

social sciences



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HEGEMONIC MASCULINITY, HEALTH ADMINISTRATION, AND MALE HUMAN TRAFFICKING VICTIMS IN THE UNITED STATES: A PUBLIC HEALTH AND ECONOMIC ANALYSIS

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Human trafficking remains a significant public health crisis in the United States, disproportionately affecting marginalized groups. Despite ongoing efforts, systemic shortcomings in U.S. anti-trafficking frameworks perpetuate the invisibility of male survivors, who constitute 25% of trafficking victims. This analysis investigates the role of hegemonic masculinity in shaping public health policies, revealing entrenched biases that hinder the identification and support of male victims. Cultural constructs of masculinity portray men as invulnerable, contributing to inequitable funding allocation, inadequate service provision, and the neglect of trauma-specific interventions. The analysis highlights how these oversights exacerbate health disparities, deepen homelessness, and impose substantial economic burdens on society. By addressing these systemic failures, the research advocates for transformative solutions—including equitable resource redistribution, targeted educational reforms, innovative policies, and comprehensive data collection. The study underscores the ethical imperative of dismantling gender biases to ensure inclusive anti-trafficking strategies that enhance resilience, promote health equity, and uphold human rights.

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Introduction

Human trafficking, defined as the exploitation of individuals for profit through coercion and manipulation, is a deeply entrenched and multifaceted public health crisis in the United States. Despite considerable national and international efforts, the U.S. remains disproportionately affected among high-income nations, with a recent report indicating a 0.5% increase in trafficking cases since 2023 (UNODC, 2023; Shelley, 2014). This upward trend reflects not only the growing complexity of trafficking networks but also the systemic limitations of current anti-trafficking strategies. While several factors—such as economic and immigration policy challenges—are well documented as contributors, a critical yet underexplored factor lies in the structural weaknesses of existing public health and policy frameworks designed to assist marginalized victims (Bales, 2012; Shelley, 2014).

The Organized Crime Index highlights these shortcomings, ranking the United States 24th globally in resilience against trafficking (Human Trafficking Institute, n.d.). Although this ranking is relatively strong on a global scale, it lags behind high-income peers like Finland and Iceland, which consistently achieve lower trafficking rates. Since resilience measures the capability of existing preventative measures to curtail human trafficking within a given country, this disparity underscores the need to critically assess resilience as a metric—revealing how social, systemic, and legislative dimensions shape the efficacy of anti-trafficking measures. Fragmented governance structures, inadequate funding, and insufficiently targeted public health initiatives are among the barriers impeding progress in the U.S., necessitating an evidence-based reevaluation of current strategies (Bales, 2012).

A particularly neglected aspect of U.S. anti-trafficking efforts is the marginalization of male survivors. Although male victims constitute approximately 25% of trafficking victims, this group remains systematically overlooked by public health and law enforcement systems. Alarming, identified cases of male victims have increased fivefold between 2004 and 2020 (UNODC, 2023). This trend exposes both a demographic blind spot—where male victimization remains misunderstood and only preliminary efforts towards proportional identification have been undertaken—and a failure to adapt policies to evolving victim profiles. Cultural constructs such as

hegemonic masculinity further exacerbate this oversight by stigmatizing male survivors and limiting their visibility within public discourse and policy priorities (Connell, 2005).

The consequences of these failures extend beyond individual harm to reflect systemic inefficiencies in public health administration—defined here as the management and implementation of health policies and programs. This paper conducts an analysis of these inefficiencies by integrating insights from health economics, gender studies, and public policy to identify patterns that perpetuate the marginalization of male trafficking victims. The analysis applies rigorous selection criteria, focusing on U.S.-specific data, relevance to male survivors, and peer-reviewed sources to ensure robust and meaningful conclusions. Preliminary findings suggest that hegemonic masculinity operates as a pervasive structural barrier, distorting funding priorities and service provision within anti-trafficking frameworks. This distortion not only exacerbates health disparities among male survivors but also generates significant societal costs, including increased homelessness and long-term dependency on state resources. By addressing these deficiencies, the study argues for the integration of gender-sensitive frameworks as a critical component of anti-trafficking strategies—thereby enhancing the identification and support of male trafficking survivors, reducing health inequities, and strengthening public health resilience (Connell, 2005; Shelley, 2014).

