



Interventions to support victims of modern slavery

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22 December 2017

Question

What evidence is there, from academic or other sources, about effective and ineffective interventions to provide support for victims of modern slavery?

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The K4D helpdesk service provides brief summaries of current research, evidence, and lessons learned. Helpdesk reports are not rigorous or systematic reviews; they are intended to provide an introduction to the most important evidence related to a research question. They draw on a rapid desk-based review of published literature and consultation with subject specialists.

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1. Overview¹

This review found few evaluations of interventions to support victims of modern slavery, even though there is recognition of the need for support services. While there is little evidence on effectiveness of interventions, the literature highlights the importance of victim-centred, holistic (multi-disciplinary) approaches to supporting victims.

There is strong consensus in the literature on the importance of providing support to victims of modern slavery (University of Liverpool, 2017; Robjant, 2016; Sun-Suon, nd). Many will have experienced physical violence, psychological abuse and even sexual abuse. The conditions they suffer from can include anxiety, depression, post-traumatic stress disorder, sexually transmitted infections, unwanted pregnancies and abortions, physical ill-health and malnourishment. Mental health issues are particularly significant, especially in children. 'Even if the physical wounds have been healed, it is still a long process to help the victims regain their dignity and the confidence to make choices and move forward with their lives. It is therefore crucial ...to ensure that the rights, needs and requests of the victims are recognised' (Sun-Suon, nd: 26). In the absence of suitable support, victims are at heightened risk of becoming slaves again/being re-trafficked (University of Liverpool, 2017).

Key findings in terms of interventions and approaches are as follows:

- Need for wide range of services - Services typically required by victims of modern slavery include: medical and dental care; food, clothing and housing assistance; counselling; immigration and legal assistance; literacy education; employment and training services.
- Identification of victims – is a priority, but can be challenging as authorities lack training and/or sensitivity to identify and handle victims of modern slavery. Conflation of victims of trafficking for labour exploitation with illegal immigrants is a particular problem.
- Shelter – this is often identified as among the most urgent requirements of victims, but provision can be limited in availability, or only available for short periods of time, of poor quality, or inappropriate to the specific needs of modern slavery victims.
- Role of victims in prosecution of slave masters – there is recognition of the central role of victims as witnesses in securing prosecutions against those carrying out modern slavery. However, support services for victims can be made conditional on cooperation with prosecution (and thus removed once this is complete) or, conversely, lack of support for victims can result in their inability to appear as witnesses.
- Mental health services – numerous issues are faced here: lack of mental health care services for survivors; lack of knowledge or reluctance on the part of victims to access such services; lack of systematic studies on specific clinical interventions – including which work best in which contexts.
- Multi-disciplinary approaches – experience of various interventions, including to tackle child labour in Thailand and neighbouring countries, to support victims of modern slavery in Wales, the Florida Freedom Partnership, and the Integrated Support Programme in the UK, all point to the need for multi-disciplinary, multi-agency approaches to providing support services for victims of modern slavery.

¹ This is the second helpdesk report on modern slavery interventions. The first is: Idris, I. (2017). *Interventions to combat modern slavery*. K4D HDR 255, University of Brighton.

- Long-term care – the literature stresses the need for long-term care provision for victims of modern slavery. There is widespread criticism of the UK system of abruptly withdrawing support from victims under the National Referral Mechanism after 45 days.

This review drew on a mixture of academic and grey literature. Significant information was found on provision of services (or lack of it) to survivors of modern slavery in the UK (as well as some other developed countries), but far less on developing countries. Some of the literature made specific reference to the needs of women, but much was gender-blind or focused on the needs of men. Nothing was found from the perspective of persons with disabilities.

2. Support services needed by victims of modern slavery

Services typically required by victims of modern slavery include: medical and dental care; food, clothing and housing assistance; counselling; immigration and legal assistance; literacy education; employment and training services.

Salvation Army, (2013). *Support Needs of Male Victims of Human Trafficking: Research Findings*.<http://www.nrpfnetwork.org.uk/SiteCollectionDocuments/Support%20needs%20of%20male%20trafficking%20victims%20-%20FINAL.pdf>

This study by the Salvation Army looked at the support needs of male victims of human trafficking in the UK. However, it also assessed the support needs of female victims. Key findings for men and women are as follows (Salvation Army, 2013: 27):

- The main health needs for men at initial assessment were physical injuries (sustained during the trafficking situation), dental care and asthma; whereas for women the main presenting health needs were headaches/migraines, physical injuries (sustained during the trafficking situation), high blood pressure and gynaecological problems.
- The main emotional support needs expressed by men at the initial assessment stage were distress, fear of the trafficker and depression; whereas for women the main emotional support needs were distress, depression and symptoms associated with Post Traumatic Stress Disorder (PTSD). More than twice the proportion of men than women did not disclose any emotional support need at this stage of assessment.
- Victims of trafficking for sexual exploitation disclosed more emotional support needs than other 'types' of trafficking at the initial assessment stage.
- A high proportion of men (91%) presented as destitute. The main support needs for men at initial assessment were accommodation and subsistence, with support in finding employment, need for clothing and assistance with repatriation also figuring highly.
- Access to counselling and signposting to immigration advice were support needs reported in a significantly higher proportion of women than men.

