

Moving On Project:

Wraparound Survivor Support

Supporting modern slavery survivors
beyond the National Referral Mechanism

Marianne Rozario

THEOS

**Moving On Project**



Recommendations

Recommendations for statutory agencies

Statutory agencies to:

- Increase awareness and training of modern slavery especially amongst frontline police officers and within local authorities encouraging dedicated modern slavery teams.
- Better training on completing the NRM form to first responders.
- Improve clarification of the NRM process to survivors.
- Increase provision for survivors offering better access to housing, work, and healthcare.

Recommendations for Medaille Trust and the charity sector

To increase:

- the visibility of the work of MOP amongst statutory agencies in a particular locality.
- the provision offered by MOP by hiring more staff and more volunteers.
- connections between MOP hubs.

To introduce:

- in-house counselling services, mental health therapists or psychological support.
- safe houses/temporary accommodation within MOP.
- external training for first responders.
- an internal database of resources
- in-house immigration solicitors and housing solicitors.
- further financial support for survivors.

Acknowledgements

I would like to thank all those who have supported this research project.

I would especially like to thank Ben Ryan and those at Medaille Trust for trusting me with this research project and allowing me to once again explore a topic close to my heart.

Finally, thank you to all those that I interviewed – from the many MOP staff and volunteers, survivors, statutory agents, and charity workers. I hope I reflected your sentiments truly, and as a result that this report has impact.

Marianne Rozario
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Foreword

The fight against modern slavery is one of the defining human rights challenges of our time. Despite legislative progress and increased awareness, thousands of survivors continue to face significant hurdles long after escaping exploitation. This report highlights critical gaps in the systems meant to safeguard survivors and provides an in-depth analysis of our Moving On Project (MOP), which was set up to address some of these challenges.

The report examines the barriers survivors encounter, from bureaucratic bottlenecks to unmet mental health needs, and underscores the importance of collaborative, victim-centred approaches. Through detailed research and testimonies, the report illustrates how MOP's holistic support bridges the gap in provision and empowers survivors to rebuild their lives.

This report urges the statutory agencies, the charity sector, and society at large to work together to ensure survivors are treated with dignity and provided the tools they need to thrive. It challenges us to rethink our systems, recognize survivors' resilience, and provides a roadmap for change.

This report represents the collective effort and insight of many individuals, each contributing uniquely to its creation. First and foremost, we extend our deepest gratitude to Dr. Marianne Rozario for her time, compassion and her insights.

A sincere thank you to the funders of this report, CSJB, your belief in the work of Medaille's MOP project has been one of the keys to its success. A very special thank you to all who have funded our MOP project since its inception; your generosity ensures that this vital work can continue.

Finally, our heartfelt thanks go to all those who participated in this research—the survivors who courageously shared their stories, our staff and volunteers who tirelessly work to provide support, and the statutory agents and charity workers who contributed their perspectives. Your invaluable contributions have brought depth and authenticity to this report. It is our hope that your contributions will inspire action and lasting change.

This work is a testament to what can be achieved through collaboration, commitment and compassion. Together, your contributions help pave the way toward a more compassionate and just response to modern slavery. One where every survivor feels supported and empowered.

Dani Wardman
CEO, Medaille Trust

Acronyms

CG: Conclusive Grounds

MARAC: Multi-Agency Risk Assessment Conference

MOP: Moving On Project

NHS: National Health Service

NRM: National Referral Mechanism

RG: Reasonable Grounds





Introduction

According to estimates, more than 122,000 people are in situations of modern slavery in the UK,¹ but only about 17,000 of those were referred into the National Referral Mechanism (NRM) in 2023.² The NRM is the UK government's framework for identifying and referring potential victims of modern slavery, with victims receiving first a "reasonable grounds" (RG) decision and then, if positive, a "conclusive grounds" (CG) decision. In theory, the NRM ought to entitle potential victims to particular forms of support for a minimum of 30 days while they await a CG decision on their case.

The number of potential victims of modern slavery has reached a record high, with 4,758 people referred to the NRM between July and September 2024. This marks a 10% increase compared to the previous three months and a 15% rise from the same period in 2023.³ However, during July to September 2024 the lowest proportion of positive

- ¹ <https://www.walkfree.org/global-slavery-index/map/#mode=map:country=GBR:region=4:map=prevalence:year=2023:view=recommendations>
- ² <https://www.gov.uk/government/statistics/modern-slavery-nrm-and-dtn-statistics-end-of-year-summary-2023/modern-slavery-national-referral-mechanism-and-duty-to-notify-statistics-uk-end-of-year-summary-2023>
- ³ <https://www.independent.co.uk/news/uk/home-news/modern-slavery-labour-migrant-exploitation-b2642990.html>

RG decisions were made in a quarter since the NRM began, meaning fewer people were deemed as being victims of modern slavery.⁴ Part of the issue is the backlog of decisions on modern slavery cases. The government has recently pledged to clear this within two years and promised to hire 200 additional Home Office staff to process cases.⁵ The wider issue is that there is a major gap between potential victims referred into the NRM and the actual number of victims of modern slavery. Many victims choose to not enter the NRM perhaps because they do not feel ready or willing to identify themselves to the authorities. Other victims do not have enough evidence and fall short of the threshold to receive a positive CG decision. Many more are simply not even identified as victims in this hidden crime.

The Medaille Trust's Moving On Project (MOP) "provides long-term, community-based support to men and women affected by or at risk of human trafficking and modern slavery".⁶ There are five MOP hubs in Manchester, West Midlands, Wiltshire, Hampshire and London, and each acts as a safety net for survivors, from all nationalities including British victims, including those who

for various reasons do not fall into statutory support. In this way, MOP supports survivors of modern slavery beyond those supported by services in the NRM.

This research project identifies and highlights the challenges facing survivors of human trafficking and modern slavery

Aims of the Research Project

This research project identifies and highlights the challenges facing survivors of human trafficking and modern slavery, especially those who fall outside of the NRM. It principally focuses on the Medaille Trust's Moving On Project as its case study.

The research aims to raise awareness of the challenges faced by survivors of modern slavery and human trafficking who fall outside of the NRM, including identifying gaps in statutory provision for survivors. In doing so, it explores the value in the work of Medaille Trust and the future work needed by the charity sector and statutory

⁴ <https://www.salvationarmy.org.uk/news/concerning-trends-identification-modern-slavery-victims>

⁵ <https://www.gov.uk/government/news/modern-slavery-victims-to-be-supported-in-fresh-measures>

⁶ <https://www.medaille-trust.org.uk/our-work/protect/moving-on-project>

services to respond to such unmet needs.

The key research questions are:

- What are the current challenges facing victims of human trafficking and modern slavery, especially those who fall outside the NRM?
- To what extent have statutory agencies met the needs of victims of human trafficking and modern slavery? What could be improved?
- How can Medaille Trust specifically, but the charity sector more broadly, better respond to the needs of survivors?

Who are we talking about?

The Moving On Project was originally started in 2020 in response to a perceived set of needs around survivors who were “post NRM”. That is, those survivors who have received a CG decision on their case. Medaille Trust runs 10 safe houses within the government’s Modern Slavery Victim Care Contract, which provide accommodation and support for survivors within the NRM. Medaille had identified a gap in support for those who had received a CG decision and so needed to leave their safe house, but still found themselves needing support. This remains

a key set of survivors supported within MOP – post NRM survivors in need of some form of ongoing support (whether practical or social and emotional).

Subsequently, and in response to referrals and request for support the provision was increased to include support for other clients outside of the NRM. This includes people who may for a variety of reasons not be ready or willing to identify themselves to the authorities and enter the NRM, as well as some who were previously referred to the NRM but then withdrew (sometimes due to delays or frustrations with the system).

Some survivors within the NRM can also access some of the events and social support provided by the MOP project, though do not receive case work (as this is provided for them separately through the NRM).

A final category of people include those who have received a negative decision on their case (i.e. the Single Competent Authority has judged that they do not meet the threshold to be considered a victim of slavery). Such people are obviously no longer eligible for support within the NRM but may nonetheless be highly vulnerable due to the removal of support, including potentially to a risk of exploitation. The latter are particularly at risk if they have

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an irregular or insecure migration status which means that they are not eligible for statutory support or able to work legally to support themselves.

Methodology

This research project was based primarily on a qualitative study following a brief desk-based survey of existing research. A Theos researcher conducted 29 semi-structured interviews between July and November 2024. There were 10 interviews with Medaille Trust staff members and volunteers (two interviews per each of the five MOP hubs around the country), along with 10 interviews with survivors (two interviews per each of the five MOP hubs). Some interviews were conducted in person, and others online or over the phone. A couple of the interviews with survivors had to be conducted via a telephone interpreter. In addition, nine interviews were conducted with statutory agents or charity workers who work alongside statutory services. Of these interviews, three were with police officers or ex-police officers, three with council workers working in the field of modern slavery, and three worked for charities that work closely with statutory agents.

