20th March 2020

Dear Victoria Atkins MP, Parliamentary Under Secretary of State (Minister for Safeguarding)

### **COVID 19 and Modern Slavery Victim Support**

We write as organisations working directly with victims or within relevant policy areas to raise urgent concerns about the current lack of clarity, guidance and resources to protect this vulnerable group as the crisis develops.

We are encouraged by the recent announcement of a financial package to assist businesses and homeowners and hope that this will be followed shortly by provisions that will provide greater capacity to those working with victims of modern slavery.

There needs to be clear guidance for the continued safe provision of victim support with urgent contingency plans put in place in the context of the rapid acceleration of COVID19. This needs to be issued as a priority.

Many survivors of trafficking and exploitation have underlying physical health issues making them particularly vulnerable to becoming ill if they are infected. Many are also pregnant and the sole carers of children, putting children at risk if their parent gets sick.<sup>1</sup>

As you will understand, survivors of trafficking and exploitation are likely to be particularly affected by this pandemic and the resulting social and economic constraints. The added uncertainty caused by the pandemic, compounded by self-isolation which may trigger traumatic memories and fears, means that survivors' mental health may deteriorate, increasing their vulnerability to harm.

This is compounded by the fact that, due to circumstances outside of their control, few survivors of trafficking and exploitation will be able to follow the government's practical advice to self isolate and protect themselves against infection.

#### Outreach support

Approximately 80% of people supported through the Victim Care Contract (VCC) only receive outreach support. It is our understanding that no assessment has been carried out as to the quality of their housing. We understand that many are in shared or cramped accommodation such as asylum support or 'sofa surfing', making self-isolation impossible. Victims who do not have leave to remain in the UK and are therefore on immigration bail will have a condition requiring them to reside at a specified address. This requirement may become inappropriate and put them at risk if the accommodation at that address is shared with someone who is ill. In addition it will often be the case that victims lack sufficient resources, access or capacity to be able to follow government guidance to move location e.g. if they are pregnant or if they have a compromised immune system.

People in outreach support are generally living off subsistence rates of £35/ week only. It is not possible for people to order or purchase items in advance on this income, nor prepare to be equipped

<sup>&</sup>lt;sup>1</sup> For research on potential harms of COVID 19 on pregnant women <a href="https://www.rcog.org.uk/en/guidelines-research-services/guidelines/coronavirus-pregnancy/covid-19-virus-infection-and-pregnancy/covid-19-v

for isolation. As shops in the UK are increasingly empty of basic goods, survivors who are subsisting on such a low amount will be increasingly unlikely to be able to buy the basics they need.

If a survivor becomes ill it is unclear how their support worker will give them their weekly subsistence allowance, let alone how they will buy food, soap and other basics. There must be a contingency plan in place for this situation. Please can the government clarify if remote payment cards can be implemented as a priority for those who want them? For people who have bank accounts direct debit may be a preferred option.

Survivors who are parents, particularly single mothers, are likely to be particularly impacted. This might be due to pregnancy increasing their vulnerability to the virus, no respite and challenges for caring for young children in confined or inadequate spaces as nurseries and schools close, challenges of shopping and storing food and difficulties with hygiene as supplies increase in price and are harder to find in shops. Please can government confirm that survivors who are parents will be supported to care for their families appropriately during this time?

There must also be a plan in place for support workers becoming ill. Currently when support workers who operate under the VCC are on leave for any reason survivors who are in their care are often left without any support until they return. This situation puts survivors at risk in the current context of COVID-19. We expect to see lengthy absences as support workers develop symptoms and need to self isolate.

We anticipate that victims on outreach support who are staying with friends or family may be asked to leave accommodation without being provided with follow-on options due to their hosts concerns about the spread of COVID-19. These victims will need to be provided with safe and suitable accommodation via the VCC, however we are concerned that they will face serious difficulty in securing this support (despite their legal entitlement), without provision of comprehensive guidance and dedicated and increased resources provided by the Government to the VCC primary contractor.

#### Safe house accommodation

What are the provisions for self isolation and continued support if a survivor in a safe house becomes symptomatic of COVID-19? There must be provisions in place for care for the survivor, the support worker, and all of the other people living and working in the safehouse.

We wish to see a contingency plan from the government in relation to requests for the provision of accommodation for victims of trafficking via the Victim Care Contract. If a victim is unable to be accommodated in a safehouse either due to issues with lack of bed space and/or potential spread of COVID-19 the victim must be provided with alternative safe and suitable accommodation in the interim.

# **Extension of support and new referrals**

The victim support care contract needs urgent guidance and resourcing to be able to take new referrals during to the Coronavirus pandemic while keeping everyone safe. There needs to be accommodation to allow for people with symptoms of Coronavirus to be accommodated so that they are not left street homeless, putting them, and others at serious risk. There must be clarification as to the position on all new referrals and how the Government intends to ensure that potential victims, (both those with and without Covid19 symptoms) are safe and supported, and all risks to others in accommodation are minimised.