Robjant, K. (2016). 'Statement of Katy Robjant – Vivo International, Germany'. Statement to Expert Panel on the International Day for the Abolition of Slavery, 2 December 2016. OHCHR. http://www.ohchr.org/Documents/Issues/Slavery/UNVTCFS/PanelSlavery2016/State_Katy_Robjant_Vivo_International_DRC.pdf

In her statement to the Expert Panel², clinical psychologist Katy Robjant made the following points with regard to addressing the rehabilitation needs of victims of modern slavery (Robjant, 2016:2):

- 'Firstly, we need to avoid generalisations and assumptions. Every survivor is unique and has different needs. The psychological needs of victims need to be properly assessed by mental health professionals who are trained and experienced in working with those in abusive relationships and trauma, and who are able to take both individual, systemic and cultural factors into consideration.
- 'Secondly, survivors of modern slavery, in whatever form, are entitled to evidence based care like anyone else, rather than programmes which are delivered without reference to current research into the impact of such experiences or effective rehabilitation techniques. Survivors can offer key insights and should be consulted about the feasibility and face validity of therapeutic programmes, and be recruited onto research teams investigating the impact of such therapies.
- 'Finally, therapy in isolation will never be as effective as holistic packages of care which address the multiple factors which contribute to further enslavement, be that for psychological, economical, or political legal reasons....In addition to psychological rehabilitation, community, societal and political interventions are required in order to reduce the risk of further exploitation, and finally to bring an end to modern slavery.'

3. Interventions providing general support for victims of modern slavery

FLEX (2015). PRO-ACT: Identification and Support for Victims of Trafficking for Labour Exploitation in The Netherlands, the UK and Romania. Focus on Labour Exploitation (FLEX). <http://www.labourexploitation.org/sites/default/files/publications/Pro-Act%20Research%20Report.pdf>

The Pro-Active Identification and Support of Victims of Trafficking for Labour Exploitation in the EU Project (the Pro-Act Project) seeks to improve responses to human trafficking for labour exploitation. The project has three NGO partners based in the Netherlands (FairWork), the UK (FLEX) and Romania (ADPARE). The Pro-Act Project maps how identification and support systems are working in the three partner countries, and draws on this mapping to develop and pilot effective victim-centred strategies for improvement across the EU.

This report analyses findings on identification and support from the three countries and sets out recommendations for change in each of the seven focus areas:

- i. Identification – Pro-active labour inspection was found to increase the detection of trafficked people. In addition, law enforcement was found to be increasingly aware of and equipped to identify trafficking for labour exploitation. However, the research shows a dangerous trend in the conflation of labour inspection with immigration control, causing confusion and fear among workers and preventing identification.
- ii. Access to support - The research found a wide range of support provided to victims. However, in all three countries, victims showed limited understanding of their

² Expert Panel was convened for a discussion on the International Day for the Abolition of Slavery. Panellists included (among others) Kofi Anan and representatives of UNHCR, ILO and the UN Slavery Fund.

entitlements to support and some had not given genuine and ongoing consent to their engagement with the anti-trafficking system - particularly a problem where there is a perception that support is tied to cooperation with the authorities. The length or level of support was found to be inadequate, and support was not tailored to the needs of victims, particularly taking in to account gender difference.

- iii. Housing - Access to safe housing was found to be a priority for victims but there were limitations on availability of housing, particularly where entitlement was dependent upon legal or asylum status. Where housing was provided the standard varied considerably and remote, poor quality or mixed-sex accommodation often left victims feeling insecure, isolated and threatened.
- iv. Psychological and social support - Psychological and social support was available through the government or non-government support system in all three countries. However, male victims were less likely to enter into psychological assistance programmes and were viewed as having less need for such assistance than female victims. Language barriers and issues with interpretation also limited the provision and quality of psychological support.
- v. Work - In all three countries trafficked persons' ability to work was viewed as central to their recovery process. Some NGOs cited employability services offered including IT and English language classes, vocational courses, workshops and job application assistance. The research found, however, that restrictions on entitlement to work or access to benefits dependent on immigration status made victims vulnerable to re-trafficking, as they faced homelessness or destitution upon the termination of their support.
- vi. Access to justice and legal advice - Legal advice and representation was found to be available to some extent in all countries, and compensation. However, expert legal advice was not always freely available to trafficked persons, particularly outside criminal processes and prior to engagement with authorities. Limited specialist lawyers for trafficked persons were found and advice was consequently often limited to narrow criminal justice or immigration issues. Numerous barriers to compensation meant that limited numbers of victims obtained compensation.
- vii. Move-on options - Trafficked persons who wished to return to their country of origin were provided reintegration assistance. Where trafficked persons remained in the country of destination, ongoing support was shown to facilitate integration. However, there was very little funding for move on options, as a result of which support was limited – making trafficked persons extremely vulnerable to re-trafficking.

