs is largely limited. Reporting differs based on legal or practice definitions: for instance, whether a government agency, donor partner, or NGO chooses to include child marriage. Additionally, reporting on trafficking for sexual exploitation is often conflated with reporting on sex work. As such, figures are most likely incorrect.

All four countries explored within this review are source, transit, and destination countries for individuals subjected to human trafficking. There are, however, important differences in the social and economic characteristics and the types of work and sectors that people are trafficked into. India has a large Hindu population, most of whom are from lower castes or Dalits,<sup>2</sup> reflecting multiple inequalities (Kapur *et al.*, 2010) embedded within long histories of labour bondage and feudalism (Breman and Guérin, 2009). In Bangladesh, feudalism is also important in understanding dependency relationships, but as most citizens are Muslim caste does not play a similar role. In all four countries children are affected by labour exploitation (US Department of Labor, 2014), some of which also involves trafficking.

### India

India is estimated to have the largest number of people in modern slavery in the world, with nearly 8 million persons living in modern slavery (Walk Free Foundation, 2018). Most trafficking in India occurs between states (90%), with the remaining proportion being cross-border trafficking from Nepal and Bangladesh, as well as Eastern European and Middle Eastern countries (US Department of State, 2013). Border guard estimates suggest that the number of human trafficking victims transported from Nepal to India increased by more than 500% from 2013 to 2018 (from 108 victims in 2013 to 607 in 2018) (Chauhan, 2018). There were 8,132 cases of human trafficking reported in India in 2016, with 58% of victims below the age of 18 years (National Crime Records Bureau, 2016).

### Nepal

Survey data suggest that 229,000 people in Nepal were subject to modern slavery in 2014 (Walk Free Foundation, 2014). Of 3.14 million working children in Nepal, 1.6 million were in harmful or dangerous work (United Nations, 2013). The National Human Rights Commission estimates that 23,200 people in Nepal were victims of human trafficking in 2016, and that from 2015 to 2016

<sup>2</sup> Dalits are a socio-economically disadvantaged group that are considered outcasts by the majority Hindu population, who are discriminated against mainly because of the 'menial' occupations practised by their ancestors.

6,100 had been trafficked, 13,600 were victims of attempted trafficking, and 3,900 people had gone missing. Moreover, 60% of individuals trafficked, 98% of attempted trafficking victims, and 70% of missing persons were female (National Human Rights Commission, 2016).

## **Pakistan**

Human trafficking in Pakistan often takes the form of forced labour and servitude, concentrated in the brick-making, carpet-weaving, agriculture, and mining industries, with 3.2 million people estimated to be living in modern slavery in Pakistan (Walk Free Foundation, 2018). In 2017, the state of Punjab identified 79,000 children working in brick kilns (US Department of State, 2017). Pakistanis are among the 10 most-detected nationalities for irregular migration and are trafficked to the EU and to the Persian Gulf for both forced labour and sexual exploitation. The majority of Pakistanis trafficked for forced labour in the EU are found in Spain. Individuals are also trafficked into Pakistan for the purpose of sexual exploitation, sometimes in the form of forced marriages (United Nations Office on Drugs and Crime (UNODC), 2013). Agriculture is a major location for child labour and bonded labour, in which sharecroppers receive loans from their landlords in personal emergencies (e.g. sicknesses) or to meet agricultural input expenses (Carter and Roelen, 2017; US Department of State, 2014; Arif, 2004).

## **Bangladesh**

Bangladesh is estimated to have 592,000 people living in modern slavery (Walk Free Foundation, 2018). It is a source, transit, and destination country for individuals subjected to human trafficking in the forms of forced labour and sexual exploitation. Adults and children are subjected to forced labour, domestic servitude, and sex trafficking within and beyond Bangladesh. Bangladeshis who migrate overseas can be subject to forced labour in other parts of South and Southeast Asia, Europe, the Middle East, and the United States. The Rohingya population, more than 1 million of whom are undocumented in Bangladesh, is at a particular risk for human trafficking. Rohingya women and girls are recruited from refugee camps to work in homes and hotels but are instead subjected to sexual exploitation (US Department of State, 2018).

## **Entry into trafficking and health consequences**

Entry into trafficking has been associated with poverty, abuse, force, coercion, unemployment, societal practices (including discrimination and marginalisation), addictions, peer pressure, lack of familial support, a history of running away, absence of male support, and presence of the perpetrator (Wilson, 2014). There are numerous physical and mental health effects of trafficking in persons, including but not limited to post-traumatic stress disorder, anxiety, depression, aggression, self-harm practices, and somatic and behavioural sequelae and addictions (Crawford and Kaufman, 2008). Victims are more likely to experience mental health disorders if they have previously experienced sexual violence (Tsutsumi *et al.*, 2008). Victims also report feeling shame, lack of trust, and grief (Chakraborty, 2010; Deb *et al.*, 2011).

## **1.2 Aim of this REA**

This REA is being carried out as part of a wider assignment for DFID, with the overall objective of synthesising evidence on the effectiveness of interventions that tackle modern slavery in South Asia. Two REAs are being conducted on different types of modern slavery: one on human trafficking for labour and sexual exploitation and the other on child labour.



This REA aims to review and assess the evidence on interventions that address human trafficking in South Asia. Its objective is to examine ‘what works’ in relation to combating sexual and labour exploitation in interventions in Bangladesh, Pakistan, India, and Nepal.

The research question that has guided the analysis of the included studies and this REA is: **‘What has been the effect of interventions to combat and/or reduce sexual and labour exploitation in Bangladesh, Pakistan, India, and Nepal?’**

Interventions include both pre- and post-trafficking interventions. These include training interventions, preventative interventions (including awareness and education campaigns), and post-trafficking interventions, including rehabilitation.

The following sections will describe the methodology for this REA, inclusion and exclusion criteria, the quality assessment process (using the QAT), and data extraction and synthesis.

## 2 Methods

This section describes how the REA has been conducted. It outlines the search procedures, the inclusion and exclusion criteria, the quality assessment process, and the data extraction process.

### 2.1 EM study identification and coding

The studies included in this REA are taken from the Modern Slavery EM, prepared by the research team for DFID (Oosterhoff *et al.*, 2018). The EM identified the availability of evidence for modern slavery interventions in Bangladesh, India, Nepal, and Pakistan. This REA focuses only on those studies related to labour and/or sexual exploitation in those countries.

The EM included peer-reviewed and non-peer-reviewed studies in English that mentioned a modern slavery intervention and were published between 2008 and 2018. Eligible primary studies included experimental or quasi-experimental studies,<sup>3</sup> or evaluations, of interventions to prevent modern slavery, as well as observational studies where they included an intervention.

This REA also includes the findings of the ILO's SWiFT programme and the DFID-funded Work in Freedom programme to tackle trafficking and exploitation of migrants from South Asia. SWiFT sought to address the limited evidence base on community-based prevention of trafficking. These papers were published after the EM's release but were included because of their direct relevance.

Quantitative and qualitative observational research studies eligible for inclusion in the EM included: cohort, longitudinal, case/control, and cross-sectional studies/evaluations; and qualitative studies or case studies (featuring interviews or focus groups), including post-evaluation-only assessments and participatory approaches. Systematic reviews and other reviews were eligible for inclusion where they focused on the countries of interest or the South Asia region.

Importantly, there is a need for research and evaluation on the impact of interventions, including but not necessarily limited to evaluations utilising RCTs, and quasi-experimental and experimental evaluation designs. While only these study designs allow us to make causal inferences about the effect of an intervention on a target population, observational studies can help to ascertain potential causal pathways and possible effects of an intervention, as well as assess implementation challenges. Given the complexity of the contexts in which trafficking takes place, other study and evaluation designs such as process tracing, realist evaluation, qualitative contribution analysis, and Building Capacity to Use Research Evidence (BCURE) evaluations tested on other topics and fields can be considered to respond to the scarcity of evidence.<sup>4</sup> Observational studies were included in the Modern Slavery EM as they can still yield valuable insights to inform future rigorous intervention research.

Searches for the EM comprised an electronic search of over 25 academic databases and sector-specific websites, as well as screening of the studies identified by the searches against pre-defined inclusion criteria (for further detail see Oosterhoff *et al.*, 2018).

<sup>3</sup> Experimental studies are those where participants are randomly assigned to a treatment (intervention) or control group. Quasi-experimental studies feature participants who are assigned to intervention or control groups but not randomly. An observational study may be concerned with the effect of a treatment but participants are not assigned to intervention/control groups.

<sup>4</sup> Various papers have tried to explain the misunderstandings about RCT and between various approaches (White, 2010). Some highlight the need to mix methods (Ton, 2012). The two commonly cited papers on alternatives to RCTs are Stern *et al.* (2012) and White and Phillips (2012). Others include Vogel and Punton (2018), Balogun *et al.* (2017), Stedman-Bryce *et al.* (2015), and Itad (2014).

Screening for the EM was a two-stage process of first checking the title and abstract, and then checking the full-text report (Oosterhoff *et al.*, 2018). Screening was undertaken by three individuals independently, i.e. double-screening of abstracts and full texts was not conducted. A random 5% of each reviewer's study allocation was screened by a second reviewer, to check for consistency of screening at the abstract and full-text stage. No significant inconsistencies were found at this stage in the EM screening.

After studies were identified as meeting the inclusion criteria, basic information was extracted on each study, including modern slavery type, intervention type, the outcomes reported, and study characteristics, such as the study design and location (this process of data extraction is referred to as 'coding'). Further information on the studies that were identified by this process is available in the EM report (Oosterhoff *et al.*, 2018). Additional reports were identified for possible inclusion by checking the reference lists of systematic reviews picked up in initial searches (i.e. backwards citation tracking).

A total of n=116 studies were included in the EM, including n=45 for sexual and/or labour exploitation.

## 2.2 Inclusion and exclusion criteria

Studies were included in the EM if they fulfilled the following inclusion criteria:

- Published between 2008-2018;
- Studies conducted in English;
- Peer or non-peer reviewed research based on experimental or quasi-experimental studies or evaluations of interventions to prevent modern slavery, and observational studies where they include an intervention. Quantitative and qualitative observational research studies eligible for inclusion include: cohort, longitudinal, case/control, cross-sectional studies/evaluations, qualitative studies or case studies (featuring interviews or focus groups), including post-evaluation only assessments and participatory approaches;
- Studies/intervention evaluations may be conducted internally or externally;
- Studies/intervention evaluations may be completed or ongoing (mid-term and final project evaluations were included); and
- Reviews or systematic reviews which focused on the countries of interest or South Asia.

Studies were excluded if they were theoretical or conceptual papers, comments, letters, or correspondence; observational research which does not include an intervention; studies which examine broad poverty reduction or similar interventions, unless specific types of modern slavery (bonded, feudal, trafficked labour) are mentioned in the abstract or summary; and studies which do not present disaggregated data for the study population of interest (where studies collected data on the study population as part of a larger sample).

During the EM searches, reviews were found on specific types of modern slavery, most commonly on child labour and sex trafficking. These reviews included both systematic and non-systematic reviews (which included literature reviews and reviews of policy and the legal system) and were studies that used secondary data and literature external to the intervention and were not explicitly evaluations. At the REA stage, we excluded reviews because no systematic reviews focused on the countries of interest or the South Asian region, and the non-systematic reviews did not display a high level of methodological quality.

For the EM, we conducted backwards citation tracking of eight reviews and systematic reviews related to modern slavery outcomes, from which 20 primary studies on human trafficking (including

labour exploitation and sexual exploitation) were identified for inclusion in the map. These studies were considered for inclusion in the REA, alongside other primary and secondary studies identified from EM searches.

We excluded 10 non-systematic reviews for trafficking, leaving  $n=35$  studies for trafficking which were eligible for screening for this REA. In the first stage of review, of the 35 studies, 23 were included in the initial REA report from the EM. An additional three studies, collectively referred to as the SWiFT evaluation and published after the EM's release, were eligible for inclusion due to their relevance, thus making a total of 26 studies included in this REA at the first stage.

## 2.3 Quality appraisal process

To assess the quality of the studies identified for inclusion in the REA we adapted the QAT used in a similar two-stage systematic map and evidence synthesis study on labour trafficking in Europe (Cockbain *et al.*, 2018). This QAT in turn was adapted from the version based on Critical Appraisal Skills Programme checklists<sup>5</sup> used by Oram and colleagues in a systematic review on the health effects of trafficking (Oram *et al.*, 2012).

Cockbain *et al.*'s tool included nine items assessing study quality, including the appropriateness of the study design, sampling method, and analysis method. We kept eight of these items and omitted the question on conclusions being grounded in the results (as we found it to be duplicative of the results item). Furthermore, we added two items from the National Heart Lung and Blood Institute (NHLBI) and National Institutes of Health (NIH) QAT for observational cohort and cross-sectional studies (NHLBI and NIH, 2014) on whether the exposure and outcome measures were clearly defined and valid. The QAT and the accompanying scoring guide used in this REA can be found in Annex A.

