

Cross-Party Group on Human Trafficking

20 February 2024 6.00 pm

Minute

Present

MSPs

Rhoda Grant MSP
Bill Kidd MSP

Invited guests

Dr. Maggie Grant
Dr. Maria Fotopolou

Non-MSP Group Members

Alison Raybould (Salvation Army)
Annie Wenn (MSP Katy Clark's office)
Anushya Kulupana (The Red Cross)
Chris Murray (COSLA)
Chris White (MSP Bill Kidd's office)
Elena Kerr
Ella Higgins (UNHS)
Fionn McArdle (UNHS)
Gari Donn (UNHS)
Gemma Corbett (MSP Rhoda Grant's office)
Iris Aliska (UNHS)
Laura Nacyte (Women's Support Project)
Janice Wilson
Joy Gillespie (SOHTIS)
Karen Murdarasi (Restore Glasgow)
Nadia Al-Haddad (University of Dundee)
Sheila Miller
Steve Rawbone (The SWC)
Susan McKellar

Apologies

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Adopt Minutes of the previous meeting

Accepted.

Presentation

Note - medical student researcher is present: Nadia Al-Haddad

No objections were received at the time. Opportunity for minutes to be amended to remove comments upon request was presented.

Presentation on the findings of the research project: Survivor-informed support for trafficked children - examining sustainable support for trafficked children.

Dr. Maggie Grant (MG) and Dr. Maria Fotopolou (MF) from the University of Stirling

Introducing the research project

MG: The research aimed to extend the timeframe in which we understand young people's experiences with trafficking and finding long term perspectives on the issue. Guardianship Scotland helped recruit participants. We wanted to recruit young people who had been in Scotland for longer periods of time, and less involved in day to day youth work. We are an interdisciplinary research group, and the research was funded by the Policy and Evidence Centre for Human Trafficking.

We focused on factors of recovery. The concept has not been clearly defined and is often used in an interchangeable manner across legal and policy documents. In Scotland, the trend of victim referrals is different to the rest of the UK, as most referees are not British nationals.

Guardianship Scotland works with unaccompanied children, including those who have experienced trafficking.

We had to consider the multilevel policy system of devolved competencies across the UK, where responsibility of safeguarding and care lies in Scotland, whereas immigration and asylum belongs to the UK government. There are also local and regional considerations of health and social care. These children are care experienced children. This is the context of the research.

Methodology

MF: The objectives of the research required a mixed method approach. We wanted to map out the children's care journeys, and also evaluate the support system. We analysed 11-years of data from Guardianship Scotland. First step in analysing the data was removing children that were not trafficked, those awaiting positive decisions on trafficking and those who received negative decisions. This left us with 166 young people.

As said, we also wanted to understand the road to recovery, and what recovery means for both children and care professionals. For this, we conducted qualitative interviews with 19 young people, and 12 professionals including Guardians, lawyers and social workers. We recruited participants first through inviting both short and long term residents in Scotland, but many of those who had consented to be contacted, later retracted from the investigation. This retreat was a finding in itself, since it highlighted the burden of having the recount experiences repeatedly to various professionals.

Analysis of data showed many characteristics of the young people. 63% identified as male, and 37% as female. 16 was the average referral age, of which the minimum being 11, and maximum being 17. 28 individuals had been age disputed during their time at the guardianship. The majority of children were from Vietnam, and this predominance has been well documented in the past 7 years. These trends change; past research has highlighted the vulnerability of Roma children for trafficking. Majority of children reside in Glasgow, followed by Edinburgh. It could be suggested that the services offered are quite limited outside the city areas.

Cannabis cultivation and labour exploitation were the most prevalent forms of exploitation (both 33%), followed by sexual exploitation (16%) and domestic servitude (5%), and finally intention to exploit (3%). Children are exposed to multiple forms of exploitation and the situation is fluid; data minimises the reality.

MG: We were interested in where the young people were living. Especially valuable for children was day to day support in accommodation. In line with previous research, the support offered by the Guardianship was extremely valued. Only 2% of the children were involved with the Allies, a mental health service. We believe the data is underrepresented. The majority of children had conversations of trafficking and exploitation, as well as of the national referral mechanism.

Nearly 60% of children had either applied or studied in a college or university post age 16, usually with EOSL. Children struggled with waiting for a college place or having too few contact hours with the EOSL.

In terms of mental health support, as said we might have underrepresented data since the Guardianship is not the only party referring children to mental health services. Children reported anxiety, issues with sleep and depression, and many expressed difficulties eating. 10% of these children had been referred to a GP or a psychologist. Children especially had positive experiences gaining support to perform daily tasks, such as buying public transportation tickets.

Findings

MF: Now we would like to focus on critical juncture moments that critically shaped the children's experience of support. These varied but there were main things. This included safety in their everyday lives, stability, having trust, feeling positively or negatively about the future, and gaining their immigration status. These experiences ensure young people can move on and plan their futures. Young people feel frozen in time until their immigration status is confirmed. This system is a critical part of their recovery, and we can talk about "system trauma" when this system prevents children from feeling safe. It can take away a sense of control and agency, which is essential for these young people.