The Core of the Issue

Despite ongoing efforts by U.S. federal health administrations to collect data on male human trafficking victims, there remains a systemic failure to translate these findings into targeted needs assessments and preventative measures, revealing significant gaps in the nation's anti-trafficking frameworks. The administrative focus disproportionately prioritizes men's roles as perpetrators, relegating their victimhood to the margins of discourse and policy. For instance, the Trafficking Victims Protection Act emphasizes prosecution and prevention, yet it lacks robust mechanisms for addressing male victimization (U.S. Department of Justice, n.d.). Current statistics reveal that 92% of individuals convicted of human trafficking-related crimes in the United States are male—a focus

that has led to a resource allocation bias toward curbing male participation in trafficking, while neglecting the growing population of male trafficking victims (Human Trafficking Institute, n.d.). Studies from the Human Trafficking Institute and the United Nations Office on Drugs and Crime indicate that male victims constitute one-quarter of U.S. citizens affected, with their numbers having quintupled since 2004 (Human Trafficking Institute, n.d.; UNODC, 2023). Moreover, societal perceptions and gender norms often hinder the identification and support of male victims, as further highlighted in the UNODC Global Report (UNODC, 2023). This inconsistency in applying data-driven approaches—effective for addressing women’s issues—demonstrates a glaring omission in current policy that perpetuates the systemic neglect of male trafficking victims within U.S. anti-trafficking efforts (Shelley, 2014).

The entrenched cultural bias of hegemonic masculinity significantly distorts perceptions of male vulnerability, thereby undermining effective policy formulation in addressing human trafficking. Federal agencies—including the U.S. Department of Justice—acknowledge that the societal assumption of men as perpetrators rather than victims influences both public attitudes and policymaker decisions. This bias, embedded in traditional gender norms, creates a dichotomy between masculine ideals—such as toughness, self-reliance, and stoicism—and the vulnerability typically associated with victimization. Connell’s theory of hegemonic masculinity, as discussed in **Gender and Power** (Connell, 1987), explains how these dominant ideals position men as antithetical to traits like helplessness and fragility, which are often linked to trafficking victims. In doing so, cultural and institutional frameworks reinforce a narrow definition of masculinity that marginalizes those whose experiences fall outside traditional norms. Bales (2012) further demonstrates how rigid gender norms obscure male victimhood in global trafficking narratives, while Messerschmidt (1993) cautions that Connell’s model may oversimplify masculinity by neglecting intra-group variations. Moreover, UNODC (2023) reports indicate that such biases hinder the conceptualization of male victimhood within administrative narratives, forcing anti-trafficking interventions to conform to societal constructions of men as offenders rather than survivors. Messerschmidt

(1993) argues that dismantling these cultural barriers through intersectional approaches is crucial for developing equitable policies that fully recognize the experiences of all trafficking survivors.

The practical implications of hegemonically masculine biases extend to identification protocols, funding priorities, and support mechanisms within anti-trafficking frameworks. One prominent area of influence is the training provided to service providers by federal health administrations. For example, the 2020 Report on U.S. Government Efforts to Combat Trafficking in Persons emphasizes the importance of awareness programs, yet a 2022 Department of Justice report revealed significant gaps in addressing gender-specific trauma presentations among male victims. These shortcomings are rooted in a broader cultural framework that equates masculinity with invulnerability and independence. Consequently, training programs may overlook the nuances of male victimization, thereby reinforcing outdated stereotypes. Zimmerman and Kiss (2017) highlight that male victims often internalize their exploitation, experiencing self-shame and resorting to maladaptive coping behaviors (such as substance abuse) that differ from typical female victim presentations. Without appropriate training to recognize these distinct patterns, service providers may continue to underidentify and inadequately address the needs of male trafficking survivors.

The systemic dissemination of training materials influenced by hegemonic masculinity further exacerbates the invisibility of male victims. Bales (2012) contends that the narratives embedded in these programs shape support professionals’ interpretations, thus reinforcing gender stereotypes. Furthermore, UNODC (2023) asserts that when training materials exclude considerations of male victimhood, existing biases are amplified, ultimately weakening efforts for effective victim identification. Although the exclusion of male perspectives in training is a significant factor, it is not the sole contributor to these skewed perceptions; broader societal and cultural influences also play critical roles. As Messerschmidt (1993) suggests, addressing these systemic weaknesses requires an intersectional approach that emphasizes inclusivity within both training and support frameworks, challenging institutional biases as well as the prevailing cultural narratives.

