Providing safety to trafficked children

A report by unseen
Introduction - Purpose and aims of report

In 2013 Unseen set about addressing a gap identified in existing provision for children who have experienced trafficking.

This report documents the need for specialised services for trafficked children, the concept, development, and outcomes of Children’s Services South West (CSSW), and the challenges we encountered whilst designing, building, and running this project.

We have split the report into seven sections so it can be easily navigated.

1. **Part one** explores the current systems available and the gaps in provisions for trafficked children.

2. **Part two** outlines the processes Unseen took to develop and pilot a new model.

3. **Part three** summarises how support and care were delivered at CSSW.

4. **Part four** provides insight into the achievements of CSSW.

5. **Part five** gives an overview of the outcomes for children placed with us.

6. **Part six** outlines feedback from Ofsted, the regulation 44 visitor and the CSSW staff team.

7. **Part seven** provides learnings, challenges and recommendations for future provision.
Thanks and acknowledgements

The charity Unseen has written this report. It is independent of the Home Office and any opinions expressed in this report do not necessarily represent the official views of the British Government or our partner agencies. The report has been issued without any formal editing by the Home Office or partner agencies.

Unseen is extremely grateful for the support it has received from the Home Office Child Trafficking Protection Fund. Without their belief, financial support and willingness to be truly innovative we would not have managed to pilot this project.

Thanks go to Unseen’s hugely dedicated and passionate staff team who cared for the children placed at the project for the duration of the pilot. All of us hoped the service would continue post the initial pilot, and Unseen knows how keenly you all supported the organisation’s vision and mission to provide safety, hope and choice to those we supported. We thank you for joining us on this journey and making a small piece of history with us. You should be proud of your involvement and participation in this project.

Special thanks go to the volunteer house parents who moved into the house to provide love and stability to the children in our care - without you, we could not have done this. Your commitment and dedication to spending a year of your life to support some of the most vulnerable children in our communities was mind-blowing to say the least!

Our thanks go to Rachel Leather, Project Researcher, for her commitment to ensuring the monitoring elements of this project were thoroughly developed and established to enable us to write this report.

We also thank the steering group for volunteering their time and expertise, assisting with the development of the monitoring framework, and sharing ideas. You were a pivotal part in helping us think through all we wanted to provide for those placed with us and how we could effectively monitor the impact of the pilot.

Our thanks also go to all those who contributed to the funding of this project. We were truly inspired by your willingness to support this pilot. You bought into our vision and then stood by us as we navigated many challenges along the way. Without you we would never have achieved the learning outlined in this report; learning that will continue to have an impact for many years to come.

Thanks go to:

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- The Casey Trust
- The Fuserna Foundation
- The Nisbet Trust
- The Rayne Foundation
- Trusthouse Charitable Foundation
Overview of Unseen

Unseen is a national UK-wide modern slavery charity with one mission: to end slavery. We seek to do this by empowering survivors, equipping stakeholders, and influencing systemic change.

- We provide direct survivor support services to men, women and children through safehouse accommodation and outreach services. We also provide free advice and support to victims, frontline professionals, and the general public via the UK’s Modern Slavery Helpline available 24/7, 365 days a year.
- We equip stakeholders through the provision of training, advice, and resources. We train around 2,000 front-line personnel per year.
- We influence systemic change by working closely with the UK and overseas governments.

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Introduction

Between December 2017 and December 2018, Unseen ran the UK’s first Ofsted registered children’s home for non-UK national children who have experienced trafficking (hereafter referred to as trafficked children). The model we developed was a completely new and innovative approach. It combined the consistency, boundaries, care and nurture of a family environment with the high levels of supervision and risk management of a registered children’s home, plus the additional security features of a safehouse, with staff trained to support trafficked children.

The project was set up as a pilot, supported by the Home Office, to evidence if we could rethink and redesign how we address the needs of trafficked children, specifically looking at reducing the number that go missing from care.

Background to the issue

The number of children identified as potential victims of trafficking and slavery in the UK is rising year on year. In 2018, 3,137 children were identified. This figure represents nearly half of the total number of National Referral Mechanism (NRM) referrals for adults and children and a 48% increase on the previous year. The most common form of exploitation experienced was forced labour (63%), followed by sexual exploitation (20%), domestic servitude (3%), and organ harvesting (1%).

In recent years, reports by government and anti-trafficking and anti-slavery sector specialists have highlighted the lack of awareness on the needs of trafficked children in the UK, but more importantly, the numbers that go missing from care that are not subsequently found.

In particular, it has been highlighted that the initial 72 hours after a child is placed in accommodation are the most crucial because it is during this time that the push and pull factors of the perceived need to return to their trafficker are strongest.

Added to this, in 2011 it was identified that there were no commonly agreed safety and protection standards across the UK for the placement of trafficked children. This inconsistency has led to reduced safeguarding for this very vulnerable group and possibly contributed to them experiencing further harm during missing episodes as it is likely they will return to their trafficker or be re-exploited.

It has been reported that between 27% and 60% of trafficked children go missing. The National Crime Agency estimates each missing person investigation costs between £1,325.44 and £2,415.80. Using the numbers of trafficked children identified in the UK in 2018 (3,137), that is, at a minimum, the equivalent of 847 (27% of 3,137) children going missing, at a cost of between £1.12 million and £2 million.
Lack of awareness and understanding

A lack of consistent and appropriate training of frontline staff including police, local authority children’s services and Emergency Duty Teams (EDT) means that identification of trafficked children is problematic, and accommodation decisions are not being made in the best interests of the child.

Even if a child is identified, there is currently a lack of appropriate accommodation available for local authorities to place them in. Existing options open to placing authorities are foster care (local authorities’ (LA) preferred placement option for trafficked children), residential care, supported accommodation, independent or semi-independent living (depending on the age of the child). However, due to the complex needs of trafficked children, some of these more independent living options are simply not suitable, and placements often break down before any kind of permanence can be reached. Also, there is a significant lack of specialist foster carers available who have been trained to care for and understand the needs of children who have experienced trafficking.

The needs of trafficked children are complex and arise for a variety of reasons. They may have left environments of poverty, discrimination, persecution or civil war. They are usually separated from their home, culture, family and friends and are having to manage the impact of their experiences and exploitation that may have occurred whilst travelling to the UK or upon arrival (or both). Added to this, traffickers are highly manipulative in their control and leave children with confused feelings and a lack of trust in adult relationships.

The cumulative effect of these experiences leads to trafficked children suffering a range of physical, psychological and emotional effects. This means that one size does not fit all where placements are concerned and placement decisions, if not made with the child’s best interests at their core, will not provide for the needs that a trafficked child has.

The need for a new model

It was clear to Unseen there was a gap in provision for trafficked children that would adequately cater to their unique and complex needs, but also keep them safe. We wanted to cater for non-UK nationals aged 13-17 because they often have even greater vulnerabilities and, historically, have received less tailored support. Unseen is aware that some in the sector have gone so far as to say they have been the subject of institutional racism and received sub-standard support because of their nationality.

We heavily researched models of care used in the UK and other countries such as the United States of America and Australia, and we talked to local authority commissioners about what their needs and challenges were for this group. We also looked at the small evidence base for what best practice looks like for non-UK national children who’ve experienced trafficking, which shows children should be assessed and placed on an individual case-by-case basis.

Out of this, we developed our model unique for the UK care system – Children’s Service South West (CSSW). We knew any service developed needed to be cost-effective and fit within existing commissioning frameworks if it was to become part of mainstream provision. We tested the concept with several peer groups and considered partnering with like-minded organisations but, in the end, it was decided that Unseen would pilot the project, with the support of the Home Office and Ofsted.

Funding was secured from several sources including the Home Office Child Trafficking Protection Fund, generous charitable trusts and foundations, and donations from individuals.
The Unseen team felt able to develop and pilot this model because of its experience and expertise in running two safehouses for adult victims for the past nine years, but also through conducting outreach work in the community with children and their families identified as potential victims of trafficking.

**The overarching project aims were to:**

1. Reduce the number of children going missing and being re-trafficked.
2. Bring together the best aspects of existing accommodation provisions to provide a safe, nurturing, home environment in which children could begin to recover.
3. Offer the specialised care and support needed by those who had experienced trafficking.
4. Increase life-chances of the children placed, so they would feel safe, have a sense of hope, and increase in confidence to make their own choices.
5. Test a model that was affordable and scalable and fitted well with existing models.

**Delivering Children’s Service South West**

The Ofsted registered children’s home operated within a family home in a residential area. It had four bedrooms, which accommodated up to three children and two volunteer live-in house parents (a married couple). The specialised care and tailored support was provided by a Registered Manager and a team of children's workers and overseen by the Responsible Individual, Regulation 44 visitor and an Ofsted Inspector. The team provided a deeply holistic approach to care and was able to respond to the unique and complex needs of trafficked children by providing tailored loving support to each child.

As a family home, CSSW provided the crucial every-day domestic life for a child alongside the additional security measures of a safehouse. It was a delicate line to tread. Trafficked children have often suffered enormous violations of their human rights and reduced freedoms, so we were keen to ensure the safety and risk management measures were reasonable and considered, and never more than necessary.

**Challenges with receiving referrals**

We were adamant that we wanted CSSW to fit within existing local authority (LA) frameworks, but before we embarked on the project we had limited knowledge of the complexities involved with commissioning. We experienced significant challenges in applying to be on frameworks (without which LA’s could not place children with us). Even once we had registered CSSW and been accepted onto placement and purchasing frameworks, the team was then overwhelmed by inappropriate referrals. Out of the 24 referrals we received in the 12 months of the pilot, only four were accepted. The low number of acceptances was for several reasons, including children showing no signs of trafficking indicators, or because they were UK nationals. It soon became apparent that there was a distinct lack of knowledge and awareness within LA teams about trafficking, and commissioning frameworks are not designed to facilitate the delivery of specialist support for this group of children.
The four children placed with CSSW

The project supported four children between May and December 2018. Three were boys and one was a girl, all were aged between 15 and 17. Their nationalities were Vietnamese, Iranian, Romanian and Afghan. Two of the children were identified as potential victims of trafficking at an airport, as part of planned police operations, one was intercepted because he was alone and concerns were raised for his well-being. One child was identified at a business premise and thought to have been trafficked from Calais.

Two of the children (both male) were subject to labour exploitation, one was trafficked for sexual exploitation (female) but was intercepted as part of a planned operation and was safeguarded from harm. The intended exploitation of the fourth child remains unknown as he was also intercepted before being exploited.

Overview of children supported at CSSW

<table>
<thead>
<tr>
<th>John*</th>
<th>Sam*</th>
<th>Sarah*</th>
<th>Nick*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>17</td>
<td>15</td>
<td>16</td>
</tr>
<tr>
<td>Nationality</td>
<td>Vietnamese</td>
<td>Iranian</td>
<td>Romanian</td>
</tr>
<tr>
<td>Entered the NRM</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Referring agency**</td>
<td>CSC</td>
<td>CSC</td>
<td>CSC</td>
</tr>
<tr>
<td>Location identified</td>
<td>Nail bar</td>
<td>Airport</td>
<td>Airport</td>
</tr>
<tr>
<td>Type of trafficking</td>
<td>Labour exploitation</td>
<td>Unknown</td>
<td>Sexual exploitation</td>
</tr>
<tr>
<td>UASC</td>
<td>Unknown</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Nights placed</td>
<td>1</td>
<td>205</td>
<td>57</td>
</tr>
<tr>
<td>Missing episodes</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

*Names have been changed to protect identities **CSC – children’s social care

Two of the children at CSSW had planned, medium-term placements in line with the project specification. One of them stayed for 205 nights, and the other for 57 nights. One of these children had been in foster care and had experienced a placement breakdown with his previous family; the other was placed with us as soon as they were identified as a potential victim of trafficking, so CSSW was their first experience of being in the UK care system.

The two other children, who were referred by Emergency Duty Teams (EDT) out of hours, were short-term placements (one day and five days respectively) and were subsequently moved on once their designated social workers were able to identify what they believed to be more appropriate provision. One was moved to independent living; the other’s next placement is unknown. Both these move-ons are believed to be because of cost constraints, even though one of the children specifically expressed a desire to stay and the CSSW team advocated for this to happen.
Critical timeframes and support given

All children were welcomed and given a welcome pack with pyjamas, slippers, underwear, toiletries and stationery because most arrived with few if any belongings. They were also offered a stock of other donated items. Once shown to their room, they were told they could make it their own and personalise it as they wished. The team welcomed them and integrated them into the house. All children chose to spend much of their time in communal areas of the house, spending time in their rooms overnight. A ‘buddy’ (a member of staff) was assigned to them to help keep them safe and help them start to build a relationship with a trusted adult.

An Initial Safeguarding Agreement was completed by the referring social worker to ensure temporary safety measures were in place for the first 72 hours. This agreement was extended if the risk of a missing episode was still considered high. This decision was taken by the child’s social worker in conjunction with the CSSW team. During the first week, a risk and needs assessment plus a support plan was put in place in conjunction with each child, so they could identify at least one thing they wanted to achieve during their stay. Children were then supported with their health (registering with a GP, dentist, optician, sexual health clinic), education (in-house lessons given in English, Maths and IT), social skills (children were encouraged to take part in cooking, shopping etc), culture (sharing experiences and observing cultural traditions), religion and identity (shown places of worship), and legal needs (help with police investigations, immigration advice and advocacy).

Evaluating the impact of CSSW

Under the direction of Unseen’s researcher and the steering group, we set up a comprehensive monitoring and evaluation system. The system comprised of internal and external monitoring tools. Some of these we designed and adapted ourselves from our work with adult victims at our safehouses, and others were industry-standard monitoring tools (such as the Behaviour, Emotional Well-being, Relationships, Risk and Indicators of Psychological Distress (BERRI) tool). Monitoring was carried out at regular intervals (at 24 hours, 72 hours, one week, one month, three months and six months), by staff members in collaboration with children where possible.

Positive outcomes for children

Due to the short-term nature of two children’s placements (one day and five days respectively), most outcome data recorded was for Sam and Sarah, simply because they were able to complete monitoring assessments at regular intervals.

Sam was recorded as being at ‘significant risk’ of sexual exploitation upon entering the service, which reduced to ‘mild risk’ at the end of his stay.

Both children’s well-being scores improved throughout their placement at CSSW, although Sam’s reduced towards the end of his placement, which alongside his BERRI data, suggests he was apprehensive about and influenced by his up-coming move to a new placement.

Both Sam and Sarah showed increased resilience between entering and exiting the home. Sam also reported feeling more hopeful about his future at the end of his placement and his coping score showed consistent improvement in how able he felt to cope with his emotions, problems, and challenges. He did, however, feel his choices had declined during this time. This was linked to his feelings of frustration.
Case study

15-year-old Sam was from Iran. He was found at an airport and safeguarded by the authorities before being placed in foster care. This placement broke down and he was referred to CSSW. Nothing is known about his life before he was found.

Sam spent seven months at CSSW, where he thrived – building his confidence and forming a strong bond with the house parents and the support staff. He enjoyed house activities like arts and crafts, film nights and outings to the countryside, as well as learning English. He is now safely settled into a new foster home and enjoying continuing his schooling. Sam was one of four children supported at CSSW, none of whom, crucially, went missing.

Sam’s feelings of safety, hope, choice, coping and resilience

‘Children with distinct cultural needs can be at risk of institutional discrimination with childcare and education. The useful learning experience from this pilot will hopefully contribute to a wider understanding of the needs of this group of children and young people’

Regulation 44 Visitor
over decisions made about his care by his social worker – relating to going out alone, spending money unsupervised, his access to education and the time it took for him to move-on. By the time his placement was transitioning towards an ending, he told staff, “I’m coping well and if something is bothering me, I tell staff. I feel really happy about the future and changes that will be happening.”

The CSSW’s exit questionnaire involved 21 questions and children were asked to score their experiences from 1-5, with 1 being low and 5 being high. Out of a possible score of 105, Sam and Sarah recorded a score of 93. Both children reported greatly improved sleep while at the house. Sarah said:

“You helped me have a doctor, dentist, optician, improve English, be safe in the house and lots of different activities like cooking. I found the language challenging when I arrived, however, my English is getting better now because I’m studying it’

### Project outcomes achieved

<table>
<thead>
<tr>
<th>Aim:</th>
<th>Outcome:</th>
<th>Achieved:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduce the number of trafficked children that go missing.</td>
<td>Achieved</td>
<td>100%</td>
</tr>
<tr>
<td>100% of children offered culturally specific support.</td>
<td>Achieved</td>
<td>100%</td>
</tr>
<tr>
<td>65% of children to engage with house parents and wider staff team.</td>
<td>Achieved and exceeded</td>
<td>100%</td>
</tr>
<tr>
<td>100% of children offered skills sessions – e.g. personal safety, maintaining well-being.</td>
<td>Achieved</td>
<td>100%</td>
</tr>
<tr>
<td>65% engage with psychological or therapeutic support.</td>
<td>Achieved and exceeded</td>
<td>100%</td>
</tr>
<tr>
<td>100% of children’s support plans to include external agency input.</td>
<td>Achieved</td>
<td>100%</td>
</tr>
</tbody>
</table>

### Conclusions

The overarching success of this project was that none of the children experienced any missing episodes.

In addition to this, there were no serious or notifiable incidents, including no incidents of violence, physical or verbal aggression, self-harm, drug or alcohol use. No behaviour management strategies were implemented, no sanctions imposed, and no physical restraint used. Successful transitions occurred into less intensive placements, showing that the children’s needs and risk had significantly reduced during their time in at CSSW.
‘There is a clear need for interventions that work to keep children safe. Far too many children disappear really quickly. The project identified an unmet need and came up with a solution’

Member of the Steering Group.

Another success of CSSW was the children’s experience at the home, the improvements achieved in their well-being and resilience, and what they felt about the care they received. The combination of volunteers and staff at the project was another strength and the Regulation 44 Visitor commented that the willingness of the volunteers to give their time was a positive and powerful role model for the children to observe.

‘The project was carefully thought about in terms of set up and planning. The people who helped set up the house were passionately involved. It was a well-conceived approach’

Member of the Steering Group.

Everyone involved in CSSW wished the project had continued beyond the pilot stage. However, the ongoing lack of referrals and the suitability of referrals from LA children’s social care teams meant Unseen had to take the painful but prudent step of closing it.

For there to be any successful children’s service available for non-UK national trafficked children in the UK, there needs to be a fundamental shift in the approach to service commissioning. Social work teams need to be trained to spot trafficking indicators and understand the complex needs of children who’ve suffered this kind of exploitation. Unseen accepts that we are operating in a period of austerity, but LAs need to have a range of specialised accommodation options available to them so that decisions can be made with the best interests of the children at their heart, rather than cost constraints.

As a pilot, CSSW was demonstrably successful for the children accommodated there.

While too few children were placed and supported at CSSW to say with certainty that it is a model that would be an effective solution for other trafficked children, we fundamentally believe that CSSW is a robust and successful model that can and did meet the needs of non-UK national children who had experienced trafficking and been identified in the UK. The children referred to CSSW were kept safe and helped to move forward with their lives. There is every indication that it would sit well alongside current provisions, such as foster care, for the children at highest risk, with the most complex needs or the most challenging presentation.
The results for those four children were standout

Member of the Steering Group.

Instead of waiting for placements to fail and children to be put at risk of re-exploitation, Unseen argues that adopting a preventative approach would offer both financial and practical benefits – to the children involved and the public purse. Referring back to 2018 figures for trafficked children identified in the UK, if 27% of them were to go missing (a minimum percentage that studies suggest), then the cost to the public purse would be £1.12million. For the same cost, 847 trafficked children could be safely accommodated at a specialist service like CSSW, crucially for the first 72-hour period when they are considered highly vulnerable, and given the opportunity to create tailored building blocks for a positive future.

However, if the UK is to successfully safeguard trafficked children, provide them with a pathway to a better life in the future and understand their needs from their perspective, there also needs to be significant changes in the systems that identify, place, assess and support this cohort of children. Commissioning needs to be open, accessible and flexible and not based around cost. Ultimately, there need to be agreed standards of care for this cohort who are some of the most vulnerable children in our society.

Our overarching recommendations centre around five core themes:

1. Trafficked children have specific needs, and specialised services tailored to prevent missing episodes, particularly in the first 72 hours, should be available to them.

2. Training on trafficking and appropriate placements for trafficked children should be provided to relevant statutory agencies, especially local authority commissioning and placing teams.

3. The best interests of the child should be at the centre of all referral decisions, irrespective of initial cost implications.

4. Specialised residential support services for this cohort of children should be centrally developed, commissioned, mandated and part-funded on a per-region basis. At a minimum this service should be considered for the first 72 hours post identification.

5. Utilising police orders to protect trafficked children as standard practice must be considered.

We hope that these recommendations will be used to inform the development of new services and the improvement of supporting infrastructures to ensure trafficked children get access to the care and support they need.

