'No Income, Temporary Visa, and Too Many Triggers': Barriers in accommodating survivors of human trafficking and slavery in Australia

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Abstract

Access to stable housing has a significant effect on the wellbeing of survivors of human trafficking and modern slavery. Safe and sustainable accommodation provides a crucial foundation for survivors beginning their recovery; however, it is often very difficult to source for support services assisting them. This paper presents the findings of research that analysed the eligibility, suitability, availability, and accessibility of short-term accommodation and long-term housing options to better understand the barriers to accommodating survivors in Australia. It demonstrates that survivors were not eligible for many options due to their immigration status or lack of income. Within the limited options, there is a shortage of suitable accommodation due to the absence of survivor-specific services, and due to rules and requirements imposed by accommodation providers that are not supportive of survivors' unique needs. These include restrictions on survivors' freedom of movement, on the use of alcohol and other drugs, and on accommodating men, children, and extended family, as well as requirements related to engaging in activities. These barriers negatively impact survivors' recovery and may lead to homelessness whilst increasing the risk of re-trafficking or other harm. Collaboration and coordination between actors within anti-slavery and housing policy spheres is urgently required to mitigate these barriers and prevent such harms.

Keywords: human trafficking, modern slavery, survivors, housing insecurity, immigration status, income, Australia

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Introduction

For many survivors, escaping human trafficking or modern slavery means the simultaneous loss of work, income, and accommodation, however exploitative any of these were. Survivors, including those who choose to seek support from government and non-government services, often find themselves homeless with no means of earning an income. A serious challenge that trafficking support services experience when assisting survivors is finding them accommodation. Insecure housing can have negative implications for survivors' recovery and can significantly impact their mental and physical health and wellbeing. While accommodation is not a catch-all solution for meeting survivors' needs, safe and sustainable housing is a crucial foundation for their recovery. Despite its importance, securing such accommodation can be particularly stressful for survivors and for staff of services supporting them.

Over the past decade, Australia has seen an increase in the number of people formally identified as survivors of human trafficking and slavery.⁵ The number of survivors being supported through the government-funded Support for Trafficked People Program (hereinafter the Support Program) has more than tripled since the Australian Red Cross (Red Cross) first began delivering the service in 2009.⁶ Throughout this period, Australia has also experienced a severe housing crisis with the rate of homelessness increasing from 45 people per 10,000 population in 2006 to 50 people per 10,000 population in 2016, when the most recent data

G Munro, "The NGO Response to Human Trafficking: Challenges, opportunities, and constraints", in J Winterdyk and J Jones (eds.), The Palgrave International Handbook of Human Trafficking, Springer International Publishing, Cham, 2020, pp. 1489–1501.

² *Ibid*, p. 1500.

A Pascual-Leone, J Kim and O-P Morrison, 'Working with Victims of Human Trafficking', Journal of Contemporary Psychotherapy, vol. 47, 2016, pp. 51–59, https://doi.org/10.1007/s10879-016-9338-3.

⁴ H Pearce, 'Safe Accommodation for Separated Children', in E Kelly and F Bokhari (eds.), Safeguarding Children from Abroad: Refugee, asylum seeking and trafficked children in the UK, Jessica Kingsley Publishers, London, 2011, p. 69; J Quinn et al., The Intersections of Family Homelessness and Human Trafficking, UNANIMA International, New York, 2021, p. 2, retrieved 27 August 2022, https://unanima-international.org/wp-content/uploads/2021/05/Intersections-Publication-2.pdf.

Australian Red Cross, Support For Trafficked People Program Data Snapshot: 2009 to 2019, Melbourne, 2019, p. 5, https://www.redcross.org.au/globalassets/corporatecms-migration/migration-support/support-for-trafficked-people/support-for-trafficked-people-data-snapshot-2009-2019.pdf.

⁶ Ihid

was made available.⁷ The COVID-19 pandemic has further affected housing affordability and rental availability, rendering many long-term systemic housing problems more visible.

Within this landscape, it is particularly challenging for survivors to find stable accommodation. More than half (56%) of the 515 survivors referred to the Support Program between 2009 and 2021 had an unstable accommodation situation at the time of referral. This included survivors being supported by crisis accommodation or refuges, living or staying with family or friends, or experiencing homelessness. Survivors face the same barriers in accessing accommodation as other Australians, but they also often experience further challenges arising from their exploitation and related trauma.⁸

This article details barriers in accommodating survivors related to their eligibility for and the suitability of available short-term accommodation and long-term housing options in Australia. We argue that these barriers may render many survivors homeless which can impact their recovery whilst increasing the risk of re-trafficking or other harm. We conclude with recommendations on how to mitigate such barriers to better support and accommodate survivors in the future.