Funding priorities within anti-trafficking strategies reveal entrenched hegemonic biases that further exacerbate disparities in resource allocation. Over the past three decades, national efforts have primarily targeted sex trafficking involving women and girls, as exemplified by the Preventing Trafficking of Girls initiative—which received approximately US\$2 million annually between 2020 and 2024 (U.S. Department of State, 2024). In contrast, federal data show no evidence of funding specifically allocated to male-focused programs. Although it might be considered reasonable to allocate relatively fewer funds to male victims given their lower reported prevalence, the complete absence of dedicated resources exposes a disproportionate skew. Bales (2012) argues that such funding disparities undermine the effectiveness of preventative measures and support systems, thereby reducing overall resilience and amplifying long-term societal costs. This neglect reflects deeply ingrained notions of hegemonic masculinity, which cast men as self-reliant and invulnerable rather than as individuals who may also require support. In effect, the prevailing bias channels resources toward women and girls, leaving male survivors marginalized and underserving anti-trafficking strategies.

Support mechanisms for male trafficking victims represent another significant systemic deficiency. A report by the Office to Monitor and Combat Trafficking in Persons revealed that, among 119 organizations addressing both labor and sex trafficking, only one had a program dedicated specifically to male survivors, and none of 31 organizations focused solely on sex trafficking provided tailored support for men (Office to Monitor and Combat Trafficking in Persons, n.d.). This stark disparity is troubling; male survivors frequently experience distinct forms of trauma—marked by internalized exploitation, self-stigmatization, and unique coping behaviors—that require specialized interventions (Zimmerman and Kiss, 2017). Bales (2012) has argued that entrenched federal advocacy narratives—which predominantly spotlight female victimization—systematically marginalize male experiences, thus reinforcing a gendered bias in both funding and service delivery. Moreover, research from the United Nations Office on Drugs and Crime (UNODC, 2023) shows that local service providers, whose operations are heavily influenced by federal funding directives, struggle to

develop male-focused programs. This shortfall contributes to adverse outcomes such as homelessness and deteriorating mental health among male survivors. Messerschmidt (1993) further contends that these systemic failures not only impede the recovery of individual male victims but also lead to inefficient national spending and diminished societal resilience against trafficking by perpetuating a cycle of invisibility for this vulnerable group. Collectively, these insights underscore the urgent need for a structural re-evaluation of anti-trafficking supports—one that embraces an inclusive, gender-sensitive framework ensuring that all survivors receive the tailored support they require.

Gay men exhibit distinct vulnerabilities in human trafficking—particularly within the sex trade—stemming from the compounded effects of hegemonic masculinity and ingrained homophobia. Hegemonic masculinity enforces a cultural blueprint that prizes toughness, heterosexuality, and dominance, thereby marginalizing non-heteronormative identities and framing them as deviations from the ideal. Empirical studies by Connell (1987) and Messerschmidt (1993) demonstrate that this narrow construction of masculinity creates structural inequalities that expose gay men to heightened risks of exploitation. In addition, Zimmerman and Kiss (2017) indicate that societal rejection and discrimination rooted in homophobia drive economic instability and social isolation, both of which are established predictors of trafficking vulnerability. Recent UNODC reports (2023) highlight how the societal erasure of gay male victimhood—exacerbated by the conflation of masculinity with heterosexual norms—hinders the development of targeted interventions. Consequently, federal health administrations often fail to distinguish the particular needs of LGBTQ+ survivors from those of their heterosexual counterparts. This erasure reflects the pervasive influence of hegemonic masculinity within both cultural and institutional contexts, leading to gaps in policy, funding, and support systems (Connell, 1987; Zimmerman and Kiss, 2017; Messerschmidt, 1993; UNODC, 2023).

Internalized homophobia further compounds the challenges faced by trafficked gay men by distorting their perceptions of agency and victimhood. Herek (2000) demonstrates that internalized stigma can lead individuals to downplay their suffering, reinforcing maladaptive coping mechanisms such as self-silencing.

