

# NI COVID-19 Feminist Recovery Plan:

*Relaunch - One Year On*

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# **Women's Policy Group NI**

## **WPG COVID-19 Feminist Recovery Plan - Relaunch One Year On**

### **Introduction**

This paper is a re-launch of the previous Women's Policy Group NI COVID-19 Feminist Recovery Plan which was initially launched in July 2020. This paper has been created by the [Women's Policy Group Northern Ireland](#) (WPG).

The WPG is a platform for women working in policy and advocacy roles in different organisations to share their work and speak with a collective voice on key issues. It is made up of women from trade unions, grassroots women's organisations, women's networks, feminist campaigning organisations, LGBT+ organisations, migrant groups, support service providers, NGOs, human rights and equality organisations and individuals. Over the years this important network has ensured there is good communication between politicians, policy makers and women's organisations on the ground. The WPG represents all women of Northern Ireland, and we use our group expertise to lobby to influence the development and implementation of policies affecting women.

The WPG is endorsed as a voice that represents all women of Northern Ireland on a policy level. This group has collective expertise on protected characteristics and focus on identifying the intersectional needs of all women. The WPG membership is broad and has a deep understanding of how best to approach the impact COVID-19 is having on women in Northern Ireland. Within the Feminist Recovery Plan (FRP) launched in 2020, the WPG provided a comprehensive overview of the severe impact of the pandemic on groups from protected characteristics, particularly women, and used this evidence to make recommendations to policymakers.

It is hard to imagine that any of us thought that we would still be dealing with the COVID-19 pandemic in a similar way, almost 18 months on from the initial lockdown in Northern Ireland. Further, the WPG did not imagine that so many of the evidence-led recommendations from the FRP would still not have been acted on. This relaunch of the FRP will highlight evidence that has become available since the initial launch to portray the severe impact the pandemic has continued to have on women, which will continue to worsen if there is not a gendered response to COVID-19 recovery in Northern Ireland.

Special thanks to the Hawai'i State Commission on the Status of Women for their Feminist Economic Recovery Plan for COVID-19, which helped to inspire the original WPG COVID-19 Feminist Recovery Plan.

Please note, not all member organisations of the Women's Policy Group have specific policy positions on all the areas covered throughout this plan. Therefore, individual experts from each of the organisations below contributed to the sections that cover their own areas of expertise.

## WPG COVID-19 Supplementary Report – Women's Voices at the Core of Recovery

This relaunch of the Feminist Recovery Plan will aim to not only highlight the recommendations that the WPG has been lobbying on for over a year, but it will also put the voices of women in Northern Ireland at its core. We have conducted additional primary research with women across Northern Ireland asking their experiences of COVID-19, through anonymous surveys, interviews and case studies.

In addition to this relaunch of the WPG COVID-19 Feminist Recovery Plan, we will be launching a supplementary report highlighting our research findings alongside testimonies and case studies from several women across Northern Ireland. Information on this research process can be found in Appendix 2. Case studies, quotes and testimonies from women in Northern Ireland will also be embedded throughout this plan alongside existing evidence and data on the impact of COVID-19 on women in Northern Ireland.

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*The content of this paper is supplemented by additional WPG COVID-19 research and the WPG Women's Manifesto 2019 which was written and supported by the following organisations:*

Women's Resource and Development Agency

Northern Ireland Rural Women's Network

Transgender NI

Northern Ireland Public Service Alliance

Irish Congress of Trade Unions Northern Ireland Committee

Reclaim the Night Belfast

Committee on the Administration of Justice

Politics Plus

Belfast Feminist Network

HERe NI

Northern Ireland Women's European Platform

Reclaim the Agenda

Alliance for Choice

Women's Aid Federation Northern Ireland

Women's Support Network

DemocraShe

Raise Your Voice

## COVID-19 and Gender - Overview

In the past year, since the Feminist Recovery Plan (FRP) was initially launched, further evidence has highlighted what we have been stating from the beginning of COVID-19 - that women have been worst impacted by the pandemic. As we finally move towards a recovery from this pandemic, we need to reiterate our recommendations to take a gender-sensitive response.

We recognise that some issues highlighted will be of a devolved nature for the Northern Ireland Assembly, others will be issues that require Westminster intervention. This recovery plan will be based on all of the issues impacting women and specific policy recommendations will be made to both the Northern Ireland Assembly on devolved matters and to the UK Government on UK-wide issues. Over the past year, we have made bespoke summary reports for each level of Government as well as departmental reports and key briefings<sup>1</sup>.

It is essential that all levels of government representing Northern Ireland are fully aware of the unique challenges in Northern Ireland; particularly as the UK government is the duty bearer for human rights in NI. Women in Northern Ireland have suffered immensely due to a decade of Austerity, and over a year of the ongoing pandemic, and any COVID-19 recovery cannot come to the detriment of women's equality and economic wellbeing.

The ongoing COVID-19 pandemic has created an unprecedented challenge across the UK. It has put in sharp focus the value and importance of care work, paid and unpaid, and highlighted the essential nature of often precarious and almost always low paid retail work. Women undertake the majority of this work, and women will bear a particular brunt of this crisis; economically, socially and in terms of health. The WPG is calling on decision-makers across the UK to take action to ensure a gender-sensitive crisis response as we transition from crisis response to recovery.

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<sup>1</sup> All WPG FRP Bespoke Reports and Key Briefings can be found here: <https://wrda.net/publications/>

The ongoing crisis affects men and women differently, and in many cases deepens the inequalities women experience on an everyday basis<sup>2</sup>. These inequalities, along with key solutions, were highlighted in a Women's Manifesto issued by the WPG in preparation for the general election in December 2019<sup>3</sup>. These solutions remain central for a long-term response, but the developing crisis has put a number of issues in sharp focus for urgent emergency action.

Not only does this crisis have a disproportionate impact on women, but that impact is worsened for women from particular backgrounds: for instance, black and minority ethnic women, disabled women, women with caring responsibilities, and LGBTQI+ women. The emergency action required, and any recovery programme put in place, must meaningfully take into consideration the institutionalised inequalities that exist within Northern Ireland, and must co-develop a roadmap forward with the communities affected.

## Relevant WPG Research and Publications

The WPG and member organisations have already published several briefings, articles, evidence submissions, webinars and reports on the unequal impact COVID-19 is having on Women in Northern Ireland over the past year. This has included:

### WPG Reports, Briefings, and Webinars Relating to the Feminist Recovery Plan:

- [WPG COVID-19 Feminist Recovery Plan](#) 2020 (FRP)
- FRP Key Briefing on [Capital Investment](#)
- FRP Key Briefing on [Childcare](#)
- FRP Key Briefing on [Climate Justice](#)
- FRP Key Briefing on [Women's Workers' Rights](#)
- FRP Key Briefing on [Carers](#)
- FRP Key Briefing on [Gender-Based Violence](#)
- FRP Key Briefing on a [Bill of Rights](#)
- FRP Bespoke Report for [Department for Communities](#)
- FRP Bespoke Report for [The Executive Office](#)

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<sup>2</sup> See Women's Resource and Development Agency Reports on Gender Inequality in NI in 2020 <https://bit.ly/3zS2WET>; Brexit and the Impact on Women in NI 2019 <https://bit.ly/3gWjO5I>; Disabled Women and Discrimination 2019 <https://bit.ly/3qktuKC>; Childcare: A Women's Issue <https://bit.ly/3j2tnlz>.

<sup>3</sup> Women's Policy Group NI Election Manifesto 2019: <https://bit.ly/3zOuCe3>

- FRP Bespoke Report for [Department for the Economy](#)
- FRP Bespoke Report for [Department of Justice](#)
- FRP Bespoke Report for [Department of Health](#)
- FRP Bespoke Report for [Department of Finance](#)
- FRP Bespoke Report for [Department of Education](#)
- FRP Bespoke Report for [Department for Agriculture, Environment and Rural Affairs](#)
- FRP Bespoke Report for [Department for Infrastructure](#)
- FRP Bespoke Report for [Committee on the Elimination of Discrimination Against Women \(CEDAW\)](#)
- FRP Bespoke Report for [Westminster Government](#)
- FRP Webinar Summary: [Poverty, Austerity and Universal Credit: The Impact on Women](#)
- FRP Webinar Summary: [COVID-19 and the Impact on Rural Women](#)
- FRP Webinar Summary: [A Global Outlook - Social Justice and Gender Equality](#)
- FRP Webinar Summary: [Additional Health Impacts for Women](#)
- FRP Webinar Summary: [COVID-19 and Violence Against Women](#)
- FRP Webinar Summary: [Women's Rights, Brexit and the Bill of Rights](#)
- FRP Webinar Summary: [Childcare, COVID-19 and Women - One Year On](#)
- FRP Webinar Summary: [Climate Emergency as a Feminist Issue](#)

#### Previous WPG Briefings, Articles, Evidence Submissions and Reports on COVID-19 and Women:

- WPG [briefing](#) for MLAs on COVID-19 and Gender
- WPG [article](#) on the impact of COVID-19 on Women
- WPG and WBG Joint [Statement](#) to DfC on Statutory Maternity Pay, Carer's Allowance and the Two-Child Cap
- WPG [Submission](#) to the Westminster Women and Equalities Committee Inquiry on the Impact of COVID-19 on People with Protected Characteristics
- WPG Domestic Violence and Family Proceedings Bill Evidence [Submission](#) and WRDA Domestic Violence and COVID-19 [Briefing](#)
- WPG [Article](#) on COVID-19 and Gender - NICVA Insights and Impact Series
- WPG [Article](#) on Human Rights Impact of COVID-19 on Women in Just News
- Childcare for All campaign [statement](#) on COVID-19 and Childcare
- Follow-Up Childcare for All campaign [statement](#)

- NICVA Policy Impact Hub [case study](#): Women's Policy Group Feminist Recovery Plan

### Recognition of the WPG FRP in Academia, International Articles, Media and News Reports:

- International Public Policy Observatory (2021), '[Northern Ireland's Feminist Recovery Plan: Why COVID-19 Recovery Requires a Gender-Sensitive Approach](#)'
- UN Article
- O'Rourke, C. (2020) '[International Law, COVID-19 and Feminist Engagement with the United Nations Security Council: The End of the Affair?](#)' Feminist Legal Studies, Vol. 28, pp. 321–328.
- PIVOTAL (May 2021), '[Northern Ireland's Feminist Recovery Plan](#)'
- Warwick University, (June 2021), Research Projects – [Feminist Recovery Plans](#)
- Global Network of Women Peacebuilders – Northern Ireland Country Profile: [Responses led by women peacebuilders](#)
- Money and Pension Service (2020) [Building Northern Ireland's Financial Wellbeing after COVID-19](#)
- Gender and Development Network (2021): [Feminist Macroeconomics Proposals: Rebuilding More Equitable, Just and Sustainable Economies Post-COVID-19](#)
- Department of Foreign Affairs (2020), Building Peace from the Grassroots: [Learning from Women Peacebuilders to Advance the WPS Agenda](#)
- ISSU (2020), 'Another World is Possible: [A Feminist Monitoring & Advocacy Toolkit](#) for Our Feminist Future'
- Other media articles

### NI Media Articles:

- 'Campaigners call for action' Article published by the [Irish News](#), [Belfast Telegraph](#) and [Q Radio](#)
- 'Disproportionate impact of pandemic on women' Article published by [Belfast Telegraph](#) and [Irish News](#)
- [View Digital](#) Article: 'Stormont urged to address impact of COVID-19 pandemic on women'
- [Irish News](#) Article, 'NI Executive urged to take emergency action to address disproportionate impact of COVID-19 on women'
- Derry Journal (March 2021), 'Professor Siobhán O'Neill says COVID-19 pandemic has had a disproportionate impact on women's health:'

[Feminist Recovery Plan by the Women's Policy Group sets out framework for dealing with the impact of the Pandemic'](#)

- Fingerpost Magazine Issue 5 [Article](#) 'Women and a Bill of Rights for NI'
- Amanda Ferguson – [Women Have Suffered Enough](#) – WPG Feminist Recovery Plan
- PPR – No One Left Behind: [Why Northern Ireland Needs a Feminist Recovery to the COVID-19 Crisis](#)

Northern Ireland Assembly Mentions and Questioning and Political Responses:

- [Oral Answers](#) to Assembly Questions: COVID-19 Feminist Recovery Plan
- NI Assembly Session – IWD 8<sup>th</sup> March 2021 – Promotion of a Gender Sensitive Assembly – [Reference of WPG FRP](#) from 28 minutes by Mike Nesbitt MLA
- [WRDA Stormont and Westminster Updates](#) – All Assembly and Parliamentary Questions and Answers relating to the Feminist Recovery Plan
- Northern Ireland Civil Service [Response](#) to APG 1325 Women, Peace and Security on the Feminist Recovery Plan Recommendations

In addition to COVID-19 research, the WPG and member organisations have also published several submissions on gender-equality related issues in the past two years including:

- WPG Evidence [Submission](#) to Justice Committee on the Severe Fetal Impairment Abortion (Amendment) Bill
- WPG [Response](#) and Endorsement to PMB on Work-Life Balance
- WPG Evidence [Submission](#) to Justice Committee on the Protection from Stalking Bill
- WPG [Response](#) to Carers' Act PMB Consultation
- WPG [Response](#) to Department of Finance Draft Budget 2021-2022, Departmental Equality Screenings/EQIAs and Draft PfG Outcomes Framework
- WPG [Response](#) to the Department of Justice Public Consultation on Enhancing Legal Protections for Victims of Domestic Abuse
- WPG [Response](#) to Ad Hoc Committee on a Bill of Rights Consultation
- WPG [Response](#) to DAERA Minister's Discussion Document on a Climate Change Bill
- WPG [Response](#) to PMB Consultation on Period Poverty
- WPG [Response](#) to PMB Consultation on Paid Domestic Abuse Leave

- WPG [Response](#) to Department for Justice Consent to Harm for Sexual Gratification: Not A Defence
- WPG [Response](#) to Zero Hours Contracts PMB Consultation
- WPG Evidence [Submission](#) to Justice Committee on the Domestic Abuse and Family Proceedings Bill
- WPG [Endorsement](#) of Transgender NI Response to the HSCB Draft Objectives for Gender Identity Services in Northern Ireland
- WPG Endorsement of CAJ [Response](#) to PSNI Consultation and Equality Assessment on the temporary use of Spit and Bite Guards
- WPG Hate Crime Legislation Northern Ireland Independent Review Consultation [Response](#)
- WPG UK Government Marriage Equality Consultations [Response](#)
- WPG [Response](#) to A New Legal Framework for Abortion Services in NI Consultation
- WRDA [Response](#) to Department of Finance Budget Engagement
- WRDA [Response](#) to Ad Hoc Committee on a Bill of Rights Consultation
- WRDA [Response](#) to PMB on Period Poverty
- WRDA [Response](#) to PMB Consultation on Paid Domestic Abuse Leave
- Women's Regional Consortium [Report](#) - The Impact of Universal Credit on Women
- Women's Regional Consortium [Report](#) - Making Ends Meet - Women's Perspectives on Access to Lending
- Women's Regional Consortium [Report](#) - Impact of Ongoing Austerity: Women's Perspectives
- Women's Regional Consortium [Report](#) - In Work Poverty
- Women's Regional Consortium [Response](#) to Consultation on Peace Plus Funding programme
- Women's Regional Consortium [Response](#) to Consultation on a Draft Mental Health Strategy 2021-2031
- Women's Regional Consortium [Response](#) to the Creation of a Bill of Rights for Northern Ireland
- Women's Regional Consortium [Response](#) to a Proposal for a Bill to ensure free access to sanitary products, including in schools, colleges and universities
- Women's Regional Consortium [Response](#) to the Second Independent Review of the Personal Independence Payment (PIP) Process in Northern Ireland
- Women's Regional Consortium [Response](#) to Consultation on Carer's Leave

- Women's Regional Consortium [Response](#) to the Women and Equality Committee Inquiry on Covid19 and the Impact on People with Protected Characteristics
- Women's Regional Consortium [Response](#) to the Work & Pensions Committee Inquiry into the Universal Credit Five Week Wait for First Payment
- WRDA [Response](#) to Consultation on Dormant Bank Accounts in Northern Ireland
- WPG [Submission](#) on the Climate Change Bill to the Environment, Agriculture and Rural Affairs Committee
- WRDA [Submission](#) on the Climate Change Bill to the Environment, Agriculture and Rural Affairs Committee
- WRDA Consultation [Response](#) to the NICE Draft Guidelines on Inducing Labour
- WPG Endorsement [Response](#) to the NICE Draft Guidelines on Inducing Labour
- Northern Ireland Rural Women's Network - Rural Voices Research [Report](#)
- WRDA [Report](#) - Gender Inequality in Northern Ireland: Where are we in 2020?
- Equality Coalition [Report](#) - Sectarianism: The Key Facts
- Women's Regional Consortium [Report](#): Brexit and the Impact on Women in Northern Ireland
- WRDA [Report](#)- Disabled Women and Discrimination
- Human Rights Consortium [Report](#) - Brexit: Rights at Risk
- Northern Ireland Committee Irish Congress of Trade Unions [Report](#): Childcare in Northern Ireland: Care, Cost and Gender Equality
- Northern Ireland Committee Irish Congress of Trade Unions Policy Document [Report](#): Better Work Better Lives
- Irish Congress of Trade Unions: [No Going Back, a New Deal for a Safe and Secure Future for All](#)
- TUC [Report](#) - Forced Out: The Cost of Getting Childcare Wrong
- Women's Sector Lobbyist Childcare for All [Blog](#) - Childcare: A Women's Issue
- Northern Ireland Women's European Platform - [Northern Ireland civil society shadow report to CEDAW](#)
- Amnesty International [Report](#) - Toxic Twitter
- Amnesty International with Women's Link Worldwide, International Planned Parenthood Federation: A [Guide](#) for Europe: Protecting the Rights of Women and Girls in times of COVID10 pandemic and its aftermath.



## Evidence and Recommendations

This report will analyse the impact of COVID-19 on women and girls in Northern Ireland in terms of economic justice, health, social justice and cultural inequality. In addition to this, implications of Brexit and the need for a Bill of Rights will be examined and an analysis of international best practice case studies will be done.

Based on the evidence outlined in the above areas, recommendations will be made for gender-responsive budgeting and policy-making to both the NI Assembly and UK governments. Throughout each pillar an area of analysis, evidence, data and recommendations will be outlined for both the Northern Ireland Assembly and UK Government. A summary of all recommendations will be available in a separate document.

This plan will use a mix of political and economic policy-making recommendations and primary and secondary research on women's lived experience to advocate for a feminist recovery to COVID-19 with the aim of not only avoiding deepening gender inequalities through recovery planning, but also tackling the gendered inequalities that already exist in our society.

For a summary of our top-level policy recommendations for each Department, the NI Executive and the UK Government, please contact [rachel.powell@wrda.net](mailto:rachel.powell@wrda.net).



# Key Quantitative Findings from WPG Primary Research

Our survey received 141 responses from people in Northern Ireland on their experiences of the COVID-19 pandemic<sup>4</sup>. Before going into each of the pillars, evidence and recommendations of this Feminist Recovery Plan, the WPG would like to highlight some key statistics from our research alongside testimonies from women. We will also include testimonies and quotes from women, obtained through our research, throughout each pillar of this FRP. Our full primary research findings are available in the supplementary WPG Feminist Recovery Plan report: Putting Women's Voices at the Core.

## Demographic Information:

- 13.5% were aged 18-24,
- 17% were aged 25-32,
- 31.9% were aged 35-44,
- 17.7% were aged 45-55,
- 16.3% were aged 55-64, and
- 3.5% were aged 65+.

We also asked participants about their gender identity and if they identified as LGBTQI+, Disabled or Black, Asian or minority ethnic (BAME) and received the following responses:

**N.B.** Respondents could select multiple options.

- Female - 95%
- Male - 2.1%
- Trans woman - 0.7%
- Trans man - 1.4%
- Non-binary - 0.7%
- LGBTQI+ 18.4%
- Disabled 15%
- Black, Asian and/or Minority Ethnic (BAME) 2.8%

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<sup>4</sup> See Appendix 1 and the Supplementary WPG Feminist Recovery Plan Research Report: Putting Women's Voices at the Core for more information.

### Employment Status:

- 51.8% were in full-time employment,
- 16.3% were in part-time employment,
- 11.3% were students,
- 7.8% were self-employed,
- 5.7% were unemployed,
- 2.8% were retired,
- 2.8% were stay at home mothers or on extended maternity,
- 1.4% were either disabled and unable to work or a full-time carer.

### Geographic Location:

- 68.1% live in an urban area,
- 26.1% in a rural area,
- 2.7% in a town,
- 2.1% in a suburban or semi-rural area,
- 1.4% in a part-rural/part-industrial area.

*In terms of the financial impact of COVID-19, our key findings were:*

### Impact on Employment:

Yes – 53.2% / No – 46.8%

- Increased hours – 28%
- Decreased hours – 25.3%
- Furloughed – 16%
- Reduced Pay – 14.7%
- Working from home – 13%
- Business Closure – 4%
- Made redundant – 2.7%

### Financial Impact:

Yes – 56.7% / No – 43.3%

- Less savings – 49.4%
- Struggling to pay bills – 34.6%
- Increased debt – 22.2%
- More savings – 34.6%



*In addition, it is worth noting that our research found that:*

- 12.4% of respondents had to access food banks,
- 17.7% of respondents had been recipients of Universal Credit,

### **Childcare Responsibilities and Access:**

61.4% of respondents had children and 30.4% of respondents were single parents. Among those with children:

- Struggled to access childcare during the pandemic – 29.2%
- Relied on family for childcare support before the pandemic – 13.5%
- Relied on family for childcare support during the pandemic – 14.6%
- Work has been affected by childcare responsibilities – 31.5%
- Struggled to pay my childcare bill – 6.7%

### **Caring Responsibilities:**

Almost 40% of all respondents had caring responsibilities. Out of all with caring responsibilities:

- 33.3% were unpaid carers and 6.5% were paid carers,
- Just 15.1% of carers have been able to access Carers' Allowance.
- A striking 81.1% of carers said their caring responsibilities increased during the pandemic,
- 11.3% of carers said their caring responsibilities stayed the same during the pandemic,
- Just 7.5% of carers said their caring responsibilities decreased during the pandemic.

### **Rural Access Poverty:**

- 65.8% stated that their internet connection was not stable,
- 55.3% felt isolated from support networks,
- 39.5% struggled to access goods and services during the pandemic and,
- 34.2% struggled to access healthcare during the pandemic.

### **Health Impacts:**

- 82.1% of respondents said that their mental health had declined during the pandemic,
- 57.9% of respondents said that their physical health had declined during the pandemic,

- 38.1% of respondents have been impacted by increased waiting lists,
- 1.4% accessed or attempted to access an abortion during the pandemic,
- 50% of people from ethnic minority communities experienced issues accessing healthcare services,
- 15.9% Accessed or attempted to access healthcare services relating to maternity, pregnancy, perinatal mental health and birth-giving during the pandemic,
- Out of all migrants that responded, 4.5% were subject to 'No Recourse to Public Funds'.

#### **Rape Culture, Domestic Abuse, Stalking, Harassment, Hate Crime or Assault:**

- 56.7% of respondents believe there is a problem with 'rape culture' in Northern Ireland society,
- 38.8% stated maybe there is a problem with 'rape culture',
- Just 4.5% stated that there is not a problem with 'rape culture',
- 58.4% of all respondents had been victims of domestic abuse, stalking, harassment, hate crime or assault,
- 21.2% had been targeted by online abuse.

#### **Relationships and Sexuality Education in Northern Ireland:**

- 83.6% of respondents attended school in Northern Ireland,
- Out of those, a striking 92.3% felt that their Relationship and Sexuality Education was inadequate.

#### **Brexit and a Bill of Rights for Northern Ireland:**

- 55.1% of respondents were concerned about the impact of Brexit on women's rights in Northern Ireland,
- 38.4% were unsure about the impact of Brexit on women's rights and,
- Just 6.5% were not worried about Brexit and the impact on women's rights in Northern Ireland.
- 71.3% of respondents supported a Bill of Rights for Northern Ireland,
- 27.2% stated that they would maybe support a Bill of Rights for Northern Ireland,
- Just 1.5% stated that they do not support a Bill of Rights for Northern Ireland.

# Economic Justice Pillar





# 1. Economic Justice Pillar

## 1.1 Overview of the Economic Impact of COVID-19

### 1.1.1 Global Economic Data

The spread and aftermath of the COVID-19 pandemic have vast immediate and long-term implications for women's equality globally. Evidence has emerged from across the world of COVID-19 deepening pre-existing inequalities through exposing vulnerabilities in social, political and economic systems which are amplifying the impacts of the pandemic<sup>5</sup>. The year of 2020 marked the 25th anniversary of the Beijing Platform for Action<sup>6</sup>, and the 20th anniversary of UN Security Council Resolution 1325 on Women, Peace and Security<sup>7</sup>, and was intended to be a ground-breaking year for gender equality. Instead, the limited gains for women's equality in recent decades have been put at risk of being rolled back as governments failed to account for the impact of pre-existing inequalities in social, political and economic systems on women<sup>8</sup>.

A recent report from the European Parliament found that:

"The economic impact of COVID-19 and ensuing response will be wide-reaching, and will disproportionately affect women, and other marginalised communities. This will occur both at the macro and micro level. At the micro level, care responsibilities will mean that women are forced to reduce working hours (or may have lost their jobs) with the ensuing loss of income and risk of economic insecurity and poverty for some families. Wider spread recession may affect both parents, heightening this problem. Furthermore, due to flexible or part time working, women are at greater risk of job cuts in the future...

*(continued on next page)*

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<sup>5</sup> United Nations, (April 2020), 'Policy Brief: The Impact of COVID-19 on Women', UN Women, (available online): <https://bit.ly/3gXEHwv>

<sup>6</sup> Beijing Declaration and Platform for Action (1995), adopted at the Fourth World Conference on Women, 27 October 1995.

<sup>7</sup> UN Security Council, Security Council resolution 1325 (2000) [on women and peace and security], 31 October 2000, S/RES/1325 (2000).