The full list of the 34 recommendations can be seen at the end of this report.
Part 1

The current system and gaps in provision
The issue of supporting trafficked children in the UK

Context and History

Over the years various reports have been written and guidance produced identifying the issues with placing and supporting trafficked children. A 2009 Home Affairs Select Committee report on human trafficking raised concerns about suspected child victims in local authority care going missing never to be found. Research conducted by the Child Exploitation & Online Protection (CEOP) centre confirmed that the number of child victims of trafficking who go missing from local authority care was significant. Further reports Cause for Concern and Missing Out: A Study of Child Trafficking in the North-West, North-East and West Midlands both revealed issues in the placement and care of trafficked children, including inconsistent care standards and accommodation and large percentages of missing children. In 2011, it was identified that there were no commonly agreed safety and protection standards across the UK for the placement of trafficked children and that this inconsistency allowed safeguarding issues to be side-lined and, in some instances, cast aside, leading to further harm to children.

In 2011, Barnardo’s received funding to run a two-year Safe Accommodation Project. The Safe Accommodation Project piloted the use of specialist foster placements for young people at risk, or victims of sexual exploitation and/or trafficking. It provided training to foster carers and associated professionals, and one to one support to children in other care settings.

Via this project, specialist foster placements were provided for thirteen children aged between 13 and 17. Four of these children were identified as having been trafficked into the UK. The remaining children were considered at risk of sexual exploitation. Eleven were at substantial risk of sexual exploitation.


3 Child Exploitation & Online Protection Centre. CEOP. 2010. Strategic Threat Assessment, Child Trafficking in the UK.


7 The Safe Accommodation Project had three core aims: a) to improve front-line practice through flexible, sensitive intervention with children at high risk; b) to build capacity/expertise within the sector so that responses are better informed and sustainably improved; and c) to keep children safe from harm.

8 For the purposes of Barnardo’s Safe Accommodation Project CSE and trafficking were classified separately.
trafficking. Seven placements decreased the risk of children going missing or the children went missing rarely, in five placements children continued to go missing, and one placement increased the frequency of missing episodes\(^9\).

The Safe Accommodation Project worked for a small number of children but a lack of carers coming forward to do it made the project problematic as far as wider roll-out was concerned.

Whilst missing episodes were reduced in some instances they were not stopped. The placements offered via this project provided children with positive relationships and appeared to be meeting a need amongst victims of sexual exploitation and/or trafficking, or those for whom this was a potential risk for. It was recommended that this model of specialist foster care should continue to be provided, and be part of the solution, drawing on the learning generated from the evaluation, to ensure that more children can benefit from specialist provisions\(^{10}\).

**Numbers of trafficked children**

In 2018, 3,137 children were referred into the National Referral Mechanism (NRM)\(^{11}\), the government’s system for identifying and supporting potential victims of trafficking and modern slavery. This figure represents nearly half of the total number of NRM referrals for adults and children. Referrals for children showed a 48% increase between 2017 and 2018. Children identified in the UK were exploited for labour exploitation (63%), sexual exploitation (20%), domestic servitude (3%), and organ harvesting (1%)\(^{12}\). However, evidence suggests that children are rarely trafficked for a single type of exploitation and are subject to multiple instances of abuse during their trafficking experience\(^{13}\). Although statistics (at the time of writing this report) are not yet publicly available for 2019, previous reports show that 63% of all minors referred into the NRM are aged between 15-17.

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\(^9\) Two of the trafficked children has previously been in placements for 11 and 15 months respectively.

\(^{10}\) Shuker, L. 2013. Evaluation of Barnardo’s Safe Accommodation Project for Sexually Exploited and Trafficked Young People. University of Bedfordshire, Luton. Available at: [https://www.beds.ac.uk/media/85055/barnardos27s-sa-project-evaluation-full-report.pdf](https://www.beds.ac.uk/media/85055/barnardos27s-sa-project-evaluation-full-report.pdf)


\(^{12}\) For 13% of children referred to the NRM the type of exploitation was unknown (NCA, 2019, p.19)

Vulnerability of trafficked children

Traffickers are recognised to be highly persistent and intelligent in their attempts to take children back after they have been placed in Local Authority care, evidenced by the high numbers that go missing\(^{14}\). Traffickers may coerce children into leaving safe care (e.g. through threats to families, debt bondage, juju curses), which can create the impression of a young person leaving a placement voluntarily\(^{15}\). Consequently, the Department for Education (DfE) guidance states that ‘in all cases there is a likelihood that a child victim of trafficking is at risk of serious immediate harm\(^{16}\).

Children who have been trafficked have often faced adverse childhood experiences in their country of origin leaving them vulnerable to trafficking in the first place. They may have left environments of poverty, discrimination, persecution or international or civil war. They are usually separated from their home, culture, family and friends, and are having to manage the impact of their experiences en-route to, and within, the UK\(^{17}\).

This vulnerability is compounded by the multi-faceted trauma of trafficking itself – for example, long and arduous journeys, forced removal from family and physical and/or sexual abuse during exploitation.

There are also barriers to accessing support in the country of destination - for example, language, lack of support networks, physical restrictions imposed during exploitation, lack of trust in professionals borne from corruption in the country of origin, and lack of knowledge about support systems available in the UK. These factors result in highly complex needs.

Separated children in the UK report suffering from anxiety, stress, isolation, loneliness, disturbed sleep, headaches, eating difficulties, panic attacks and depression\(^{18}\). For those who have also been trafficked, there is significant additional stress of having been abused and neglected for lengthy periods. Traffickers are known to exert physical, monetary, emotional, and/or psychological control in their deception and coercion of child victims; often leaving them with complex and confusing feelings and relationships with the adults who have abused them\(^{19}\). The cumulative effect of these traumatic experiences means that many trafficked children will suffer a range of physical, psychological, and emotional effects\(^{20}\).

Accommodation for trafficked children needs to take account of the elevated level of support and care they need. This involves consideration of the immediate threat of children being abducted by, or going missing to re-join, traffickers\(^{21}\).

The risk of trafficked children being placed in unsuitable and unsafe accommodation (including bed and breakfast or mixed hostel accommodation) is much higher when professionals are unable to identify

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\(^{16}\) Department for Education. 2011. p.16


\(^{18}\) Chase, E., Knight, A and Statham, J. 2008. Promoting the Emotional Wellbeing and Mental Health of Unaccompanied Young People Seeking Asylum in the UK (Research Summary) London: Thomas Coram Research Unit, Institute of Education

\(^{19}\) Pearce. 2013. p.20


\(^{21}\) Shuker. 2013. p.19
their vulnerabilities, and we know that awareness of trafficking remains low among social workers. Those placed in such accommodation are far more vulnerable to being contacted by traffickers and are often isolated from the practical and emotional support they need.

### Support needs of trafficked children

There has been a wealth of research concerning what should constitute effective support for trafficked children, however this best practice advice is not always adhered to.

The trafficking of children is recognised as child abuse in international law. The United Nations and Council of Europe propose that the vulnerability of all unaccompanied asylum-seeking children (UASC)/trafficked children should be assessed within a child protection framework.

In the UK, it is the responsibility of LA social service departments to deliver the appropriate care, support and accommodation required for all children that need protection. This means they are the primary support agency for trafficked children. A range of international conventions adopted by England and Wales provide trafficked children with the right to safe and appropriate accommodation. In England and Wales, trafficked children should be accommodated under Section 20 of the Children’s Act. This transposes onto the local authority a range of legal responsibilities and duties about the care of a child.

The challenges of meeting the needs of children with complex difficulties in care are frequently discussed in published literature. Preventing placement breakdown and achieving permanence, providing therapeutic parenting and support for children with attachment difficulties, protecting children from the risk of sexual exploitation, going missing, self-harm and drug and alcohol misuse are all identified as considerations with placements for this group of children.

The most important aspects of care for children who have experienced trafficking are:

- support with boundaries and trust issues
- stability
- a sense of belonging and family

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22 Pearce. 2009. p.20
26 Government Guidance. p.18
27 Section 20 of the Children Act 1989 provides the local authority with the power to provide accommodation for children without a court order when they do not have somewhere suitable to live. It is widely known as voluntary accommodation because the parents must agree to the child being accommodated. http://www.legislation.gov.uk/ukpga/1989/41/section/20
The complex psychological needs of children who have experienced trafficking are likely to include:

- Trauma associated with experiencing substantial harm.
- Depression, hopelessness, guilt, shame, and low self-esteem.
- Problems forming relationships: withdrawal, attachment difficulties, mistrust\(^{29}\).
- Behaviour problems: aggression, self-harm, drug and alcohol use, sexualised behaviour\(^{30}\).

Trafficked children must have access to effective:

- mental health support
- therapeutic services
- legal support
- community support, including links to relevant cultural groups
- education
- healthcare
- interpreters with safeguarding checks
- social workers
- peer support and social integration\(^{31}\)


\(^{30}\) Ibid.

In consultation with staff working with children who have been trafficked, the most important qualities of carers are:\(^{32}\):

- flexible
- organised
- predictable
- open to learning
- knowledgeable regarding social media (due to risk of re-trafficking)
- able to recognise inappropriate behaviours
- non-judgemental of other cultures

The problem of children going missing

There is no accurate data or breakdown of why children go missing recorded in national statistics. The data that is available produces an inconsistent picture but certainly indicates that trafficked children do go missing from care and that professionals do not understand the push and pull factors driving this, nor do they have solutions for how to prevent and safeguard against this risk.

In order to prevent missing episodes, we first need to understand why children go missing and design placements to counter push and pull factors.

One report relating to missing incidents from foster placements suggests a range of reasons children may go missing, including making or avoiding contact with family and friends (53%). Sexual exploitation is also a risk factor for children going missing from placement and it is thought to account for 4% of missing episodes. The report states for 38% of children the reason for their missing episode remains unknown, this could be because of a lack of ‘return home interviews’ being completed, or the child not being relocated\(^{33}\).

Reasons trafficked children go missing

A 2016 study of trafficked and unaccompanied children going missing from care in the UK included an online survey completed by professionals who were working with – or might encounter – trafficked, unaccompanied, or separated children\(^{34}\).

\(^{32}\) Chester. 2015. p.21

\(^{33}\) Children who go missing are supposed to have a return home interview (conducted by a social worker) to gain information about their period of missing, yet only 57% had these completed.

The answers submitted to the survey gave the following reasons for trafficked and unaccompanied children going missing:

- Not identified by professionals as a potential victim of trafficking.
- Traffickers’ control or influence on the children.
- Inappropriate accommodation placements and other protection measures (lack of focus on relationships, wellbeing, safety planning and protective factors to reduce the likelihood of children going missing).
- Carers who are not trained to understand the experiences and risks faced by children who have been victims of modern slavery or how best to support them to remain in a placement.
- Children’s lack of trust, connection, and consistent support from a trusted individual.
- Professionals not being trained to understand children’s experiences and needs.
- Lack of consistent support from a trusted/specialist individual.
- Children feeling isolated and not engaging with school and social networks.
- Uncertain immigration status and concerns around this, fear of not being believed and potentially being removed from the UK, as well as stressful procedures such as age assessments and official interviews.
- Being criminalised, for example arrested or prosecuted.35

**Numbers of children in care going missing**

From the limited data available, trafficked children in local authority care are two to six times more likely to go missing than all looked after children (LAC). As a cohort, they are also more likely to go missing from foster care than alternative placements, in contrast with other LAC who are more likely to go missing from secure units, children’s homes or semi-independent placements.

There are 75,420 looked after children in care in England.36 Government statistics state 11,530 (11%) of LAC in England had a missing incident in 2017/18.37 A missing incident means that a child is not at their placement, where they are expected to be, or that their whereabouts is unknown. In total there were 70,250 missing incidents, an average of 6.1 per child. 29% of missing incidents occurred from foster placements and 48% from secure units, children’s homes or semi-independent placements.

Just over half (52%) of missing incidents in the year involved LAC aged 16 or over with the remaining proportion largely being LAC aged between 10 and 15 years old.38

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37 Department for Education. 2018. p.24

38 Department for Education. 2018. p.24
Available studies on frequency of missing episodes amongst trafficked children:

- CEOP (2007)\(^{39}\) 56% (sample size of 330)
- Harris and Robinson (2007)\(^{40}\) 50%+ went missing within a week of arrival (data gathered from interviews with 120 professionals)
- Beddoe (2007)\(^{41}\) 60% (sample size of 80)
- Simon et al (2016)\(^{42}\) 28% (sample size of 590)

The percentage of trafficked children going missing varies between studies. Some have produced data that suggests the rate is around 5 to 6 out of 10 who will go missing. In their scoping study of child trafficking into the UK, CEOP (2007) estimated that 56% of the 330 known or suspected trafficked children they identified went missing and were not found\(^{43}\). Similarly, Harris and Robinson (2007) found that over half of the children suspected of having been trafficked in their sample went missing within a week of arrival\(^{44}\), and Beddoe (2007) reported that of 80 suspected child trafficking victims identified across three regions, 60% went missing from care and were never found\(^{45}\).

Other studies have set the number lower, with around two to three trafficked children going missing out of every ten in local authority care. The National Society for the Prevention of Cruelty to Children (NSPCC, 2012)\(^{46}\) identified that 23% of children referred to their National Child Trafficking Advice Centre (CTAC) from 2007-2012 had gone missing at some point.

Trafficked children went missing from the following placements:

- 61 foster care
- 7 B&B/hostel/hotel
- 16 supported lodgings
- 17 living with adults whose relationship is unclear

Producing a similar rate of missing episodes, research conducted in 2016 found that more than a quarter of all trafficked children went missing from care at least once\(^{47}\). 28% (167) of the 590 children suspected

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41 Beddoe. 2007. p.18
42 Simon. 2016. p.23
43 CEOP. 2007. p.18
44 Harris. 2007. p.25
45 Beddoe. 2007. p.18
46 NSPCC. 2012. p.20
47 Simon. 2016. p.23
or identified as trafficked were recorded as missing on at least one occasion. These 167 children were spread over 39 local authority areas across the UK – and some of these children remained unaccounted for\(^{48}\).

Whilst the exact figures remain unclear, Unseen, like the authors of the 2016 report, find it concerning that the UK’s systems are failing to prevent missing episodes and properly safeguard trafficked children.

**Risk of harm**

The urgent need to prevent trafficked children going missing from a placement is due to the acute risk of harm they face whilst unaccounted for. We at Unseen believe that if a trafficked child goes missing from care and returns to a situation of exploitation, they are likely to experience further significant harm.

The risks of harm associated with going missing are well-documented in academic research and linked to where the child stays whilst missing. These include physical and sexual harm, abduction, drug and alcohol use (which are inherently risky but also increase other risks such as accidents), malnutrition, STDs, pregnancy, hypothermia, dehydration, risky behaviour, crime, begging, sexual exploitation, fear and loneliness\(^{49}\).

The risks for trafficked children who go missing are even greater. Children may be driven to seek reconnection with their trafficker, either out of fear for themselves or their families, because of control the trafficker exerts over the child (e.g. juju, perceived debt burden), because they have an attachment to the trafficker (e.g. their boyfriend recruiting them), or simply because the child knows nobody else in the UK. The risk of being re-trafficked and re-entering exploitative situations and the psychological and physical harm caused by this also needs to be considered in relation to trafficked children going missing.

The main aim of any specialist provision, therefore, must be to reduce the risk of children going missing.

**The cost of missing children**

In addition to the obvious harms caused to children during missing episodes, there is also a substantial cost implication. It is reported that a medium risk missing persons case costs between £1,325.44 and £2,415.80\(^{50}\). In 2016/17 The National Crime Agency produced a report stating missing persons incidents cost police forces between £263 million and £480 million. According to national statistics, 11,530 missing incidents involve LACs, this equates to a cost of £28 million\(^{51}\).

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\(^{48}\) From the research there were 4,744 unaccompanied children identified by 74 LA areas. 13% (593) went missing at least once from their placements. In addition, 39 LA areas reported 590 children who were trafficked or potentially trafficked. 28% (167) of these children went missing at least once. A total of 760 children went missing across these two categories, 207 (27%) and remained unaccounted for.


\(^{50}\) Shalev-Greene, K. and Pakes, F. (2012) Establishing the Cost of Missing Person Investigations (page 3).

Where placement decisions for trafficked children are made with cost implications in mind, the cost of a potential missing incident to the public sector should be included in the calculation.

Whilst the exact numbers are unclear, children continue to go missing from placements and this indicates a failure to properly safeguard and protect these children at a local and national level. While recent reports indicate that there may have been improvements in the identification of child victims of trafficking, it is also evident that there remains no comprehensive understanding of the numbers of trafficked children in the UK or those who subsequently go missing, and why.

Placements of trafficked children (in 51 local authorities)

- Foster care: 35%
- Supported Accommodation: 15%
- Supported Lodgings: 11%
- Residential Children’s Home Placement: 16%
- Shared Accommodation: 1%
- Semi-Secure Reception Unit: 22%

Placement options for trafficked children

Current placement options

As demonstrated above, trafficked children have a specific set of needs and are subject to a specific range of risks and harms. Several placements are used for trafficked children in the UK: foster care, residential care, supported accommodation, independent or semi-independent living. However, the placement type most offered to non-EEA migrant children identified as trafficked is foster care.

52 Shuker. 2013. p.19
53 Cordis Bright. 2017. p.22
Foster care

Foster care is used in most cases for potential victims under the age of 16, with exceptions only being made if specific concerns around a child’s behaviour or the complexity of their support needs means an alternative placement is needed (most commonly in a residential children’s home).  

It is reported that local authorities consider standard foster carers to be appropriate as a placement option for trafficked children. It is well-documented that preferred placements are with foster carers as they are seen to provide greater consistency, a family atmosphere, lower delinquency and behaviour problems, and cost less than other options such as residential care.

However, some local authorities have trained ‘specialist’ foster carers specifically to cater for the needs of trafficked children, which suggests that some of the needs and complexities of effectively supporting a trafficked child may not always be dealt with in a generic foster care placement.

Specialist foster care is described by researchers as best practice accommodation for trafficked children. Specialism in this context is predominantly used to mean foster carers who have received training on what constitutes trafficking and modern slavery, as well as an understanding of the experience of trafficked children or unaccompanied migrant children. In addition, they should have received training on safeguarding risks, risks of going missing, risks of becoming repeat victims and how to reduce these risks within the placement.

The recognition that generic foster placements are insufficient for trafficked children is compounded by concerns about the limited availability of suitable placements with foster carers who have received specialist training for this specific cohort. Whilst specialist foster care, in theory, may be best practice, in reality local authorities may have no guarantee of access to specialist carers for this group of children.

Consideration should also be given to the safety of the foster carers, who may not fully understand some of the vulnerabilities a trafficked child may face with mobile phone use, internet access and traffickers trying to recover the child - and the risk that this may pose to them as carers and other children in their care.

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54 Cordis Bright. 2017. p.22
55 Cordis Bright. 2017. p.22
Part 1: The current system and gaps in provision

Foster Care

<table>
<thead>
<tr>
<th>Strengths</th>
<th>Limitations</th>
</tr>
</thead>
<tbody>
<tr>
<td>A familial and homely setting, which was seen to promote children’s sense of comfort and safety.</td>
<td>Untrained foster carers may not understand trafficking and modern slavery.</td>
</tr>
<tr>
<td>A consistent provision of care by one or two carers, which reportedly provides an opportunity for children to build trust with these carers.</td>
<td>Untrained foster carers may not understand the experience of trafficked children.</td>
</tr>
<tr>
<td>An increased chance of finding a cultural match or more culturally sensitive placement within foster care when compared with other placement types.</td>
<td>Untrained foster carers unable to manage risks of a trafficked child going missing.</td>
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<tr>
<td>A small-scale nature of the placement, meaning that foster carers are more able to focus on the needs and wants of an individual child, which can sometimes be more difficult in a placement setting where there are several other children.</td>
<td>Untrained foster carers unaware of risks of traffickers to their families and other children in their care and unable to protect against the risks once understood.</td>
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</table>

This gives weight to the development of alternative options to foster placements. Whilst foster care is the preferred option due to the benefits of a familial setting, it has been proposed that other provisions, including secure placements, are appropriate and should be considered as effective on a short-term basis. There is some suggestion that the complex needs associated with trafficked children increase the risk of placement breakdown when children are placed in a foster care setting.

Residential children’s homes

Children’s homes are not used regularly for this group of children, but this placement type is an option available to local authorities for all looked after children. It is a more expensive option than foster care and other placement options and may not always be available in local areas so residential placements may cost more as they need sourcing outside of an LA area. Previous scandals at children’s homes plus their perceived institutional nature mean they are not always considered by social care professionals as appropriate or in a child’s best interest.

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60 CSJ. 2013. p.20 & Simon. 2016. p.23
Part 1: The current system and gaps in provision

Like the issue identified with generic foster placements, depending on who the residential home is run by, a children’s home may not have a comprehensive understanding of slavery and trafficking or staff trained to respond to trafficking and its associated harms.