Structure

Chapter One of this report sets out the context of this research project looking briefly at modern slavery globally and in the UK. Chapter Two highlights, from our research data, the work of the Medaille Trust's Moving On Project and its positive impact for survivors of modern slavery and human trafficking. Chapter Three shares several challenges and unmet needs facing survivors who fall outside the NRM which largely fall into three categories: (1) systems challenges; (2) wellbeing needs; and (3) practical challenges. Finally, Chapter Four responds to those unmet needs by articulating what statutory agencies and Medaille Trust along with other charities could do to meet some of those challenges faced by survivors. In doing so, this chapter explains the recommendations put forward by this research report.



1. Context

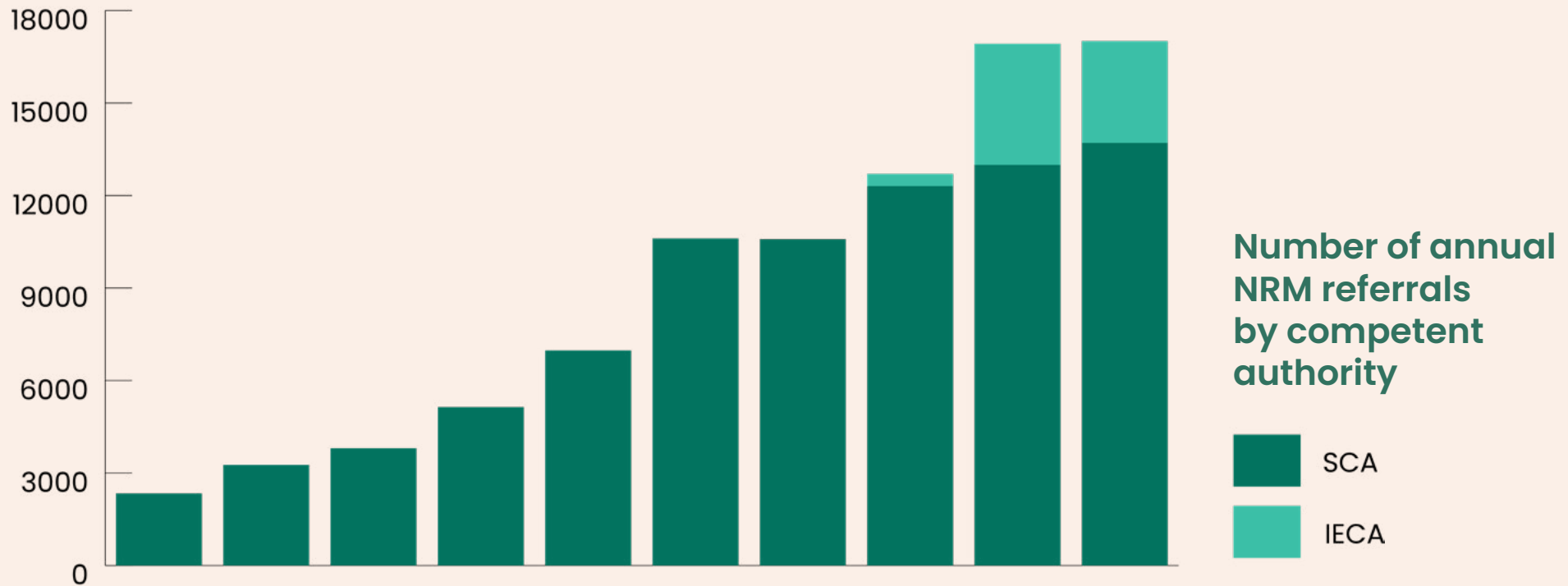
Modern Slavery Globally

According to the 2021 Global Estimates of Modern Slavery, an estimated 50 million people were living in a situation of modern slavery on any given day in 2021⁷. Of these, approximately 28 million were in situations of forced labour and 22 million in forced marriage. According to the same report, children and migrants remain disproportionately affected from a global perspective: 12 million children were in modern slavery, and migrant workers were three times more likely to be in forced labour.

Not only are these figures alarming, but they also appear to be increasing too. According to reports, forced labour has increased by 2.7 million between 2016 and 2021, and forced marriage has increased by 6.6 million between 2016 and 2021.⁸

The international community has committed to

- 7 <https://publications.iom.int/books/global-estimates-modern-slavery-forced-labour-and-forced-marriage>
- 8 https://www.ilo.org/sites/default/files/wcmsp5/groups/public/@ed_norm/@ipec/documents/publication/wcms_854733.pdf



ending modern slavery among children by 2025 and universally by 2030 through the adoption of Target 8.7 of the United Nation’s Sustainable Development Goals. To achieve this ambitious aim, it requires a coordinated approach between national governments, international organisations, multilateral organisations, non-governmental organisations and amongst civil society. Medaille Trust work alongside statutory agencies reflecting the need for cross-sector collaboration.

Modern Slavery in the UK

The Global Slavery Index estimates the UK is home to around 122,000 victims of modern slavery, which is the equivalent to 1.8 prevalence per 1,000 people.⁹ However, according to official data released by the UK Government, only 17,004 potential victims of modern slavery were referred to the Home Office in 2023; this is a similar figure to that in 2022 (at 16,921) but nonetheless the highest annual number since the NRM began in 2009.¹⁰ Victims

⁹ <https://www.walkfree.org/global-slavery-index/map/#mode=map:country=GBR:region=4:map=prevalence:year=2023:view=recommendations>

¹⁰ <https://www.gov.uk/government/statistics/modern-slavery-nrm-and-dtn-statistics-end-of-year-summary-2023/modern-slavery-national-referral-mechanism-and-duty-to-notify-statistics-uk-end-of-year-summary-2023>

of all nationalities, including British nationals, can be referred into the NRM. The most affected group in the UK were British nationals who were responsible for 25% of referrals to the NRM, followed by Albanian (24%) and then Vietnamese (6%).¹¹

The UK Government introduced the Modern Slavery Act in 2015. It required statutory bodies to act on slavery and businesses to ensure their supply chains were free from it. Companies with a turnover of more than £36 million had to publish an annual Modern Slavery Statement. The Act also established an Independent Anti-Slavery Commissioner and clarified offences related to trafficking and exploitation. The Global Slavery Index rates the UK Government response to modern slavery at 68%.¹²

At present, identified victims of modern slavery can be referred into the NRM. After an initial assessment they are given a RG decision which, if positive, entitles them to particular forms of support whilst awaiting a CG

¹¹ <https://www.gov.uk/government/statistics/modern-slavery-nrm-and-dtn-statistics-end-of-year-summary-2023/modern-slavery-national-referral-mechanism-and-duty-to-notify-statistics-uk-end-of-year-summary-2023>