The QAT covers the following domains: enquiry, design, ethics, sampling method, sample size, exposure measure, outcome measure, analysis, results, and limitations. The maximum quality score that is obtainable is 20. Like Cockbain *et al.* (2018), we use 50% of the total possible score (10 or below) as the cut-off for low-quality studies. Moderate-quality studies are those scoring between 11 and 15, while high-quality studies are those scoring between 16 and 20. Only studies that were moderate or high quality were included for data extraction at the next stage since low-quality or unreliable evidence would not be suitable for inclusion or for assessing 'what works'.

Importantly, this adapted QAT was designed to be a generic tool applied across all study designs – we did not apply dedicated QATs per study design. Generic QATs allow for wide applicability and a high degree of flexibility, while maintaining transparency in study critical appraisal (Rosella *et al.*, 2016). This generic QAT allowed the researchers to work in a limited timeframe and to include studies with a range of methodologies (Cockbain *et al.*, 2018).

Furthermore, considering the limitations of observational study designs, which comprise the bulk of studies in this REA, we use the term 'quality' rather than 'risk of bias' to indicate that studies/papers were assessed based on the quality of the methodology for an observational study rather than theoretical grounds for risk of bias, where observational studies are inferior to quasi-experimental studies, which are in turn inferior to RCTs, in the hierarchy of evidence. We did not assign quality ratings based on theoretical grounds for risk of bias in the hierarchy of evidence (Liberati *et al.*, 2009). For example, a qualitative trafficking study was assessed relative to what a 'good' qualitative study design would be generally – it was not assessed relative to an experimental study, which is a stronger design. In this vein, a poorly designed RCT might score similarly to a

<sup>5</sup> CASP checklists, developed by the Oxford Centre for Triple Value Healthcare Ltd (3V) portfolio, are quality appraisal tools designed for health research and used for a variety of study types.

well-designed observational study. While we did pilot the QAT among the research team, one limitation is that the QAT was not formally validated in the original study (Cockbain *et al.*, 2018) or in this review.

Nevertheless, the QAT measures a range of significant factors in study quality, which are listed above, and the included studies went through two rounds of quality appraisal, one of which was conducted by an external reviewer. The researchers are therefore confident that the included studies have been accurately appraised as high and moderate to the extent that the QAT, which was designed for the appraisal of multiple study designs, allows.

After three reviewers piloted the QAT, we revised the screening process to include two preliminary questions prior to applying the QAT (see Annex B). These questions were as follows:

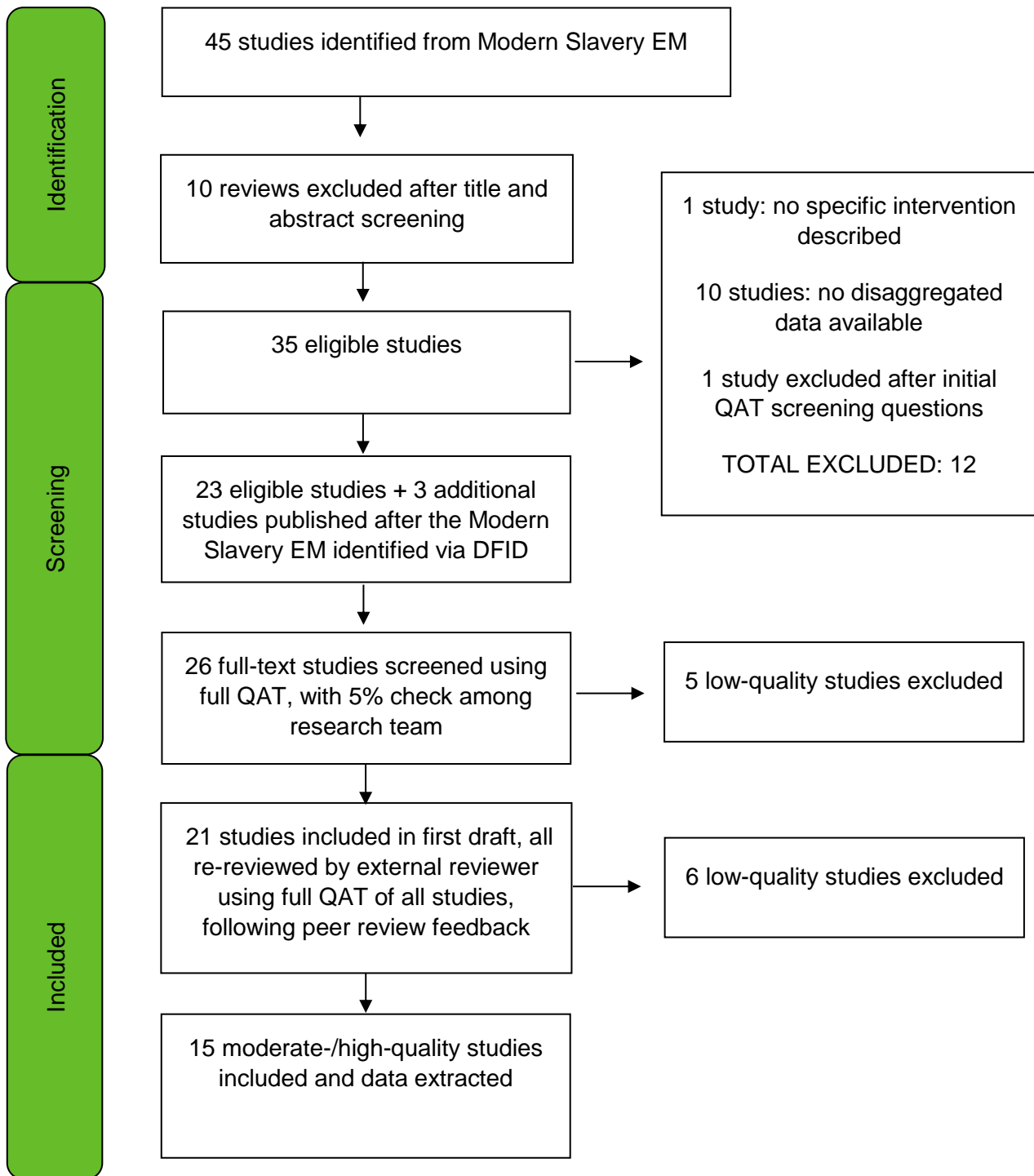
- Is a specific intervention (s) clearly described in the study?
  - If no, exclude. If yes – continue.
- Are disaggregated data available for the study population of interest in this REA?
  - If no, exclude. If yes – continue.

These questions were added to account for studies where modern slavery outcomes were reported but could not be attributed to a clearly described, specific intervention (for example, where a package of interventions was broadly described or where an intervention was mentioned very briefly but not described), or where disaggregated data on the study population for labour or sexually exploited persons were not provided.

Based on the initial quality assessment, 5 studies were excluded for being low-quality. However, following peer-review feedback, a second round of quality appraisal was conducted by an impartial third reviewer, to ensure that all 21 studies met the inclusion criteria. The process then went from single reviewer appraisal with a 5% check on scores in the original study design, to full double blinded review of the 21 studies that were potentially eligible for inclusion. At this stage, the two reviewers agreed that two studies were low quality and should be removed. Where two reviewers could not agree on studies straddling the inclusion/exclusion threshold, a third reviewer appraised the study to assess whether to include or exclude the study. At this stage, four studies were appraised as low quality and thus removed.

In total, six studies no longer met the inclusion criteria and their findings were removed from the Results and Discussion sections. Where scores could not be exactly reconciled by two reviewers, the lower score was taken as a conservative approach and reported in the quality appraisal table. A total of 15 studies were finally included in the REA. A total of 11 studies were classified as low quality over both rounds of quality appraisal, of the 26 studies eligible for inclusion (see Figure 1).

**Figure 1: Flowchart of study selection for REA**



## 2.4 Data extraction form and evidence synthesis

The data extraction form was developed based on one used in a REA on the effectiveness of interventions for social inclusion and empowerment among persons with disabilities in low- and middle-income countries, conducted by White *et al.* (2018). It is based on study summary boxes and can be found in Annex B. We describe each study's results in narrative form, with effect estimates cited, rather than extracting data on specific outcomes in a pre-specified format.

Synthesis of data was conducted to understand the components, outputs, and, where included, actual outcomes of evaluated interventions, as well as the amount and quality of evidence that point toward their effectiveness, within the geographic, cultural, and economic context of the interventions. This REA therefore reports and analyses evidence in the respective contexts of where interventions have been implemented (and subsequently evaluated) and does not report outcomes in a way that is generalisable to other actors and contexts.

The following section describes the results of the literature search and evidence mapping. It provides a description of the included studies and the quality of the included studies. It then discusses findings by type of intervention, including awareness and education, community-based groups, training, border monitoring, worker-led identification and unionisation, and rehabilitation and reintegration.

## 3 Results

### 3.1 Included studies

A total of 15 studies were included for data extraction. These are listed in Table 1, while Table 2 gives the QAT scores for each study.

The majority of studies are from India (seven), followed by Nepal (five), and Bangladesh (four). No studies from Pakistan are included in the review. This highlights that the evidence base is limited in geographic scope and suggests that the findings from this REA do not represent the unique forms of sexual and labour exploitation in Pakistan, nor the economic, cultural, and migratory systems that affect modern slavery in Pakistan.

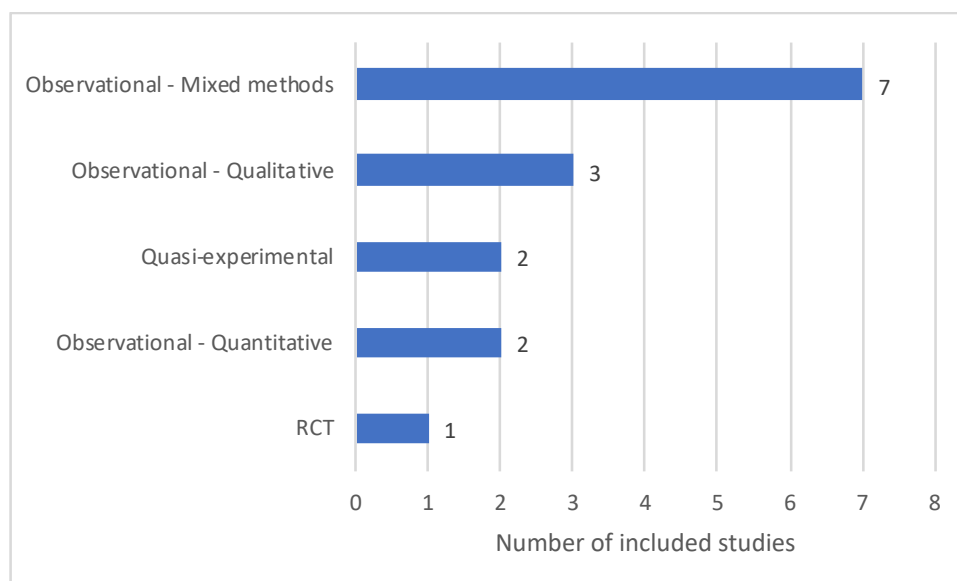
Most of the studies that are included utilise mixed-methods designs (n=7), with observational qualitative designs the second most common method (n=3). Few quasi-experimental (n=2) and RCTs (n=1) were included, while two observational quantitative studies were included. The lack of quantitative studies is not surprising and points to the need for research to utilise such methods in the future. There is especially a need for quantitative studies to examine medical, psychotherapeutic, and reintegrative interventions.

Preventative interventions included in this review often take the form of education and awareness interventions. They are characterised by local initiatives, many of which are either supported by or designed by national and international NGOs.

Interventions studied in this REA that identify, refer, and/or provide services to victims of trafficking after they have been exploited are heavily inter-sectoral. They commonly focus on both sex and labour trafficking, with some studies focused on sex trafficking alone. Outcome measurement of interventions that identify and refer victims includes the identification and referral of victims of trafficking and an increase in capacity in service provision and law enforcement.

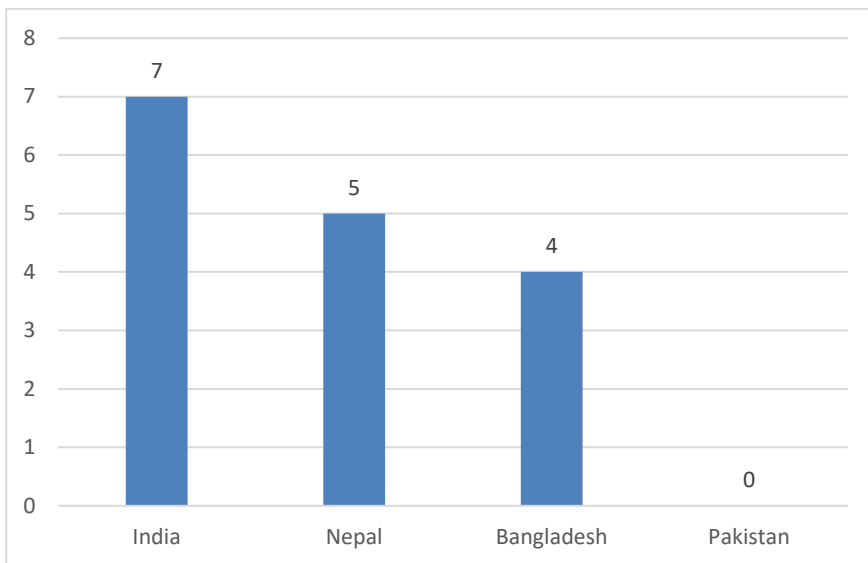
Awareness interventions in this review are commonly studied in India and Bangladesh. Interventions on worker-led interventions are from India and address sex trafficking. Rehabilitative and reintegrative interventions are studied in Nepal and India. As noted, the findings of this REA do not include evidence from Pakistan.