Potocky, M. (2010). 'Effectiveness of services to support victims of international human trafficking: An exploratory evaluation'. *Journal of Immigrant and Refugee Studies*, 8:4, 359-385. <http://www.tandfonline.com/doi/pdf/10.1080/15562948.2010.522462?needAccess=true>

This report looks at the effectiveness of the Florida Freedom Partnership (FFP), a programme by the Office for Victims of Crime, Dept. of Justice, to provide services to 'pre-certified'³ victims of trafficking. The FFP 'provides a rapid-response, comprehensive support system for trafficked

³ The US Victims of Trafficking and Violence Protection Act (TVPA) 2010 allows victims, through a process called certification, to receive the same services and benefits as refugees, including financial assistance, health care, housing, employment training and placement, mental health treatment, and English-language training. However, the process can take considerable time. The Justice Dept. introduced a grant programme to address a gap in service delivery to victims who were not yet certified (Potocky, 2010: 361).

persons. . . .FFP offers case management, safe and appropriate housing, legal services, medical care, and clinical intervention to trafficked persons in South Florida' (Potocky, 2010: 363). In response to the fundamental question, 'Do the services improve clients' lives?' the evaluation found the programme did do so in some areas. It did well in the areas of mental health and food provision – most clients who were in need of these services received them and appeared to benefit from them – but less well in the area of health, where clients were not well-served. However, the evaluation concluded this 'is reflective of the national reality of severely limited health care access among the poor' - rather than programme failings.

The evaluation identified two areas where improvements were needed and attainable: housing and the theoretical framework of service delivery. Given the difficulties faced by FFP in housing provision, the evaluation recommended retaining a block of apartments for housing trafficking victims and providing services (e.g. English classes, childcare, job training, on-site). The evaluation found that the programme's victim-centred practice approach, which entailed tailoring service plans to each client's unique needs, was appropriate; so too its holistic approach of addressing multiple client problem areas simultaneously. However, it called for the empowerment approach to be strengthened to increase clients' self-sufficiency, develop group consciousness, reduce self-blame and assume personal responsibility for change. Techniques that could be used to promote this include peer counselling; mentorship arrangements between trafficking victims; consciousness-raising through rights education; and helping clients to develop, short-term, measurable, attainable outcome objectives.

Sun-Suon, M. (n.d.). *Human Trafficking and the Role of Local Governments—Good practices, challenges and ways forward*. United Nations Institute for Training and Research (UNITAR).

https://www.unitar.org/dcp/sites/unitar.org.dcp/files/uploads/newcoverhuman_trafficking_final.compressed.compressed.pdf

This is a wide-ranging report covering different aspects of human trafficking. With regard to victims, it advocates a victim-centred approach based on respect for human rights. It describes such a victim-centred approach as crucial to build a relationship of trust between victims and law enforcers, and necessary to prevent secondary victimisation in which victims are at risk of further traumatisation due to inappropriate sensitivity. A large part of this victim-centred approach is victim identification which is a prioritised process in combatting human trafficking. It notes that early victim identification is vital to protect the physical safety and rights of victims, enabling them to recover from the trauma inflicted by traffickers, and to ensuring effective prosecution of traffickers. Several local and national actors are highlighted as key in identifying victims, from government officials to hospital staff, private sector employees to education officials. In order to effectively identify victims of all forms of trafficking, the report stresses that governments have the responsibility to provide support at the local and national levels in the forms of training and implementation of relevant policies and programmes. In addition to victim identification, it calls for victim support and assistance to be provided based on respect for human rights as well.

However, the report gives examples of the kinds of challenges faced in implementing the above victim-centred approach:

- Many trafficked victims have been treated as criminals in both the destination and home countries for having used false documents, having worked in the sex industry, or having left the country illegally.
- In some cases, trafficked victims of sexual exploitation and forced labour are found to be treated differently.....Trafficking in the form of forced labour is still invisible to many

governments, easily leading to misclassification and maltreatment of victims. Misclassifying trafficked victims as illegal migrants or criminals can result in them losing their access to justice and legal protection resulting in new unfair trauma and harm. These failures can reinforce the misconceived idea that law enforcement will punish victims if they seek help, a fallacy frequently threatened by traffickers to their victims for control.