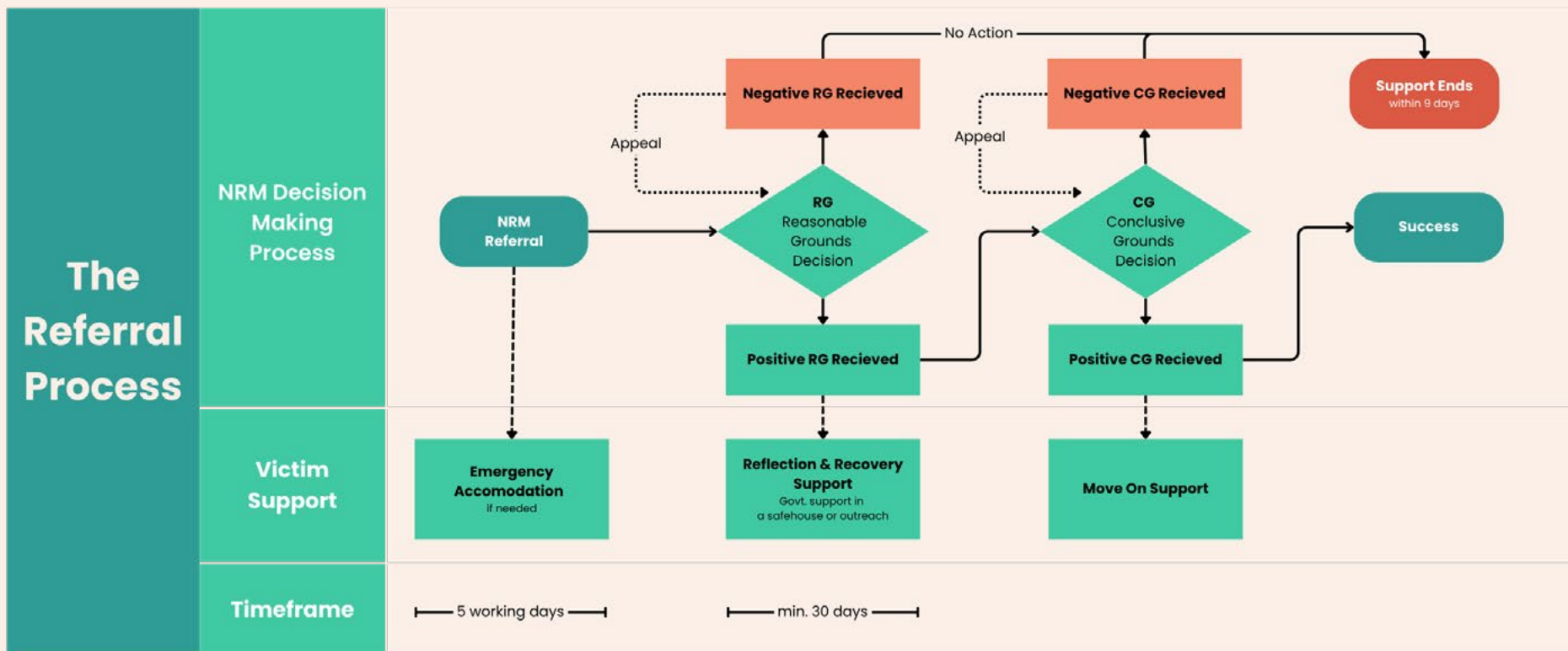
¹² <https://www.walkfree.org/global-slavery-index/map/#mode=map:country=GBR:region=4:map=prevalence:year=2023:view=recommendations>

¹³ <https://www.gov.uk/government/statistics/modern-slavery-nrm-and-dtn-statistics-end-of-year-summary-2023/modern-slavery-national-referral-mechanism-and-duty-to-notify-statistics-uk-end-of-year-summary-2023>

decision on their case. This support includes access to safe accommodation for those who are destitute as well as access to medical, legal and mental health support, among other things. The minimum amount of support after a positive RG decision was set at 45 days in the Modern Slavery Act 2015, but the recovery period has been reduced to 30 days by the Nationality and Borders Act (2022).

Alongside processing 17,004 referrals to the NRM in 2023, the Home Office made 15,237 RG decisions and 9,825 CG decisions. Of these, 55% of RG decisions and 66% of CG decisions were positive.¹³ There is a huge gap between the number of official referrals of potential to the Home Office, and the estimated number of victims in the UK continuing to live in situations of exploitation according to modern slavery experts. Many victims of modern slavery are not being supported through the current system.

The shortfalls in this NRM support are relatively well



researched.¹⁴ For example, the International Organization for Migration identified in 2024, amongst other things, that potential victims wait (on average) ten times longer than the 5-day target to receive an initial decision, foreign nationals received larger numbers of “reasonable grounds” decisions compared to UK nationals, and there was significant variations between the numbers of positive decision based on the type of referral organisation.¹⁵

Less well researched are the needs and experiences of the many people who are not part of the NRM, but yet are still victims of modern slavery and in need of support. Survivors who are not part of the NRM include several groups. Some choose not to enter the NRM in the first place. Others have recourse to public funds and services because they are British and choose not to enter. Some have received a negative decision during the process or are appealing a negative decision. There are also

¹⁴ <https://www.cambridge.org/core/journals/journal-of-social-policy/article/criminalising-survivors-of-modern-slavery-the-united-kingdoms-national-referral-mechanism-as-a-bordermaking-process/9BB3229B72168A832CA4E8B63B44FD3F>

¹⁵ <https://unitedkingdom.iom.int/news/updated-analysis-national-referral-mechanism-data>

survivors who have a positive decision but are applying for refugee or asylum status. Additionally, survivors beyond their five-year right to remain may still need support, including those with historic trafficking experiences.

MOP aims to support all modern slavery survivors, by offering casework support to those who are not in receipt of statutory support, regardless of their NRM status. Survivors referred to MOP who are currently in the NRM, can attend workshops.

The next chapter will look at what MOP does, the services it provides, and the values it holds before subsequent chapters exploring the unmet needs of survivors not in the NRM, and how statutory agencies and the charity sector can best respond to those needs.



What MOP does

In our research, staff, volunteers and survivors, highlighted the assistance and help MOP hubs provided:

- Access to food banks and clothes banks
- Access to health care – mental health, opticians, physical and wellbeing support
- Access to interpretation services
- Access to legal aid and support
- Assistance with communicating to statutory agencies
- Assistance with developing support plans
- Assistance with finding safe accommodation – private and council accommodation
- Assistance with moving homes
- Driving to health appointments
- Emotional support and a listening ear
- English language courses
- English language needs – filling out paperwork, paying bills, writing letters
- Essential equipment from charities
- Group classes and activities
- One-to-one case work
- Signposting to other services
- Support with applying for jobs
- Support with booking health and wellbeing appointments
- Support with evidence in appeal cases
- Support with managing finances and setting up payment schemes

2. The impact of the Moving On Project

The Moving On Project by Medaille Trust “provides long-term, community-based support to men and women affected by or at risk of human trafficking and modern slavery”.¹⁶ There are five MOP hubs each with at least one local co-ordinator and a case worker (some hubs have an additional case worker and volunteers). MOP hubs do not duplicate government-funded services but rather act as a safety net for survivors who may have been involuntarily left without specialist support.

The aim of MOP is to build “trusting relationships, so survivors have the security they need to take steps towards a better life”.¹⁷ They work directly with survivors, support them with their needs which could include “accommodation, access to other services, mental health, physical health, money management, employment and training support, personal safety, engaging with police, legal issues repatriation/resettlement and community integration”.¹⁸

¹⁶ <https://www.medaille-trust.org.uk/our-work/protect/moving-on-project>

¹⁷ <https://www.medaille-trust.org.uk/our-work/protect/moving-on-project>

¹⁸ <https://www.medaille-trust.org.uk/our-work/protect/moving-on-project>

¹⁹ Participant interview 8

²⁰ Participant interview 10

The value of MOP

Beyond a description of the practical activities and services provided by MOP, like those listed above, it is also important to state the value of the work of MOP as reflected by survivors and other interviewees.

A staff member described the work of MOP as a “wrap around service”¹⁹ supporting survivors before they have entered the NRM with taking their statement and referring to relevant services, and then once again when they exit the NRM. They also support those who decide not to enter the NRM at all.

A number of staff members articulated that the distinctiveness of MOP was their client-led approach and their flexible nature. One case worker stated,

“I think we’re distinguishable, because we do offer that one-to-one support...we go, according to the client, what they think, feel, whatever they need from us, we try to provide them. Sometimes their expectations are a bit high, and we can’t provide that for them, but we do let them know that”.²⁰

What survivors appreciated from MOP the most was the social and emotional support.

plan which is very much focused on their needs. We set goals with them, and then the support plan is basically tailored around where they are, what their circumstances are, what they want to achieve, and really support plans based about how to get there".²¹

It is clear that a key value of MOP is their dedicated one-to-one client-led support. On top of this client-led approach, staff members also highlighted that in contrast to similar organisations, they felt that MOP was more flexible in their approach. A staff member said, "I think MOP, I think what's unique about what us, we're really flexible".²² Another staff member elaborated on this saying, "We're quite flexible...we can work with someone until they

Similarly, another case worker said,

"I work directly with the clients we have, we tailor a support

feel they don't need us anymore".²³

What survivors appreciated from MOP the most was the social and emotional support. MOP staff encourage survivors to participate in their group activities and outings. One staff member stated,

"We always have something on. Last week, we had the African drumming, and we have loads of craft kits here. We've done sewing, jewellery making, lots of, yeah, different things go on here. So, every week we'll put something on".²⁴

Survivors themselves appreciated the activities put on by MOP. One said that she particularly enjoyed the group art classes for the opportunity to connect with other women, to share how they feel, and to develop a social life.²⁵ Another survivor stated,

"They are patient, and they do all these activities too. I did some painting, artwork here. They have those things that will [help me to]escape. We do

²¹ Participant interview 2

²² Participant interview 1

²³ Participant interview 2

²⁴ Participant interview 1

²⁵ Participant interview 19

dancing... They are very welcoming".²⁶

A staff member reflected how much these activities meant to the survivors she worked with. She said,