**Figure 2: Design of included studies (n=15)**





**Figure 3: Country focus of included studies (n=15)**



**Table 1: Studies included in the REA (N=15)**

	Study author/year	Study design	Country(s)	Intervention Category	Participants	Sample size	Primary outcome measure	Secondary outcome measure
1	Ara and Das, 2010	Quasi-experimental	Bangladesh	Awareness and knowledge building	Community members	Unknown	(1) Modern slavery survivors or at-risk persons > awareness and attitudes toward modern slavery	N/A
2	Berman and Marshall, 2011	Observational – mixed methods	Bangladesh	Awareness and knowledge building	Government agencies, private sector, women and children at risk	Unknown	(1) Criminal justice/legal/policy > awareness of and attitudes toward modern slavery, criminal justice response; (2) modern slavery survivors or at-risk persons > life skills, access/take-up of services; (3) community/society > awareness of and attitudes toward modern slavery	N/A
3	Crawford and Kaufman, 2008	Observational – mixed methods	Nepal	Rehabilitation and reintegration	Female victims of trafficking	20	(1) Modern slavery survivors or at-risk persons > economic factors, health	N/A

							status; (2) community/ society > awareness and attitudes	
4	Deb <i>et al.</i> , 2011	Observational – mixed methods	India	Rehabilitation and reintegration	Trafficked youth, females	120	(1) Modern slavery survivors or at-risk persons > health status	N/A
5	Donger and Bhabha, 2018	Observational – qualitative	India	Rehabilitation and reintegration	Department of Labour, federal/state government officials, child welfare committees, law enforcers, non-profit organisations	49 key informants from diverse government departments/ NGOs	(1) Modern slavery survivors or at-risk persons > economic factors, life skills; (2) community/ society > awareness of and attitudes toward modern slavery	N/A
6	Ernst/UN Women, 2014	Quasi-experimental	India	Training	Community members	960 (intervention); 360 (control)	(1) Community/ society > incidence or prevalence of modern slavery; (2) modern slavery survivors or at-risk persons > economic factors, awareness; (3) criminal justice/ legal/ policy > awareness and attitudes,	N/A

							criminal justice response (4) community mobilisation and participation	
7	Gausman <i>et al.</i> , 2016	Observational – mixed methods	India	Awareness and knowledge building	Village households	1,865 households in 21 villages	(1) Community/society > incidence or prevalence of modern slavery	(1) Modern slavery survivors or at-risk persons > economic factors
8	Mitra, 2017 (Abramsky, 2018)	Observational – quantitative	Nepal; India	Awareness and knowledge building	Community members	267	(1) Modern slavery survivors or at-risk persons > life skills	(1) Modern slavery survivors or at-risk persons > awareness of and attitudes toward modern slavery
9	Shrestha, 2013	Observational – mixed methods	Nepal	Awareness and knowledge building	NGOs, government stakeholders, and media	85	(1) Modern slavery survivors and at-risk persons > life skills, access/take-up of services	(1) Service providers > quality of service/care, victim identification
10	Swendeman <i>et al.</i> , 2015	Observational – qualitative	India	Worker-led identification and unionisation	Sex workers	37	(1) Modern slavery survivors or at-risk persons > economic factors	(1) Community/society > awareness of and attitudes toward modern slavery
11	USAID, 2013	Observational – mixed methods	Bangladesh	Training	Community members, policymakers, service providers	1,920	(1) Community/society and service providers > awareness of	(1) Criminal justice/legal/policy > criminal justice response

							and attitudes toward modern slavery, victim identification	
12	USAID, 2016	RCT	Nepal	Awareness and knowledge building; Training	Community members, law enforcement	5,028 (general population) 1,065 (law enforcement)	(1) Modern slavery survivors or at-risk persons > awareness of and attitudes toward modern slavery	(1) Community/ society > awareness of and attitudes toward modern slavery
13	Mak <i>et al.</i> , 2019 <sup>^</sup>	Observational – mixed methods	Nepal	Awareness and knowledge building	Prospective female migrants	6 qualitative interviews, 94 telephone surveys post intervention with training participants	(1) Modern slavery survivors or at-risk persons > life skills	(1) Modern slavery survivors or at-risk persons > awareness of and attitudes toward modern slavery
14	Blanchet, 2018 <sup>^</sup>	Observational – qualitative	Bangladesh	Awareness and knowledge building	Prospective female migrants	Qualitative cohort interviews with 40 women, pre and post intervention with training participants	(1) Modern slavery survivors or at-risk persons > life skills	(1) Modern slavery survivors or at-risk persons > awareness of and attitudes toward modern slavery
15	Kiss <i>et al.</i> , 2019 <sup>^*</sup>	Observational – quantitative	India	Awareness and knowledge building	Prospective female migrants	347 pre and post surveys with training participants	(1) Modern slavery survivors or at-risk persons > life skills	(1) Modern slavery survivors or at-risk persons > awareness of and attitudes toward modern slavery

<sup>^</sup>Additional studies from SWiFT that were included in this REA after consultation with DFID. SWiFT was a multi-country anti-trafficking intervention evaluation of intensive community-based interventions in key migrant 'source' areas. Findings are extracted specifically for evaluation of two- to five-day pre-migration decision making and training sessions conducted

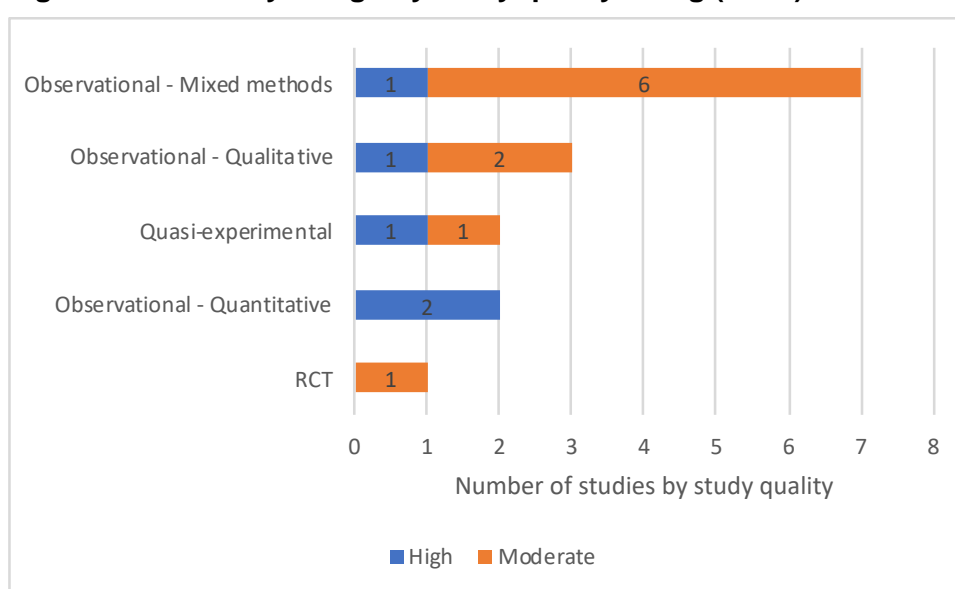
with prospective female migrants in each country. Study number 12 was a survey in Nepal conducted as part of the SWiFT programme to identify migrant women who could be targeted for these trainings.

\*Findings for India were extracted from the SWiFT multi-country report and a draft unpublished manuscript (Pocock *et al.*, 2019) listed in the references section of this REA.

## 3.2 Overall study quality

The QAT was used to assess the overall study quality during data extraction. The tool measured the quality of the research question, study design, ethical considerations, sampling method, sample size, exposure measures, outcome measures, analytical procedure, clarity of results, and limitations (see Annex A). It is crucial to recognise that, in the evidence base as a whole, anti-trafficking interventions are a very nascent field for evaluation. As a result, to date there is a very real dearth of strong evaluation-based evidence: only five high-quality studies were found and included in this REA, most of which were observational designs (with one high-quality quasi-experimental study). Thus, overall, 10 of the studies were of moderate quality and five of high quality (see Table 2). The strongest study design, an RCT of an awareness-raising intervention (USAID, 2016), was appraised as being of moderate quality. Figure 4 shows the number of study designs by study quality rating.

**Figure 4: Study design by study quality rating (N=15)**



The overall strength of a body of evidence is determined by the quality of studies that constitute it, as well as by the size, context, and consistency of that body of evidence. Although all studies included in this REA were assessed as being of moderate ( $n=10$ ) or high ( $n=5$ ) quality, some moderately ranked studies still lack key aspects of robust evaluation (as set out below).

Additionally, due to the gaps in the larger evidence base and methodological weaknesses of some moderately ranked studies that are included in this REA, there are several remaining gaps in the overall body of evidence. It is important to note that, of the high-quality studies, the strongest study designs that can tell us about intervention effectiveness are poorly represented, with just one high-quality quasi-experimental study. Most of the high-quality studies (four of the five) were observational study designs, which cannot tell us about causal effects of an intervention. In RCTs, participants are randomly assigned to an intervention or control group, which mitigates against biases in observational studies that can include selection bias (participants with certain characteristics may choose to enter a programme) and confounding bias (where a chance variable can affect the association between an exposure and an outcome). Random allocation of participants in RCTs mitigates against these biases. Quasi-experimental studies do not use random allocation, which limits this study types' ability to detect cause-effect relationships between an intervention and an outcome. Given that just one moderate-quality RCT was included, the conclusions that can be drawn about the effectiveness of the interventions considered and the findings from this REA are limited. However, the high-quality observational

studies offer insights on potential causal pathways, feasibility, and acceptability of interventions and implementation challenges, which can inform future intervention research in this field.

Overall, this REA finds there is currently little to no robust evidence about the effectiveness of interventions that target human trafficking in South Asia. Moderate-quality study designs were often weak and frequently lacked well-measured outcome indicators and disaggregated data, while rarely monitoring for adverse outcomes. Results from these studies often relied exclusively on self-reports without additional external verification or evaluation measurements.

A common limitation in the studies deemed to be of moderate quality was the absence of detail about the content of the intervention. For instance, interventions were described using broad categories such as ‘child club’, ‘medical’ services, or ‘follow-up’, with little detail about intervention activities, delivery mechanisms, or pathways for change. Additionally, many moderate-quality studies listed multiple intervention component categories alongside a list of outcomes, without explaining which activities were connected with which specific outcomes (i.e. the articulation or hypotheses about the linkages between programme components and specific outcomes were inadequate).

Many of the moderate-quality studies reviewed also focused on outputs rather than outcomes, which means they are limited in what they tell us about the impact/effectiveness of interventions. Other methodological problems in some moderate-quality studies was poor clarity about study details. For example, few studies provided sufficient detail about sampling, data collection outcome measurement, ethical considerations, the informed consent processes, or limitations. These studies could be easily critiqued for recall bias, lack of missingness analysis, inaccurate description of methodology, lack of generalisability, and inability to distinguish between voluntary and involuntary sex workers as intervention participants.

More broadly, the evidence base is further limited by its very small size (both overall and in relation to specific intervention areas), the geographic concentration of the studies (meaning they are largely context specific and do not offer many findings that are generalisable), and the inconsistency in findings.

The substantial gaps in the evidence base, alongside the above-described limitations, mean the results from this REA do not provide reliable evidence to inform policy and practice. However, the weaknesses of the current evidence base strongly indicate that future programme investments will benefit immensely from formative research and intervention development study designs to guide the refinement and clear articulation of the model. Promising interventions that are potentially replicable should then be subjected to robust evaluation of processes and effectiveness. Because interventions for different forms of trafficking generally must be context, sector, and population specific, programme investments will require scoping visits in the field, listening to and learning from (local) experts and affected people, and keeping alert to emerging evidence, especially from the more rigorously conducted evaluations.

Table 2 shows the quality assessment of included studies (n=15), with 0 representing ‘no’, 1 representing ‘yes partially’, and 2 representing ‘yes fully’.



**Table 2: Quality assessment**

#	Study author/year	1. Enquiry	2. Design	3. Ethics	4. Sampling method	5. Sample size	6. Exposure	7. Outcome	8. Analysis	9. Results	10. Limitations	Total score	Study quality
1	Ara and Das, 2010	2	2	0	2	2	2	2	2	2	0	13	Moderate
2	Berman and Marshall, 2011	1	1	0	2	1	2	2	1	1	1	12	Moderate
3	Crawford and Kaufman, 2008	2	2	1	2	2	1	2	2	2	2	15	Moderate
4	Deb <i>et al.</i> , 2011	2	1	0	1	1	1	1	1	2	2	15	Moderate
5	Donger and Bhabha, 2018	2	2	2	2	1	2	2	1	1	0	13	Moderate
6	Ernst/UN Women, 2014	2	2	0	2	2	2	2	2	2	2	16	High
7	Gausman <i>et al.</i> , 2016	2	2	1	2	1	2	2	2	2	2	16	High
8	Mitra, 2017 (Abramsky, 2018)	2	2	2	2	2	1	2	1	2	2	18	High
9	Shrestha, 2013	2	2	1	2	2	2	2	1	0	1	14	Moderate
10	Swendeman <i>et al.</i> , 2015	1	2	2	2	1	1	1	2	1	2	15	Moderate
11	USAID, 2013	2	1	0	1	2	2	2	0	1	2	13	Moderate
12	USAID, 2016	2	2	0	2	2	2	2	2	2	0	15	Moderate
13	Mak <i>et al.</i> , 2019	2	1	2	2	1	1	1	1	2	1	12	Moderate
14	Blanchet <i>et al.</i> , 2018	2	2	2	2	1	1	2	2	2	1	16	High
15	Kiss <i>et al.</i> , 2019*	2	2	2	2	1	2	2	2	2	2	19	High

\*Quality appraisal based on draft unpublished manuscript (Pocock *et al.*, 2019) listed in the references section of this REA.

