

International Partnerships Among Public Health, Private Sector, and Law Enforcement Necessary To Mitigate ISIS's Organ Harvesting for Terrorist Funding

The Islamic State of Iraq and ash-Sham (ISIS) is attempting to obtain money from organ harvesting, including from its own injured members, captives, and deceased individuals. Identification, prevention, and interdiction of organ harvesting and trafficking is a highly complex issue which may be effectively addressed through international partnerships among governmental, health, law enforcement, legal, and private-sector entities.

- Documents discovered by the US in eastern-Syria in mid-2015 revealed that ISIS Islamic scholars issued religious justification for taking organs from a living captive to save a Muslim's life, even if fatal for the captive.
- Hundreds of corpses discovered in ISIS-controlled territories in Iraq have revealed that organs appeared to have been purposefully removed, and in 2015, the UN Security Council announced that it was investigating the deaths of 12 doctors in Mosul, Iraq, who, after refusing to remove organs from corpses, were purportedly killed by ISIS, according to open-source reporting.

SCOPE: This product is intended to promote awareness and coordination among intergovernmental authorities, the private sector, and the international community, to include law enforcement, immigration, customs, health organizations, legal entities, nongovernmental organizations, human services, public health, and private sector by providing indicators to combat organ harvesting and trafficking.

We judge with moderate confidence, the high demand for organs and large numbers being harvested abroad probably will entice overseas-based criminal organizations, smuggling networks, and organ brokers to collude (either wittingly or unwittingly) with ISIS to sell organs on the black market for financial gain. Because of limited reporting, we do not know if Westerners are illegally purchasing organs or receiving transplants from criminal networks which have partnered with terrorists or directly from ISIS or their affiliates.

- In November 2016, news reporting indicated that ISIS established a market in Turkey that sells human organs from mutilated bodies of kidnapped ISIS victims to the Turkish mafia and international trafficking gangs through middlemen.
- Also in November 2016, the Director General of the Syria Coroner's Office, disclosed that more than 25,000 surgical operations were performed in the refugee camps of neighboring countries and ISIS-controlled areas in Syria since 2011 to remove the organs of 15,000 Syrians and sell them on the black market, according to a news outlet.

