



Northern Ireland  
Assembly

Committee for Justice

# OFFICIAL REPORT (Hansard)

Justice (Sexual Offences and Trafficking  
Victims) Bill: Migration Justice Project

11 November 2021

# NORTHERN IRELAND ASSEMBLY

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Justice (Sexual Offences and Trafficking Victims) Bill: Migration Justice Project

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**Members present for all or part of the proceedings:**

Mr Mervyn Storey (Chairperson)  
Ms Sinéad Ennis (Deputy Chairperson)  
Mr Doug Beattie  
Ms Sinéad Bradley  
Ms Jemma Dolan  
Mr Robin Newton  
Mr Peter Weir  
Miss Rachel Woods

**Witnesses:**

Ms Noelle Collins	Belfast and Lisburn Women's Aid
Ms Jill Robinson	Flourish NI
Ms Liz Griffith	Law Centre NI
Ms Orla Gardiner	Migrant Help

**The Chairperson (Mr Storey):** I welcome to the meeting Liz Griffith, the senior research and policy officer from the Law Centre Northern Ireland; Noelle Collins, area manager of Belfast and Lisburn Women's Aid; Jill Robinson, founder and coordinator of Flourish NI; and Orla Gardiner, victims of slavery support services team manager from Migrant Help. Thank you for being with us, and apologies for the arrangements that we have to put in place. However, given the circumstances, we have to abide by the rules. It is nice to see people doing presentations in person and not over a Zoom call. We are all getting to the point where we are Zoomed out. I invite Liz to briefly outline the key issues in relation to the provisions of the Bill. I also thank you for the paper, which has been extremely useful. Thank you for taking the time to prepare that for us.

**Ms Liz Griffith (Law Centre NI):** Good afternoon, Chair and Committee members, and thank you for the invite to come today. It is very nice to be here in person in Stormont. As you heard, my name is Liz Griffith, and I work at the Law Centre. I am here with my colleague Jill Robinson from Flourish. To my right is Orla Gardiner from Migrant Help, and to my left is Noelle Collins from Belfast and Lisburn Women's Aid. Migrant Help and Women's Aid are both contracted by the Department to provide support to victims while they are going through the national referral mechanism (NRM) process, whereas Flourish provides support to victims once they have gone through the process — post-NRM support — and assists with long-term integration. Our four organisations are all members of the DOJ engagement group — the NGO engagement group on modern slavery — and we thank the Department for that regular contact, which we find very useful.

We are here to focus on the two clauses of the Bill that relate to trafficking. I endorse the comments from our colleagues at Christian Action, Research and Education (CARE), who have already spoken

to these clauses. I add our support for clause 16, which extends the NRM support to people who have been exploited but not necessarily trafficked. We are very pleased to see that clause. We also support clause 17, in which DOJ will move from an annual strategy to a three-year strategy. In addition, we support the proposed amendment that would require the Department to publish an annual progress report or check. That is very sensible.

I am conscious that the title of the Bill is the Justice (Sexual Offences and Trafficking Victims) Bill, but, truth be told, there is not much in it for victims. We want to highlight three particular victims-focused issues: access to healthcare, access to financial support and dealing with historical convictions. Each of my colleagues will set out one of those issues and identify a possible course of action for the Committee to consider. There is a fourth issue, which relates to the statutory defence. We do not propose to discuss that now, but it is in the written report that we submitted.

I will pass to Jill, who will talk about access to healthcare.

**Ms Jill Robinson (Flourish NI):** Good afternoon. I will speak about a healthcare entitlement for survivors of trafficking. Currently, while someone's trafficking case is being assessed and they are in the national referral mechanism process, there is an exemption that states that most survivors are not charged for healthcare. However, there are a number of instances where individuals receive a negative conclusive decision on their trafficking case, which is subsequently challenged through due legal process. In such cases, there is no provision in legislation for those individuals to have access to GP and other healthcare services. The guidance confirms that refused survivors of human trafficking are no longer exempt from health charges.