The findings of this REA are categorised according to the type of intervention explored. The intervention categories are awareness and education, community-based groups, training, border monitoring, worker-led identification and unionisation, and rehabilitation and reintegration.

### 3.3 Awareness and knowledge building

Awareness interventions are programmes that aim to increase awareness of human trafficking, including sexual and labour exploitation (n=9 included in this REA; n=5 with moderate quality (USAID, 2016; Mak *et al.*, 2019; Berman and Marshall, 2011; Ara and Das, 2010; Shrestha, 2013); and n=4 with high quality (Blanchet *et al.*, 2018; Kiss *et al.*, 2019; Gausman *et al.*, 2016; Mitra, 2017). Knowledge-building programmes aim to inform individuals about measures they can take to avoid being exploited (e.g. contracts with recruiters, their labour, and human rights) or what to do in situations of exploitation. Publicly targeted awareness programmes also aim to foster greater population awareness to improve the public's ability to detect and notify authorities about people they suspect may be in trafficking situations and to increase trafficked persons' ability to self-identify as victims. However, these outcomes are likely to be achieved only in contexts where there are safe reporting pathways and responsive laws and policies. Some of the public awareness interventions also aimed to reduce stigma against victims.

The studies on awareness-raising and knowledge-building interventions were among the strongest evidence in this REA, and included a longitudinal RCT, a multi-country, mixed-methods realist evaluation (an evaluation that is grounded in the context and stakeholders by which an intervention

is implemented), and quasi-experimental designs. In summary, the evidence available to date has not found that these strategies alone are effective as forms of trafficking prevention, although there is some limited evidence of increased knowledge and awareness of the issue. These activities do not appear to improve individuals' self-perception of risk or offer messages that individuals are able to apply during migration or at places of employment because of the ingrained power imbalances between low-wage workers and recruiters, employers, and the state. Moreover, and very importantly, current studies on awareness and training interventions are extremely limited by the absence of data on individual behaviour changes, how individuals applied any knowledge gained following the interventions, and, most critically, the effects on incidence or prevalence of trafficking. Only one study (SWiFT) offered findings on post-intervention-related behaviour and found that not only were women not able to apply the empowerment messages they received, but that, for some, these messages misled them to believe they would be safe in migration and at work (although this was based on the accounts of just 11 migrant women in a limited number of locations in Bangladesh).

Awareness interventions may have inherent value inasmuch as they positively impact on recipients' feelings of empowerment, knowledge of rights, etc.; however, it is important to note that there is no evidence that points to awareness interventions' ability alone to prevent trafficking by producing behavioural change. While awareness interventions present activities that are often easy to count and verify (e.g. number of participants, materials used, etc.), the application of messages is rarely measured. Having knowledge and awareness can be pathways to action, but enhanced awareness or knowledge in and by themselves do not result in behaviour change when the structural conditions that restrain recipients' choices remain the same. Further research should be undertaken to determine how such interventions can be effective at preventing the incidence of modern slavery.

### **Knowledge of trafficking and risks associated with migration**

Seven studies were included that address knowledge of trafficking and risks associated with migration. The strongest study method used for awareness raising was a longitudinal RCT, which was conducted in Nepal to measure the effectiveness of multi-media campaigns (including radio, community meetings, posters, and graphic novels) with approximately 5,000 individuals. Follow-up included two rounds of data collection to assess maintenance of changes over time (USAID, 2016), while the team is currently analysing a third cycle of data collection. This evaluation found small intervention effects on individuals' initial perceptions of the risks of human trafficking, and that it is an important national problem, but no changes in people's perceptions about its importance for themselves or their community. Findings suggest that, after the intervention, most people believed trafficking affected others but would not affect themselves, that negative or 'scare' messages have little effect compared to positive messages, and that victim-blaming attitudes about labour migrants increased. While learned perceptions and knowledge briefly increased, effects diminish almost completely over time, regardless of media type (e.g. whether radio, graphic novel, poster, or community meeting) (USAID, 2016).

Recently published findings from a multi-country evaluation of pre-departure training among prospective migrant women in India (Kiss *et al.*, 2019), Nepal (Mak *et al.*, 2019), and Bangladesh (Blanchet, 2018) – i.e. those studies collectively referred to as the SWiFT evaluation – come from a 'realist evaluation' of the ILO's Work in Freedom community-based interventions. In summary, the findings from these studies suggest that knowledge building alone has not prevented migration-related exploitation or trafficking in these communities. That is, being aware of potential deception and abuses and gaining specific knowledge of one's rights or the migration process does not necessarily affect one's risk of being exploited when the structural power dynamics work against low-wage migrant workers. These findings suggest that greater work is needed to identify

modifiable drivers beyond individual vulnerability, including interventions that address exploitative recruitment, employment, and state-driven oversight or support of exploitative practices. Specifically, across the SWiFT evaluation sites, results suggested:

- Women did not believe, and did not in reality, always have the ability to apply the pre-departure knowledge they were offered because they entered situations where they had little negotiating power against recruiters, employers, and the state (origin and destination) (Nepal, Bangladesh, India).
- Women valued the practical information they received, for example about the importance of having written contracts to help deter deceptive work conditions. However, in one study site (India) there was only a marginal increase in women's levels of awareness about migration risks, practices, and benefits after the training, although moderate changes in attitudes were reported, for example toward women's work. To illustrate, of 13 possible migration risks, women could name 1.2 risks before the training and 2.1 risks after (N=347 participants). Similarly low awareness scores were observed across all knowledge domains. Nonetheless, 98% of women felt that they learned something. Before the training, women's stated intention to migrate was very low (34 of 347 participants) and decreased after the training (to 25 women) (Pocock *et al.*, 2019). Training may have alerted women to the possible dangers of migration, which may have discouraged them in their intention to migrate (India).
- The prevalence of reported exploitation among international migrants depended primarily on the individuals' destination country and the sector in which women worked, both of which were generally determined by the labour recruiter (Nepal, Bangladesh).
- Training sessions were deemed by women to mislead them about the actual rights and protections they would have when abroad. Misleading information led to misguided impressions of potential safety and recourse they would have at the destination among 11 women included in this study (Bangladesh).
- Local training interventions are often undertaken without formative research that could have guided the population targeting (e.g. migrating women) and activity content (e.g. appropriate work sectors). Instead, interventions frequently aimed for high output numbers (e.g. good attendance) versus effective outcomes (e.g. the right content for the right participants) to satisfy donor or other expectations (Nepal, Bangladesh, India).
- Individual-level interventions to increase knowledge, sense of empowerment, and awareness of rights will have little effect until there are interventions that address other trafficking-related inequalities, e.g. job-seeking and employment terms and conditions. These more structural factors maintain the power imbalances that put workers at a persistent disadvantage (Nepal, Bangladesh, India).

Women valued the practical information they received, such as about the importance of having written contracts to help deter deceptive work conditions. Participants were keen to hear first-hand experience of previous female migrants and some of the difficult realities at destination. However, solely being aware of potential deception and abuses does not necessarily affect one's risk of being exploited. That is, some women mistakenly believed that they would be protected by possessing information gained in the training, such as regarding adequate overseas assistance for women who needed help when this was not the case (Blanchet *et al.*, 2018). While individual women can benefit from improving their understanding of rights, such information alone is unlikely to prevent human trafficking. Effective strategies to reduce a woman's vulnerability to forced labour depend on structural changes creating the conditions for women to assert their power to (agency) and power with (collective action). For women to act upon information about migration, structural conditions need to be in place that allow negotiation throughout the migration trajectory (Kiss *et al.*, 2019).

A report on BRAC's Adolescent Development Programme (ADP) in Bangladesh assessed the impact of community-based, peer-to-peer educational programmes which aimed to prevent and reduce exploitation and violence, and improve knowledge of exploitation, marriage, and sexual and reproductive health issues. ADP operated in border areas and offered life skills training to boys and girls through various community forums. The study found no statistically significant effects on enrolment in education, access to health care, or knowledge of HIV/AIDS, but a significant increase in legal awareness amongst minor participants. The study did not report changes in knowledge on human trafficking or other forms of exploitation (Ara and Das, 2010).

An evaluation of UN Women's Sustaining the Gains of Foreign Labour Migration through Protection of Migrant Workers Rights in Nepal, a programme to support migrant workers and reduce their vulnerabilities, found that the programme led to the establishment of 30 Community Alert Groups (CAGs), which trained 1,035 participants on safe migration, spread awareness, and provided support to families, as well as a network of Pourakhi, which provide advocacy and paralegal service referrals, among other outreach initiatives. It also resulted in the training of over 3,500 government workers on issues for migrant workers and the initiation of government-government dialogue on migration with Saudi Arabia and Israel. The study focused on how the programme had increased access to information and provision of services rather than measuring change in knowledge or behaviour of migrant workers or levels of victimization. The study attributed much of the success of the programme to effective partnership and coordination between UN Women and implementing partners, including People's Forum, Pourakhi, the Foreign Employment Promotion Board, and the Ministry of Labour and Employment (Shrestha, 2013).

A mid-term evaluation of the Work in Freedom (WIF) programme funded by the ILO and DFID from 2013-2018, found that progress has been made via discourse with the governments of India and Nepal, which has integrated safe migration into its development plans. The programme also resulted in women who attended WIF half-day workshops learning about migration opportunities and subsequently, making more informed migration decisions. However, the authors acknowledge that distress migration is a reality in both countries, which makes decision-making based on choice less relevant. The study did not include any additional information on the outcomes of the programme (Mitra, 2017).

Studies that address knowledge of trafficking and risks associated with migration were ranked as being of moderate quality (n=4) and of high quality (n=3). The highly ranked studies conclude that knowledge building alone has not prevented migration-related exploitation or trafficking in these communities. The moderately ranked studies were limited by lack of ethical considerations and consideration of limitations in the study (USAID, 2016) and by limitations in the study design, sample size, and data collection/analysis (Mak *et al.*, 2019; Ara and Das, 2010; Shrestha, 2013). The USAID (2016) study found that knowledge following awareness-raising interventions only briefly improved and was not sustainable. Because its limitations are not in crucial methodological issues, it remains the case that the outcomes from this study are more reliable than other moderately ranked studies that do have design flaws. It follows that the awareness-raising interventions reviewed above were not effective in improving sustained knowledge concerning modern slavery and migration in the communities in which they were implemented.

### **Identification or interruption of trafficking situations**

Other studies (n=2) on awareness interventions report that participants gained knowledge about how to identify and/or intervene in trafficking situations, but it remains unclear how well these knowledge interventions translate into participants' actual application of their new knowledge and, in turn, whether this knowledge application increased the numbers of victims who are identified or removed from trafficking situations or the incidence or prevalence of modern slavery. Screening

activities with children to increase ability to identify trafficking situations, livelihood support, and partnerships with private employers in an awareness programme in Bangladesh did not show outcomes for reduced prevalence. Participants' ability to encourage migrants to check recruiters' credentials and report trafficking cases increased, but the effect of this on prevalence is unknown (Berman and Marshall, 2011).

Manav Sansadhan Evam Mahila Vikas Sansthan (MSEMVS) is an NGO that develops educational opportunities, provides alternative labour training, and promotes awareness of legal rights in Uttar Pradesh. It showed an improvement in labour conditions, mostly in agricultural, brick, and carpet industries, but did not report changes in the incidence or prevalence of human trafficking (Gausman *et al.*, 2016). The study does not explain which programme components may have been particularly effective at improving labour conditions, nor the connection between an improvement in labour conditions and the reduction in human trafficking.

Studies that address identification or interruption of trafficking situations (n=2) were ranked as being of moderate quality (n=1 (Berman and Marshall, 2011)) and of high quality (n=1 (Gausman *et al.*, 2016)). While the Gausman *et al.* (2016) study showed an improvement in labour conditions, it did not sufficiently explain how labour conditions resulted from programme components. The Berman and Marshall (2011) study could have been strengthened by a more robust methodological approach. Although it suggested that participants had an increased ability to check recruiters' credentials and report trafficking cases following the intervention, the study displayed limited methodological strength. The evidence on the effectiveness of awareness interventions in improving the identification and interruption of trafficking situations is, therefore, limited and should not be used to inform policy or practice. More robust research in this area is needed.

