Solutions To The Illegal Organ Trade

Focusing resources of decreasing and eventually eliminating the number of potential victims and actual victims would be a far greater solution to eradicating the organ trade, than providing police officers, customs, immigration and border officials with training simply to identify those selling their organs. These law enforcers are only partly at the frontline concerning identification of those involved in the trade, but this is far from a long-term solution, especially as the trade still remains mostly underground and the scale of operations still remains unknown. If more sellers and brokers came forward with information this would better provide identification of those involved because their stories provide the minimal knowledge that is already known about the trade. Therefore, it would be much more effective, to adapt the laws and policies already in place so that victims of the trade are not persecuted and would therefore be more protected and encouraged to report to officials. Furthermore, in order to eradicate the organ trade, legal legislation needs severe improvement and extension, so that the social and economic factors which pressurise donors into selling their organs are also considered. It seems probable that the best course of action is therefore to improve the criminalisation of the illegal trade and introduce new worldwide legislation that discusses the wider social issues, rather than just abandoning the altruistic system adopted from the West.

The Declaration of Istanbul 2008 is arguably, like other current legislation on the organ trade, severely flawed and fails in multiple ways by only concerning the ‘surface’ of the main issues. However, in 2018 a revision to the legislation was proposed which has made promising developments and given more detailed solutions on how to properly tackle the organ trade. This is encouraging, in that it shows law makers are internationally recognising the existence of the trade and acknowledging the need for development. Most importantly, the revisions stress the importance of international co-operation and how essential aiding other countries is, in order to tackle the issue. It has aimed to guide policymakers and health professionals in applying the internationally agreed principles that relate to donation and transplantation, therefore essentially trying to improve implementation of current policy by providing more detailed guidance. In particular it has set out to encourage “Countries with well-established transplantation and living and deceased donation programs are encouraged to share information, expertise and technology” which shows how international co-operation is crucial to eradicating the organ trade. Although predominantly a social issue in underdeveloped Eastern countries, the illegal organ trade spans across the globe with potential and actual victims travelling to countries such as Egypt where underground operations are rife and therefore it is not enough for policies to just be successfully implemented in one or two countries, it requires efforts from both Western and Eastern countries. Therefore, the revisions to the Declaration of Istanbul which continue to be academically discussed and developed must be continued further in hope of successfully enforcing the internationally agreed policies, this is a more successful solution in that guidance on multiple solutions had been provided, rather than just focusing resources on training officials to recognise potential and actual victims, it is focusing on reducing the potential and actual victims in the first place.

'Governments should implement ethically programs for the prevention and treatment of organ failure”. Reinvesting resources into the public health sector, would decrease the demand for organ transplants and in turn the demand for donors and therefore would to some extent

decrease the illegal organ trade. Investment into public health programs such as screening for Chronic Kidney disease and other disorders which can lead to organ failure, must be prioritised according to the revised Declaration of Istanbul 2018. This would reduce the number of donors as the demand for organs would reduce, which argues less of a need for extensive training of police, boarder and other officials because there would be less victims to identify. By identifying serious organ disorders early, in particular kidney failure, we would be able to effectively halt progression towards end-stage kidney disease, meaning treatment of the disorder is more possible. Rather than needing to be placed on the transplant list by catching diseases early, other treatments such as dialysis would be available therefore decreasing supply rates. This is strongly argued throughout Mary Levitt's article, which seeks to answer whether the organ shortage could actually be met. Levitt suggests that alongside re-investment in public health and a focus on educating disease prevention demand for organs would be decreased, in particularly kidneys. Topics such as diabetes, poor diet and excessive drinking which all lead to kidney disorders would help decrease demand if they were more widely known about. It has been reported that one third of those with diabetes develop kidney disorders therefore health education is just as important as screening and other health programs to decrease demand. A further issue Levitt identifies, is that "around 20% of Kidney transplants are re-transplants" which proves how much of an impact investing into public health would have on decreasing the organ trade because healthier patients would mean less chance of organ rejection and the need for another transplant. Therefore, just as the revision of the declaration argues, use of government resources into the public health sector is essential to prevent the trade from continuing. The impact of this public investment seems much greater than training officials, as again this would reduce the number of potential and actual victims by reducing demand, rather than focusing on just identification which a much better long-term solution to eradicate the illegal organ trade.

Although the revision to the Declaration of Istanbul shows a positive development in legislation globally, the law still persecutes donors and fails to recognise those selling organs as victims which desperately needs to be addressed by law and policy makers. This is because, both the information gap and minimal media coverage surrounding the illegal organ trade are reasons predominantly responsible for the speculation and denial around the issue and therefore also require improvement in order to tackle the illegal organ trade. Accounts provided by victims and witnesses are difficult to rule credible, because their stories are often sourced by word of mouth. Donors are consequently more vulnerable to the trade, as those running operations are aware, they are unlikely to report abuse because of legal persecution and are able to exploit the donors without fear of persecution. Therefore, improving the law so that donors are recognised as victims and removing punishment for selling their organs, more sellers would come forward with their stories and this would widen the scope of knowledge around the illegal trade which currently remains underground. With more knowledge, it would be easier to truly tackle the trade. This would also improve conditions for the sellers as often they are underpaid or paid nothing for selling their kidneys, meaning they are placed in worse positions than they were in before selling, whereas if they had some protection and were able to report instances to authorities they would be more likely to be less mistreated. As it currently stands there have only been three cases high profile enough to be investigated, which only reached trial because public pressure forced governments to address the claims. Although the Medicus Clinic Case reached trial, all sixteen doctors managed to overturn their convictions due to a lack of evidence. If there was more awareness and an insurance that organ sellers would not be prosecuted for coming forward, more evidence could arguably be gathered, thus resulting in more successful convictions. If better education and awareness surrounding the illegal organ

trade were promoted potential victims would arguably decrease, this combined with officials being trained to look out for actual victims would increase. If the illegal organ trade was known about and reported about more frequently, it is likely that charities would see an increase in funds and donations to aid those most effected by the trade, which in turn means more help and, economical aid would be available to potential victims, reducing the number of actual victims. Therefore, improving the legislation to aid victims rather than persecute them, will lessen the information gap and increase the amount of media coverage around the trade and is an essential solution if we ever are to eradicate the trade.

All the solutions discussed above should be prioritised over providing police officers, customs, immigration and border officials with training that equips them to identify potential and actual victims of the organ trade as well as perpetrators because this is not a long-term solution. With that being said, there are still strengths in adopting this policy, if implemented effectively and alongside putting the other solutions in practice. Transplant tourism, a term adopted to refer to overseas transplantation, is perhaps misleading in that it fails to reflect the desperate motives which cause a donor to sell an organ and the ethical implications of this which, as already discussed, is an overlook factor in the current legislation and must be included if there is any hope in abolishing the illegal trade.