However, there is evidence to suggest children in residential care show improved psychosocial functioning and these effects are greater for children with externalising behaviour problems (such as aggression) as opposed to internalising behaviour problems. Trafficked children are likely to exhibit both externalising and internalising behaviours, so such placements may be appropriate for this cohort.

In the UK, residential care is considered a suitable alternative for children who are extremely high risk or when other previous placements have failed. Residential placements may be physically safer than a foster placement and can include security features and staff on-site 24/7 to assist with the safeguarding risks that may present.

For placing trafficked children this does create an immediate conflict; we know that victims of trafficking face horrific violations of their freedom. However once identified they need to be effectively safeguarded.

Children in residential settings benefit from an extremely high level of consistency and supervision, which may be required for trafficked children to ensure their safety. Secure accommodation (such as a semi-secure reception centre for trafficked children) is another placement type referenced in some publications as effective provision on an immediate short-term basis.

<table>
<thead>
<tr>
<th>Children’s Homes (Residential Care)</th>
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<tbody>
<tr>
<td><strong>Strengths</strong></td>
</tr>
<tr>
<td>• Effective for high risk children and children with previous placement breakdowns.</td>
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<tr>
<td>• Secure accommodation shown to be effective in short-term.</td>
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<tr>
<td>• 24/7 staff available.</td>
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<tr>
<td>• Multiple safety features to lower risk of re-trafficking</td>
</tr>
<tr>
<td>• Evidence of improved psychosocial functioning in resident children.</td>
</tr>
<tr>
<td><strong>Limitations</strong></td>
</tr>
<tr>
<td>• Perception of institutionalisation and lack of familial environment.</td>
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<tr>
<td>• Institutional memory of scandals in residential settings.</td>
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<tr>
<td>• Local authorities reluctant to pay higher costs associated with residential placements.</td>
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<tr>
<td>• Number and location of available children’s homes.</td>
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63 Rafferty. 2008. p.22
64 Personal communication
Independent Child Trafficking Guardians (ICTGs)

As a response to supporting trafficked children (and in accordance with the Modern Slavery Act 2015 Section 48\(^{68}\)) the Government developed and piloted the model of Independent Child Trafficking Guardians (ICTG)\(^{69}\). ICTGs are an independent source of advice for trafficked children, providing one-to-one support and expertise, and support specifically around trafficking to other professionals involved in a child’s case.

Over the last two years, the model has been developed, tested and evaluated. When the pilot ended in 2019, the Home Office evaluated the model and committed to rolling it out nationally\(^{70}\). In the two years it operated, 445 children were referred to the ICTG service\(^{71}\). Children were found to have been trafficked for the purposes of criminal, sexual and labour exploitation.

Unseen believes the ICTG service adds value; building trust with children, providing important advocacy work, and providing specialist knowledge to professionals involved. Commitment to embedding the ICTG service is positive and will offer trafficked children elements of the support they need.

However, a quarter of the children referred to the service went missing at some point, and 34% did so before they were able to meet with their designated ICTG. Whilst the likelihood of going missing decreased via involvement with an ICTG, this risk began to rise again once children had been in the service for more than six months. The explanation for this trend is uncertain but may be because of fewer interactions between a child and the ICTG the longer they are in service. When the risk is

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\(^{69}\) HM Government. 2019. Briefing. Available at: https://homeofficemedia.blog.gov.uk/2019/05/22/how-the-government-is-tackling-modern-slavery/


\(^{71}\) 54% were 16 or 17 years only and 64% were male. Many of the children referred were British nationals (43%). Children from outside the EEA made up 41% of the ICTG caseload and 6% were EEA nationals (the remaining 10% were not reported).
perceived to be lower, support is lower, and the knock-on effect is that risks re-emerge. Increasing caseloads for ICTGs also may mean that focus must be on newer referrals rather than those considered more settled.

ICTG are said to have a positive impact for missing children, as they ensure partner agencies maintain their focus and attention on the children and prevent them becoming invisible to public authorities. However, the model was not able to stop them from going missing completely.\(^{72}\)

<table>
<thead>
<tr>
<th>Independent Child Trafficking Guardians(^{73})</th>
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<tbody>
<tr>
<td><strong>Strengths</strong></td>
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<tr>
<td>• Provided specialist trafficking knowledge.</td>
</tr>
<tr>
<td>• Face to face meetings allowed trust to be built and allowed ICTGs to find out what the child’s needs were in order to provide tailored advice and guidance, assess risks and conduct safeguarding.</td>
</tr>
<tr>
<td>• Social care representatives and ICTGs reported working well together.</td>
</tr>
<tr>
<td>• Stakeholders also perceived ICTGs to provide a more consistent figure of support, in contrast to the higher turnover amongst social workers.</td>
</tr>
<tr>
<td><strong>Limitations</strong></td>
</tr>
<tr>
<td>• No accommodation provision with ICTG support – children can go missing before being supported and may be inappropriately placed.</td>
</tr>
<tr>
<td>• Caseloads of ICTG becoming too large.</td>
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<tr>
<td>• When support from ICTG reduced missing episodes increased.</td>
</tr>
<tr>
<td>• Model did not stop missing episodes (before support started or during support at the post six months mark).</td>
</tr>
<tr>
<td>• The ICTG service is currently only for those aged under 18 and reaching this age is the most common reason for children exiting the Service.</td>
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</table>

72 Kohli. 2019. p. 31
73 Kohli. 2019. p. 31
Supporting trafficked children

The evidence base and published information about effective provision for trafficked children is limited, but what has been published suggests that the most important aspects of care are identified as stability, a sense of belonging and family, support with boundaries and trust.

Key positive features identified by staff working with victims of human trafficking (outside of a UK context) were:

1. Children initially placed in a therapeutic group living environment, followed by foster care to allow for a slow transition to independence.
2. Stay at home parents.
3. Resources being accessible within an agency rather than relying on community services.
4. Extensive training for teams.
5. Provision of information on a referral.

It is best practice that every child is assessed and placing decisions are made based on what is in their best interest. Placement decisions must take into consideration the needs of the child, their experiences, support required and the risk of them going missing. The anomaly with trafficked children not from the UK is that they rarely come with a case file and have no recorded interactions with statutory agencies. They have not been enrolled in schools or registered with local GP surgeries. Little is known about these children upon initial meeting and yet decisions must be made about what is in their best interest in relation to the care they are entitled to receive.

Local authorities consider the following when making a placement:

- age
- complexity of need
- levels of independence
- cultural background
- cost
- availability
- level of risk a child presents

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74 Chester. 2015. p.21
75 Ibid.
It is best practice for local authorities to select the most appropriate placement on a case by case basis. This is not easy in relation to trafficked children because practitioners need to first identify that a child may have been trafficked or is at risk of this. Self-disclosure and self-identification by a potential victim of trafficking are unusual. Due to their age and dependent status, children are especially vulnerable to physical and psychological coercion. All these reasons mean that the responsibility of identification is very much on professionals.

**Gaps in provision**

From our research we have identified three core gaps in the provision for trafficked children:

1. a lack of understanding of modern slavery and human trafficking amongst placing authorities
2. a lack of specialist provisions
3. insufficient numbers of places in specialist provisions

A 2017 report commissioned by the Home Office and Department for Education found that there was limited availability of specialist provision for migrant children identified as potential victims of trafficking and modern slavery. Concerns about ‘inconsistent’ and ‘patchy’ support provision have been raised by the Council of Europe’s Group of Experts on Action against Trafficking in Human Beings (GRETA) and international standards call for a ‘durable solution’.

Desk-based research, interviews, and work with a range of local authorities in 2017 identified the following:

- There is limited evidence within published literature of what constitutes good practice in supporting this cohort.
- Most local authorities indicated that they did not necessarily have extensive knowledge of good practice and had often worked with very few children in this cohort.
- Specialist knowledge of supporting child victims of trafficking would be likely to make placements and support more effective and reduce the incidence of victims going missing.
- Placements and services for non-EEA migrant children identified as potential victims of modern slavery are not usually specifically commissioned or designed for this cohort.

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76 Cordis Bright. 2017. p.22
78 Cordis Bright. 2017. p.22
• Placements and services are broadly selected on a case-by-case basis depending on availability.

• Foster care was identified by most of the local authority and voluntary sector stakeholders interviewed as the most effective placement type for this cohort. However, there are not enough foster carers who are knowledgeable and trained in understanding the needs of this cohort.

• There are key gaps in specialist services, including access to specialist mental health services and services to enable children to maintain contact with their culture of origin.

• Key barriers to providing placements and specialist services included the availability of specialist provision (as opposed to more generic provision for vulnerable children), as well as a lack of resources and specialist knowledge within local authorities and partner services.

• Resource pressure was thought to exist for children aged 16-17.

• Boys and young men are more frequently identified as potential victims of trafficking and modern slavery than girls and young women.

• Police were most likely to identify potential victims.

• There were issues around understanding the NRM, what it offers children and how it was to be used.

The barriers and gaps in providing placements for trafficked children are numerous and, to date, the UK does not fully understand trafficked children’s needs, nor does it have a suitable response or range of responses to cater for this cohort’s needs.

We agree with the proposed measures to strengthen the support provided to trafficked children that were subsequently given in the report:

• commissioning specialist training and services where there is evidence that this is required

• ensuring that all unaccompanied minors are risk assessed for trafficking and modern slavery

• developing specialist roles in local authorities to support victims of trafficking and modern slavery

• adopting a more regional approach to planning and commissioning placement and support

• adopting a more strategic approach when considering which children might best be supported under redistribution schemes.  

79 It is reported that some local authority stakeholders are adopting a more regional approach to the placement and support of trafficked migrant children because this is likely to result in more effective and efficient provision (Ibid. Cordis Bright). Local authorities propose that via a regional model there is greater scope to develop specialist, affordable provision and that a regional approach would take some of the burden away from individual local authorities having to provide a service for which there may not be high demand.

80 Redistribution Schemes. The National Transfer Scheme (NTS) protocol for unaccompanied asylum-seeking children was created to enable the safe transfer of unaccompanied children from one local authority to another. The transfer protocol is intended to ensure that unaccompanied children can access the services and support they need. It forms the basis of a voluntary agreement made between local authorities in England to ensure a more even distribution of unaccompanied children across local authorities.
Conclusions

Often at the initial point of interaction, little information will be known about a non-UK national child who professionals believe may have been trafficked. A child may be encountered at a port of entry, found in a place associated with exploitation, or present themselves at a local authority or police counter. They are unlikely to have been logged on UK systems, to have information on record, accessed health care or education or be known to the authorities.

One of the big challenges facing the placement of potentially trafficked children is understanding the risks they face, the support and care needs they have, the protective measures that need to be put into place, language and cultural barriers and the push and pull factors that may mean they feel pressure to return to the situation they have just left. It is important that the environment and the placement that’s offered to them allows them to begin to process what has happened to them and support them to take the steps and choices they want and need to in order to begin their journey of recovery.

Whilst local authorities state a preference for foster care, it is unclear if this is because other specialist provision is lacking in their locality or if this preference is due to cost. In a time of austerity and an increased need for services, local authorities and social care are certainly feeling the pressure to reduce costs. Cost is an unavoidable, prohibitive factor when making placement decisions. With the current, unprecedented financial pressure on local authorities, consequences for the placement and protection of trafficked children will be inevitable81.

From Unseen’s experience and the research conducted in this sector, we would question if placement decisions are being made solely on the needs of the child or if cost considerations are a bigger motivating factor – i.e. are most trafficked children placed in foster care because it is cheaper than a provision specifically designed for trafficked children? This is not to say that foster care will not be an appropriate placement for some trafficked children, but it is not appropriate for all. Placement decisions need to made on a case by case basis and decisions about appropriate placements must be made with the best interest of the child at the centre of consideration.

The published evidence base for good practice in placement and support of non-UK national children who have experienced trafficking is limited. The placement options available to local authorities under the current budgetary constraints mean that this population group of vulnerable children are not always getting access to the placements that will be able to best understand, manage and support their needs. The concept behind developing Children’s Service South West (CSSW) was to enhance the evidence base and to test some of the assumptions about safeguarding and the needs of trafficked children.

81 Personal communication
Part 2

Developing a new model
Part 2: Developing a new model

Developing a new model

Upon learning about the gaps in service provision for children identified as potential victims and guided by our experience of delivering services for adults over the past 10 years, we decided to investigate what support and care children needed and if we were in a position to provide this as an organisation. The process of research and development took us four years and multiple iterations.

When Unseen began the journey to develop and test a placement provision for trafficked children there was no Ofsted registered and no specialised accommodation and support model for children who had been trafficked into the UK. Instead, children were being predominantly placed in foster care or independent living settings. Whilst some may have been placed in residential care, this was certainly not the norm. Many were also only identified as potentially trafficked once they had gone missing.

Unseen therefore developed Children’s Service South West (CSSW), a pilot accommodation provision for non-UK national children who were thought to have been trafficked. It was established to evidence if a different approach to support would provide a viable alternative to current placement options and reduce the number of children that go missing from care.

Researching models of care

As highlighted in government guidance in 2017\(^82\), the priority when a child is identified as a potential victim of human trafficking is to initiate child protection procedures to ensure their safety and appropriate placement into care. Unseen suggests that foster care is not always an appropriate option for the highest risk children. We propose that one way of retaining the positive aspects of foster care within a group setting could be the use house parents. Children living in group homes with house parents is not currently a model used in the UK. Research from the United States of America and Australia shows that children living in residential homes with house parents report increased overall satisfaction with their placement compared to residential placements with just paid staff. Known as the Teaching-Family Model\(^83\), house parents offered greater consistency and a lower turnover of caregivers than a staff team\(^84\).

Another model describes a family-style group care model in which house parents, usually a married couple, combine with support assistants to provide intensive 24/7 care with clinical, medical, and educational supervision. This model is one of the few with scientific evidence for its effectiveness\(^85\). Such a model may overcome the risk of placement breakdown and the security risks inherent with a foster care placement for trafficked children, whilst retaining the benefits of a family environment.

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\(^{83}\) Lo, A., Roben, C. K. P., Maer, C., Fabian, K., Shauffer, C. & Dozier, M. 2015. “I want to be there when he graduates”: Foster parents show higher levels of commitment than group care providers. Children and Youth Services Review 51 95-100.


Our approach to care

Our approach to care evolved through research and consultation with experts in childcare, child psychology, and knowledge gained directly through experience working with adult and child victims of trafficking. These approaches informed every aspect of CSSW including the physical environment, staffing/voluntary arrangements, the structure of the day at the home, and the activities we promoted.

Several protective considerations emerge consistently in the literature on preventing children from going missing from care, and were all factored into the design of our model:

- supportive relationships
- group work around risks of going missing and alternative strategies to cope with the impact of their experiences and moving forward with their lives
- providing a multi-cultural staff team, enabling children of all cultures to identify with at least one member of staff
- diversionary activities that are more fun than running away
- an individual strategy meeting to agree on the multi-agency approach for each child
- a robust anti-bullying policy
- addressing each child’s therapeutic needs
- receiving appropriate referrals and placements of trafficked children
- training for staff on preventing and responding to missing episodes
- access to education for each child

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86 Appropriate mix of children – we were aware we would have to conduct compatibility assessments to ensure placements were risk assessed and would work together. For example, two children recovered from the same place may not be considered appropriate to be placed together or if two 17-year-old males were placed we may not have accepted a referral for a 13-year-old girl. All these decisions would have been made on a case by case basis, looking at the information known, history of the child and the level of risk as per our referrals and admissions process.
The values and principles underpinning Unseen’s approach to care:

- **Child-centred** – listening to each child and acting upon what they say.
- **Leading by example** – continually demonstrating respect, trustworthiness and dignity to children, staff and visitors.
- **Flexible** – tailoring our service to the needs of each child.
- **Multi-agency** – building a supportive network of external agencies and relationships for each child.
- **Empowering** – ensuring everything we do empowers the child to understand their options and reach decisions themselves.
- **Equality** - ensuring all services and facilities are accessible and available to all, with no judgement or discrimination. Individuality and diversity will be valued and each child will be treated fairly.
- **Quality** – striving for excellence and always looking to go above and beyond standards we have been set by others and those we set for ourselves.

We knew we had to provide a model that would try to address the gaps we were seeing in mainstream service and support. The model had to meet the needs of this cohort of children – it needed to keep an individual safe immediately, provide a familiar setting for them, take into consideration cultural and language needs, and most importantly assist them to stabilise and start thinking about what it is they want to achieve in their lives as they move forward. It also had to be cost-effective, fit within local authority frameworks, support other professionals to provide their duty of care, and ultimately reduce the number of children who went missing.

**The Children’s Service South West (CSSW) model**

Using our knowledge of working with adult victims of slavery and our thorough research of the problems we wanted to address, we created the Children's Service South West (CSSW) – a new and innovative solution specifically for a UK context. We believed this model would provide the best care for trafficked children, combining the consistency and boundaries of a familial foster care environment with the high levels of supervision, professional care and risk management of a residential home. It had the additional security features of a safehouse and staff who are specialists in supporting children who have been trafficked.

The purpose of Unseen’s pilot project was to keep children safe but also provide tailored, therapeutic, trauma-focused care. If we could reduce or stop children going missing this would, most importantly, prevent further harm to them, but also save cost to the public purse of a missing person incident. Importantly, we wanted to ensure that we developed a model that could integrate into mainstream local authority provision. The home would focus on creating a positive experience in all aspects of life and centre on a child’s journey - from their starting point to when they came to transition and move on. A key focus was offering an initial safe space that would allow a child to develop their resilience and independent living skills.
Stages of care

We modelled the care that children would receive into three main elements.

**Phase 1:**
Initial Intervention
Welcome, Orientation & addressing any immediate needs

- Referral Accepted (24/7)
- Preparation for arrival
- Initial Assessment
- 24-hour review
- 72-hour safeguarding agreement review
- Week 1 Review

**Phase 2:**
Support & Planning
Continued assessment of need and appropriate support offered in conjunction with social care and other professionals

- 1 Month Review
- 3 Month Review
- 6 Month Review
- Transition Planning
- Move-on from home

**Phase 3:**
Preparation
Preparing for move-on
CSSW would accommodate, safeguard and care for trafficked children, 24 hours a day, 7 days a week. CSSW would operate within a four-bedroom family house, and accommodate up to three children and two live-in volunteer house parents (a married couple). One support staff member would sleep at the property and be available overnight. Support and care would be provided by the registered manager, a team of four children’s workers, a case owner, house parents, and clinical psychologist support. CSSW was designed to demonstrate a deeply integrated approach to care and respond specifically to the unique and complex needs of trafficked children.

Unseen decided that recruiting volunteer, live-in house parents alongside a specialist staff team would provide the nurturing, loving care that trafficked children need to support them with attachment difficulties and trauma-related symptoms, whilst enabling them to access specialised therapeutic support from a highly trained staff team. We considered that this model would reduce the push and pull factors that cause trafficked children to go missing.

**Peer-testing the model**

We were not wedded to the idea of house parents if stakeholders felt that the model simply would not work, but the model was met with overwhelming enthusiasm. As part of a scoping exercise, we met Directors and Assistant Directors of Children’s Services, as well as other relevant people within several surrounding local authorities, whom all recognised the need for something innovative. All said they felt the model provided a sound and exciting solution; and confirmed that the price point being considered for such a service was appropriate.

We investigated partnering with an organisation with similar values to Unseen’s, which was experienced in the provision of residential children’s services. Several meetings were held, due diligence was performed, and the project was met with enthusiasm. It was agreed the pricing model being proposed was appropriate and the organisation felt it would not be a barrier to local authorities placing children. However, the provider felt that, ultimately, the model was too dissimilar from the services currently available to work (for example, it had concerns about how the house parents would sit alongside a registered manager, advice that we took on board and wrote clear protocols to address).

We also met with a non-governmental organisation (NGO) that combines paid staff and live-in volunteers for unaccompanied asylum-seeking children in a supported living set-up. They advised us that if managed carefully, our model could be successful.

It was identified that registering an innovative project with Ofsted would be difficult due to the rigorous and rigid parameters of care set out in the regulations and quality standards. If the project only accommodated children aged 16 and above and included live-in volunteers it could be classed as supported accommodation, not a children’s home, and would therefore not be subject to Ofsted inspections. Unseen thoroughly investigated this to ensure that all legal and ethical obligations would be properly fulfilled. The differences between supported accommodation and children’s homes were not always clear and the advice of a specialist solicitor was sought. Their advice was that any project offering support to children should be registered with Ofsted as a children’s home, which we accepted.