<sup>8</sup> European Parliament (September 2020), Policy Department for Citizens' Rights and Constitutional Affairs Directorate-General for Internal Policies, 'The Gendered Impact of the COVID-19 crisis and post-crisis period', PE 658 227, <https://bit.ly/2TYH6zm>

At the macro level, the industries which have been most significantly impacted by COVID-19 are heavily feminised. This includes hospitality, tourism, childcare, education, and healthcare. Female migrants represent a significant portion of women employed in these sectors and need to be given full consideration in policies developed to respond to this and future crises.”<sup>9</sup>

In the FRP published in July 2020, the WPG had just one quarter worth of relevant economic data available to analyse the economic impact of COVID-19 on women. One year on, there is a wealth of data available that shows how drastic the impact of COVID-19 was on the global economy and how this was particularly felt by women. As highlighted by the International Monetary Fund:

“The COVID-19 outbreak and the measures to contain the virus have caused severe disruptions to labor supply and demand worldwide. Understanding who is bearing the burden of the crisis and what drives it is crucial for designing policies going forward.”<sup>10</sup>

The International Labour Organisation (ILO) has confirmed that the COVID-19 pandemic has resulted in the most severe crisis for the world of work since the Great Depression of the 1930s<sup>11</sup>. Additional recent data from the International Monetary Fund (IMF) shows the varied impact the pandemic had on different countries and analyses the United States, United Kingdom and Spain, as three of the countries that were hit hardest by the pandemic in 2020<sup>12</sup>. Figure 1 overleaf highlights the drastic changes to workers’ hours throughout 2020. Comparatively, the US experienced the most job losses, the UK experienced the greatest reductions in working hours, and workers in Spain faced a mix of both job losses and reduced hours. The “second wave” of COVID-19 in the United Kingdom is portrayed through further disruption to the labour market in quarter 4 of 2020.

**Please note - definitions of key economic indicators are available in Appendix 1**

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<sup>9</sup> Ibid, p.49.

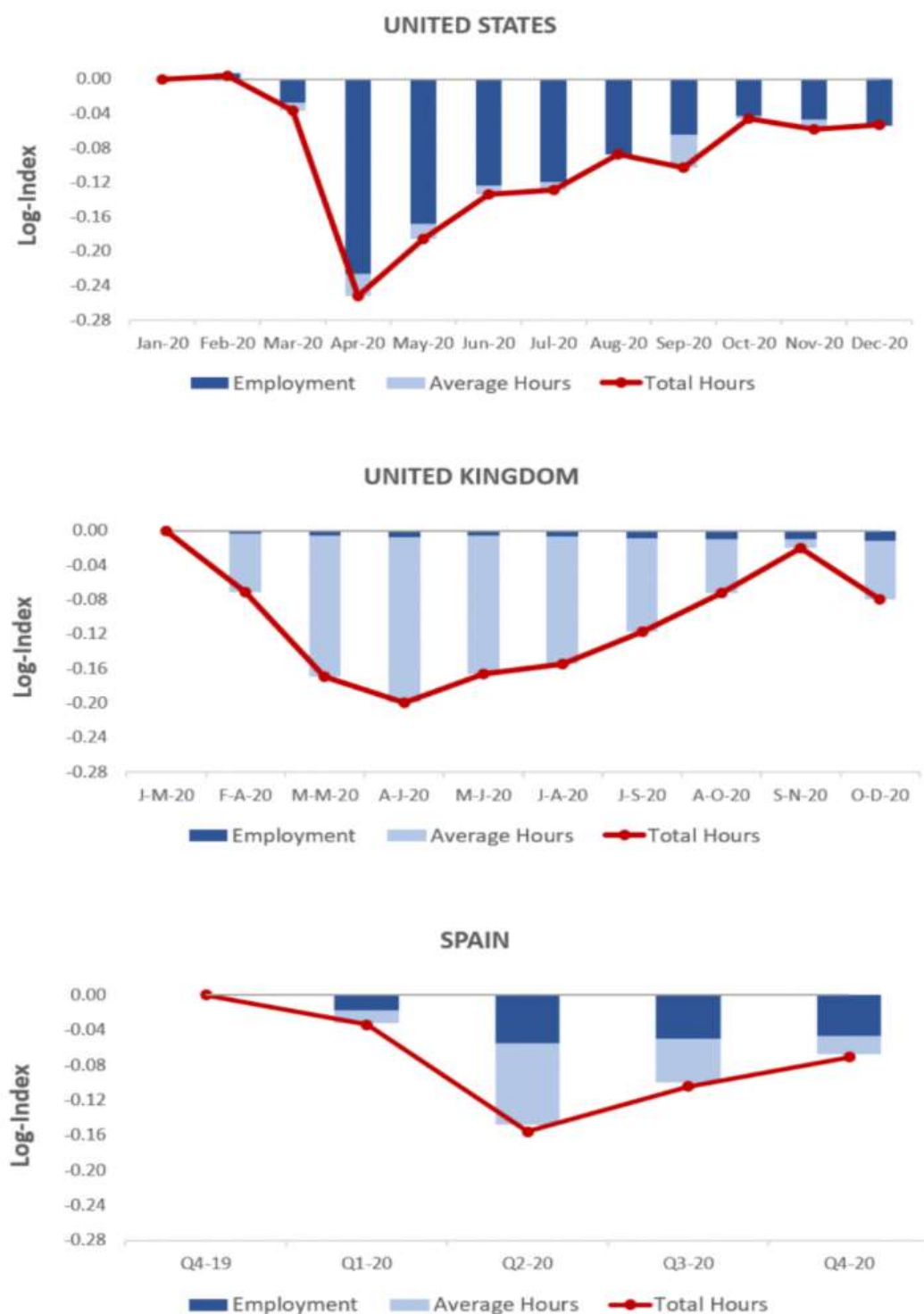
<sup>10</sup> IMF (March 2021), ‘COVID-19 She-Cession: The Employment Penalty of Taking Care of Young Children’, <https://bit.ly/3zQAbJ2>

<sup>11</sup> ILO (January 2021), ‘ILO Monitor: COVID-19 and the World of Work. Seventh Edition. Updated estimates and analysis’, p.20 <https://bit.ly/3d1xOnZ>

<sup>12</sup> IMF (April 2021), ‘COVID-19: The Moms’ Emergency’, <https://bit.ly/3wQbAC7>



Figure 1: Losing Work - The Impact of the Pandemic on Working Hours



Source: Integrated Public Use Microdata Series, Current Population Survey; Quarterly Labour Force Survey; Encuesta de Poblacion Activa; and IMF staff calculations.

Note: Chart shows the log of the ratio of employment, average hours worked, and total hours in the corresponding period divided by the same statistic in the reference period. For the United States, the reference period is January 2020. For the United Kingdom, the reference period is the first quarter of 2020. For Spain, the reference period is the last quarter of 2019. For the United Kingdom, figures are calculated using rolling quarters.

While the government responses differed globally and thus the impact on workers differed, a common theme emerged globally across all countries and IMF data highlights that women with children under the age of 12 were the hardest hit economically, with many having to either reduce hours or quit their jobs due to inaccessible childcare and schools closing. In an IMF working paper titled 'COVID-19 She-Cession: The Employment Penalty of Taking Care of Young Children', an analysis in the United States found that:

"The loss of employment of women with young children due to the burden of additional childcare is estimated to account for 45 percent of the increase in the employment gender gap, and to reduce total output by 0.36 percent between April and November 2020.<sup>13</sup>"

In general, IMF estimates found that the pandemic impacted the economy as a whole, but this impact was outsized on working mothers, as in short, "women with young children have been among the biggest casualties of the economic lockdowns"<sup>14</sup>. Pre-pandemic evidence shows that women already faced an unequal burden of caring responsibilities, unpaid work and household work<sup>15</sup>. School closures, limited access to childcare and ongoing lockdowns has forced many women out of the formal labour markets, and many will remain in this situation if the world economy does acknowledge this gendered impact and take action to reintegrate women into the workforce.

Recent data from the International Labour Organisation (ILO) shows how the pandemic drastically impacted the global economy in 2020<sup>16</sup>:

- The share of workers living in countries with COVID-19-related restrictions has remained high at 93%,
- In 2020, 8.8% of global working hours were lost relative to the fourth quarter of 2019, equivalent to 255 million full-time jobs,
- Working-hour losses in 2020 were approximately four times greater than during the global financial crisis in 2009,
- Globally, the decline in working hours in 2020 translated into both employment losses and a reduction in working hours for those who remained employed,
- There were unprecedented global employment losses in 2020 of 114 million jobs relative to 2019,

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<sup>13</sup> IMF (March 2021), 'COVID-19 She-Cession: The Employment Penalty of Taking Care of Young Children', <https://bit.ly/3zQAbJ2>

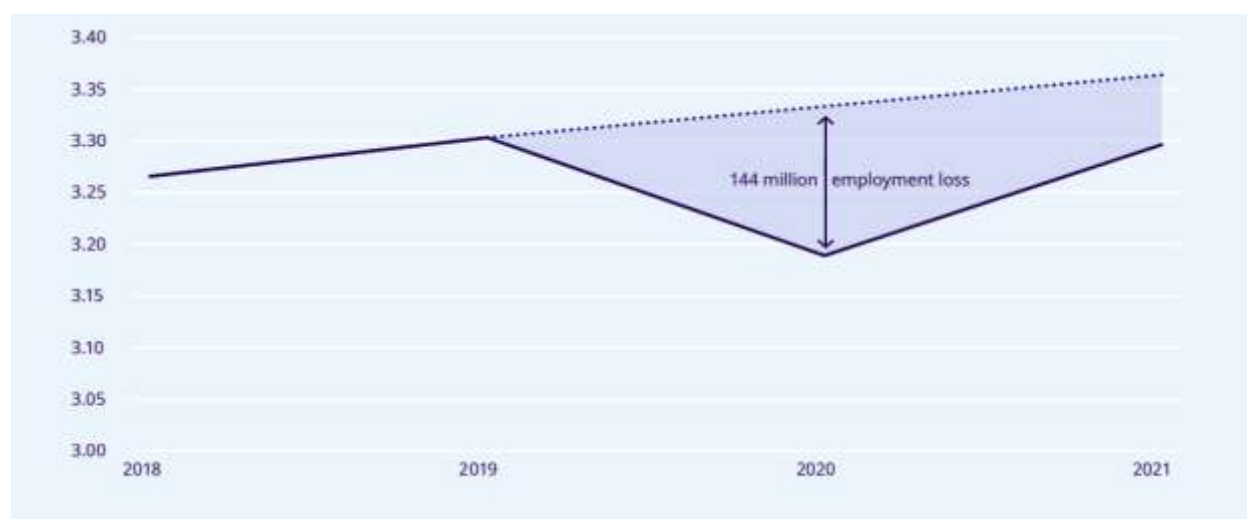
<sup>14</sup> Ibid, n9.

<sup>15</sup> IMF (October 2019), 'Working Paper - Reducing and Redistributing Unpaid Work: Stronger Policies to Support Gender Equality', <https://bit.ly/3j6xLA4>

<sup>16</sup> ILO (January 2021), 'ILO Monitor: COVID-19 and the World of Work. Seventh Edition. Updated estimates and analysis', <https://bit.ly/3d1x0nZ>

- In relative terms, employment losses were higher for women (5%) than for men, and for younger workers (8.7%) than for older workers.
- Employment losses in 2020 translated mainly into rising “inactivity” levels rather than unemployment, whereby people were no longer in a position to actively look for work,
- Accounting for 71% of global employment losses, inactivity increased by 81 million which resulted in a reduction of the global labour force participation rate by 2.2% in 2020 to 58.7%.
- Globally, around half of all working-hour losses are due to employment loss, while the other half can be attributed to reduced working hours, therefore, unemployment numbers only reflect a small proportion of the jobs lost due to COVID-19 as many people who wished to have a job could not find any opportunities to search for employment or were unable to due to COVID-19,
- Global unemployment increased by 33 million in 2020 to 6.5%,
- Global labour income<sup>17</sup> in 2020 is estimated to have declined by 8.3%, which amounts to US\$3.7 trillion, or 4.4% of global Gross Domestic Product,
- The global employment loss relative to the “no pandemic” scenario can be seen in figure 2 below.

Figure 2: Global employment loss relative to the “no pandemic” scenario, 2018-2019 (employment: billion people)



Source: ILO Monitor: COVID-19 and the World of Work Seventh Edition

<sup>17</sup> Before taking into account income support measures

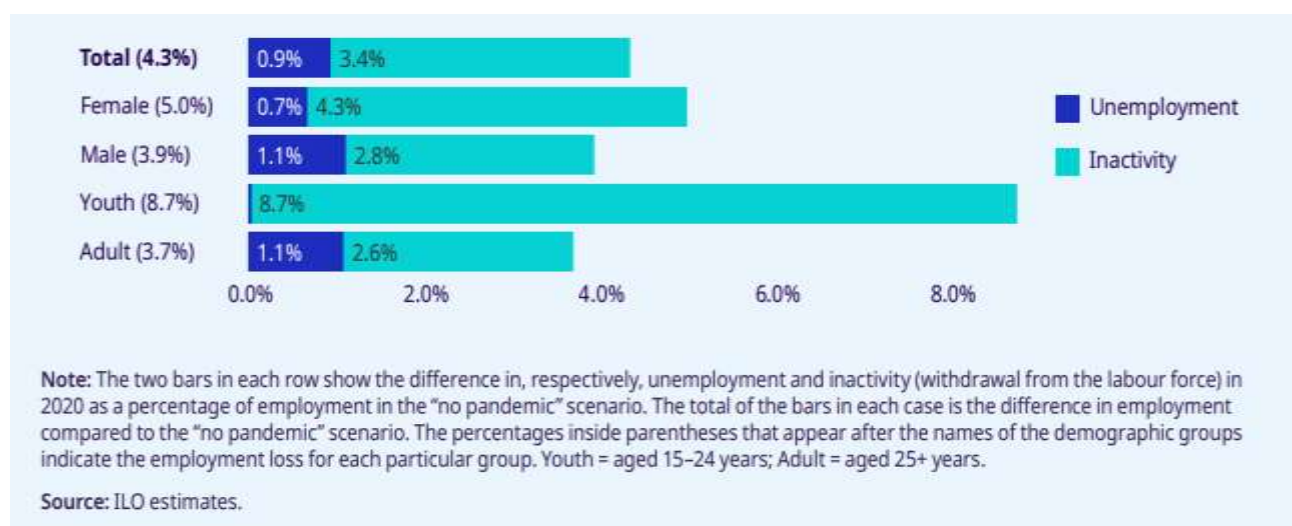
Crucially, the increase in unemployment and overall work deficit in 2020 compared to 2019 is much larger than the deficit observed during the global financial crisis in 2009. The ILO monitor notes:

“In contrast to the global financial crisis, the COVID-19 crisis has affected labour markets worldwide, resulting in greater job losses and unemployment hikes everywhere – including low- and middle-income countries, which were not hit as hard during the global financial crisis.

In high-income countries, the increase in the unemployment rate between 2019 and 2020 (2.0 percentage points) is very similar to that seen between 2008 and 2009 (2.1 percentage points). Globally and across all regions and country income groups, women have been affected by employment loss to a greater extent than men.

At the global level, the employment loss for women stands at 5.0 per cent in 2020, versus 3.9 per cent for men. In absolute numbers, the loss is larger for men (80 million) than for women (64 million) because of the long-standing gender gap in labour force participation rates. Across all regions, women have been more likely than men to become economically inactive, that is to drop out of the labour force, during this crisis.<sup>18</sup>” (see Figure 3 below)

**Figure 3: Decomposition of employment losses into changes in unemployment and inactivity, by sex and age, world, 2020 (percentage)**



<sup>18</sup> Ibid, n.10, pp.9-10.

As seen in figure 3 above, the impact of the pandemic on young people is also of great concern. ILO estimates show that young workers were hit hard by the crisis in 2020 across all regions and country income groups, resulting in an employment loss of 8.7%. Outside of high-income countries, jobless young people have either dropped out of or delayed entry into the job market, which has exacerbated young people's disconnection from the labour market. The WPG would like to echo concerns from the ILO about the risk of a lost generation of young people facing severe economic disadvantage<sup>19</sup>.

While a robust recovery is expected globally for the second half of 2021 as vaccine roll out continues, the economic damage throughout 2020 will have a lasting impact on the economy. ILO projections for 2021 paint an equally bleak picture:

- The global economy is still facing high levels of uncertainty and there are concerns that recovery will be uneven,
- The recovery of employment in the third quarter of 2020 was modest and uneven, with the sectors hardest hit, for example accommodation, food services and retail, continuing to experience declining employment (these are sectors with high proportions of women in their workforce),
- In contrast to all other sectors, employment in both information and communication and in financial and insurance activities continued to increase in the second and third quarters of 2020 (these are sectors with majority male workforces),
- Projections indicate a persistent work deficit in 2021, and based on the IMF October 2020 economic forecast, the baseline scenario projects a continued loss in working hours of 3% (90 million full-time equivalent jobs) in 2021 compared to quarter four of 2019,
- In the pessimistic IMF baseline scenario, working-hour losses in 2021 will remain at 4.6% (130 million FTE jobs). The optimistic scenario, which assumes more favourable conditions, a loss of 1.3% of global working hours (36 million FTE jobs) is expected at a minimum<sup>20</sup>.

With all of the above statistics and projections in mind, the ILO warns that inequality is likely to further increase as a result of the type of job losses generated by the crisis. In the UK, significant job losses occurred at the lower end of the labour income distributions, whereas high-paid jobs were left largely intact<sup>21</sup>. Further, job recovery has been stronger at the upper end of labour distribution scales, while demand for low-paid jobs has continued to be weak.

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<sup>19</sup> Ibid, n.10, p10.

<sup>20</sup> Note - these projections are from before many countries started to experience a drastic rise in COVID-19 cases and entered more robust government lockdowns as a result in the first quarter of 2021.

<sup>21</sup> Ibid, n.14, pp.17-18.

In any economic recovery, it is crucial that governments are fully aware of the groups that have been disproportionately impacted by the crisis due to pre-existing inequalities, and work to address this. Women's economic positioning pre-COVID-19 was already much weaker than men's, with higher levels of "economic inactivity" due to family and home commitments and the unequal distribution of caring responsibilities and with high representation in low-paid work in high-risk sectors. These issues have been exacerbated since COVID-19, and mothers of young children, women in high-risk sectors, migrant women and low-paid women bearing the brunt of this crisis. Urgent action must be taken to prevent the loss of decades of work towards gender equality.

The WPG would like to again echo comments highlighted by UNICEF in the WPG Feminist Recovery Plan in 2020:

'Given the longer-term impacts of COVID-19 on gendered and multidimensional poverty, social protection responses that do not address the fundamental drivers of gender inequality, including unpaid care and responsibilities, will entrench already existing gender inequalities. As COVID-19 amplifies these inequalities, now is a critical window of opportunity to build more effective social protection to endure through future pandemics'<sup>22</sup>.

### 1.1.2 UK and Northern Ireland Economic Data

The global picture highlighted above has certainly reflected the economic impact of COVID-19 in locally. The Northern Ireland economy has suffered immensely due to COVID-19, and the impacts of this are likely to be wide-reaching and long-term. Women were in extremely vulnerable and precarious economic positions before the pandemic and this has now worsened. It is absolutely crucial both for women's wellbeing, and long-term economic recovery, that policy decisions to follow the pandemic do not further harm women's economic standing. Any government revenue raising should not come through austerity measures.

Women faced grave economic suffering following more than a decade of harsh austerity,<sup>23</sup> as welfare reform policies introduced in the aftermath of the 2008/9 financial crash had an adverse disproportionate impact on women. Existing research on the ongoing impact of austerity on women in Northern Ireland indicates that women are more likely to be greater impacted by austerity

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<sup>22</sup> Zahrah Nesbitt-Ahmed and Ramya Subrahmanian, (April 2020), 'Caring in the time of COVID-19: Gender, unpaid care work and social protection', UNICEF, (available online): [accessed 15.06.20]. <https://uni.cf/2TRRUz8>

<sup>23</sup> See Siobhán Harding, (March 2019), 'Impact of Ongoing Austerity: Women's Perspectives', Women's Regional Consortium, (available online): <https://bit.ly/2TWQ5kq>

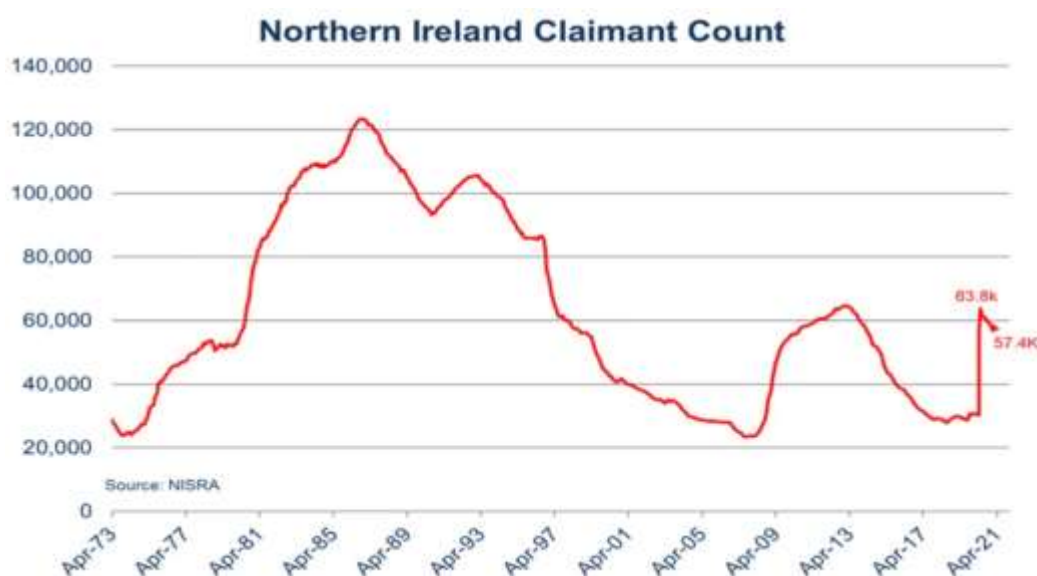


measures than men due to a range of societal factors that make women more likely to:

“Claim social security benefits, more likely to use public services, more likely to be in low-paid, part-time and insecure work, more likely to be caring for children/family members and more likely to have to make up for cuts to services through unpaid work. Regardless of the reason for this inequality the effect is the same – the cumulative effect of these reforms is felt by women and by the most vulnerable women – those on low incomes<sup>24</sup>.”

In the FRP 2020, an indication of the impact of COVID-19 on the Northern Ireland economy was given based on 2020 Q2 statistics. One year on from the initial labour market response to the pandemic, limited regional economic data exists following the “second wave” and third lockdown that was implemented from December 2020 to April 2021. In 2020, the most dramatic impact of the pandemic on the economy was evident in the claimant count<sup>25</sup> (which rose from 30,500 in March 2020 to 63,800 in May 2020) and in the HMRC’s payroll data<sup>26</sup>. Figures 4, 5 and 6 below give an indication of the claimant count, employment levels and total weekly hours worked up to the end of quarter one of 2021.

Figure 4: Northern Ireland Claimant Count April 2021



Source: Ulster Economix May 2021

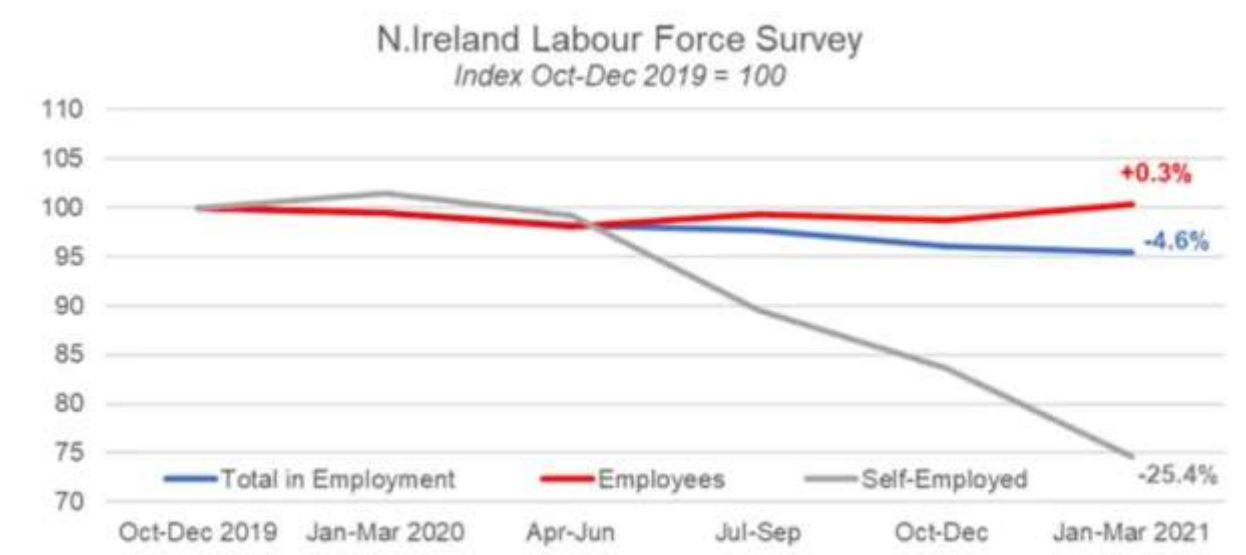
<sup>24</sup> Ibid, n22, p.6.

<sup>25</sup> The claimant count is the number of people claiming unemployment related benefits.

<sup>26</sup> Richard Ramsey, Ulster Bank (May 2021), 'Ulster Economix: What a difference a year makes', <https://bit.ly/35I8NPw>

While the claimant count fell from the pandemic peak of 63,800 in May 2020 to 57,4000 in April 2021, the figure is still significantly higher than pre-pandemic levels (30,500 in March 2020).