Having choice was often described as a positive experience, and tied to a positive and trusting relationship with a professional, where they feel their views and choices are taken into account. With long term settlement in Scotland, safety might be the first priority in these young people's lives. For example, one young person said that in the beginning of being placed to accommodation, safety was the priority, whereas the children were encouraged to become more independent after that was established. For choice, location and resources were the strongest constraint. But in general after establishing trusting relationships with their carers and other professionals, choice and empowerment followed, and their importance was also acknowledged by practitioners as good practice.

MG: These are some of the factors that contributed to good recovery, and next we have outlined some factors that describe recovery as an experience.

- A long (even life long) process
- Being able and feeling confident to make and voice choices
- Increased sense of control; the ability to think about the future and make plans
- Acknowledging exploitative experiences

One young person said that recovery is a long, slow process, it involves other people, and is extremely important for mental health and emotional support. From the accounts of young people, a definition of recovery had four elements:

- Safety
- Community

- Identity
- Autonomy

Safety is a prerequisite for recovery, and goes beyond physical security, Community means support from others and a sense of belonging. Identity was not important only for having a strong sense of self as a survivor, but also for gaining a sense of self as a young person. Autonomy fed back to gaining agency, choice and empowerment through independence.

Policy and Practice Implications

- A child protection framework of support and processes must take priority over national referral mechanism referrals. Unaccompanied children are care experienced children, and therefore entitled to support as care leavers.
- The Home Office must ensure that decision making processes are timely. Immigration status is crucial in allowing young people to make plans and organise their lives. Ensuring decision making is timely is imperative for recovery.
- The Scottish Government and other funding bodies need to ensure that services are properly resourced to provide adequate and appropriate levels of support.
- Continuity and consistency are vital in establishing trusting relationships as a precondition for recovery. The Scottish model of guardianship support for all separated children, regardless of NRM decisions, combined with provision of support post-18 for care experienced children, provides this.
- Clear collaborative objectives that over-ride the organisational priorities of any one agency need to be reinforced.
- Young people require support – including education, financial, accommodation and mental health support - that goes beyond specific services related to trafficking in order to meet their longer-term needs and support longer-term recovery.
- All statutory and non-statutory bodies working with separated and trafficked children need to ensure that the focus remains on children's needs rather than particular national groups.
- The on-going criminalisation of young people requires further exploration as it can have significant impact on processes of recovery for children and young people who have experienced trafficking. This is likely to be even more important now under the potential provisions of the Illegal Migration Act to criminalise the mode of arrival.

Post Presentation Questions

Question 1 (Bill Kidd MSP): Can and does the Scottish government's resources and authorities work effectively with the UK's services in terms of supporting children who are accessing help?

Answer (Dr. Maggie Grant): A core aspect of guardians' and social worker's goals is to help young people navigate the complex systems and make sure they don't miss out on any care and support opportunities.

Question 2 - (Laura): Were gender-specific needs identified and recommendations for service provision?

Answer (Dr. Maggie Grant): Less gender-specific, the more overarching themes were shared experiences, such as loneliness and the importance of community. One notable gendered axis was personal safety, related to the types of exploitation experienced; young women in particular were concerned for their personal safety immediately post-identification.

(Dr. Maria Fotopolou): Education was another key general response as a long term concern, and fewer gendered differences.

Question 3 (Joy Gillespie): Clarification on Question 1 – are these young people still in the guardianship services? What kind of long term support is there once the guardianship term is exited and asylum decisions have been made? Any accounting for concerns about re-trafficking after this period?

Answer (Dr. Maggie Grant): Some of the discussion group pool were older and reflecting on experiences from a few years ago, so some things will have changed since then. No examples came to mind.

(Dr. Maria Fotopolou): Positive result of the analysis was that children had not been going missing - in England and Wales, cases of this have been recorded, but Scotland's services have kept track of all of the children.

Another perspective is that exiting the support services can be a sign of recovery in itself, because they do not require it.

Question 4 (Rhoda Grant MSP): For young people caught engaging in illegal activities, are they 'treated as children' and granted relevant protections, or are they immediately put into the NRM to identify trafficking influence and asylum rights? Concern that such situations can be traumatic, and the children clearly appear to feel unsafe until they are granted the right to remain - because this takes time, are there things policy makers should be doing to make them feel safer, sooner?

Answer (Paul Rigby): Clash with NRM taking priority over child protection, and this has been the case for years. The devolved pilot scheme in Glasgow is starting to address some of these issues. Concerns that because the focus is on trafficking, the NRM has been taking priority. Child protection should be the first port of call. Once the findings of the Glasgow Pilot have been received, a better sense of progress in this shift can be determined. Looking at devolving NRM decisions back to local authorities, which might hopefully help this shift.

Question/statement 5 (Sheila Miller): 28 March is the launch of Pilot interim findings - report will not yet be signed off by all government channels.

Date of Next Meeting

10.09.2024