We were aware that there was a lack of evidence to support the model that we were proposing within a UK context, and we embarked on CSSW as a pilot to develop the evidence base required. We knew that no comparable precedent had been set to effectively support and care for trafficked children and this meant registration of a such a provision sat outside some of the ‘norms’ Ofsted expected when registering a children’s home. However, we considered that the CSSW model proposed did not compromise the care of children in any way and therefore should meet Ofsted’s regulatory requirements. We welcomed the opportunity to work alongside Ofsted to ensure we monitored, evaluated and effectively developed a specific care provision in keeping with its requirements.
Part 3

Delivering the service

Providing safety to trafficked children
Delivering Children’s Service South West

Funding CSSW

This project was part-funded by the Home Office Child Trafficking Protection Fund, placing local authorities, and private trusts and donations. We decided it was important for this project to add to rather than replace placement options available to local authorities (LA). This way the project would also become embedded into standard practice and financially sustained in the future. With this in mind, we operated alongside all existing legislation, regulations and guidance so that local authorities could make a referral to CSSW via their normal channels. This approach also meant that whilst set-up costs and a percentage of placement costs would be subsidised by funding secured by Unseen, local authorities would still have to fund the placement fee via their usual mechanisms.

As part of our research exercise, we met and worked with local authorities to set a realistic price bracket, to reduce the risk of the cost being a barrier to placement. Directors and Assistant Directors of Children’s Services were universally enthusiastic about the provision and the price-point. They felt the cost was very favourable compared to similar private provisions and represented significant value for money. Due to the low numbers of trafficked children identified by each local authority, most felt that spot purchasing arrangements\(^88\) were most appropriate. We met with the corresponding LA Emergency Duty Teams (EDT) to ensure children that were identified out of hours would be able to access our accommodation, particularly as the first 72 hours after a child is found are so crucial.

Local Authority frameworks

In our scoping exercise, we learned that placements would come to us after we registered on ‘purchasing and placement frameworks’ or for spot purchasing arrangements (the process for registering on purchasing frameworks is discussed later in this report). Ahead of opening we identified and instigated the necessary paperwork and processes to register on and apply for a range of frameworks.

We also registered with the CCRAG (Children’s Cross-Regional Arrangements Group) where several subscribing local authorities go to search for placements for children out of area. In addition to spot purchasing frameworks, we applied to and were accepted onto five LA placement portals, giving access to LA frameworks\(^89\). Our applications to two other frameworks were pending at the time of closing CSSW\(^90\).

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\(^{88}\) Spot purchasing arrangements happen when a service is purchased by a local authority on behalf of an individual. Services are purchased as and when they are needed and are purchased on an individual basis for a single user. This meant that bed spaces at the home would only be paid for when occupied.

\(^{89}\) Portals and frameworks CSSW had been accepted on to: South Central/Southampton, North West/Trafford, South West/BANES, West Midlands/Placements Portal and London Care Services.

\(^{90}\) Portals we had applied to be part of but did not proceed once CSSW was closing: East Midlands/Northamptonshire and Peninsula/Devon County Council
Referral Process

Due to the nature of slavery and trafficking, CSSW had a specific referral process in place to manage risks. We were aware, from providing adult services, that referrals can come at any time of the day or night. Taking this into account the home was set up to take emergency placements 24/7. Referrals were accepted for children who had been identified as potential victims of trafficking, and indicators were discussed between staff and the placing authority, accepting that little or no information would likely be known about the children being referred or the risks they present to themselves or others.

Referrals could only be made by local authority commissioning teams and Emergency Duty Teams (EDT). The service was able to accept both emergency placements and standard, planned placements. We wanted to ensure that the referral process for local authorities was as simple as possible whilst also providing us with the information required to assess the appropriateness of the potential placement.

Four initial questions were asked for us to decide if a referral was appropriate and could proceed to a full assessment and placement:

1. Is the young person believed to be a potential victim of modern slavery?
2. What type of exploitation is believed to have occurred?
3. How old potential victim is believed to be?
4. Has an initial safeguarding agreement been signed?

The answers to these questions were considered with risk and compatibility assessments for each referral. Once the placement was considered appropriate for a child, we implemented an initial intensive safeguarding agreement policy, which we advocated to occur within 72 hours of a child’s arrival. This was created based on what we knew about trafficked children and worked hard to achieve the balance of safety, risk management, the threat of going missing and children not being deprived of their liberty and freedom.

The initial safeguarding agreement allowed the team to agree with the social worker and placing authority the safety mechanisms that would be in place initially (for the first 72 hours), while further information was ascertained. It aimed to keep children safe during the first 72 hours of their placement and enabled police, social care and staff to assess the risk of being found and re-trafficked and to gather information about the child’s situation. The agreement created a safety plan that covered the following temporary measures:

- limited access to mobile phones and internet
- supervised use of a personal allowance
- restricted contact with family and friends
- one-to-one staffing and support.

These restrictions were relaxed after this initial period in consultation with the placing authority, the child and the work the team undertook in the first 72 hours (e.g. orientation of the local area, mobile and internet safety session, budgeting, safe contacts).

The home operated on the least restrictive practice possible, whilst being aware of the risks of trafficked children placed in care returning to their traffickers. All safety measures put in place were proportionate, monitored, and individually tailored to each child’s needs (as agreed with the placing local authority) to ensure their care and safety.
Placements were to be short to medium-term. This allowed for a comprehensive assessment of the child’s needs and risks. The placement should last no longer than 12 months to balance the child’s initial need for safety and specialist resources to facilitate recovery with the need for permanence.

**Aims of the service**

The overall aims of the service were to:

- Increase positive outcomes for children who have been trafficked.
- Reduce the number of trafficked children who go missing from care.
- Increase the number of trafficked children who have access to appropriate accommodation, support and care.
- Reduce children’s short-term and long-term vulnerabilities.
- Provide a safe family environment within which trafficked children can develop, grow and become independent, productive individuals.
- Reduce the number of trafficked children who become re-exploited.

**Outcomes sought for children**

CSSW was designed to facilitate safety, hope and choice. We wanted to see the following positive outcomes for all the children placed at the home.

1. **Increased feelings of safety and security**

   Children would:
   - be safely housed in a loving, caring and protective environment
   - no longer experience physical and emotional violence and abuse
   - be provided with space to safely recover from trauma and physical injury
   - feel less anxious, stressed, experience fewer panic attacks and sleep better
   - begin to regain feelings of trust
   - be less likely to go missing

2. **Re-gain feelings of hope towards their future and a belief that they can achieve their dreams**

   Children would:
   - feel an increase in their self-belief and capacity to achieve
• gain new experiences that are joyful, reducing feelings of depression and helplessness
• see their skills increase and potential obstacles reduce
• understand services available to them and how to access them
• process and accept past experiences, enabling them to move forward

3. Gain the confidence to make choices and express themselves

Children would:
• increase their confidence and self-esteem
• gain the ability to make choices and state preference
• learn how to map options, balance pros and cons and reach their own informed decision
• reduce factors which make them vulnerable to exploitative relationships
• regain a sense of control over their life
• develop a positive mental attitude
• increase integration with their peer groups

The home set-up

The home was in North Somerset. Due to the nature of risk for some children residing at the home, including the risk posed to children by their traffickers, with agreement from Ofsted the address was not publicly available.

CSSW was completely refurbished for this project and had a large lounge, dining room, kitchen, shared toilet, staff office (with sleep-in facilities) and a separate laundry room on the ground floor. The first floor consisted of three bedrooms for children, one bedroom with en-suite for live-in volunteers, and two shared bathrooms for the children to use. Each bedroom was brightly decorated, and children were invited and encouraged to personalise their room to their tastes.

The home looked like any other home in the street and we worked hard to ensure that we were part of the community and had good relationships with our neighbours. We ensured the home was in a community that offered good local amenities and easy access to activities for young people that were age appropriate. In consultation with Ofsted and considering various legislative parameters and guidance about children’s rights, protective security measures were installed.
Staffing, routine and ethos

CSSW was staffed 24/7 and was able to accommodate up to three children, plus the volunteer House Parents and one support staff member who would also sleep at the property and be available overnight. Support and care were provided by the registered manager, a team of four children’s workers, a case owner, house parents, and a clinical psychologist. CSSW was designed to demonstrate a deeply holistic approach to the provision of care and respond specifically to the unique and complex needs of trafficked children.

The daily routine at the home was shaped around the domestic routine of a loving household. This involved the live-in volunteers waking up the children in the morning, cooking breakfast, making packed lunches, maintaining a welcoming, clean home, planning fun activities, helping with homework and facilitating a family evening meal around the kitchen table.

The combination of a loving family unit alongside trained childcare professionals allowed us to meet the broad array of children’s emotional, practical, psychological and spiritual needs. We were aware that for many children, live-in volunteers and residential care workers can become significant attachment figures and that this had to be considered with children moving on. However, we believed that the building of positive relationships, characterised by shared experiences, consistency of practice and unconditional positive regard and respect would be beneficial to the children placed with us. Sharing experiences with the children in our care was pivotal to the way we delivered the service and ensured that we listened to their views and feelings. Another key focus was assisting children to develop resilience, independent living skills and the ability to begin to deal with the trauma and experiences they had been through.

It was part of the home’s ethos to identify and facilitate activities that children would benefit from and in conjunction with children placed with us the team would regularly facilitate access and support them to attend appropriate external activities that would meet children’s needs and develop and reflect their creative, intellectual, physical and social interests and skills. Examples of this include attending youth groups, church clubs, gyms, boxing clubs and day trips to various local attractions.

We also understood that within this cohort, some may have faced further discrimination due to their nationality, status in the UK, exploitation experienced, racial identity, religion, culture and/or sexuality. This meant we had to design and deliver an environment that consistently promoted equality and diversity. Little is understood about the views and feelings of trafficked children and the home aimed to change this via the pilot and subsequent reports so that the wider sector can better understand the needs of trafficked children.
## Holistic support offered by CSSW

| Child's Developmental Needs | • The CSSW Team had oversight of the support and co-ordinated multi-agency input for each child.  
|                           | • Individual, bespoke support focused on actions and outcomes for each child.  
|                           | • Ensuring a range of voices and opinions (including that of the child) fed into the care offered. The role of an independent advocate was explained to each child and provided should they wish to access this support.  
|                           | • Attention to the diversity and equality of children was applied throughout all areas of the service and care provided.  
|                           | • Staff trained to cope and deal with the visible signs and displays of trauma and deliver appropriate therapeutic responses.  
|                           | • On-site assessment by a clinical trauma psychologist who delivered advice on therapeutic support and parenting to the staff team.  
|                           | • Multi-agency working to promote the best interest of the child including regular correspondence with social care and advocacy to ensure that police investigations happened in an appropriate manner.  
| Therapeutic Parenting and Family Environment | • A volunteer couple in full-time parental role and living at the house.  
|                                             | • Delivery of familial environment in a standard family property, with all the routine and activities one would expect from a regular, loving family.  
|                                             | • Provision of all food, meals, clothing, and items needed upon arrival and during the placement.  
|                                             | • Individual room for each child, decorated to their preference, and given their own key.  
|                                             | • Staff team on site 24/7.  
|                                             | • Staff team on-call 24/7.  
|                                             | • Advocacy for children and their wishes.  
|                                             | • Provision of safety and space for each child so they could begin their recovery process.
### Part 3: Delivering the service

<table>
<thead>
<tr>
<th>Specialist Support</th>
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<tbody>
<tr>
<td>• Staff trained in risk assessment and effective safety planning. Initial safeguarding protocol in place for the critical first 72 hours of a child’s arrival.</td>
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<tr>
<td>• Covert protective security measures at the property.</td>
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<td>• Background research conducted to meet each child’s cultural and religious needs.</td>
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<td>• Daily in-house classes including English lessons.</td>
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<tr>
<td>• Appropriate support to each child for external agency meetings.</td>
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<tr>
<td>• Facilitating access to external services as required including medical, psychological, educational, legal and immigration, financial support.</td>
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<tr>
<td>• Multi-agency approach and working in partnership with other local agencies. Staff aware of the external services available to help improve the quality of life for each child.</td>
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<tr>
<td>• Bespoke care plans created in conjunction with the social care team.</td>
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<td>• Exit strategies and integration with local community networks.</td>
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<tr>
<td>• Continuation of care; assistance with the transition period and move-on into other placements as appropriate.</td>
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Part 3: Delivering the service

<table>
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<tr>
<th>Unique aspects</th>
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<tbody>
<tr>
<td>• First specialist care and accommodation service in the country for trafficked</td>
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<td>children.</td>
<td>• 24/7 referral and transportation to the service.</td>
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<td>• Access to 24/7 interpreting services.</td>
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<td>• As a ‘first responder’, Unseen was able to help with the completion of NRM, providing</td>
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<td>support for both social worker and child during this process.</td>
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<td>• Increased staffing for child’s first 72 hours with the project and a member of staff</td>
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<td>assigned as a ‘buddy’ to reduce the chances of the child absconding.</td>
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<tr>
<td>staff assigned as a ‘buddy’ to reduce the chances of the child absconding.</td>
<td>• Strategies designed to create a relationship, trust and new attachments with house</td>
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<td>parents as quickly as possible to keep a child safe.</td>
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<td>• Clinical psychologist conducted an initial assessment with all children within the</td>
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<td>first week, which identified trauma needs and informed delivery of therapeutic support</td>
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<td>by the CSSW team.</td>
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<td>care with social care support on-site, to fulfil all the child’s needs.</td>
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<tr>
<td>parental care with social care support on-site, to fulfil all the child’s</td>
<td>• Unique setting combining the nurturing environment best for a child’s well-being alongside</td>
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<td>needs.</td>
<td>the appropriate security measures necessary for cases of trafficking.</td>
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<td>these risks in conjunction with the child.</td>
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<td>• Understanding of cultural needs for different nationalities including the potential</td>
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<td>effectively manage these risks in conjunction with the child.</td>
<td>involvement of certain trafficking practices such as Juju.</td>
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<td>• Pick up and drop off service to assist social workers with transportation for meetings,</td>
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<td>school, and social activities.</td>
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<td>• Pick up and drop off service to assist social workers with transportation for</td>
<td>• Representation at strategy meetings.</td>
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<td>meetings, school, and social activities.</td>
<td>• Risk assessments and safety plans monitored daily, significant changes reported and</td>
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<td>updated to all agencies.</td>
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<td>• Risk assessments and safety plans monitored daily, significant changes reported</td>
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<td>and updated to all agencies.</td>
<td>information regarding their identity to assist with recovery should they go missing.</td>
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<tr>
<td>• Initial safeguarding procedure included taking a photo of the child and</td>
<td>• Return interviews to be conducted following every ‘missing’ episode.</td>
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<td>confirming relevant information regarding their identity to assist with</td>
<td>• Expertise to arrange repatriation to the country of origin with support from external</td>
</tr>
<tr>
<td>recovery should they go missing.</td>
<td>international agencies should this be necessary.</td>
</tr>
</tbody>
</table>
Tailoring the service for each individual child

When designing the service and the home, we had to be mindful that we would be accommodating children from a range of backgrounds. They would have a range of cultural, linguistic, religious, health, legal and educational needs that would have to be considered in relation to their support needs. We outlined in detail our approach to all of these elements in our Statement of Purpose, as well as our approach to risk management, behaviour management (no restraint and reinforcement of positive behaviour), enjoyment and achievement, positive relationships, safeguarding, health and safety and missing children, as required by Ofsted.

The team had a strong commitment to ensuring they created an atmosphere where children were able to openly practise their religion and be proud of their culture. All major religious festivals were celebrated, and children were helped to gain knowledge about their own and other cultures and religions. Dietary requirements based upon religious grounds were adhered to and children were offered support to access cultural events of their choice within and outside of the community.

Education at CSSW

We took a holistic and tailored approach to education, recognising the importance of teaching vital life skills and equipping children with the skills to think for themselves, alongside academic subjects and vocational skills that would increase children’s long-term economic opportunities and independence.

The home actively supported children in understanding and exercising their rights under the UN Convention on the Rights of the Child. The staff team demonstrated a social pedagogic approach to supporting children’s rights in their practice, which is not limited to procedural or legislative requirements, but which empowers children as active agents in all aspects of their care. For example, this meant supporting children to access advocates if they wish, to express their views and wishes and where necessary challenge their care plans and decision-making about their futures.

We supported the children to undertake activities that would promote their long-term health, such as taking part in team sports or attending a gym and actively promoted healthy eating. Menus were planned together and spending time together learning about different foods, how to cook and taking time to eat together as a family were essential elements of the home.

We recognised that trafficked children may have experienced exploitative practices that meant they have not always attended formal education. The things they have experienced may have created barriers to their ability or perceived ability to learn or attend educational establishments, so the team worked hard to understand each child’s educational needs in the context of their previous experiences, current wants and language abilities.

We recognised that language, trauma, health, or emotional and behavioural development needs may also have created barriers to learning so the team helped to prepare any child going into the UK education system for the first time. They worked in partnership with local education providers, social care, and the

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91 Statement of Purpose is a document legally required under the Children’s Act and Ofsted registration. Our approach to provision of support was clearly detailed in our Statement of Purpose and took into account all the relevant legislative parameters under the following: UN Rights of the Child; The Children’s Act 1989 & 2004; Department for Education: Working Together to Safeguard Children, The Care Standards Act 2000; The Children’s Homes (England) Regulations 2015.

92 UNHRC. 1989. p. 21
police to risk assess attending school on an individual basis. Where attendance was deemed too risky or inappropriate, alternative options were put in place.

Due to the nature of trafficking, the language barriers and the short-term nature of emergency placements, the home offered in-house sessions, providing opportunities to learn and access educational activities that assisted each child to grow into the adults they wanted to be, whilst supporting them to overcome the trauma and exploitation they experienced.

Informal, in-house sessions were available daily, providing structure and routine, and covered the following:

- English language (speaking, writing and reading)
- IT (including internet safety)
- Life skills (domestic, personal hygiene, health and wellbeing, gardening and nature, human rights, boundaries, decision making)
- Individualised therapeutic input (including art, music, sport)
- General studies – providing scope for children to share and learn about subjects they are interested in and/or already know something about

Managing contact with birth families

Managing and promoting contact between children and their birth families is an important part of any care plan. The project was committed to promoting contact if possible and had a protocol in place to ensure this was the case. Promoting contact, however, is more complex for children who have been trafficked for two reasons. Firstly, little or nothing is known about them or their family before being placed in care and therefore the social worker must make an assessment of how safe contact would be (further complicated by the fact that the child’s family are often in their country of origin). Secondly, the family are sometimes implicated in the recruitment or trafficking of their child and therefore the police are also required to investigate whether contact is safe or puts the child at increased risk of being found and re-trafficked. Investigations by police and social care take time and, in the meantime, children miss their family, want to make contact and perhaps don’t fully understand why they are temporarily prevented from doing so.
Part 4

Achievements of CSSW

Providing safety to trafficked children
The achievements of CSSW

As a pilot, CSSW was demonstrably successful for the children accommodated there. Although too few children were looked after to conclude whether the model of care would be an effective solution for other trafficked children, there is every indication that it would sit well alongside current provisions, such as foster care, for the children at highest risk, with the most complex needs, or the most challenging presentation.

Referrals received at CSSW

Twenty-four children were referred to the project between December 2017 and December 2018. Only four referrals were accepted. Fourteen referrals were declined because they were inappropriate (see figure 1 below) and six did not proceed (the external reason for this was not given but CSSW did not decline these referrals).

We declined referrals most commonly because there were no indicators of trafficking or because the child in question was identified as potentially trafficked but not a non-UK national. The destination of six children referred to CSSW, who were considered appropriate for placement (i.e. there were thought to be indicators of trafficking), is unknown. This is because a social worker identified an alternative placement and did not inform CSSW staff that the referral would not be proceeding.

Demographics of children and exploitation types

Between May 2018 and December 2018, the home accommodated four children. Of the four children supported, three were boys and one was a girl. One of the children was 15, two were 16 and one was 17. Their nationalities were Vietnamese, Iranian, Romanian and Afghan.

Two of the children were identified as potential victims of trafficking at an airport, as part of planned police operations. One was intercepted because he was alone, and concerns were raised for his well-being. One child was identified at a business premise and thought to have been trafficked from Calais.

Two of the children (both male) were subject to labour exploitation, one was trafficked for sexual exploitation (female) but was intercepted as part of a planned operation and was safeguarded from harm, and the other is unknown because he was also intercepted before being exploited.

Both trafficking and slavery are a crime, as stated in the Modern Slavery Act (2015)93 and cases of suspected trafficking should be investigated by the police. Two of the children’s cases were logged with the police and had crime numbers and were being actively investigated. All four were in the NRM, two having been referred by the police, one by Border Force and one by a social worker.

Two of the children accommodated at the project were unaccompanied asylum seekers and one was an EU citizen and therefore had the right to reside in the UK longer term. One child’s immigration status was unknown.

93 Modern Slavery Act. 2015. p.31
Length of placements

Two of the children, both referred by their designated social workers during placement planning, had planned, medium-term placements. One of them stayed for 205 nights, and the other for 57 nights. One of these children had been in foster care and had experienced a placement breakdown; the other was placed with us as soon as she was identified as a potential victim of trafficking, so CSSW was her first experience of being in the UK care system.