Figure 5: Northern Ireland Labour Force Survey Employment Levels April 2021



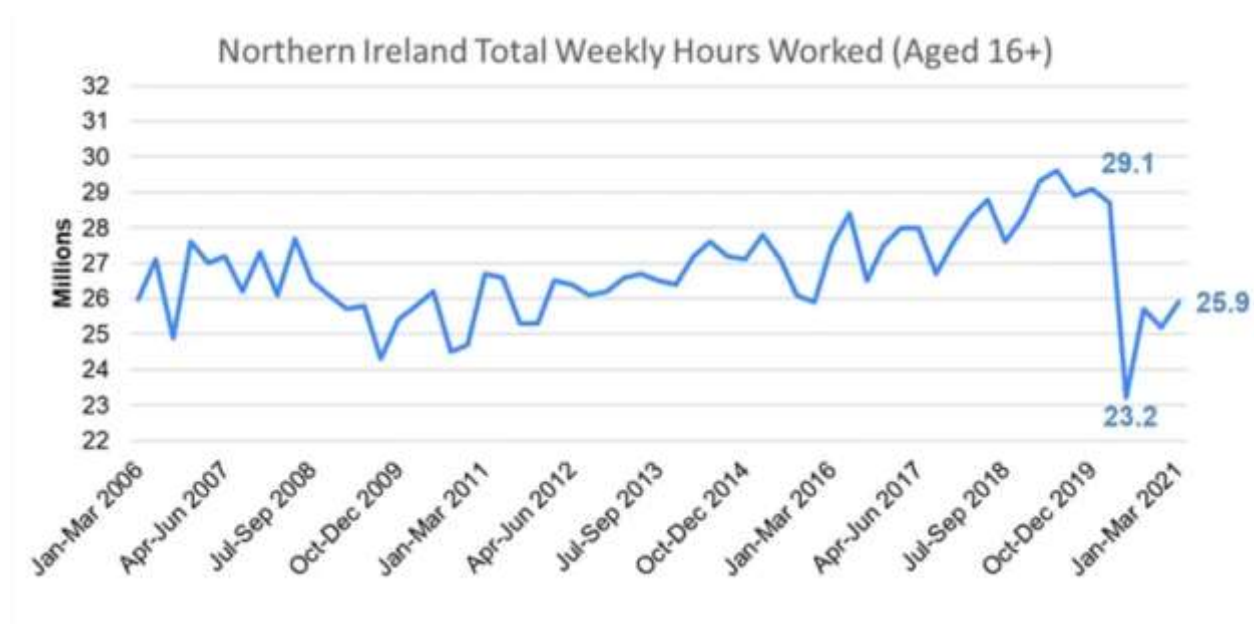
Source: NISRA Labour Force Survey

While Northern Ireland unemployment levels continue to fall, the employment rate and economic inactivity rates (those neither in work or looking for work) continue to move in the wrong direction, with increasing levels of people no longer seeing opportunities for work and now being considered “economically inactive”. In Q1 of 2021, the economic inactivity rate in Northern Ireland was 28.3%, compared to 20.9% for the UK and the employment rate in Northern Ireland fell to 69.1% compared to 75.2% for the UK<sup>27</sup>. The Labour Force Survey from NISRA (figure 5) reveals a bigger decline in employment than UK-wide HMRC data, particularly as self-employed people have been hardest hit and levels of self-employed people in Northern Ireland have reduced to 11% of all workers, compared to 26% pre-pandemic.

<sup>27</sup> Office for National Statistics (April 2021), Labour Market Overview, UK: April 2021, <https://bit.ly/3gZjaDO>



Figure 6: Northern Ireland Total Weekly Hours Worked (Aged 16+)



Source: Ulster Economix May 2021

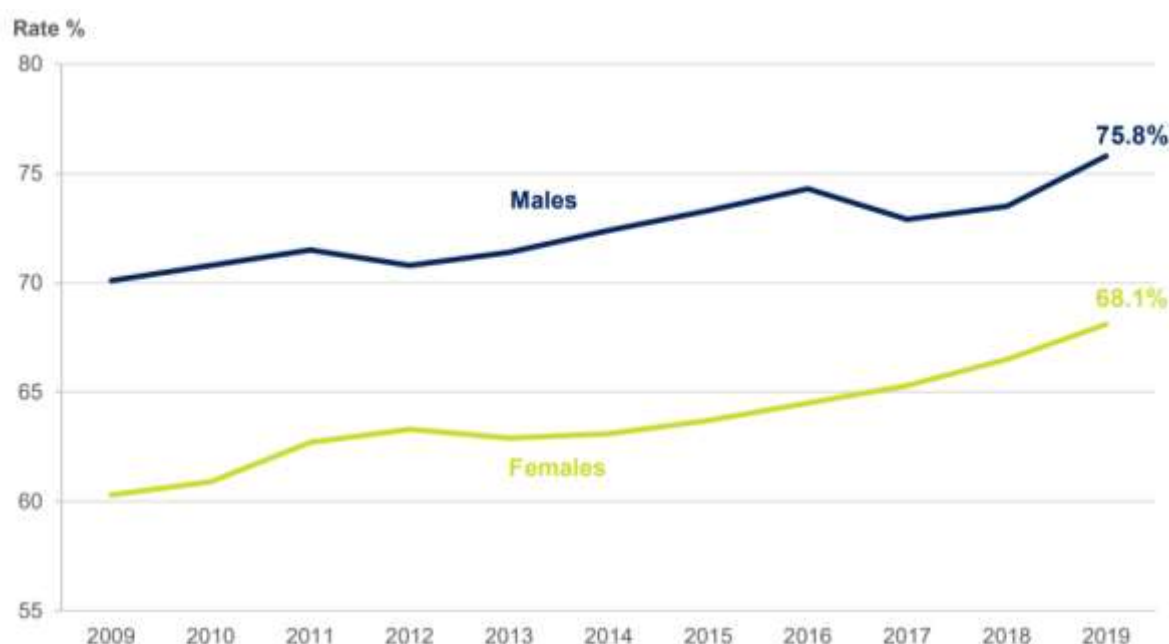
Northern Ireland has followed global trends in relation to reduced working hours. While there were 25.9million of weekly hours worked during quarter one of 2021, this is still 11% fewer hours than occurred in Q4 of 2019.

The economic data emerging as Northern Ireland prepares to move towards recovery yet again is still fairly new. Similar to the global trends, it is clear that different sectors, and different groups of people, have been impacted differently. In addition, the data above is not gender disaggregated, and further analysis is needed to provide a more accurate breakdown of how different groups have been impacted.

The Northern Ireland Gender Equality Strategy Expert Advisory Panel Report<sup>28</sup> released in March 2021 provides a comprehensive overview of key indicators on women's economic standing in Northern Ireland and the urgent need for gender disaggregated data by official agencies. While this report provides an overview of key employment indicators between men and women over a 25 year period, there are some statistics worth highlighting here in the context of women's economic positioning pre-pandemic and the impact of COVID-19 on the Northern Ireland economy. Given the above data on the impact of the pandemic on employment levels, self-employed people and hours worked. Figures 7-10 will analyse this information based on gender disaggregated data both pre-pandemic and from Q4 of 2020.

<sup>28</sup> Gender Equality Strategy Expert Advisory Panel Report (March 2021): <https://bit.ly/2SRZcmu>

Figure 7: Northern Ireland Employment Rate by Gender (16-64)



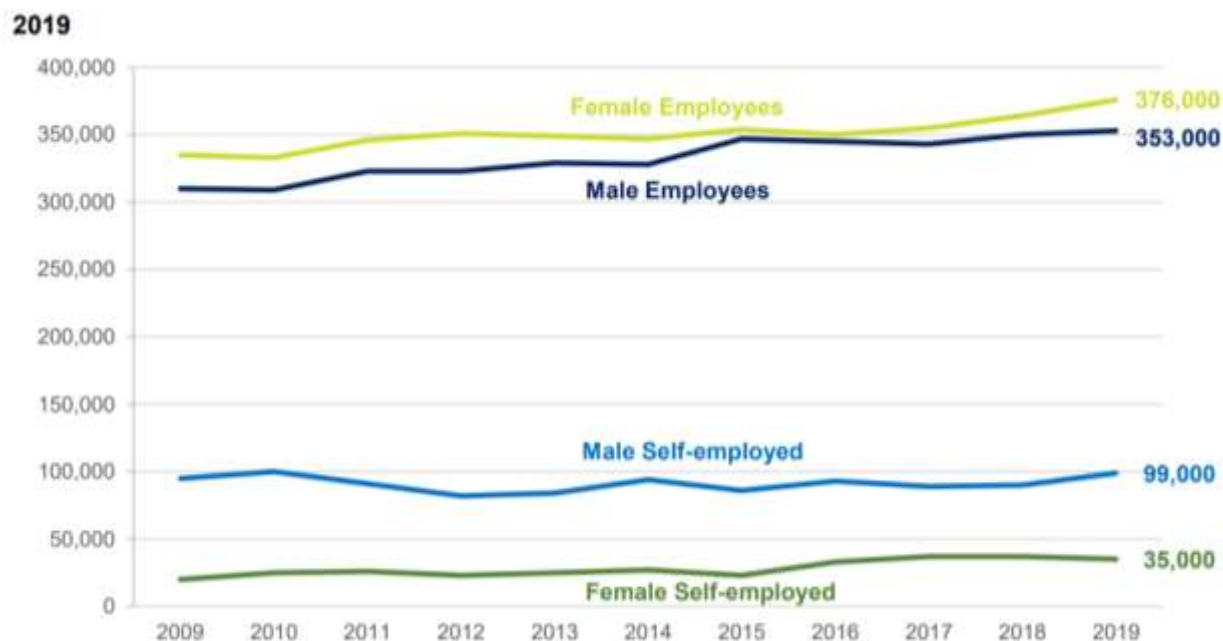
Source: NISRA – Women in Northern Ireland 2020<sup>29</sup>

Although updated statistics show that the Employment Rate in Northern Ireland has dropped to 69.1% in Q1 of 2021, it is worth highlighting pre-pandemic levels of employment for women and how these have been consistently lower than men's employment (figure 7 above). As the sectors worst hit by the pandemic tend to have majority women workforces (retail, food and hospitality etc.), a concerted effort must be made by the Northern Ireland Executive to remove barriers to employment faced by women and reintegrate women into the formal labour market in the recovery from COVID-19.

Further, as highlighted in figure 5, there has been slow recovery in numbers of people in employment at the end of Q1 of 2021 compared to Q4 of 2019 (-4.6% overall). Significantly, the figure 5 highlighted the drastic impact of the pandemic on self-employment and the reduction of workers being self-employed dropped from 26% of all workers in Q4 of 2019 to 11% of all workers at the end of Q1 in 2021. This is an extremely worrying development, and figure 8 overleaf highlights a gendered dimension that must be considered. Pre-pandemic, women accounted for just 26% of all self-employed people and out of all women in employment (414,000), 91% were employees (376,000) and just 8% were self-employed (35,000). Given the drastic reduction in people being self-employed due to the pandemic, there is a risk of having very few women entrepreneurs in Northern Ireland as we recover from COVID-19.

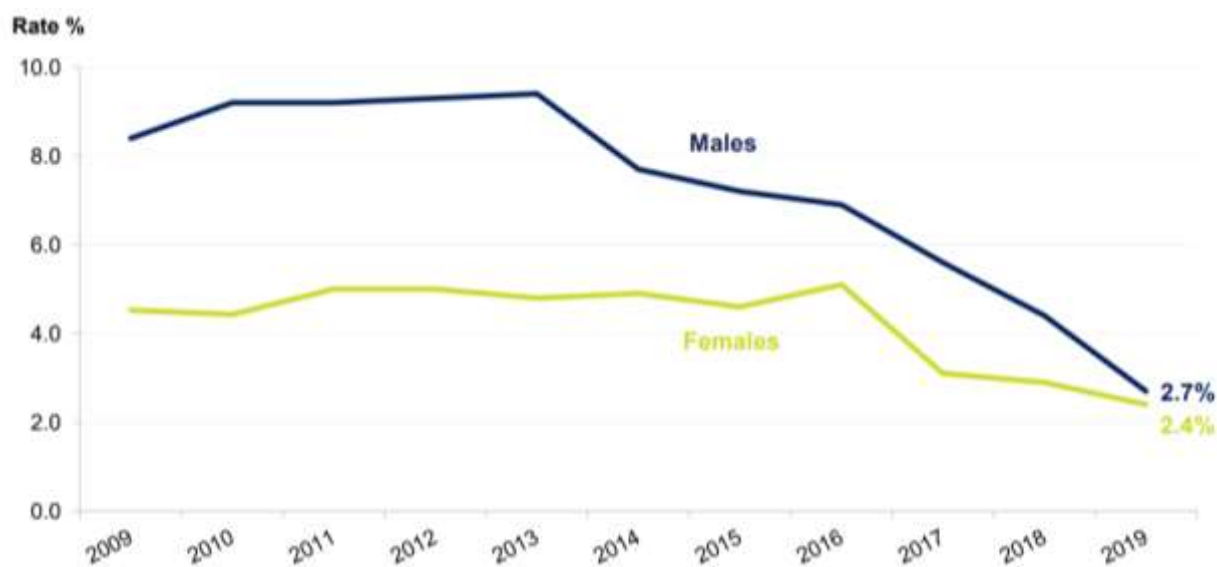
<sup>29</sup> NISRA Women in Northern Ireland Report 2020: <https://bit.ly/2SPXqIR>

Figure 8: Northern Ireland Gender Profile of Employees and Self-Employed (16+)



Source: NISRA – Women in Northern Ireland 2020

Figure 9: Northern Ireland Unemployment Rate by Gender (16-64)



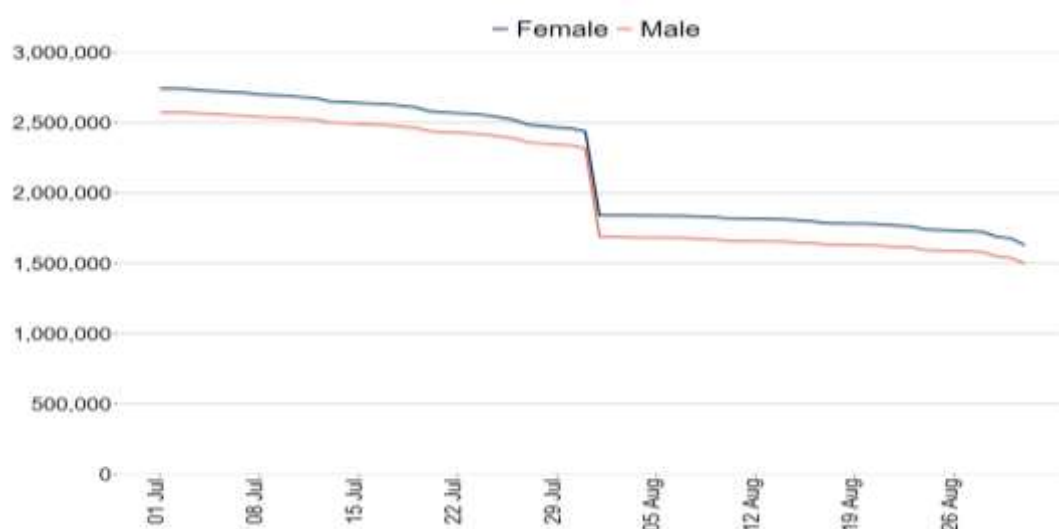
Source: NISRA – Labour Market Report November 2020<sup>30</sup>

<sup>30</sup> NISRA Labour Market Report 2020, <https://bit.ly/3zLKJZX>

When analysing the unemployment rate in Northern Ireland, disaggregating this data by gender provides a more accurate picture of the drivers behind women's ability to enter the workforce, and how this has worsened due to the pandemic. Figure 9 highlights the unemployment rate by gender in Northern Ireland pre-pandemic. As highlighted previously in Figure 5, recent statistics from Q1 2021 show that the unemployment rate has slightly decreased, however, this appears to be reducing at a much slower rate than anticipated while employment rates are plummeting, and economic inactivity rates are rising. This is a worrying trajectory for the Northern Ireland labour market, and when compared to the trends in unemployment in the decades leading up to the pandemic, there are further concerns in relation to women.

Statistics show that men have consistently had a higher rate of unemployment than women in Northern Ireland over the past 25 years, however, as seen in figure 9, pre-pandemic the gap narrowed to just 0.3% between men and women in Northern Ireland. As many women work in high-risk sectors that have been hardest hit by the pandemic, this narrow gap for unemployment pre-pandemic may have reversed. Further, women's "economic inactivity" and "underemployment" levels have been steadily increasing for decades, which highlights that the unemployment rate is not the most necessary measurement of people who are out of employment due to the pandemic. Without Northern Ireland specific gender disaggregated on furlough rates, redundancies and claimant counts, it is difficult to get a fully accurate picture of how men and women have been impacted by job loss, and we urge the NI Executive to implement the recording of gender across all key indicators.

**Figure 10: UK Total Employees Furloughed by Gender 2020**



Source: HMRC CJRS data and PAYE Real Time Information<sup>31</sup>

<sup>31</sup> UK Government Coronavirus Job Retention Scheme Statistics October 2020: <https://bit.ly/3xOfouI>

Figure 10 above shows the UK wide data on employees furloughed broken down by gender. Women have been furloughed at higher levels than men as the sectors with the highest levels of furloughed employees were arts, entertainment and recreation at 33%, followed by accommodation and food services at 27%. However, the number of women furloughed is expected to have been higher as it has not been possible for the HMRC to link all furlough data with the gender of employees. Despite the gaps in data, it is concerning that many people have had to spend a significant proportion of 2020 and 2021 surviving on 80% of wages that are, in most cases, far below the real living wage.

## Redundancies

Given the persistent gaps in gender disaggregated data in the key economic indicators above, it is important to assess redundancies and the implications of these job losses for women. Under the Employment Rights (Northern Ireland) Order 1996 (Amended 8 October 2006)<sup>32</sup> companies are only legally required to notify the Department for Economy of impending redundancies of 20 or more employees. Companies who propose less than 20 redundancies are not required to notify the Department, therefore the figures provided are likely to be an underestimate of total job losses, however, it is not possible to quantify the extent of the shortfall. Therefore, the numbers of redundancies reported are likely to be less than the actual numbers of redundancies in Northern Ireland.

What is clear from available statistics, is that as economic pressures continue alongside lockdown measures to tackle the COVID-19 pandemic, redundancies have been steadily increasing across Northern Ireland. From 1<sup>st</sup> November 2019 to 31<sup>st</sup> October 2020, 9,600 redundancies were proposed, the highest annual totals on record<sup>33</sup>. Nearly 80% of redundancies confirmed for 2020 took place in the months July-October. From November 2019 to November 2020, there were 4,060 confirmed redundancies, which was 31% higher than the previous year (3,100). However, there is a lag between proposed redundancies and confirmed redundancies, and smaller businesses that have been hardest hit by the pandemic are not likely to be included in these figures as many will have had less than 20 employees to make redundant.

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<sup>32</sup> Employment Rights (Northern Ireland) Order 1996 (Amended 8 October 2006): <https://bit.ly/2Ux4wfg>

<sup>33</sup> NISRA Labour Market Report 2020, p.14 <https://bit.ly/3zLKJZX>

Northern Ireland has the highest concentration of small to medium businesses (SMEs) of anywhere in the UK, accounting for 99.9% of all businesses in Northern Ireland and generating about 75% of all private sector income and employment<sup>34</sup>. Crucially, this shows how there are many redundancies that will not have been accounted for as there is no requirement to notify the Department of proposed redundancies below 20 people. If the Northern Ireland Claimant Count was broken down by gender disaggregated data, this could go some way to providing a better picture, but this is not the case.

Clearly, the government has a significant amount of work to do in order to fully understand the groups that have been disproportionately impacted by the pandemic due to economic, social and political factors. Without doing this, it will be impossible to create a recovery process that is even and addresses growing inequality.

### 1.1.2.1 Government Failure to Account for Economic Impact of COVID-19

The WPG consistently raised our concerns throughout 2020 and the first two quarters of 2021 on the disproportionate impact COVID-19 was having on women, both due to the pandemic itself and due to pre-existing economic positioning of women due to austerity. Despite this, there has been little action by the Northern Ireland Executive to acknowledge the gendered economic impact of the pandemic in Northern Ireland nor engage with or implement the WPG Feminist Recovery Plan Recommendations relating to the economy. This has been a UK-wide issue, as the UK government has been repeatedly criticised for consistently failing to consider gender in its response to COVID-19. Criticisms have come from the London School of Economics<sup>35</sup>, UK Women's Budget Group<sup>36</sup>, the UK Women and Equalities Committee<sup>37</sup> and more.

The London School of Economics (LSE) recently published a research piece criticising the UK Government's response to the pandemic, particularly focusing on the need for a Gender Advisor on the Government's Scientific Advisory Group on Emergencies (SAGE)<sup>38</sup>. The paper draws attention to the 'narrow

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<sup>34</sup> Swinton (2020), 'Northern Ireland - Business Trends Report', <https://bit.ly/3xKSvBs>

<sup>35</sup> London School of Economic (2021), 'Why we Need a Gender Advisor on SAGE', LSE Public Policy Review, <https://bit.ly/2SXwPDj>

<sup>36</sup> UK Women's Budget Group (March 2021), 'One year on: Women are less likely than men to feel the Government's response to COVID-19 has met their needs', <https://bit.ly/3h1fKQG>

<sup>37</sup> House of Commons Women and Equalities Committee (February 2021), 'Unequal impact? Coronavirus and the gendered economic impact', Fifth Report of Session 2019-21, <https://bit.ly/3xLzDSJ>

<sup>38</sup> London School of Economic (2021), 'Why we Need a Gender Advisor on SAGE', LSE Public Policy Review, <https://bit.ly/2SXwPDj>

epidemiological approach' of the business matters at SAGE meetings– even though a combined epidemiological and social approach to pandemic recovery was recognised as essential following the Ebola outbreak in West Africa.

LSE analysed the minutes from the 73 meetings held by SAGE to determine how often sex and gender were explicitly mentioned as well as if gendered issues or themes were mentioned. They found that, out of the 73 meetings, 13 (17.8%) featured explicit gendered terminology. However, this terminology was used only to discuss sex-related issues such as more men dying from Covid-19 and the risk of COVID-19 transmission from pregnant women to fetuses. Only twice were there calls for more research into sex, gender and ethnicity as demographic variables.

While topics such as schools and childcare, employment sectors, health and social care workers, and health impacts were discussed, the mention of how women have been impacted in relation to these issues was either not considered or only included in the supplementary papers. While the number of female experts invited to participate in the SAGE meetings increased gradually over 2020, the average in attendance was 32.8%. Additionally, the authors note that, “...having more women at the table does not automatically equate to more gender consideration in policy.” Gender Advisors are invited to participate in policy advisory groups on areas like climate change and humanitarianism – with the decreasing of funds and power from the Government Equalities Office (GEO), LSE fears that there will be no consideration of gender equality in COVID-19-related decision-making.

The UK Women's Budget Group (UKWBG) found that:

- A year on from the start of the pandemic, less than four in ten women (38%) believe that the UK Government is focusing on the issues that matter most to them (compared to 50% of men).
- Only three in ten (29%) women and 35% of men think that needs specific to women have been properly addressed by the UK Government.
- In Northern Ireland specifically, only 20% of women believe that the Northern Ireland Executive has considered and responded to their specific needs during the pandemic.

This is no surprise, as the LSE paper outlined how gendered impacts of the pandemic have been ignored or not given proper attention. It's noted in the UKWBG's brief that Equality Impact Assessments for COVID-19-related policies have not been made public.



The lack of consideration of women's needs reflected in COVID-19 decision-making and policies does not begin to account for the intersectional identities that can drive further inequality. For example, about 1.5 million young women in the UK have lost income over the past year<sup>39</sup>, young women had higher rates of declining mental health when compared to older women, and 32% of young women think that they will come out of this pandemic period with more debt (compared to 16% of women over 45-years-old) – but there has been virtually little acknowledgement of this struggle in policies from both the UK Government and the Northern Ireland Executive. In Northern Ireland specifically, only 26% of women felt that the Executive was acting in their best interest and only 18% think that the Executive was focusing on issues that matter most to them – these responses are the lowest among young women in the four nations.

Women on low incomes also viewed the response of the Executive poorly, as women on low incomes were the least likely to believe that the Executive acted in their best interest and focused on the issues that mattered most to them regarding the COVID-19 response. In the UK overall, 25% of women on low incomes have sought financial support benefits from the Government, whether that be for the first time or increased from past support. Disabled women sought more financial support from family and friends (21% compared to 11% of non-disabled women) and more than one third of disabled women (34%) believe they will be in more debt following the pandemic than they were in before the pandemic (compared to 25% of non-disabled women).

While the UKWBG was unable to collect a Northern Ireland sample of Black, Asian and ethnic minority women due to constraints, we know that in the UK, Black, Asian and ethnic minority people have higher rates of COVID-19 infection and mortality, and Black, Asian and ethnic minority women are experiencing a greater impact on their financial situations – 30% say that they are worried about how to pay their mortgage (compared to 17% of white women).

The 2021 report published by the UK Women and Equalities Committee, 'Unequal impact? Coronavirus and the gendered economic impact,' reflected the sentiments expressed in the LSE and UKWBG papers. The Committee came to the conclusion that "...existing gendered inequalities in the economy have been ignored and sometimes exacerbated by the pandemic policy response." Their analysis highlights that many of these COVID-19 related impacts were predictable, as they are a continuation of the pre-pandemic trends in employment, social security, young people's engagement with the labour market, pregnancy and maternity discrimination, and childcare.

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<sup>39</sup> Young Women's Trust (2020) Picking up the pieces: Young women's experiences of 2020. <https://bit.ly/3d6uEUF>

The pre-pandemic rate of women's participation in the labour force was at a record high, but the positions were typically part-time, low paid, and on temporary or zero-hour contracts. This insecure working situation fed into many of the gendered impacts exacerbated by the pandemic – several studies show that those in precarious employment saw a greater loss in earnings and hours than those in secure employment<sup>40</sup>. Women were 10 percentage points less likely to have their furlough earnings topped-up by their employer than men<sup>41</sup>, and mothers were 10 percentage points more likely to be asked to be furloughed than fathers<sup>42</sup>. The Coronavirus Job Retention Scheme (CJRS) and the Job Support Scheme (JSS) did not help alleviate these inequalities.

Pregnant then Screwed criticised the CJRS, arguing that the inflexible design of the programme created an “unfair division of domestic labour” and heightened the possibility of women being “earmarked for redundancy.”<sup>43</sup> Additionally, the Committee found that there were concerns surrounding the design of the JSS as it did not incentivise employers to keep on their part-time staff<sup>44</sup>. The Committee also inquired about the focus of the economic recovery on male-dominated sectors, to which the Minister for Equalities responded, “We are not providing policies based on where men and where women work.”<sup>45</sup> This attempt to remain ‘gender neutral’ in fact reinforces existing systemic disadvantages, which the Committee recognised as they stated: “We are concerned that the Government’s priorities for recovery are heavily gendered in nature.”