Methodology

To analyse barriers in accommodating survivors, we explored the eligibility, suitability, availability, and accessibility of different short-term accommodation and long-term housing options for survivors throughout Australia using a mixed methods approach which included 1) stakeholder mapping; 2) online surveys and semi-structured interviews with accommodation providers and survivor caseworkers; and 3) an analysis of survivor casework data.

The research team defined 'eligibility' in terms of options survivors can access due to their individual demographics, and 'suitability' in terms of the appropriateness of options for survivors' unique needs, experiences, and circumstances. The research defined 'availability' as the existence of vacancies, while 'accessibility' referred to both geographical location and disability or special needs access. As both availability and accessibility are broader issues affecting the housing sector

Australian Bureau of Statistics, Census of Populating and Housing: Estimating Homelessness, 2018, https://www.abs.gov.au/statistics/people/housing/census-population-and-housing-estimating-homelessness/2016.

N Nnawulezi et al., 'Doing Equitable Work in Inequitable Conditions: An introduction to a special issue on transformative research methods in gender-based violence', Journal of Family Violence, vol. 33, 2018, pp. 507–513, https://doi.org/10.1007/s10896-018-9998-8.

in Australia, they are not covered in this paper due to its focus on barriers specific to accommodating survivors.

The research was conducted by a project team from the Red Cross and funded by the Australian Government Department of Social Services. Red Cross caseworkers facilitate access to accommodation for survivors; however, Red Cross is not an accommodation provider itself. Ethics approval was obtained from the University of South Australia. Data collection occurred between May and June 2021.

Stakeholder Mapping

Stakeholder mapping was first undertaken by Red Cross staff at a state and territory level to identify accommodation providers and classify them by location, type, and sector. These staff were engaged through a competitive interview process and chosen based on their experience working in social service provision and knowledge of their local housing sectors. Through mapping, 312 accommodation providers across Australia were identified, including formal (registered) short-term and long-term providers operating in the homelessness, domestic violence, youth, and refugee settlement sectors. Accommodation providers were counted at the organisational level, not the service level. For example, if one organisation operated numerous services, this was counted as one accommodation provider.

Survey and Semi-structured Interviews with Accommodation Providers and Caseworkers

An online survey comprising both quantitative and qualitative questions was sent to each of the identified 312 accommodation providers, and an experienced staff member was asked to complete it. The survey asked a range of questions designed to understand the eligibility and suitability of their accommodation for survivors—for example, whether providers had visa or co-payment requirements as eligibility criteria or if there were any work or study requirements of service users—and of available amenities and supports within the premises. The survey data was coded and analysed in Excel.

A separate online survey was developed to understand the barriers that Red Cross Support Program caseworkers experience when attempting to source accommodation for survivors. The questions were like those asked of accommodation providers in relation to eligibility and suitability of accommodation options and intended to understand any additional challenges caseworkers experience in supporting survivors to secure accommodation. The survey data was coded and analysed in Excel.

To supplement information from the surveys, semi-structured interviews were conducted with accommodation providers, who had recent direct experience of providing services to survivors, and with caseworkers. The interview questions were designed to gain further details about the challenges experienced by both

participant groups in accommodating survivors, and about the immediate and longer-term impacts of unsuitable or unsustainable accommodation on survivors. All interviews were transcribed, and the data was coded and thematically analysed using NVivo.

Survivor Casework Data

An analysis of Red Cross Support Program casework data, including entry status reports, monthly reports, and strength and needs assessments, was also conducted to understand the accommodation situation of survivors at their entry to, and exit from, the Support Program, the type of accommodation utilised whilst being supported, and the barriers caseworkers identified in accommodating survivors. Casework records were analysed and classified in one of four groups, depending on if the survivor had a stable or unstable accommodation situation at the time of entry or exit from the Support Program. The records of clients who were referred to, or exited from, the Support Program between 1 January 2019 and 30 June 2021 were selected for analysis.

Analysis of all data collected, and presentation of the research findings, has been shaped by a theoretical framework which explores the embodied, affective, emotional, and relational geographies of homelessness. This is inspired by the work of Daya and Wilkins who highlight the importance of housing in constituting identity, belonging, and social connections. Indeed, the article demonstrates that housing is core to constituting identity and providing a survivor a stable private base from which to construct a meaningful public life.

Findings

Overview

Collectively, 107 accommodation providers and 19 caseworkers completed the survey (cumulative response rate of 38%). Responses came from providers in each state and territory of Australia, except for the Australian Capital Territory where no relevant accommodation providers were identified through the stakeholder mapping. The From those that responded to the survey, 76% reported operating in urban areas and 19% in rural or remote areas. Most accommodation providers

S Daya and N Wilkins, 'The Body, the Shelter, and the Shebeen: An affective geography of homelessness in South Africa', *Cultural Geographies*, vol. 20, issue 3, 2013, pp. 357–378, https://doi.org/10.35648/20.500.12413/11781/ii205.