The other two children, who were referred by EDT out of hours, were short-term placements (one day and five days) and were subsequently moved on once their designated social workers were able to identify appropriate provision. One was moved to foster care; the other’s next placement is unknown. Both these move-ons are believed to be because of cost constraints, even though one of the children specifically expressed a desire to stay and the CSSW team advocated for this to happen.

When analysing care that took place, we have broken it down into segments of time because different protocols and assessments occurred for each child during these timeframes.
### Children were supported in these areas:

**Health:** children were registered with a GP and sexual health service, appointments were made with an optician, a dentist, and a looked after child nurse, plus referrals made to CAMHS. Internal clinical assessments and therapeutic sessions occurred at CSSW. Internal therapeutic sessions included: sleep hygiene, relaxation, and emotional-well-being sessions.

**Education:** ESOL, maths, IT, life lessons, skills-based lessons (in-house), referral to virtual school[^1] and online learning.

**Social:** social interactions with live-in volunteers, staff team and friends, youth groups, activity groups outside the home. Maintaining safe connections outside CSSW with a social worker, their family (where applicable), and friends.

**Culture, religion & identity:** cooking culturally specific foods, celebrating festivals, attending places of worship.

**Legal:** legal advice and appointments.

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Over the duration of CSSW, 1,417 hours of direct support were given by the team to the children. This figure does not account for the hours also spent by the live-in volunteers who daily spent time with the children doing ‘normal life’ activities – playing the guitar, watching TV, going out for walks, gardening, cooking, shopping and playing games – in a familial setting.

### The first 24 Hours

Within 24 hours and throughout their placements, children engaged in positive interactions with staff. Positive interactions were defined as verbal or non-verbal indications that the child initiated - or responded to - contact with staff, such as eye contact, a smile or a conversation, rather than being withdrawn, uncommunicative or only answering questions when addressed.

All four children engaged with a communal activity within the house during their first 24 hours, such as joining others for a meal or taking part in a game. The paperwork (and therefore questions about the child’s feelings or experiences) during the first 24 hours were minimal because the children were likely to feel confused, alone, frightened, and tired. All the children chose to be in their bedrooms only to sleep, preferring to spend all their waking hours in communal areas with staff which is a testament to the staff team’s ability to welcome and build relationships with children.

Each child was given a welcome pack including basics such as toiletries, underwear, pyjamas, slippers and some stationary because some arrived with no belongings; having been rescued or escaped directly from their exploitative situation. Each child was offered a choice of clothes from a stock of donated items.

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[^1]: The Virtual School does not exist in real terms as a building, there are no teachers and children and young people do not attend. It is a service provided by dedicated professionals within the Local Authority whose work it is to promote and co-ordinate educational support for Looked After Children and Care Leavers to succeed at nursery, school, college and university, or any other place of learning.
The first 72 Hours

All children had an Initial Safeguarding Agreement completed that ensured temporary safety measures were in place for up to the critical first 72 hours of any placement (because this has been identified as the time in which children are most likely to go missing). For the three children in placement between 24 - 72 hours, discussions were held with social workers to determine safeguarding needs. For two of the children, the decision was made to extend the safeguarding agreement as risk from traffickers was still high, and one child had their temporary restrictions stepped down at this point. At the request of their social workers none of the children had the restrictions completely removed at the 72-hour mark. Staff attended the strategy meetings that were held for children in our care and were able to advocate for them and report on how they responding to the placement.

During this period, all three children engaged with activities outside the home, and staff would accompany the children to any activities in the local area - for example going for a walk to get to know the community and landmarks or to go shopping for things the child wanted.

Children at the project for 72 hours had an immediate assessment of any urgent health needs, asking them to show on a diagram if they were in pain, had any injuries, felt unwell or took any regular medication.

The first week

Risk and needs assessments and support plans were in place within one week, with children having contributed to the creation of all these documents, working with staff to identify at least one thing they wanted to achieve during their time at the project.

During their first week, children engaged in keywork sessions as well as one-to-one support sessions (educational or therapeutic) and daily activities of their choice (e.g. sports). Support plans addressed needs relating to health, education, legal, social, cultural and faith-based goals, such as identifying the nearest place of worship, a visit to the nearest shop selling food from their country of origin, and registering with a GP. Educational sessions included English as a Second Language (ESOL), Maths, IT or independence/life skills. Therapeutic support included tailor-made resources for children who have been trafficked, all resources were held in an ‘Emotional Toolkit’ the development of which was overseen by a clinical psychologist.

Staff supported children with personal well-being work and encouraged children to access self-help workbooks from the Centre for Clinical Interventions or Mood Juice95, which children could work through alone or with staff support. Staff also offered guided support sessions on topics such as sleep hygiene (developing different practices and habits necessary for a good night’s sleep and full daytime alertness), relaxation, coping with flashbacks and grounding techniques.

Within a week, children showed signs that they were satisfied with their placement and started to settle, unpack their belongings, go shopping with staff to buy things for their bedrooms, and personalised them. Children began to express their preferences and choose at least one meal they would like to eat. Children participated in morning meetings, facilitated by staff, and began to share information about each other’s culture.

95 Mood Juice is a resource of self-help guides covering conditions such as depression, anxiety, stress, panic and sleep problems.
The first month

The two children who were at the project for more than one week were registered with the local GP and referred to the looked after children nurse (LAC nurse). Children were taken to the dentist and the opticians. Referrals to the sexual health clinic were also made and in-house sex education sessions were run.

Within the first month, children were fully engaging with the specialist support offered within the home: morning meetings covering Personal, Social and Health Education (PSHE), weekly keywork sessions to address the needs on their support plans, in-house education sessions, and in-house therapeutic support sessions. Referrals to the necessary external agencies had occurred, and support networks to promote independence and move-on support were beginning to form.

Psychological assessments and referrals occurred within the first month. Internal assessments were carried out by the in-house clinical psychologist to ensure therapeutic support and parenting was tailored to the specific mental health and emotional needs of each child. Staff also referred children to CAMHS (Child and Adolescent Mental Health Service) as appropriate.

Planned family contact was envisioned to start within the first month if appropriate. However, none of the children were able to have contact within the first month (a decision made by each child’s social worker), because their family may have been implicated in their trafficking.

Month two onwards

In-house education sessions were provided and focused on ESOL, Maths, IT, and life skills. Lessons were planned by CSSW’s Children’s Workers and feedback gathered from children at the end of each session that contributed to the following day’s lesson plans. It was intended that the team would work with each child’s social worker and relevant professionals to continue with the creation and delivery of Personal Education Plans (PEP) (connections with the Virtual School had been put in place to assist this process). Staff repeatedly advocated for PEP meetings for the children placed with us and were successful in one case96. The children were able to access online education sessions provided by their placing local authority.

The two children were encouraged to participate in social activities with staff, other children at the home and their peers. This included encouraging children to practice any faith or cultural traditions they had, attending services and a youth group. Children cited this repeatedly as very important to their well-being and staff were very supportive in sharing religious observance. One child was able to listen to worship via YouTube, facilitated by staff, which she cited as a reason for immediately feeling safe and wanting to stay.

Planned contact with family was enabled, via phone or Skype, as soon as it was practical and safe to do so, although because the home was a safehouse they were not permitted to tell their family the exact location, which was challenging for the parents as well as the children.

The children accessed legal advice with support and advocacy of the CSSW team. Both children had on-going active police investigations concerning their trafficking experience but did not need to attend

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96 The Personal Education Plan is the responsibility of the child’s social worker and should involve a planning meeting between relevant professionals. CSSW staff advocated for these plans to be put in place but placing LA were slow to action their duties.
police interviews or court appearances during their placement.

CSSW aimed to address the key vulnerabilities of trafficked children: going missing, returning to the exploitative situation or trafficker, and not accessing services. Going missing and returning to their trafficker is a symptom of control and dependency and absence of secure and safe adult relationships. The project successfully addressed this vulnerability as evidenced by the quality of the relationships described by children, staff and independent assessors and the lack of missing episodes.

Control and dependency were addressed directly in therapeutic support and morning meetings that focused on personal safety, emotional well-being, self-esteem, healthy relationships and indirectly by providing education to enhance children’s life chances, confidence and ambitions for the future.

### Results achieved against proposed outcomes

<table>
<thead>
<tr>
<th>Aim</th>
<th>Outcome</th>
<th>Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reduce the number of trafficked children that go missing.</td>
<td>Achieved.</td>
<td>100%</td>
</tr>
<tr>
<td>None of the four children placed experienced any missing episodes or incidents whilst living at CSSW. Based on the national average from four children placed we would have expected between 1 – 3 of them to have had missing episodes during their placement.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>100% of children to be offered culturally specific support.</td>
<td>Achieved.</td>
<td>100%</td>
</tr>
<tr>
<td>All children were offered culturally specific support and all children who stayed in the home for more than 24 hours (n=3) engaged with the support.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>65% of children to engage with house parents (and the wider staff team).</td>
<td>Achieved and exceeded the expectation of 65%.</td>
<td>100%</td>
</tr>
<tr>
<td>All children (n=4) engaged positively with both live-in house parents and staff and the quality of these relationships were praised by external inspectors.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>100% of children offered skills sessions – personal safety, maintaining well-being.</td>
<td>Achieved.</td>
<td>100%</td>
</tr>
<tr>
<td>All of the children who stayed in the home for more than one week (n=2) were offered and engaged with skills sessions, including personal safety and well-being.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>65% engage with psychological or therapeutic support.</td>
<td>Achieved and exceeded the expectation of 65%.</td>
<td>100%</td>
</tr>
<tr>
<td>All of the children who stayed in the home for more than one week (n=2) engaged with therapeutic support.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>100% of YP support plans to include external agency input.</td>
<td>Achieved.</td>
<td>100%</td>
</tr>
<tr>
<td>All of the children who stayed longer than one week (n=2) had external agency input (total = 10 agencies) in their support plans.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Part 5

Outcomes for children
Direct impact on children at CSSW

This section mainly focuses on the two children, Sam* and Sarah*, placed with CSSW for the longest time, because we were able to collate more data on the impact the placement had on them.

Sam and Sarah had been identified by police before being exploited. Both were identified at an airport: Sarah was found as part of a planned police operation to interrupt trafficking for sexual exploitation, and Sam was identified because he was alone and had no documents. It is an enormous success on the part of the police and social care that they prevented these children from experiencing any further significant harm in the UK.

Overview of the four children placed with CSSW

<table>
<thead>
<tr>
<th></th>
<th>John*</th>
<th>Sam*</th>
<th>Sarah*</th>
<th>Nick*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>17</td>
<td>15</td>
<td>16</td>
<td>16</td>
</tr>
<tr>
<td>Nationality</td>
<td>Vietnamese</td>
<td>Iranian</td>
<td>Romanian</td>
<td>Afghan</td>
</tr>
<tr>
<td>Entered the NRM</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Referring agency</td>
<td>CSC</td>
<td>CSC</td>
<td>CSC</td>
<td>CSC</td>
</tr>
<tr>
<td>Location identified</td>
<td>Nail bar</td>
<td>Airport</td>
<td>Airport</td>
<td>Business premises</td>
</tr>
<tr>
<td>Type of trafficking</td>
<td>Labour exploitation</td>
<td>Unknown</td>
<td>Sexual exploitation</td>
<td>Labour exploitation</td>
</tr>
<tr>
<td>UASC</td>
<td>Unknown</td>
<td>Yes</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>Nights placed</td>
<td>1</td>
<td>205</td>
<td>57</td>
<td>5</td>
</tr>
<tr>
<td>Missing episodes</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Previous placement</td>
<td>None</td>
<td>Foster Care (placement breakdown)</td>
<td>None</td>
<td>None</td>
</tr>
<tr>
<td>Move on placement provision</td>
<td>Supported accommodation</td>
<td>Independent Accommodation</td>
<td>Foster Care</td>
<td>Unknown</td>
</tr>
<tr>
<td>Initial Safeguarding Agreements</td>
<td>Not recorded</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Strategy 47 Meeting</td>
<td>N/A</td>
<td>Yes</td>
<td>Yes</td>
<td>No97</td>
</tr>
<tr>
<td>Health Assessment</td>
<td>n/a</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Health Outcomes</td>
<td>Not applicable due to length of placement</td>
<td>5 referrals (GP, LAC nurse, optician, dentist, sexual health clinic), supported to 9 appointments</td>
<td>2 referrals (LAC nurse, children’s centre), supported to 2 appointments</td>
<td>Not applicable due to length of placement</td>
</tr>
</tbody>
</table>

97 Strategy 47 meeting was advocated for by the team but not set up by the social worker.
Part 5: Outcomes for children

<table>
<thead>
<tr>
<th><strong>Education Outcomes</strong></th>
<th>Not applicable due to length of placement</th>
<th>Accessed in-house education and online local authority provision. 100% attendance for ESOL and numeracy</th>
<th>Accessed in-house education and online local authority provision. Attendance 100% for ESOL and 80% for numeracy</th>
<th>Not applicable due to length of placement</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Social Outcomes</strong></td>
<td>Engaged with the staff team and house parents during placement but no specific outcomes as placement was not long enough</td>
<td>Engaged with in-house social activities, made independent arrangements with friends, attended sports club, youth club and faith-based activities</td>
<td>Engaged with in-house social activities, attended youth club and faith-based activities</td>
<td>Engaged with the staff team and house parents during placement but no specific outcomes as placement was not long enough</td>
</tr>
<tr>
<td><strong>Legal Outcomes</strong></td>
<td>Not applicable due to length of placement</td>
<td>Accessed legal advice regarding immigration and trafficking and a Refugee Council advocate</td>
<td>Accessed legal advice regarding trafficking</td>
<td>Not applicable due to length of placement</td>
</tr>
<tr>
<td><strong>Cultural &amp; Religious, Outcomes</strong></td>
<td>None recorded</td>
<td>Supported to find and attend a place of worship</td>
<td>Supported to find and attend a place of worship</td>
<td>None recorded</td>
</tr>
</tbody>
</table>

*Names changed to protect the children’s identities.

**Monitoring the impact of CSSW**

A comprehensive monitoring system is always important, particularly for a pilot project. Our aim was to contribute to the growing evidence base of what constitutes high quality, effective care for this highly complex and vulnerable group of children.

To measure and report outcomes, a comprehensive monitoring framework was developed to evidence progress and ‘distance travelled’ for children placed at CSSW. This framework was developed by a researcher specifically funded to monitor, analyse and report on outcomes from the home in conjunction with Unseen’s senior leadership team, the registered manager and our external steering group.

The objectives of the monitoring system were to:

1. Objectively measure outcomes for children accommodated at the project.
2. Collect data that may show early indicators that children are at risk of going missing, returning to the traffickers or placement breakdown.
3. Collect data that may enable the identification of indicators that the child will engage with support, begin to recover from their experiences, become resilient and be able to ‘step-down’ to a less intensive placement such as foster care.
4. Collect data that may enable recommendations to be made about compatibility assessments to ensure that children placed together have the best chance of thriving.
The monitoring framework had two elements. Internal tools were developed specifically for the needs of trafficked children, while external tools were chosen because they represented best practice in health and social care for measuring distance travelled for children in care, plus the impact of psychological intervention and risk. (We reflect on the challenges found in collating aspects of this data later in this report).

The monitoring tools captured data for every child at specific points in time (24 hours, 72 hours, one week, one month, three months and six months). The steering group and staff identified realistic indicators of success within the first 24 hours, given that these children may have experienced significant trauma, been separated from their families, entered the care system for the first time and may have little or no understanding of English. This allowed us to draw comparisons between different children.

We also captured data for the same child but at different intervals throughout their stay, so we could measure individual progress and distance travelled for each child, as well as use the data comparatively between children.

The main aims of the monitoring system were therefore to:

- provide a comprehensive assessment of young people about whom little was known prior to arrival
- inform individual support plans and therapeutic interventions
- monitor the progress of young people during their stay
- evidence outcomes using both qualitative and quantitative measures
- evaluate the quality of care provided for the child and at the project level

CSSW staff took advice from professionals, including those represented on the steering group and our internal researcher, as to the best methods of monitoring and evaluating progress made by each child at the project as well as utilising monitoring used by Unseen at other projects. Full details of the internal and external monitoring tools developed and used at CSSW can be found in the appendices.
**Safety, Hope, Choice, Coping and Resilience outcomes**

The diagrams show how Sam and Sarah felt about their safety, ability to feel hopeful, to make their own choices, to cope with challenges and how resilient they felt about everything that was going on. They were asked about these feelings upon arrival and just before they were due to move on. A score of 0 would indicate that the young person has no hope for the future, does not feel safe or has no choice at all in decisions made for them. A score of 10 would indicate that the young person is very hopeful, has lots of choice and their wishes and feelings are always taken into account by decision-makers and they feel totally safe.

*1 is a low (negative) score, and 10 is a high (positive) score

Sam felt more hopeful, able to cope better and felt more resilient by the time he came to leave. He did, however, feel his choices had declined during this time. This was linked to his feelings of frustration over decisions made about his care – relating to going out alone, spending money unsupervised, his access to education and the time it took for him to move-on. Staff assisted his voice to be heard in these matters with his social worker, but Sam was left feeling that he had limited choices.

Sam also reported feeling more hopeful about his future at the end of his placement and his coping score showed consistent improvement in how able he felt to cope with his emotions, problems, and challenges. When Sam arrived with CSSW he said,

‘I cope by not letting my feelings out, but at night-time it’s hard’.

By the time his placement was drawing to a close, he told staff,

‘I am coping well and if something is bothering me I tell staff. I feel really happy about the future and changes that will be happening’.
Sarah felt safe at CSSW from the moment she arrived and told staff:

‘I was feeling scared and unsure in the first week, but I do feel safe here’.

When Sarah’s placement was ending, she commented that

‘I am feeling safe, I like very much the house, staff and activities’.

Throughout her placement at CSSW Sarah reported increased ability to make her own choices, being more resilient and feeling that she was able to cope better.

‘At first, I was confused about why I’m here, but now I understand. I always have choice and I’m very happy here, but I do want to go back to Romania’.

Both children’s exit and transition into follow-on care were planned and both had visited their next placements ahead of moving out.

**Exit questionnaire outcomes**

The CSSW exit questionnaire involved 21 questions and children were asked to score their experiences from 1-5, with 1 being low and 5 being high. Out of a possible score of 105, both Sam and Sarah recorded a score of 93. Sam gave the highest possible score for 12 of the questions and Sarah gave this on 18 of her questions. Sam’s lowest score was for the question: ‘Do you know where to go if you need help?’ Sarah’s lowest score was recorded for: ‘Did you get access to support outside the house?’

Both Sam and Sarah reflected they found lots of things helpful about CSSW.
Sam said:

‘Lots of things have been helpful and I have had lots of successes whilst being here. I think teamwork could improve, and I found my freedom and a lack of money a challenge’.

Sarah said:

‘You helped me have a doctor, dentist, optician, improve English, be safe in the house and lots of different activities like cooking. I found the language challenging when I arrived, however, my English is getting better now because I’m studying it’.

**Behaviour, Emotional Well-Being, Relationships, Risk and Indicators of Psychological Distress (BERRI) Assessment outcomes**

This is an industry-respected tool for identifying distanced-travelled, and correlates progress with significant life events. Only Sam was at the home long enough for more than one BERRI to be completed for comparison. BERRIs were completed in team meetings after discussion with the whole staff team to ensure that consensus was reached for each score. Sam was given a score for the level of difficulty he was experiencing and the frequency with which he was experiencing that difficulty. Sam’s challenges were identified as: emotional well-being, relationships, behaviour, risk and psychological indicators.

**Sexual Exploitation Risk Assessment Framework (SERAF) outcomes**

Only Sam’s placement was long enough to complete more than one SERAF for comparison during his time with CSSW. According to the SERAF, his risk of sexual exploitation on entry into the service was rated as 20 (this is classed as category 4, meaning ‘significant risk of sexual exploitation’), and his risk on exit was 6 (category 2, meaning mild risk of sexual exploitation).

Sarah’s initial SERAF score was 1 when she entered CSSW, which indicated she was at low risk of sexual exploitation. This could be as a result of her being intercepted ahead of any exploitation occurring in the UK. No score was recorded for her ahead of exiting the placement.

**Well-Being Survey outcomes**

When answering questions about his emotional well-being, Sam showed an increased well-being score every month he was at the home except for the final month, which, alongside the BERRI data, suggests that this was influenced by his up-coming move-on and change in placement.

Sarah’s overall well-being score increased over the duration of her placement at CSSW.
Feedback from the Children

‘I want to stay here until the police finish their investigation about my process’

‘I was scared and unsure when I first came, but I feel safe here’

‘I feel free to decide now. I want to go to school, learn English, find a job’

‘Right now, I feel very good. I had a good night’s sleep and good dreams’

‘Waiting for (the social worker) to give me my freedom. Freedom is important. I will be better when I get my freedom. I really like to do the things we do together, but I want to do some things on my own’

‘You have helped me to have a doctor, dentist, optician, improve my English, be safe in the house, go to Church, do a lot of different activities, cooking and having an advocate’
John described feeling ‘peaceful and calm’ and wanted to stay. He spent time with the team and was only in his room to sleep. (John was a 17-year-old Vietnamese boy who stayed for 24 hours before being moved by his social worker to supported accommodation).