Cultural narratives grounded in hegemonic masculinity—as outlined by Connell (1987) and critiqued by Messerschmidt (1993)—demand that men display strength and resilience, leaving little room for vulnerability. This pressure intensifies feelings of self-blame and shame among trafficked gay men, particularly within the sex trade where they are disproportionately represented. Zimmerman and Kiss (2017) document that these internalized biases create formidable barriers to help-seeking, as survivors may minimize their trauma to conform to normative masculine identities. Moreover, UNODC (2023) reports reveal that federal health frameworks frequently overlook specific trauma responses among LGBTQ+ survivors, such as heightened rates of PTSD and depression resulting from societal rejection. Bales (2012) contends that without tailored education and training, service providers remain ill-equipped to recognize these nuanced symptom profiles, thereby perpetuating cycles of neglect. In addition, the dearth of targeted funding for anti-trafficking programmes addressing LGBTQ+ populations—as noted by Messerschmidt (1993)—further deepens these vulnerabilities, leaving gay male survivors disproportionately exposed to long-term harm and marginalization.

Impact Analysis

This analysis interrogates the entrenched hegemonic biases within U.S. health administrative practices and reveals how these systemic inequities exacerbate public health disparities in human trafficking mediation. The findings indicate that such biases produce an uneven distribution of ill-health burdens, with male survivors disproportionately afflicted by mental health disorders and substance abuse. The compounded effects of systemic neglect—particularly in the areas of early identification and specialized support services—force many trafficked men to cope with unresolved trauma through mechanisms such as substance use, as documented by Zimmerman and Kiss (2017). Collectively, these individual trajectories coalesce into a public health crisis, intensifying mental health disparities and enshrining systemic patterns of vulnerability. This crisis underscores the urgent need for a structural reevaluation of health equity agendas within anti-trafficking frameworks. By failing to account for the specific needs of male survivors, current agendas

perpetuate invisibility and inequities, sidelining trafficked men from meaningful policy narratives and interventions. This structural invisibility results not solely from institutional biases but also from broader societal frameworks that prioritize the experiences of female survivors over those of other groups. Accordingly, substantial reforms are necessary to shift toward inclusivity and equity in public health initiatives, ensuring comprehensive support for all survivors, regardless of gender (Messerschmidt, 1993; Zimmerman and Kiss, 2017; UNODC, 2023).

Beyond the immediate health ramifications, the systemic failure to integrate male trafficking survivors into comprehensive anti-trafficking frameworks also imposes significant economic burdens on society. Unresolved trauma and substance misuse among these individuals frequently culminate in chronic homelessness, thereby straining public resources. Recent data from the National Alliance to End Homelessness (2023) indicate that each chronically homeless individual costs U.S. taxpayers approximately US\$35,578 per year—an estimate that covers expenses related to emergency services, healthcare, and law enforcement interventions. When applied to conservative to upper-bound estimates of male trafficking-related homelessness—ranging between 51,822 and 109,100 individuals—the cumulative fiscal impact is projected to be between US\$1.84 billion and US\$3.88 billion annually. These figures, derived by multiplying the annual per-person cost by the estimated number of affected individuals, highlight the inefficiencies of reactive policy approaches that focus on mitigating the effects of trafficking (National Alliance to End Homelessness, 2023).

In contrast, evidence from supportive housing initiatives suggests that targeted investments in post-trafficking recovery can reduce annual costs per individual by roughly 49.5%, equating to net savings of approximately US\$4,800 per person. When these per-person savings are extrapolated on a national scale, the potential reallocation could yield annual savings between US\$248.7 million and US\$523.7 million. Such reinvestment would not only promote social equity but also enhance cost efficiency by enabling proactive measures aimed at preventing trafficking in the first place (National Alliance to End Homelessness, 2023). It is important to acknowledge the limitations of this analysis. Variability in data quality and the reliance on

secondary estimates may restrict the generalizability of these findings. Future research should incorporate larger, more diverse datasets and adopt longitudinal methods to capture the long-term outcomes of post-trafficking recovery programs more accurately.

Furthermore, the ramifications of systemic neglect extend beyond public health and economics to encompass profound ethical concerns. The failure to recognize and address the specific needs of male trafficking survivors constitutes a violation of human rights. The United Nations' Universal Declaration of Human Rights (1948) asserts that every individual has the right to live free from exploitation, discrimination, and violence—principles that are undermined when male survivors are rendered invisible within policy frameworks. Research by the United Nations Office on Drugs and Crime (UNODC, 2023) shows that the systemic omission of male-specific interventions perpetuates cycles of exploitation and harm, reinforcing inequality and deepening societal injustice. Moreover, when policies reinforce harmful gender stereotypes by neglecting the nuanced needs of male survivors, they not only compromise the ethical foundations of equity and justice but also weaken community resilience. Adopting gender-sensitive and intersectionally informed approaches in federal health administrations is therefore essential for establishing robust, inclusive anti-trafficking strategies that both honor individual rights and generate sustainable societal progress (UNODC, 2023; Messerschmidt, 1993).