- In some cases, governments have successfully identified victims only to place them with refugees and asylum seekers, where the services are not tailored to their specific needs. Trafficked victims in mixed-use shelters may also face stigma or rejection from other individuals living there due to their past involvement with forced prostitution or crimes. Cultural and social attitudes towards prostitution, for example, can do more harm than good in the case of sex trafficking as individuals may view women involved in sex works as perpetrators rather than victims. Such environments fail to provide adequate support for victims to restore their confidence and sense of independence.
- Ideally, a shelter is a safe and comfortable place where victims can stay, leave and return according to their wish, and which provides services catered to their specific needs. However, in some places, the shelters for trafficked victims closely resemble detention centres more than safe havens which can potentially create re-traumatisation.

Jorge-Birol, A. (2008). 'Empowering Victims of Human Trafficking: The role of support, assistance and protection policies'. *HUMSEC Journal*, Issue 2: 163-178.

http://www.humsec.eu/cms/fileadmin/user_upload/humsec/Journal/Pedra.pdf

This article argues that provision of support to victims of human trafficking is vital not just to meet their needs and help them recover, but to ensure prosecution of traffickers and criminal justice. It highlights the gap between provisions in European legislation and on-ground practice.

Human trafficking victims are supposed to be provided with a period of recovery and reflection, allowing them to remain legally in a country while they consider their options. During this time they should have access to shelter, legal advice, counselling and medical care. The paper reports that victims in Belgium and The Netherlands who were granted this reflection delay were more likely to press charges against their traffickers. 'However, law enforcement officials seem unwilling to inform possible victims about their right to a reflection delay, because they fear it will prolong the investigations or they simply do not recognise these people as trafficked victims' (Jorge-Birol, 2008: 171). As a result, most victims preferred returning to their countries of origin to taking part in immediate criminal proceedings.

Trafficked victims can also be granted temporary stay in destination countries, but in practice the paper says countries such as Belgium, The Netherlands, Poland and the UK give this to victims who are willing to assist with investigations and prosecutions. Numbers given temporary stay are low. In Germany, for example, because victims violated the Aliens Law, deportation measures were commenced against 55% of them, and only 13% were given temporary residence permits (Jorge-Birol, 2008: 172).

Protection of victims is important as they can face reprisals for cooperating with criminal investigations and prosecutions, particularly on return to their home countries. The paper finds that protection will only be available during victims' period of temporary stay in foreign countries. Moreover, protection often means suppression of victims' rights, for example having to change their lifestyle to avoid exposure to risk, and denial of communication with friends and family (where they do not move together) – meaning the victims are the ones to who seem to be punished (Jorge-Birol, 2008: 172).

The paper makes a further point that in destination countries, provision of state-funded services for trafficked persons was generally dependant on their having already been formally identified as trafficked. To be formally identified requires a bureaucratic process that can take some time. Meanwhile, the victim's basic needs such as housing, counselling, legal advice are neglected, as well as other special needs such as recovery or reflection period, non-punishment provisions and protection.

4. Mental health services

Aberdein, C. & Zimmerman, C. (2015). 'Access to mental health and psychosocial services in Cambodia by survivors of trafficking and exploitation: a qualitative study.' *International Journal of Mental Health Systems*, (2015) 9:16. http://researchonline.lshtm.ac.uk/2145784/1/13033_2015_Article_8.pdf

This study explored the availability and accessibility of mental health and psychosocial support services in Cambodia for women, men and children trafficked and exploited for sex or labour purposes. Its main findings are:

- Among the available post-trafficking services, there are few trained mental health specialists, an over-representation of shelter services in urban versus rural areas and limited services for males, people with disabilities, individuals exploited for labour (versus sexual exploitation) and those with more serious mental illnesses.
- Providers believe that discrimination and stigma related to both mental health and human trafficking hinder trafficked people's willingness to access services, but suggest that awareness-raising may reduce these prejudices.
- Care in this sector is precarious due to over-reliance on financial support by donors versus government.
- Recent increases in newly qualified professionals and providers suggest potential improvements in the quality and availability of psychological support for trafficking survivors.

The paper concludes that psychological support for the growing number of identified trafficking survivors in Cambodia will depend on improved geographical distribution of services, more mental health support professionals and growing acceptability of mental health service use among trafficked people and the Cambodian public.

Katona, C. et al (2015). *Addressing Mental Health Needs in Survivors of Modern Slavery: A critical review and research agenda*. Helen Bamber Foundation. <http://freedomfund.org/wp-content/uploads/2015-Addressing-the-Mental-Health-Needs-in-Survivors-of-Modern-Slavery.pdf>

This report reviews the existing research evidence on the mental health impact of enslavement and the efficacy of specific mental health treatment approaches. It finds there is limited evidence to demonstrate the efficacy of specific treatment interventions which are carried out in isolation. An integrated approach to care for survivors is likely to be more effective. It notes that the majority of research which investigates the efficacy of treatment interventions has focused specifically on child soldiers and may therefore have limited generalisability to other forms of slavery. However, some treatments which are adaptable for use in a wide range of cultural contexts have been found to be effective for the reduction of post-traumatic stress disorder (PTSD) symptoms in this group. These include Narrative Exposure Therapy (NET), which requires only brief training.