The mapping exercise was heavily informed by casework experience, including accommodation services utilised to support survivors, and a limited numbers of survivors have been supported in the Australian Capital Territory.

worked in the homelessness sector (58%), followed by domestic violence (20%), youth (15%), and refugee settlement (7%) sectors. The surveys, as noted, were supplemented with 45 interviews (31 accommodation providers and 14 caseworkers). This represented approximately 10% of all eligible accommodation providers and 61% of all eligible caseworkers. As a final point of data triangulation, the surveys and interviews were informed with a review of 77 casework records.

Table 1: Sample size and response rate for each data collection technique.

Data Collection Method	Number of Participants—Invited	Number of Participants— Completed (Response Rate %)
Survey of accommodation providers	312	107 (34%)
Survey of caseworkers	23	19 (83%)
Semi-structured interviews with accommodation providers	52	31 (60%)
Semi-structured interviews with caseworkers	20	14 (70%)
Casework records	77 records identified	77 records analysed (100%)

Eligibility Barriers

The most significant and interrelated barriers that survivors face when attempting to find short-term accommodation and long-term housing are related to their immigration status and a lack of ongoing income, commonly due to an inability to gain employment or access income support.

Immigration status

More than half (54%) of survivors supported by Red Cross are on a temporary visa. In Australia, the federal government provides resources and funding for housing and homelessness services to each state and territory under the National Housing and Homelessness Agreement (NHHA). State and territory governments are then responsible for developing strategies and distributing funding to services to support and address local housing needs.¹¹ The waiting list for social housing in multiple states is more than ten years and there are strict guideless about who is eligible to apply.¹² A general requirement for accessing social housing in the states of New South Wales, Victoria, Tasmania, and the Australian Capital

A Spinney et al, Ending Homelessness in Australia: A redesigned homelessness service system, Australian Housing and Urban Research Institute Limited, Melbourne, 2020, https://doi.org/10.18408/ahuri5119001.

St Vincent De Paul Society, Responses to Homelessness: Contribution to the 2021 audit conducted by the Audit Office of NSW, 2021, p. 3.

Territory is for applicants to be permanent residents or Australian citizens. This requirement renders many survivors on a temporary visa, or those who have an irregular immigration status, ineligible for social housing.¹³

The government's Human Trafficking Visa Framework (HTVF)¹⁴ is intended to support survivors who are foreign nationals to regularise their stay in Australia and access much needed support such as accommodation, but its design limits some survivors' eligibility. Survivors can access the HTVF and the Support Program for an initial period of between 45 to 90 days only if they report their situation to the Australian Federal Police (AFP). They are then only eligible for longer-term visas and support if they participate in the investigation of a human trafficking or slavery offence.¹⁵ This immediately excludes survivors who are unwilling or unable to engage with authorities and can mean they are left unsupported and vulnerable to homelessness. For those who do access the HTVF and Support Program, as explained by a caseworker, their eligibility for these will 'cease once an AFP investigation closes', which can occur suddenly and for any number of reasons. This insecurity of access to visas and support can then negatively impact survivors' accommodation situation. In the words of a caseworker, a survivor's visa being 'subject to the investigation creates an uncertainty when they apply for community or public housing'.

Immigration status can also limit survivors' eligibility for accommodation options outside of social housing. Nearly 1 in 4 surveyed accommodation providers require survivors to be permanent residents or citizens. Often, this is due to restrictions imposed on providers related to government funding. As explained by a caseworker, 'some government-funded short-term accommodation only accept citizens and permanent residents'. However, 77% of accommodation providers do not require service users to have a particular immigration status, indicating that immigration status on its own is not a significant outright barrier to accessing such services. Indirectly, however, an individual's immigration status can create other issues which limit their access to accommodation services, namely the ability to access an ongoing income through either work or social services. As an accommodation provider explained, 'it's not people's visa status that matters,

An exception to residency requirements is made for people seeking asylum or fleeing family violence, which may include some survivors. However, a general exception does not apply to survivors more broadly.

The Human Trafficking Visa Framework consists of two visa subclasses: Bridging F Visa (subclass 060), which is a temporary visa, and Referred Stay Visa (subclass 852), which is a permanent visa. Migration Regulations 1994 (Cth) pt. 2 div. 2.5 regs. 2.20 (14).

Department of Social Services, Support for Trafficked People Program, 2023, https://www.dss.gov.au/women/programs-services/reducing-violence/anti-people-trafficking-strategy/support-for-trafficked-people-program.

it's just the fact that temporary visa holders are often not on a stable income'.