Sam said he particularly liked the house because it was ‘warm’ ‘big’ and ‘clean’, with staff whom he described as ‘nice’ and ‘friendly’. The people, the house, his Church, and his friends at Youth Group were cited as reasons he wanted to stay. Generally, Sam reported feeling ‘good, sometimes sad’ but over time - particularly after the staff worked with Sam to support him to go out on his own - he felt ‘very good’, ‘much better’ and ‘really happy’.

Initially, when asked about sleep, Sam reported that he had difficulty getting to sleep (until ‘about 3 or 4 am’) but after a specific intervention (therapeutic interventions including sleep hygiene and relaxations sessions) he reported sleeping ‘much better, getting up much earlier’ and sleeping ‘very well’.

Sam enjoyed going to a local shop where they sold food from his country of origin and he was able to talk to the shopkeeper in his native language.

Sam felt he had a lot of choice over his day to day life in the house e.g. choosing activities, meals etc, but also felt very frustrated at the lack of say in decisions made by social care. Sam did not express a desire to leave until the final month when he said he felt ready to be independent.

Sarah felt safe and enjoyed being at the house, although long-term wanted to return to her family in her country of origin. In the first week, she reported she was sleeping badly but after a month she reported this was ‘very good now’.
Evidence that CSSW created a ‘safe family environment’ for all children

The table below summarises the key components and indicators of a safe family environment and the project’s successes and performance against each.

<table>
<thead>
<tr>
<th>Indicators of a ‘safe family environment’*:</th>
<th>Outcome:</th>
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<tbody>
<tr>
<td><strong>Health</strong></td>
<td></td>
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<tr>
<td>Diet and exercise</td>
<td>100% of children offered a healthy, balanced diet.</td>
</tr>
<tr>
<td></td>
<td>100% of children took part in morning meetings with a focus on personal, social, health and economic education, including information on a healthy lifestyle.</td>
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<tr>
<td></td>
<td>Note: The Regulation 44 Visitor noted that the child resident at the home during their visit was supported to achieve a very healthy lifestyle, with lots of opportunity for exercise through shared activities with staff, and healthy eating with meals eaten together as a family.</td>
</tr>
<tr>
<td>Access to health services</td>
<td>100% of children at the project for longer than one week registered with a GP, optician, dentist and were assessed by the LAC nurse.</td>
</tr>
<tr>
<td>One or fewer accidents / injuries per year</td>
<td>Rigorous health and safety measures implemented in the home in line with Children’s Homes Regulations (England) 2015 and monitored by Ofsted. There were no accidents and no serious incidents reported.</td>
</tr>
</tbody>
</table>

**Emotional and social well-being**

| BERRI, well-being survey, internal monitoring of hard and soft outcomes relating to social and emotional well-being | The two children placed for longer than one week completed monitoring tools to assess baseline emotional and social well-being on entry and on exit to measure the impact of service delivery. |
| Support with religious observance         | All children supported with religious observance if desired and to access an appropriate place of worship. |
|                                           | Note: The home was praised for supporting children’s cultural, social, and religious needs by both Ofsted and the Regulation 44 Visitor. |
| Support network                           | Two children on longer placements referred to external agencies and given move-on support. |

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<table>
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<tr>
<th>Part 5: Outcomes for children</th>
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<tr>
<td><strong>Friendships with peers</strong></td>
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</table>
| **Positive relationships with staff** | All children expressed satisfaction with their placement and repeatedly commented on their positive relationships with staff in monitoring tools that gathered qualitative data.  
Note: The strength of these relationships were recognised by Ofsted and the Regulation 44 Visitor. |
| **Incidents (missing, challenging behaviour, drug and alcohol misuse, self-harm, suicide)** | One child had one incident relating to unplanned contact with family, which was comprehensively reviewed, and a risk management plan was put in place. One child had one incident relating to concerns over fasting and whether this was linked to emotional well-being rather than religious observance. Staff and the child were guided by the multi-agency team to support her with this. |
| **Cognitive development** |
| **PEP meeting within 2 weeks** | One of the challenges faced by staff was ensuring that the local authority provided a PEP within the 2-week timescale, and staff repeatedly advocated for this. This is a duty put upon social workers to arrange. CSSW advocacy for PEP to be put in place was achieved for one child. |
| **Access to appropriate education within one month** | Two children who stayed at the home for longer than one week accessed appropriate education (a combination of in-house educational sessions and online tuition provided by the local authority). |
| **Attendance** | Attendance for both children on longer placements was good: one child was 100% for English and Maths and the other was 100% for English and 80% for Maths. |
| **Making progress with literacy and numeracy** | Both children had baseline assessments and made good progress with literacy and numeracy.  
Note: Ofsted commended the home, observing tangible improvements in one of the children’s written and spoken English in a short space of time. The Regulation 44 Visitor was very helpful in improving the recording of educational sessions and capturing the child’s feedback and adapting support accordingly. |
| **Parenting** |
| **Parental warmth (nurturing)** | Both children who had planned placements (rather than short emergency placements) felt that staff were kind, caring, listened and helped them, which was captured repeatedly in the monitoring tools.  
Note: The Regulation 44 Visitor felt that the quality of these relationships had a direct impact on the well-being of the children. The live-in house parents were volunteers which undoubtedly helped children to feel genuinely cared for. |
**Part 5: Outcomes for children**

| Low conflict | There were no incidents of conflict between children and staff, such as verbal or physical aggression. Both children described staff as supportive and said they felt truly cared for.  
Note: Ofsted noted that the home never needed to implement any sanctions or use any physical restraint.  |
|-------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Trust       | Staff and house parents were highly skilled and building nurturing relationships with children in their care and created an environment built on mutual respect and trust, which had a positive impact on health and emotional well-being.  
Note: these strengths were identified by both Ofsted and the Regulation 44 Visitor.  |
| Participation in shared activities | The number of hours of face-to-face support, high staffing levels and the volunteer live-in house parents enabled lots of shared activities between children and the adults looking after them. Shared activities also empowered children to make choices, pursue their own interests and enhance their enjoyment and life chances by learning new skills.  
Note: The Regulation 44 Visitor noted that children particularly enjoyed these activities and felt they strongly contributed to the positive relationships observed between children and staff.  |

**Summary**

Due to the small numbers of those accommodated within the project we have been unable to analyse the data collated to look for trends that can be extrapolated for all trafficked children. This is not to say that we are unable to see the impact of the placement on the children accommodated and supported. The team worked hard to ensure their voices were captured and understood and this shows through in the data captured.

The overarching success of this project was that none of the children experienced any missing episodes. In addition to this, there were no serious or notifiable incidents, including no incidents of violence, physical or verbal aggression, self-harm, drug or alcohol use. No behaviour management strategies were implemented, no sanctions imposed, and no physical restraint used. Successful transitions (move-ons) occurred to less intensive placements, showing that the children’s needs and risk had significantly reduced during their time in the home. Another overarching success of the project was the children’s experience of the home and what they felt about the care they received.

‘My life has been decided by adults, but here I have lots of choices in the house (food, activities, clothes)’.

Sam
Part 6

Feedback from Ofsted and CSSW staff
Feedback from Ofsted and staff

Feedback from Ofsted

One of the positive outcomes of this project was successfully gaining Ofsted registration. This model of care sat outside normal provision models in the UK and the specific needs of this population group were not well known to them. Unseen worked closely with Ofsted to help them understand the duty of care for trafficked children, explain why the more familiar models of residential care and foster care were not meeting their needs, and evidence why the pilot was needed - particularly the initial intensive safeguarding period, the home’s security features, and the need for house parents. Gaining registration enabled Unseen to test if the CSSW model did indeed keep children safe.

The home was highly praised for the work being done with children. The Ofsted Inspector noted that:

‘Care is specific to the unique needs of children. Relationships between children and staff are based on mutual respect. Staff are dedicated to providing the most positive experience for children and enhancing their life chances’.

The Inspector particularly noted that the house parents’ and staff’s ability to share skills, activities and dedicate lots of time to the children enabled the development of very positive relationships. The home was also praised for developing specialist resources and for the provision of interim education.

The Ofsted Inspector stated that staff were knowledgeable about the specific risks associated with trafficked children and praised this aspect of care. They felt the project successfully:

‘negotiated a fine balance between keeping children safe and responding to their need for freedom from constant supervision outside the home. Comprehensive risk assessments are in place and agreed by all agencies involved and staff are clear about what to do if children go missing’.

Multi-agency working was identified as “a particular strength of this home”, which the Inspector recognised was essential in promoting the safety and welfare of trafficked children.

The quality of the home itself was consistently praised by children and visitors. Ofsted noted that there must be a balance between complying with relevant health and safety regulations whilst maintaining a homely, domestic feel, and commented that the visibility of health and safety notices and privacy film on the windows, whilst understandable and needed, detracted somewhat from this.

Meeting the cultural, religious and language needs of children from outside the UK was embedded in the ethos of the support provided, and Ofsted noted that staff were instrumental in supporting children with these needs and provided specialist resources to do so.
One child’s attendance for education classes was 100% for the duration of his stay (6 months), and the other was 100% for ESOL classes and 80% for maths (over 2 months). The Ofsted Inspector noted in their written report that Sam’s written and spoken language skills had improved significantly in a short space of time.

Both children who were at the project for more than one week were registered with the local GP and referred to the LAC nurse within the first week and Ofsted noted that Sarah was now in receipt of long overdue dental care, optician and immunisation assessment. Both Sam and Sarah were taken to the dentist and the opticians within the first month.

Ofsted reported that the project had not needed to implement any specific model to manage challenging behaviour as no children had gone missing or tried to go missing, and no sanctions or physical restraint had been imposed. The inspector noted:

‘(the child) is calm and considered and will discuss problems or discontent, which staff do their best to resolve’.

**Ofsted Rating**

At the time, CSSW was the only specialist provision for trafficked children registered with Ofsted. To date, we are unaware of any other provision that is registered with Ofsted specifically to provide care for trafficked children.

Post-inspection, CSSW was classified as ‘**Good**’.

The three strands of inspection and CSSW rating were:

- Overall experiences of the children and children: **good**
- How well children are helped and protected: **good**
- Effectiveness of leadership and managers: **required improvement to be good**

The inspection confirmed that the home provided the services specified in the Statement of Purpose and fulfilled the expectations of the placing authorities.

The improvements required within the various aspects of the home were addressed by the Unseen and the staff team within a month of the inspection, and Ofsted’s recommendations given formed the basis of CSSW’s improvement strategy.

**Feedback from Regulation 44 Visitor**

The Children’s Homes Regulations (2015) require that an independent visiting officer (Regulation 44 Visitor) visits the home at least once a month to observe the care provided. The Regulation 44 Visitor checks that the home has an effective approach to behaviour management, including regularly examining records of restraint, logs of missing person’s reports and other incident reports, and checks that the home is providing stable, safe and secure care.

The Regulation 44 Visitor felt that the presentation of the home was excellent, and the project was providing a high quality of care.
Observation of the staff team during visits concluded that they were focused, motivated, child-centred, supportive of each other and the children in CSSW’s care. The Visitor noted that the team was:

‘creative in providing specialist resources for a particularly vulnerable group of children’.

The Regulation 44 Visitor recognised that the home supported children with a wide range of issues including immigration, building local networks, accessing education and learning life skills, and supported the child with the uncertainty in their life as a result of these. The momentum of progress was being maintained by helping the child achieve key tasks. The Regulation 44 Visitor also noted for Sam that:

‘The young person’s views are being heard and shared with decision-makers and his more relaxed demeanour may be as a result of being heard and seeing some changes in his situation’.

Having met Sarah when she had first arrived, the Regulation 44 Visitor remarked that on subsequent visits she seemed:

‘…happier, trusting and assured in her relationships with staff and volunteers’.

During their final visit, the Regulation 44 Visitor commended the project for several successes. The four children placed at the project had positive experiences and were kept safe, for which staff should be ‘applauded’. The Visitor also felt that the live-in volunteers made a significant difference to the children’s lives, providing positive relationships. They were praised for managing the parental role and navigating the challenge of how this role worked alongside staff.

The staff team were noted for their determination to meet the needs of the children and:

‘children were provided with a strong base from which they can develop’.

The Regulation 44 Visitor praised the translation of key forms into children’s first language to support communication and their understanding of the home’s work.

The Regulation 44 Visitor also specifically commented that the trust staff had built up with Sarah was important to counteract the ‘pull’ away from the home potentially created by limited telephone contact with her mother. This trust was also a significant factor in supporting her with both fasting and the provision of sex education.

The Visitor felt the end of the pilot was managed well and that careful thought was given to ensuring the well-being of the children was not affected. Consideration was also given to the staff team.
The Regulation 44 Visitor recommended the following be addressed in any subsequent provision:

- **PERMANENCY PLANNING**: Needs to be embedded into any future service to ensure the local authority fulfils their obligations. For example, if the home is identified as a short- or medium-term provision, it must assess the needs of high-risk children immediately after they are rescued or identified, then a plan needs to be made for their future as part of the ongoing needs and risk assessments.

- **RECORDING**: Future teams need to ensure they evidence all communication undertaken on behalf of the children and where advocacy has occurred, ensuring the child's voice is included throughout. A review of the paperwork and recording system should be undertaken in preparation for future provision. Good work was being captured but could be improved by ensuring the key self-reflections and opinions shared with staff and house parents during activities and mealtimes should be recorded as they occur.

- **COORDINATION WITH SOCIAL CARE**: Staff need to evidence their knowledge and understanding of care legislation and regulatory frameworks.

‘Children with distinct cultural needs can be at risk of institutional discrimination with childcare and education. The useful learning experience from this pilot will hopefully contribute to a wider understanding of the needs of this group of children and young people’.

Regulation 44 Visitor

**CSSW team reflections and feedback**

The staff team were hugely significant in delivering this project, so Unseen wanted to include feedback and learning from them, gleaned from interviews and a project closure meeting. The overarching themes from their feedback have formed the basis of this chapter.

As this project was Unseen’s first experience of working with Ofsted, within the parameters of the Children’s Act and directly providing support to children, we also conducted an in-depth internal review to learn about the operational challenges CSSW manifested, in order to ensure these can be addressed in any future provision.

The biggest strength of the project was the impact on children. Staff unanimously agreed that the quality of support provided, and the quality of the relationships built between the staff and house parent’s and the children were excellent. This is also consistently reflected in the feedback from the children, Ofsted and the Regulation 44 Visitor.

The team also offered further reflections and feedback on the model, the referral process, working with local authorities and the training they received, each of these areas is summarised below.
Feedback on the CSSW model

- Positive relationships with children and extremely high quality of support resulted in excellent outcomes for children. Staff and house parents reported that they gained a lot of personal satisfaction and valuable experience from these relationships as well as the clear advantages for the children.
- Many of the staff commented that the activity budget for the home was generous in comparison with other places they have worked, and shared activities were encouraged and budgeted for. This contributed to the warmth of relationships between adults and children and was beneficial for all.
- The quality and positive atmosphere of the home was consistently cited by all staff, children and visitors as a significant strength - with one child reporting it was “5 star!”. This was achieved through the generosity of funders, the commitment of Unseen to providing quality care and the dedication, passion and empathy of the whole team.
- The CSSW team felt that staff diversity was a strength of the project and met the needs of the children being placed.

Suggestions for any subsequent provision:

- Consider immediate crisis care for the crucial 72-hour period, rather than long-term placement – this could be a type of assessment centre model.
- Should continue to provide familial and supportive environment.
- Partner with ICTGs to provide this service.
- Work in greater partnership with Barnardo’s, ECPAT and Children’s Society.

Feedback on referrals

- There were too many unknowns in relation to referrals – LAs advised the project was needed, however not all keep accurate records of the numbers of trafficked children being identified and placed. Police activity often results in the identification of trafficked children, but activity undertaken is not always coordinated or in partnership with LAs, so there is no prior warning that placements might be needed. Training for social workers is not mandatory so it is hard to know if trafficked children are being correctly identified. Each of these issues impacted on the ability to accurately establish numbers of potential referrals.
- Once listed on commissioning frameworks, we were inundated with inappropriate, generic referrals. We would not choose to continue to be part of these.
- We would require either a commissioned model that would pay for the service regardless of referrals and/or get an increased commitment from LAs to refer to the service as the first port of call when identifying a trafficked child.
- We would need to work with LAs to assess the appropriateness of current commissioning frameworks for such a specialised service and how to best commission services regionally and nationally.
• We did not accept UK national children as referrals at CSSW as this was not the gap this service was intended to fill. However, with referrals being low and increasing numbers of UK children being identified as trafficked, consideration should be given to how a service would work for both UK and non-UK national children and consider any differences these cohorts may require in a placement.

**Relationships with Local Authorities**

The main challenge, cited by all staff, was the lack of referrals to the project. Twenty-four referrals were made in 12 months, and only four were suitable and accepted. Some were suitable referrals but were placed elsewhere. Where possible, the Registered Manager explored this with the relevant social worker and the reason given was always to place in foster care first. This decision was sometimes openly motivated by cost (and likely always to be motivated by cost), together with a lack of understanding of both the high risk of trafficked children going missing and being re-trafficked and of the significant harm caused by re-trafficking. The team, understandably, found this frustrating when a provision such as CSSW was available and they were ready to accept and support placements.

**Suggestions for any subsequent provision:**

• Offer training packages to all LAs and social care teams so more awareness is raised of the issue and of the provision of the service.

• Ensure this training is accessed by frontline social workers so they can advocate for placements as appropriate.

• More comprehensive advertising strategy required to ensure the service is well known and the provision being offered is understood.

• Consider if Ofsted registration is needed.

• Consider how the project could receive referrals outside of LA pathways.

**Feedback on monitoring tools used**

Assessing and monitoring children's needs and outcomes were particularly challenging without an in-depth assessment on each child provided by social care prior to placement, as would be available for most other looked after children. The numbers of children placed at the project were not enough to allow us to assess how valid or reliable the measures used were, or how predictive any of the scores might be of children going missing. However, they were useful tools for assessment, support planning and monitoring progress and outcomes for individual children. The level of engagement with the tools from children was high, with only one refusal to complete, which would suggest that the monitoring was not too intensive or intrusive.

**Suggestions for any subsequent provision:**

• The monitoring process could be further refined by creating online forms, which can be completed and submitted more effectively and could be completed by children and staff using a tablet or laptop. This might also be more engaging for young people and staff who could get immediate feedback by seeing their scores converted into star diagrams. It would also facilitate discussion between children and staff about progress and challenges, thus making the tools more therapeutic.

• Combine some of the monitoring elements so that it is not burdensome on the child or staff. This would also ensure staff remained engaged with the process and don’t experience monitoring fatigue.
‘Local authorities are responsible for safeguarding and promoting the welfare of all children in their area, including child victims of modern slavery. The department’s statutory guidance for local authorities on care of unaccompanied migrant children and child victims of modern slavery is clear on authorities’ duties to work with local partners to protect child victims of modern slavery from further risk from their traffickers and preventing exploitation from taking place’.

Baroness Berridge99

99 Berridge. 2020, Children in Care: Human Trafficking. Department for Education written question. They Work for You. Available at: https://www.theyworkforyou.com/wrans/?id=2020-02-25.HL1874.h&s=trafficking
Part 7

Unseen's reflections and recommendations
Reflections and recommendations

‘There’s an unprecedented squeeze on local authority funding. I wouldn’t change anything about the model, in a different economic climate it would have had referrals’.

Member of the Steering Group.

Overarching Issues

There are overarching issues with the UK’s childcare system that stretch far beyond trafficked children. Whilst this report focuses on Unseen’s experience of developing and testing CSSW specifically for non-UK national trafficked children, some of the challenges faced, reflections and recommendations proposed here could be extrapolated for other cohorts of children in care. We acknowledge this country is in a time of austerity where services are stretched, so any proposal moving forward must address the cost to the public purse, achieving comparable spends or saving money as well as providing better outcomes for children.

Our overarching learning will come as little or no surprise to many. The UK has an overstretched, understaffed and under-resourced social care sector that cannot fully assess, understand and effectively provide for the needs of many children, including those who are trafficked.

The current structures in place are failing children. There needs to be a full and frank critique of the systems in place – for example, who holds the decision-making process, reviews of the decisions being made, and the budgets attributed to the care of vulnerable children. Unseen believes the system must change if we are to truly offer vulnerable children the care and support they need and deserve.

We need to get to a position where LAs can afford to have a full range of appropriate provisions for trafficked children and where they are the ones driving and commissioning services. Offering a service to LAs that they don’t have to use (either because they consider it to not be in the best interest of the child, or based on provision type or costing), means that trafficked children are still not getting the support they need and are ending up as missing persons, often not re-found. There must be an entire system-change in attitude and approach to this population group. This will not be an overnight fix.