The report also identifies gaps in existing knowledge. As well as insufficient research on common health problems in survivors of modern slavery (particularly men and children), and on factors either increasing the likelihood of mental health problems or protecting survivors from developing these, it notes there is a lack of systematic studies on specific clinical interventions. The paper stresses that the various forms of slavery and the challenges faced by those who are working to assist and support enslaved people, are highly specific to the regions, populations, cultural and socio-economic contexts in which they occur. Clinical interventions should therefore be systematically evaluated to determine whether they are helpful to survivors in various regions and contexts.

Schofield, T. et al (2011). 'Health and community services for trafficked women: an exploratory study of policy and practice'. *The Australian Journal of Social Sciences*, December 2011, 46(4): 391-410.

https://www.researchgate.net/publication/286886164_Health_and_community_services_for_trafficked_women_An_exploratory_study_of_policy_and_practice

This paper looks at the provision of health and community services for trafficked women in the Greater Sydney region of Australia. Provision of such services is a central feature of the UN Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children (2000), of which the Australian Government has been a signatory since 2005. It states that in Australia service provision is made difficult by how trafficked women are understood and treated in policy and legal terms. The findings reveal that services have been inaccessible as a result of sparse, uncoordinated, and poorly funded provision. The major obstacle to adequate and appropriate service provision has been a national policy approach focusing on 'border protection' and criminalisation rather than on trafficked women and their human rights. The paper concludes that further policy development needs to focus on the practical implications of how such rights can be translated into the delivery of health and community services that trafficked women can access and be supported by more effectively.

5. Support for victims of child labour and forced/bonded labour

ILO (2006). *Rehabilitation of the Victims of Child Trafficking: A Multidisciplinary Approach*. International Labour Organisation. http://www.ilo.org/wcmsp5/groups/public/---asia/---ro-bangkok/documents/publication/wcms_bk_pb_63_en.pdf

This report describes a multidisciplinary approach (MDA) to rehabilitation of victims of child trafficking, which was developed by the Centre for the Protection of Child Rights (CPCR), an ILO-IPEC partner in Thailand. The MDA is based on the principle that the effective rehabilitation of trafficking victims who have experienced various types of abuse requires systematic and coordinated services from physicians, psychologists, legal experts, social workers and other relevant experts.

First introduced by CPCR in 1995 by piloting a 'hospital-based multidisciplinary team' it integrated services for child victims, demonstrating that a 'one-stop centre' is an effective model for the provision of medical, legal and social services. In 1997 a provincial level child protection mechanism was piloted in nine provinces of Thailand, with the aim of applying it across the whole country. It has since been refined and applied in other countries in the region through the Regional Project on Combating Child Trafficking for Labour and Sexual Exploitation (TICSA-II).

As well as highlighting lessons learned over 20 years in the transition to a multi-disciplinary approach, the report provides guidelines on how to implement the approach and reviews the challenges involved, ending with recommendations for providing an enabling environment. In terms of impact, it notes the following positive outcomes within Thailand's child protection system: legal reform to facilitate the operation of multidisciplinary teams; heightened public awareness of the issue of child abuse; a wealth of knowledge on child abuse issues and professional support; MDA becoming the common practice for responding to cases of child rights violations; and scaling-up of the approach to the national level (ILO, 2006: 9).

ILO (2007). *Psycho-social rehabilitation of children withdrawn from trafficking and other worst forms of child labour*. International Labour Organisation.

<http://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&source=web&cd=3&cad=rja&uact=8&ved=0ahUKEwjGmbia4JXYAhVLJsAKHcsADgoQFgg1MAI&url=http%3A%2F%2Fwww.ilo.org%2Fipeci%2Fproduct%2Fdownload.do%3Ftype%3Ddocument%26id%3D14755&usg=AOvVaw1OvTHDgxPhxeEc3007atE2>

This manual draws on the lengthy experience of the ILO's International Programme on the Elimination of Child Labour (IPEC), as well as that of relevant organisations working in Bulgaria, Moldova, Romania and Ukraine, to offer an in-depth understanding of the worst forms of child labour (WFCL) and of the psychosocial methodologies for rehabilitation of children withdrawn from them. A recurrent and vital theme running through the document is the need to take into account the child's participation in their own rehabilitation process, and their views in the design, implementation and evaluation stages of the activities. 'Child participation is the cornerstone of all successful rehabilitation processes' (ILO, 2007: 4).