Income

Participants noted that survivors' unstable or insufficient income was another major barrier to securing accommodation. One caseworker explained 'for a private rental, if clients do not have income or not enough income, it is very difficult for [them] to get a house'. An accommodation provider further explained that this is often the case also for privately shared houses. Even survivors who do have an ongoing income generally receive relatively low wages, prohibiting them from accessing increasingly expensive private housing. One caseworker explained that 'current rental market prices are not helpful for clients with low income' and another added that the 'rental market has high competition that our clients are unable to compete with'.

A lack of income also prevents survivors from accessing accommodation providers' services, with one provider explaining they had 'very limited placings for clients without ongoing income' and another saying, 'we can only accept up to two no-income clients at any one time.' Indeed, 44% of short-term and 58% of long-term providers indicated that their services required some sort of financial contribution from clients. Survivors with no or very low income and no access to government income support are unable to meet these requirements. Other accommodation providers noted that they could accept clients with no income if they could evidence an ability to obtain an income in the future. As explained by one such provider, 'the barrier is when there is no capacity to obtain any income and no ability to do work'. However, in many cases, survivors' ability to work is linked to their immigration or visa status.

Employment

Survivors' immigration status may not allow them to legally work in Australia, meaning they are unable to independently demonstrate the ongoing income needed to secure accommodation. As explained by an accommodation provider, survivors 'need to have work rights...so they can transition out [of our service] to their own property'. However, the temporary visas granted to, or held by, survivors can come without or with only limited work rights. Even when survivors are granted temporary visas with work rights, such as a Bridging Visa F (BVF) under the HTVF, their temporary visa status may still prevent them from gaining employment. Employers often do not understand the legalities related to hiring a person with a temporary visa and use immigration status as a reason to not hire otherwise qualified individuals. As one caseworker summarised, 'employers require job applicants to hold substantive visas'.

There are also other reasons why survivors may be unable to gain employment. As explained by a caseworker 'some of the people we're supporting aren't ready to enter the workforce....' Indeed, labour trafficking survivors have experienced exploitation *within* the workplace, including excessive overtime, restricted freedom, threats, or severe violence. Such exploitation can manifest in symptoms of depression, anxiety, and post-traumatic stress disorder.¹⁶ In this context, then, workplaces are not neutral spaces, but locations where survivors have previously experienced mental and physical violence. Expectedly, these survivors may not be ready to re-enter the workforce. For those who are successful in securing employment, there are barriers which may prevent them from maintaining it. For example, as explained by a caseworker, 'even when women can work, the cost of childcare can be prohibitive if they are unable to access subsidies'.

Income Support

The interconnected nature of immigration status and income comes into sharper relief when considering that the types of visa survivors are granted, and the conditions attached to them, may restrict their access to government income support payments. For example, caseworkers explained that survivors who obtain a BVF usually receive access to government income support. This increases the possibility of a survivor securing accommodation as they can demonstrate having an ongoing income. However, the HTVF is designed to enable survivors who do not already hold a substantive visa to remain lawfully in Australia and to access the Support Program.¹⁷ Therefore, a BVF is only granted to survivors if they have no other active visa when they are identified as suspected victims of human trafficking or slavery. A survivor on a different active visa is subject to the rules accompanying that visa category and ineligible for a BVF until that visa expires. For example, a survivor who is on a tourist visa, which restricts access to government income support, will likely remain on this visa until it expires before being granted a BVF. When survivors are restricted from accessing income support payments, it negatively impacts their ability to secure accommodation.

Analysis of Support Program casework data confirmed the correlation between immigration status, income (based on employment or access to income support), and housing. Of survivors who exited the Support Program with an unstable accommodation situation, 53% had no employment and only 33% were accessing income support payments.

L Kiss et al., 'Health of Men, Women, and Children in Post-trafficking Services in Cambodia, Thailand and Vietnam: An observational cross-sectional study', The Lancet Global Health, vol. 3, no. 3, 2015, pp. 154–161, https://doi.org/10.1016/s2214-109x(15)70016-1.

Parliament of The Commonwealth of Australia, 'Hidden In Plain Sight: An inquiry into establishing a Modern Slavery Act in Australia', Canberra, 2017, p. 152.

Suitability Barriers

The need for a holistic approach to supporting survivors in their recovery is well recognised. Such an approach includes services that not only provide accommodation but also an individualised response tailored to survivors' unique needs. However, our research found that such an approach is largely absent in the Australian context. Stakeholder mapping identified only two states, New South Wales and Victoria, that have safehouses specifically for survivors of trafficking and/or forced marriage. These services were identified by caseworkers as the most suitable for survivors; however, limited capacity restricted their availability.

Of the accommodation services which are available to survivors, many have rules and requirements that are not supportive of survivors' unique needs and subsequently restrict their suitability. These include restrictions on survivors' freedom of movement, on the use of alcohol and other drugs, and on accommodating men, children, and extended family members, as well as requirements related to engaging in activities, as outlined below.