"They usually say that, like, without us, they wouldn't know how they would navigate through, they're just really grateful for the service. They're grateful for the group. They tell us, weekly, how much it means for them coming out on this one day of the week. It gives them something to do. They've got a spring in their step when they come in to see us".²⁷

Beyond social support, survivors were particularly grateful for the emotional support provided by MOP staff and volunteers which helped them gain confidence, build trust, and made them feel safe. Numerous survivors expressed such sentiments:

"I'm grateful for what [they] did, what they're doing now, you know, supporting me, listening to me, you know, and helping me in every way they can".²⁸

26 Participant interview 16

27 Participant interview 3

28 Participant interview 18

29 Participant interview 11

30 Participant interview 17

"I talk to them as family because they are here to help you. People I know here, they show me what to do or how to be safe".²⁹

Speaking of her MOP case worker, one survivor said,

"she fought for me. I sometimes look at her, I'm like, wow, if, if my mum had done even 20% of what that lady did, I wouldn't have been in all the crap I was in".³⁰

Another appreciated that MOP staff were always there to listen to her. She said,

"I talk to them every day, even if I'm not here, yeah, before the end of the day, they send me an update. They check on me. First of all, they call me

"I talk to them as family because they are [here] to help you. People I know here, they show me what to do or to see how to be safe".

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every morning. Yes, and so if something and I'm free to call at any time, if I'm having an issues or anything, the lines are always open to call".³¹

Whilst the impact of MOP is evident, survivors still face many challenges, especially for those who are not supported by NRM provision, which the next chapter will explore.

"she fought for me. I sometimes look at her, I'm like, wow, if, if my mum had done even 20% of what that lady did, I wouldn't have been in all the crap I was in."

31 Participant interview 16



What is First Responding?

A ‘first responder organisation’ is, in England and Wales, an authority that is authorised to refer a potential victim of modern slavery into the National Referral Mechanism. The current statutory and non-statutory first responder organisations are:

- police forces
- certain parts of the Home Office:
 - UK Visas and Immigration
 - Border Force
 - Immigration Enforcement
 - National Crime Agency
- local authorities
- Gangmasters and Labour Abuse Authority (GLAA)
- Salvation Army
- Migrant Help
- Medaille Trust
- Kalayaan
- Barnardo’s
- Unseen
- NSPCC (CTAC)
- BAWSO
- New Pathways
- Refugee Council

3. Unmet needs

Those we interviewed highlighted a number of challenges and unmet needs facing survivors outside the NRM. Those unmet needs largely fall into three categories: (1) systems challenges; (2) wellbeing needs; and (3) practical challenges.

System challenges

Numerous interviewees expressed “system challenges” including poor completion of NRM forms, a lack of legal aid, slow NRM decisions, and the changing nature of the process often leaving victims in limbo.³²

The poor quality of NRM forms by some first responders was frequently commented on by interviewees. One survivor spoke of her negative decision:

“I was rejected by the NRM, okay, so that can be depressing as well. Yeah, so it was the police, because it’s not my fault or the fault of anybody, but I think the first responder that sent my NRM,

³² The latest guidance on NRM First Responders is available at <https://www.gov.uk/government/publications/human-trafficking-victims-referral-and-assessment-forms/guidance-on-the-national-referral-mechanism-for-potential-adult-victims-of-modern-slavery-england-and-wales>

there was mistakes, and I was [left] hanging...They came back and said, My NRM is negative, because in the report, they said they asked the police to submit additional information, and they didn't hear from the police, so they made their decision based on what was presented to them, and then it's been up and down".³³

Other staff members expressed similar feelings with the way statutory agency first responders didn't fill out the NRM in as much detail as required. Blame was not so much placed on the individual, but more on the lack of knowledge from everyone classified as first responders on what exactly is required when filing out the NRM.

There is, accordingly, a set of survivors who wished to enter the NRM but found themselves rejected due to the poor quality of some of the referrals. This can leave legitimate survivors without the support to which they would have been entitled had the referrals been better conducted in the first instance.

For foreign national survivors this can leave them particularly vulnerable as most will not be able to access

³³ Participant interview 16

³⁴ Participant interview 5

³⁵ Participant interview 2

public funds to support themselves outside the NRM.

For those with an irregular migration status this issue is exacerbated because, as several staff members throughout the different MOP hubs identified, that getting legal aid for survivors was proving difficult. One staff member stated,

“Legal aid has been a massive one...it’s just it’s non-existent.”

“Legal aid has been a massive one...it’s just it’s non-existent. There’s no capacity to take on new clients. And that, again, the status is a massive impact when it’s clients who are wanting to reside in the UK and there’s no legal aid, there’s no solicitors to take on their new cases, and that can cause increased struggles”.³⁴

Similarly, a different staff member remarked,

“Sometimes it’s really challenging supporting clients to get a solicitor if they don’t already have solicitor in place, it’s nearly impossible get the legal representation. That’s a challenge”.³⁵

The lack of legal aid is also affecting survivors who are going through the appeal process. A case worker said,

“There is not enough solicitors with legal aid contracts, and a lot of solicitors are only taking on new asylum cases, and we are getting clients who are going through the appeal process, and then their solicitors are dropping them, and we can’t find anyone to take on their cases”.³⁶

For those survivors who were able to navigate the above challenges to enter the NRM there are difficulties. The majority of those we interviewed said that a key challenge facing those in the NRM was the length of time it took to get a decision. Some survivors within the NRM access MOP events and drops ins (though not case work, which would be conducted by a service provider of the government’s Modern Slavery Victim Care Contract) to provide support with this wait. Other MOP users have dropped out of the NRM due to the wait and having their lives put on hold. Many other clients were previously in the NRM but have been rejected, or left it due to frustrations with how the process is managed.

36 Participant interview 7

37 Participant interview 9

38 Participant interview 4

One staff member commented that the CG decision specifically took too long. She said,

“...so to be fair on them, the RG decisions invariably come back within time. That’s four, five days or so. But yeah, but the CG decisions, we’ve got ladies waiting two years. There’s just no movement. What you know? Why is that 35 days? You know? So that that was a huge challenge, because these people are just left in limbo so on that, yeah, and it affects everything”.³⁷

A different staff member spoke of a case she knew where it took nine years for a CG decision, although she qualified it saying that the survivor had a brain injury which made her case more complicated.³⁸

Survivors we spoke to expressed similar sentiments, many of them still waiting to hear about their outcome. One survivor spoke of her ordeal: she is living with her children in the house of her ex-partner and new girlfriend and she desperately wants to move out. She is unable to do as she is currently appealing a negative decision and is waiting

for the outcome, which may force her and her children to return to their home country.³⁹

Not only is it taking a long time to get a CG decision, staff members complained that the process of the NRM changed constantly making the whole process more challenging. One staff member said, “it has changed a lot in a year and a half, it keeps constantly changing due to things with the government, and so it’s, it’s definitely something that’s, you know, kept us on our toes, right”.⁴⁰

One council worker stated,

“You know, the past few years we’ve seen entry requirements and entry kind of thresholds and positive decision thresholds change a lot for the NRM, which means that professionals having to keep up with lots of policy changes, and it can be very difficult if it’s not your day job, to actually have a sense of what you need to do when you submit an NRM referral, and what the changing thresholds are and all of that. I would say that we’ve seen definitely the thresholds have got higher. It’s

39 Participant interview 19

40 Participant interview 8

41 Participant interview 21

42 Participant interview 9

become more difficult to get positive outcomes in the NRM”.⁴¹

A case worker spoke of a specific victim of sexual exploitation and trafficking who under the guidelines of objective evidence will unlikely qualify because, despite the victim escaping to the UK and giving birth to her exploiter’s baby, “there’s absolutely no objective evidence to support her, and I have got a great fear that that will be a negative RG decision. There’s nothing at all. We haven’t got anything, not a photograph, not an exploiter’s name. There’s just nothing”.⁴²

Wellbeing needs

Beyond challenges related to the NRM process, there were several wellbeing needs of survivors that could be improved – a sense of isolation, feeling de-humanised, and a lack of counselling support for mental health needs.

A couple of interviewees shared that survivors often felt isolated and alone, being away from family and friends. A staff member said,

“social isolation... that’s probably one of the biggest challenges. I feel that they can feel that they’re very alone, and one of the things that I’ve seen them come out of their shell is when they meet with other people that have been in the same situation as them, and form friendships in that way. Because a lot of them lack trust as well, which is quite understandable, trust in new people”.⁴³

Echoing this, a volunteer stated, “I think it’s hard for them, to deal with loneliness. A lot of them have family, you know, [who are] all abroad, and they don’t have that, they don’t have that secure unit. A lot of them have children as well”.⁴⁴ MOP hubs try to combat social isolation of survivors through group activities, away days, and regular social sessions.