Before the pandemic, women were more likely to claim benefits than men<sup>46</sup>. From 12 March to 8 October 2020, there was a 90% increase in the number of people on Universal Credit<sup>47</sup> and over 700,000 of those who applied at the beginning of the lockdown remain on the system<sup>48</sup>. Despite the high volume of Universal Credit users, the UK Government decided to reintroduce claimant conditionality during the summer of 2020, which expert witnesses argue disproportionately affects

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<sup>40</sup> Adams-Prassl, A., Boneva, T., Golin, M. and C. Rauh, “Inequality in the impact of the coronavirus shock: Evidence from real time surveys”, *Journal of Public Economics*, Volume 189, September 2020

<sup>41</sup> Adams-Prassl, A., Boneva, T., Golin, M. and C. Rauh (2020), “Furloughing”, *Fiscal Studies*, vol 41 (3) (2020), pp 591–622

<sup>42</sup> Ibid.

<sup>43</sup> Written evidence submitted by Pregnant Then Screwed (CVG0032), July 2020 <https://bit.ly/3xPLQWH>

<sup>44</sup> Resolution Foundation, The Winter (Economy Plan) is coming, September 2020 <https://bit.ly/3j7S5ky>

<sup>45</sup> Q196, Women and Equalities Committee Oral Evidence: Unequal impact? Coronavirus and the gendered economic impact, Q139 - 203 (4 November 2020) <https://bit.ly/3xPLW0v>

<sup>46</sup> Q115, Women and Equalities Committee Oral Evidence: Unequal impact? Coronavirus and the gendered economic impact, Q105 - 138 (14 October 2020) <https://bit.ly/3xPLW0v>

<sup>47</sup> DWP, ‘Universal Credit statistics: 29 April 2013 to 8 October 2020’

<sup>48</sup> Ibid.

working mothers as there is a lack of available childcare<sup>49</sup>. The Committee obtained access to the unpublished Equality Impact Analysis (EIA) of the policy, and they found it to be “insufficient and not fit for purpose.”

Although pre-pandemic trends of young people’s employment were positive in the decade following the 2008 recession, the pay progression was weak and positions were typically considered low pay. The pandemic has caused further damage – sectors that had to shut down completely employed 30% of all employees under the age of 25 (36% of young women and 25% of young men)<sup>50</sup>. KICKSTART was created to mitigate this impact, yet it has no gender disaggregated analysis of who fills the placements.

Pregnancy and maternity discrimination was commonplace before the pandemic:

- 77% of women experienced a negative or discriminatory incident due to their pregnancy or maternity.
- 11% of mothers felt forced to leave their jobs.
- 70% of employers reported that they felt women should make their pregnancy known during the hiring process.
- 25% of employers felt it was okay to ask women about their future plans regarding children during the hiring process.
- 27% reported that “pregnancy was an unreasonable cost burden.”<sup>51</sup>

In a survey completed by Pregnant then Screwed in July 2020, 15% of mothers, 10.5% of pregnant women and 11.2% of women on maternity leave were made redundant or expected to be redundant in the following 6 months<sup>52</sup>. There is also evidence that pregnant women or women on maternity leave were forced to take unpaid leave, forced to start maternity early, put on sick leave rather than furlough, outright refused furlough due to the assumption that they will not be working but will be attaining to childcare duties, or forced to work without the assessment of health and safety risks<sup>53</sup>.

The care sector, particularly the childcare sector, was and still is predominately made up of women – 96% of staff are women, 40% are under the age of 30, and 13% earn less than £5.00 per hour<sup>54</sup>. The Institute for Fiscal Studies (IFS) estimate that 25% of private nurseries may have been operating at a significant deficit,

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<sup>49</sup> Q41, Women and Equalities Committee Oral Evidence: Unequal impact? Coronavirus and the gendered economic impact, Q1 - 44 (8 July 2020) <https://bit.ly/3j7xr3J>

<sup>50</sup> IFS, COVID-19 and the career prospects of young people, July 2020 <https://bit.ly/3j5rVid>

<sup>51</sup> EHRC, ‘Pregnancy and maternity discrimination research findings’, <https://bit.ly/3d714P4>

<sup>52</sup> Pregnant then Screwed, ‘The true scale of the crisis facing working mums’ <https://bit.ly/3xllOo4>

<sup>53</sup> Written evidence submitted by Equality and Human Rights Commission (CVG0023), July 2020 <https://bit.ly/3j5Qc7H>

<sup>54</sup> Social Mobility Commission, The stability of the early years workforce in England: An examination of national, regional and organisational barriers, August 2020. <https://bit.ly/3xHrWgr>

compared the 11% of private nurseries before the pandemic<sup>55</sup>. Self-employed childminders could also be experiencing this significant deficit, with a possible 30% of childminders earning under £4 of income for every £5 of costs<sup>56</sup>. Despite the severe impact the crisis is having on the childcare sector, neither the Summer Economic Statement nor the Winter Economy Plan mentioned childcare.

In May 2020, the Executive released their 'Coronavirus: Our Approach to Decision-Making' summary, which outlined how they intended on leading the recovery process from the lockdown in response to the first wave. This document contained little analysis of the economic, societal and gender impacts of the pandemic. Almost a year later, the Executive released, 'Moving Forward: The Executive's Pathway Out of Restrictions,' which featured a detailed section at the beginning that offered some analysis of the health, societal and economic impacts of the pandemic. However, throughout the entire document, there is no explicit reference to women or gender despite outlining all the impacts felt disproportionately by women throughout the crisis. The Executive's failure to acknowledge or make steps to mitigate the disproportionate impact of the pandemic on women reinforces the notion that women will bear the brunt of crises, as shown following the 2008 recession. Their lack of gender analysis when it comes to decision-making has already reinforced systemic disadvantages, and it is clear that this is happening on a UK-wide basis.

This is a brief overview of the economic impact of COVID-19 both globally and in a Northern Ireland context. A more in-depth analysis of women's economic standing in Northern Ireland will be provided throughout the rest of this Economic Justice pillar. This evidence will be supplemented with the statements from women in Northern Ireland who have been drastically impacted by COVID-19, alongside urgent recommendations from the Women's Policy Group on how this harm can be rectified through robust policy and legislation as we move towards recovery from COVID-19.

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<sup>55</sup> IFS, Challenges for the childcare market: the implications of COVID-19 for childcare providers in England, September 2020 <https://bit.ly/3d5Ce2a>

<sup>56</sup> Ibid.

## Recommendations:

- Requirements for reporting the numbers of women furloughed and made redundant should be introduced for all businesses, particularly those with less than 20 employees, in light of the current economic crisis. Northern Ireland has a high number of small to medium sized businesses and current requirements under employment legislation and the lack of government recording of gender in claimant counts leaves significant gaps in accurately reporting the levels of women impacted by the COVID-19 pandemic.
- Due to the lack of gender disaggregated data, and data on the impact on smaller businesses, the full extent of the economic consequences of the furlough scheme and increased redundancies are missing. The impact of those in low-paid employment surviving on 80% of their wages, delays in financial support for those who are self-employed, those in businesses forced to shut down, and those requiring significant financial support (such as childminders and the broader childcare sector), needs to be analysed and addressed.
- An analysis of the impact of subsequent lockdowns needs to be assessed, as many employers could not access financial support and many staff were no longer on the UK Government's Furlough Job Retention Scheme after this initially ended in October. Significant economic planning is needed as businesses and employees were unable to avail of the financial support that was needed.



## 1.2 Women's Employment and Gender Pay Gap Reporting

“I always relied on overtime to earn a reasonable wage but on furlough I only received 80% of 4 hours according to my contract.”

“Although been working from home - work has expected longer hours and added work on top of work due to it being critical - this has been hard to balance with childcare.”

“It was quite a struggle for me being pregnant, having to work from and having a toddler at home. I had weekly phone calls with my councillor at the time which definitely helped but my mental health definitely took a hit.”

“I have been earning less commission and had to change jobs.”

“The cost of living has not reflectance in my NHSCT [Northern Health and Social Care Trust] wage so struggling to make ends meet.”

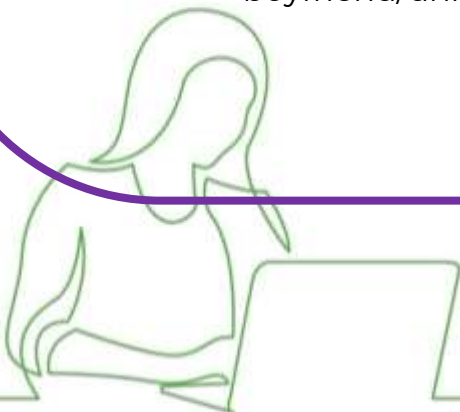
“In summary, increases stress levels, huge pressure managing work and childcare, tensions with husband, very long working days to accommodate home schooling.”

“Pay cut, job instability although I have remained in employment (not always full time), increased anxiety at times including experiencing very bad panic attacks, loss of social opportunities.”

“I've been able to work from home during this pandemic but despite that, I've never worked harder. It is so much more difficult to switch off when your laptop and access to your work is at your fingertips at night - especially when you have no other distractions.”

“My part time job which supports my studies let everyone go from their zero-hour contracts, nobody got furlough and I struggled to get another job. As a full-time student, I also don't qualify for universal credit. This left me struggling to pay rent, bills and feed myself. I couldn't move home, so I relied on my boyfriend/university hardship funds for a while.”

- Testimonies from WPG Primary Research



## 1.2.1 Women's employment in Northern Ireland

"Despite some progress made over the last few decades in increasing women's labour force participation and narrowing gender gaps in wages, gender equality in the world of work still remains an elusive goal" - International Labour Organisation (ILO).

'When women do better, economies do better.' - Christine Lagarde, former Managing Director of the International Monetary Fund (IMF).

### Background

Women in Northern Ireland continue to be more likely to be in insecure and part-time employment, and whilst the overall gender pay gap is the lowest in the UK, women still earn on average around 9.6% less than men<sup>57</sup>. Having dependent children significantly amplifies this difference and women responsible for dependent children are more likely to be in insecure, part time work. Occupational segregation is still pervasive with men continuing to dominate in construction and manufacturing, while women are more prevalent in public administration, education and health.

Policy failures around family leave frameworks fail all workers, but disproportionately impacts women, while the lack of affordable childcare, structured to facilitate women returning and staying in work, is still a very significant issue. Furthermore, women continue to experience significant sex discrimination, including sexual harassment and discrimination against mothers and pregnant women.

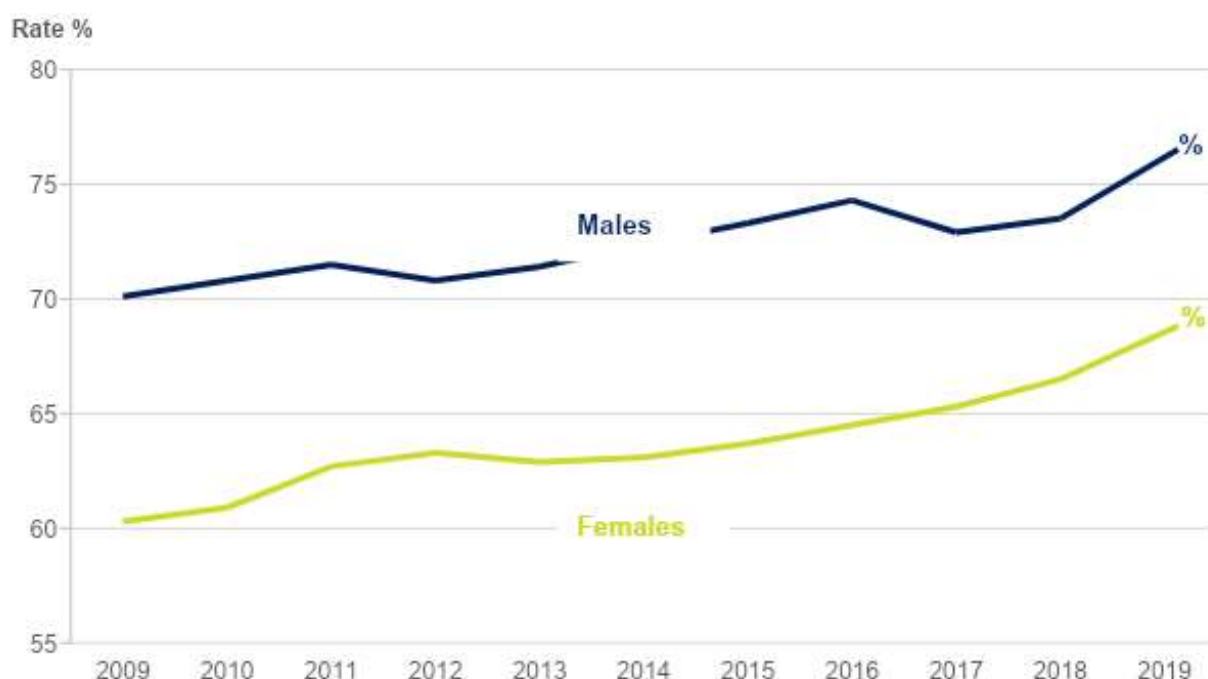
In the last 10 years both the male and female employment rates have increased to all-time highs. During this time the female employment rate has consistently been lower than the rate for males, although the gap between the male and female rates has narrowed by 2 percentage points over ten years. The increase in the female employment rate is consistent with the change in pension age, as the employment rate for women aged 60-64 in employment has increased by 26pps over the last decade.

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<sup>57</sup> See PWC (2020): <https://pwc.to/3xYZXsT>



Figure 11: Employment rate by gender (16-64), Jan-Dec 2009 to Jan-Dec 2019



Source: NISRA Women in Northern Ireland 2020<sup>58</sup>

## 1.2.2 Insecure and Low Paid Work – The Gender Dimension

Northern Ireland undoubtedly has a problem with low pay. The Nevin Economic Research Institute estimated that, in 2018, 28% of workers in Northern Ireland earned below the Real Living Wage, with 10% earning below the National Living Wage. They further identify workers from accommodation and food sectors being particularly at risk of low pay<sup>59</sup>.

The COVID-19 virus has caused governments to shut down large sections of the economy in order to contain infection, whilst also being clear that there are essential services necessary to have a functioning society. In these sectors, workers have been expected to report to work as normal in order to maintain vital services necessary to keep others alive, such as our food and energy supply and our health service (as well as other crucial public services). The crisis has shown that there are thousands of workers who are essential to our economy.

Our society cannot survive without the labour that these workers provide, this is surely the definition of an 'essential worker'. Given this definition, one would expect that a society which recognises the indispensability of these workers would

<sup>58</sup> See NISRA (2020): <https://bit.ly/2UqVHnf>

<sup>59</sup> See NERI Research Brief 'Low Pay in NI' (2019): <https://bit.ly/3xZ09bB>

seek to ensure that we have an economy which rewards these workers commensurate with the value that we place on their labour. This is not the case.

Instead, we have an economy where essential workers are among the lowest paid people in employment. In many instances, some of these workers also face the most precarious forms of employment so that the inadequate reward they receive for their labour is also highly uncertain.

In many cases, these low paid but essential workers are women, and this is the driving force behind the persistent gender inequalities in our labour market. The Irish Congress of Trade Unions (ICTU) has identified workers in food manufacturing, residential care, and workplace cleaning as being especially vulnerable to low pay<sup>60</sup>, with women in those sectors particularly vulnerable. 62% of women working in food manufacturing earn below the Real Living Wage<sup>61</sup>, 55% of women in residential care earn below the RLW, and it is estimated that around 60% of women working as office cleaners earn below the RLW.

In other words, workers who we deem to be essential are not paid a wage that is sufficient to support a basic standard of living.

### 1.2.3 The Gender Pay Gap and Pay Inequalities

There is a pervasive public narrative that there is no issue with a gender pay gap in Northern Ireland. This is not only unhelpful, but also untrue. Recent research undertaken by NERI shows that the picture is, in fact, considerably more complicated and also shows that women continue to earn less than men across most employment sectors<sup>62</sup>.

If we compare the hourly earnings of all males and all females using median hourly pay, we can see that women earn 8.1% less per hour than men. However, as Dr Lisa Wilson from NERI points out in her paper, merely looking at one measurement hides a much more complex picture.

For example, when we compare the earnings of part-time female workers to full-time male workers, we see a gap of over 26% in median hourly earnings. This measure is important because it captures the part time pay penalty - both the fact that part time work is more likely to be lower paid and also that more women are more likely to work part time.

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<sup>60</sup> See ICTU 'No Going Back' (2020): <https://bit.ly/3h1Uwm5>

<sup>61</sup> See NERI Research Brief 'Low Pay in NI' (2019): <https://bit.ly/3xZ09bB>

<sup>62</sup> See: NERI Report Series 'The Gender Pay Gap in Northern Ireland' (2021): <https://bit.ly/3jbZjUJ>

Dr Wilson also points us to considering the size of the gender pay gap based on longer time periods. Estimates of the gender pay gap based on weekly, monthly or annual earnings are often much larger than estimates based on hourly earnings. The rationale for basing the gender pay gap on these longer time periods is that we get closer to understanding the true reality of gendered differences in the economic returns for paid work for males and females.

The part-time effect is further illustrated by assessing the gender pay gap in terms of the gap in gross weekly and gross annual earnings between men and women. When assessed on a weekly basis, NERI calculates that median female hourly earnings were 29.5% less than men per week/per year.<sup>63</sup>

The latest NISRA Bulletin on the Gender Pay Gap<sup>64</sup> also provides useful analysis to explore the gender pay gap in Northern Ireland. Whilst it reports a key finding that in 2020, full-time females in NI earned at least as much as full-time males on average, it also concludes that considering all employees, regardless of working pattern, female hourly pay is still below male pay on average due to the higher proportion of female part-time employees.

Figure 12: Median gross hourly earnings excluding overtime by gender in NI, April 2020

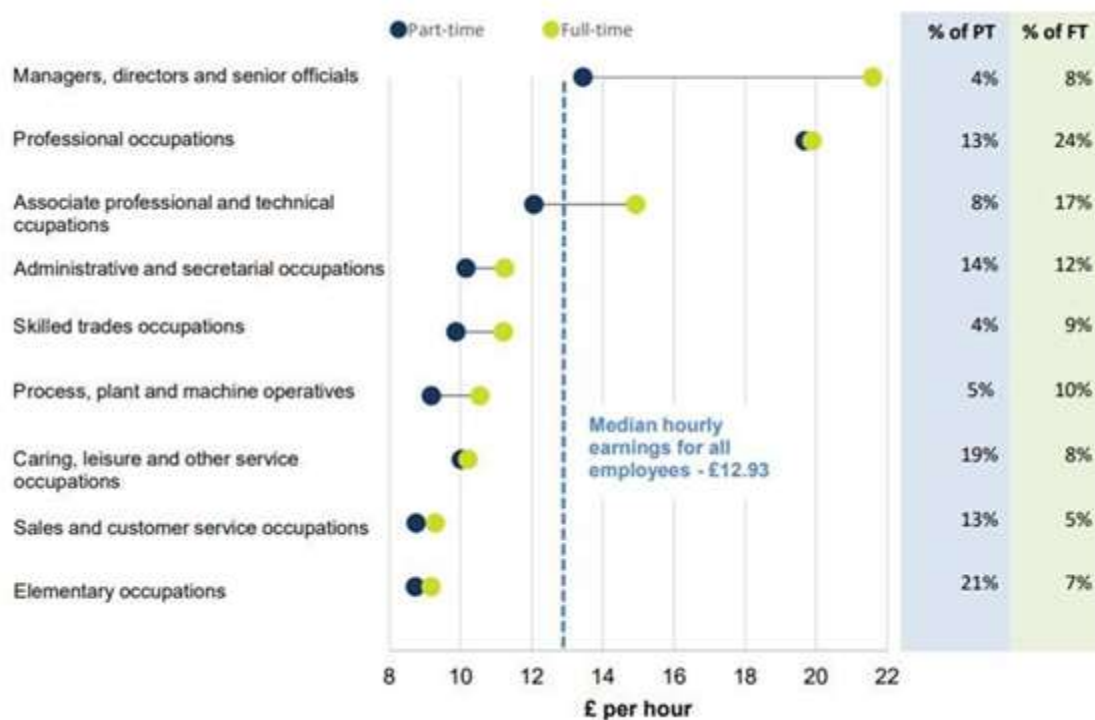


Source: NISRA: NI-ASHE-BULLETIN 2020-3 Gender Pay Gap

<sup>63</sup> NERI Working Paper Series, 'How Unequal? The Under Adjusted Gender Pay Gap in Earnings in Northern Ireland and the Republic of Ireland' (November 2020): <https://bit.ly/3j5u5hP>

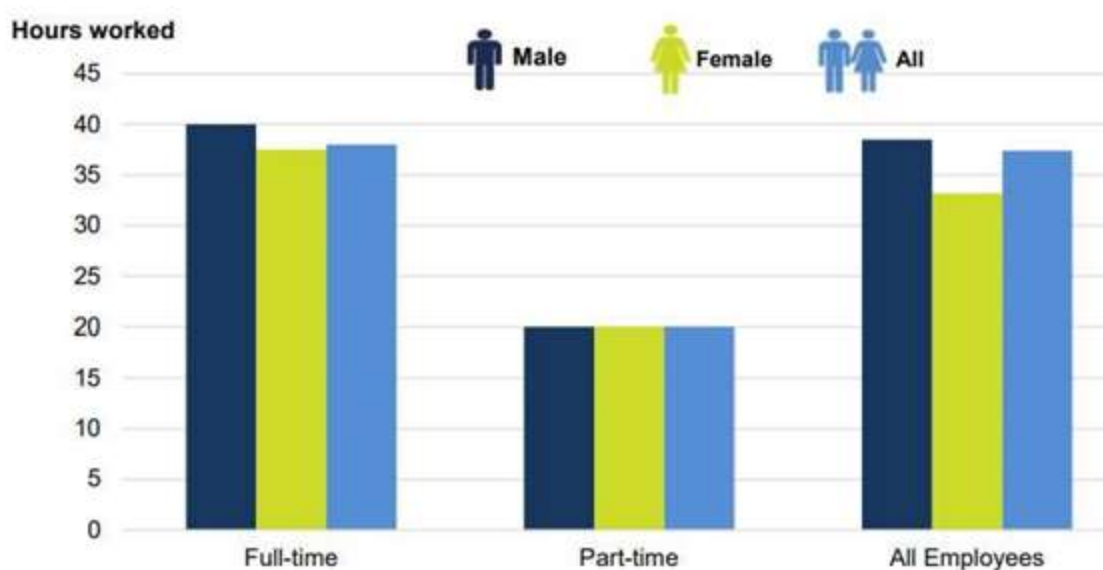
<sup>64</sup> NI ASHE Bulletin 2020-3: <https://bit.ly/3zPwNxY>

Figure 13: Median gross hourly earnings excluding overtime by working pattern and Occupation in NI, April 2020



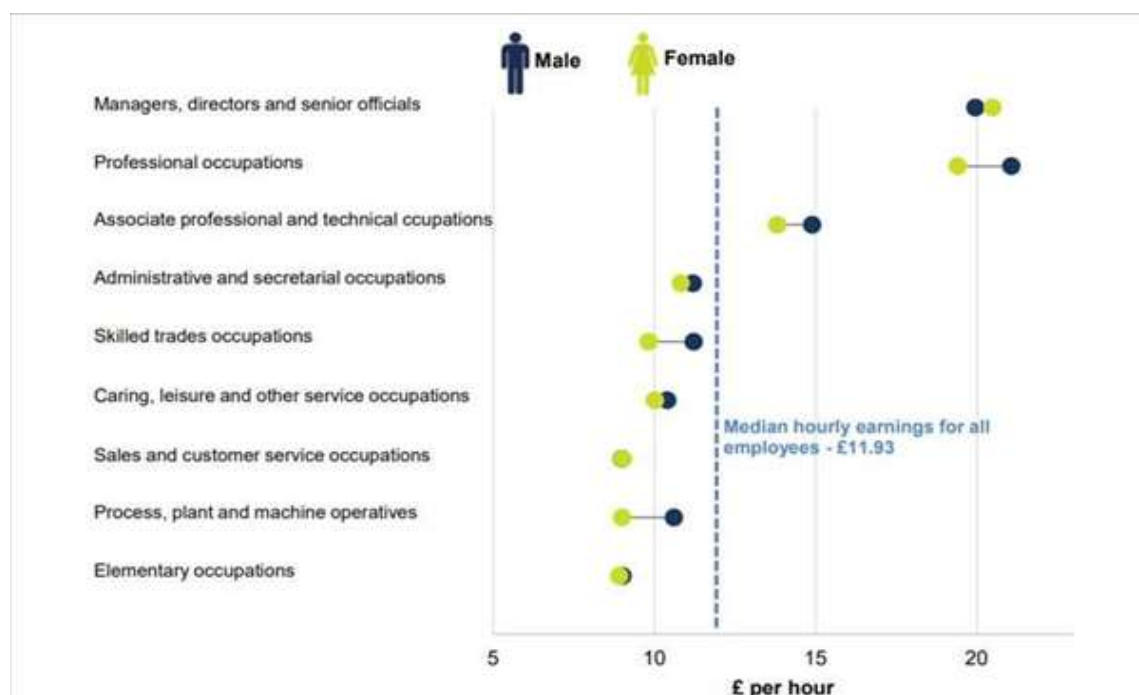
Source: NISRA: NI-ASHE-BULLETIN 2020-3 Gender Pay Gap

Figure 14: Median weekly paid hours worked by working pattern and gender, NI, April 2020



Source: NISRA: NI-ASHE-BULLETIN 2020-3 Gender Pay Gap

Figure 15: Median gross hourly earnings excluding overtime for all employees in NI by occupation and gender, April 2020



Source: NISRA: NI-ASHE-BULLETIN 2020-3 Gender Pay Gap

### 1.2.4 Gender Pay Gap Reporting Legislation

The European Trade Union Confederation estimates that if women were paid the same as men, the poverty rate among working women could be halved and 2.5 million children would come out of poverty.

The WPG is extremely concerned that Gender Pay Gap reporting legislation and associated measures, which were promised in the Employment Act (Northern Ireland) 2016, are still to be delivered and implemented; despite a commitment to introduce regulations, there is still no clear timetable some five years after the introduction.

The WPG would urge the swift introduction of reporting regulations and would further recommend that measures outlined in the original schedule are included. These include financial penalties for employers who flout the law as well as a requirement to report on pay gaps on the grounds of disability and race.

GPG reporting legislation is important but will not, in itself, solve pay inequality. This is why it is vital that the legislation is accompanied by a comprehensive strategy and resourced action plan. The WPG notes the intention to include the

GPG strategy and action plan as part of the Gender Equality Strategy; whilst it is accepted that this is a way to avoid further delays, the inclusion of a strategy to address pay inequality within an overall GE strategy must not mean that a strategy and action plan to tackle gender pay inequality is watered down or lost within a larger piece of work. The GPG strategy must be comprehensive and must include a focused and resourced action plan, it should also consider the issue of gender pay transparency.