Restrictions on Freedom of Movement

From the accommodation providers surveyed, 42% mentioned restrictions on freedom of movement as one of their main rules for service users, including curfews and limitations on staying away from the premises for certain periods of time. For example, one provider explained that they have an '8 p.m. curfew' and a rule that service users are allowed only '1 night away from [the] shelter per week'. Another provider explained that their house rules contract 'includes a curfew of 9:30 p.m. [and] only staying out one night per week'. More specific rules restricting an individual's freedom of movement were also identified. For example, a provider explained that a condition of stay for their service was 'no returning to...places known to or frequented by the perpetrator of family violence'. Many providers justified such curfews and restrictions with client safety and the comfort of other residents. For example, one provider explained that, should clients choose to leave after 11 p.m., 'it is very unlikely that [they] will be permitted back in as the doors are locked, and other guests may be disturbed'. Although such rules may indeed help to ensure the safety or comfort of other service users, they may not be suitable for survivors whose trafficking experience involved similar limitations on freedom of movement. Survivors often experience complex trauma and therefore a trauma-informed approach to

K M Edwards et al., 'Call to Freedom: A promising approach to supporting recovery among survivors of sex trafficking', Journal of Human Trafficking, 2021, pp. 1–13, https://doi.org/10.1080/23322705.2021.1894410.

working with them is essential.¹⁹ Although intended to support safety, restrictions on freedom of movement may be in contrast with trauma-informed practice and be counterproductive for survivors' recovery.

Restrictions Related to Alcohol and Other Drugs

Another suitability barrier identified were accommodation providers' restrictions related to alcohol and other drugs (AOD). Thirty-seven percent of caseworkers said that one of their primary challenges is finding accommodation that is suitable for survivors experiencing substance addiction. This was because most providers either do not allow the presence of AOD on their premises, have a requirement for those accessing their services to not be actively using AOD, or allow such service users only if they are engaging in AOD rehabilitation services. However, the use of AOD is closely linked to trauma and mental health issues, which are common impacts of exploitation. AOD is often used as a coping mechanism by survivors,²⁰ and forced AOD use can also be a part of an experience of trafficking or slavery,²¹ leading to addictions and dependencies. Therefore, such restrictions can be limiting for survivors who are using AOD or detoxing from substance addictions.

One accommodation provider explained that 'drug and alcohol issues [...] are a challenge for our service because we aren't able to provide accommodation to people who are still using drugs and alcohol or have a drug and alcohol dependency'. Commonly, providers explained that such restrictions were necessary because the presence or use of AOD may impact on other service users. For example, one explained that '[o]ur communal crisis property has shared facilities (kitchen/lounge/bathroom), which can make it difficult for people who require space and privacy from others who might be struggling with AOD dependency and trigger their recovery'. Another explained, 'we provide accommodation for people experiencing alcohol and drug issues; however, we have a strict no drug

K McGuire, 'The Embodiment of Complex Trauma in Domestic Minor Sex Trafficking Victims and the Dangers of Misidentification', *Journal of Human Behaviour in the Social Environment*, vol. 29, issue 4, 2019, pp. 535–547, https://doi.org/10.1080/10911359. 2018.1543630.

²⁰ C Zimmerman et al., 'The Health of Trafficked Women: A survey of women entering post trafficking services in Europe', American Journal of Public Health, vol. 98, no. 1, 2008, pp. 55–59, https://doi.org/10.2105/AJPH.2006.108357.

C Zimmerman, M Hossain, and C Watts, 'Human Trafficking and Health: A conceptual model to inform policy, intervention and research', Social Science & Medicine, vol. 73, no. 2, 2011, pp. 327–335, https://doi.org/10.1016/j.socscimed.2011.05.028; E Koegler et al., 'Traffickers' Use of Substances to Recruit and Control Victims of Domestic Trafficking for Sexual Exploitation in the American Midwest', Anti-Trafficking Review, issue 18, 2022, pp. 103–120, https://doi.org/10.14197/atr.201222187.

or alcohol policy in our crisis accommodation'. Another identified this rule was in place 'due to shared living environment with children'.

Some providers explained that they accept people experiencing AOD issues 'only if they are receiving support for their addiction', or that people 'must be willing to address the issues and not be violent to workers or neighbours.' Both types of restrictions can have a limiting effect on the suitability of such accommodation for survivors who may need time before they establish feelings of safety and independence required to fully engage in AOD support. Additionally, survivors may avoid AOD support due to fear of discrimination, shame about their trafficking experience or substance abuse, and stigmatisation.²² Some accommodation providers admitted that they lack the capacity to work with people experiencing AOD issues. For example, one explained that their service was 'not really geared up to cope with this', whilst another identified they will accept service users engaging with AOD 'only if they have support networks surrounding them as we do not have the supports'. A third provider explained 'our service accepts clients experiencing alcohol or other drug issues; however, unstaffed crisis accommodation does not necessarily meet the specific needs of this demographic'. This highlights that even if able to access such accommodation, survivors engaging with AOD may not be provided with suitable support tailored to their specific needs due to the providers' limited capacity.

