

This is a repository copy of Modern slavery and public health : a rapid evidence assessment and an emergent public health approach.

White Rose Research Online URL for this paper: http://eprints.whiterose.ac.uk/152891/

Version: Supplemental Material

## Article:

Such, E. orcid.org/0000-0003-2242-3357, Laurent, C., Jaipaul, R. et al. (1 more author) (2020) Modern slavery and public health : a rapid evidence assessment and an emergent public health approach. Public Health, 180. pp. 168-179. ISSN 0033-3506

https://doi.org/10.1016/j.puhe.2019.10.018

Article available under the terms of the CC-BY-NC-ND licence (https://creativecommons.org/licenses/by-nc-nd/4.0/).

## Reuse

This article is distributed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivs (CC BY-NC-ND) licence. This licence only allows you to download this work and share it with others as long as you credit the authors, but you can't change the article in any way or use it commercially. More information and the full terms of the licence here: https://creativecommons.org/licenses/

## Takedown

If you consider content in White Rose Research Online to be in breach of UK law, please notify us by emailing eprints@whiterose.ac.uk including the URL of the record and the reason for the withdrawal request.



## Figure 3 The components of a public health approach to addressing modern slavery

Upstream components		Downstream components	
GLOBAL		REGIONAL/LOCAL	
Advocacy for political and economic		Multi-agency partnerships	
system change: 'slavery-hostile' change		Public awareness/education	
Cross-national coordination		Community resilience support	
From 'anti-trafficking' to 'pro-rights'		Prevention at source e.g. community	
approaches	A public	health	education
	approa	ich to	
NATIONAL	modern	slavery	
Legislative protection			
e.g. victim immunity from prosecution		SERVICES	
Health system engagement		Culturally sensitive care	
- Training		Coordinated, wrap-around, long-term	
- Resources		survivor care	
<ul> <li>Anti-slavery policy-making</li> </ul>		Survivor empowerment e.g. enabled	
Survivor-centred, rights-based policy		decision making	
Coherence and consistency across policy		Development and testing of tools and	
(e.g. foreign, migration, anti-trafficking)		interventions	
Data and intelligence		Clear responsibilities, operational	
Public awareness/education		procedures and allocation of personnel	
Operational infrastructure for effective		across health services	
referral, assessment and support		Development of specialist services	