Individuals who have been trafficked are likely to experience multiple physical and mental health risks prior to, during and after their trafficking experiences. Many suffer acute and long-term health problems. Health consequences of human trafficking may include injuries; physical pain and illnesses; sexual health problems; and mental health problems such as depression, anxiety and post-traumatic stress disorder. That clearly highlights the critical need to have access to free healthcare. That should extend to those who are challenging a negative modern slavery decision.

We are seeking that the Department agrees a process in which a refused victim of trafficking who is appealing the decision can access support. Specifically, we propose that the Committee seeks an assurance from the Minister that she will use the discretion that is available to her under section 18 of the Human Trafficking and Exploitation (Criminal Justice and Support for Victims) Act (Northern Ireland) 2015 to ensure that persons with a negative NRM outcome may access healthcare and that the Committee asks officials at the Department of Justice and the Department of Health to work together to develop a process for such victims to be registered with a GP.

**Ms Griffith:** I ask my colleague Orla from Migrant Help to talk about financial support for victims and survivors of human trafficking.

**Ms Orla Gardiner (Migrant Help):** Thank you, Liz. Good afternoon, Chair and members. It may come as a surprise to members that a positive NRM outcome does not in itself give rise to a benefit entitlement. It is a perverse situation, in which some recognised survivors of human trafficking are homeless, destitute and completely reliant on charitable support. Where a person is homeless and has no income, it is almost only a matter of time before they are re-exploited. The main category of affected persons is European nationals who have been granted pre-settled status. They have lawful residence, which makes the situation particularly unthinkable.

It is important to note that the situation is not the making of the Department of Justice; rather, it has arisen due to complex issues, namely the interaction between social security, immigration and trafficking policy. Unfortunately, victims in this jurisdiction are at a disadvantage. There is provision in England, Wales and Scotland to extend NRM support beyond its conclusion. Despite the complexities, we have identified a number of options, and we recommend that the Committee asks officials at the Department of Justice and the Department for Communities to work with our support organisations to develop a pathway to financial support for all survivors of trafficking. Thank you.

**The Chairperson (Mr Storey):** Thank you.

**Ms Griffith:** Thank you, Orla. I now ask my colleague Noelle from Belfast and Lisburn Women's Aid to talk about the issue of historical convictions.

**Ms Noelle Collins (Belfast and Lisburn Women's Aid):** Good afternoon, Chair and Committee members. Thank you very much for giving me the opportunity to address you today. I speak to you on behalf of a group of women that we are supporting in Women's Aid, all of whom have been given positive conclusive decisions on their trafficking claims. All those women are local to Northern Ireland. At a vulnerable time in their lives, they were exploited into prostitution and thus incurred criminal records. It is difficult for many of us to understand the vast impact that that has had on their lives. All of them report reoccurring trauma. Most of them have exited prostitution, and others are trying to.

Unlike other jurisdictions, Northern Ireland does not have an exiting from prostitution strategy. That responsibility lies with the Department of Health, which is putting together an information leaflet. Recent research carried out at University College Dublin by Dr Monica O'Connor and Ruth Breslin highlights the importance of long-term support for exiting prostitution. The ability to take up employment and to feel part of a normal society are crucial.

The fact that women who have convictions through no fault of their own are being further punished is surely wrong. The women whom I represent have cooperated fully with the PSNI and the Public Prosecution Service to bring the perpetrators of those horrendous crimes to justice. They have given statement after statement to strengthen the prosecution's case. Reliving their ordeals over and over again has been extremely traumatic, but they have persevered, hopefully, to secure a successful outcome.

New legislation has been introduced in the South of Ireland expunging the prosecutions of just over 600 women. That was welcomed by an Garda Síochána. It stated:

*"As this is no longer an offence, why would women, particularly vulnerable women, be burdened with the legacy and a barrier to other employment?"*

Hindsight is a wonderful thing, and I believe that we should have considered including that in our Bill in 2015, on which we worked very closely with Lord Morrow. We are not talking about a large number, but the difference that this amendment could make to those women is indescribable: it would be life-changing. We recommend that the Committee seeks a ministerial commitment for a time frame for expunging prostitution-related offences. Thank you.