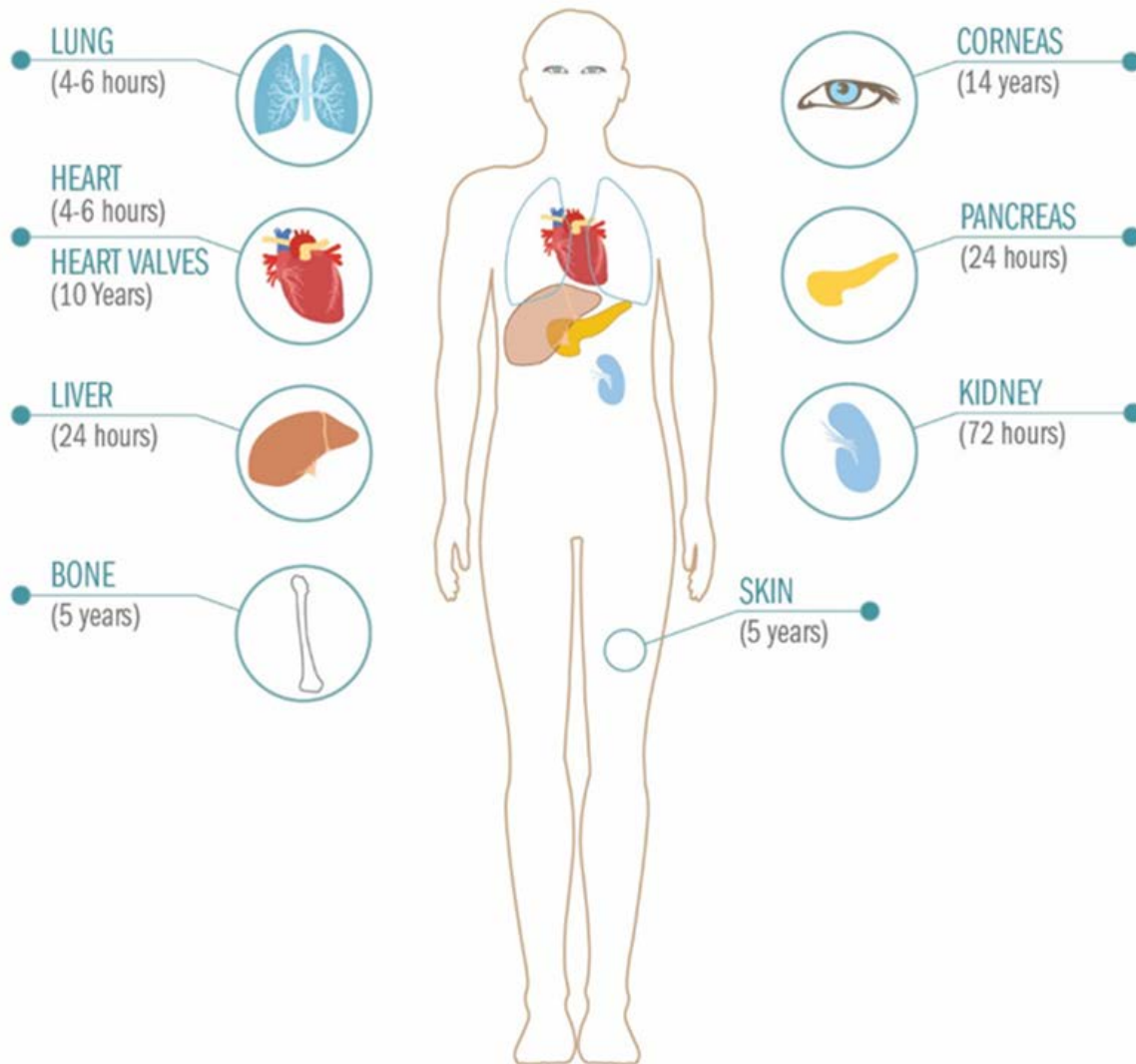


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- A body of open-source reporting dating back to early 2014, indicates that ISIS is selling the organs of its captives and prisoners as a lucrative business, and the price is highly dependent on geographic location.
- In 2014, an Iraqi medical doctor based in Mosul, Iraq, reported that surgeries took place in local hospitals, and that organs were quickly transported through networks specializing in trafficking human organs. A specialized mafia is engaged in these operations, in addition to medical institutions working in other countries, according to open-source information.

PARTS OF THE BODY HARVESTED FOR TRANSPLANT AND MAXIMUM TIME SPAN BETWEEN HARVEST AND TRANSPLANT



INDICATORS: To combat the transnational nature of organ harvesting and trafficking, international partnerships and collaboration among governments, law enforcement, including immigration, customs, and border officials; health organizations; legal entities; nongovernment organizations; community groups and leaders; public health; human services; and the private sector are essential. International partnerships and collaboration will increase knowledge and awareness of illegal organ harvesting and trafficking and help identify modus operandi, participants, illegal or fraudulent document use, funding sources and movement, and corruption. Typically, there are a host of pre- and post-procedural indicators of suspicious activity throughout the various phases of this illicit activity that may help authorities to identify organ harvesters and traffickers.

Some of the indicators may be constitutionally protected, and any determination of possible illicit intent should be supported by additional facts which justify reasonable suspicion. The indicators are general in nature and one may be insignificant on its own, but when observed in combination with other suspicious indicators, may constitute a basis for reporting.