Chapter three describes the stages of the child rehabilitation process. It notes that this is a complex process that requires psychological, educational and vocational rehabilitation. 'A key element in this process is to change the child's dysfunctional attitudes – acquired during traumatic experiences – towards adults, work or their own self' (ILO, 2007: 40). The stages are:

- i. Establishing a rapport with the child - the success of this stage will have a direct impact on drop-out rate from the rehabilitation programme. The children withdrawn from WFCL are "*involuntary clients*" as they do not ask for help or specialized support, such as counselling or psychotherapy.
- ii. Assessing needs, resources and capacity - including conceptualising the issue at hand in observable and measurable terms.
- iii. Designing a plan of activities - for rehabilitation and reintegration, including setting the objectives of the rehabilitation programme and indicators / means of verification for quantifying progress. Its aim is to decrease those risk factors at the root of the child's involvement in WFCL, and reinforce protection factors. Rehabilitation focused merely on integrating the child into the educational system is not enough to reduce the risk of re-victimisation of that child and of his/her future children. The objectives of the psycho-educational, counselling or psychotherapeutic activities must be to develop some cognitive, social and emotional abilities, which should enable the child to adapt healthily to events in later life.
- iv. Facilitating the change - Each child has different capacities, needs and responses to services. Consequently, the more individualised the plan, the more multi-disciplinary its process of implementation, and the more often it is assessed and possibly modified, then the more likely it will succeed in rehabilitating the child.

- v. Ensuring continuous assessment - (and deciding on possible changes in the plan of activities).
- vi. Closing the case.

Bej, S. (2016). 'Towards an Unchained Nation - Analysing the Government's Revised Scheme to Rehabilitate Bonded Labourers'. *The Better India*, 17 December 2016.

<https://www.thebetterindia.com/78706/key-facts-scheme-rehabilitation-bonded-labourers/>

This article assesses a revised government scheme to provide assistance in rehabilitating bonded labourers in India. In 1978 the Indian Government introduced the Centrally Sponsored Scheme for rehabilitation of bonded labourers. The initial maximum amount to be given to each bonded labourer was Rs. 4,000, but this was periodically raised, reaching Rs. 20,000 in 2000. Conduct of surveys, awareness raising activities and evaluation studies were also included in the last revision of the scheme in 2000. The May 2016 revision to the scheme substantially increased the cash assistance provided, and enhanced assistance for disadvantaged groups (e.g. women and children, people with disabilities). It also increased (more than doubled) funds for survey identification of bonded labourers in each district.

The article highlights a number of shortcomings in implementation of the scheme:

- Bonded Labour Vigilance Committees responsible for identification and release of bonded labourers are widely reported to be negligent and casual in performing their duties - with instances of reporting zero or low prevalence of bonded labourers in areas where they clearly are present. Moreover, in many districts there are no committees.
- Governments conduct no regular surveys to identify bonded labourers. When surveys are conducted these are limited to a few districts, and carried out by lower ranked officials who lack adequate training and sensitivity. Labourers often accuse surveys of under-reporting the actual magnitude of bonded labour.
- It is common for the administration to drop cases after the identification of bonded labourers, or encourage settlements and compromises between the creditors and bonded labourers. This lack of implementation in identifying bonded labour gives impunity to the creditors, jeopardises all measures, and has resulted in a wide gap between policy and reality.
- The Central Scheme absurdly mandates giving the funds only upon conviction. This is problematic because, often, officials register very few cases against offenders. Even among the few registered cases, conviction rates are low, with cases dropping or staying pending in courts due to the creditors' political and economic power. Years may lapse between release and conviction, delaying the rehabilitation assistance. This time gap could very likely result in many released bonded labourers falling into bonded labour again due to the lack of adequate resources for daily sustenance.

6. Support for victims of modern slavery in the UK

Ferrell-Schweppenstedde, S. (2016). *Day 46: Is there life after the Safe House for Survivors of Modern Slavery?* Human Trafficking Foundation.

<http://www.humantraffickingfoundation.org/sites/default/files/Human%20Trafficking%20Foundation%20Report%202016%20Day%2046.PDF>

This report looks at the needs of survivors of modern slavery in the UK after the end of the 45-day National Referral Mechanism (NRM) recovery and reflection period – the period when the

Home Office makes a decision on whether or not a person has been trafficked. During this time survivors are given housing and support. However, after the 45 days Home Office support ends. Ironically, the abrupt removal of support often coincides with the time when a victim is finally formally recognised by the authorities as having been enslaved.

This report followed the lives of thirty women who were previously supported by the Poppy Project⁴: this closed suddenly in 2015 leading to abrupt removal of support – in the same way as support is removed under the NRM after 45 days. 73 women originally received Poppy support, but the study found that 18 of those had completely disappeared. The challenges some survivors faced in the first instance of seeking suitable accommodation include: the fact that some women with children were given a single room in a shared house, seemingly regardless of how many children they had; vulnerable women were housed with men they did not know, or living with random acquaintances.