Throughout the delivery of CSSW, we learned that there is little or no joined-up thinking or collaboration when commissioning children’s services and placing children who have been trafficked. Front-loading the system by ensuring appropriate placements and support are available from the moment of first interaction, followed by ascertaining need and support required and then creating a multi-agency appropriate pathway is what needs to occur – not the current situation of waiting until a child goes missing before querying if they may have been a victim of trafficking. Once a child goes missing it is likely they have gone back to another exploitative and dangerous situation.

Through the running of CSSW we found a) social workers had insufficient training to correctly identify trafficked children, b) there was a lack of understanding of trafficked children’s needs, c) in a time of austerity cost was factored into placement decisions and d) a lack of availability of appropriate placements.
Research highlights the UK’s failings to properly identify and subsequently safeguard trafficked children. Numerous reports comment on the number of children who, once identified, placed or assigned an independent child trafficking guardian (ICTG), end up going missing from care. As a result, multiple agencies have called for urgent attention to be given to this issue.

Trafficked children going missing from care is not a new phenomenon and yet it appears to be an issue we are not responding collaboratively or effectively to. The consensus appears to be that there is a lack of available, local and specialised support for trafficked children. Unseen proposes this will be a factor that contributes to the large numbers of children who go missing from their placements.

There is also debate as to what constitutes good practice when supporting non-UK national trafficked children. The research proposes that placements and services offered are not appropriate or meeting the needs of those who are trafficked and that specifically commissioned and designed programmes for this cohort are required.

**Key barriers to providing trafficked children with suitable placements and specialist services are:**

- the limited availability of specialist provision available (as opposed to more generic provision for vulnerable children)
- a lack of resources and specialist knowledge within local authorities and partner services
- a resource pressure for children who are aged 16-17
- challenges or gaps in information sharing between local authorities

**CSSW Model**

Throughout 2018, CSSW provided accommodation, support and care for a small cohort of trafficked children. CSSW allowed Unseen to take on board the recommendations and issues identified from previous research. This, along with the support and funding from the Home Office Child Trafficking Protection Fund and privately sourced donations, allowed Unseen to test, in conjunction with partners, and pilot a new model of care, specifically designed for non-UK national trafficked children.

None of the children accommodated at the CSSW pilot project went missing, which is significantly different from the national average for trafficked children placed in care. Two children successfully transitioned to less intensive placements (one to foster care and one to independent living) showing that the children’s needs and risk had significantly reduced during their time at CSSW.

There were no serious or notifiable incidents, such as verbal or physical aggression, self-harm or drug and alcohol use. No behaviour management strategies were implemented, no sanctions were imposed, and no children were physically restrained. Quantitative and qualitative data collected during the pilot

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101 Cordis Bright. 2017. p. 22
102 Cordis Bright. 2017. p. 22
104 See list of Funders that contributed to this project on page 2
show significant gains in health, emotional well-being, education, risk reduction, legal, social, cultural, and religious outcomes.

As a pilot project, CSSW was demonstrably successful for the children accommodated and whilst the number of children referred, placed and supported was lower than we had anticipated, this should not detract from the effectiveness the model of care provided for these children. The model and its success for the children placed showed the advantages of overcoming the key barriers identified by previous models and research:

- offering a specialised provision for trafficked children
- having a dual staffing model (house parents and staff team)
- a trained and dedicated team with resources and specialist knowledge
- specific safeguarding and protective measures in place
- the voice of the child included in the provision of care
- on-going and consistent face-to-face support
- consistent, trusting relationships with those who were supporting them
- assistance to integrate into the local community
- support to access the services they required.

### Recommendations for the CSSW Model

**Unseen recommends:**

1. Building on the CSSW model and developing a specialised residential support service that is, at a minimum, to be the primary placement for all potentially trafficked non-UK national children for the first 72 hours post identification.

2. Any specialised residential support services development phase must include law enforcement representatives, specifically concerning the use of police protection orders within the first 72 hours as a protection mechanism.

3. Until such a time as this service is available, that all placement decisions for trafficked children need to be reviewed and independently assessed to ensure learning is gained from successful and unsuccessful placements. Consideration should be given to an external independent body holding failed placement decisions to account. This would ensure learning is captured as to why placements for this cohort fail.

4. Independent child trafficking guardians (ICTG) should be involved in the development of the recommended specialised 72-hour service and ensure clear pathways and referral mechanisms between the ICTG and the service are in place.

5. Evaluating any specialised children’s homes developed to demonstrate if such a placement can reduce the number of children going missing and provide safety for trafficked children in the initial 72 hours, and beyond if required.

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105 In England and Wales, police child protection powers concern the powers of the individual local Police forces to intervene to safeguard children. These powers are governed by Section 46 of the Children Act 1989. Under this law, the police have the power to remove children to a safe location for up to 72 hours to protect them from “significant harm”. Police do not require a court order to take such a step.
The need for centrally commissioned services

From Unseen’s experience of running CSSW and the feedback received from the team and other professionals involved in CSSW, there is a need for accommodation and support services for this cohort of children. Replicating CSSW under a commissioned framework would allow for specific provision for non-UK national trafficked children.

As a registered children’s home, the service would be able to provide the first port of call for all LAs who have identified a trafficked child. Commissioning such a model for the initial 72 hours would replicate the care, support and security offered by the CSSW model as well as incorporating the benefits of specialised foster care model, before moving the child on into ‘standard’ LA provision. It would encourage better multi-agency working, allow knowledge sharing about slavery and most importantly, we believe, provide an appropriate initial safe placement from which professionals, in conjunction with children, can work out the next steps. A clear pathway will benefit all involved and, as evidenced by CSSW, has the potential to reduce the number of children who go missing.

If commissioned on a regional and multi-agency basis, central government, LAs and law enforcement could contribute to the service ensuring its sustainability. The model would allow for an initial assessment of the child and a joint strategy meeting held where partners could discuss the best way forward, all the while keeping the child safe. Informed decisions, considering safeguarding needs, risks and the voice of the child could then be made. Linking with ICTGs would also be a necessary part of this model to encourage successful transitions and consistency of support in future placements.

Recommendations for commissioning

Unseen recommends:

6. Consideration is given to a nationally agreed provision of initial care and support. A similar structure and mechanism to the adult support contract for victims of slavery should be considered.

7. A specialist service is made available to all LAs. The specialist service must be designed and developed in conjunction with Government (and relevant departments), local authorities and law enforcement. The service needs to be provided on a per-region basis with a centralised commissioning and funding framework established.

8. This specialist provision must be ring-fenced for trafficked children who are at highest risk of going missing and who have complex and challenging needs. Commissioning such a model would enable an initial assessment of risk and need in a safe and therapeutic environment before ‘stepping-down’ to foster care or supported accommodation. This could resolve the current crisis of trafficked children being placed in foster care or supported accommodation as a matter of routine while very little is known about them and the children subsequently going missing.

A preventative and cost-saving approach

There needs to be a change in approach to supporting and housing trafficked children. There needs to be more acceptance and understanding that they may not have been part of the care system before identification and no agency will have information about them. Part of any initial placement should be to spend time working with the child to understand the risks they are facing and the safeguarding needed.
Whilst the support offered via CSSW and proposed for a 72-hour specialised service may cost more initially, Unseen believes it will save money long term because the child will be better supported and will reduce the likelihood and cost of a missing person case.

Early and correct intervention will save money in the long run. The over-reliance on foster care placements and supported accommodation for financial reasons must change because these types of provision do not meet the needs of trafficked children. These placements are undoubtedly successful for some children, but more research is needed to understand the risk factors for children for whom foster care/supported accommodation is not appropriate. The reluctance to pay for placements for children who are not UK nationals and who are aged 15 or older also needs to be addressed.

Unseen argues that adopting a preventative approach would have benefits for children as well as the public purse, instead of waiting for placements to fail and children to be put at risk of re-exploitation. Research reports between 27%-60% of trafficked children go missing from care. The UK identified 3,137 trafficked children in 2018, and the cost of every missing person investigation is between £1,325.44 and £2,415.80. For the purposes of this report, if we extrapolate these figures, taking the lowest percentage of children we expect to go missing (27%), this equates to 847 children who are likely to go missing. Using the cost parameters of a missing person enquiry, 847 children going missing would cost the public purse between £1.12million and £2million.

CSSW and the recommended 72-hour specialised provision cost is comparable to the cost of children's residential placements and cheaper than the cost of missing persons investigations.

For the cost of a missing person investigation, a child could be placed and immediately safeguarded for up 72 hours. Post a multi-agency meeting, this provision could be extended based on a safeguarding, risk and best interest assessment.

### Recommendations to make financial savings

**Unseen recommends:**

9. That the current system, the numbers of children that go missing from placements, and the total cost to local authorities and the public purse must be better understood. More research and data is required to effectively advocate for preventative cost-saving measures.

10. There is a need to evidence and further trial a centrally commissioned, regionally delivered, specialised residential support service that will reduce missing episodes and associated harms so that the cost-benefit of such a model is fully understood.

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106 NCA. 2019. p.19
107 NCA. 2019. p.19
108 Shalev-Greene. 2012. p.26
**Best interest decisions not being made**

During the research and development of CSSW, we spoke with LA directors, commissioners and team members to ascertain pricing models and parameters for children in care to ensure our daily cost would not be prohibitive to placements. Unseen was told on numerous occasions that decisions were made on an individual basis, that the service was needed and that the pricing structure was good value for money and within the range that LAs pay for specialised children’s homes. Yet, once open and able to accept referrals, the price was voiced as a reason for not making a placement. Unseen knows foster care is a cheaper option, but the daily cost of CSSW is comparable to, if not lower than, other children’s homes. The pricing model used was intentionally all-inclusive so that there were no hidden costs or extra charges for LAs to consider.

CSSW encountered best interest decisions being used as an excuse to both cover up professional’s lack of understanding of trafficking and the needs of trafficked children as well as a reason for not deciding to place children with CSSW. A social worker determines if a placement is in the best interest of the child, however in a time of austerity and when other placements are available, we experienced the best interest not being directed by a child’s need but by the finance available. In one case this resulted in a child once placed outside the project going missing. The CSSW team were told that if a child goes missing, the cost to relocate them comes from the policing budget, not the local authority. The inference being that money would be saved by the authority if this was the outcome for a child. It is unclear if this is as a result of LAs being forced into making hard decisions based on austerity measures or if this is a result of deeper systemic issues. Anecdotally, non-UK national children have been known to receive reduced access to the services they require, and institutional racism has been reported.

Money spent up-front on correct placements could reduce the need for missing person enquiries, and, we suggest, be a better way of spending money in the first place. We must challenge and tackle the rhetoric of trafficked children being one specific agency’s problem to deal with or one agency’s budget being impacted. We need to view the whole cost to ‘UK PLC’ as well as the cost to the child.
**Recommendations for best interest decisions**

**Unseen recommends:**

11. Best interest decisions, where possible, must include and seek the opinion of the child being placed. They must be at the centre of placement decisions. To do this effectively, appropriate placement options must be available to frontline professionals. Keeping a child safe initially via a CSSW model would allow this to happen.

12. Placement decisions cannot be made based on cost. Further investment is needed in robust and specialist support provision for trafficked children. A way must be found to reduce the resource pressure on local authorities that is leading to inappropriate placement options being available, poor placement decisions being made, and subsequent missing episodes of trafficked children.

13. If a trafficked child goes missing from any placement, this should be subject to external review to understand if the placement truly was in the best interest of the child and made in a multi-agency manner.

14. Specialised training for the sector and those who are responsible for making placement decisions is critical and must be mandatory. The sector must be educated about the needs of trafficked children and how these needs should be met, taking into account the age of the child at referral and the differences between a foreign national trafficked child and a UK national who has been involved in the care system for some time. Training must occur throughout social worker and law enforcement degree and training programmes and continue as a standardised element of professional development.

**Age of trafficked children**

There needs to be a change in approach to supporting and housing children of care leaving age who have been identified as trafficked.

A lot of non-UK national trafficked children in the UK are 15+. It is around this age that social care starts looking to reduce the support they are giving UK national children who have been in the care system and transition them into semi-independent and independent living. LA budgets for this age group do not account for trafficked children needing safe accommodation rather than a foster placement. For trafficked children, with no interaction with agencies until the point of identification, this model and step-down approach does not work. And yet, on the ground, it appears that once a certain age has been reached the support that a child is offered is not based on their needs but getting them on a pathway to independence. Using age as a measure for appropriate placements for trafficked children should be reconsidered; a trafficked child, unknown to any authorities at the time of identification will require more support than current placements can offer.
The Unseen team were told that for a child to be placed in a residential setting they would have to have experienced multiple failed foster placements. Due to the urgency and the complex nature of trafficked children’s needs, the fact little is known about them at the point of identification and the risk of missing incidents many trafficked children will not be in the system long enough to have multiple failed placements. Specialised residential settings should be considered as viable options for this cohort, regardless of their age.

Recommendations for age considerations

Unseen recommends:

15. Children who have been trafficked need to be correctly identified and appropriate placements made available to them, regardless of their age.

16. A change in approach to supporting trafficked children of care leaving age is required. Specifically, there needs to be more understanding and acceptance that trafficked children need to be treated differently because they will not have been part of the care system before and no agency will have information on their case.

17. A clear pathway needs to be developed that includes standardised intervention points that allow trafficked children access to the support they need in the timeframes they need it. Standardised referral mechanisms and consistent availability of appropriate support services are needed.

Working with Ofsted

Ofsted had not registered a provision for trafficked children before registering CSSW. Nor had it registered a provision that employed a mix of a paid staff team and voluntary house parent roles. The oversight and accountability Ofsted afforded the project, whilst it was laborious at times, was certainly beneficial.

Ofsted is responsible for ensuring all elements of the children’s homes standards are met, in line with the Children’s Act 109, The Care Standards Act (2000)110, the Children’s Homes Regulations (2015)111 and the Guide to the Children’s Homes Regulations including the quality standards112. For CSSW to be registered as a children’s home we had to evidence we met the relevant legal requirements, care principles and nine quality standards in the legislation and guidance.


Ofsted standards and regulations rarely refer to trafficking and modern slavery. Whilst trafficking is referred to in Statutory Guidance on Missing from Care\textsuperscript{113} and Working together to Safeguard Children\textsuperscript{114} it is infrequently mentioned, if at all, in other documents. For example, slavery and trafficking are not present in the following guidance; Transition to Adulthood for Care Leavers\textsuperscript{115}, Promoting Education in Looked After Children\textsuperscript{116}, Promoting Health and Well-Being of Looked After Children\textsuperscript{117}, Care Planning\textsuperscript{118}, and Placement and Case Review\textsuperscript{119}. Nor is it mentioned in the Guide to the Children's Homes Regulations including the quality standards section titled 'Policies for Protection of Children'. Trafficked children will have specific needs relating to their experiences of exploitation that will need to be considered in addition to standard practice. It became very apparent that CSSW was working within a system and with professionals not cognisant of, or able to deal with, the issues surrounding trafficked children.

### Recommendations for working with Ofsted

**Unseen recommends:**

18. Future specialised provisions are Ofsted registered so they offer the accountability, audit and protection function for children and provider.

19. Inclusion of trafficking and modern slavery, its impact and the needs of those affected in all Ofsted guidance, statutory guidance and policy documents produced as part of the standards, regulations and legislative frameworks produced by Government departments, including Ofsted & Department for Education (DfE).

20. Training must be provided to those working in Government departments and regulatory bodies, including Ofsted, DfE, Department for Housing, Communities and Local Government, Home Office and Department for Health and Social Care. This is to ensure slavery and trafficking is understood and can be thoughtfully and relevantly considered and included in future legislation, guidance and policies related to children's care; specifically concerning children's homes.


The complicated and lengthy application process

Aside from this project being new to Ofsted, the application process was also new to Unseen and the process itself presented some considerable hurdles. Applying for Ofsted registration is a time consuming and confusing process. Accessing advice on the application process is done via phone and advisors are not readily available or easily accessible. The change from paper to an online system during the CSSW application, whilst it could not be helped, was not user-friendly.

In addition to this, if an organisation applies to be Ofsted registered and the application is refused, the organisation is disqualified from applying again. To apply for registration an organisation must already have identified a responsible individual, registered manager, staff team and have an address from which they intend to run the provision. Having all this in place ahead of receiving confirmation of registration appears prohibitive to starting new projects or testing new ways of working, and certainly caused extra stress to those establishing CSSW.

There were several issues encountered during the Ofsted registration process that contributed to significant delays in getting the project off the ground. Moreover, Unseen would suggest that the registration system hinders innovation, particularly when seeking solutions for new or different groups of children that are outside of the ‘norm’.

For example, it was exceptionally hard to employ and train a staff team, and get the property ready, while at the same time understanding Ofsted’s expectations and evidencing how CSSW would adhere to the relevant guidelines. Changes had to be made to staff recruitment processes, budgets had to increase to allow for extra elements required, and funding secured. While the approach to delivering care and support was not altered, the way expectations of how the activity was evidenced, reported, and recorded, how the nine quality standards would be met, and how these would be incorporated into the CSSW team’s practice took time.

Recommendations for Ofsted registration

Unseen recommends:

21. Ofsted should be involved in the development and design of any specialist residential children’s provision, alongside other government departments, local authorities, law enforcement and non-governmental agencies. This will ensure relevant children’s legislation and Ofsted requirements are fully understood and woven into the service delivery.

Sharing expertise and knowledge

Once Ofsted understood the project and what we were trying to achieve it was very supportive. Once our application was underway, we were given a named Ofsted inspector and their direct contact details. This made the process much smoother as the Unseen team could work with our inspector to understand the regulations and how to meet them. Other individual Ofsted staff worked alongside the team and helped colleagues to understand the model and Unseen’s approach, and eventually led to CSSW being registered as a Children’s Home.

Unseen worked closely with inspectors to ensure that they understood the reasons for specific aspects of the project, and why they differ from the normal residential provision for children. These included the security features, initial intensive safeguarding arrangements, and the live-in house parents. We demonstrated why the standard residential features fail to safeguard trafficked children (as evidenced by
high rates of trafficked children going missing from care), and how this project aimed to deliver specialist support.

Ofsted did make special allowances for the project, including giving Unseen special dispensation to not have the CSSW address publicly available.

The initial process for registration is bureaucratic and stifles innovation but was a useful process to have gone through. Once registered, CSSW welcomed the oversight, audit, inspection, and improvement regime. Having the accountability and Ofsted framework was positive and having Regulation 44 visits and inspections ensured we were offering the best support to the children in CSSW’s care and continued to learn and develop this.

### Recommendations for sharing knowledge and expertise

**Unseen recommends:**

22. Specialised training is required for Ofsted inspectors on modern slavery, trafficking, and exploitation so they further understand the needs of trafficked children and how services, they register, are meeting these needs. This should be included in their safeguarding induction training and on an on-going, mandatory basis throughout their careers.

23. Cross-department governmental support structures are established for Ofsted inspectors, so they can effectively inspect provisions, understanding the complexities of trafficking.

### Working with local authorities - referrals

The functions of local authorities concerning children who are ‘looked after’ by them are set out in the Children’s Act (1989) and associated regulations and guidance.

Section 22(3) of the 1989 Act sets out the general duty of the LA looking after a child to safeguard and promote the welfare of that child. This duty underpins all activity by the LA concerning looked after children. This duty has become known as ‘corporate parenting’. In simple terms, corporate parenting means the collective responsibility of the council, elected members, employees, and partner agencies, for providing the best possible care and safeguarding for the children in their care.

Unseen wanted to ensure that we sat within normal LA processes and spent a lot of time with professionals from LAs to ensure we understood how best to do this. As a result, we decided to only take referrals from LAs. On several occasions this was challenging because police would contact CSSW letting us know they had a trafficked child they would like to place with CSSW, only to be told later by the LA that they were placing the child elsewhere. The CSSW team had several interactions with frustrated police officers who felt they were not being listened to and that LA teams were using their lack of budget as an excuse to not place a child. It was also felt that several times LA teams did not understand the ramifications of placing a trafficked child inappropriately, and this concerned officers.

When receiving calls or emails about potential placements, the CSSW team found there was a lack of understanding of trafficked children’s needs – specifically their initial safety needs, as well as a lack
of understanding about what the CSSW model offered. As a result, the CSSW team developed and emailed an overview of the service to any potential referrer to assist them understand trafficking and the CSSW service. There was also a lack of understanding that non-UK national children should have access to the same care as British children, and this had to be challenged and explained on several occasions.

Recommendations for referrals

Unseen recommends:

24. Specialised training is required for social workers and LA staff about modern slavery, trafficking, and exploitation so they further understand the needs of trafficked children and how the proposed services are meeting these needs. This should also include information on the rights of a child to access care, regardless of their nationality. This should be included in their safeguarding induction training and on an on-going, mandatory basis throughout their careers.

