



Dame Sara Thornton DBE QPM  
Independent Anti-Slavery Commissioner  
5th Floor, Globe House  
89 Eccleston Square  
London, SW1V 1PN

Tel: +44 (0) 20 3513 0477

Email: [shelley.perera@iasc.independent.gov.uk](mailto:shelley.perera@iasc.independent.gov.uk)

26 January 2021

Professor Amanda Howe  
President of the Royal College of General Practitioners  
Royal College of General Practitioners  
30 Euston Square  
London  
NW1 2FB

Dear Professor Howe,

I am writing to you about the provision of adequate training for doctors in the area of Modern Slavery Human Trafficking (MSHT).

MSHT is an egregious violation of men, women and children for the purposes of forced labour, sexual exploitation, forced marriage, domestic servitude, organ harvesting and forced criminal activities, including county lines. There is no accurate way of estimating how many people are living and experiencing MSHT within the UK. However, the National Crime Agency suggest “tens of thousands”<sup>1</sup>, the Home Office estimated “10,000-13,000”<sup>2</sup> in 2012 and the Global Slavery Index estimate 136,000<sup>3</sup>. That would mean 2 per 1000 individuals.

There is an increasing amount of research which documents the severe impact of MSHT on the physical and mental health of victims and survivors, but we also know this is not limited to an individual. MSHT is a public health issue<sup>4</sup>, stemming from poverty and inequality, whilst self-perpetuating and contributing to detrimental social determinants of health. This country needs to address MSHT from a public health and healthcare perspective in order to tackle this crime in a person-centered, holistic and effective way.

Our health service needs an effective and coordinated response to MSHT. Some studies suggest as many as 68% of victims present to healthcare settings when they are experiencing exploitation, with just over half of those being seen by emergency/urgent care practitioners<sup>5</sup>.

---

<sup>1</sup> The Guardian, 2017 Tens of thousands of modern slavery victims in UK, NCA says.

<https://www.theguardian.com/world/2017/aug/10/modern-slavery-uk-nca-human-trafficking-prostitution>

<sup>2</sup>HM Government. *Modern Slavery Strategy*. [online] London, 2014: Open Government Licence v3.0. Available at: [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/383764/Modern\\_Slavery\\_Strategy\\_FINAL\\_DEC2015.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/383764/Modern_Slavery_Strategy_FINAL_DEC2015.pdf) [Accessed 30 Jun. 2019]

<sup>3</sup> Global Slavery Index. *Country Data | Global Slavery Index*. [online] 2018. Available at:

<https://www.globalslaveryindex.org/2018/data/country-data/united-kingdom/> [Accessed 23 Jan. 2019].

<sup>4</sup> Such E, Laurent C, Salway S. 2017. Modern Slavery and Public Health, Public Health England.

<https://www.gov.uk/government/publications/modern-slavery-and-public-health/modern-slavery-and-public-health> (last accessed 1 February 2018).

<sup>5</sup> [J Health Care Poor Underserved](#). 2016;27(3):1220-33. doi: 10.1353/hpu.2016.0131

Despite this, healthcare professionals do not feel they have the knowledge and confidence to know what to do when they encounter someone who may be trafficked. In 2015, a survey of 782 NHS healthcare professionals found that 95.3% percent were unaware of the scale or extent of MSHT in the UK. One in eight healthcare professionals said they know or strongly suspect they have come in to contact with a victim (one in five in maternity services), yet 78.3% reported that they had insufficient training to assist trafficked people. Importantly, 86.8% reported lacking knowledge of the questions to ask to identify potential victims<sup>6</sup>. This research highlights a serious knowledge and confidence gap amongst frontline clinicians, who may be the only individuals encountering trafficked victims at their most vulnerable. Crucial opportunities to intervene and offer safety and choice are being missed.

“Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff”, an intercollegiate document, established that “forced marriage, modern slavery and grooming and exploitation”, “county lines” and “child trafficking (internal and external)” are considered core competencies for all levels of safeguarding, expected of all healthcare staff<sup>7</sup>. The “Adult Safeguarding: Roles and Competencies for Health Care Staff” intercollegiate document also identifies modern slavery as a form of abuse<sup>8</sup>.