The impact of increasing limitations and restrictions of services provided by Local Authorities and third sector organisations will need to be taken into account when completing Recovery Needs Assessments for victims and making decisions on extended NRM support. We anticipate that it will be more difficult for victims to transition out of the NRM in the current context and that support should be extended accordingly. However, this should not prevent new victims from accessing support. We ask that the Government provide a comprehensive contingency plan in relation to how it will cope with increased demand on VCC services.

# All people who have survived trafficking and may be (re)trafficked in the future

As advisory services, mental health services and therapeutic care and other specialist NGO services close without being able to predict time of return, survivors who rely on such services will become increasingly isolated and vulnerable. Homeless shelters are closing which will push people onto the streets and put them at risk of infection with no facilities for handwashing etc as well as of re-entering exploitation due to a lack of options.

At this uncertain time, the situation of survivors of trafficking crime must not be left in such a dangerous predicament. The system at present is too fragile and needs to be strengthened so it is robust and fit for purpose in the COVID-19 crisis. Survivors of trafficking and those who support them need clear leadership, guidance and resources to deal with the current situation and contingencies.

#### What is needed

- A clear contingency plan, created by Government in conjunction with support providers, for victim support, covering all parts of the victim journey through the NRM from referral, to accommodation and support prior to a CG decision being made and post CG support and reinstatement of support. Post CG decision planning must include co-operation with local authorities and other stakeholders in order to safeguard vulnerable individuals through any transitional period.
- Confirmation that residence and reporting requirements for those on immigration bail will not be enforced during the pandemic - and any reporting dates be deferred until the pandemic has ceased. There needs to be clear and reassuring information on this.
- The Single Competent Authority to suspend all negative decisions in cases until the pandemic has lifted, so that victims have the opportunity and access to legal services necessary to be able to respond. All decisions that can be made positively should be expedited to recognise and support victims of trafficking as quickly as possible so that they can access systems and entitlements designed to protect them. Identification and formal recognition of victims of trafficking is dependent upon appropriate victim support services and we are acutely aware that victims will struggle to obtain the advice and support that they need at this time.

This letter aims to highlight that in the context of this crisis there is an urgent need for guidance and resources. Signatories are keen to work with government to share thinking on practical ideas for implementation.

Yours sincerely,

Tamara Barnett, Kate Roberts and Anna Sereni, Modern Slavery Strategy and Implementation Group Victim Support Task and Finish Group Co-Chairs

Peter Andrews, Head of sustainable policy, British Retail Consortium

Catherine Baker, ECPAT

Robin Brierley, Executive Director, West Midlands Anti Slavery Network

Paul Bott, Chief Executive, SJOG Hospitaller Services

Nadia Burrell, Human Trafficking Policy Officer, CARE

Dr Ella Cockbain, Associate Professor in Security and Crime Science, UCL

Caroline O'Connor, CEO, Migrant Help

Jasmine O'Connor, CEO, Anti-Slavery International

Minh Dang, CEO Survivor Alliance

Euan Fraser, Public and Corporate Affairs Manager, IJM UK

Tatiana Gren- Jardan, Head of Modern Slavery Policy Unit, Justice and Care and the CSJ

Philip Ishola, Executive Director, Love 146

Victoria Marks, Director, ATLEU

Pip McKnight, Head of Policy & Advocacy, Refugee Women Connect

Dr Sian Oram PhD, Head of the Section of Women's Mental Health, Kings College London

Dr Rosie Riley, Founder, VITA

Phillipa Roberts, Director of Legal Policy, Hope for Justice

Pat Ryan, CEO Hestia

Avril Sharp, Policy and Casework Office, Kalayaan

Garry Smith, Chief Executive. Medaille Trust

Kerry Smith, CEO, Helen Bamber Foundation

Rachel Smith- Project and Communications Coordinator, Human Trafficking Foundation

Dr Julia Tomas Anti-Slavery Coordinator, The Passage

Andrew Wallis- CEO Unseen & Co-Chair MSSIG TISC

### Copy sent to:

Matt Hancock, Parliamentary Under Secretary of State for Public Health and Primary Care

The Independent Anti-Slavery Commissioner, Dame Sara Thornton

Yvette Cooper, Chair, Home Affairs Select Committee

Harriet Harman, Chair, Joint Committee on Human Rights

Jeremy Hunt, Chair, Health and Social Care Committee

Karen Bradley and Baroness Butler-Sloss, Co-Chairs, APPG on Trafficking and Modern Slavery

Miriam Minty, Head of Modern Slavery Unit