25. A clear pathway needs to be developed that includes standardised intervention points that allow trafficked children access to the support they need in the timeframes they need it. Standardised referral mechanisms and consistent availability of appropriate support services are needed.

26. A nationally commissioned framework that includes a national training programme for social workers and law enforcement officers on how to make referrals, how to spot the signs of trafficking, how to use protection orders and a clear referral pathway into a specialised service needs to be developed.

Approach to placements

Throughout CSSW, Unseen encountered a preference for foster placements rather than children's homes. The reason for this appeared to be two-fold: one based on cost; the other on an aversion, understandably, to institutional placements, which care homes can be viewed as. By delivering CSSW, Unseen learned that children's homes are last resorts for children following several failed foster placements. However, the numbers of trafficked children that go missing from foster care and are not found means this practice needs to be challenged, particularly if we are to provide placements that are in the best interests of trafficked children who need to be safeguarded immediately.

From research conducted, Unseen was aware of the preference towards foster care and considered this when creating the model, specifically the volunteer house parent role. However, the stumbling block appeared to be that LAs and placing social workers saw CSSW as an Ofsted ‘Registered Children’s Home’ and made assumptions without looking at the model itself.

Each of the LAs told Unseen that they would spot purchase placements as needed, and conversations took place with each authority’s EDT (who were most likely to place children) regarding how to best facilitate this. Unseen was not told, but it became apparent, that in some LAs placements over a certain daily cost required a Director’s sign off, and that standard foster care placements would be the first port of call for any children, especially out of hours. This in some instances negated the ability of the project to take 24/7 referrals directly from EDT and immediately safeguard vulnerable children.

Another challenge was the relationship between frontline social workers and those making placement decisions. Police and social workers encountered potential victims in their day-to-day operational work
and would advocate for placements with CSSW because they considered this an appropriate and cost-effective way to safeguard a trafficked child. Yet, they reported to the CSSW team that they were being turned down by the ‘powers that be’.

Some police officers reported that their recommendations were ignored by social care. In one case, a child the police wanted to place with CSSW subsequently went missing. Police fundamentally believed this outcome could have - and should have - been avoided with the resource CSSW was offering in the area.

**Recommendations for placement process**

**Unseen recommends:**

27. Police protection orders should be considered as standard practice when a trafficked child is encountered. This will enable police to be more involved in placement decisions and will allow access to appropriate services that will offer immediate protection for potentially trafficked children (regardless of their age).

28. A national policing review concerning the use of protection orders as standard practice for law enforcement when encountering trafficked children should be undertaken. Outcomes for children and the rate of children going missing when such orders are used should be the primary focus of this review.

29. Local authorities and policing must commit to working collaboratively when safeguarding and agreeing on appropriate placement options for trafficked children.

30. Relevant Government departments must conduct a sector-wide review to understand the current process being used for placement decisions so that a standardised approach can be developed, and LAs can be held accountable for their decisions.

**LA frameworks, placement purchasing and routes to support**

One of Unseen’s biggest learnings was that without a centralised and national commissioning service it was hard to receive referrals. Commissioning processes ran via a framework and Unseen had to submit applications via this process to become a placement provider. The application process was not tailored for specialised services like CSSW but was intended for generic placements, which meant referrals via this route were not appropriate.

All LAs are in a position to spot purchase but it was revealed that this is often the last resort and LAs are obliged to first make their way through their list of ‘preferred providers’ before using the spot purchase list. During our research phase, Unseen had been advised by LAs that spot purchasing for specialist placements was necessary. However, this didn’t appear to be usual practice during the lifetime of the CSSW project. This appears to be regardless of whether preferred providers can offer specialised care in response to trafficked children or not.

Ahead of CSSW opening attempts were made to finalise spot purchasing agreements. It became apparent that commissioners would not agree to spot purchasing placements. Instead, the project had to be accepted onto their ‘purchasing framework’. This has an enormous impact on LAs being able to place children at CSSW.
Understanding the commissioning processes for each local authority area was an arduous and lengthy process. Each local authority operates its own purchasing arrangements – there is no national approved list of providers, although some LAs group together to share systems. Commissioning programmes run on different timetables which meant we were unable to offer CSSW to some authorities, other than via spot purchasing until their approved commissioning framework re-opened for applications. This meant having national coverage was hard.

Added to this, the criteria to enter the frameworks were all different meaning that every application was also different. The applications often consisted of 80-page documents to complete with a range of questions and criteria that did not fit the project we were running but, if we did not apply, we would not be on frameworks and would not get referrals.

We found that commissioning processes and the application process was largely only relevant for generalist support. During the 18 months we applied to various frameworks, we didn’t see any tenders for support being commissioned that would directly address the needs of trafficked children.

The processes LAs employed were not particularly transparent, and it was often very difficult to get through to the correct person in the LA to even identify how and when providers can apply to be listed on the framework. In the case of one local authority (a key LA for trafficked children), they were very clear that unsolicited communication had to go to a general reception and they would not release the names or contact details of commissioners or social care managers because they didn’t want them contacted directly. This directly impacted on the children they were looking after because these children were not able to access the specialist care they needed. We spoke with the Association of Directors of Social Care (ADSC) to assist us to navigate some of the hurdles we were facing but were told that Directors in each LA were in charge in their area and the ADSC would not advocate for them to use any one specific model for this cohort of children.

One framework not only required an Ofsted registration but an inspection to have been passed and the provision recorded as ‘good’. Ofsted visits often do not happen in the first year of registration which immediately meant we were ineligible for this framework, which then shut for applications before we had our Ofsted rating.

Once on commissioning frameworks, we were overwhelmed with children needing placements that were not appropriate for our service. It appears again there is not enough provision of children’s homes for those that need them, but that the system employed by social care is to send all potential placements (regardless of care needs) to all providers.
Recommendations for improving routes into support

Unseen recommends:

31. Framework processes and commissioning frameworks need to be reviewed to ensure current provision being offered meets the needs of the children in each locality area.

32. A review of placement practices, specifically about out of hours placements involving trafficked children, should be conducted. In the interim, emergency duty teams (EDT) need to be able to place children in provisions they deem to be best suited to a child’s individual needs.

33. Commissioning specialised placements for trafficked children for the first 72 hours post identification that EDT, social workers and police officers can refer directly into through pre-approved referral pathways.

34. A review of current disparate commissioning frameworks and a move towards a nationally agreed application process for commissioning services for trafficked children.

Conclusion

CSSW successfully demonstrated that it is possible to provide a better solution for trafficked children - in particular for reducing the number that go missing from care.

Using the CSSW model as a framework, Unseen recommends that another specialist provision should now be developed specifically for trafficked children, providing an immediate place of safety for at least the first 72 hours. The service should be developed in a multi-agency manner and centrally commissioned. It would provide the opportunity for professionals to come together to discuss the best course of action for the child whilst at the same time knowing the child is being kept safe. When little or nothing is known about the risks they are facing, their support needs, or the agencies that need to be involved, this would be valuable breathing space for the professionals involved.

CSSW was a new and previously untested model. As a result, there was a lot to learn from the development, staffing and delivery of the home as well as many challenges to overcome.

For any project of this type to be sustainable, the systemic issues we experienced that impacted the referral and placement of children during this pilot must be addressed by all the agencies involved and will require changes to the UK’s current approach and practice. Caring effectively for trafficked children will continue to be ineffective if left purely to individual LAs who appear to be having to make decisions based on financial constraints rather than in the child’s best interest.
The overarching recommendations key to this report are given below and centre around five core themes:

1. Trafficked children have specific needs, and specialised services tailored to prevent missing episodes, particularly in the first 72 hours, should be available to them.

2. Training on trafficking and appropriate placements for trafficked children should be provided to relevant statutory agencies, especially local authority commissioning and placing teams.

3. The best interests of the child should be at the centre of all referral decisions, irrespective of initial cost implications.

4. Specialised residential support services for this cohort of children should be centrally developed, commissioned, mandated and part-funded on a per-region basis. At a minimum this service should be considered for the first 72 hours post identification.

5. Utilising police orders to protect trafficked children as standard practice.

We are not advocating that children’s homes are the only answer for trafficked children, but it needs to be part of a range of options offered to ensure we are keeping the best interests of the child at the centre of the decisions being made.

We hope that these recommendations will be used to inform the development of new services and the improvement of supporting infrastructures.
Glossary

The terminology used throughout this report is defined below:

- **BERRI**: The BERRI assessment checklist gathers information around five themes (behaviour, emotional well-being, relationships, risk & indicators of neurodevelopment or psychiatric conditions). Repeating the BERRI checklist over time shows how the scores have changed, demonstrating improvement or the need to review your care plans and interventions.

- **Best Interest**: When a decision is made on behalf of a person who lacks the ability to make it themselves (a child), it must always be made in the person’s best interests. This ensures that: their rights are respected, and the decision is the best one for them.

- **CAMHS**: Child and Adolescent Mental Health Service.

- **Children**: The United Nations Convention on the Rights of the Child defines a child as any human being under the age of 18. We have chosen to use the term “children” throughout this report (rather than “young people”) because, whilst older children are able to make important decisions and should be heard, they all have the right to be protected from harm, and age is not a protective factor in relation to human trafficking and modern slavery.

- **Children’s Home**: Section 1(2) of the Care Standards Act 2000 states that ‘an establishment in England is a children’s home (subject to the following provisions of this section) if it provides care and accommodation wholly or mainly for children’. A child is defined in section 121 of the CSA 2000 as a person under the age of 18 years. ‘Wholly or mainly’ means that most of the people who stay at a home must be children. ‘Young adults aged 18 and over who live or stay at the home must be in the minority’.

- **Child trafficking**: means the recruitment, transportation, transfer, harbouring or receipt of a child for the purposes of exploitation.

- **CCRAG**: CCRAG is a partnership consisting of Local Authorities from the East, South East and South West Regions of England who are committed to working together to support the sourcing, contracting, monitoring and annual fee negotiations for children’s placements in independent and non-maintained special schools and children’s residential care homes.

- **CORAM**: Is an organisation committed to improving the lives of the UK’s most vulnerable children and young people.

- **CSC**: Children’s Social Care.

- **CSE**: Child sexual exploitation.

- **CSSW**: Children’s Service South West, Unseen’s pilot project.

- **DfE**: Department for Education.

- **ECPAT**: Is an organisation working to protect children from child trafficking and transnational child exploitation. We support children everywhere to uphold their rights and to live a life free from abuse and exploitation.

- **EDT**: Emergency Duty Team.

- **EEA**: European Economic Area – nationals from countries included in this area.

- **ESOL**: English for Speakers of Other Languages.

- **First responder agency**: First Responders work for designated organisations and help identify and support potential victims of modern slavery.

- **Foster care**: means the temporary placement of children looked after with a local authority ap-
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proved carer or carers in their own home.

- **ICTG**: Independent Child Trafficking Guardians (run by Barnardo’s) Helping young victims cope with the practical and emotional traumas of being trafficked. Specialist support workers help them to understand what is happening with social care services, the police and immigration – in ways that they can understand.

- **Juju**: Is a spiritual belief system incorporating objects, such as amulets, and spells used in religious practice, as part of witchcraft in West Africa.

- **LA – Local authority**: Local authorities are responsible for the provision of an extensive range of public services in your area, including children’s services.

- **LAC – Looked After Child**: A child who has been in the care of their local authority for more than 24 hours is known as a looked after child. Looked after children are also often referred to as children in care, a term which many children and young people prefer. Looked after children live with foster parents, in a residential children’s home or in other residential settings (secure units).

- **LSCB**: Local Safeguarding Children’s Board. LSCBs are a multi-agency body set up in every local authority. Each LSCB has an independent Chair, that is, someone who doesn’t work for social services. They work to safeguard and promote the welfare of children.

- **Missing from care**: A looked after child who is not at their placement or the place they are expected to be and their whereabouts is not known.

- **Modern slavery** is an umbrella term for activities involved when one person obtains or holds another person in compelled service, where ownership is exercised over that person.

- **NCA**: National Crime Agency.

- **NHS**: National Health Service.

- **NRM**: National Referral Mechanism.

- **NVQ**: National vocational qualification.

- **Ofsted**: Office for Standards in Education, Children’s Services and Skills.

- **Ofsted registration**: All children’s homes in England providing residential care to children must be registered with and inspected by the Office for Standards in Education, Children’s Services and Skills (Ofsted) which regulates all care services for children. The Children’s Homes Regulations (2015) also require regular visits from an independent visiting officer (known as the Regulation 44 Visitor).

- **Ofsted ratings**: Outstanding, good, requires improvement to be good, and inadequate [https://assets.publishing.service.gov.uk/media/5c9b837040f0b633fc95f7a9/SCCIF_children_s_homes.pdf](https://assets.publishing.service.gov.uk/media/5c9b837040f0b633fc95f7a9/SCCIF_children_s_homes.pdf).

- **PEP**: Personal Education Plan.

- **PSHE**: Personal, Social and Health Education

- **PVoT**: Potential victim of trafficking.

- **Regulation 44 Visitor**: This person checks that the home has an effective approach to behaviour management, including regularly examining records of restraint, logs of missing persons and other incident reports, and checks that the home is providing stable, safe and secure care.

- **Residential care** means the placement of children looked after in an Ofsted registered children’s home.

- **SARC**: Sexual Assault Referral Centre.

- **SERAFA**: Sexual Exploitation Risk Assessment Framework (SERAFA) and be able to identify children at risk of CSE.
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- **Spot Purchasing**: Arrangements that happen when a service is purchased by a local authority on behalf of an individual. Services are purchased as and when they are needed and are purchased on an individual basis for a single user.

- **Strategy Meeting / Section 47**: Strategy meetings are called by the LA and led by the social work team when there are concerns that a child is at risk of significant harm, to decide whether the threshold for a child protection investigation (Section 47) is met and, if so, who will conduct the investigation. The Section 47 investigation assesses the child’s needs and sets out what is required to safeguard the child.

- **Supported accommodation / semi-independent living**: means any housing scheme that includes varying degrees of support but does not include care.

- **UASC**: Unaccompanied asylum-seeking child.

- **UKVI**: UK Visa and Immigration (Department of the Home Office).

- **Virtual School**: The Virtual School does not exist in real terms as a building, there are no teachers and children and young people do not attend. It is a service provided by dedicated professionals within the Local Authority whose work it is to promote and coordinate educational support for Looked After Children and Care Leavers to succeed at nursery, school, college and university; or any other place of learning.
Appendices

Monitoring and evaluation tools used

Internal monitoring tools developed for CSSW

The internal tools used to understand and eventually provide an evidence base for the needs of trafficked children were:

- Monitoring reports at 24 hours, 72 hours, one week, one month, three months and six months. These gathered data about a range of needs and support services accessed, as well as ‘soft outcomes’ that were more descriptive and personal to each child. For example, as a multi-agency team, the steering group hypothesised which behaviours might indicate that a child was starting to settle and was less likely to go missing. Data was collected by the staff team using direct observation and case notes throughout the child’s placement.

- Safety, Hope, Choice, Coping and Resilience. Children scored their feelings of safety, hope, choice, and their ability to cope, whilst staff scored how resilient they perceived the child to be. This produced an initial star chart and the tool was repeated monthly to show how each score changed over time. The tool was used therapeutically by children’s workers and any issues arising were discussed with the child and entered onto the support plan if appropriate.

- Keywork questions were a specific set of questions asked monthly by the case owner and developed to capture the child’s voice. These questions were designed with the assistance of a clinical psychologist and were posed to gain insight directly from a child about why they decided to stay at the home and not go missing.

- A quarterly satisfaction survey was completed to gauge how satisfied children were with the home, the staff and the service, and changes were made accordingly. The children completed this independently if possible, or with staff support and an interpreter if needed, and feedback was acted upon via the home’s improvement plan.

- An exit questionnaire asked children to reflect on how able they were to achieve key skills at the beginning of their stay and the end of their journey to assess the impact of the support they received. The children completed this independently if possible and with staff support and an interpreter if needed.

External monitoring tools used

We also utilised tools that had been created and validated in other fields and are considered reliable evidence-based ways of monitoring behaviour, risk, and well-being. We were advised by a clinical psychologist on the tools to use and included the following in our monitoring processes:

- **Behaviour, Emotional well-being, Relationships, Risk and Indicators of Psychological Distress (BERRI)**[^berri], which measures distance travelled for children in care more accurately. It is more sensitive to changes than other methods such as the Strength and Difficulties Questionnaire and it correlates progress with significant life events. This tool was used quarterly and was completed in team meetings so that consensus was reached between all staff.

[^berri]: Information about the BERRI available at: https://berri.org.uk/index.php?page=about-berri

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- **The Sexual Exploitation Risk Assessment Framework (SERAf)**\(^{123}\) is a tool for practitioners to complete and was used as part of the initial risk assessment and was repeated quarterly to monitor how a child’s risk of sexual exploitation changed over time. It considers markers that have been identified as making children vulnerable to sexual exploitation. It also includes moderate and significant risk factors, which may be indicative of abuse from sexual exploitation, and whether these are present currently or within the last six months (or the last 12 months for significant risk factors), producing a score which corresponds to a category of risk.

- **The Well-Being Survey** was adapted by Unseen from an NHS questionnaire for use with children and was used monthly to monitor changes in emotional well-being. Children’s workers completed this with the child using an interpreter if needed. This was used in addition to the BERRI because it captures the voice of the child. It includes 10 questions asking the child how strongly they agree or disagree with statements about the last week. Answers were transformed into numerical data by allocating numbers to positive and negative statements (e.g. ‘I felt happy’, ‘I felt sad’) - a score of 0 was given if they strongly disagreed, 1 if they disagreed, 2 if they were not sure, 3 if they agreed and 4 if they strongly agreed. The survey also asks six open-ended questions about how the child feels today, giving qualitative data to enrich the quantitative score, and produced an overall picture of well-being.

Data was entered anonymously into a monitoring database for analysis.

The monitoring framework was constructed to provide a balance between gathering enough data to enable identification of which, if any, aspects of the model were successful and to provide a robust evidence-base. The monitoring system was planned and spaced at specific intervals to have minimal impact on both staff and children. Specific forms were allocated to staff roles so that all staff were involved, and no single person was burdened with a lot of reporting.

### Monitoring carried out by external agencies

In addition to our internal monitoring frameworks, we were also held accountable externally by the Project Steering Group\(^{124}\), Ofsted and our Regulation 44 Visitor.

The Children’s Homes Regulations (2015) require that an independent visiting officer (Regulation 44 Visitor) visits the home at least once a month to observe the care provided, the practice of the staff, inspect compliance with regulations, systems and processes, the quality of the environment and to scrutinise how the home is supporting children to enjoy and achieve. The Regulation 44 Visitor also checks that the home has an effective approach to behaviour management including regular examination of records of restraint and logs of missing person’s reports and other incident reports, to check that the home provides stable, safe and secure care.

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\(^{124}\) The Steering Group comprised of professionals with experience in supporting children and knowledge of trafficking. The group was made up of a senior police officer, Head of Services for a children’s charity, member of the LA Children’s Services team, a Clinical Psychologist and Unseen’s Director and Researcher.
The three strands of inspection are:

1. Overall experiences of the children
2. How well children are helped and protected
3. Effectiveness of leadership and managers.

The final structure we had in place for monitoring this pilot and developing the structures needed to effectively evidence the impact and outcomes of the service was a steering group. The steering group was made up of a group of experts in various areas including representatives from the police, a clinical psychologist, the local safeguarding board and Barnardos’ regional assistant director. Their role was to give guidance and advice on the monitoring of the project and ensure that we were delivering the project well and with the right impact intended. The group were invaluable in creating the monitoring framework for the project and assisting us to think through how to best capture data.
10 Principles
for the safe accommodation of child victims of trafficking

1. The best interests of the child should be at the centre of all decisions regarding the provision of safe accommodation and related support.

2. Children should be asked about what makes them feel safe.

3. Children should be given sufficient information to help them make informed decisions about their accommodation and care.

4. Safety measures should be implemented to reduce a child’s risk of going missing, especially within 24 to 72 hours after the first contact with the child.

5. Safe accommodation should be understood as multi-faceted, involving physical and psychological elements, with particular recognition of the impact of trauma on a child’s perceptions and behaviour.

6. A child’s accommodation and safety needs will change over time and should be regularly assessed.

7. A child should not feel punished or overly restricted by measures taken to help keep them safe in accommodation.

8. A child should be given access to a range of psychological, educational, health, social, legal, economic and language support that ‘brings safety to the child’ and helps them recover.

9. Everyone working with child victims of trafficking should be trained to recognise and respond appropriately to their needs.

10. Efforts to keep children safe should involve the wider community in ways that help create an environment that is difficult for traffickers to operate in.

122. ECPAT. 2011. On the Safe Side: Principles for the safe accommodation of child victims of trafficking. Available at: https://www.ecpat.org.uk/Handlers/Download.ashx?idMF=d61788dc-0969-4134-a1ef-6c7c4f94b1a0