“I think it’s hard for them, to deal with loneliness.”

A sense of isolation is compounded by a fear to trust others due to previous experiences, but that fear extends also to statutory

agents. As one staff member expressed,

“They find it really hard to trust others, especially like governments or the police or depending on where they’re from. Also they’re quite isolated, so they don’t have family and friends to support them, and we really forget how much we rely on others”.⁴⁵

What makes the situation worse, whilst survivors are feeling isolated and fearing to trust others, is that the NRM, asylum and other statutory processes makes them feel dehumanised. As one staff member explained,

“And I feel at times, some of the clients have come to our sessions in tears, feeling very dehumanised with some current processes...I feel like a little bit of like understanding and with it being a trauma informed approach, it helps them, and I think that has been one thing that I’ve identified which has been a real struggle for them, is when they are talking to other professionals or trying to even get help at a GP, sometimes the approaches aren’t really the best. So that has been like one of the

⁴³ Participant interview 3

⁴⁴ Participant interview 4

⁴⁵ Participant interview 3

“... at times, some of the clients have come to our sessions in tears, feeling very dehumanised with some current processes”

struggles”.⁴⁶

A trauma-informed approach by all those encountering survivors is necessary, but so too is the need to support survivors with access to specific counselling, therapy or psychological support

to meet their mental health needs. A number of survivors spoke about their mental health struggles – including depression – and desiring to get support.

A large number of interviewees expressed a desire for more mental health support. A case worker said,

“Access to psychological services is another really hard one for them, because a lot of them need counselling but there’s not a specialist one for them. And I’ve seen it myself where counsellors just don’t continue with them. I feel like they think that they’re too complex, or they keep cancelling

appointments, or it’s just too much getting an interpreter, and it’s it just seems very messy and complex for them, so they don’t get that support. And with something like counselling, I feel that they’ll need it for probably a period of years, and it’s really hard for them to just to even have the first five sessions consistently with the same counsellor. So that’s that, I think that’s a massive barrier for them as well”.⁴⁷

A number of case workers explained that for those outside the NRM waiting lists for access to mental health support from the NHS were too long. One case worker stated, “getting counselling support is very difficult, and we’re waiting...the waiting lists are that long”.⁴⁸ Explaining this further, a different staff member said,

“so I believe the NRM, they have funding so they can do it privately. So it’s a bit easier for them, because they have access to the psychological gear. For us, it is the NHS. So there’s huge waiting lists, depending on what areas that they’re from. Luckily, there’s a few charities that I find that can offer the free services, but they don’t offer the

46 Participant interview 5

47 Participant interview 3

48 Participant interview 5

interpreters".⁴⁹

A volunteer shared the story of a survivor who struggled to access a counsellor despite needing one. She required a female counsellor due to her past experiences and also needed a translator, which created barriers to receiving the wellbeing support she desperately needed. MOP staff support survivors where they can but, as one case worker mentioned, "we provide one to one support. I mean, we're not like trained therapists, so we don't offer that kind of mental health support, but I think some clients do look for that in us, but we support them to the best of our ability".⁵⁰ Any way in which MOP could provide in-house counselling support would be encouraged.

Practical challenges

Interviewees highlighted several practical challenges facing survivors outside the NRM: (1) access to housing; (2) access to employment; (3) lack of financial support; and (4) assistance with administrative tasks.

Firstly, a large number of interviewees noted that the lack

of housing is one of the key practical challenges facing survivors not supported by the NRM. Those in the NRM have access to safe houses as do some who are destitute, but for others, options are limited.

"Housing is a big issue at the moment, the council does not have houses to give, I think, and they're taking a very long time to even answer calls or emails, even just placing a client on a registry takes a long time".⁵¹

This comes to the forefront when survivors are granted their legal status through their right to remain, which automatically triggers that they have to leave their asylum seeker accommodation and look for housing. One case worker stated,

"I would say the one thing that comes up a lot in terms of that we find challenging is housing when once a service user is granted the refugee status, we then have a kind of a race around the clock to try and help them apply for Universal Credit, apply for housing".⁵²

49 Participant interview 3

50 Participant interview 10

51 Participant interview 6

52 Participant interview 8

Due to the housing crisis, even if someone has been living in a particular area for years, when they get their leave to remain, they may be housed in a completely different part of the country, which makes them feel isolated once again. This is a particular challenge for parents who may have to change children's schools, further disrupting them.

Another staff member said this transition phase for survivors was particularly difficult. She said,

"I feel like housing ...that process, because I feel that could be quite traumatic, and that probably is one of the hardest stages, is when they're going through that transition of the housing, because it's, again, they don't know where they're going. There's no information given to them. They just kind of get the name of the place. They don't have any choice in it. It's very similar to, kind of their trafficking or asylum history in terms of that. So I find that can be very traumatic for them, or they get put in like random hostels that are inappropriate for them".⁵³

She went on to state that depending on your age, level

of vulnerability, and other factors will determine the success of your housing support.

"It's always housing. And I think, you know, it's hard for them, especially the men."

"But if they're single and like under a certain age, that's when they kind of fall into the homelessness bracket, which is really difficult. So a lot of them, they have to kind of source their own housing, or go down the private rented route, which is really difficult for somebody in their situation. So they tend to maybe stay with friends, but then that can lead to a more exploitive situation again, because of they've lost their safety net".⁵⁴

A number of interviewees highlighted single male survivors being at most risk. A volunteer stated,

"It's always housing. And I think, you know, it's hard for them, especially the men. It seems to be quite a lot of the men have had difficulties trying to find decent accommodation. The cost of the accommodations is the main concern, and

⁵³ Participant interview 3

⁵⁴ Participant interview 3

probably one of their ones they talk about a lot”.⁵⁵

Many survivors spoke first-hand about the struggles of finding suitable housing and the many issues that have arisen regarding housing. For example, one survivor shared about her flat having mould and being extremely cold which negatively affected her health conditions. Another survivor spoke of having moved numerous times, once due to water leaking from the flat above and another time, after the police intervened, because of intimidating neighbours.

Case workers noted that survivors sometimes needed to be more realistic about their housing requests. With a nationwide housing crisis, expectations for larger homes in better areas often need to be managed. One case worker stated that survivors had said,

“...well. I want a two-or three-bedroom place with a garden. My kids need space to play in... don't lose that dream. But if you are relying on local authority, then the reality of what they have is very different to what they're wanting”.⁵⁶

55 Participant interview 4

56 Participant interview 7

57 Participant interview 10

Second, another practical challenge facing survivors is access to employment. Several interviewees spoke of survivors wanting to work but found getting a job very difficult. One survivor shared that she had a 20-hour job, but really wanted to work more but struggled to find additional work due to her limited language skills. The language barrier when trying to find a job was also reflected by a staff member who said,

“[Language is] a big challenge for most of them with getting jobs. One client, she just finished working in April, and she's still struggling to find a job, just because she hasn't got that qualification. And, you know, she does know English...and she does try, she does English classes and everything like that. But sometimes it's just not there. These jobs sometimes require, like, English qualifications and whatever, so it's difficult for her as well”.⁵⁷

Another case worker also shared that survivors who had young children and no family support were unable to find work and care for their children. They said,

“But we've also had a lot of mums with young

children, so they're not quite able to go out and find work yet because of childcare and things like that. We've got one woman at the moment...she has no family locally in England at all. So what that means is she can't, she has no childcare. There are no childcare facilities. But she's desperate to work, so she is wanting and looking specifically for work around schools, in schools, so she didn't fit it around the school time".⁵⁸

Relatedly, thirdly, the lack of financial support given to survivors was noted by numerous interviewees. A case worker highlighted the challenge saying,

"...finance is a massive one, and I think especially when we have no recourse to public funds clients, that is really difficult because they have no form of income and grants as well...so grants is where, like, you can apply for welfare grants, and that can either be through the local authority or through other external charities. And oftentimes there's only a small pot of money, and there's so many, so many people applying for it, that oftentimes they have to close down".⁵⁹

58 Participant interview 1

59 Participant interview 5

60 Participant interview 10

Parallel to accessing financial support is the rise in the cost-of-living, with increased bills making it harder for survivors to live independently.

Other survivors spoke of struggling to pay the water and gas bills, as well as grocery bills.