Under the terms of the Modern Slavery Act of 2015, I am charged with encouraging good practice in the prevention, detection, and investigation of slavery offences, and the identification of victims<sup>9</sup>. My first [Strategic Plan](#) was laid before Parliament in October 2019 and I have prioritised the care and support of victims. Herein lies a crucial opportunity to do so. It is a stated goal of NHS England to support staff in accessing training on how to identify and safeguard victims of MSHT<sup>10</sup>. Indeed, the duty to safeguard all adults and children is enshrined in the General Medical Council’s statutory guidance, “Good Medical Practice”, upon which all medical education in the United Kingdom is based<sup>11</sup>.

Following consultation with NHS safeguarding leads and experts in the field, both clinical and within academia, my office has identified a key opportunity for the Royal Colleges to take the lead in the efforts to safeguard patients against MSHT with all its deleterious consequences. It is positive to see that your current curriculum references MSHT in multiple places and I hope that the inclusion of this in the context of both children and adults will equip trainee general practitioners to identify and safeguard this vulnerable patient population.

---

<sup>6</sup> Oram S, Hemmings S, Abas M et al. Provider Responses Treatment and Care for Trafficked People. Department of Health, 2016. <https://www.kcl.ac.uk/ioppn/depts/hspr/research/CEPH/wmh/assets/PROTECTReport.pdf>. (last accessed 5 February 2018).

<sup>7</sup> The Royal College of Nursing. (2019). *Safeguarding Children and Young People: Roles and Competencies for Healthcare Staff | Royal College of Nursing*. [online] Available at: <https://www.rcn.org.uk/professional-development/publications/pub-007366> [Accessed 18 Oct. 2019].

<sup>8</sup> The Royal College of Nursing (2018). *Adult Safeguarding: Roles and Competencies for Healthcare Staff | Royal College of Nursing*. [online] Available at: <https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/publications/2018/august/pdf-007069.pdf?la=en> [Accessed 18 Oct. 2019].

<sup>9</sup> Legislation.gov.uk. (2019). Modern Slavery Act 2015. Charter 30, Part 4, Independent Anti-Slavery Commissioner. [online] Available at: <http://www.legislation.gov.uk/ukpga/2015/30/part/4/enacted> [Accessed 18 Oct. 2019]

<sup>10</sup> NHS England (2019). *NHS England » NHS England slavery and human trafficking statement*. [online] England.nhs.uk. Available at: <https://www.england.nhs.uk/safeguarding/slavery-human-trafficking-statement/> [Accessed 18 Oct. 2019]

<sup>11</sup> General Medical Council (2019). *Good Medical Practice. Domain 2: Safety and quality*. [online] Available at: <https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-medical-practice/domain-2----safety-and-quality#paragraph-24> [Accessed 18 Oct. 2019].

I would also encourage you to include the concept of trauma-informed care<sup>12</sup> within your curriculum. This is a generic approach to the care of any vulnerable patient as a strengths-based framework grounded in an understanding of and responsiveness to the impact of trauma that emphasises physical, psychological, and emotional safety for everyone, and that creates opportunities for survivors to rebuild a sense of control and empowerment.

I am therefore writing to thank you for including reference to MSHT within your curriculum and to urge you to ensure that suitable training is in place for trainee general practitioners to enable this to be translated into practice. I also wanted to take the opportunity to highlight the [Training Framework for the Identification, Care and Support of Victims and Survivors of Modern Slavery and Human Trafficking](#) published by Skills for Care at the end of last year which you may find to be a useful resource.

I look forward to receiving your response. In the interests of transparency, I request that you respond in a way that enables me to publish your letter on my website.

Sincerely,

A handwritten signature in black ink, appearing to read "San Yuen". The signature is fluid and cursive, written in a professional style.

**Independent Anti-Slavery Commissioner**

---

<sup>12</sup> Hopper, E. K., Bassuk, E. L., & Olivet, J. (2010). Shelter from the storm: Trauma-informed care in homelessness services settings. *The Open Health Services and Policy Journal*, 3(2), 80-100