The research identified a small number of accommodation providers that do accept people experiencing AOD issues and provide associated therapeutic or rehabilitation support. For example, one provider explained, 'we have AOD and MH [mental health] programs to support clients experiencing AOD issues'. However, these services were noted as having very limited capacity and long waiting periods, making it hard for survivors to access them. Another issue with such accommodation options was that they may not have the capacity to help survivors address the complexity of the issues they are experiencing. As explained by a caseworker, some of the survivors they support have received a 'dual diagnosis of substance abuse and mental health [conditions]'; however, 'many housing providers only support one diagnosis'. Assessment of service users on a needs basis was common amongst some accommodation providers where suitability for their service is 'dependant on the person's current situation [and] ... what the level of their need is'. Another described using questions such as 'Are their needs greater than the support our service can provide?' to determine individuals' suitability for their service. Although such an approach may be logical and the most appropriate one to meet the needs of the greatest

R J Macy and N Johns, 'Aftercare Services for International Sex Trafficking Survivors: Informing U.S. service and program development in an emerging practice area', *Trauma, Violence, Abuse*, vol. 12, issue 2, 2011, pp. 87–98, https://doi.org/10.1177/152483801 0390709.

number of service users, it has a limiting effect on accommodation options for survivors with more complex needs.

Restrictions on Accommodating Men, Children, and Extended Family

For male survivors or survivors who wish to be accommodated with their partners, children, or extended family, finding suitable accommodation is ever more challenging due to restrictions imposed by accommodation providers on accepting men or family members of service users.

It is common for accommodation providers to have restrictions on accepting male residents, automatically excluding both male survivors as well as female survivors who want to be accommodated with a male partner, child, or extended family member. Sometimes these rules were explicit, with accommodation providers indicating gender-specific eligibility criteria, and other times they were more implicit, with exemptions made only to accommodate female family members of residents. For example, one provider explained that a client's family would be allowed 'occasionally in the case of extended family—grandmother or other female family member' and another reflected that 'occasionally we have had a female relative stay for support or mutual support'. Although these restrictions may be justified to maintain a safe or comfortable environment for other service users, they can be exclusionary and restrict the suitability of accommodation for some survivors.

Almost half (43%) of accommodation providers do not accept partners, children, or other family members of service users. Another 29% accept extended family but noted that this was only in particular circumstances. For example, one provider explained 'we accept any children related to [the] client and we have also taken in clients with their mother as well'. Many providers noted that these exceptions are assessed on an individual basis and the criteria varied for different providers, often due to capacity, funding, or other restrictions. For example, one provider explained, 'we will accept siblings and young parents with children as long as they are in our age range [of] 16–24 years', whereas another explained, 'we can sometimes accept a young person and their child, depending on [the] age of the child'. Caseworkers indicated that for survivors, navigating these types of individual requirements specific to providers often took a lot of time and energy and created long periods of uncertainty.

Even when accommodation providers accept dependent children in their services, only 56% indicated that their premises are always suitable for children. Another 30% indicated their premises are never suitable for children, usually due to the facility being shared with others and based on maintaining the safety of children. For example, one provider stated that 'communal living with other women and children undergoing crisis/trauma is not conducive for children',

and another explained that 'in our larger community housing complexes, it isn't always appropriate to provide accommodation to families with children due to the antisocial behaviour that occurs'. The remaining 14% of providers indicated that their premises were sometimes suitable for children, with one indicating, 'we will take parents with children as a last case scenario'. Although these reasons may be entirely appropriate, they limit the ability of survivors with dependent children to find suitable accommodation.

The challenges associated with these limitations were widely acknowledged by research participants, including accommodation providers who agreed on both the general unavailability and unsuitability of shared accommodation for children. As explained by an accommodation provider, 'when you have dependents, it's less likely that you'll be able to house-share, so you're looking at trying to find a whole house or a whole unit to yourself on possibly very low income.' A caseworker who shared this sentiment further explained that 'the only option we have that is suitable for children is to support families with income into private rental'. However, as discussed earlier, barriers related to immigration status and income severely prohibit many survivors from accessing private rentals. This demonstrates the intensifying impact when survivors experience both eligibility and suitability barriers. Restrictions on accommodating men, children, and extended family members can also be counterintuitive to principles of family reunification which are recognised as important for survivors.²³

Requirements Related to Engaging in Activities

Other common rules that accommodation providers identified were the need for service users to engage in activities such as education or work as well as restrictions on what types of work they can undertake.