"I've had a lot of clients say to me, my council tax bill is too high. Can you help me reduce it? Which is one challenge...I don't know how, but, yeah, but that's one thing challenge, money, money, definitely, but it's money to pay for bills, right?".⁶⁰

Other survivors spoke of struggling to pay the water and gas bills, as well as grocery bills. One survivor spoke of her simple meals she prepared and not being able to afford to buy salad and vegetables because they are too expensive, so is reliant on pasta and rice mainly.

The fourth practical challenge facing survivors outside the NRM, especially those who are "Post-NRM" having received a positive CG decision, is a lack of knowledge on how to set up certain administrative tasks, for example setting up

bank accounts, pay bills, etc. A staff member highlighted the lack of support survivors receive saying,

“But for those that, for example, get their asylum, and that’s brilliant, and it’s great, and everyone’s really happy. And then then there’s a reality of, where do I go? Where do I live? What do I do? How do I manage my bills? How do I pay for everything? And it’s that is, if someone’s been an assignment, they haven’t had any bills. You know, they had a small amount of money that they’ve had. But now that, you know, they might be getting Universal Credit, they might have to be thinking about work. They might have to, you know, they’re setting their water rates, their direct debits, and it’s massive that, you know”.⁶¹

Part of the challenge is that many survivors of other nationalities struggle to understand English which is a further barrier when trying to sort out these administrative tasks. A volunteer said,

“Obviously, the language barriers when they’re trying to communicate in public, in society or with the doctors, we have to make them do, like lots of

forms for the doctors, because it’s, that’s, that’s one of the challenges”.⁶²

These three categories – (1) systems challenges; (2) wellbeing needs; and (3) practical challenges – reflect the challenges facing survivors outside the NRM. The next chapter looks at how statutory services and Medaille Trust, along with other charities, can meet some of these unmet needs.

61 Participant interview 1

62 Participant interview 4



4. Response

Having discussed the unmet needs of survivors of modern slavery, specifically those who fall outside the NRM, this chapter looks at what statutory agencies and the charity sector, specifically Medaille Trust, could do to fill gaps in provision and better support survivors of modern slavery.

Statutory agencies

There were four identified categories of ways in which statutory agencies could better support survivors and fill some of the gaps in provision identified in the previous chapter: (1) increase awareness of modern slavery; (2) increase training for first responders; (3) explain the NRM process better to survivors; and (4) increase provision for survivors.

a. Increase awareness of modern slavery

Awareness of modern slavery amongst all statutory agents was deemed as sporadic by multiple interviewees. Speaking to current and ex-police officers, they shared that modern slavery is not always seen as a priority. One ex-police officer said,

“This is sort of a crime that police don’t really come into contact with on a regular basis with, and as a result of that, I think we still have an ongoing issue of police, law enforcement, not necessarily recognizing modern slavery as a thing...There are some forces that have dedicated teams...other forces may just have sort of prevention officers or tactical advisors”.⁶³

This was also reflected by MOP staff speaking about their relationship with police forces. In the words of one staff member, “I think it’s not a priority for the police...it’s been really difficult trying to get the police to work with us”.⁶⁴

As such, it was argued that modern slavery needs to be elevated as a crime to the status of domestic abuse in policing. A couple of police officers suggested having a multi-agency risk assessment conference (MARAC) for modern slavery cases, as currently happens for domestic abuse cases. A MARAC is a weekly/monthly meeting between multiple agencies to share information on high-risk cases of domestic violence and abuse. One police

⁶³ Participant interview 24

⁶⁴ Participant interview 9

⁶⁵ Participant interview 29

officer said,

“Things like MARAC for domestic abuse are kind of almost enshrined in law...Every police force in the country, pretty much has one of those, has a MARAC function, and that’s quite embedded in UK policing, and everyone does it, with exception two forces that don’t. But generally, everyone does it. Our inspectorate like it, the public health inspectorate like it. So that works quite well for domestic abuse victims”.⁶⁵

“I mean it’s not a priority for the police...it’s been really difficult trying to get the police to sort of work with us”.

Something similar for modern slavery cases would be a way to systematise and formalise how cases of modern slavery are dealt with across multiple statutory agencies.

Beyond police forces, there is a growing but limited attention paid to modern slavery by local authorities. All the modern slavery leads from different local authorities we spoke with strongly argued that all councils needed

“the grand majority of local authorities don’t even have a specialist member of staff who can start to have these conversations”

10 modern slavery leads...And local authorities in the country, like 400 local authorities. You can see where the gaps start happening, because most, the grand majority of local authorities don’t have, don’t even have a specialist kind of member of staff who can start to have these conversations”.⁶⁶

The problem is that many local authorities are driven by priorities of the government, limitations to funding and resource, and as a mostly hidden crime, modern slavery is not top of the agenda. One council worker speculated,

“We had zero referrals to the NRM the year before I came in...then within the first 12 months of me

a team of modern slavery experts. One council worker said,

“I’m the first modern slavery lead the local authorities have had, there’s about

being in post, our reporting of modern slavery had grown by like 600 and something percent, and we had over 120 cases. And so that shows that actually, if you don’t look for it, you’re not going to see it”.⁶⁷

The council workers we spoke with wanted the local authorities to do more to support survivors but acknowledged the reality was the opposite. One council worker said,

“in terms of adults, there’s actually limited ways that the council have a statutory duty to support people...we get no specific funding around being a first responder organization or any provision to victimize them on slavery. So unless they fall under the strict statutory obligations that we have towards individuals, we have no duty to support or do anything we don’t have to. It’s all optional”.⁶⁸

“...we get no specific funding around being a first responder organization...”

66 Participant interview 21

67 Participant interview 21

68 Participant interview 23

Similarly to policing, it was encouraged that councils should take modern slavery as seriously as domestic abuse. A case worker said,

“So I think when so domestic abuse survivors are seen as priority with council, there’s that they’ve actually got their own dedicated housing team to deal with domestic abuse survivors. I’d really like modern slavery, to have that same care and support within the local authority a dedicated team, dedicated team, or at least link it in the domestic abuse team”.⁶⁹

b. Increase training to first responders

Increasing awareness of modern slavery needs to go together with better training for first responders, those who will come into contact with survivors and who’s duty it is to complete the NRM form. An ex-police officer called for better signposting to help frontline police officers know who to contact when they have a potential modern slavery case, and other interviewees identified a gap in social care workers who didn’t realise they were first responders.

69 Participant interview 2

70 Participant interview 24

In terms of completing the NRM form itself, several interviewees called for first responders to be better equipped on best practice (which would have the knock-on effect of improving NRM referrals, making for easier and more accurate decision making later in the process). An ex-police officer said,

“You know, there are some people that are excellent at filling out NRMs. There are also a lot of people that have no clue, and although there is some training available, it’s not brilliant. I think some people probably wouldn’t even know there’s training available”.⁷⁰

A charity worker spoke of the reluctance of statutory agents to fill out the NRM. They said,

“I think the reluctance to make NRM referrals, you know, it really should be something that’s done by statutory agencies whenever they encounter somebody that they suspect is a victim of modern slavery. And the reality is it just does not happen like it doesn’t. And I think the reason for that is that it’s an enormous piece of work to do with somebody. And so we find that it is very, very

“we find that it is very, very difficult to get statutory first responders to make the referrals.”

difficult to get statutory first responders to make the referrals”.⁷¹

c. Increase explanation of the NRM process to survivors

Regarding the NRM itself, as highlighted in the previous chapter, the NRM could be improved by the Home Office speeding up processes to come to RG and CG decisions quicker, and by not changing requirements to the NRM so frequently. Swifter and more accurate decision-making would increase the confidence of potential victims to enter the NRM and prevent others from dropping out of the system due to long delays. Beyond that, multiple survivors expressed uncertainty exactly where along the NRM process they were. A staff member said,

“I sometimes feel like process hasn’t been explained to them in as much detail, and obviously there is a language barrier, sometimes, a lot of the time, but there’s always often met with a lot

of confusion as to why...So I’d say there’s a lot of confusion for people that have either been in the NRM or are currently in the NRM, and they don’t quite necessarily understand the process”.⁷²

Therefore, statutory agencies could better support survivors by explaining the process of the NRM more coherently and supporting them along the way. Multiple interviewees called for more compassion for survivors (including for those who are ultimately rejected by the NRM but may be vulnerable to future exploitation or abuse) and more understanding to their circumstances. One volunteer said, “they [statutory agencies] need more compassion towards these people who have lost a lot, you know.”⁷³

One way policing has tried to support survivors is through the Victim Navigators scheme, delivered

Multiple interviewees called for more compassion for survivors and more understanding to their circumstances.