### 3.4 Training

Studies on training interventions used pre-post and mixed-methods evaluations (n=3) and often involved law enforcement, government agencies, NGOs, and community-based organisations. Studies reviewed in this REA suggest that training interventions result in increased identification and referral of victims, service provision for victims, cases being registered, traffickers arrested, and the closing down of places of exploitation.

Two studies looked at the training and sensitisation of law enforcement. Training interventions covered by the included studies were targeted toward law enforcement and aimed to increase participants' knowledge about human trafficking and other forms of modern slavery, as well as to improve their capacity to prevent, intervene, or provide services to victims depending on trainees' professions.

Studies report that trainings combined with the development of national policy resulted in increased government ownership and improved referral systems in Nepal and Bangladesh, although this linkage is not reliably demonstrated by the research and the outcomes of these trainings (changes in behaviour among participants, prosecutions or cases registered, and prevalence) are not documented (USAID, 2013; UN Women, 2014).

One unpublished study that was not included in this REA warrants mention.<sup>6</sup> A robust RCT among 1,000 police showed little post-training knowledge gain and suggested an unintended rise in victim-blaming. However, its results should be discussed as they contain important implications for the outcomes of law-enforcement training. The study showed an increase in knowledge on penalties for human trafficking and greater concern of the risk of trafficking within the police officers' jurisdictions. That said, it resulted in no change in perception of the scope of human trafficking

<sup>6</sup> Note that this study's inclusion here is based on the peer reviewer's recommendation

locally or nationally, and did not result in improved knowledge on procedures for handling suspects and recognising human trafficking (Boittin *et al.*, 2018).

Studies on training interventions were ranked as being of moderate quality (n=2 (USAID, 2013; USAID, 2016)) and of high quality (n=1 (UN Women, 2014)). Both USAID (2013, 2016) studies were limited by lack of ethical considerations in the study design. The USAID (2013) study also could have been improved by the use of a more robust sampling design, data analysis, and reporting of results. Importantly, the studies did not adequately state how they measured increase in knowledge among participants, which limits the strength of the evidence and suggests that more robust research on the effects of trainings should be conducted. The UN Women (2014) study ranked high quality and showed little increase in knowledge and adverse effects of training. The evidence on trainings for law enforcement therefore does not provide adequate confidence in the effectiveness of training interventions, and in fact show adverse outcomes. Studies do not explain clearly how the trainings resulted in these outcomes, whether these outcomes were sustained over time, and how they were measured. The reviewed training interventions did, however, show more ability to increase knowledge of the participants rather than the standalone awareness-raising interventions that were discussed above. More research on training interventions is required to understand their effectiveness. Furthermore, policymakers should continually look for the outcomes of emerging research as more work is done in this field.

### **3.5 Worker-led identification and unionisation**

There is only one study (Swendeman *et al.*, 2015) of moderate quality on worker-led interventions in self-regulatory boards (SRBs). The study found that a banking cooperative for sex workers led to an increase in savings, enabling sex workers to invest outside sex work and repay debts to their madams. In addition, their self-esteem and sense of personal autonomy increased. This study was ranked as moderate quality and did not provide adequate detail on the activities, composition, and programmes of the banking cooperative, or on how an increase in savings, subsequent increase in financial security, and self-esteem were measured. It therefore should not be used as evidence that sex worker-led banking cooperatives increase the financial and personal wellbeing of participants either in this context or others.

### **3.6 Rehabilitation and reintegration**

Three studies on rehabilitation were included in this review. A mixed-methods study on an NGO in Nepal examined rehabilitative and reintegrative services that included leadership training and educational, employment, and microcredit programmes. Seventeen of the 20 victims (85%) returned to their village of origin after leaving the shelter, many of whom were reported to be employed (55%) and to have satisfactory health (76%) (Crawford and Kaufman, 2008). Positive outcomes were attributed to the organisation's reliance on local knowledge since the organisation was founded and run by women in Nepal. Positive outcomes were also attributed to the gradual reintroduction of victims to their families and villages, as well as to the provision of income-generating, and culturally and economically relevant, skills (Crawford and Kaufman, 2008). The study does not discuss adverse or long-term outcomes and provides a limited description of the follow-up activities that were used. Although a large percentage of the victims that returned home reported positive outcomes, these outcomes were self-reported. While this study presents a promising view of a reintegration intervention, there is a significant amount of further research that needs to be undertaken in order to determine whether or not, and how, such approaches can be effective in general and over a longer period of time. This is particularly important in contexts such as South Asia where stigmas against former sex workers, for instance, can be difficult to overcome. The structural reasons for original migration from source areas, such as lack of

employment and other opportunities, may also not have changed sufficiently for a sustainable reintegration.

An intervention that provided counselling for minimising aggression among 120 trafficked girls in Kolkata found that counselling may be beneficial, but this was only measured by recipients' perception of the usefulness of the counselling received. The intervention consisted of weekly individual and group counselling provided by psychologists for a period of two months. Counsellors focused on abuse, depression, aggression, future aspirations, and positive thinking. The mean value of trafficked girls for aggression was 76.30 (standard deviation (SD) 19.8), which was more than non-trafficked girls with similar attributes (66.20, SD 17.0). Of the participants, 58.3% perceived counselling to be beneficial and 41.7% perceived it not to be helpful (Deb *et al.*, 2011). While this study suggests that counselling with the aim of minimising aggression may be beneficial for victims, it was measured solely on recipients of the intervention, which provides an opportunity for bias in self-reporting as well as bias arising from the stages of change that victims may have been experiencing at the time of the intervention. It should not solely be used as evidence that psychotherapeutic interventions aimed at reducing aggression are effective in reducing prevalence of or reducing the adverse effects of trafficking since it relied on self-reported outcomes, without follow-up, and represents only one study in one location.

Donger and Bhabha (2018) report the outcomes of government and NGO-implemented rescue and rehabilitation efforts for child labour trafficking cases from Rajasthan to Bihar. The study does not provide much detail on the components of these interventions, but it emphasises that rescue operations are implemented by poorly trained staff and often expose minor victims to additional trauma and abuse. These operations do not always include participation from doctors, police officers, female witnesses, or Anti-Human Trafficking Units (AHTUs). Additionally, instead of transferring children to government-sanctioned rehabilitation programmes under the Child Welfare Council (CWC), children are often taken to police stations instead, which increases the risk of abuse and re-victimization. Furthermore, once police are involved, First Information Reports (FIRs) are rarely or incorrectly completed, which means that a low number of employers are being arrested. In 2015, only 55 cases of child trafficking in India resulted in convictions out of 5,026 investigated (Donger and Bhabha, 2018).

The studies on rehabilitation (n=3) were all ranked as being of moderate quality (Crawford and Kaufman, 2008; Deb *et al.*, 2011; Donger and Bhabha, 2018) and were both limited by methodological constraints. Importantly, results from both Crawford and Kaufman (2008) and Deb *et al.* (2011) were self-reported. This presents a significant limitation given that outcomes were not sufficiently investigated by the researchers. The Donger and Bhabha (2018) report does not provide enough information on the components of the evaluated interventions, therefore, it is difficult to attribute outcomes to interventions. In total, the reviewed studies do not provide evidence that psychotherapeutic interventions are effective. Given the importance of psychotherapeutic interventions in assisting victims of trafficking rehabilitate and recover from trauma and other psychological effects of exploitation, the lack of good quality studies is concerning. While there have been evaluations of such interventions in the North American context, researchers should determine the effectiveness of programmes in South Asia, especially since the context and types of trauma from which victims recover in this context are vastly different from those elsewhere.

## 4 Discussion

The following sections discuss the results of this REA, including a review of promising interventions and interventions with unknown or unproven effectiveness, limitations and gaps in the evidence base, how this REA complements and relates to the existing literature, and the lessons that can be drawn for policy, practice, and research.

### 4.1 Overview of REA studies for future action

#### Intervention considerations for future investment and evaluation

Of the studies included in this REA, the following considerations should be given to the different interventions when determining future investments.

**Awareness- and knowledge-building interventions** (n=6) increased knowledge in some studies, but did not necessarily incite behavioural change among participants. Furthermore, knowledge was commonly assessed using subjective measures, such as how much participants felt they learned during training. Although some studies reported increased capacity to address the issue – for instance, checking recruiter credentials and reporting trafficking cases (Berman and Marshall, 2011) – they did not report behavioural change nor present objective measurements of outcomes. One study did cite improved labour conditions; however, it did not connect these outcomes with the prevalence of human trafficking (Gausman *et al.*, 2016).

Findings from the SWiFT evaluation indicate that anti-trafficking programmes that invest primarily in individual awareness raising, knowledge building, and empowerment to prevent forced labour are unlikely to achieve intended reductions in abuse (Kiss *et al.*, 2019). Interventions should attempt to take a ‘trajectory’ approach to address the power imbalances that tend to increase along the chain of migration, between migrants, recruiters, employers, and the state. Pre-departure training should be realistic, avoiding messages implying that migrants will be able to fully assert their rights and new knowledge. Training staff must be able to depict the reality of many migrants’ experiences and address women’s questions honestly (Kiss *et al.*, 2019).

While studies show that awareness has increased, they do not show that behavioural change results from awareness-raising activities. However, data saturation in this area has not been reached, and until more studies are conducted on the effectiveness of awareness-raising interventions in South Asia the effectiveness of awareness-raising interventions as a whole is unknown. Great caution should be used when implementing these interventions, especially knowledge-building and law-enforcement training interventions. Practitioners should consider the unintended consequences that these interventions bring and their VfM.

**Trainings** (n=3) were shown to result in increased knowledge on human trafficking, and sensitisation of participants to the issue, but their impact on the incidence and prevalence of human trafficking is unknown. Evidence on trainings for law enforcement does not provide adequate confidence in the effectiveness of training interventions, and in fact shows some adverse outcomes. Although some studies report increased rescue and repatriation following training, they do not sufficiently explain how the trainings resulted in these outcomes, whether these outcomes were sustained over time, and how they were measured. More research on training interventions is required to understand their effectiveness.

**Rehabilitation activities** (n=2) run by NGOs and their outcomes are missing from robust research. The research that has been produced on rehabilitation interventions in South Asia does not fully describe their components (e.g. legal aid, repatriation, medical and legal services,



repatriations, placements, etc.). Although it is difficult to connect specific activities to their corresponding outcomes from these studies, this does suggest that NGOs providing rehabilitative services are successfully providing services and placing and repatriating victims in some regard. Components that are noted as effective in assisting victims reintegrate include local knowledge of employees, utilisation of a multi-staged approach to contacting the victim's family in order to facilitate family acceptance, and provision of skills training that would allow victims to obtain suitable occupations in their context (Crawford and Kaufman, 2008).

Assessments of psychotherapeutic interventions and skills training in the South Asian context are similarly lacking, with one study on counselling to reduce aggression measured by patient satisfaction (Deb *et al.*, 2011) and one study suggesting that survivors choosing the skills they would like to pursue produces better outcomes (Crawford and Kaufman, 2008). Overall, data on the effectiveness of rehabilitation and reintegration interventions are inconclusive and present a wide gap in evidence on a very important aspect of caring for victims with complex medical, legal, social, and economic needs, as well as histories of trauma and abuse. It is especially concerning that current mechanisms used by law enforcement and NGOs focusing on identifying or intercepting victims rely on the current rehabilitative infrastructure, evidence on the effectiveness of which is still lacking. Referrals should rely upon institutions and organisations with proven track records for rehabilitation programming, whether through regulatory schemes or programme reports and observation. This is especially crucial given that survivors face many risks of re-victimisation once they have left exploitative situations, and should be provided with appropriate and effective services, both in the short and long term, which allow them to reintegrate back into society.

While coercion and force are part of some sex workers' stories, many also choose to pursue sex work as their profession because of economic and other familial circumstances (Swendeman *et al.*, 2015). Conflation is also an integral component of the incorrect implementation of policy and barriers to reintegration since many communities view victims as prostitutes (Rosy, 2016). Moreover, researchers who are unable to separate or define sex trafficked and voluntary sex workers in both primary and secondary research face difficulties in reporting outcomes on interventions that aim to identify and provide services to victims, since voluntary sex workers require a different set of services. Individuals who entered sex work voluntarily and those who were forced have different medical, social, and economic needs. They therefore require different interventions, which could be improved by effective distinction between types of entry into sex work in national policy.

Very few studies report on the adverse outcomes of evaluated programmes. This lack of adverse outcome reporting presents challenges for researchers, practitioners, and policymakers when trying to understand lessons that can be learned from current evidence. Two studies in the REA did document unintended consequences and negative outcomes. The Archer *et al.* (2016) study found that law-enforcement trainings may not be effective at changing police behaviour when identifying victims of trafficking or responding to trafficking incidents and could result in an unintended rise in victim-blaming. The SWiFT studies on knowledge-building interventions suggest that 'safe migration training' has the potential to mislead women into believing they will be safe if they migrate – which is something that cannot be guaranteed. Findings from the studies in this REA, especially the SWiFT evaluation results, indicate the importance of foundational research to inform intervention targets, content, potential adverse consequences, and adaptations that might be needed to refine the intervention. Specifically, determinants and realistic change pathways should be identified, and adaptive programming – including monitoring for any potential adverse effects of interventions – should be in place before considering an experimental design to measure effectiveness (Mak *et al.*, 2019; Blanchet *et al.*, 2018; Kiss *et al.*, 2019).