The three main themes that emerged as the most commonly voiced support needs of the 30 survivors interviewed were: a) suitable accommodation; b) on-going specialist support and advocacy; and c) stabilised immigration status. The report makes recommendations to address these three key gaps in support: ensuring sustained access to suitable accommodation; continued provision of specialist support and advocacy; continuity of care; and provision of leave to remain in the UK.

The report concludes with a strong plea for sustained support for survivors of modern slavery in the UK: 'The current situation appears untenable and morally unacceptable. If Government is prepared to put in resources to find victims and support them for a short period while we verify if they were trafficked for national crime data, then we must be prepared to properly support these same survivors to safely continue their lives. This means we need to improve provision of support, accommodation and leave to remain from Home Office and local authorities. Otherwise we are simply rescuing victims, only to effectively return them into the hands of a trafficker, after briefly giving them a glimmer of hope' (Ferrell-Schweppenstedde, 2016: 5).

FLEX (2016). *Access to Justice for Victims of Human Trafficking*. Focus on Labour Exploitation (FLEX) working paper.

<http://www.labourexploitation.org/sites/default/files/publications/DWP-Compensation-F.pdf>

The UK Modern Slavery Act 2015 includes the ability for courts to make 'reparation orders' following the conviction of exploiters, but makes no provision for the many cases in which prosecutions or convictions are not possible. The UK is also obligated under various European and international laws to ensure trafficking victims' right to obtain compensation. This paper considers the ability of victims of human trafficking and other forms of modern slavery to access compensation. It found that UK law does not ensure access to free legal advice or compensation for victims of human trafficking.

In addition to legal issues, victims of trafficking face important practical difficulties that impede their effective access to compensation. Language barriers, fear, mental health issues and a range of other vulnerabilities mean that victims often need help to navigate the legal process.

⁴ The Poppy Project was part of Eaves Housing for Women. Established in 2003, it was the first specialist accommodation and support for trafficked women in the UK. It accepted women who it believed were trafficked whether or not they were identified by the official system and provided support until the women were ready to move on. In October 2015 Eaves closed due to insolvency resulting in the closure of Poppy.

However, the support available through the UK's National Referral Mechanism (NRM) is limited. Additionally, while legal processes and compensation claims normally take months or even years to be completed, the NRM support is of a short-term nature and is only available to victims for 45 days. This means that even when support providers put the systems in place to facilitate access to compensation for victims, these applications often fail due to victims not being able to complete the process without help.

The lack of a system for long-term support for victims of human trafficking also means that victims have competing urgent needs during the 45-day NRM period, which tend to take priority over claiming compensation. These often include resolving their immigration status or applying for asylum, accessing accommodation, securing a livelihood or accessing medical services. The short-term nature of the support means that victims and support providers are often forced to prioritise victims' most urgent needs, and unable to consider longer-term options such as cooperating with the police or pursuing compensation claims.

Cordis Bright (2016). *Effectiveness of anti-slavery training and survivor care pathway: final evaluation report*. Welsh Government.

<http://www.cordisbright.co.uk/admin/resources/160808-anti-slavery-training-survivor-care-pathway-en.pdf>

The survivor care pathway (SCP) in Wales is a referral and support pathway for all suspected victims/survivors of modern slavery. It begins with referral to a single point of contact. A multi-agency risk assessment conference (MARAC) is then convened to bring together all agencies who might contribute to supporting the potential victim/survivor and investigating the alleged slavery-related offence. Information is shared and actions are agreed. The case can be reviewed at subsequent MARACs and investigation and support can continue indefinitely, depending on the specific details of the case and on the support plan in place for the potential victim/survivor.

This report evaluates the effectiveness of the SCP (as well as complementary anti-slavery training). It found that SCP had a positive impact on the identification of potential victims/survivors, on the number and quality of referrals to the NRM, on coordinated, multi-agency support for potential victims/survivors, and on outcomes for these victims/survivors. Key strengths included:

- The simplicity of the pathway made it easy for professionals to understand where and how to refer potential victims/survivors, in turn leading to them feeling more confident about dealing with modern slavery cases.
- Use of MARACs because this was an approach known to professionals working with victims/survivors.
- The accessibility, timeliness and quality of multi-agency intelligence sharing and support planning – which led to more potential victims/survivors accessing multi-agency support and therefore achieving positive outcomes for their safety and rebuilding their lives, and to increased activity and success in investigating slavery-related offences.
- The person-centred, tailored, holistic package of support offered to potential victims/survivors who accessed the SCP.

The evaluation found concerns that SCP had been rolled out nationally too quickly; it also called for improved monitoring of outcomes. However its main recommendation was for increased dedicated resources for SCP (and anti-slavery training).