**The Chairperson (Mr Storey):** Thank you so much for those very succinct and telling comments. It was remiss of me not to say a word of thanks at the start. I trust that it is not taken as an empty platitude coming from a politician; it is genuinely felt and meant. You do challenging work. We heard from CARE about how much it appreciates the work that Flourish does. That also goes for your organisations. I have worked closely with Women's Aid in my constituency. I could not do my work if that organisation was not in my constituency. It does outstanding work. That is a word of thanks and appreciation for what you do.

The challenge for us is how we divorce some of those issues, such as the social security issues, from this particular Bill, or whether we can find a way for those in the Bill. That is a challenge for us. Maybe you should have come with amendments prepared for us. That would have made our job a bit easier. Thank you for your presentations and your help.

I will go straight to the Deputy Chair, Sinéad, and then to other members for questions.

**Ms Ennis:** Thanks for the presentation and for the information that you provided beforehand, which is in our pack.

My first question was going to be about the expunging of previous convictions for the likes of prostitution in other jurisdictions such as the South of Ireland or Britain, but you have answered that question. I think that you said that 600 women had previous convictions overturned. Is that right? That was going to be my first question.

In relation to the proposed amendment on providing social security entitlement for recognised victims of trafficking, I think that your correspondence states that the budgetary implications would be minimal. Do we have an idea of what they would be? Has that been costed? Is it within the scope of the Bill for the Department of Justice to compel another Department — the Department for Communities, under which social security falls — to provide for that?

**Ms Griffith:** The issue of financial support for victims and survivors of human trafficking is complex because of the interaction between immigration and devolved matters.

We can split the individuals into two categories. The first is European nationals with pre-settled status, because they have lawful residence. We calculate that there are no more than 29 people in that position. A practical approach for those 29 people would be an amendment to the universal credit regulations to state that a positive NRM outcome constitutes a right to reside for benefit purposes to allow access to universal credit.

Just to repeat: those people have lawful residency here because they applied to the EU Settlement Scheme. They are in a bind because, while they are in the pre-settled category, they do not have an entitlement, but, as soon as they have accrued their five years, they will. We are talking about a time-limited amount of support — a finite period. That is how I propose that the issues of European nationals are addressed.

It is more difficult for non-European nationals, but I am confident that there is scope in section 18 of the 2015 Act to provide long-term financial support, including to people who are subject to immigration control. We calculate that there are no more than 20 people in that position. We will happily go away and try to do the sums for you as to what the budgetary resource would be, but it will be 49 times an annual amount of universal credit, and I cannot calculate that off the top of my head.

**Ms Ennis:** Me neither. I appreciate that it is minimal and, of course, see the merit in it. Are asylum seekers who are refused asylum but are challenging the decision entitled to healthcare provision under the 2015 legislation?

**Ms Griffith:** Thank you for that question. The Law Centre worked closely with the Department of Health in 2015 to amend the healthcare regulations to afford an ongoing entitlement to asylum seekers who are challenging a negative asylum decision. We would like to see something equivalent for people in the trafficking system who are appealing a negative trafficking decision.

Colleagues from Flourish can give you a good example of somebody in that category to demonstrate to you why it is so important. Would that be helpful?

**The Chairperson (Mr Storey):** Yes.

**Ms Ennis:** I am trying to draw a comparison with a precedent in other legislation. That is good to know. Thanks very much.

**The Chairperson (Mr Storey):** If you want to give the example, by all means please go ahead.

**Ms Robinson:** Certainly. This is about a gentleman who had received a positive reasonable grounds decision on his trafficking but a negative conclusive grounds, which is being appealed by his solicitor. The issue arose when he went to get his COVID vaccination and was unable to do so because he could not get re-registered with any GP. We contacted the Business Services Organisation (BSO) and various agencies, and the gentleman has a health issue that needs ongoing monitoring by a GP, which he was then unable to get.