## 4.2 Strengths and limitations of the evidence base

### Strengths

This REA presents an important contribution to the current evidence base on interventions that address modern slavery in South Asia by providing an overview of the interventions that are evaluated by methodologically robust studies, critically appraising those studies, and making recommendations for policy, practice, and research based on what is known to work, according to these findings.

One of the key strengths of this REA is that it is based on a systematic literature review, for which we collected studies and evaluations from a wide range of sources both through online searches and through our informal networks of organisations working on modern slavery in the region, including over 4,000 potential studies from searches and 58 from citation tracking (Oosterhoff *et al.*, 2018). We used a broad range of outcomes to allow a wide range of studies to be included. However, after screening of titles and abstracts, many studies did not meet the criteria and were excluded, and not all the remaining studies focused on trafficking.

### Limitations

This REA reviewed 15 studies (10 of which were of moderate quality and five of high quality). Some moderately ranked studies still lack key aspects of robust evaluation (as set out above). Of the high-quality studies, the strongest study designs that can tell us about intervention effectiveness were poorly represented, with just one high-quality quasi-experimental study. Most of the high-quality studies (four out of the five) were observational study designs, which cannot tell us about the causal effects of an intervention. Just one moderately rated RCT was included. Additionally, there are several remaining gaps in the overall body of evidence. Therefore, the conclusions that can be drawn about the effectiveness of the interventions considered and the findings from this REA are limited.

Currently, a limited number of studies evaluate or report outcomes on interventions for modern slavery in general, including in these countries. Moderately ranked studies often did not adequately describe concepts, define outcomes, or describe how indicators were developed, and sometimes did not include sufficient disaggregated data on the study population. This REA is therefore limited in its ability to understand how interventions are shaped by the contexts in which they are implemented and in its ability to assess the impact of different packages of interventions and multi-component interventions.

A serious limitation of this REA is that the findings reflect the existing, limited evidence base on community and individually targeted interventions. Structural interventions, at the meso and macro levels, are missing (as detailed in next section).

Additionally, this REA only examines the outcomes of interventions that address human trafficking for labour and sexual exploitation and does not report the outcomes for interventions not focused on trafficking that may have been evaluated in the included studies. This may include interventions on child labour reviewed by the REA on intervention effectiveness in addressing child labour (Idris *et al.*, 2019).<sup>7</sup>

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<sup>7</sup> This REA focuses only on interventions that address human trafficking, and the child labour REA (Idris *et al.*, 2020) only reviews interventions that address child labour. Although three of the studies are reviewed in both of the REAs (Donger, 2018), each REA reports only the outcomes for interventions relevant to its individual research questions.

Findings from this REA cannot be used to assess which interventions may be effective in a particular region and/or setting, such as urban and rural parts of South Asia. Importantly, the findings of this REA also do not include any evidence from Pakistan. The findings thus do not represent the unique forms of sexual and labour exploitation in Pakistan, nor the economic, cultural, and migratory systems that affect modern slavery in Pakistan.

Many moderately ranked studies did not include adequate descriptions of intervention content, for example simply listing ‘community-based approach’, ‘education and awareness’, ‘psychotherapeutic’ and ‘medical’ services, ‘legal’ services, and ‘follow-up’. These studies often did not provide detail on how they were implemented, by whom, the training that was provided to implementers, the materials that were used, or the contextual factors that may have influenced the intervention’s effectiveness. This is a limitation in the evidence base, since moderate-quality studies connect a broad intervention category with an output or outcome, such as number of cases registered, community participation, and reduction in incidence or prevalence, without explaining how those outcomes were achieved. Limited reporting mechanisms and unharmonised data systems within and between government agencies and NGOs hinder evaluators’ attempts to conduct evaluations using these data.

Additionally, some moderately ranked studies (as well as many of the excluded evaluations) claim to assess programme effectiveness and efficacy, but in many cases they are written as ‘lessons learned’, with the study designs unsuitable for answering questions of effectiveness. This may indicate a lack of expertise among the evaluators that are selected by donors, a lack of cost/benefit information recorded and provided by programmes, or perhaps the purposeful exclusion of evaluative analyses that may portray interventions as ineffective. In some cases, moderately ranked evaluations also lack ethical approvals and do not include methods for obtaining informed consent among participants.

## **Gaps in the evidence base**

**General lack of systematic reviews and evaluations of programme effectiveness** (as opposed to process evaluations). Most studies in this REA, and in the evidence base on intervention effectiveness in South Asia as a whole, rely on observational data, some of which exclusively rest on self-reported data and not on stronger experimental designs. There is a lack of robust research (both quantitative and qualitative) into the determinants of exploitation, potential causal processes, and outcomes.

**Lack of research on short-term residential rehabilitation and therapeutic programmes.** This is especially important given that such programmes (such as Ujjawala, the Indian government’s scheme for the rehabilitation of victims of trafficking) are the primary method for rehabilitation adopted and sanctioned by South Asian countries. Research on rehabilitation programmes is further needed since most rehabilitation programmes are outsourced to NGOs and there is a lack of regulatory infrastructure.

The lack of medical and psychotherapeutic interventions included in this REA suggests that, while the existing literature does point toward the usefulness of such interventions in the rehabilitation of victims, robust evidence is lacking. Medical and psychotherapeutic interventions have been variously studied within the literature and, while there has been some progress in identifying effective approaches, the evidence base is far from reaching the point of data saturation in this respect. Understanding the effectiveness of medical interventions is especially important due to the developing infrastructure around the provision of such services to victims. An analysis of public health sector responses to sex trafficking, for example, found that service providers in India relied on personal contacts in healthcare facilities to provide illness-related episodic care for survivors

(Konstantopoulos *et al.*, 2013). HIV among sex worker communities in which victims of trafficking live and work is a commonly studied phenomenon (e.g. Ramesh *et al.*, 2008). Lower income and violence is associated with less accessibility to HIV/AIDS treatment and services, including lack of condom use, unwillingness to access health resources, and a general fall in health outcomes (Dasgupta, 2011). The majority of studies that link HIV with human trafficking, however, are mostly descriptive or assess the prevalence of HIV, rather than the effectiveness of interventions that aim to provide services to HIV-positive victims of trafficking. This leaves unanswered the question if, and what, special HIV services should be provided.

We were unable to determine the robustness of the evidence on rehabilitative interventions for short-term residential programmes from the studies included in this REA due to limitations in the study designs, which is largely consistent with the broader literature. This REA included few studies on interventions for counselling (Deb *et al.*, 2011) and vocational and skills training (Crawford and Kaufman, 2008), which is interesting since research in this field has in many ways supported such interventions (Jensen, 2018). This REA illuminates the lack of data on how such interventions are implemented effectively, especially in the South Asian context.

There is an opportunity to examine the effect of state- and national-level policies on identification and referral. Additional opportunities for research include linking community-based programmes to prevalence of trafficking, the relationship between awareness and behavioural change (if there is one), how psychological effects differ between victims who have experienced different timeframes and forms of abuse, analysis of the stages of change in the South Asian context, linkages between social protection and anti-human trafficking programmes, and the effectiveness of programmes that aim to reduce stigma against victims in their communities.

**Vocational training:** There is little evidence that suggests which kinds of vocational training are effective and whether they should be combined with other interventions, such as the provision of health services or continued education, or implemented after rehabilitation programmes, for instance.

**Recruitment and intermediaries:** While this review included no studies that solely assessed recruitment methods – for example, interventions that enable target populations to identify fake job and marriage proposals and to report traffickers – recruitment is often covered by descriptive literature that does not focus on or evaluate interventions. Therefore, descriptive studies that more commonly discuss recruitment strategies – for instance, in surveys of victims in shelters or of individuals in a community – but which did not evaluate interventions were not included in this review.

**Legal interventions:** These are important in informing victims of their rights and the services available to them; however, few studies within the current literature base explore how such legal advice can be provided. Several stakeholder recommendations to the Ministry of Women and Child Development regarding India's Trafficking of Persons (Prevention, Protection and Rehabilitation) Bill recommend that national policy include provisions for informing victims of their rights (Anti-Slavery International, 2016; Caritas India, 2016; Center for Child and the Law, 2016). Reviews also suggest that when the rights of sex workers are recognised through sex worker-led coalitions and groups, victims generally report increased access to health and legal services (Jensen, 2018). No studies on such interventions were included in this REA, despite support for legal programmes from stakeholders. This represents a major gap in the literature that, if addressed, could inform policymakers and practitioners on if, how, and when the provision of legal support prevents modern slavery and/or reduces harm among victims.

**Community vigilance and youth groups:** Community-based groups run by youth and those set up by adults for the purpose of vigilance or monitoring the whereabouts and safety of children and

adults in the community are commonly implemented interventions in South Asia to prevent the incidence of modern slavery. Given that many organisations implement these interventions and they affect vulnerable populations, as well as children, research should be undertaken to understand how and to what effect community-based programmes are implemented.

**Border monitoring:** Border monitoring – i.e. the practice of ‘monitoring a border’ by identifying potential situations in which someone is being, or could potentially be, exploited – is also a common intervention implemented by NGOs. It is particularly common on the border of Nepal and India. There is a lack of evidence on the effectiveness of such interventions. Evidence on ‘what works’ in border monitoring could significantly improve the effectiveness of these interventions, or imply other strategies or tools better suited to mid-route identification if border monitoring itself is not effective.

**Meso- and macro-level drivers of exploitation:** Interventions covered in this REA reflect the existing limited evidence base focused on individual and community-based interventions. Crucial intervention areas operating at meso and macro levels were not picked up in this REA, some of which are emerging and some of which are operating but with little evidence. These include:

- Recruitment practices, including migrant worker networks;
- Trade unions;
- Business, corporation, and supply chain interventions (e.g. CSR, blockchain);
- Labour inspections (e.g. training, victim detection tools);
- Legislative and regulatory actions (e.g. related to recruitment, corporate reporting, criminal/civil penalties for violations, including victim compensation); and
- Macro policies (e.g. sanctions such as EU red/yellow cards, Trafficking in Persons report rankings).

Overall, there is a need for more robust, and context- and population-specific, research that reports the effectiveness of interventions on reducing the incidence and prevalence of human trafficking.

### 4.3 Findings vs. previous research

This REA is generally consistent with the existing literature regarding awareness-raising efforts, suggesting that awareness and community-level educational campaigns may increase knowledge about the issue of human trafficking, but there is little robust evidence to suggest that increased knowledge or other outputs from awareness activities cause behavioural change. Zimmerman *et al.*'s 2016 systematic review of safer migration and community-based prevention programmes for trafficking finds that outcomes are not well defined as there is little evidence that suggests awareness-raising preventative approaches are effective (Zimmerman *et al.*, 2016).

The lack of rehabilitation, reintegration, legal, worker-led, border monitoring, community-based, and medical and psychotherapeutic interventions in the review is reflective of the gaps in the evidence base, as well as the lack of robust studies. With regards to the global evidence base, there is a range of literature that has been developed over the past five years on evaluations of psychotherapeutic interventions for victims of commercial sexual exploitation and trainings for law enforcement in the United States, as well as on multidisciplinary task forces and referral mechanisms in the United Kingdom.

This REA included few studies on interventions for counselling (Deb *et al.*, 2011) and vocational and skills training (Crawford and Kaufman, 2008), which is interesting since research in this field

has in many ways supported such interventions (Jensen, 2018). This REA illuminates the lack of data on how such interventions are implemented effectively, especially in the South Asian context.

The lack of evidence that this REA finds on intervention effectiveness in South Asia is consistent in many ways with the gaps in the larger evidence base in South Asia. This REA is also largely consistent with previous reviews of intervention effectiveness in South Asia, which have mainly concluded that there is not enough evidence to state which interventions are effective and why.

## 4.4 Implications of this REA

The following implications have been gathered from the evidence reviewed above. Interventions that display effectiveness in their respective areas of implementation are noted below.

### For policy

- **Evaluate the processes, effects, and potential adverse consequences of policies on systems and for individuals:** Given the highly systemic drivers of human trafficking and exploitation, greater attention and evaluation work should be invested in interventions that go beyond ‘individual-level’ strategies.
- **Evaluate existing rehabilitation schemes:** Importantly, since there is a large gap in research on the effectiveness of rehabilitative interventions, funded interventions, such as those sanctioned through the Ujjawala scheme (the Indian government’s scheme for the rehabilitation of victims of trafficking), should be evaluated, especially for adverse and long-term outcomes, before funding is provided for other rehabilitative programmes. Evidence is urgently needed on effective, non-stigmatising mental health support that can be delivered in low-income settings, and also with mobile populations.
- **Training with law enforcement:** Before investing in law-enforcement training, policymakers need to consider the available evidence on the effectiveness of anti-modern slavery trainings for law enforcement in that context.
- **Definitions of victims of trafficking in policy and screening tools, particularly voluntary sex work vs. sex trafficking:** Policy should also clearly define what constitutes a victim of trafficking and how this differs from a voluntary worker. When sex work and sex trafficking are legally conflated, there is more confusion about the identification of victims and the prosecution of exploiters than when labour exploitation and trafficking are conflated. Individuals who entered sex work voluntarily and those who were forced have different medical, social, and economic needs. They therefore require different interventions, which could be improved by effective distinction between types of entry into sex work in national policy.