University of Liverpool (2017). *Fresh Start: Integrating Survivors of Modern Slavery.*

<https://www.liverpool.ac.uk/media/livacuk/csis/Fresh,Start,A5.pdf>

A challenge with regard to long-term care of survivors of modern slavery in the UK is provision of support after the ending of the 45-day statutory period of support provided under the National Referral Mechanism (NRM). This report is an evaluation of a programme designed to meet that gap in long-term support. Set up by City Hearts⁵, the Integration Support Programme (ISP) was initially piloted in the North West of England with a small group of male survivors, and has since been extended to include men, women and families where there have been cases of modern slavery.

The main aim of ISP is to maximise the socio-economic integration of survivors and this is conceptualised as being built on two pillars: engagement with community (integration coaches) and sustainable income (jobs, or long-term benefits). It works by providing a stable and comprehensive support environment that incorporates a single-point of contact and the maintenance of support through innovative techniques and regular reviews, and comprises two core services: the drop-in sessions and the one-on-one coaching. As well as community connections, ISP fosters business collaborations in order to enhance employability skills. The programme incorporates measurable indicators that identify achievements in small steps, so as to create the sense of momentum and progress. The goals or benchmarks are highly practical but deliberately kept manageable to reduce the possibility of failure.

The benefits of ISP are summed up in the report as follows:

- The ISP can be linked to concrete results for the individuals that have been enrolled. It has led to many clients living stable, happy and full lives, either pursuing, or attending, education and employment. It has helped prevent destitution, homelessness or re-trafficking - all of which have been identified as outcomes for those exiting the NRM.
- The ISP represents a comprehensive and resilient system that has capacity to provide track-able, measureable progress of individuals following their exit from the NRM.
- Considering the likely costs to the taxpayer of unemployment, homelessness, destitution – and the very real risk of re-trafficking (potentially resulting in another period of support through the NRM), the ISP can claim to be an extremely cost-effective initiative.
- It can also be argued that the ISP is beneficial regarding the need to improve prosecution rates. Without long-term support, many key witnesses go missing or fail to maintain contact with legal and police authorities.

Commons Work and Pensions Committee (2017). *Victims of Modern Slavery.* House of Commons Work and Pensions Committee.

<https://publications.parliament.uk/pa/cm201617/cmselect/cmworpen/803/803.pdf>

This report details the findings of the House of Commons Work and Pensions Committee, which looked into the structure of services to protect and care for victims of modern slavery in the UK. It focused on the status of victims beyond the National Referral Mechanism (NRM), securing prosecutions, identifying victims, and supporting them to move from victim to survivor. The main findings are as follows:

⁵ City Hearts provides accommodation and outreach support for men, women and families as part of the UK government's national support service.

- There is very little structured support for confirmed victims once they have been given a 'Conclusive Grounds' decision from the NRM that they are a modern slavery victim. The support individuals receive depends on their immigration status, nationality, ability to work and whether they are assisting the police with an investigation. The position of modern slavery victims contrasts with that of refugees. While recognition as a refugee grants an initial period of five years' leave to remain in the UK, recognition as a victim of slavery through the NRM confers no equivalent right to remain, for any period.
- Treating confirmed victims of modern slavery of different nationalities differently has created a confusing landscape that is poorly understood by victims and professionals alike. As a result some victims face destitution or even a return to their enslavers because they have no ongoing access to support.
- No data is collected on victims once they leave the NRM and the collection and recording of data generally was reported to be substandard. The Government does not monitor the re-trafficking of victims.
- Lack of proper support for victims has had a negative impact on the number of successful prosecutions of slave masters. Thousands of victims have not come forward, while others who have chosen to give evidence against their enslavers have ended up destitute as a result of insufficient support. This can result in the inexcusable scenario that abusers go free because their victims are not supported adequately to give evidence against them.
- Front-line Department of Work and Pensions (DWP) staff are often not aware of modern slavery and training on how to spot signs of slavery needs to be improved. In addition, DWP staff do not always know how to deal sensitively with identified victims. This is distressing for victims and may prevent them from accessing the support they need to move on from their safe house.

The main recommendations of the committee were as follows:

- All confirmed victims of modern slavery be given at least one year's leave to remain in the UK with recourse to benefits and services.
- Any reform to the NRM include the recording of instances where victims have been processed through the framework more than once.
- The DWP undertake an urgent review of the benefit support available to victims, including those who are assisting the police with investigations.
- All frontline DWP staff be trained in identifying and supporting victims of modern slavery.
- Like victims of domestic violence, victims of modern slavery have also lived through terrible experiences and DWP should introduce benefit easements and concessions for them, equivalent to those for victims of domestic violence.
- All victims of modern slavery be given a personal plan (*along the lines of the Welsh Government's Survivor Care Pathway*) which details their road to recovery, and acts as a passport to support, for at least the 12 month period of discretionary leave.

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Suggested citation

Idris, I. (2017). *Interventions to support victims of modern slavery*. K4D Helpdesk Report. Brighton, UK: Institute of Development Studies.

About this report

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