**The Chairperson (Mr Storey):** Is that the case that you referred to earlier when you talked about a legal case?

**Ms Robinson:** Yes.

**The Chairperson (Mr Storey):** OK. There will undoubtedly be an outcome to that at some stage — hopefully, soon.

**Ms Griffith:** May I add to that, Chair? A very clear precedent has been set in the context of asylum seekers, particularly given the ongoing COVID pandemic. It is so important that everyone has access to healthcare not only for matters of public health but for patient health and for the public purse. Without regular visits to a GP, easily manageable conditions such as diabetes or asthma can escalate and result in much more serious conditions, with people going to hospital and A&E, which is much more expensive to the public purse.

**The Chairperson (Mr Storey):** OK. Thank you.

**Mr Weir:** Thank you. I may be covering similar ground. You touched on a very pertinent point for me when you mentioned diabetes. I have recently been diagnosed and am conscious of the level of involvement from a healthcare point of view. To some extent, I am covering similar ground to the Deputy Chairperson. I am looking at this in a twofold way and just want to understand things clearly.

First, given the issues that you raised in your presentations, it may be that you are thinking less about amendments to the Bill and more about looking for concrete assurances in a public forum or, perhaps, recommendations from the Committee. It is either a question of the Minister giving assurances or indicating that particular amendments or changes to legislation will be made — perhaps not necessarily through direct changes to the Bill — or that, perhaps, discretion will be applied in using existing powers in that regard. My first question is to ask whether my understanding of what you have said is correct and that there are particular areas that you are pushing for. You have made a very strong case for them.

My second point is about the numbers in Northern Ireland. I know that you will be coming back to us with some figures. Sinéad raised the issue of trying to establish the numbers. The healthcare issue was mentioned and, again, it seems to be quite sensible to suggest extending the scope not only to those who are in the process but to those who are putting in appeals so that cover is still in place for healthcare provision. Offhand, do you have figures for the number of people who appeal each year so that we can judge the impact of that change?

**Ms Griffith:** Both issues — providing an entitlement to healthcare and an entitlement to financial support — could best be addressed through a ministerial assurance. However, legislative change is necessary in relation to quashing convictions. An amendment to criminal law might be the best option.

The number of people who currently do not have a healthcare entitlement is extremely small. I would be surprised if you needed two hands to count them. We think that it may be five or fewer; it is very small. Again, it is interesting that there is scope in section 18 of the 2015 Act. The existing powers, perhaps, have not been used as fully as they could be.

**The Chairperson (Mr Storey):** OK, Peter?

**Mr Weir:** Yes. I would just like clarification. It may be that we will need to seek advice. I appreciate the clarification about where you see assurances applying and where you see amendments being necessary. Clearly, for instance, the expunging of previous criminal convictions would require a direct change in legislation. Maybe that can be explored. There was an indication that you would look for a direct commitment from the Minister to bring forward changes. That suggests using a slightly different vehicle to a direct amendment to the legislation. I do not know whether the legislation, if amended, could provide what is necessary. Do you have any thoughts on the vehicle that would be required for that change to happen?

**Ms Griffith:** Legislation is needed to quash convictions, and it is beyond our abilities to propose the wording of an amendment. We would be very pleased to see a ministerial assurance that legislation would be brought forward within six months. However, if you would like us to propose the wording of an amendment, we will do our best to provide that.

**The Chairperson (Mr Storey):** On a number of the issues that have arisen, we can have a discussion with the Bill Office, which advises us on the scope of the Bill. Ultimately, there is a process on the scope of the Bill, because the Speaker has to determine whether amendments are admissible. On a number of the issues, whether they are related to health, finance or whatever, we will continue to work to get an understanding of what we can and cannot do. I have experience of Ministers giving us assurances in the House and written assurances on what would be done, but, when the legislation came into existence, they were not worth the paper that they were written on. In my experience, the organisation that the legislation is for will say that, if something is not in an Act, what so-and-so said in the Assembly, whether he was Minister at the time or not, does not matter; they operate by what the legislation says. We need to be careful and cautious of that and aware that it is one of the big risks. That does not take away from the sincerity or integrity of any Minister or what they say in the House. However, the legislation ties things down.