This is particularly important in the context of Brexit which will mean that important European Directives may not apply in Northern Ireland. Despite the commitment to no diminution of rights, safeguards, and equality of opportunity in Northern Ireland and the 'keeping pace' commitments in article 2 of the Northern Ireland Protocol, we are already seeing divergence in the equality infrastructure. Keeping pace applies to a narrow range of existing Directives and will not apply to important new Directives such as the Work Life Balance Directive and the upcoming Gender Pay Transparency Directive<sup>65</sup>.

Whilst the draft Gender Pay Transparency Directive falls short of key demands called for by trade unions, it still promises progressive steps towards pay equality; it is therefore extremely worrying that this Directive will not apply to Northern Ireland and more important than ever that the Northern Ireland Assembly exercise its devolved powers and legislate to ensure that steps are taken to eradicate gender pay inequality.

### Recommendations for Gender Pay Gap Reporting legislation:

- Include financial penalties for employers who flout the law by failing to report.
- Require employers to provide a narrative as to how the gender pay gap has arisen and an action plan as to how they are going to tackle it.
- Require reporting for all employers of 10 or more employees.
- Require reporting on pay gaps on grounds of disability and race.
- Ban pay secrecy clauses in contracts so that workers can discuss pay.
- Require information for job evaluation for the purpose of establishing equal pay for equal work.
- Make all employers produce pay information (audits) and annual action plans on pay equality.
- Support unions to negotiate with employers to tackle the pay gap.
- Require job advertisements to include the pay scale.

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<sup>65</sup> UK Government Guidance Protocol on Ireland/Northern Ireland: Article 2: <https://bit.ly/3zSA9QQ>

- Prevent employers hiding behind privacy, data protection or administrative burden to avoid pay transparency.
- Ensure transparency for the whole pay package including benefits, bonuses, pensions, allowances etc.
- Impose sanctions on employers who do not take action.

### 1.2.5 The Motherhood Penalty

Pay inequalities are further amplified when women have dependent children. An NIC ICTU policy document *Childcare in Northern Ireland: Care, Cost and Gender Equality*<sup>66</sup> found that women with dependent children are overrepresented in part-time employment, compared with men with or without dependent children, and women with no dependent children. They are also more likely to be in temporary employment and much less likely to be self-employed than men with dependent children.

Men with no children are more likely than women to be in a full-time permanent job and having children greatly amplifies the difference in likelihood of being in a permanent, full-time job. Having one or more children reduces a woman's likelihood of being in a permanent, full-time job by almost one-third, with only 45% of women with one or more children working in a permanent, full-time job.

The decrease in the proportion of women with children employed in permanent, full-time employment appears to be driven almost entirely by the much higher likelihood of women with children working part-time. Fewer than 1 in 3 women with no dependent children work part-time. This compares to almost 1 in 2 women with dependent children who are employed on a part-time basis.

Having dependent children reduces average weekly working hours of both men and women. There is, however, a much greater reduction in average working hours for women than there is for men. Women with dependent children work 5 hours less per week on average compared to women with no dependent children, whilst men with dependent children work 1 hour less on average compared with men with no dependent children. Women with no dependent children work around 8 fewer hours per week, on average, compared to men with no dependent children. Women with dependent children work an average of 11 hours less per week than men with dependent children.

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<sup>66</sup> Ibid, (n28).



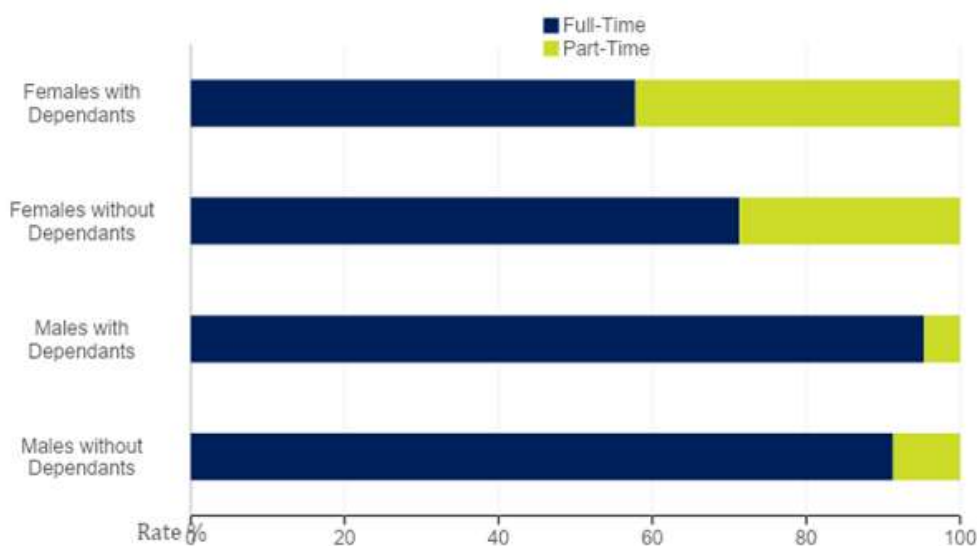
The latest Women in Northern Ireland report prepared by NISRA also details the differences in employment patterns experienced by men and women with dependent children.

Key findings include:

- 76% of women with dependent children were economically active, compared with 92% of men with dependent children.
- The economic activity rate for women with preschool age children (74%) was substantially lower than for men with preschool age children (93%).

The following graph also shows the differential impact having dependent children has on the working patterns of men and women, with women much more likely than men to be working part-time schedules, regardless of whether they have dependent children.<sup>67</sup>

Figure 16: Working patterns of men and women (16-64) with and without dependent children, October-December 2019.



Source: NISRA Women in Northern Ireland Report 2020

<sup>67</sup> Ibid, (n28).

## 1.2.6 Family Leave frameworks

The Women's Policy Group has long argued that tinkering around the edges of policy will fail to solve persistent gender inequalities. Instead, what is needed is a comprehensive strategy to systematically tackle these issues, including a women's employment strategy, which considers all of the issues that hold women back in work and in society. Part of this consideration must focus on the system of support for working parents and carers. The COVID-19 pandemic has thrown into stark relief the totally inadequate childcare support system in Northern Ireland, a system which sees childcare as an individual responsibility rather than a public good.

The pandemic has also shown the urgent requirement to overhaul the legislative framework for flexible working and family leaves including paternity and parental leave.

However, encouraging fathers/partners take up parental leave and having better access to flexible working is just one side of the story. The importance of factors that retain women's attachment to the labour market and give them access to quality jobs and progression once they become mothers must also be recognised, as maintaining employment opportunities for women through childbirth and early motherhood will increase the demand for more shared parenting within the home. Well-paid maternity leave is one of those factors.

Women are more likely to return to work with the same employer where there is a good period of well-paid leave, as evidenced by companies like Ford and BT who report returner rates of well over 90% as a result of their occupational maternity pay policies. A DWP study of maternity rights found that mothers who received occupational maternity pay were significantly more likely to return to their pre-birth employer than those who received no maternity pay (93% versus 63%).<sup>68</sup>

If women are able to take maternity leave and resume their previous jobs when they feel ready, this will be better for gender equality at work and will increase pressure for greater equality within the home. This scenario is much better than the alternative, i.e. women returning to work for financial reasons before they are truly ready to do so and then potentially dropping out of the labour market altogether or switching to a lower level job with less responsibility. It is therefore important for the government to recognise how well-paid maternity leave, paid at an earnings-related rate, has a role to play in creating demand for more shared parenting and caring, including promoting gender equality.

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<sup>68</sup> Ivana La Valle, Elizabeth Clery & Mari Carmen Huerta, 'Maternity rights and mothers' employer decisions, (DWP 2008)

### Recommendation:

- Maternity pay should be paid at earnings related rate and both maternity leave and earnings-related pay should be available with eligibility restrictions removed.

## 1.2.7 Flexible Working

Whilst anyone can request flexible working, the law only grants the statutory right to request flexible work patterns to some employees. To be eligible, you must be employed by the same employer for 26 consecutive weeks. Clearly, this disadvantages vulnerable and low paid workers, who often work in low or zero hour contracts and who may be in most need of flexibility in work patterns. Evidence also indicates that many flexible leave requests are turned down by employers, despite the positive duty placed on them to seriously consider requests.

Flexible working rights should be available to all workers, regardless of employment status and that the rights should be available from day one. However, we also believe that the right needs to be strengthened – merely having a right to request flexible working does not go far enough. Polling from the TUC indicates that as many as one in three requests for flexible working are turned down by employers<sup>69</sup>[1]. We recommend that there should be a duty on employers to publish flexible working options in job adverts and give workers the right to take up the advertised flexibility from day one. If employers feel that a role cannot accommodate any form of flexibility, they should be required to transparently set out the exceptional circumstances that justify this. These measures would also go some way to addressing potential discrimination against applicants, many of whom are women, who have to ask about flexible working options at interview. Introducing a duty on employers to make flexible working the default would mean that applicants would be able to take this into consideration without fear of being singled out.

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<sup>69</sup> See more: TUC 'One in Three Flexible Working Requests Turned Down' (2020): <https://bit.ly/3xJzP4N>

## Recommendations:

- A change in the law so that employers must publish flexible working options in job adverts or justify why the job can't be done flexibly.
- A right for successful candidates to take up the advertised flexibility from day one.
- All workers to get the right to request flexible working at any stage in their employment.
- Introduce a formal "right to return" to the original working pattern at the end of an agreed period where the flexible working arrangements are limited in duration, and a right to request to return to the original pattern earlier in the event of a change of circumstances.
- An appeal process should be introduced that allows individuals and their trade union to scrutinise and challenge the reasons given for rejecting a request.

### 1.2.8 Parental Leave

There is also an eligibility requirement with parental leave, which again disadvantages vulnerable workers; the WPG recommends that parental leave should be available to all workers, regardless of their employment status and should be available as a day one right.

The other hugely significant issue is the fact that parental leave is unpaid. The evidence strongly shows that uptake of parental leave among fathers and second parents is shown to be much higher when the leave is paid at a rate which families can afford to live on, and without financial penalty, as is recommended by the Irish Congress of Trade Unions and endorsed by the WPG. Furthermore, parental leave should be an individual and non-transferable right – that is, it cannot be transferred to the baby's mother.

Unpaid parental leave entitlement has a number of serious consequences – clearly many families will be unable to take the financial hit of taking unpaid leave so may therefore be forced to use a combination of paid holidays (which should instead be used as crucial down time) or to rely on family members where available. Sometimes a parent may even be forced to leave work entirely. Being either ineligible for parental leave or unable to take it because of financial constraints impacts disproportionately on single parents, the majority of whom are women. It also serves to reinforce gender stereotypes. As women are still more likely to earn less than a male partner, women will be more likely to take unpaid parental leave as families try to preserve a higher income. If a portion of leave isn't

specifically designated for fathers/second parents and remunerated at a rate that they and their families can afford to live on, few men will take it, placing the responsibility for caregiving overwhelmingly on women and thereby reinforcing inequalities at home and at work.

Shared Parental Leave (SPL) was introduced to encourage more fathers to take leave to care for their children. Whilst this may have benefitted some families, in the absence of other measures, it has not resulted in a large uptake of fathers taking leave to care for their children. The practical outworkings of the scheme are complicated and inflexible, and many couples are not eligible. Added to this, for many families, availing of shared parental leave means an income cut as men are still the main breadwinner in many households.

The WPG has attempted to access data to assess the numbers of families who have availed of SPL in Northern Ireland, unfortunately it has not been possible to get this information. However, evidence from GB indicates that the percentage of families using SPL is tiny. Given that there is no reason to assume that the position will be any different in Northern Ireland, the WPG concludes that Shared parental Leave is a failed policy and needs to be urgently overhauled.

### Recommendations:

- Parental leave should be available for all workers and should be a day one right.
- A period of parental leave should be paid at 90% of AWE and the remainder at least the Real Living Wage (RLW).
- Parental leave should be non-transferable.

## 1.2.9 Paternity Leave

Not all workers are eligible to take paternity leave and the low rate of pay means that many fathers and new parents are unable to take this much needed time off to be with their partner and new baby. Two weeks is also not enough time at such an important juncture for all of the family.

The WPG recommends a period of mandatory paternity leave for fathers and second parents, who will only be able to take this period of leave if it is remunerated fairly. Remuneration should be in line with Statutory Maternity Pay (SMP) and paid at 90% of average weekly earnings (AWE), without a cap, to ensure families do not incur a major financial penalty and to meet the objective of increasing paternal involvement in the early years.

This mandatory period of leave should be considered as separate and distinct to a parent's right to leave. The purpose of this mandatory leave would be to provide support to their partner and for the father/partner to bond with and care for their baby.

Whilst we have recommended rates of pay of 90% of AWE, we would suggest that this should be the minimum and should be with a clear objective of progressing to a system of maternity, paternity and parental leave which does not impose a pay penalty.

### Recommendations:

- Mandatory six-week paternity leave entitlement.
- Remunerated at 90% of AWE, without cap.
- Apply to all workers as a day one right, regardless of employment status.
- Data should be gathered and published on an annual basis. The data should include:
  - The number of flexible leave requests made, the number granted, the number refused and the reason for the refusal,
  - The number of shared parental leave requests made and granted or refused.

## 1.2.10 Sex Discrimination

Sex discrimination in the workplace continues to be a shockingly common occurrence. The Equality Commission for Northern Ireland estimates that around 25% of the queries they get to their legal helpline relate to potential sex discrimination at work. Of these, they estimate that 21.5% are to do with pregnancy or maternity<sup>70</sup>. The issues raised are not confined to any particular sector and it is happening regardless of the level, type or grade of job held by women.

A survey conducted by the Irish Congress of Trade Unions in 2019 found shockingly high levels of sexual harassment at work. ICTU surveyed more than 600 trade union members in Northern Ireland with experience of sexual harassment and sexual assault in the workplace and in line with international evidence, found that women were more likely to be victims of sexual harassment and men perpetrators. The survey also found that 75% of workers experiencing

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<sup>70</sup> CNI (2019), 'Pregnancy and Maternity Discrimination Remains an Issue for Working Mothers', Equality Commission NI, (available online): <https://bit.ly/3A1f6vw>

sexual harassment at work did not report the incident to their employer while of those who did report, 62% felt that it was not dealt with satisfactorily and in some instances reported that they had been treated less favourably as a result of reporting sexual harassment<sup>71</sup>.

In June 2019, at the Centenary Conference of the International Labour Organization (ILO)<sup>72</sup>, the Violence and Harassment Convention (No. 190) and its accompanying Recommendation (No. 206) were adopted. The global community has made it clear that violence and harassment in the world of work will not be tolerated and must end.

These landmark instruments were developed by the key world of work actors (representatives of governments, employers and workers), and set out a common framework to prevent and address violence and harassment, based on an inclusive, integrated and gender-responsive approach. The Convention and the Recommendation also refer to domestic violence and its impact in the world of work.

The Preamble to the Convention notes that “domestic violence can affect employment, productivity and health and safety, and that governments, employers’ and workers’ organizations and labour market institutions can help, as part of other measures, to recognize, respond to and address the impacts of domestic violence”. As such, the Convention requires Members to “take appropriate measures to ... recognize the effects of domestic violence and, so far as is reasonably practicable, mitigate its impact in the world of work” (Art. 10(f)), and the Recommendation provides further guidance.

The inclusion of provisions regarding domestic violence in Convention No. 190 and Recommendation No. 206 reflects a fundamental change: historically, domestic violence was relegated as a “private” issue, with no connection to work, and it is now being acknowledged as having real consequences for workers, enterprises and the society at large.

The new instruments finally recognise the negative spillover effects that domestic violence can have on the world of work and the positive contribution that work can make towards improving the well-being of victims of domestic violence.

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<sup>71</sup> ICTU (2019), ‘NIC-ICTU survey reveals shockingly high levels of under-reporting of sexual harassment at work’, ICTU, (available online): <https://bit.ly/2UuqUGi>

<sup>72</sup> ILO, ‘Eliminating Violence and Harassment in the World of Work’, (available online): <https://bit.ly/3d8JsSZ>



## 1.2.11 Trade Union Membership and Collective Bargaining

Recent research from the Nevin Economic Research Institute shows that 53% of employees in Northern Ireland have a trade union that bargains for pay in their workplace; 58% of women are employed in covered workplaces compared to only 42% of men employees, that women employees are more likely to be in covered workplaces is largely driven by the much larger proportion of women workers employed in the public sector<sup>73</sup>.

NERI also finds that employees covered by collective agreements are likely to earn up to 13% more than similar workers who negotiate pay individually. The persistence of this union premium shows that despite lower trade union density, collective bargaining still delivers for workers in Northern Ireland.

For employers, there is also ample evidence of a connection between collective bargaining and higher productivity. Being a member of a trade union which bargains collectively on pay and terms and conditions brings a premium not only for the employee but also for the employer and is particularly important for women.

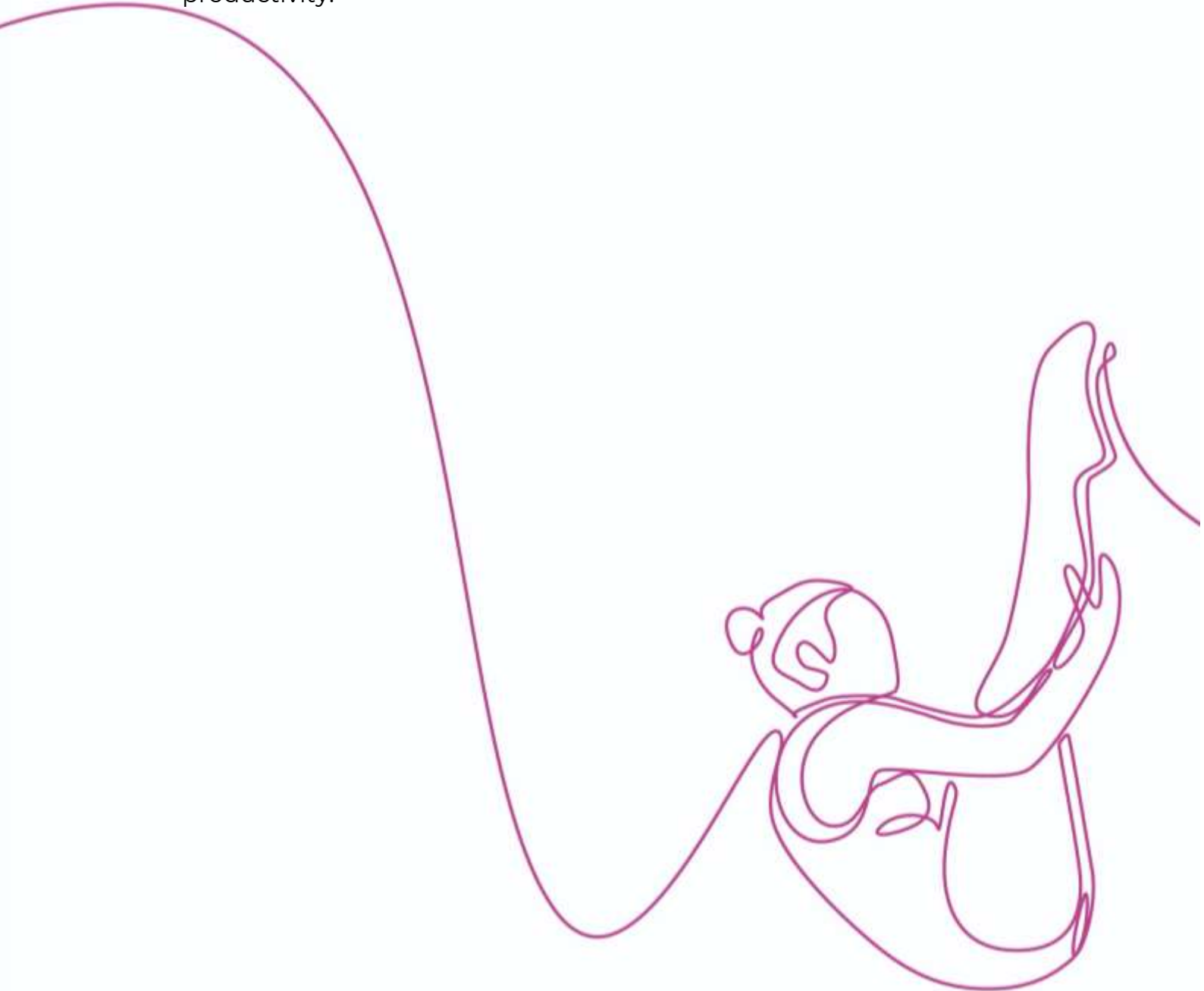
### Recommendations:

- Develop a women's employment strategy which identifies the labour market issues facing women and an associated cross departmental action plan to tackle these.
- Introduce Gender Pay Gap Reporting legislation which is fit for purpose for Northern Ireland. The legislation should recognise that SMEs and micro businesses form the majority of employers in Northern Ireland and the reporting threshold should be set to reflect this. Furthermore, employers should be required to produce a narrative detailing why a gender pay gap exists and an action plan to lay out how it will be tackled. Any agency tasked with enforcement must be properly resourced. Any legislation must be accompanied by an associated strategy, action plan and accountability measures which should be properly resourced.
- Introduce gender transparency measures to tackle inequality in men's and women's pay and pensions.
- Review flexible working legislation and make this available as a day one right for all workers. Place positive duties on employers which make flexible working the default position.

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<sup>73</sup> NERI 'The Impact of Collective Bargaining on Pay in Northern Ireland' (May, 2020): <https://bit.ly/2SYeKoD>

- Review maternity leave and pay, remove eligibility requirements and ensure that maternity pay is paid at earnings related rates for all.
- Make parental leave available as a day one right, introduce paid parental leave.
- Introduce 6 weeks of paternity leave, remunerated at least to 90% of average weekly earnings
- Introduce a duty on employers to proactively tackle sexual harassment at work to include mandatory training for all employees including managers and HR personnel.
- The Northern Ireland Executive should recognise and promote the importance of collective bargaining and trade unions as a driver for workplace equality, better pay and terms and conditions as well as higher productivity.



### 1.3 Gender Segregated Labour Markets and Care Work



“Due to the nature of my work my workload increased hugely during the pandemic and trying to juggle the increased workload with home-schooling and caring responsibilities meant my own health and wellbeing has suffered greatly. I've found it extremely difficult to make time for myself and when I do find the time, I'm usually too exhausted to do anything to help my wellbeing. My work-life balance has been difficult to maintain which resulted in me reducing my hours in work for a short time. Thankfully though, through the furlough scheme, I didn't lose out financially.”

“Registered carer with SE health trust, has been very isolating for both myself and my disabled son. I calculated that I have been visiting the same 5 places since March 2020.”

“I became the main breadwinner as my husband is self-employed and his work was deeply impacted but because I work and because his business was newly established, we weren't entitled to any financial assistance.”

“My son didn't cope very well during the pandemic and we live 100 miles away from family so I left my very well paid role to take another with more work/life balance and flexibility”

“COVID highlighted the ridiculous situation our labour market produces; we go to work to pay other people to look after our children. This is ridiculous. We should have a much better system and much more opportunity to have stay-at-home parents and to enjoy flexible working so that we can have and ENJOY our families without losing out.”

“Both my husband and I had to work opposite shifts, effected work life balance.”

“Feeling alone as my partner worked throughout and not being able to see family or friends was very difficult. I felt my life was contained to looking after my son, cooking and cleaning.”

“I unfortunately cannot rely on family childcare due to also caring for my disabled mum who would be at a higher risk of death if she is infected by covid-19 due to my job with the NHSCT”

“My daughter relied on me much more heavily for childcare of her children.”



“My disabled adult son resides with me. Registered as his full-time carer with SE health trust. I lost my daughter to cancer in 2017 from which I will never recover.

However, I remember the years of struggle being a single parent, working, studying with no family support and in the preceding 15 years I did all I could to help young women access benefits & housing in a very deprived area. Resigned due to burn out & no support!”

- Testimonies from WPG Primary Research



The World Economic Forum states that gender segregated labour markets and a lack of gender parity has a negative fundamental bearing on whether or not economies and societies thrive<sup>74</sup>. Gender segregated labour markets are an issue globally, and research shows that areas with higher levels of gender segregated labour markets not only lower innovation levels in professions which lack gender diversity, but also that this professional gender divergence has a compounding effect of gender pay gaps<sup>75</sup>.

Gender segregated labour markets do not just harm women, they harm society as a whole. Northern Ireland has become an increasingly attractive place for investment in technology thanks to a combination of factors including skills availability, excellent infrastructure, cost-effectiveness and a supportive business environment<sup>76</sup>. As Northern Ireland strives towards greater investment in technology ahead of any “fourth industrial revolution”, the ramifications of not urgently tackling occupational gender segregation are likely to stifle growth. This is of particular importance given efforts to create greater innovation, skills and productivity in the Northern Ireland economy as we recover from COVID-19.

A Northern Ireland Assembly Review of Gender Issues released in 2019 found that there are significant levels of workforce horizontal segregation (occupational segregation) and vertical segregation (with women vastly overrepresented in lower-paid and less senior positions). Further, analysis of working patterns (full-time vs. part-time) also shows vast levels of segregation based on gender. These high levels of gender segregation in our labour markets are not explicable by the traditional notion that certain jobs are better suited to men (for example technology, constructing, financial services and manufacturing) or women (childcare, administration, retail and hospitality), but due to long-standing policy failures surrounding family leave frameworks that fail all workers and disproportionately impact women.

As analysed in sections 1.1 and 1.2, the global COVID-19 pandemic vastly disrupted labour markets and in moving towards recovery, it is necessary to understand how gender segregated labour markets and caring responsibilities have amplified these issues. This is crucial if recovery is to be evenly felt, particularly as data shows that the only sectors to have grown throughout 2020 have been ones with majority men workforces and women with dependents have been the hardest hit.

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<sup>74</sup> World Economic Forum (2020), ‘Mind the 100 Year Gap’, Global Gender Gap Report 2020, <https://bit.ly/3d4itl2>

<sup>75</sup> Ibid.

<sup>76</sup> See Invest NI, ‘Northern Ireland has proven technology experience, capacity and capability (2020): <https://bit.ly/3zKsaFr>

In analysing the types of labour segregation and why it exists, policy makers can develop robust recovery policies to address barriers to employment, increasing levels of underemployment, increasing levels of economic inactivity and the unequal distribution of care work as we recover from COVID-19. This chapter will follow the analyses of the economic impact of COVID-19, women's employment and gender pay gaps, and try to address some of the additional factors upholding gender segregated labour markets.