PRE-PROCEDURAL INDICATORS



HARVEST: Jurisdictional partners (coroners, medical examiners, morticians, nongovernmental organizations, hospitals, clinics, military, emergency service personnel, law enforcement) may discover or encounter the following:

- Kidnappings or random disappearance of individuals, including children;
- Missing tissue or body parts that cannot be explained by the coroner;
- Makeshift or mobile facility with blood-type analysis machines and surgical equipment;
- Stockpiling or possession of organ preservation fluids;
- Ordering or possession of an organ pulsatile perfusion device; and
- Scars or incisions generally on the right side of the abdomen, which are typical in removal of the liver or kidneys.



TRAVEL: Jurisdictional partners (airlines, airports, bus companies, shipping companies, law enforcement, Internet providers, travel agencies) and family members may observe the following indicators for persons who are future organ recipients:

- Travel abroad without notifying health care providers whom they usually rely on;
- Refusal to accept local transplant or medical solutions;
- Searches on the Internet for transplant possibilities abroad;
- In contact with a group of unknown individuals abroad and cannot provide further details;
- Lack of knowledge of where the transplant will take place or any background about the donor;
- Lack of knowledge of their itinerary or do not know their destination;
- Carrying an unexplained considerable amount of cash;



- Travel directly to a hospital or clinic on arrival;
- Citizen of a country where there is no possibility of or access to organ transplantation; and
- Have received a personal invitation from a transplant professional to receive transplant abroad.



DOCUMENTS: Jurisdictional partners (customs and immigration officials, embassies, consulates, law enforcement) may observe the following indicators for persons who are future organ recipients:

- Have received their travel or identity documents from someone else and are unfamiliar with them;
- Carrying medical records or letters of invitation for medical treatment; and
- Carrying travel documents that do not correspond to the purpose of their travel.



HOUSING: Jurisdictional partners (hotel industry, apartment rental companies, law enforcement) may observe the following indicators for persons who are future organ recipients:

- Unaware of their accommodation location;
- Be escorted whenever they go to and return from the hospital or clinic; and
- Undergo physical examinations, blood or other tests performed at their accommodations.



TRANSPLANT: Jurisdictional partners (hospitals, clinics, transplant professionals, medical supply companies) may observe the following indicators for persons who are organ recipients:

- Have not received prior medical screening in their home country;
- To undergo the transplant procedure abroad within a very short time frame;
- Do not know the location or name of the transplant professionals involved;
- Have not signed consent forms; and
- Have been accompanied by another person who answers all questions on the organ recipient's behalf or who translates all conversations with the medical staff.



FINANCE: Jurisdictional partners (health insurance companies, banks, law enforcement) may observe the following indicators for persons who are organ recipients:

- Have been told they need to pay upfront or in installments in advance of the operation;
- Have paid the doctor, broker, or facilitator in cash for the organ and transplant;
- May not know the name of the person they have paid;
- Have made payments through an intermediary or front company; and
- May not have proof of payment.



POST-PROCEDURAL INDICATORS



RETURN TRAVEL: Jurisdictional partners (customs and immigration officials, embassies, consulates, law enforcement) may observe the following indicators for persons who are organ recipients:

- Travel together with one or more persons who may have a medical background;
- Suffer from physical complaints, such as pain in the area where the organ was implanted; and
- Travel directly to a hospital or clinic upon return.



AFTERCARE: Jurisdictional partners (hospitals, clinics, emergency medical service, first responders, transplant professionals, health screening personnel) and family members may observe the following indicators for persons who are organ recipients:

- Reappear unannounced at recipient's local hospital with an implanted organ;
- Have not received appropriate medical aftercare or medication;
- Be prescribed immune suppressive anti-rejection medication after a trip overseas, such as prednisone, an anti-proliferative agent (mycophenolate), and a calcineurine inhibitor (cyclosporine or tacrolimus);
- Lack discharge sheets and other information about the operation in organ recipient's medical records;
- Be reluctant to share information about where and how the operation took place;
- Return from an operation abroad with infections, graft failure, or other
- Show signs of emotional stress or complaints, such as shame, stigma, and regret.