**Miss Woods:** I think that Peter has been reading my questions.

**The Chairperson (Mr Storey):** Has he?

**Miss Woods:** Yes.

**The Chairperson (Mr Storey):** Over your shoulder.

**Mr Newton:** He can see your screen.

**The Chairperson (Mr Storey):** Look, he is just behind you.

**Miss Woods:** He is behind me. *[Laughter.]* Scary.

I want to touch on historical convictions. Noelle, you outlined the impact of the Republic of Ireland initiative and the number of women who have had their convictions expunged as a result.

I agree with the Chair about assurances. If there is an assurance that legislation will be brought forward in six months — well, we know what is happening in six months' time. I am mindful of timing and how far assurances may go. Again, that is nothing to do with any Minister; it is just the reality of the Assembly mandate. I am keen to look at getting something in the Bill, if there were any way of doing that, because then it will be written down. Whether it is commenced is a whole different matter, but at least it is written there.

I want to talk very briefly about the healthcare entitlement. Liz, you said that the Law Centre was involved in amending the healthcare regulations on asylum in the 2015 Act. What Act was that?

**Ms Griffith:** I really should know this. I think that it was on the provision of healthcare to persons not ordinarily resident. I can clarify that for you.

**Miss Woods:** It is probably in your submissions. What I am trying to get at, similarly to the Deputy Chairperson, is whether it was justice or health legislation.

**Ms Griffith:** It was healthcare legislation.

**Miss Woods:** Right, OK. That is where we start engaging scope, and I tried that last year with the then Domestic Abuse Bill, and it was completely fruitless.

**The Chairperson (Mr Storey):** It just goes down.

**Miss Woods:** That does not mean that we do not try. With the Licensing Bill, we saw a bit of a crossover into health when we were talking about alcohol addiction. That was a bit of a surprise. It does not mean that it cannot happen, so I think that it is worthwhile.

I raised with CARE NI the issue of the grounds for people appealing a negative decision. If an appeal were put in, not just on healthcare, would you support continuing support in general on housing and anything else? It would be a whole kind of support.

**Ms Griffith:** Yes.

**Miss Woods:** You had that answer. That is all from me. A number of comments were already dealt with.

**Ms Griffith:** To respond to that, this could be good timing because the Department of Health is due to revise its operational guidance on its 2015 regulations. I wonder whether there would be an opportunity for this Committee to write to the Department of Health and request that guidance makes it clear that entitlement continues after a negative NRM outcome. Still on the healthcare front, the legislation here on trafficking and healthcare is quite similar to that in Scotland, where that is done by providing a healthcare entitlement through the interpretation of the trafficking legislation. Essentially, in Scotland, the trafficking legislation gives the Minister the discretion to direct particular services. I think that we could do something similar in that the Minister here could direct, under section 18, a healthcare entitlement.

**The Chairperson (Mr Storey):** I will set out what our intention is procedurally. After today's evidence sessions, the Clerk and the Committee staff will, on our behalf, do a scope of all the issues that were raised. We will send correspondence to the Justice Minister, and we will also copy in, for example, the health issues to the Health Committee. We must respect the fact that the Health Committee, not the Justice Committee, is responsible for these issues. That is not to say that we cannot raise them. Rachel referred to another Bill where there was a crossover, and I think that that can be done.

**Ms S Bradley:** Thank you for your presentations. Most of the issues have been raised, but I have two further points. On the appeal period to which we have referred, when a victim is in appeal and on the support that could surround them, I am conscious of the timeline. I was reassured to hear of the small numbers in relation to health. Can you indicate the time that an appeal can or should take? I appreciate that some very complex cases may take longer to appeal, but is there a set time frame in which an appeal should be completed? If we are putting in the Bill a 12-month period for extended support, will all appeals definitely be heard fully and not be compromised by that 12-month window?

