

Written evidence submitted by the Rights Lab to the DWP Select Committee inquiry into support for victims of modern slavery

1 Introduction

1.1 The University of Nottingham is the UK's leading academic institution for the study of modern slavery, having recently announced an investment into the development of a comprehensive programme of interdisciplinary research and intervention, supporting the achievement of the UN's sustainable development goal of eradicating slavery and forced labour by 2030.

1.2 In relation to this inquiry we are submitting responses to the following questions:

- **How effective is DWP's support and what improvements could be made?**
- **What guidance and training is there for frontline DWP staff in contact with victims of modern slavery and how does this compare with other frontline areas, e.g. the NHS?**
- **What is the impact on victims of modern slavery when they cannot access support and benefits?**
- **What are the costs to the state of supporting victims, including costs if victims become homeless and destitute?**

1.3 In summary the points we wish to raise are as follows:

- I. Providing support to victims of modern slavery is not solely a role for DWP: valuable benefits could be achieved through forging closer links with businesses where slavery has been identified in supply chains, and placing greater emphasis on restitution for victims.
- II. Sharing intelligence between the government's victim support systems and supply chain managers could also assist with improving the detection of modern slavery in supply chains and facilitating prevention.
- III. Research is currently being planned by the University of Nottingham on effective guidance and consistent training approaches for frontline staff across local public services, as existing provision appears to be variable and inconsistent.
- IV. Survivor narratives provide valuable evidence of the impact on victims when they cannot access support and benefits, including evidence of victims being re-trafficked, re-entering high-risk work situations, or becoming destitute.
- V. The costs to the state of destitution and homelessness are mitigated by the expanding work of third sector agencies. However they include long term costs associated with the wider impacts of homelessness, chronic health conditions left untreated, failed prosecutions and re-offending.

These points are explored in greater detail overleaf.

2 How effective is DWP's support and what improvements could be made?

- 2.1 In terms of improvements to DWP support, a lost opportunity exists in the current absence of government initiative to utilise intelligence from victim discovery and support to promote both restitution for survivors and improved practice in business supply chains.
- 2.2 Businesses who identify victims of modern slavery in their supply chains currently hand cases to law enforcement agencies and leave victim support to governmental and NGO institutions. Although businesses are not prepared for the provision of victim support, some may be interested in working with the victims to understand how they became part of the supply chain and potentially also to provide re-employment opportunities, financial or other support. Collaborations between – for example - BEIS and the DWP could facilitate contacts between organisations and slavery survivors found in their supply chains, potentially reducing the costs of supporting these and future victims.
- 2.3 Supply chain management practice would also benefit from improved transfer of knowledge. Since the 2015 Modern Slavery Act entered business practice, many organisations have been working actively on identifying slavery risks in their supply chains. Businesses are now at a stage of developing capabilities and tools to evaluate slave labour risks and to detect occurrences of slave labour in their supply chains, as a prelude to considering remediation (see [Gold, Trautrim, Trodd 2015](#)). In this process the transfer of knowledge from identified slavery cases to supply chain managers is crucial, to ensure that the solutions and tools developed for the identification and eradication of slave labour in supply chains are effective.
- 2.4 We have further found in recent research (forthcoming in Trautrim et al. 2017, 4th International EurOMA Sustainable Operations and Supply Chains Forum) that businesses allocate the issue of modern slavery to different functions in their organisations (for example health and safety, procurement departments, etc.) depending on their supply chain design and exposure. For an effective interaction between supply chain practice and government it will therefore be important to reach relevant decision makers, either through existing channels of communication (which could be via DWP, BEIS, or alternative interfaces) or public dissemination through professional bodies and industry interest groups.

3 What guidance and training is there for frontline DWP staff in contact with victims of modern slavery and how does this compare with other with other frontline areas, e.g. NHS?

- 3.1 As part of our 'slavery free cities' initiative, The University of Nottingham is currently planning action-research to understand what modern slavery training provision is currently in place for statutory services working across the UK, and what effective training might look like.
- 3.2 In considering training for DWP staff, it is important to recognise that training for many statutory frontline services appears to be variable by region and locality. E-learning on modern slavery has been provided by the College of Policing, and there are useful introductory videos aimed at local authorities, the emergency services and health services, promoted by the office of the Anti-Slavery Commissioner. However, in general, the picture is characterised by multiple guidance materials, produced by numerous organisations, but also an absence of a strategic steer on key messages for different types of service, a lack of consistency in application, and re-invention of the wheel as different public service organisations independently seek to tailor materials to their own circumstances.