### For practice

- **Use the existing evidence and evaluate interventions:** Future intervention investments should draw on strong, context-specific evidence, and where programming evidence is less available then intervention investments should be accompanied by funds dedicated to assessing effectiveness, incorporating monitoring and feedback mechanisms to adapt and refine interventions, and, ultimately, to articulating models for replication and scale-up. Practitioners should also be supported to implement robust evaluations of ongoing and past interventions that report both positive and negative outcomes. Practitioners should also consider working with researchers and evaluators on evaluating the impact of interventions that have already ended and use the results to inform ongoing and future interventions.

Practitioners, researchers, and evaluators should also explore different ways of looking at and measuring intervention outcomes and impact.

- **Recognise structural constraints:** Programmes should provide services to individuals in ways that recognise the broader structural constraints in which people make their choices. This applies not only to programme beneficiaries but also, for example, to staff of law-enforcement agencies, and affects if and how individuals can apply knowledge and awareness gained. Adequate protection for all whistleblowers, including law enforcement, labour intermediaries, or employers, needs to be in place. NGOs that return victims to their families must be sure that these returns are voluntary, victims are placed in safe environments, and that return processes aim to reduce stigma.

## For research

- **Move beyond a focus on individual risk factors and behaviours:** Researchers should consider how larger forces contribute to or prevent extreme exploitation (Kiss and Zimmerman, 2019), because individual-level characteristics alone (education, age, gender) do not appear predictive of trafficking risks. Instead, modifiable factors along causal pathways such as relationships with recruiters, employer behaviours, and regulations that support workers' and migrants' rights (e.g. labour inspections, penalties and compensation for abuses and non-payment of wages) should be considered.
- **Conduct process evaluations to understand potential causal mechanisms, how interventions might be adaptable in other settings, and any potential adverse consequences and for whom:** Researchers should ensure that monitoring systems are in place to document the effects of interventions across time and sub-populations, including regular learning and adaptation to course-correct programmes and prevent unintended consequences (Kiss and Zimmerman, 2019). Researchers should also realise the importance of local sociocultural, economic, and political contexts in determining programme outcomes.
- **Facilitate research–practitioner collaborations to develop theories of change that specify clear links between interventions and outcomes:** Researchers should measure relationships between outcomes and intervention activities versus primarily outputs. Researchers should avoid relying on broad activity categories (such as 'club', 'rehabilitation programme', 'shelter', and 'training') versus specific and clearly articulated outcomes (e.g. reduction in prevalence, increased identification and referral, and improved service provision). In this way, policymakers and practitioners will be more likely to gain evidence on the outcomes they want to achieve based on well-defined activities (e.g. 'skills training for one year in textile manufacturing') rather than more vague investigations of activity categories (e.g. 'skills training'). Evaluators and researchers should also look into the methodological lessons in other fields regarding impact evaluations in general, and regarding integrated and multi-component projects in particular.
- **Conduct robust, theory-based research into the determinants of exploitation, potential causal processes, and outcomes before investing in both qualitative and experimental evaluation designs:** Researchers should ask whether RCTs are feasible, acceptable, and capable of answering questions of effectiveness for each specific intervention at its particular stage of development (Deaton and Cartwright, 2018). Experimental designs may be very useful once there is sufficient evidence and confidence about the isolated contribution of an intervention to changes in intended outcomes. Until then, researchers should focus on the development of basic concepts, intervention theory, harm prevention, and appropriate research methods (Kiss and Zimmerman, 2019). Researchers should also conduct robust qualitative research to understand intervention effectiveness given the ability of qualitative data to more descriptively highlight the experiences of intervention implementers and participants.

## 5 Conclusion

This REA has presented a review of 15 studies on interventions implemented in South Asia to combat modern slavery in the form of human trafficking for the purpose of sexual and labour exploitation. Given the limitations of study designs, concept definition and outcome measurement of moderate-quality studies, poor targeting of some interventions, and implementation failure in some cases, we urge substantial caution in relying on the interventions described as models for future investment.

This REA suggests that current research is insufficient to provide clear, evidence-driven directions of ‘what works’ to prevent or intervene in trafficking. The current evidence base as a whole does not offer sufficiently robust findings on the impact of different intervention packages or multi-component interventions or detect the interventions’ interactions within the local context and the larger structural forces. Given these limitations, this REA suggests that intervention investments cannot be well targeted based exclusively on the evidence reviewed here. For future programme design and investment, stronger intervention evaluation evidence is needed, particularly intervention development research that operates alongside promising activities. Promising interventions should be implemented in parallel with robust evaluations to determine the effectiveness of these programmes. Programme evaluation investments should be based on field visits with local actors and discussions with policymakers, law enforcement, researchers, practitioners, and survivors.

There are a limited number of studies and evaluations that assess or report outcomes on interventions in the countries in question. The literature base is variable in quality and has several gaps, including on psychotherapeutic, rehabilitative, and reintegration interventions, which presents barriers for policymakers and practitioners seeking to implement an evidence-based approach in their programmes. The lack of robust study design in some of the moderately ranked studies and predominance of observational studies in the high-quality studies (which cannot ascertain effectiveness), in addition to the gaps in the literature base, suggest more research should be conducted before making concrete recommendations to policy or practice concerning the implementation of anti-modern-slavery programming.

Programmes with unproven effectiveness, such as standalone awareness-raising interventions that do not enable people to act on their knowledge, should be reconsidered. While studies show that awareness has increased, they do not show that behavioural change results from awareness-raising activities. However, data saturation in this area has not been reached, and until more studies are conducted on the effectiveness of awareness-raising interventions in South Asia the effectiveness of awareness-raising interventions as a whole will remain unknown. Great caution should be used when implementing these interventions, especially knowledge-building and law-enforcement training interventions. Practitioners should consider the unintended consequences of these interventions and their VfM.

Caution should also be used when implementing law-enforcement trainings, which in some cases have been shown to produce adverse outcomes. Additionally, practitioners and policymakers should continually monitor their programmes for adverse outcomes. More research is needed for law-enforcement training, rehabilitation and reintegration, psychotherapeutic, and border monitoring interventions to understand their components and effectiveness in South Asian countries.

Consideration must be given to strategies that target structural barriers to safe migration and decent work and how these might operate to reduce trafficking prevalence and individual risk and outcomes. Further research should focus on describing and evaluating specific activities within



broader comprehensive programmes to help sequence and prioritise interventions, while recognising local dynamic complexities. Researchers should also focus on describing and evaluating specific activities within broader comprehensive programmes, such as individual programmes and interventions within larger portfolios of projects. More research should be conducted on: ecological factors above individual-level factors of trafficking (e.g. recruitment, labour, international sanctions); the unintended consequences of anti-trafficking interventions, such as vigilance groups that may hinder migration; groups providing care (e.g. mental health support) and rehabilitation programming in low-resource settings; development of search terms that can be used to identify interventions on recruitment, worker-led interventions, and private-sector response; and the effectiveness of knowledge-building and law-enforcement training interventions in South Asia.

Future efforts to improve responses to modern slavery must aim to improve intervention theory, design, and outcome measurement. There is a growing interest in the topic in the region, and this is reflected in increasing funding levels. In the last few years, the British Academy, ECPAT France, and the US Department of State have all announced research funding for tackling slavery, human trafficking, and child labour. Given the still nascent field of trafficking evaluation and poor concept and outcome measurement to date, realist, theory-based evaluations should be implemented prior to investment in more resource-intensive experimental designs.

Interventions with similar components and processes in different industries and issue areas may be able to provide lessons for interventions that address modern slavery: for instance, examining social protection community-based programmes, or the effectiveness of training components for health providers. Additionally, policymakers and practitioners should pursue data sharing and collaboration in current and future programming and should seek to implement robust research and evaluations that report both positive and negative outcomes.

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## Annex A QAT

### 1. Is a specific intervention (s) clearly described in the study?

If no, exclude. If yes – continue

### 2. Are disaggregated data available for the study population of interest in this REA?

If no, exclude. If yes – continue

Assessment criteria	Yes – fully	Yes – partial	No	Cannot tell	Comments
1. Does the study have a clear, explicit, and feasible research question(s) or statement of intent(s)?	2	1	0	0	
2. Is the overall study design clear and appropriate to answer the research question(s)?	2	1	0	0	
<b>If no/cannot tell to both 1. and 2., end survey and mark as 'low' quality</b>					
3. Have ethical considerations been explicitly discussed and properly managed?	2	1	0	0	
4. Is the sampling method explicit and appropriate?	2	1	0	0	
5. Is the sample itself adequate?	2	1	0	0	
6. Were the exposure measure(s) clearly defined and valid?	2	1	0	0	
7. Were the outcome measure(s) clearly defined and valid?*	2	1	0	0	
8. Is the analytical procedure transparent and appropriate?*	2	1	0	0	
9. Are the results clear and precise?	2	1	0	0	
10. Are limitations identified and accounted for?	2	1	0	0	
<b>TOTAL SCORE (0–20)</b>					<b>Overall study assessment: Low / Moderate / High</b>

#### Overall study assessment:

Low: 0–10 (50% or less)

Moderate: 11–15

High: 16–20

\* Items adapted from NHLBI QAT for observational cohort and cross-sectional studies

## Scoring

No/cannot tell: 0 – Study does not meet criteria/answer question

Yes, partial: 1 – Study partially meets criteria/gives a partially satisfactory answer to the question

Yes, fully: 2 – Study fully meets criteria/gives a fully satisfactory answer to the question

## Source

Adapted from Cockbain, E., Bowers, K. and Dimitrova, G. (2018) 'Human trafficking for labour exploitation: the results of a two-phase systematic review mapping the European evidence base and synthesising key scientific research evidence'. *Journal of Experimental Criminology*, pp. 1–42. Available at: <https://link.springer.com/article/10.1007/s11292-017-9321-3> [Accessed 14 April 2018].

## QAT scoring guide

Assessment criteria	Yes – fully	Yes – partial	No	Cannot tell
1. Does the study have a clear, explicit, and feasible research question(s) or statement of intent(s)?	2 *Research aim/question is clear and it is easy to understand what the researchers were investigating	1 *Research aim stated but some elements of what is being investigated remain unclear	0	0
2. Is the overall study design clear and appropriate to answer the research question(s)?	2 <b>Appropriateness</b> *For qualitative studies, if the research aim was to interpret or illuminate actions/subjective experiences of participants *For quantitative studies, if the aim was to assess a beneficial or harmful effect, risk factor associations <b>Clarity</b> *no ambivalence about what the study design is	1  *If there is some doubt that X was the best study design to answer the research question(s)   *If study design is not 100% clear	0	0
<b>If no/cannot tell to both 1. and 2., end survey and mark as 'low' quality</b>				
3. Have ethical considerations been explicitly discussed and properly managed?	2 *Institutional Review Board (IRB) approval obtained *Ethics/safety procedures described *Referral networks specified (where applicable)	1 *Ethics/safety procedures described	0 *No mention of IRB or ethics procedures	0 *No mention of IRB or ethics procedures

4. Is the sampling method explicit and appropriate?	<p>2</p> <p>*Sample characteristics, and inclusion and exclusion criteria, clearly described (who, where, when) prior to sample selection</p> <p>*Sampling method (e.g. purposive, stratified, random) is clearly described and appropriate to the research aim</p>	<p>1</p> <p>*Sample characteristics and methods somewhat described but lacking detail in some domains (e.g. when sampled, or type of sampling method)</p>	0	0
5. Is the sample itself adequate?	<p>2</p> <p>*If qualitative study, rationale is given for sample size/authors discuss saturation of data. High response rate</p> <p>*If quantitative study, sample size and power calculations described to justify sample size</p> <p>*response rate <math>\geq 80\%</math></p>	<p>1</p> <p>*Some rationale for sample size offered but some concerns about clarity</p> <p>*Sample size or power calculations not mentioned</p> <p>*response rate <math>\geq 70\%</math></p>	<p>0</p> <p>*Small sample/not justified</p> <p>*response rate <math>\leq 50\%</math></p>	<p>0</p> <p>*No mention of rationale for sample size</p>
6. Were the exposure measure(s) clearly defined and valid?	<p>2</p> <p>*For qualitative studies, how exposure data gathered clearly described (e.g. interviews) and methods (topic guide)</p> <p>*For quantitative studies, validated tools used to measure exposure, consistently implemented and exposure clearly defined</p>	<p>1</p> <p>*Some mention but not clearly described how outcome data were gathered, or topic guides conceived</p> <p>*Non-validated tools used to measure exposure</p>	0	0
7. Were the outcome measure(s) clearly defined and valid?	<p>2</p> <p>*For qualitative studies, how outcome data gathered clearly described (e.g. interviews) and methods (how topic guide conceived)</p> <p>*For quantitative studies, pilot testing and refining of final tools</p> <p>*Validated tools used to measure outcomes</p>	<p>1</p> <p>*Some mention but not clearly described how outcome data were gathered, or topic guides conceived</p> <p>*Non-validated tools used to measure outcomes</p>	0	0

	and outcomes clearly defined			
8. Is the analytical procedure transparent and appropriate?	<p>2</p> <p>*If qualitative, in-depth description of analysis process is given (e.g. thematic, grounded theory), e.g. how themes were generated</p> <p>*Contradictory data are taken into account</p> <p>*Authors' reflexivity on their role and potential bias in findings</p> <p>*If quantitative, inferential analyses appropriate to research aim</p> <p>*Confounders measured and adjusted for (in non-RCTs)</p> <p>*If mixed methods, triangulation appropriate to answer research questions</p>	<p>1</p> <p>*Analysis process named (e.g. thematic) but no in-depth description</p> <p>*Only descriptive statistics given</p> <p>*Confounders not measured/adjusted for</p>	0	0
9. Are the results clear and precise?	<p>2</p> <p>*If qualitative, findings are explicit</p> <p>*Sufficient data are presented to support the findings</p> <p>*Credibility of findings discussed (e.g. &gt; 1 analyst, triangulation of sources)</p> <p>*Adequate discussion, both for and against researchers' arguments</p> <p>*If quantitative, precision of estimates (e.g. narrow confidence intervals, small standard errors).</p> <p>*Clear reporting in tables and figures</p>	<p>1</p> <p>*Findings may not include sufficient supporting data, or triangulation, or alternative arguments may not be mentioned</p> <p>*Imprecise/noisy estimates with no explanation (e.g. exploratory data analysis)</p> <p>*Tables and figures somewhat clear but some information lacking</p>	0	0
10. Are limitations identified and accounted for?	<p>2</p> <p>*Limitations of sampling, analysis, clearly described</p>	<p>1</p> <p>*Limitations briefly mentioned/only in one domain (e.g. sampling)</p>	0	0
<b>TOTAL SCORE (0–20)</b>				