Secondly, on the quashing of criminal convictions, you present some very clear stories on unfortunate situations, and they are all around prostitution. Are there any other common crimes that could or should be considered because victims are typically led into them? I can see that prostitution is an obvious one, but are there any others of which we should be mindful?

**Ms Robinson:** I will address the healthcare question on the length of time for an appeal on a negative trafficking decision. In the case to which I referred, the appeal started in January this year. We are still awaiting the outcome of that. I do not think that I can give a definitive answer as to how long it will take.

**Ms Collins:** I will in come there. There are, let us say, unidentified times for the whole trafficking process. When someone is referred to us as a victim of human trafficking, they come into a 45-day investigation. We are supporting women in our trafficking project who have been with us for nearly two years, and decisions, on conclusive grounds, have not been made. For those who then wish to appeal, it could be a further two years. Those people are entirely in limbo, because they cannot work and are not entitled to benefits. There is an issue around the length of time for decision-making throughout the process.

On the expunging of prostitution prosecutions, we mentioned, as did some members, the numbers in the South of Ireland, where there have been 607. In Northern Ireland, we do not think that it would be any more than 50. We are talking about small numbers here, because, since 2015, it has not been an offence.

**The Chairperson (Mr Storey):** On Sinéad's point, are there other activities that could fall under that as well? Prostitution is one, but there may be other offences that should be considered.

**Ms Griffith:** Under the 2015 trafficking legislation, section 22 provides for a statutory defence. Where a person can demonstrate that they were a victim of trafficking and modern slavery, they should not be prosecuted for a certain number of offences. The list of offences protected by the statutory defence is much narrower — that is my reading — than that in GB. It is about time that we look again at the types of offences that are protected by the statutory defence.

I will give you an example. When the 2015 Act was being drafted, the type of criminal exploitation that we saw was people being trafficked here for cannabis-related offences on cannabis farms. Sadly, we are now seeing people being trafficked here for the distribution of class A drugs — namely, heroin. In fact, getting people hooked on heroin is the means of control. That is one of the ways in which traffickers control those who have been trafficked. Our statutory defence does not extend to class A drug offences; it applies only to class B drug offences. That is one thing that the Committee may wish to look at. In the current modern slavery strategy, there is a commitment to review the statutory defence. However, I think that it is really pressing, so you may wish to ask the Department for an update on that and to look at whether the statutory defence really meets our contemporary understanding of what trafficking looks like and whether that could have retrospective effect, which would assist in the cases of the women about whom Noelle spoke and those of other people who have been prosecuted for offences prior to the implementation of the statutory defence. I am sorry if that was a rather long answer.

**The Chairperson (Mr Storey):** No, Liz. Just as Peter Weir must have been looking over Rachel's shoulder, you must have been looking over my shoulder, because I have a note in front of me about

that very issue: the adequacy of section 22 of the Act, particularly in relation to class A drug offences, about which I did not ask the representatives of CARE. That is something for us to consider. This Bill makes amendments to the 2015 legislation. There is an issue there, and I take the view that that is within the scope and competency of the Bill. I am not the person best placed to answer that. Clearly, that gives us scope to consider it, so thank you for that.

**Mr Newton:** I thank the witnesses for coming. This has been painful reading, to be honest with you. I have two quick questions to ask Jill. You indicated that a case started in January and is still not settled. How much of the delay was due to the impact of the pandemic? Could that case have progressed more quickly, or were you not expecting it to progress within that timescale?

**Ms Robinson:** The submissions were made by the solicitor to the single competent authority. The time taken depends on how many issues it is dealing with. Some cases are dealt with quickly; others, as Noelle indicated earlier, can extend for a long period.