71 Participant interview 26

72 Participant interview 25

73 Participant interview 4

by another charity, Justice and Care. An ex-police officer spoke of the scheme saying,

“I think they’re worth their weight in gold. If you ask me, what is one of the best NGO police or law enforcement collaborations, I would say Justice and Care’s Victim Navigators without a doubt, you know”.⁷⁴

Speaking to one of these Victim Navigators, their role is to bridge the gap between the victim and the investigator in order

“to support that victim so that they feel strong enough to support a prosecution, if that’s what they wish to do. And also build them up through their recovery journey, get them back on the feet, so that when it comes to the point of court, they’re a stronger individual, but also we get that successful prosecution, because the stronger that victim is, the more likely they’re going to deliver some really great evidence, and then win”.⁷⁵

However, another police officer cautioned against policing

using Justice and Care’s Victim Navigators, citing that their positive record was flawed as they were introduced to cases that were already going to be successful. Additionally, he mentioned that policing focusing on one charity is a risk. He said,

“It’s getting very competitive in the charity sector. Policing aren’t helping ourselves in just endorsing, inadvertently endorsing, left, right and center. And if we’re not careful, we’re going to find that the government decrees something that we all say isn’t a good idea, and some charities are going to lose out if they’re not the anointed provider”.⁷⁶

d. Increase practical provision for survivors

Interviewees expressed a need for increased practical support for survivors by statutory agencies in terms of more support accessing housing and employment, and better access to healthcare. A council worker explained the issue with housing,

“Everybody wants to talk about housing for victims of modern slavery, it’s really difficult, because

74 Participant interview 24

75 Participant interview 27

76 Participant interview 29

victims of modern slavery have got no automatic entitlement to local authority housing. They've got to play the same game as everybody else. They've got to meet the criteria, which is, they've got to have a local connection. They've got to be homeless, or, you know, at risk of homelessness, and they've got to have recourse to public funds. They've got to be eligible for assistance... and if you're not, if you don't have priority need, you are realistically not going to get housed. And so that's really tricky, because lots of victims of modern slavery are very vulnerable, and we know that any victim of modern slavery is a really high risk of re-exploitation if they are unhoused. But they don't fit the criteria that the local authority, by law, has to abide by".⁷⁷

Regarding healthcare, a charity worker explained that survivors had to wait the long waiting lists to gain support.

"when you say that I need some mental health support, they will refer you to the NHS. Psychological support from the NHS [took]one year".⁷⁸

77 Participant interview 21
78 Participant interview 28
79 Participant interview 23

A council worker also spoke of the need for increased provision and support particularly for men.

"I think for women, there's a lot more available, if I think about for men, and not having anyone there to assist to navigate through the process, unless people fit in these neat categories of, I'm a woman being sexually exploited, I'm a woman in domestic servitude, and there's not really much access to services that can provide that advice outside of the NRM".⁷⁹

Statutory agencies could support survivors more by assisting them with housing, employment and healthcare as priorities for survivors.

Statutory agencies could support survivors more by assisting them with housing, employment and healthcare as priorities for survivors.

Medaille Trust and other charities

Throughout the interviews, there were several ways in which the charity sector, and Medaille Trust specifically, could increase their provision to better support survivors beyond those in the NRM. More generally, it was said that the NRM created “cliff edges” whereby survivors had support and then had none, and the MOP was placed perfectly to be that “wrap around care service” and to soften the cliff edges of the process.

Increase current provision

There were several suggestions that MOP are currently doing but could increase provision to better support survivors.

a. Increase the visibility of the work of MOP amongst statutory agencies in particular localities

There were different levels of awareness of MOP hubs amongst statutory agents. It would be important for team leaders to ensure that their hub is more known in the community, but especially amongst statutory agencies.

Statutory agencies working directly with a MOP hub were supportive of their work especially their flexibility compared with other organisations. One council worker said,

“Myself and the Moving On Project have a very positive relationship ...They’re one of the key pre NRM referral routes, definitely. And actually, they’re one of those services that is super flexible... Because, you know, especially if I’m struggling to find a service where somebody fits in, some third sector organizations can be very rigid about what criteria they they have and who they want to support, and I don’t think Medaille and the Moving On Project are one of those services so that I really value that”.⁸⁰

Similarly an ex-police officer who has previously worked with Medaille Trust said,

“I think closer working with NGOs in particular, you know, I know this projects, the projects you’re doing with Medaille...it takes a bit of the pain away from policing, potentially in terms of a bit more of a

80 Participant interview 21

joined up approach, have helped”.⁸¹

In light of this positive feedback, MOP staff should try to engage more with statutory agencies, to work more collaboratively. A case worker said, “I think it’s definitely following up more with the statutory agencies and sort of increasing our advocacy”.⁸²

However, a police officer cautioned that policing should not lean too heavily on the charity sector because police forces themselves have a legal obligation. He said,

“I think there is a risk that almost the police will start relying on the charity sector to do the operational work. I think there’s then a risk that the charity sector will start driving policing”.⁸³

Ultimately, policing should be supported by charities; charities should not be doing the work of policing.

b. More staff, more volunteers

MOP staff recognised the limitations on resources but where possible encouraged more case workers per hub

(suggested ratio of 1 caseworker to 10 clients) and more volunteers in each hub to allow for more one-to-one support and activities. One caseworker explained,

“I feel like I could say more caseworkers. I feel like if we did have more, we could support them more, because it’s so limited on time, and as I said, priority goes to the one in need the most. So, I feel like we could better support them if we had a bigger team, because MOP is such a small team, there’s two of us...[a caseload of] 1 to 10 would be really good”.⁸⁴

More staff and volunteers per MOP hub were advocated also by survivors. As mentioned in previous chapters, survivors valued MOP for their personal approach and social activities both of which could be more enhanced and increased if there were more staff and volunteers. Numerous survivors shared their gratitude for the personal approach of the case workers and volunteers and their ability to stay in regular contact with them and support them emotionally above all else. It was also acknowledged that timeframes were flexible at

⁸¹ Participant interview 24

⁸² Participant interview 5

⁸³ Participant interview 29

⁸⁴ Participant interview 3

MOP, and this was appreciated by the survivors. Equally, the numerous social activities provided by MOP was appreciated by the survivors and felt counteractive to feelings of despair in the NRM system. With more staff and volunteers both the personal approach and the social activities could be strengthened.

One area of growth identified by a couple of interviewees was supporting men. Some MOP hubs have begun to support men, whilst others only support women. A case worker identified this gap saying,

“We’re really eager to expand, and we really would like to support men. We’ve had feedback from some of our partnerships that they would also like us to start supporting men, but just because our team is way too small at the moment and we don’t have that capacity.”⁸⁵

c. More connections between MOP hubs

A couple of case workers desired better connection amongst MOP hubs in order to share knowledge and best practice. Doing so, they felt, would improve internal systems and, in the end, produce better support for the

⁸⁵ Participant interview 5

⁸⁶ Participant interview 10

survivors. One case worker stated,

“maybe more meetings regarding us and the other hubs to discuss the challenges we’re facing and how we can all like, kind of, maybe just give our new ideas. I mean, we do do that anyway, but more I don’t know, more consistently, more in depth. Just so if one person is struggling with something, then you can, we can all just sit around or on the teams or whatever, and just discuss that...maybe we could do it every three weeks or something”.⁸⁶

Case workers desired better connection amongst MOP hubs in order to share knowledge and best practice.

Additional provision

In addition to increasing existing provision, interviewees expressed new ways in which Medaille (and the charity sector more broadly) could better support survivors outside the NRM.

a. In-house counsellor services

Several staff members and survivors expressed a desire for easier access to specialised mental health therapists and counsellors to support survivors' trauma. It was suggested that MOP could have an in-house counselling service instead of relying on services provided by the NHS. Such a service would need to offer more frequent sessions per hub, be specifically modern slavery trauma informed, and be in the languages of survivors (ideally not through interpreters).