Eleven per cent of accommodation providers indicated having a requirement for their service users to undertake some type of activity. The type of activity varied greatly between providers, with some merely encouraging their clients to engage in 'work, study or volunteering to ensure that they acquire the skills for further independence', whilst others requiring a commitment from clients to engage in activities for a certain number of hours per week. An example of the latter is a provider whose service delivers a life skills programme which 'includes a minimum of 25 hours case management per week focused on identified case plan goals with a particular emphasis on education, training, and employment'. Another provider explained that 'if not studying, they [service users] must be seeking employment

²³ K Juabsamai and I Taylor, 'Family Separation, Reunification, and Intergenerational Trauma in the Aftermath of Human Trafficking in the United States', *Anti-Trafficking Review*, issue 10, 2018, pp. 123–138, https://doi.org/10.14197/atr.201218108.

or have a job to be eligible to remain in the program.' However, survivors may find this requirement overwhelming, especially during the early stages of their recovery. This can be due to challenges related to language, literacy, social skills, confidence, or the mental health impacts of trauma. For example, survivors who experience feelings of extreme sadness or hopelessness about the future may have difficulty concentrating or demonstrate aggression or anger, which may impact their ability to engage in work, education, and training activities.²⁴

In contrast, 19% of accommodation providers indicated having a requirement for their service users to not undertake any or certain kinds of activities. For example, one provider explained that 'victim-survivors accommodated [in our service] are not permitted to attend work or school whilst in [our] service due to the risk this poses of being located by the perpetrator'. Others identified that their curfew requirements restrict their service users from undertaking work or study during evenings or early mornings. For example, one explained that their service users are 'somewhat limited by curfew so [working] night shift can be an issue depending on start/finish times', whilst another described similar restrictions on night work or study commitments as their residents 'need to return to shelter by 8 p.m.' Other accommodation providers restrict the type of work their service users could engage in. For example, one provider prohibits service users from 'jobs that are involved in areas of exposure to drugs and alcohol'. Providers justified these rules generally 'due to safety concerns', further demonstrating the primacy that principles of safety take in such decision-making. Although they may be justified, such rules further restrict the suitability of accommodation for survivors who are already engaged in, or wanting to find, work in industries such as hospitality and cleaning that often involve evening work or exposure to alcohol.

Restrictions on undertaking work on accommodation providers' premises was also identified as a barrier for some survivors, in particular those engaging in sex work. Some providers ban the use of their premises for any business activities, often justifying it with safety reasons. For example, one explained that 'work cannot take place in our premises, safety and confidentiality of our residences is paramount'. When it comes to sex work, however, accommodation providers did not specify if it was only banned on their premises or outside as well. Indeed, one provider specifically commented that 'sex workers would not be tolerated', indicating that this restriction may lead to the discrimination of individuals based on their occupation, rather than just restricting them from working on the premises. Therefore, these restrictions may exclude or be prejudiced against survivors engaging in sex work. Survivors of sexual exploitation are likely to

M Clark et al., An Introduction to Human Trafficking: Vulnerability, Impact and Action, United Nations, New York, 2008.

engage in sex work after leaving their situation of exploitation,²⁵ especially if sex work had previously been their main source of income. Despite sex work being legal in most Australian states and territories, many providers framed this work as 'illegal' or illicit, indicating a negative bias towards it. For example, one provider in New South Wales, where sex work is decriminalised, explained that one of their rules was 'no illegal activity on the premises' and went on to state that 'we would not condone sex work being undertaken in our homes'. Negative perceptions of sex work as a profession may also stigmatise survivors who are engaging, or who have previously engaged, in this work, and restrict the suitability of accommodation for them.

Discussion

Accommodation providers and caseworkers agreed that survivors face considerable challenges to secure short-term accommodation and long-term housing in Australia. Many of these challenges relate to eligibility, with immigration status and a lack of income (commonly associated to an inability to work or access income support) restricting where survivors can live and what help they can access. When survivors do find accommodation, they must often navigate several restrictions established by providers. Such rules limit movement, restrict substance use, require or permit engagement in certain activities such as work and study, and restrict men from accessing services as well as survivors living with partners and family members. Here, we conclude by discussing the implications of such eligibility and suitability barriers, including providing policy recommendations.

Limits on eligibility for housing based on immigration status and income are especially concerning. As illustrated above and described by a caseworker, when individuals on temporary visas are unable to work and do not have access to government income support, 'their situation can be very dire'. Caseworkers and accommodation providers noted that in addition to rendering survivors vulnerable to homelessness, such situations set the stage for survivors being re-trafficked or further exploited. As explained by an accommodation provider, such eligibility requirements 'place victim-survivors at high risk of remaining or returning to a situation where they are subjected to abuse by a person who uses violence'. Survivors may also re-enter an exploitative working situation to secure accommodation for themselves and any of their dependants. As explained by a caseworker, 'people then end up in unsuitable employment just to have enough income to live'. Additional implications are related to the disruption that insecure

V V Nair and S A Varkey, 'From Victim to Criminality: Understanding sex trafficking within the walls of sex work–Victimization of victims of commercial sexual exploitation', in M Pittaro (ed.), Global Perspectives on Reforming the Criminal Justice System, IGI Global, Hershey, 2021, pp. 288–308.

accommodation has on survivors' recovery and negative implications for their overall wellbeing.