Solutions

Systematic Data Collection and Analysis

Effectively addressing systemic gaps in U.S. health administration responses to male trafficking victims requires a transformative, multi-layered strategy. Central to this approach is the systematic collection and analysis of demographic-specific data that brings the unique experiences of male survivors to light. Historically, federal reporting instruments—such as the Trafficking in Persons Report—have focused primarily on female and child victimization, thereby marginalizing male experiences (U.S. Department of State, n.d.). Expanding these frameworks to examine the intersections of race, socioeconomic status, and sexual orientation can empower policymakers to allocate resources more effectively.

For instance, Busch-Armendariz et al (2014) demonstrate that gender-informed data collection methods reveal distinct vulnerabilities which, when rigorously analyzed, guide targeted and evidence-based interventions.

Equitable Funding Redistribution

A critical next step is the realignment of existing funding priorities. Fiscal resources have traditionally been channeled toward female-targeted anti-trafficking programs, a practice that reinforces the systemic neglect of male survivors. Meta-analytical evaluations suggest that reallocating funds to support male-specific initiatives—including trauma-informed care, vocational training, housing support, and mental health services—can drive more equitable recovery outcomes. Dedicated funding streams that address the compounded challenges experienced by LGBTQ+ individuals and men of color would not only mitigate long-term individual suffering but also reduce broader societal financial burdens. For example, housing-first initiatives have demonstrated significant cost reductions in managing homelessness, with evidence suggesting that targeted investments can substantially lower annual per-person expenses (National Alliance to End Homelessness, 2023).

Targeted Educational Reform

Enhancing the capacity of service providers through educational reform is an indispensable pillar in a comprehensive solution. Federal training protocols must be updated to reflect recent meta-analytical findings that illustrate how male survivors often exhibit trauma responses—such as internalized shame and self-medication—that differ markedly from those seen in female survivors (Zimmerman and Kiss, 2017). Incorporating intersectional narratives and evidence-based practice models into training curricula would enable support professionals to develop a nuanced understanding of these unique challenges. Such specialized training is particularly critical when addressing the needs of marginalized subgroups, including LGBTQ+ individuals, whose experiences are further complicated by societal stigmas and systemic homophobia (Messerschmidt, 1993).

Innovative Policy Development and Preventative Frameworks
Policy innovation must advance well beyond reactive

measures to include preventative frameworks that dismantle cultural narratives underpinning hegemonic masculinity. Public health campaigns informed by systematic reviews and meta-analytical evidence should actively challenge outdated norms of male stoicism, promoting instead a balanced recognition of vulnerability as a vital component of healing. Collaborative efforts between federal agencies, community organizations, and academic institutions can drive the development of educational initiatives that reshape public perceptions of both masculinity and trafficking. Embedding gender equity into anti-trafficking policies through continuous research and evaluation offers a pragmatic pathway for immediate intervention and long-term societal change (Connell, 1987; Messerschmidt, 1993).

Future Research Directions

Complementary to these solutions, future research should integrate quantitative analysis with qualitative community-based studies to further elucidate the long-term outcomes of male-specific intervention programs. The establishment of standardized evaluation metrics and the adoption of longitudinal study designs will enhance the reliability of these findings. Comparative research across diverse geographical and socio-political contexts is essential to uncover the complex interplay between systemic bias and public health outcomes, thereby ensuring that adaptive policy innovations remain aligned with the evolving needs of male trafficking survivors (Busch-Armendariz et al, 2014).

Conclusion

This research underscores how hegemonic masculinity perpetuates systemic failures in U.S. health administrative responses to male human trafficking victims. By upholding rigid gender norms that portray men as invulnerable to exploitation, these systems neglect male survivors and thereby exacerbate both health and economic disparities. Despite evidence that one in four trafficking victims is male, administrative apathy further intensifies their health challenges, contributes to rising homelessness, and deepens reliance on strained social welfare systems. The meta-analytical insights presented here underscore the urgent need for a transformative shift toward an inclusive and intersectional approach. Implementing gender-sensitive

policies that dismantle entrenched cultural biases, equitably redistribute resources, and provide targeted support is crucial—not only for alleviating the struggles faced by male survivors but also for building a more resilient society capable of combating trafficking comprehensively.

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