### 1.3.1 Industrial and Occupational Segregation

Substantive gender segregation remains in the labour market with men continuing to dominate in traditionally male-dominated sectors such as manufacturing and construction, and women continuing to dominate in public administration, education and health. The same is true in terms of occupational segregation – both men and women continue to dominate in occupations that have traditionally been associated with them. When the income of men and women across occupations ranging from the lowest hourly paid to the highest hourly paid is examined, it is apparent that women dominate in the low paid occupations. What is more, across the vast majority of occupations there remains a substantive gender pay gap, with women continuing to earn less pay per hour than men (as highlighted in section 1.2).

According to the Equality Commission for Northern Ireland, lone parents, 91% of whom are women, also experience occupational segregation in employment, with lone parents with dependent children mostly employed in 'Personal Service' and 'Elementary' occupations. Care-giving has been identified as one factor influencing occupational segregation with women and lone parents choosing occupations allowing sufficient flexibility to balance the demands of care-giving. This may have a potential impact on the sustainability of employment, with women and lone parents having to consider pay and career progression with flexibility in employment<sup>77</sup>.

As women with caring responsibilities and women with children under the age of 12 have been shown to be the hardest hit by the pandemic globally, it is clear that action must be taken to understand and address the factors behind all forms of labour market segregation.

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<sup>77</sup> ECNI, 'Delivering Equality Employment - Key Inequalities in Employment', (2018): <https://bit.ly/3d6L5jY>

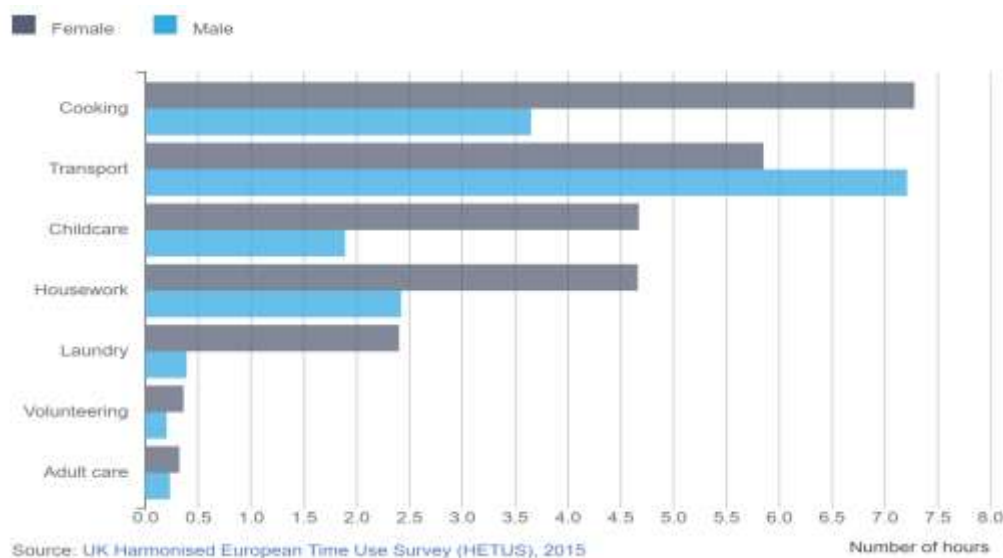
### 1.3.2 UK-Wide and Global Data on Segregation and Care Work

Gender-segregated labour markets are a reality across the world, and Northern Ireland is no exception to this. In the context of the ongoing global health crisis, increased attention has been drawn to the fact that women constitute over 70% of health and social care staff (79% in Northern Ireland), with a significant proportion from Black, Asian and Minority Ethnic backgrounds. For many this involves a double burden, as women also shoulder the lion's share of unpaid care work. UNICEF defines care work as:

'Supporting daily activities of individuals (such as cooking, cleaning, and providing daily essentials), as well as the health and wellbeing of others, including children and elderly'<sup>78</sup>.

Before the pandemic, globally women and girls carried out on average three times the amount of unpaid care and domestic work compared to men and boys<sup>79</sup>. Pre-covid disparities in unpaid care work between men and women in the UK can also be seen in figure 17 overleaf<sup>80</sup>.

Figure 17: Unpaid Care Work Differentials for Men and Women in the UK



<sup>78</sup> Zahrah Nesbitt-Ahmed and Ramya Subrahmanian, (April 2020), 'Caring in the time of COVID-19: Gender, unpaid care work and social protection', UNICEF: <https://uni.cf/2TRRUz8>.

<sup>79</sup> UN Women (2019), 'Families in a Changing World', Progress of the World's Women 2019-2020, p.15 <https://bit.ly/3xOTlg5>, p.15.

<sup>80</sup> The only exception where men's responsibilities are greater than women is transport, in which this data includes transport to work for the individual.



During the various lockdowns throughout 2020-2021, these responsibilities increased significantly as women faced increased responsibilities in relation to homeschooling, providing basic health care, childcare, shopping for vulnerable family members, ensuring dependents are abiding by new health and hygiene requirements and more. This puts women at increased risk of infection, as well as spreading infection to vulnerable family members. In addition to this, people over the age of 60 have the highest risk of infection, but they are also often the source of childcare to support many families and enable younger women to access work, education and training. As highlighted by UNICEF, the intergenerational impacts of the virus on long-term care arrangements, whereby children need to be separated from older family members, needs to be better understood<sup>81</sup>.

Further evidence from UNICEF highlights:

Emerging data indicates that among confirmed cases of COVID-19 men are consistently dying in higher numbers than women. But when it comes to the economic and social fallout of the pandemic, women and girls face much greater risks<sup>82</sup>.

A UN policy-brief on the impact of COVID-19 on women also states:

Women will be the hardest hit by this pandemic, but they will also be the backbone of recovery in communities. Every policy response that recognises this will be the more impactful for it<sup>83</sup>.

According to the World Economic Forum, strong correlations can be found between high levels of unpaid work per day and the inability to access economic participation and opportunity can be seen in figure 18 overleaf:

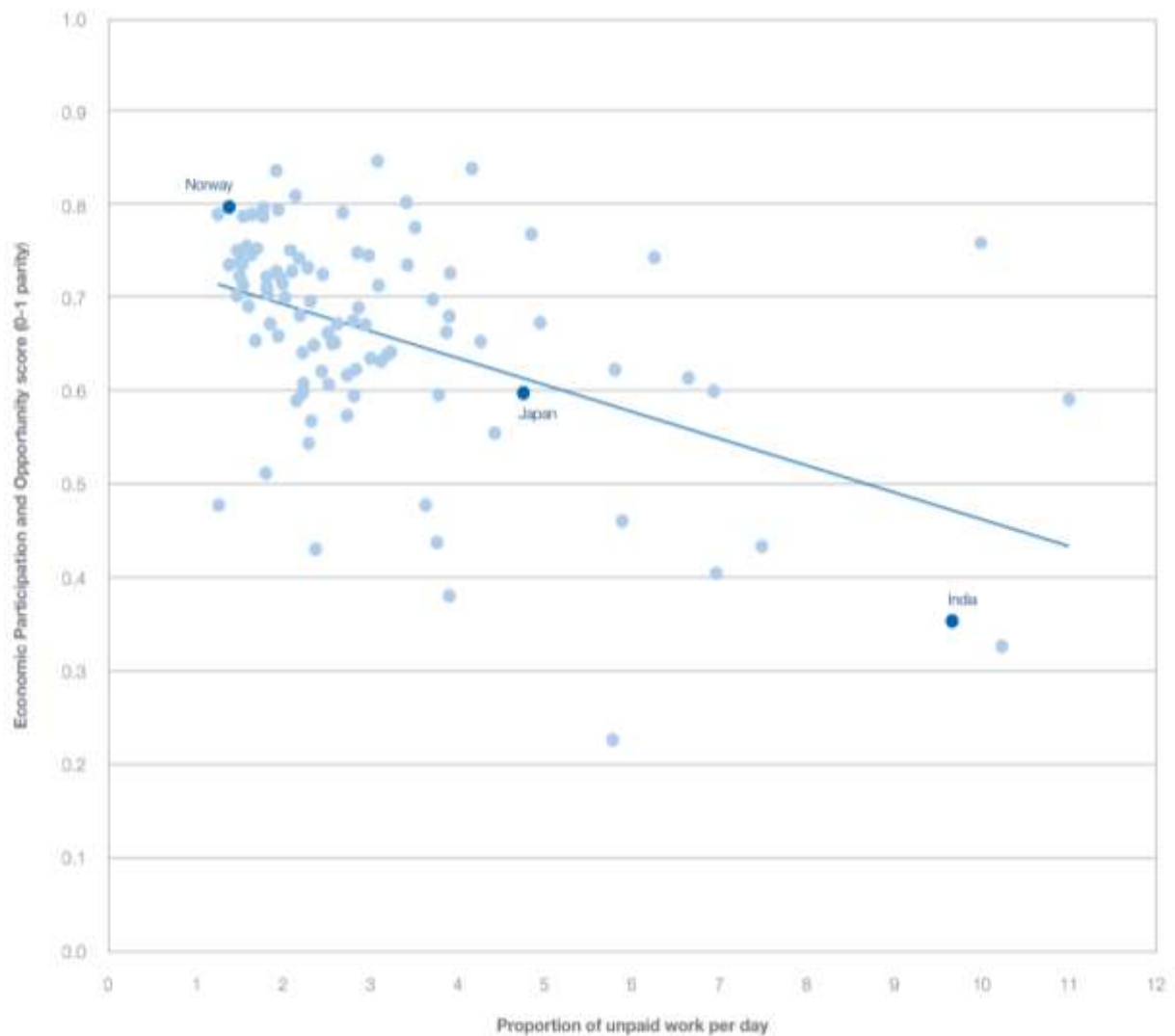
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<sup>81</sup> Ibid, (n19).

<sup>82</sup> Ibid.

<sup>83</sup> United Nations, (April 2020), 'Policy Brief: The Impact of COVID-19 on Women', UN Women, <https://bit.ly/3gXEHwv>.

Figure 18: WEF Correlation Data on Unpaid Work and Economic Opportunities

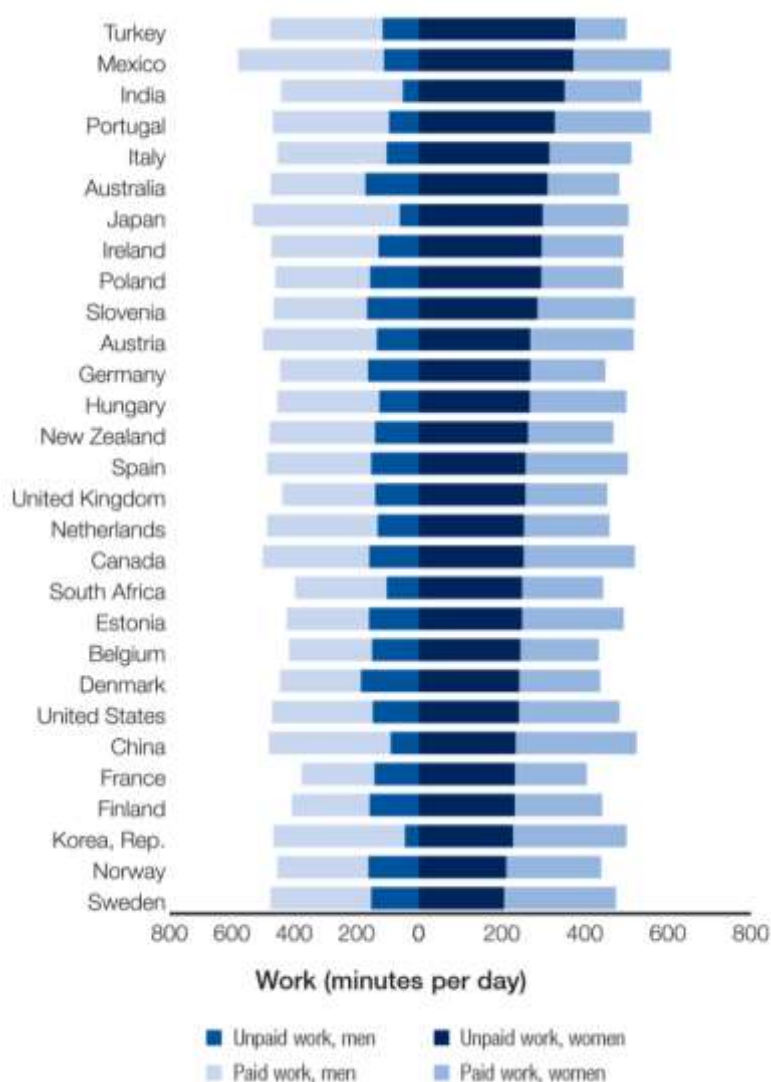


**Sources**

World Economic Forum and OECD, *Gender, Institutions and Development Database (GID-DB)*.

Further global comparisons, and where the UK and Ireland stand comparatively, of paid and unpaid work per day for men and women can be seen in figure 19 overleaf.

Figure 19: Paid and Unpaid Work (minutes per day) for men and women, by country:



Source: OECD Social Protection and Wellbeing Database<sup>84</sup>

Significantly, the findings from the World Economic Forum Gender Gap Report 2020 also highlight the strong correlation between a country's gender gap and its economic performance. When looking at the UK gender gap in figure 19 below, the gender gap is still extremely prevalent and likely to worsen due to the economic impact of COVID-19. The WEF argue that this economic evidence 'highlights the message to policy-makers that countries that want to remain competitive and inclusive will need to make gender equality a critical part of their

<sup>84</sup> Found in: Ceri Parker, (2017), 'It's official: women work nearly an hour longer than men every day', World Economic Forum, <https://bit.ly/3j6E9aw>

nation's human capital development'<sup>85</sup>. Across the UK, there is mass gender segregation across sectors. In particular, women are under-represented in high-paying jobs, STEM related work, and high-level decision-making roles. The under-representation of women in companies' board of directors can be seen in figure 21 overleaf and the gender segregation clusters across sectors can also be seen in figure 22 overleaf.

Figure 20: Global Gender Gap Index Ranking by Region 2020

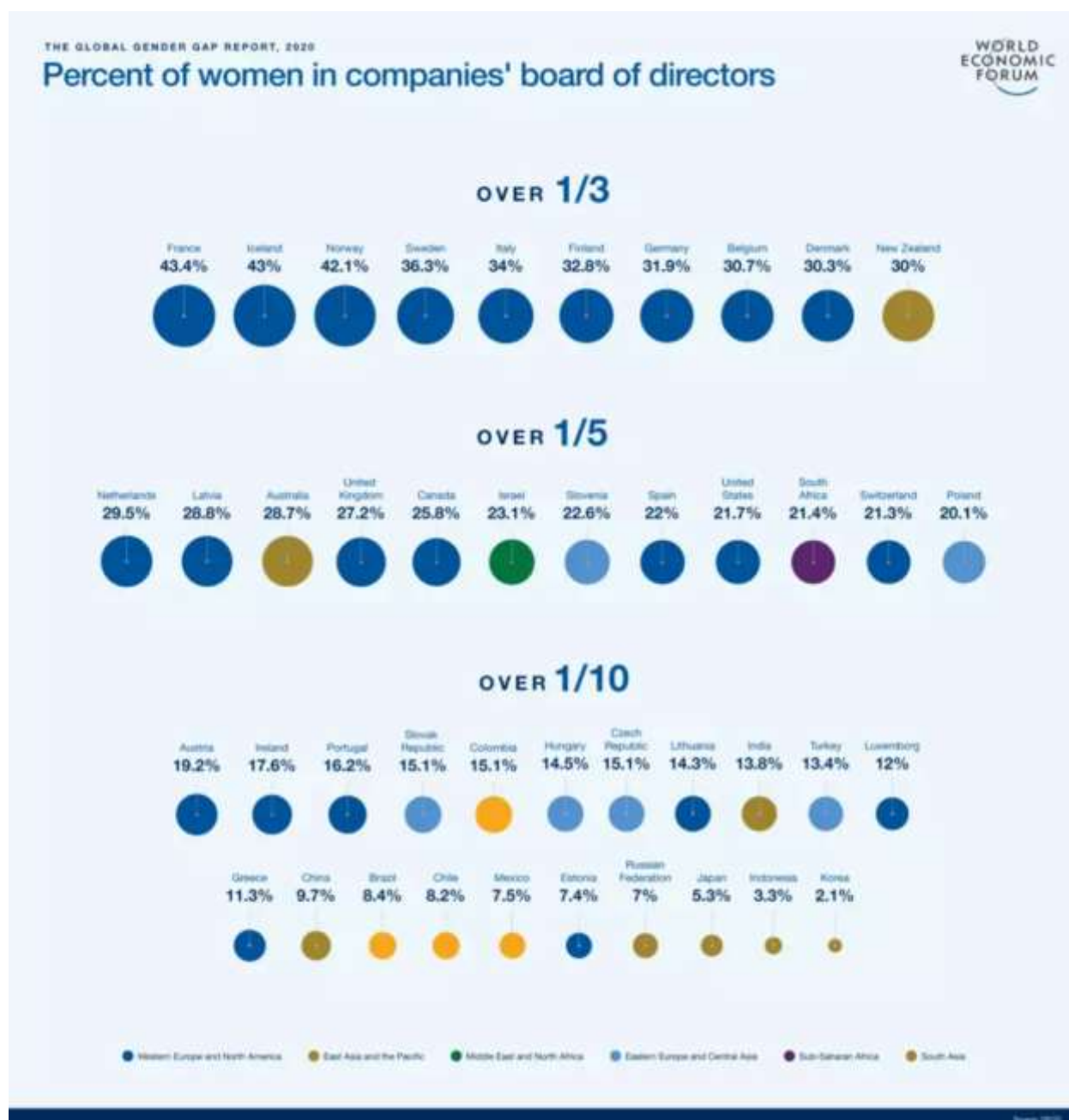
#### Western Europe and North America

Country	Rank		Score
	Regional	Global	
Iceland	1	1	0.877
Norway	2	2	0.842
Finland	3	3	0.832
Sweden	4	4	0.820
Ireland	5	7	0.798
Spain	6	8	0.795
Germany	7	10	0.787
Denmark	8	14	0.782
France	9	15	0.781
Switzerland	10	18	0.779
Canada	11	19	0.772
United Kingdom	12	21	0.767
Belgium	13	27	0.750
Austria	14	34	0.744
Portugal	15	35	0.744
Netherlands	16	38	0.736
Luxembourg	17	51	0.725
United States	18	53	0.724
Italy	19	76	0.707
Greece	20	84	0.701
Malta	21	90	0.693
Cyprus	22	91	0.692

Source: World Economic Forum - Gender Gap Report 2020

<sup>85</sup> Ibid (n28), p.33.

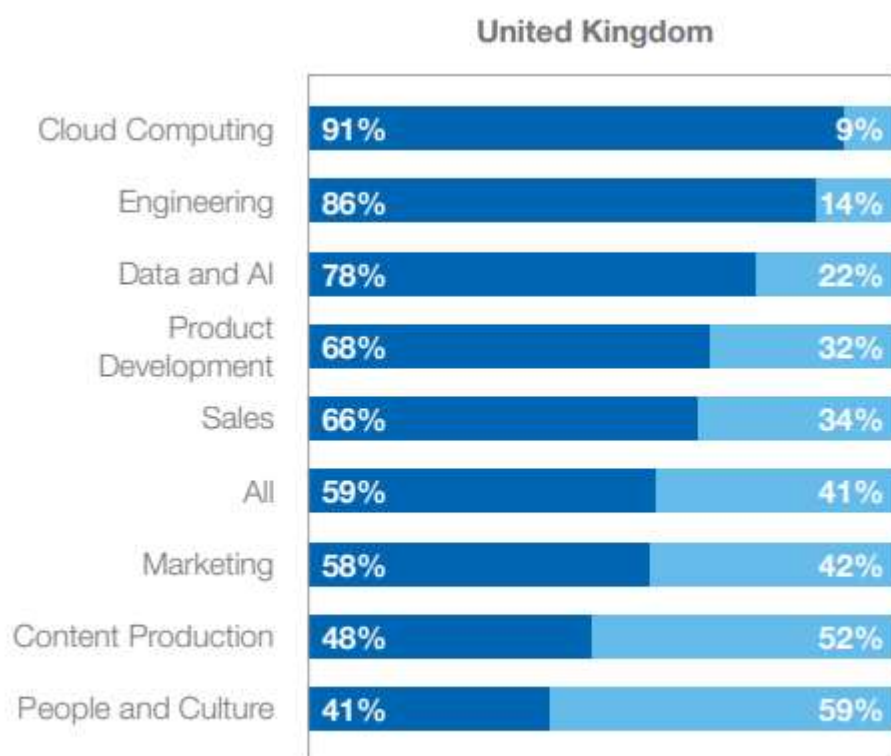
Figure 21: Representation of women in companies' board of directors globally



Source: OECD<sup>86</sup>

<sup>86</sup> Found in: World Economic Forum, (2019), 'Mind the 100 Year Gap: None of us will see gender parity in our lifetimes, and nor likely will many of our children', World Economic Forum Global Gender Gap Report 2020, <https://bit.ly/3d4itl2>

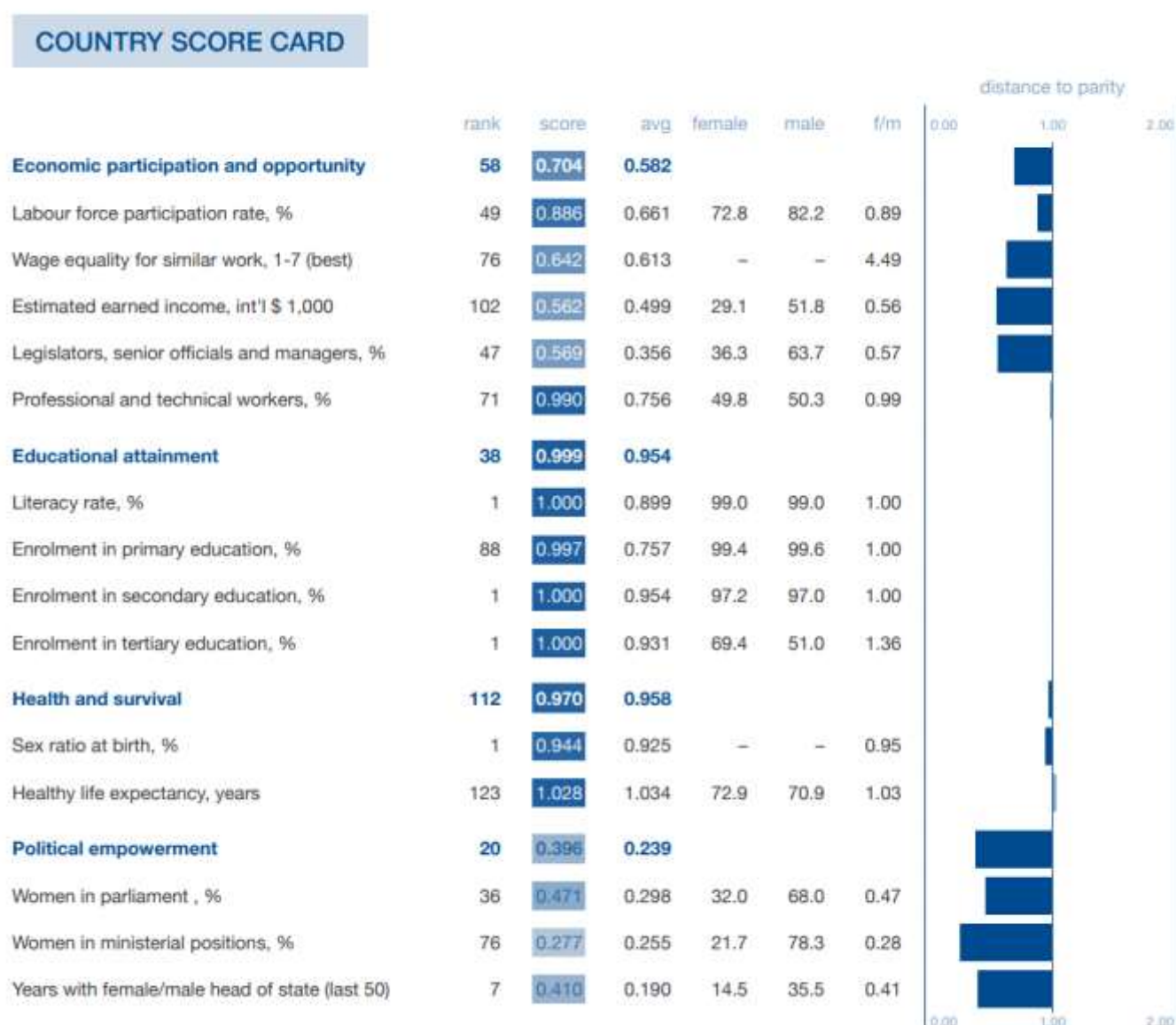
Figure 22: Share of Men and Women by Professional Cluster UK



Source: World Economic Forum World Gender Gap Report 2020

Figure 23 overleaf further highlights the gender gaps in the UK in 2020. Clearly, economic participation and opportunity and political empowerment are areas of concern, where urgent action is needed to reduce gender gaps and segregation.

Figure 23: World Economic Forum Gender Gap UK Score Card



Source: World Economic Forum Global Gender Gap Report April 2020, p.351<sup>87</sup>

<sup>87</sup> More information on how to analyse the UK score card can be found on p5.59-61 Of the World Economic Forum Global Gender Gap Report April 2020: <https://bit.ly/3d4itl2>



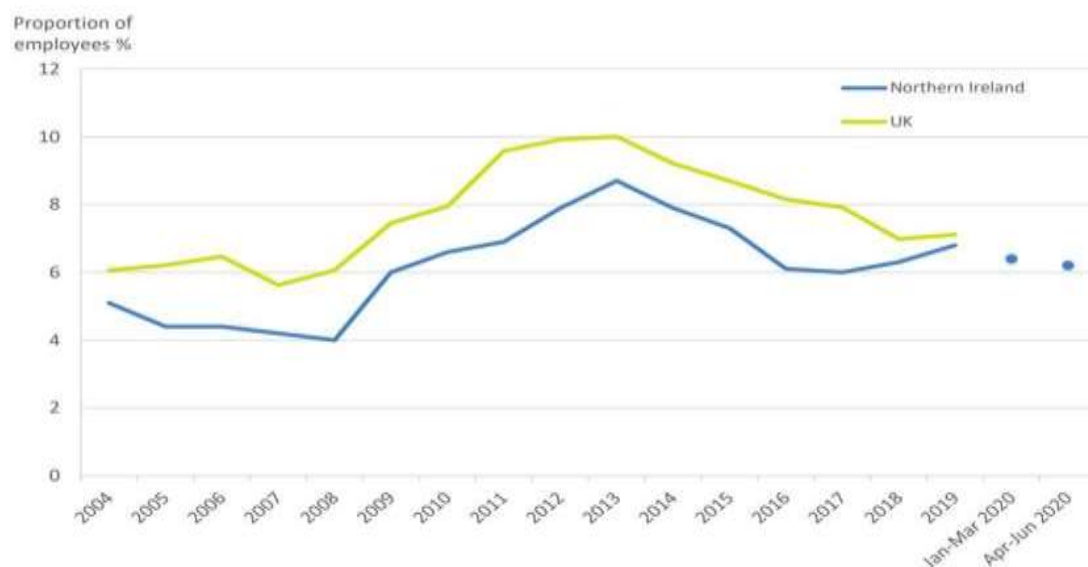
### 1.3.3 Northern Ireland Specific Data on Segregation and the Unequal Distribution of Care Work

#### 1.3.3.1 Overview

When analysing gender segregated labour markets and the factors behind this, the issues are just as prevalent in Northern Ireland as elsewhere; particularly the unequal distribution of care work and the impact this has on women's ability to access the paid labour market, the sectors they work in and the working patterns they undertake.