- 3.3 Evidence is at present anecdotal but suggests that there are, for example, numerous private providers offering training on slavery-free supply chains, but little basis for making an objective assessment on the quality of those offers. Some localities (for instance, Staffordshire) have implemented training for frontline medical personnel, including GPs, but GPs from other areas have told us they have received no specific training. In addition, training available to the numerous smaller public service providers who are most likely to encounter slavery at a local level (such as housing associations, VCS organisations dealing with refugees, destitution, homelessness and asylum, and faith organisations) is ad-hoc and dependent on the strength of local anti-slavery initiatives.
- 3.4 This inconsistency contributes to the propensity for survivors of modern slavery to be left unidentified or misdirected. The problem is compounded by the fact that many survivors do not recognise themselves as victims of modern slavery and are therefore unlikely to access support or redress unless encouraged to do so. It also increases costs and reduces efficiency for frontline organisations attempting to respond to modern slavery in a proactive way.

4 What is the impact on victims of modern slavery when they cannot access support and benefits?

- 4.1 Even in circumstances where a conclusive decision has been reached that an individual is, more likely than not, a victim of human trafficking, insecurity around the permanency and future of their immigration status can cause individuals to disengage or disappear. Survivors are not able to access key welfare benefits, placing them in a precarious position ([Human Trafficking Foundation 2016](#)). They are more likely to disappear after initial safe accommodation is withdrawn, or where their stay is extended to assist with prosecutions, and in so doing they are at risk of further exploitation.
- 4.2 Survivor narratives often express the impact of poverty and of an uncertain immigration status on subsequent health and safety. The inability to access employment or sufficient welfare benefits increases the risks of homelessness and of drug and alcohol dependence. Such circumstances can compound existing trauma, having a significant negative effect on survivors' physical and psychological health. Survivors can feel their only choice is to return to the profession into which they were forced or to work in unlicensed businesses, placing them at risk of being re-trafficked.
- 4.3 As survivors are ineligible for full formal housing support, many find themselves in poor or dangerous accommodation. Research ([IPPR 2014](#)) demonstrates that there is no collective knowledge across authorities, agencies and voluntary services about who is being housed in unsuitable accommodation, what condition the properties are in, and little or no responsibility for these individuals once they had found accommodation.
- 4.4 A lack of effective and cohesive support that does not assist recovery can also impact on memory and the ability to recount events, which can have a direct impact on the effectiveness of witness testimony, and this is particularly the case where children are involved (Home Office 2007, *Achieving Best Evidence in Criminal Proceedings: Guidance on Interviewing Victims and Witnesses, and Guidance on Using Special Measures*; [Myers 2005](#)).

5 What are the costs to the state of supporting victims, including costs if victims become homeless and destitute?

5.1 Tightening restrictions on benefit eligibility, reductions in funding for housing support and emergency hardship, and a reduced supply of social housing have reduced the discretion available to local authorities and housing associations in meeting basic needs. Research has demonstrated that homelessness is rising, ([Loopstra et al. 2015a](#)) and many of the costs associated with individuals left destitute are borne by third-sector organisations. Organisations dealing with destitution have expanded their scope in recent years, evidenced through the growth in use of food banks ([Loopstra et al. 2015b](#)) and [increased demand](#) on networks such as NACCOM which consists of VCS providers who offer shelter to those with no alternative accommodation. We understand that locally the demand for these services is in many cases outstripping supply.

5.2 The costs to the state of unmet needs therefore potentially includes:

- More visible homelessness, which can lead to increased fear of crime amongst the general public, and increased assaults on homeless people.
- Chronic health problems and disability associated with a lack of access to essential health care, mental health impacts and individuals becoming a danger to themselves or others.
- Costs to the Police in terms of failed prosecutions when survivors of slavery are forced to move on, and repeat offending by slave-holders as a result.

5.3 However there is at present limited data on the prevalence of these problems, and this is something we are planning to explore in more depth through analysis of local policy responses to modern slavery and contemporary UK survivor narratives.

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