**Overall study assessment:**

Low: 0–10 (50% or less)

Moderate: 11–15

High: 16–20

## Annex B Data extraction for moderate- and high-quality studies

### Person entering data:

**Study author/year\***

**Study design\***

**Country\***

**Modern slavery type\***

### Setting:

**Participants** (N, sex, age range, treatment and control where applicable):

**Inclusion criteria:**

**Exclusion criteria:**

**Intervention** (describe in narrative form):

**Control** (describe, where applicable)

**Primary outcome measure** (and cite main outcome category from REA studies Excel):\*\*

**Secondary outcome measure(s)** (and cite main outcome categories from REA studies Excel):\*\*

**Results and limitations** (describe in narrative form, with effect estimates where appropriate).  
(Please include one to two sentences on limitations and the overall quality score):

### Notes

\*Info already available in REA studies Excel

\*\*Cite main outcome category from REA studies Excel.

For example: Modern slavery survivors > Awareness and attitudes

Community > Economic factors

Service providers > Quality of service/care

Setting: suggested format (plus any info that contextualises, e.g. 'Schools in earthquake-affected areas, XXXX district')

- Community
- School
- Service provider(s)
- National level (ecological study at population or group level)

Results (describe in narrative form):

Please include a sentence at the end with the quality score and some limitations. (Refer back to the QAT answers as needed, in addition to other limitations mentioned by the authors)

E.g. ‘Confidence in study findings/study quality was deemed to be moderate (score: 11), because of small sample size and lack of balance of the control and intervention groups at baseline.’

## Annex C Outcome categories and sub-categories

MODERN SLAVERY SURVIVOR OUTCOMES		
1	<b>Economic factors</b>	Includes outcomes related to reduced economic risk of incidence or recurrence of bonded labour or trafficking (protective factors), e.g. little/no debt, enrolment and use of social and health protection schemes, wage recovery (if exited exploitation)
2	<b>Life skills</b>	Includes outcomes considered to be protective factors, e.g. work/job decision making and planning. Includes marriage decision making. Includes improvements in self-esteem and confidence of survivors
3	<b>Awareness of and attitudes toward modern slavery</b>	Includes reports on improved awareness of and attitudes toward modern slavery specifically
4	<b>Access/take-up of preventative and response services</b>	Includes outcomes such as availability and effective use of shelters, as well as health/psychological and legal services (including services to obtain documentation/legal status). Includes enrolment in and/or completion of set level of schooling
5	<b>Health status</b>	Includes outcomes related to improved health/wellbeing status of survivors (health protection/insurance is under economic factors, where health-related impoverishment is a risk factor for modern slavery). Includes reduced risk of HIV. Includes increased age of sexual initiation and increased age of marriage. Includes self-care practices among survivors
COMMUNITY-/SOCIETAL-LEVEL OUTCOMES		
6	<b>Economic factors</b>	Interventions that improve material wellbeing of wider family or community of potential modern slavery victim or modern slavery survivors. Includes interventions that link wider family or community to government schemes that provide financial incentives for, for example, girls education, or connecting families/communities to government anti-poverty grants, etc.
7	<b>Awareness of and attitudes toward modern slavery</b>	Includes reports on awareness of and attitudes toward modern slavery in the wider community (at home or at destination, if trafficked), including toward child marriage and gender roles. Includes attitudes toward survivors returning to home communities/families and their acceptance back into communities/families (reintegration)
8	<b>Incidence or prevalence of modern slavery</b>	Any reports on the prevalence of modern slavery at the community or sub-national level will be included here
EMPLOYER/LANDLORD/BROKER OUTCOMES		
9	<b>Awareness of and attitudes toward modern slavery</b>	Includes reports on improved awareness of and attitudes toward modern slavery
10	<b>Regulatory compliance</b>	Includes compliance with the Occupational Safety and Health Act, labour, anti-trafficking legislation, and legislation related to the use and role/responsibilities of labour intermediaries or brokers (e.g. mandatory broker registration)
11	<b>Working/living conditions</b>	Outcomes related to working conditions (beyond minimum regulatory compliance with relevant legislation), which may be brought about by (non-binding) regulations, such as corporate social responsibility audits and value chain interventions. May involve employer-facilitated workers' wellbeing initiatives
12	<b>Incidence or prevalence of modern slavery</b>	Any reports on prevalence of modern slavery by industry or sector will be included here
<b>SERVICE PROVIDER OUTCOMES: Includes both NGO and government service providers (includes labour officials, excludes criminal justice officials)</b>		



13	<b>Awareness of and attitudes toward modern slavery</b>	Includes reports on improved awareness of and attitudes toward modern slavery
14	<b>Quality of service/care</b>	Includes outcomes related to improved service quality resulting from better case management practices, trauma-informed care, etc.
15	<b>Victim identification processes</b>	Studies measuring outcomes related to victim-centred identification processes (e.g. implementation of interpreter systems, following best practice guidelines for victim-centred interviews) and effective service provider responses to potential cases of modern slavery (e.g. reported via hotlines, referrals)
<b>CRIMINAL JUSTICE/LEGAL/POLICY OUTCOMES: Includes criminal justice officials and related legal/policy-level outcomes</b>		
16	<b>Awareness of and attitudes toward modern slavery</b>	Includes reports on improved awareness of and attitudes toward modern slavery among criminal justice officials
17	<b>Victim identification processes</b>	Studies measuring outcomes related to victim-centred identification process (e.g. implementation of interpreter systems, following best practice guidelines for victim-centred interviews) and effective service criminal justice responses to potential cases of modern slavery (e.g. reported via hotlines, referrals)
18	<b>Anti-corruption</b>	Outcomes related to reducing corruption/bribery linked to modern slavery among criminal justice officials
19	<b>Criminal justice response</b>	Outcomes related to criminal justice responses (e.g. investigative capacity leading to timely case turnarounds, higher prosecution rates for modern slavery offenders, number of prosecutions or convictions secured for modern slavery offences)
20	<b>Incidence or prevalence of modern slavery</b>	Any reports on the prevalence of modern slavery at the national level will be included here
<b>CROSS-CUTTING THEMES: For important themes such as cost-effectiveness of an intervention across the main outcome categories. Cost-effectiveness can provide important insights into an intervention's VfM in a given context</b>		
21	<b>Cost-effectiveness</b>	Any reports on the prevalence of modern slavery at the national level will be included here

## Annex D Intervention categories and sub-categories

<b>RISK-BASED PREVENTION: Evaluations of interventions which target specific risks associated with falling into debt bondage/bonded labour, trafficking, domestic servitude, forced labour, and the worst forms of child labour. Interventions may be targeted at specific at-risk groups for bonded labour or trafficking (e.g. lower and backward castes) or they may target the wider community where at-risk groups reside (for cross-border trafficking this can include community interventions with the migrant community or the host country population).</b>		
1	Economic interventions	Interventions related to economic empowerment and their effects on reducing risk of bondage and exploitation
2	Social and health protections and care	Interventions related to social and health protection schemes and care
3	Education and training interventions (targeted)	Training that is targeted mainly at potential at-risk groups for modern slavery, but can also include training with health or education providers
4	Awareness raising (wider community)	Awareness-raising campaigns or interventions targeted at the general public, or at the community level broadly (no specified target groups), delivered by civil society organisations or national or local government. Often includes mass media interventions at the community level on topics including bonded risks of trafficking, modern slavery indicators, use of intermediaries, migrating with legal documents via formal channels, migrants' rights
5	Awareness raising (targeted)	Awareness-raising campaigns or interventions targeted at specific groups (e.g. bonded labourers, prospective migrants in areas of high outmigration, intermediaries, landlords, moneylenders) delivered by civil society organisations, community leaders, and local government. Often includes tailored content delivered in interactive workshops and orientations on topics including risks of trafficking, modern slavery indicators, use of intermediaries, migrating with legal documents via formal channels, migrants' rights
6	Social norms/empowerment (other)	Interventions related to social roles and norm change
<b>SERVICE RESPONSES/DELIVERY and COORDINATION: Evaluations of services and interventions provided to victims (either as they are being exploited or after they exit an exploitative situation, including bonded labour). Services may be provided by civil society organisations or government providers. Activities providing emergency and longer-term support to victims, such as case management or reintegration and rehabilitation, fall under this category.</b>		
7	Legal services/assistance	Interventions which involve the provision of legal services and assistance to modern slavery survivors or persons at risk for modern slavery
8	Health services	Health services which are provided to bonded labourers or trafficked persons still being exploited or who have not yet exited the exploitation phase. Examples include mobile clinics, medical screening/check-ups (e.g. at work sites), and standard operating procedures for handling human trafficking cases identified in healthcare settings
9	Reintegration and rehabilitation	Various support services provided to or interventions with victims of modern slavery who have exited an exploitative situation (bonded

		labourers or trafficked persons). Interventions may be in shelter settings or in communities where a bonded labourer, trafficked person, or child labourer is returning to after exiting exploitation. Capacity-building/training interventions with civil society organisations or government service providers (social workers, counsellors, shelter staff)
10	Training of NGO/government welfare providers	Includes training with NGO and government welfare providers. Criminal justice/police are excluded here
11	Community-led services	Services led by and for bonded labourers, trafficked persons, etc., such as SRBs and peer group programmes at the workplace
12	Victim identification	Any interventions aimed at improving victim identification rates and processes, overall or in specific sectors, including establishment and use of referral channels to other services
13	Documents/regularisation	Interventions aiming to regularise the status of persons, including undocumented migrants, typically during migrant amnesties declared by the host government, where undocumented status is considered a risk factor for trafficking. Interventions may also be related to improving migrant possession of documents
<b>INDUSTRY INTERVENTIONS AND VALUE CHAINS: Employer- or industry-targeted interventions which may reduce risk of exploitation. Initiatives may be led by industry or small and medium-sized enterprises (SMEs) themselves, or they may be led by external parties (industry coalitions, government officials, multinational companies for whom the SME is in the supply chain). Interventions may also target landlords using bonded labour.</b>		
14	Training with employers, SMEs	Training programmes with employers specifically
15	Supply/value chain interventions	Supply and value chain interventions that are more macro in scope and which do not involve training
16	Employer-led interventions	Interventions which are employer led or driven
<b>LEGAL AND POLICY-LEVEL INTERVENTIONS: Evaluations of interventions targeted at the institutional level, to impact factors contributing to risks of bonded labour/trafficking by changing laws and policies, and enforcing existing regulation. Interventions may aim to improve investigation and prosecution of exploitative landlords or traffickers, or enhance regional cooperation and leadership on criminal justice responses to modern slavery.</b>		
17	Legislative or policy change	A legislative or policy change that may affect prevalence of modern slavery
18	Training/support to improve criminal justice response	Targeted training to improve criminal justice responses
19	Coordination and partnerships	Interventions which involve establishment or support of partnerships across sectors or government departments to combat modern slavery
20	Community-based legal initiatives	Interventions involving community-driven legal initiatives
21	Targeted advocacy	Targeted advocacy interventions with policymakers, legislators, or service providers
<b>EMERGING TRENDS: A separate category for interventions not defined at a specific level (e.g. individual, community, state) or for interventions that cut across the above main categories (risk-based prevention, service responses/delivery and coordination, industry interventions and value chains, legal and policy-level interventions).</b>		
22	ICT-based interventions	Technology-based interventions

23	Multi-component interventions	Includes studies evaluating interventions that operate across multiple intervention main categories (risk-based prevention, service responses, industry, legal and policy level). For example, an intervention providing pre-departure orientations while also providing reintegration services for returned migrants. We will count multiple component interventions that cover different types of intervention/outcome across the map
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