When asked what they could do to support survivors more, one case worker said,

“a counselling service for them, counselling because, I mean, they can apply on the NHS, but it's very long waiting hours again... It would be easier then to get an interpreter if you need it, or on hand”.⁸⁷

Another case worker articulated the same but emphasised that all survivors deserve mental health support. She said,

“I think maybe providing some sort of mental health support for victims who some people just don't even want to go in the NRM, but just want that mental health support. PTSD come in different forms, and people need different therapies. So that might be expensive in terms of the funding, but maybe just like a general counsellor, yes, so they can still open up to someone who is trained, of course, but if you know, there is, like, specialists, therapists and stuff that'll be good as well”.⁸⁸

b. Safe houses/temporary accommodation

Whilst the Medaille Trust operate safe houses in specific areas, there was a suggestion whether MOP specifically could have better access to temporary accommodation or a safe house for emergency circumstances. One case worker said,

“it would be great if we could give service users backup accommodation because we also have some service users where they're in a situation where they have no recourse to public funds. And

⁸⁷ Participant interview 4

⁸⁸ Participant interview 10

MOP staff have expertise that could benefit other first responders

with no recourse to public funds because they're then stuck".⁸⁹

Another echoed this suggestion, saying,

"if there was a safe house here, it would be a support that the victim could have from rescue or escape and then up to an NRM decision. You know, they would be supported by Medaille and then getting into the NRM".⁹⁰

c. External training for first responders

It appears that MOP staff have expertise that could benefit first responders in the police, local councils and other statutory agencies. A few staff members explained that they had been asked by statutory agencies and others in the sector to run modern slavery awareness

I think there was some talk potentially, of the safe houses accepting service users

raising sessions to universities, statutory agencies, and community groups. One case worker stated,

"We're doing NRM training and awareness talks to universities, especially within social work, to the new frontline workers, and I think that can hopefully lessen the sort of disconnect when it comes to awareness raising and interacting with potential victims of modern slavery".⁹¹

It would be worth exploring ways in which MOP could offer paid training on modern slavery more broadly, and how to complete the NRM form more specifically, because Medaille have good results. According to internal data from Medaille Trust, for the year ending 2023 they had an over 90% positive RG rates for the NRMs they submitted, and they averaged around 40-50 completions per year. One of the local coordinators said,

"We are excellent first responders, and we get really high results from our referrals into the NRM, so we know what we're doing. And there are organizations out there who are first responders and have training budgets, and I'm saying, let's

⁸⁹ Participant interview 8

⁹⁰ Participant interview 9

⁹¹ Participant interview 5

create a training course for other first responders, and they could pay us out of their budget, and we'll go in and would, and would train them on how to do good ones".⁹²

d. Internal database of resources

Some staff members shared that they would benefit from the creation of an internal list or database of resources. This resource could include activities and services available for survivors of modern slavery which could be shared amongst MOP caseworkers providing a more systematic approach. One case worker stated,

"I think we should work on compiling, a list of resources, even for caseworkers to refer to when they need for different clients. And I think to have a general database where all the caseworkers could go in and say, okay, immigration issues, what we can do, okay, council housing and different boroughs...but just to have like, a main, yeah, source of information, I guess that would help us scour the internet for little bits of information. Just

to have it all centralized".⁹³

e. In-house immigration and housing solicitors

Due to the limited availability of legal aid, the idea of an in-house or partnered solicitor specifically for MOP was encouraged by multiple staff members. An immigration solicitor and a housing solicitor was particularly identified given the challenges survivors are currently facing. Such an in-house solicitor would, it was argued, speed up processes. Case workers and local coordinators both said,

"we would definitely love to have either an in-house immigration solicitor or an external one, where they could assess our cases and hopefully represent some of our clients. Because the legal aid has been a really difficult barrier to the sort of support that we can provide the clients".⁹⁴

"I guess I mean, and this is really big dream, but I would love sometimes for us to be able to fund solicitors, because the legal aid situation is so dire, I would love if there was funding to be able to pay

⁹² Participant interview 7

⁹³ Participant interview 6

⁹⁴ Participant interview 5

for certain applications or pay for someone to do the appeal paperwork and put the appeal in, that would be wonderful”.⁹⁵

f. Financial support

Whilst MOP hubs have a small amount of money available to cover transport costs of survivors to activities and other places, an emergency fund for essential items such as medicine and moving costs was identified by staff members to be beneficial to meet some unmet needs of survivors. One case worker articulated,

“Because obviously, we, we don’t finance, we can’t finance our clients. We can only finance their travel. And that would maximum would be like around 10 pounds. And so if we had an emergency fund, because a lot of the time, the women who are outside of the NRM, they won’t have financial needs, and a lot of the time, what we are finding, especially with our clients, they can’t access and afford their medication, and that can be really detrimental”.⁹⁶

95 Participant interview 7

96 Participant interview 5



Conclusion

Survivors of modern slavery and human trafficking in the UK should not be defined as only those that receive a positive “conclusive grounds” decision in the NRM. For many survivors, entering the NRM is not their wish, or for some they simply do not have enough evidence to receive a positive CG decision. Others were never identified as victims in the first instance. The question then really is: should the NRM system be the “test” of whether someone is a victim of modern slavery? As one statutory agent said,

“I think there’s this stigma that if you’re not in the NRM, then you’re not a genuine victim. And then there’s maybe questions about the authenticity of what they’re claiming, because, well, if you are, what’s the issue of not going into the NRM”.⁹⁷

Regardless of the official NRM status, Medaille Trust through their Moving On Project advocate that all survivors deserve support, to be treated with dignity and compassion, and to achieve this, statutory and non-statutory services must hold a victim-centred approach.

97 Participant interview 22

all survivors deserve support, to be treated with dignity and compassion, and to achieve this, statutory and non-statutory services must hold a victim-centred approach.

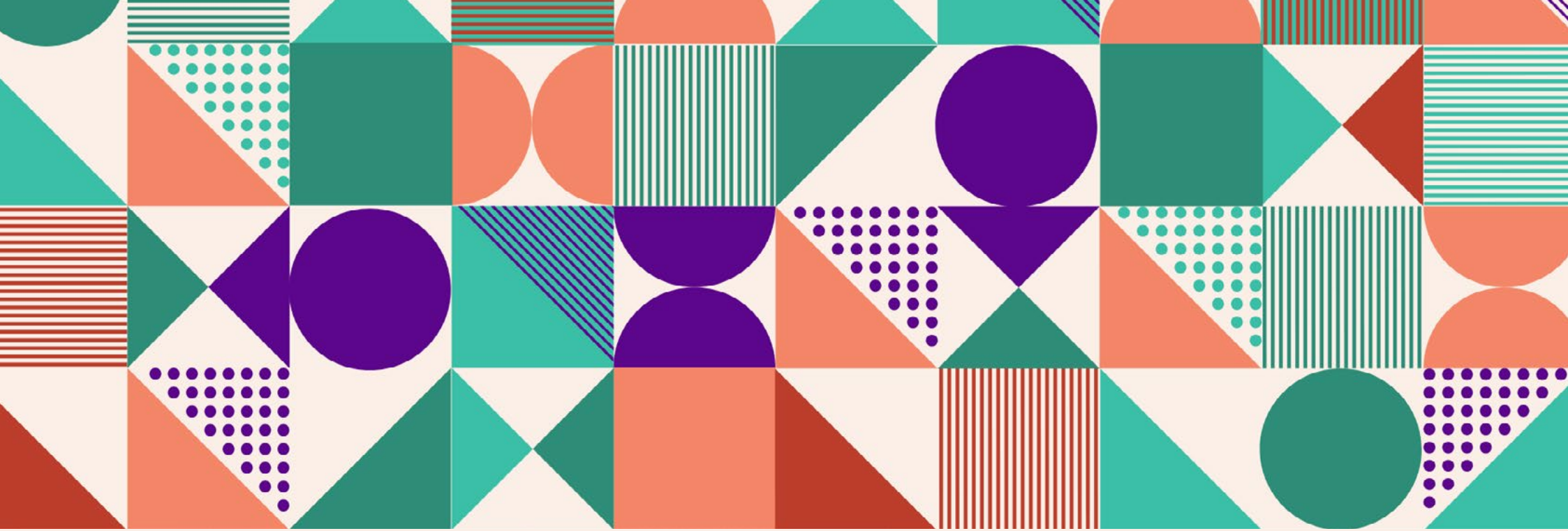
As highlighted by this report, survivors of modern slavery especially those outside the NRM face many challenges including: (1) systems challenges – poor NRM form completion, slow NRM decisions,

and ever changing NRM process; (2) wellbeing needs – isolation, feeling de-humanised, and lack of counselling support; and (3) practical challenges – access to housing, access to employment, lack of financial support, and administrative tasks.

To meet some of these challenges, as this report highlights, statutory services could increase awareness and training, explain the NRM better to survivors and increase provision for survivors. Additionally, Medaille Trust along with other charities working in the field could plug some of the gaps in current practice by increasing provision by working closer with statutory agencies, employing more staff and volunteers and connecting

better between each other. If resources permit, MOP could support survivors further by: employing an in-house counsellor, providing emergency temporary accommodation, offering training to first responders, holding an internal database of resources, employing in-house solicitors, and providing additional financial support.

Through all these suggestions, the lives of survivors of modern slavery – those in the NRM and those not – could be improved, because all victims deserve support.



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