**Mr Newton:** I should have apologised for my late arrival. I was at another meeting before coming here. I have another quick question. Are any under-18s involved in this dreadful situation?

**Ms Robinson:** Yes.

**Ms Griffith:** Yes, sadly. The number of trafficked minors has increased significantly. Thankfully, by virtue of the 2015 Act, all separated minors have an independent guardian to support them. Barnardo's provides that independent guardianship service, so it is best placed to speak to you about what is happening to those minors. Yes, it is an awful thing that happens.

**Ms Collins:** Many of the women who come to us are pregnant as a result of having been trafficked, and they go on to have children whose fathers they cannot identify. As you can imagine, that puts those women in a difficult situation. What do they tell their children when they reach a certain age and ask, "Who is my father?" It is a dreadful situation. Once the girls become pregnant, many traffickers throw them out, for want of a better phrase.

**Mr Newton:** In that situation, what are the relationships between mother and child and with social services and so on?

**Ms Collins:** It is not so much about social services and more about the mother and her child. We have to take our hats off to the mothers. They are wonderful mothers: they hold on to the fact they have a child of their own, and they nurture that child. There are difficulties for the women in what they tell their children. We are seeking help for lots of women in relation to that. They could easily tell the child that their father is dead, but they do not want to live a lie with their child, so we look at the best way for a child to come to terms with how they were born.

**Mr Newton:** The mother may be involved in a certain type of work. Do social services not become involved at that stage?

**Ms Collins:** Certainly, with trafficked women, if there are any child protection issues, social services become involved. The majority of women whom we support, who have been rescued from trafficking, are no longer involved in that work.

**Ms Griffith:** I want to say something about family issues. As you can imagine, survivors of human trafficking have family members in different parts of the world, including Europe. As a result of Brexit, the number of avenues that provide a possibility to reunite families has diminished significantly. Often, we see people who are recognised as survivors of human trafficking, but their children are stranded somewhere in a refugee camp. For whatever reason, they never quite made it. We did not include this in our brief to you because we recognise that family reunion issues sit with Westminster. I cannot really explain to you how difficult it is for survivors of human trafficking to integrate into society here when they have teenage daughters stuck somewhere en route. All three organisations here are working with women and men who are in that position. Had they arrived a year earlier, they would have had access to family reunion rights. Those rights no longer exist.

**Mr Newton:** You say that it is a Westminster issue, but I would appreciate, Chair, as, I am sure, other members would, some information on that issue. I think that all of us will be concerned about that.

**Ms Collins:** On a happy note, if there is a happy note, this morning, we reconciled a mother and daughter who had been separated for five years. Both have turned up in Northern Ireland. It was a very happy occasion for both of them.

**The Chairperson (Mr Storey):** I offer our appreciation to all of you who were involved in that. Thank you for that.

There are no other questions from members. I have one final question. Are you in favour of the introduction of slavery and trafficking risk orders?

**Ms Griffith:** We discussed that as we were coming in.

**The Chairperson (Mr Storey):** You do not have to give us an answer to that today. Think about it and correspond with us. I am trying to be fair.

**Ms Griffith:** Yes, thank you.

**The Chairperson (Mr Storey):** I appreciate that a number of organisations are represented here today, so that may be the fairest way.

**Ms Griffith:** Agreed.

**The Chairperson (Mr Storey):** I am trying to be diplomatic. It is not like me.

**Ms Griffith:** We would be very happy to come back to you on that.

**The Chairperson (Mr Storey):** OK. Thank you. We will wait for that correspondence to arrive at some stage.

In the meantime, thank you. We have enjoyed your attendance here, although "enjoyed" is not the right word, given that we are dealing with real people who have real lives and go through awful experiences. I know that your organisations endeavour to make their time here as good as possible, but the system, the processes, the paperwork, the hurdles and the obstruction — all of that — make it all very challenging. Thank you for your submission. We have considerable work to do on the Bill, but that is what we are here for, and we look forward to continuing to engage with you. Thank you very much.