Sections 1.1 and 1.2 provided detailed analyses of employment rates, unemployment rates, gender pay gap comparisons, the motherhood gap and the impact of having dependents on working patterns. This section will examine the sectors and horizontal/vertical levels of labour market segregation in Northern Ireland and some reasoning behind this. In doing so, the WPG hopes that policymakers can have a greater understanding of the urgent need to address systemic policy failures that are dramatically impacting women's labour market positioning; particularly as these issues have significantly worsened due to COVID-19. In failing to recognise these issues, which fall outside of traditional measurements of levels of employment and unemployment, within the Northern Ireland economy, any economic recovery will be uneven and will further embed inequalities in our society.

Figure 24: Underemployed in Northern Ireland

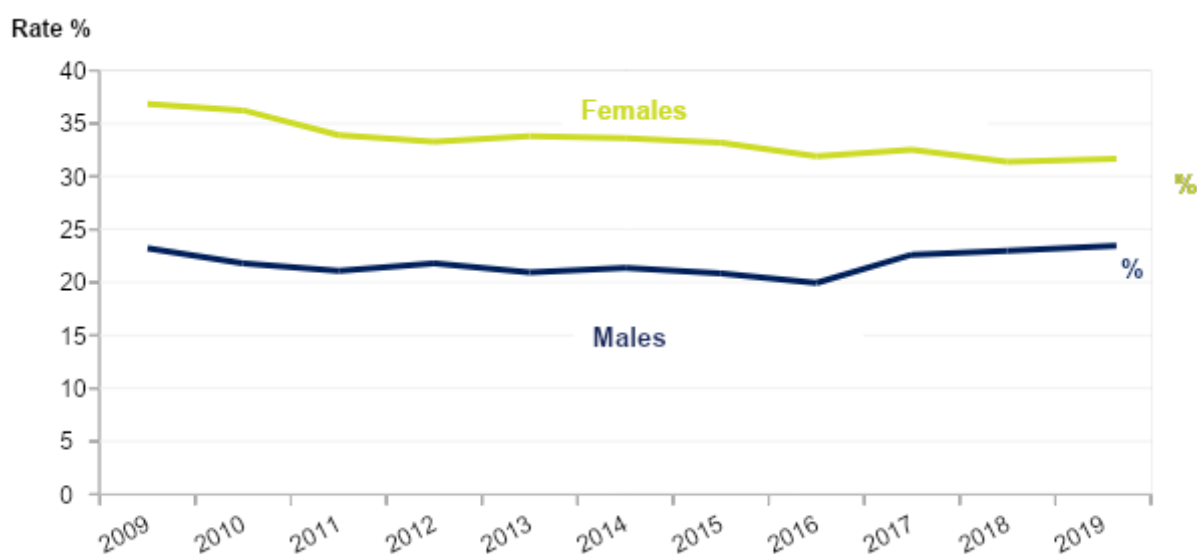


Source: NIRSA - Underemployment in Northern Ireland Topic Paper 2020

As stated in section 1.1, growing levels of underemployment are of great concern in Northern Ireland. Figure 24 shows levels of underemployment from 2004 until June 2020. This suggests that growing numbers of people are looking for additional work and hours but cannot find them. With the increased claimant count in Northern Ireland compared to pre-pandemic levels, this suggests that large numbers of people are either claiming because they cannot find work, or because their current earnings are low. Underemployment rates for women have consistently been higher than underemployment rates for men.

There are prevalent issues of women working in jobs and grades below their capability due to the lack of flexible working in the roles they are qualified to do, and this may be contributing to growing underemployment rates. Further, due to poor data collection in relation to trans communities, issues of trans discrimination in the workplace and underachievement due to truancy in education and how this impacts underemployment of gender minorities is not recognised or addressed.

**Figure 25: Northern Ireland Economic Inactivity Rate by Gender**



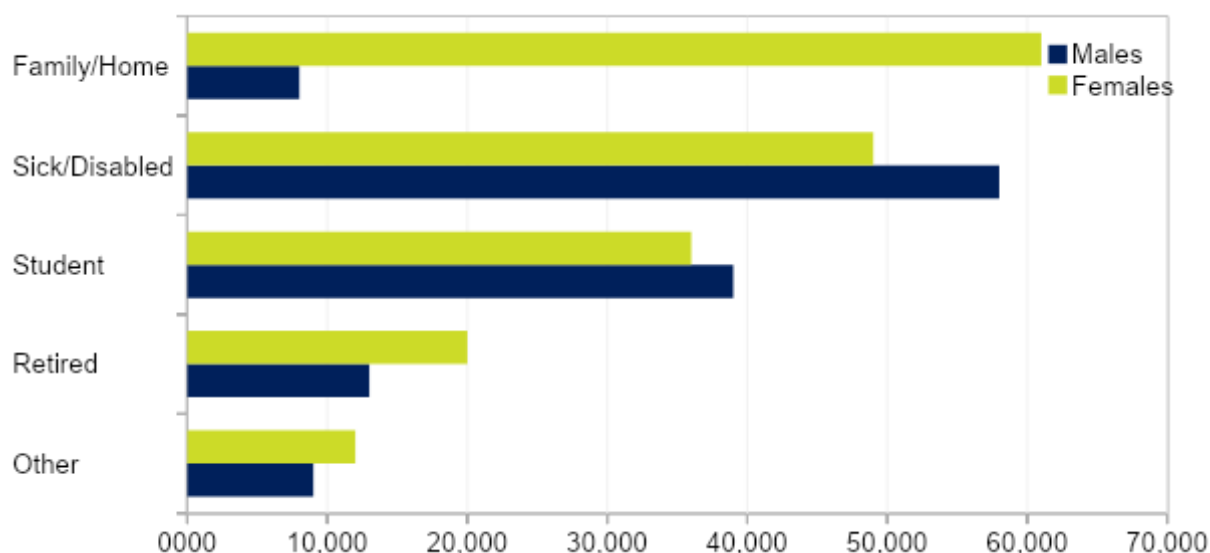
Source: NISRA - Women in Northern Ireland 2020

Another statistic not reflected in employment and unemployment rates is economic inactivity<sup>88</sup>.

<sup>88</sup> For a detailed analysis of economic inactivity in Northern Ireland, see Gender Equality Strategy Expert Advisory Panel Report (March 2021): <https://bit.ly/3zSb1JJ>

Roughly 30% of all women aged 16-64 are considered economically inactive compared to 22% of men (figure 25 above); 34% (61,000 people) of these women are considered inactive due to family and home commitments. Conversely, looking after family and the home is the least common reason for male economic inactivity (8,000 people or 6%). The difference in inactivity rates between men and women can be entirely attributed to the difference in the number looking after the family/home (figure 26 overleaf). In fact, excluding the numbers looking after the family/home from the inactivity totals would bring the women's inactivity rate below that of males (19.9% for women and 20.7% for men)<sup>89</sup>.

Figure 26: Reasons for Economic Inactivity by Gender (16-64):



Source: NISRA - Women in Northern Ireland 2020

Economic inactivity rates for women in the 25-34 age range with dependent children are much higher (20pps) than for those without dependent children, the age group most likely to have infants, toddlers, and pre-school aged children. Further, women with dependent children are most likely to be employed between the ages of 35-49 years, within which age band approximately four-fifths of women are in the labour market (working or looking for work), and are much more likely to work part-time hours than their male counterparts<sup>90</sup>. The economic activity rate for women with preschool age children (74%) was substantially lower than for men with preschool age children (93%). Over the past decade, women have consistently had lower economic activity than men regardless of age of

<sup>89</sup> Ibid (n28)

<sup>90</sup> Ibid (n28).

youngest dependent child. The group with the lowest economic activity is women with a youngest child that is of preschool age (73.3%).

What is clear, and what women have always known, is that engagement and experiences with the labour market are largely gendered in Northern Ireland. Women have vastly different levels of uptake in employment, types of employment undertaken and sectors they work in, due to their age and whether they have young children. The inherently gendered nature of ability to engage with the labour market is not reflected as clearly on men as it is on women. The vertical and horizontal segregation of women in Northern Ireland is extremely prevalent, with societal attitudes to gender and caring responsibilities embedding this further.

The WPG would like to challenge the perception of “economic inactivity”, as many women are disproportionately left out of the labour market due to home and family commitments, gendered stereotypes and systemic barriers to the labour market. This is a large proportion of women that could access the labour market if adequate childcare provisions and social support were in place. This has been estimated of being equivalent to 56% of GDP for the UK, with unpaid childcare alone being equivalent to 18% of GDP and long-term care being equivalent to 3% of GDP<sup>91</sup>. The economic inactivity of young women with dependents particularly, should be seen as a priority as this is the least likely reason for men to become economically inactive and is a strong indicator of the levels of gender inequality that exist in Northern Ireland.

Finally, the WPG would like to endorse the following statement from the Gender Equality Strategy Expert Advisory Panel Report 2021:

“The contributions of those in managing home and family commitments should not be considered to have no economic value; the COVID-19 pandemic exposed the essential nature of care work, and this should be valued. It is crucial to recognise the economic value of unpaid work and challenge terms such as “economic inactivity” as they perpetuate the undervaluing of women’s domestic work. This has been estimated of being equivalent to 56% of GDP for the UK, with unpaid childcare alone being equivalent to 18% of GDP and long-term care being equivalent to 3% of GDP...”<sup>92</sup>

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<sup>91</sup> ONS (2016). Changes in the value and division of unpaid care work in the UK: 2000 to 2015. <https://bit.ly/3iWAXv0>,

<sup>92</sup> ONS (2016). Changes in the value and division of unpaid care work in the UK: 2000 to 2015. <https://bit.ly/3iWAXv0>,

Finally, when looking at the causes of “economic inactivity”, it is crucial that an intersectional lens is applied to understand the reasons for this. For instance, there are also many issues with the treatment of and discrimination towards gender minorities in the workplace and in public-facing roles, coupled with broader issues in access to mental health support, housing and education, that needs to be examined to ensure that gender minorities are not forced into being what is considered “economically inactive”. In addition, inaccessibility and discrimination are huge barriers for disabled people accessing employment, and many become involuntarily “economically inactive” due to these societal barriers.<sup>93</sup>

### 1.3.3.2 Gender Segregated Labour Markets

According to NISRA, nearly half (48%) of employed women were employed within the “public administration, education and health” sector and a further fifth (19%) were employed within the “distribution, hotels and restaurants” sector. Employment across sectors was more evenly distributed for men, with “public administration, education and health” and “distribution, hotels and restaurants” being the two highest categories with 16% of employed men in each.

Further, in times of economic crises such as the COVID-19 pandemic, gender segregated labour markets contribute to economic suffering disproportionately impacting women. For instance, in Northern Ireland, 79% of all Health and Social Care staff are women, 79% of all part-time workers are women, the majority of low-paid and precarious workers in retail and hospitality workers are women and 70% of workers ineligible for Statutory Sick Pay are women<sup>94</sup>. Failing to address the long-term issues with the levels of women in low-paid, insecure and part-time work, leads to women bearing the economic brunt of crises such as the COVID-19 pandemic. Policy intervention is needed to address gender stereotypes and gender segregated labour markets in Northern Ireland, in a way that also recognises the diverse experiences of gender minorities.

The above trends are also evident in labour markets beyond those mentioned above as further evidence of gender segregation is present; with women underrepresented in higher-paying jobs in every sector in Northern Ireland. The below statistics from the NI Assembly Research and Information Service shine a

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<sup>93</sup> Gender Equality Strategy Expert Advisory Panel Report (March 2021): <https://bit.ly/3zSb1JJ>

<sup>94</sup> See sections 1.1 and 1.2 for more information of the disproportionate economic impact of COVID-19 on women.

light on the vast gender segregation and disparities across the public sector in January of 2020<sup>95</sup>:

- In Northern Ireland politics, women represent 37% of Lord Mayors, 26% of Local Councillors, 33% of MLAs and just 22% of MPs,
- In Public Appointments, women represent 28% of Chairs and 42% of all Public Appointments,
- Women represent 0% of Lord Chief Justice and Lord Justices of Appeal, just 25% of High Court Judges and 33% of County Court Judges,
- In the PSNI, zero women hold the position of Chief or Deputy Chief Constable and only 20% are Assistant Chief Constables. Women represent 30% of police officers and 58% of all PSNI staff,
- In the Civil Service, women represent 33% of Permanent Secretaries; 38% of Senior Civil Servants and 50% of the total NICS workforce,
- In the Education Sector, women represent 27% of University Chancellors or Pro/Deputy Vice Chancellors, 29% of FE College Principals and 60% of School Principals; despite 77% of all teachers being women,
- In the Health and Social Care Sector, women make up 79% of all staff but just 20% of Trust Chairs and 20% of Trust CEOs,
- In Local Government, women are 42% of all employees but just 27% of Council CEOs.

### 1.3.3.3 Unequal Distribution of Caring Responsibilities

Women are more likely than men to be forced out of the labour market by unpaid, domestic work or caring responsibilities and 69% of carers are women. Women in NI also have a 70% chance of providing care in their adult life, compared to 60% for men and by the age of 46, half of all women have been a carer (11 years before men)<sup>96</sup>. Research from Carers NI shows that Northern Ireland's carers save the economy £4.6 billion per year<sup>97</sup>; whilst unpaid carers across all the UK provide social care worth £57 billion per year<sup>98</sup>. What women have always known, and what has now been more unavoidable as the world tries to cope with the pandemic, is that care work, which is predominantly undertaken by women and

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<sup>95</sup> NI Assembly Research and Information Service, (January 2020), 'Who Runs Northern Ireland? A Summary of Statistics Relating to Gender and Power in 2020', (available online): <https://bit.ly/3h1vC5Z>

<sup>96</sup> WRDA (February 2020), 'Gender Inequality in Northern Ireland: Where are we in 2020?', *Bold Women Blogging*, (available online): <https://bit.ly/3zS2WET>

<sup>97</sup> Carers NI (2015), 'NI Carers save government £4.6 billion a year', <https://bit.ly/3d88MbZ>; see also: Carers NI (2017) 'State of Caring 2017': <https://bit.ly/3j79KbO>.

<sup>98</sup> Office for National Statistics (2017), 'Unpaid carers provide social care worth £57 billion' (2017): <https://bit.ly/35PpKYl>

girls, is central to the functions of every economy; yet it is still treated as a private issue and undervalued as contributors to economies.

Research on the rise of unpaid carers in the UK during COVID-19 highlights that the pandemic has led to an increase of 4.5 million people providing unpaid care; which is an almost 50% increase in the number of unpaid carers since the crisis began<sup>99</sup>. Many new unpaid carers are drawn from the working population, as 26% of all workers are now juggling work and unpaid care; an increase from one in six to one in four<sup>100</sup>. Significantly, this highlights where future carers may come from if there is not sufficient investment in carer and support and significant investment into the redistribution of care work, and supporting unpaid carers, is needed urgently. The losses of a failure to invest in care will not only be felt by carers and their families, but to the employers and Northern Ireland economy alike.

Research from carers Week 2020 found that in Northern Ireland<sup>101</sup>:

- 15% of respondents said they were already providing care before the COVID-19 outbreak (212,000 people) and a further 7% stated that they have started caring since the outbreak (98,000 people). Using population projections, it can be estimated that there are as many as 312,000 unpaid carers,
- 59% of respondents stated that unpaid caring responsibilities was having a detrimental impact on their ability to do paid work,
- 54% identified the financial impact of additional care costs as a key concern,
- 49% expressed high concern over not having anyone to talk to about the challenges of caring,
- 54% of respondents in NI stated that they are now more aware of the role of unpaid carers than before and 74% thought that carers were not well valued or valued at all,
- 72% of respondents in NI do not believe that unpaid carers have been supported by the Government during the COVID-19 pandemic,
- 74% of NI respondents also believed that the government should increase support; for example, through increased financial support, investment in care and support services so unpaid carers can take a break and through further investment in social services.

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<sup>99</sup> Carers Week (2020), 'Carers Week 2020 Research Report: The rise in the number of unpaid carers during the coronavirus (COVID-19) outbreak', *Making Caring Visible*, <https://bit.ly/3qiOrEQ> p.4.

<sup>100</sup> *ibid.*

<sup>101</sup> *Ibid.*, pp.27-28.



More recent research from the Carers Week 2021 Report found that out of 2,850 carers surveyed in the UK<sup>102</sup>:

- 81% have had to provide more care during the pandemic,
- 63% are worried about continuing to care without a break,
- 74% are exhausted as a result of caring,
- 72% have not had any breaks throughout the pandemic,
- 71% are stressed and anxious as a result of caring,
- 35% feel unable to manage their caring role,
- 65% feel lonely and isolated,
- 55% felt overwhelmed by their caring role,
- Only 14% felt confident support will continue into the future,
- Carers lost 25 hours of support every month during the pandemic or 425 hours throughout the pandemic,
- 64% reported relying on family and friends to take a break,
- 21% chose not to take any breaks because they were worried about catching COVID-19,
- 66% of carers who did receive a break said they had not enough breaks to protect their health and wellbeing or had fewer breaks than before the pandemic,
- 33% used their breaks to complete practical tasks such as housework,
- 26% used any breaks they had to attend medical appointments,
- 25% used a break to catch up on sleep,
- 63% have not been able to look after their own health and wellbeing during the pandemic,
- 69% of carers said their mental health worsened during the pandemic,
- Women carers were more likely to say their mental health had been impacted (71%) compared to men carers (64%),
- 64% of carers said their physical health worsened during the pandemic,
- Women carers were more likely to say their physical health had been impacted (66%) compared to men carers (61%),
- 65% felt lonelier and more isolated than before the pandemic,
- 70% of parent carers reported being lonelier and more isolated,
- 49% of carers reported not being able to maintain their relationships and this rose to 55% for those who haven't had a break during the pandemic,
- 44% highlighted they were not getting enough support before the pandemic,
- Just 11% of carers said they were getting the same level of support they had before the pandemic,
- 28% of carers said they needed more support than before the pandemic.

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<sup>102</sup> Carers Week Report 2021: <https://bit.ly/2SjxOgC>

Some of the Carers Week Report 2021 findings specific to Northern Ireland included:

- In Northern Ireland, many carers cited worries and uncertainty about Health and Social Care Trusts budgets and social care funding being cut after the pandemic,
- Before the pandemic, 44% of carers were unable to access the breaks they needed, and this increased to 79% of carers being unable to take a break.
- A further 11% have had fewer or insufficient breaks,
- Of the 28% able to take a break, 30% used breaks for their own medical appointments and 29% used their breaks for practical tasks such as housework,
- 72% of carers in NI say their mental health has worsened because of the lack of breaks,
- 67% said their physical health had deteriorated during the pandemic,
- 78% reported feeling exhausted and worn out as a result of caring,
- 69% are worried about continuing care without a break,
- 33% feel unable to manage their caring role,
- Just 9% were confident that the support they relied on would continue in the future,
- 29% of carers reported needing more support than before the pandemic, either due to the needs of the person they care for increasing or due to their own health deteriorating.

It is clear that both the UK government and the Northern Ireland Assembly need to urgently address unpaid caring responsibilities in any recovery planning and longer-term economic modelling and recovery planning. Given the disproportionate levels of unpaid caring responsibilities taken on by women, and the drastic impact this can have on women's participation in paid work and lifetime earnings, a gendered lens is needed in addressing the segregation of care work to prevent further embedding gender inequality.

### Recommendations:

WPG recommendations to address gender segregation and the unequal distribution of care include:

- Action must be taken to acknowledge the many women who work in precarious, low-paid jobs that are unable to stay at home due to employer reluctance to furlough these workers; particularly as many of these women do not have trade union representation nor can they benefit from collective bargaining.

- In addition to this, action needs to be taken to address how difficult it is for women to complete all aspects of work from home when trying to manage their workloads, childcare and providing education from home.
- Measures should be introduced to prevent employees from being penalised.
- Monitoring gender parity in the professions of the future provides a critical opportunity to guide the emerging labour market to more equitable outcomes in the future of work.
- Urgently increase the supply and visibility of women with disruptive technical skills.
- To ensure that the professions of the future can target gender parity within the coming decade, reskilling and upskilling efforts for women interested in expanding their skills range should be focused on those already in the labour market or looking to re-enter the labour market after a period of inactivity.
- Build on existing good practice evidenced in alteration of policy on Maternity Allowance for women furloughed due to COVID-19.
- Promote conciliation measures and actions finalised to increase equal opportunities in both education and work<sup>103</sup>. Family policies, social protection systems and measures finalised to reduce gender inequalities, encouraging higher education and job opportunities for women are some measures that can be taken.
- Analyse the economic value of putting money into caring, which may help carers get back into paid employment and thus improve their health and financial wellbeing and consequently reducing pressure on the health and benefits systems in the long-run.
- For a better, more resilient economy, it is essential that we value and recognise care work. It needs to be a valued job that is paid well, attracts investment in education and training, provides opportunities for promotion and is seen as a valued career.
- Require all workplaces to record and publish gender segregation and gender pay gap data.

The WPG also supports the below medium-term and longer-term recommendations from the UK Women's Budget Group<sup>104</sup>:

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<sup>103</sup> Rosalia Castellane et. al. (2019), 'Analyzing the gender gap in European labour markets at the NUTS-1 level', *Cogent Social Sciences* Vol 5. 2019 Iss. 1., <https://bit.ly/2SjH18M>

<sup>104</sup> UKWBG (May 2020), 'Briefing from the UK Women's Budget Group: Easing Lockdown: Potential Problems for Women', (available online): <https://bit.ly/3qhxyzPW>

- Require employers to report the numbers of people made redundant with breakdowns by gender and other protected characteristics.
- Require the reinitiating (or implementation in the NI context) of gender pay gap reporting; including reporting on pay gaps during the COVID-19 lockdown.
- Do not turn to austerity measures to pay for the cost of the crisis.
- Invest in social infrastructure, including health, care and education.
- Design a sustainable and stable social care system so that no-one has unmet needs, free to the point of use with well paid, well trained permanent staff and funded via general taxation.
- Reform the social security system so that it protects all people, including migrants, against risk, poverty and destitution.
- Rethink work so that jobs pay a decent wage regardless of age – a true living wage for all – and reflects a shared balance between work, care and leisure for all.
- Take action to address the housing crisis by reducing rent and increasing housing support.
- Sustainably funding the women's sector so that no woman is left in danger.
- Introduce policies to encourage sharing of care and unpaid work between women and men.

Recommendations from Carers Week Report which we endorse include<sup>105</sup>:

- There is a significant role for information and advice for carers, forward planning, but also better support so that people can rely on what they need.
- Whilst Governments in every nation across the UK have implemented measures to support carers, there is no doubt that there are gaps that need to be plugged to improve carers' lives in the short term. In the longer term, the Government needs to build a better future for carers that tackles the underlying issues that they face.
- Increase awareness of the role of caring and unpaid carers - the NI Assembly should promote awareness of the important role of unpaid carers and caring and introduce more concrete support so that value is recognised practically.
- Fund and rebuild social care and health services - the NI Assembly needs to recognise the amount of pressure the system has been under during the coronavirus outbreak, and the funding shortages that were widely recognised for many years before the crisis. There needs to be a significant

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<sup>105</sup> See (n38).

increase in funding levels to allow the social services and the NHS to rebuild after the crisis, alongside bringing forward plans for long-term reform of social care. Greater investment in care will lead to a healthier and happier population that is better able to balance important aspects of their lives, including personal relationships, work and family.

- End carers' financial hardship - Financial support for carers must be urgently improved, which would particularly benefit women who are more likely to be caring and providing higher levels of care. The UK Government and NI Assembly should immediately increase the basic level of Carer's Allowance and introduce a £20 per week increase to match the rise in Universal Credit.
- Greater consistency is needed in connecting carers to support available to look after their own mental and physical health and wellbeing. Support for carers to take part in physical activity, for example, can be hugely beneficial in preventing them developing health problems in later life as well as reducing isolation.
- Support working carers more through employers and by Government - Employers, and the NI Assembly, should ensure that there are carer-friendly policies in place that enable working carers to balance their caring responsibilities with work. We fully support the Government's plans to introduce an entitlement to take care leave for working carers; our preference would be for this to be paid.
- Schools, colleges, and universities should be encouraged to introduce policies and programmes that support carers and improve their experience of education,
- Increase funding for carers breaks, better funding for social care, develop a supportive healthcare system, end carers' financial hardship, create a carer-friendly work environment and introduce paid carers leave.

The WPG also supports UN recovery recommendations to<sup>106</sup>:

- First, immediate support for at-risk workers, enterprises, jobs and incomes, to avoid closures, job losses and income decline.
- Second, a greater focus on both health and economic activity after lockdowns ease, with workplaces that are safe, and rights for all.
- Third, mobilisation now for a human-centred, green, sustainable and inclusive recovery that harnesses the potential of new technologies to create decent jobs for all and takes advantage of the creative and positive ways companies and workers have adapted to these times.

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<sup>106</sup> (n7).

Finally, we recognise that some policy decisions are not possible through devolved institutions and when looking at the UK as a whole, the WPG would encourage gender-budgeting and progressive fiscal and monetary policy making from the UK government. In particular, the WPG would like to endorse calls from Tax Justice UK in agreeing common goals to build back a better world affected by coronavirus. These calls include drastic tax reform across the UK as Tax Justice UK have highlighted that:

'The pandemic has reminded us just how valuable the contribution of carers, nurses and key workers is to a caring society. In the long term we need to be spending more money on health, care and other areas to ensure we have a resilient society and economy. However, this cannot happen without reform of the tax system.