INFORMATION TO HELP IDENTIFY ORGAN HARVESTING AND TRAFFICKING



- Personal identification, passports/visas used, fraudulent/illegal use;
- Travel routes, means, and length;
- Type of accommodation, arranged by, and length of stay;
- Complete medical and medication history, health and medical prognosis prior to the transplant;
- Type, description, and location of the medical facility;
- Request for medical records from doctor/health care or medical facility;
- Signatures on any documentation consenting to the surgery, any confidentiality agreement, language of documentation;
- Record of medical procedures/treatments, details of any medical appointments or procedures;
- Identity or description of the medical personnel involved;
- Which organ/tissue provided;



- Length and nature of post-operative care, post-surgery medication supplied, post-transplant care provided in home country;
- Price of organ, source of the money (pay from own resources, borrowed it, paid through private medical insurance);
- Method of payment (cash, bank transfer, money transfer), date, time and location of payment (payment deposited in a third country); and
- Employment, education histories.

RESOURCES

United Nations; Office on Drugs and Crimes: *Assessment Toolkit - Trafficking in Persons for the Purpose of Organ Removal* [https://www.unodc.org/documents/human-trafficking/2015/UNODC Assessment Toolkit TIP for the Purpose of Organ Removal.pdf](https://www.unodc.org/documents/human-trafficking/2015/UNODC%20Assessment%20Toolkit%20TIP%20for%20the%20Purpose%20of%20Organ%20Removal.pdf)

UN.GIFT: *Workshop: Human Trafficking for the Removal of Organs and Body Parts* <https://www.unodc.org/documents/human-trafficking/2008/BP011HumanTraffickingfortheRemovalofOrgans.pdf>

World Health Organization

- *Transplantation* <http://www.who.int/transplantation/en/>
- *Global Knowledge Base on Transplantation (GKT)* <http://www.who.int/transplantation/knowledgebase/en/>
- *Organ trafficking and transplantation pose new challenges* <http://www.who.int/bulletin/volumes/82/9/feature0904/en/index1.html>
- *Guiding Principles on Human Cell, Tissue and Organ Transplantation*
- http://www.who.int/transplantation/Guiding_PrinciplesTransplantation_WHA63.22en.pdf?ua=1

European Parliament; Directorate-General for External Policies: *Trafficking in Human Organs* [http://www.europarl.europa.eu/RegData/etudes/STUD/2015/549055/EXPO_STU\(2015\)549055_EN.pdf](http://www.europarl.europa.eu/RegData/etudes/STUD/2015/549055/EXPO_STU(2015)549055_EN.pdf)

Prevention of Trafficking in Persons: *Trafficking in Persons for Organ Removal* https://www.unodc.org/documents/human-trafficking/Toolkit-files/08-58296_tool_9-19.pdf

Organ Donation and Transplants: *Between an Ideal Situation and a Coherent Program* http://ec.europa.eu/health/sites/health/files/blood_tissues_organ/docs/art_romania1_2010_en.pdf

Council of Europe: *Recommendation of the Committee of Ministers to member states on organ trafficking* https://search.coe.int/cm/Pages/result_details.aspx?ObjectID=09000016805dcf59

Stop Organ Trafficking Now! <http://www.stoporgantraffickingnow.org/>

US National Library of Medicine National Institutes of Health: *Indicators to Identify Trafficking in Human Beings for the Purpose of Organ Removal* <https://www.ncbi.nlm.nih.gov>





PRODUCT FEEDBACK FORM

(U) JCAT MISSION: To improve information sharing and enhance public safety. In coordination with the FBI and DHS, collaborate with other members of the IC to research, produce, and disseminate counterterrorism (CT) intelligence products for federal, state, local, tribal and territorial government agencies and the private sector. Advocate for the CT intelligence requirements and needs of these partners throughout the IC.

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ADDITIONAL COMMENTS, SUGGESTIONS, OR QUESTIONS. HOW DOES JCAT MAKE PRODUCTS BETTER?

WHAT TOPICS DO YOU RECOMMEND?
