

# Sri Lankan family alleges woman victim of human organ theft

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One of the most gruesome expressions of international social inequality is the trade in human organs and, more particularly, the murder and dismemberment of poor and defenseless people for their organs.

The alleged theft of organs from the bodies of Sri Lankan immigrant workers was the cause for a demonstration in Colombo on August 27. Protesters, who included the relatives of a deceased immigrant laborer, Somalatha Satharasinghe, and activists from the Foreign Employment Rights Protection Movement demonstrated at the Foreign Employment Bureau (FEB) demanding an inquiry into Ms. Satharasinghe's death and body dismemberment.

Ms. Satharasinghe, 41, died in Kuwait and was sent back to her home in Ampara without her kidneys and corneas. According to the *Colombo Page*, relatives have alleged that she was killed for her organs. Her body was sent back to her family 35 days after her death.

Among those demonstrating was Ajith Perera, an immigrant worker who returned from Kuwait last week and has charged that Ms. Satharasinghe, who died under mysterious circumstances, was the victim of the big business-organized trade in human organs. "She had informed the recruitment agency that her employers were forcing her to donate one of her kidneys, but no action was taken. It was a few days later that the agency was informed that she was hospitalized," Mr. Perera told the *Daily Mirror*. Somalatha Satharasinghe had gone to Kuwait in May to take up employment as a housemaid. The discovery of her missing organs came after relatives requested a postmortem.

The victim's family was notified on July 10 that Ms. Satharasinghe had been admitted to a Kuwaiti hospital

after a sudden fainting spell. She died two days later and on July 28 the family was told that the deceased had donated her kidneys. However L.K. Ruhunuge, the deputy general manager of the FEB, reported to the *Sunday Times* that after the victim was suddenly taken ill, she went into a coma and was believed to have been brain dead, ruling out the possibility of voluntary organ donation. "Since the hospital had two patients who needed the kidneys, the transplant was done in accordance with Kuwaiti laws, we have been informed," said Ruhunuge.

In a letter to the Sri Lankan Embassy, the Kuwaiti Department of Organ Transplantation stated that Kuwaiti law allows for organ removal with the consent of the Minister of Health.

Speaking at the demonstration in Colombo, Ajith Perera, who had contact with people who had assisted Ms. Satharasinghe in her final days, stated: "Through Sri Lankans working in hospitals there, we got to know that this business of organ transplant had been taking place for quite some time. I know of another Sri Lankan who was offered 10,000 Kuwaiti dinars and a visa for 10 years in place of his kidney. But he was sent back as he did not consent. Many high ranking people on either side are involved in this horrifying business and that is why I decided to join this campaign to create awareness and put pressure to end this corrupt trade."

Ms. Satharasinghe's son, Yohan Nelumdeniya, delivered a petition, addressed to Sri Lankan President Chandrika Kumaratunga, to the Foreign Employment Bureau demanding that the circumstances surrounding his mother's death be investigated and brought to light.

The director of the Migrant Services Centre, David Soysa, also suspects that Ms. Satharasinghe's case did not involve voluntary kidney donation. He spoke about the dangers facing Sri Lankan women when they go

abroad as unskilled labor. “Poverty forces them to take these jobs without question,” and in the process they are deprived of basic rights, he said, adding: “The biggest problem is that there is no responsibility on the part of the labour-receiving country.”

There is an escalating global trade in human organs. In the April 2000 issue of *Current Anthropology*, Nancy Scheper-Hughes, a professor of anthropology at the University of California, Berkeley and a leading expert in the field of human organ trafficking, confirms that there is a large market of kidneys that caters largely to wealthy patients from the Middle East.

In her article, “The Global Traffic in Human Organs,” she writes: “The first inklings of a commercial market in organs appeared in 1983, when a U.S. physician, H. Barry Jacobs, established the International Kidney Exchange in an attempt to broker kidneys from living donors in the Third World, especially India. By the early 1990s some 2,000 kidney transplants with living donors were being performed each year in India.”

In 1994, the Indian government outlawed the sale of human organs, effectively fueling the growth of “an even larger *domestic* black market in kidneys, controlled by organized crime expanding out from the heroin trade (in some cases with the backing of local political leaders),” according to Scheper-Hughes.

She adds that, according to anthropologist and colleague Lawrence Cohen, today “only the very rich can acquire an unrelated kidney.... The kidney trade is another link, Cohen suggests, in a system of debt peonage reinforced by neoliberal structural adjustment. Kidney sales display some of the bizarre effects of a global capitalism that seeks to turn everything into a commodity.”

The poorest countries provide the most vulnerable prey for the human organ traffickers. But increasingly the lucrative, global commercial trade in human body parts is expanding into all regions. Eastern and Central Europe are the latest source of cheap kidneys and other organs for the booming transplant industry. According to an *Inter Press Service* (IPS) account in February, two Israeli doctors performed kidney transplants in January on six Israeli nationals in Tallinn, Estonia, using kidneys illegally solicited from donors in Romania, Moldova and Russia. The head of Tallinn’s Mustamäe hospital, Teet Lainevee, describes Estonia as “a land of

endless opportunities” for the transplant industry.

In Germany last year, the magazine *Der Spiegel* conducted an investigation into the autopsy trade, in which organs are stolen from dead donors, smuggled out of hospital morgues and sold to local drug companies.

In her article “The Organ of Last Resort,” Scheper-Hughes, confirms that “human strip mining” is “not limited to the former police states in South Africa, Brazil and Argentina,” but can be found in “the wealthiest communities of the United States.... The sale of human organs and tissues requires that certain disadvantaged individuals and populations have been reduced to the role of “suppliers.” It is a scenario in which bodies are dismembered, transported, processed and sold in the interests of a more socially advantaged population of organ and tissue receivers.” The increasingly desperate “strip mining” of the human body is another barometer of exploding social inequality, both within national boundaries and in the global arena.



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