

Written evidence from Ryszard Piotrowicz (COV0153)

I am a professor of law at Aberystwyth University. I specialise in international law, in particular human rights. I am currently the Vice-President of GRETA, the Council of Europe's Group of Experts on Action against Trafficking in Human Beings. The views expressed here are my own, and do not necessarily reflect the views of any organisation or entity of which I am a member or with which I am associated.

I wish to submit evidence regarding the threats to the health and safety of people who have been trafficked for sexual or labour exploitation, forced criminality or forced begging. The UK has protection and support obligations towards such persons. These duties are founded upon provisions of the Council of Europe Convention on Action against Trafficking in Human Beings, to which the UK is a party, as well as Article 4 of the European Convention on Human Rights, as interpreted by the European Court of Human Rights (the prohibition of slavery, forced labour and servitude), and the Modern Slavery Act.

The nature of these obligations is also assessed in the country monitoring reports of the UK published by GRETA, the Council of Europe's Group of Experts on Action against Trafficking in Human Beings.¹

The new reality caused by Covid-19, and the UK's response, pose particular risks to trafficked persons, who in my view may be disproportionately affected. They may have urgent and longer-term medical needs, having suffered physical, sexual and/or psychological abuse. They may be traumatised. They may not speak or understand English, and have little or no idea where to seek help and assistance. They may be without friends or relatives and, consequently, very isolated. If they have been trafficked from abroad, it may not be safe for them to return to their home countries. This is the dilemma of many, if not all, trafficked people, but that dilemma has become more dangerous for them in part because of the measures introduced by the UK and devolved administrations.

Trafficked people may need access to shelters, as well as support from professionals, such as psychologists, medical doctors, social workers, lawyers and NGO advocates, who may advise them on their rights and entitlements. They may need advice on whether they can remain in the UK.

All of these legitimate needs may go unmet because of Covid-19: professionals are not able to work under normal conditions; some may not be able to work at all. These workers may themselves be unwell. Without access to shelters or other appropriate accommodation, trafficked people may be at risk of becoming destitute or of further exploitation. They may decline opportunities to get away from their situation of exploitation, because they see no viable alternative. They may not know where to access the essential benefits and help which should be available.

Another risk is that some situations of labour exploitation may continue unchecked because labour inspectors' activities have been limited by the pandemic. Where trafficked persons are compelled to continue working, be it labour exploitation or sexual exploitation, they are

¹ Available at: <https://www.coe.int/en/web/anti-human-trafficking/united-kingdom>

at high risk of infection, have no real choice in the matter and no real chance to escape their situation of exploitation. They are much less likely to be able to access appropriate medical care should they become infected with Covid-19. In such situations, through no fault of their own, they pose a real risk to those with whom they are forced to come into contact.

The UKs' obligations towards trafficked people remain in force, virus or no virus. I am not arguing that the UK must carry on as if the virus has never reached the shores of this country. Rather, I am seeking to raise awareness of the legitimate needs of trafficked people, the dangers to which they are exposed and which may be exacerbated because of the restrictions imposed in the face of Covid-19. Their lack of agency, their inability to make their own choices, and the lack of access to the help and support they need, means that they remain at increased risk of exploitation and infection. It is not only desirable that this be recognised, it is a duty of the UK to do so and to address the situation.

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