It is essential that policy makers consider the correlation between immigration status and accessibility of income as eligibility requirements in securing accommodation for survivors. As Australia has a federated system of governance where anti-slavery policy is a federal responsibility and housing policy is a state and territory responsibility, removing these barriers requires effective collaboration across both policy spheres and tiers of government. The barriers identified can be addressed through initiatives within both areas. An Australian parliamentary committee has recommended that the federal government allows non-policing agencies such as approved NGOs to refer potential victims to the HTVF and the Support Program and de-links longer-term access from cooperation with criminal investigations.²⁶ This change is urgently needed as it would enable more survivors to access visas and support, thereby also increasing their access to accommodation. Further changing the HTVF to ensure it is available to survivors on other visas, and that all visas are granted for longer durations and with permission to work and access government income support, will not only enable survivors' greater economic independence, but also broader eligibility for accommodation. For state and territory governments, allowing survivors on temporary visas to access social housing and prioritising those who experience a risk of further harm, would open long-term housing options currently unavailable to survivors. Removing the requirements for service users to be Australian citizens or residents would also enable survivors' eligibility for government-funded accommodation services.

While eligibility requirements exclude many survivors, there are also concerns regarding the suitability of available accommodation. A lack of accommodation options tailored specifically to survivors of human trafficking and slavery is a significant gap in the Australian response. From the limited options available, accommodation providers' restrictive rules and requirements can mean they are not suitable for survivors, rendering them further vulnerable to homelessness and risks of re-trafficking or other harm. As with eligibility barriers, addressing suitability barriers requires collaboration and coordination between anti-slavery and housing policy spheres at both a federal and state and territory level. The federal government provides funding for accommodation for survivors through the Support Program, but it relies on existing accommodation services being available to and suitable for survivors, which this research has demonstrated is largely not the case. Trauma-informed and person-centred accommodation services in each state and territory designed specifically for survivors are urgently required.

²⁶ Parliament of The Commonwealth of Australia, p. 159.

Limitations

This research has several limitations. While anyone can experience human trafficking and slavery, most survivors supported by Red Cross caseworkers are women and girls from migrant backgrounds, mostly on temporary visas.²⁷ Therefore, the view of the caseworkers who participated in this research has been influenced by their experiences predominantly supporting this cohort. It is also important to note that the survivors whom Red Cross caseworkers have supported are exclusively persons who have been identified as potential victims of human trafficking and slavery by the AFP, and the limiting impacts of having a policing agency as the sole referrer to the Support Program are widely acknowledged.²⁸ As the aim of the research was to understand the structural barriers to accommodating survivors within the Australian anti-slavery response and housing systems, rather than the direct experience of survivors in accessing accommodation, survivors themselves were not engaged in this research. Finally, the research focused on formal housing networks, rather than informal accommodation support, including couch surfing. The extent to which survivors rely on such informal accommodation support is not well known and should be further investigated.

Conclusion

Survivors of human trafficking and modern slavery often have specific needs resulting from their traumatic experiences. Accommodation plays a central role in supporting survivors' recovery, allowing them to focus on other aspects of their lives such as their physical and mental wellbeing, social connections, employment, and education. However, our research showed that survivors in Australia experience multiple barriers in finding accommodation that they are eligible for, due to interrelated issues regarding immigration status and income. Of those accommodation services that survivors are eligible for, further barriers exist related to the suitability of accommodation due to a lack of survivor-specific services as well as rules and restrictions imposed by providers which may not be suited to survivors' unique needs. As summarised by a caseworker, the ability to find safe and sustainable accommodation for survivors is severely impacted by '[having] no income, temporary visa, and [experiencing] too many triggers'. Compounded by the widespread housing crisis being experienced across Australia, which involves a general deficit in available and accessible accommodation, these barriers can render survivors homeless, negatively impact their recovery, and increase the risk of re-trafficking and other harm. Changes to Australian federal

²⁷ Australian Red Cross, pp. 3-4.

²⁸ Parliament of The Commonwealth of Australia, p. 152.

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anti-slavery policy and state and territory housing policy are urgently required to remove these barriers and prevent such risks. This includes expanding survivors' access to visas, work, and government income support as well as social housing and government-funded accommodation services. An increase in specialised trauma-informed and person-centred accommodation services is also required.

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