The UK's approach to tax is dysfunctional: we don't raise enough money, avoidance is rife and wealth is under-taxed. Despite progress, estimates suggest that £35 billion to £90 billion of tax goes uncollected per year.

The government also spends over £164bn a year on tax reliefs - many of which are badly targeted and largely benefit the well off and big companies. The corporate tax rate has been slashed from 28% in 2010 to the current 19%. The UK also contributes through its reliefs and loopholes to a broken international tax system, which deprives other countries of revenue.

The Covid-19 crisis shows that the government has huge financial power, flexibility and choice over how to support public spending. Tax reform to support a fairer and greener future argues that as the immediate crisis fades there will be big political debates about how to build back better. A fair tax system should underpin more investment in high quality public services and we must be ready to challenge those who are already arguing for austerity 2.0.<sup>107</sup>

We support the following recommendations from Tax Justice UK<sup>108</sup>:

- No bailouts for tax dodgers - require companies receiving large bailouts to end artificial tax avoidance arrangements and tax haven structures, publicly

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<sup>107</sup> Tax Justice UK (June 2020), 'Progressive groups call for tax reform post-covid', <https://bit.ly/3vSAf7L>

<sup>108</sup> *ibid.*

disclose where profits are made and who benefits, and publish their tax policy.

- Tax companies properly - close down loopholes, end the tax subsidies many companies enjoy, bringing in a higher effective tax rate and require the publication of corporate tax affairs.
- Tax wealth more - Ensure that income from wealth is taxed at least as much as income from work. Reform areas where wealth is currently under-taxed including property, inheritances, capital gains, dividends and pensions. Actively consider a wealth tax.
- Stop undermining the tax systems of other countries - shut down the tax loopholes and secrecy provisions that deprive other countries of revenue.
- Enforce the rules - clamp down on tax dodging. Properly fund HMRC and Companies House and give them tools so that they can enforce our laws.

A combination of measures both at a UK-wide and Devolved level are needed from elected representatives to address the systemic gender segregated markets and unequal distribution of care. Investment in care provides strong returns economically in the long run, and we would urge decision-makers to consider the above recommendations to fund adequate investments and to oppose the implementation of further austerity.

### 1.3.4 Addressing Women's Employment and the Skills Barometer

The current Skills Barometer, which is used to determine training priorities based on predictions of future skills requirements for the NI economy, only places value on skills that are viewed to promote productivity in the traditional sense<sup>109</sup>. Because of this, it disregards apprenticeships that are majority women and girls, such as social care. In a 2019 report<sup>110</sup> on the Skills Barometer, 'Caring Personal Services' was predicted to be one of the largest contributors to job growth in NI in the next decade, yet no provisions were planned to meet this forecasted demand. In a 2015 report<sup>111</sup> on the Skills Barometer, it noted that upskilling would not be considered when creating predictions due to the assumption that, "these individuals are already in the labour market, will remain with their current employers after training and do not represent additional supply to the labour market." When looking at an apprenticeship like social care, which requires low

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<sup>109</sup> Ballantine, J., Rouse, M., Gray, A.M. 2021. *Gender Budgeting: Working Paper 2 Case Study: Apprenticeships in Northern Ireland*. (<https://bit.ly/3hObNNs>)

<sup>110</sup> Ulster University Economic Policy Centre. 2019. *NI Skills Barometer 2019*. (<https://bit.ly/3joO7nv>)

<sup>111</sup> Ulster University Economic Policy Centre. 2015. *NI Skills Barometer Findings Report: "Skills in demand."* (<https://bit.ly/3hiqLgU>)



levels of qualifications and is mainly women, the exclusion of upskilling has significant gender implications. If the Skills Barometer cannot predict future demand for upskilling, women with low levels of qualifications that need upskilling to perform their duties, such as those in social care, will be disproportionately disadvantaged. This is a part of a larger issue surrounding labour that is considered, “...highly skilled yet have a low level of formal qualification.”<sup>112</sup> The discrepancy of skills and qualifications leads to exploitative implications for women in areas like social care, as it depreciates their skilled labour, perpetuates the gender pay gap and adds to women’s pension poverty.

### Recommendations:

- Further research into the extent of current upskilling and the future demand for upskilling that considers the gendered impacts.
- Recognise the value of social care and other apprenticeships that are considered ‘highly skilled’ yet require low level qualifications and increase funding to these apprenticeships, which typically are majority women and girls.

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<sup>112</sup> Ulster University Economic Policy Centre. 2019. *NI Skills Barometer 2019*. (<https://bit.ly/3joO7nv>)

## 1.4 Women's Poverty and Austerity

“Financially, I have had to go and get a second job to make ends meet with university.”

“80% wages for almost a year. Two kids off school meant higher bills and more food needed. Socially, I don't think I could go to a pub or a busy event as my anxiety would be through the roof.”

“Financially I feel less secure. It's hard getting a graduate job in this market, so I haven't progressed from my student retail job. This has impacted me personally as I feel like a failure which has had a negative impact on my mental health. Also, it's been hard to maintain relationships with people during the lockdowns which again negatively impacts my mental health.”

“High heating costs and household bill's etc from being at home.”

“Uncertainty has meant I'm more stressed about not having financial backup.”

“As the kids were at home a lot, we were using more electricity heating and our shopping bill was crazy.”

“I applied for universal credit, they assessed us wrongly and demanded the money back.”

“Seasonal work to top up employment salary disappeared.”

“The usual cheaper clothing shops etc were closed, have two young boys growing and had to use online more expensive clothing.”

“Reduced standard of living due to less income.”

“Lack of savings has had an impact. awaiting benefit payments every 2 weeks is very stressful.”

“Before the pandemic and before I got my job, I had to access food banks due to a benefit error. It was awful. I'd have preferred to have been given cash so I could make my own choices around food.”

“Positive [experience of food banks], I had a lot of help during the first lockdown and greatly appreciated it.”

“I felt ashamed that I had to use them [food banks], as a mother you feel like people would pass judgement but the people I dealt with were very nice and helpful.”

“[Universal credit was] very minimal and didn’t even cover rent.”

- Testimonies from WPG Primary Research

The government's response to the 2008 financial crash was to introduce a series of austerity and welfare reform measures. These reforms included the introduction of Universal Credit, the replacement of DLA with PIP, the introduction of the Benefit Cap and the 'Bedroom Tax', a freeze on benefits for four years and the introduction of the 'two-child' limit.

Research suggests that these policies had a disproportionate impact on women showing that 86% of the savings to the Treasury from the tax and benefit changes since 2010 have come from women.<sup>113</sup> This is due to a range of societal factors that make women more vulnerable to these policies. Women are more likely to claim social security benefits, more likely to use public services, more likely to be in low-paid, part-time and insecure work, more likely to be caring for children/family members and more likely to have to make up for cuts to services through unpaid work. The cumulative effect of these reforms has been felt by women, particularly the most vulnerable women including those on the lowest incomes.

Research by the Women's Regional Consortium<sup>114</sup> details the struggles many women in Northern Ireland have faced with austerity policies and illustrates that these women continue to feel the negative effects of austerity and welfare reform many years after these policies were introduced. The impacts go beyond their ability to afford food and essentials for their children and families but also have detrimental effects on their mental health, wellbeing and personal relationships.

Local analysis of the impact of these reforms by the Northern Ireland Human Rights Commission (NIHRC) also showed the negative impacts of the welfare reform measures on certain groups.<sup>115</sup> It highlighted that across most income levels the overall cash impact of the reforms is more negative for women than for men. The research showed that women lose more on average from these reforms than men mainly because they are more likely to be receiving benefits and tax credits than men. Their most striking finding was that households with children experience much larger losses as a result of the reforms than those without children. This is particularly the case for lone parents (in Northern Ireland 91% of lone parents are women<sup>116</sup>) who lose £2,250 on average, equivalent to almost 10% of their net income.

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<sup>113</sup> Estimating the gender impact of tax and benefit changes, Richard Cracknell, Richard Keen, Commons Briefing Papers SN06758, December 2017 <https://bit.ly/3wQvrRN>

<sup>114</sup> Impact of Ongoing Austerity: Women's Perspectives, Women's Regional Consortium, March 2019 <https://bit.ly/35OWtqe>

<sup>115</sup> Cumulative impact assessment of tax and social security reforms in Northern Ireland, NIHRC, (November 2019): <https://bit.ly/3qhxRq0>

<sup>116</sup> Census 2011 – Key Statistics for Gender, Research and Information Service Research Paper, Ronan Savage and Dr Raymond Russell, Northern Ireland Assembly, 5 September 2014 <https://bit.ly/35JxlaX>

The NIHRC analysis looked at how these reforms would impact on poverty levels and showed that overall, they are forecast to increase relative child poverty (before housing costs) by 8%, household poverty by just over 2% and adult poverty by just over 1%. It highlighted significant increases in the relative child poverty rates for children in lone parent households after taking account of the reforms with the rate estimated to increase by over 22% (before housing costs) and 18% (after housing costs).

There are strong links between female poverty and child poverty. The pandemic has increased the negative impacts of poverty felt by women and children. Women who were already struggling are now under even more financial pressure as they, their children and families are pushed further into poverty as a result of the pandemic.

### 1.4.1. Universal Credit

Universal Credit is the flagship policy in the Government's welfare reform programme. It has proved controversial since it was introduced and problems with the benefit have been widely reported. There is substantial evidence that Universal Credit, and in particular problems with the five-week wait at the start of a Universal Credit claim, are causing widespread financial hardship, debt and increased reliance on food banks.

Research by the Trussell Trust<sup>117</sup> shows that in areas where Universal Credit has been rolled out for at least a year, food banks in their network have seen a 30% increase in demand rising to 48% after two years. This research led the Trussell Trust to conclude that the minimum five-week wait for Universal Credit has led to acute and immediate financial hardship and worsened households' longer-term financial resilience. This included signs of destitution (inability to afford food or heating, going hungry), housing insecurity (rent arrears, eviction risk and homelessness) and indebtedness (multiple debts, high-risk loans, suspended utilities). Locally, research by the Joseph Rowntree Foundation in Northern Ireland found that participants unanimously associated the early stages of a Universal Credit claim with financial hardship and usually debt.<sup>118</sup>

Aside from the major problem of the five-week wait and the associated issues with the repayment of Advance Payments, there are problems with the online nature of Universal Credit, how childcare costs are paid, the single payment, the lack of a second earner work allowance, the rigidity of Universal Credit assessment periods

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<sup>117</sup> #5WeeksTooLong, Why we need to end the wait for Universal Credit, The Trussell Trust, (September 2019): <https://bit.ly/2So3UIk>

<sup>118</sup> Universal Credit could be a lifeline in Northern Ireland, but it must be designed with people who use it, Ruth Patrick and Mark Simpson, with UC:Us, Joseph Rowntree Foundation, (June 2020): <https://bit.ly/2SjHOGM>

and increased conditionality and sanctions. Many of these issues are likely to have greater impacts for women as outlined in research by the Women's Regional Consortium.<sup>119</sup> A House of Lords report has concluded that the way Universal Credit has been designed and implemented has features that are harming many people including women, disabled people and BAME people.<sup>120</sup>

The way that Maternity Allowance is treated under the Universal Credit Regulations also causes problems for low income pregnant women. Maternity Allowance is treated as 'unearned income' and is deducted from any Universal Credit award pound-for-pound in contrast to Statutory Maternity Pay which is treated as 'earnings' and is partially disregarded from any Universal Credit award. The result of this may be that a woman is not entitled to any Universal Credit. This can leave women in receipt of Maternity Allowance up to £5,000 worse off over 39 weeks of maternity leave, relative to women in similar circumstances in receipt of Statutory Maternity Pay. It also means that without entitlement to Universal Credit, many of these women would not qualify for the £500 Sure Start Maternity Grant, which is paid to low income parents in receipt of means-tested benefits to help them buy things for their first baby.

A detailed analysis on the impact of the introduction of Universal Credit on women is made more difficult due to a lack of official data broken down by gender in Northern Ireland. However, latest available figures show that lone parents accounted for 30% (29,590) of Universal Credit payments<sup>121</sup> and the majority of lone parents are women. Nationally, it has been described as 'discriminatory by design' against women<sup>122</sup> which can leave women more vulnerable to poverty and debt and has implications for women's health and wellbeing as well as having negative impacts on their children.

Local research by the Women's Regional Consortium paints an overwhelmingly negative picture of life for women on Universal Credit fraught with financial insecurity, worry, debt and in some cases cold and hunger.<sup>123</sup> It showed that the design of Universal Credit does little to protect women and their children from living on low incomes and poverty, highlighting that the personal impacts of the five-week wait were severe with 89% of women suffering stress/anxiety as a result of the wait.

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<sup>119</sup> The Impact of Universal Credit on Women, Women's Regional Consortium, (September 2020): <https://bit.ly/3gNIYoE>

<sup>120</sup> Universal Credit isn't working: proposals for reform, House of Lords, Economic Affairs Committee, (July 2020): <https://bit.ly/3wTxfJz>

<sup>121</sup> Universal Credit: Northern Ireland, Data to November 2020, NISRA & DfC, (February 2021): <https://bit.ly/3qIzTFv>

<sup>122</sup> Something needs saying about universal credit and women – it is discrimination by design, Alison Garnham, CPAG, (August 2018): <https://bit.ly/35NQ05a>

<sup>123</sup> The Impact of Universal Credit on Women, Women's Regional Consortium, (September 2020): <https://bit.ly/3gNIYoE>

The impact of the COVID-19 pandemic has exposed many more people to the problems associated with Universal Credit as it is the main benefit claimed by those who have lost their jobs or suffered reduced incomes - see Section 1.4.9.

### 1.4.2. The Two-Child Limit

This policy limits the child element in Child Tax Credits and Universal Credit to two children. This means that most families will be unable to claim Universal Credit or Tax Credits for a third, or additional child, losing out on £2,780 per child per year. Northern Ireland feels a greater impact from this policy given the larger average family size compared to the rest of the UK.<sup>124</sup> It is also likely to disproportionately impact certain religious and Black and minority ethnic communities who are more likely to live in households with three or more children.<sup>125</sup>

As of May 2020, a total of 2,620 Universal Credit households were impacted by the two-child policy in Northern Ireland.<sup>126</sup> It is also worth noting that the two-child limit was not included in the mitigations package for Northern Ireland. Therefore, there is no protection available from this aspect of welfare reform.

Government statistics do not provide a full breakdown of those affected by the two-child limit; however, we know that the vast majority of Child Tax Credit payments are paid to the female parent (be that a female lone parent or a woman within a couple).<sup>127</sup> Estimates<sup>128</sup> indicate 70% of families affected by the limit are couple families, 29% are single parent families headed by women and 1% are single parent families headed by men. The policy therefore disproportionately affects women who are much more likely to be single parents and more reliant on the social security system, particularly when their children are young. The Women's Policy Group Northern Ireland raised the impact of this policy on women in their opposition paper on the two child tax credit cap and rape clause, stating that the cap will mostly affect women and was discriminatory on the grounds of sex or gender.<sup>129</sup>

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<sup>124</sup> The two-child limit, House of Commons Work and Pensions Committee, (November 2019): <https://bit.ly/3qofT5k>

<sup>125</sup> Ibid

<sup>126</sup> Written Answer to Assembly Question by Mr Mark Durkan MLA, (September 2020): <https://bit.ly/3wLABYJ>

<sup>127</sup> Child and Working Tax Credit Statistics: Provisional Awards, HMRC, (April 2018): <https://bit.ly/3qmHKT7>

<sup>128</sup> "It feels as though my third child doesn't matter" The impact of the two-child limit after four years, The Church of England, CPAG and Nuffield Foundation, (April 2021): <https://bit.ly/3x3tT6I>

<sup>129</sup> Opposing the two child tax credit cap and rape clause, Women's Policy Group Northern Ireland, (May 2017): <https://bit.ly/35J8zrr>



Research by the British Pregnancy Advisory Service (BPAS) has found that the two-child limit is a significant factor in women's decisions to end a pregnancy.<sup>130</sup> The majority of women in this research (57%) said that the policy was important in their decision-making around whether or not to continue the pregnancy. The number of women with two or more children who had an abortion in 2019 was 16.4% higher than in 2016 (the year before the policy was introduced) - more than twice the rate of increase seen among women with one previous child. Some women felt that the combination of the pandemic and the two-child limit in effect removed their ability to continue their pregnancy, and described feeling "forced" by their financial circumstances into ending a pregnancy that, had their situation been different, they would have wanted.<sup>131</sup>

As the impact of the pandemic is felt and more families have to claim Universal Credit as a result, many more people will discover that there is no support for their third or subsequent children, further exposing the unfairness of this policy. The Children's Commissioners for Scotland, Northern Ireland and Wales have written to the Secretary of State<sup>132</sup> outlining the ongoing negative impact of this policy in light of the COVID-19 pandemic and the likely implications for child poverty. They have added to the calls for the government to reverse the policy.

### 1.4.3. The Benefit Cap

The Benefit Cap places an upper limit on the amount of benefit a household can receive. The Benefit Cap has been fully mitigated in Northern Ireland since its introduction in May 2016. However, this mitigation is only available to families with children provided "they were receiving a relevant welfare benefit when the Benefit Cap was introduced."<sup>133</sup> This means that anyone who is newly in receipt of benefits since the Benefit Cap was introduced will be subject to this loophole and will therefore not be protected by the mitigations.

The number of households capped was 1,980 at February 2021 with 690 households having their Housing Benefit capped and 1,290 having their Universal Credit capped. Of these capped households, 74% were lone parents (1,460) and 26% were couples with children (510). The average amount capped was £50 per

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<sup>130</sup> Forced into a corner: The two-child limit and pregnancy decision making during the pandemic, BPAS, (December 2020): <https://bit.ly/3wOgyvR>

<sup>131</sup> Ibid.

<sup>132</sup> NICCY: <https://bit.ly/3vOZzuW>

<sup>133</sup> Review of Welfare Mitigation Schemes, Department for Communities, (March 2019): <https://bit.ly/3wWWafy>

week.<sup>134</sup> Given that women account for 91% of single parent households in Northern Ireland this is a highly gendered policy.

The number of Universal Credit capped households has increased significantly from March 2020 as a result of the impact of COVID-19 on the Universal Credit caseload. This is happening despite the fact that those subject to the Benefit Cap can do little to escape it as the actions they could take to avoid it were almost impossible, such as getting a new job or moving to a cheaper house. The Cliff Edge Coalition have stated that the number of capped households is likely to rise even further due to the COVID-19 pandemic and resulting recession as well as the anticipated end of the furlough scheme, which is likely to push thousands more onto Universal Credit.<sup>135</sup> It is probable that this will leave many more women and families subject to the Benefit Cap loophole.

#### 1.4.4. The Bedroom Tax

The Social Sector Size Criteria, more commonly known as the 'Bedroom Tax,' took effect in Northern Ireland in February 2017. It reduces Housing Benefit or Universal Credit payments for people who live in Northern Ireland Housing Executive (NIHE) or Housing Association properties that are deemed to have more bedrooms than they need. Only people who receive help to pay their rent will be affected by this policy. Mitigation payments were put in place in Northern Ireland to fully mitigate the effects of the Bedroom Tax until March 2020 and have since been extended.

However, the Bedroom Tax is also subject to a loophole in that mitigations will currently be lost if a household moves to another social home where they under occupy to the same or a greater extent than in their previous property. Available figures show that 227 households had lost this important protection, losing an average of £50 per month<sup>136</sup> and heightening their risk of housing stress and homelessness.

This policy is likely to have greater impacts on women for a number of reasons. In particular, women have more reliance on social security benefits, the majority of single parents are women, recent Housing Benefit claimant numbers show that 59% of claimants are female and 41% are male, and women who are employed are often located in low paid sectors.

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<sup>134</sup> Benefit Cap: Northern Ireland, Data to February 2021, NISRA & DfC, (May 2021): <https://bit.ly/2Sjzw1A>

<sup>135</sup> Cliff Edge Briefing Paper, (September 2020): <https://bit.ly/3wSOF98>

<sup>136</sup> AQW11061/17-22, asked by Mark Durkan MLA, answered 10/12/20  
<https://bit.ly/2SQd6pd>

An increase in benefit claims as a result of the pandemic has led to an increase in the number of households affected by this policy in Great Britain. While many households in Northern Ireland are currently protected from the impacts of this policy through the mitigations, the rising numbers of benefit claimants will leave more families vulnerable to the loophole.

#### 1.4.5. Personal Independence Payment (PIP)

Since June 2016, the Department for Communities began to replace Disability Living Allowance (DLA) for working age claimants with Personal Independence Payment (PIP). PIP is a benefit designed to help with some of the extra costs caused by long-term ill health or disability that is expected to last for 12 months or longer.

Northern Ireland has traditionally had a much higher proportion of people claiming disability benefits than other areas of the UK. While there are no significant gender differences in claimant numbers for PIP, disproportionately more people are in receipt of disability benefits in Northern Ireland and therefore many women will be impacted by this change - see further details in section 2.8.1. In addition, women are more likely to provide care in families and will therefore be worse impacted if the person they care for is turned down for PIP on migration from DLA as they will lose their entitlement to Carer's Allowance.

The pandemic has had an impact on the PIP process particularly in relation to appeals, which is detailed further in section 2.8.1.

#### 1.4.6. Welfare Mitigations

In Northern Ireland, a package of mitigation measures was agreed by the Northern Ireland Executive to protect some claimants from the harshest impacts of welfare reform.<sup>137</sup> This included important mitigation payments around the Benefit Cap and Bedroom Tax, as well as providing some help around Universal Credit.

The New Decade, New Approach agreement committed to both extending existing mitigations beyond March 2020 when they were due to run out and to carry out a review of the mitigation measures.<sup>138</sup> The Cliff Edge Coalition NI<sup>139</sup> have

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<sup>137</sup> Welfare Reform Mitigations Working Group Report, Professor Eileen Evason, January 2016 <https://bit.ly/3jcaFI>

<sup>138</sup> New Decade, New Approach, January 2020 <https://bit.ly/3j2gpnP>

<sup>139</sup> The CliffEdge Coalition NI is a group of over 100 organisations from across Northern Ireland who came together to express concerns about the end of welfare reform mitigations in March 2020. The Women's Policy Group is a Coalition member.

been campaigning not only for the extension of the existing mitigations (and the closing of loopholes in the Benefit Cap and Bedroom Tax mitigations) but for their strengthening to include new challenges such as Universal Credit and the two-child limit.<sup>140</sup>

These mitigations provide vital protections for the people of Northern Ireland, especially for the many women who have been so adversely affected by welfare reform policies. They are even more vital in the context of the pandemic, which is also disproportionately impacting women. Strengthening the existing mitigations to provide protections around the two-child limit, Universal Credit and the private rented sector is necessary to protect people, including many women, from the devastating impact of COVID-19 and the economic crisis which will undoubtedly follow.

#### 1.4.7. Food Insecurity and Food Bank Use

Food banks and food bank use has become normalised in today's society as a result of insufficient income to meet the basic essentials of life; this has been further exacerbated by the COVID-19 pandemic. Statistics from the largest food bank, the Trussell Trust, show that they gave out 2.5 million emergency food parcels to people in crisis across the UK in 2020/21 – an increase of 33% on the previous year, showing the impact of the pandemic. Figures for Northern Ireland show they gave out 78,827 emergency food parcels over the same time period, an increase of 75% on the previous year.<sup>141</sup>

Research by the Trussell Trust<sup>142</sup> showed that nearly four in ten (37%) people who needed to use a food bank indicated that the COVID-19 pandemic was the main reason for their use of the food bank, while 55% said they would still have needed to use the food bank if there had been no pandemic. In early 2020, 86% of households referred to food banks were receiving social security and just 16% of households had someone working. This research also found that the risk of being food insecure was higher among single parents, younger people, social renters, ethnic minorities and people in poor health. 18% of people referred to a food bank in mid-2020 were single parents – more than twice the rate of the UK population. Across the study, 84% of single parents were female.<sup>143</sup>

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<sup>140</sup> Cliff Edge Briefing Paper, September 2020 <https://bit.ly/3wSOF98>

<sup>141</sup> Trussell Trust data briefing on end-of-year statistics relating to use of food banks: April 2020-March 2021 <https://bit.ly/3j5tAnT>

<sup>142</sup> State of Hunger, Building the evidence on poverty, destitution, and food insecurity in the UK, Year two main report, The Trussell Trust, May 2021 <https://bit.ly/2TITCxE>

<sup>143</sup> Ibid

In analysing what changed during the pandemic in terms of the profile of the need for food banks, Trussell Trust research shows an increase in the proportion of people estimated to have No Recourse to Public Funds – from 2% in early 2020 to 11% in mid-2020 – and an increase in the proportion of couples with children – from 19% in early 2020 to 24% in mid-2020.<sup>144</sup>

Food insecurity questions have only recently been added to the Family Resources Survey, which covers the UK.<sup>145</sup> These figures are the first official statistics which measure if households have sufficient food to facilitate an active and healthy lifestyle. They show that households in receipt of state benefits generally experience far higher levels of household food insecurity than the general population. The statistics show that:

- Over 4 in 10 households in receipt of Universal Credit (43%) experience low or very low food security which is over five times the national average of 8% across all households;
- Over a quarter of households on Universal Credit (26%) are ranked as having 'very low' food security which is more than six times the national average of 4% for all households;
- The specific groups experiencing particularly high levels of household food insecurity include single parent households (29%), households with one or more disabled adults (19%) and 19% of Black households compared to 8% for the general population.

Research also highlights the challenges facing low-income families in balancing the cost of a healthy, nutritional diet with other essential household expenses.<sup>146</sup> Low income households tend to buy cheaper food that is nutritionally poor when prioritising other bills that need to be paid. This contributes to weight and obesity problems as well as other health issues, such as heart disease and diabetes. Research found that the cost of eating a healthy balanced diet for a family of four living on benefits with two adults and two children in primary and secondary school is £162/week which equates to 46% of their household income. A healthy food basket for a single parent living on minimum wage with two children in pre-primary and primary school would cost £105/week or 25% of their household income.

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<sup>144</sup> Ibid

<sup>145</sup> Family Resources Survey 2019/20, Household Food Security in the United Kingdom (Chapter 9), Department for Work and Pensions, March 2021 <https://bit.ly/3zNuzPA>

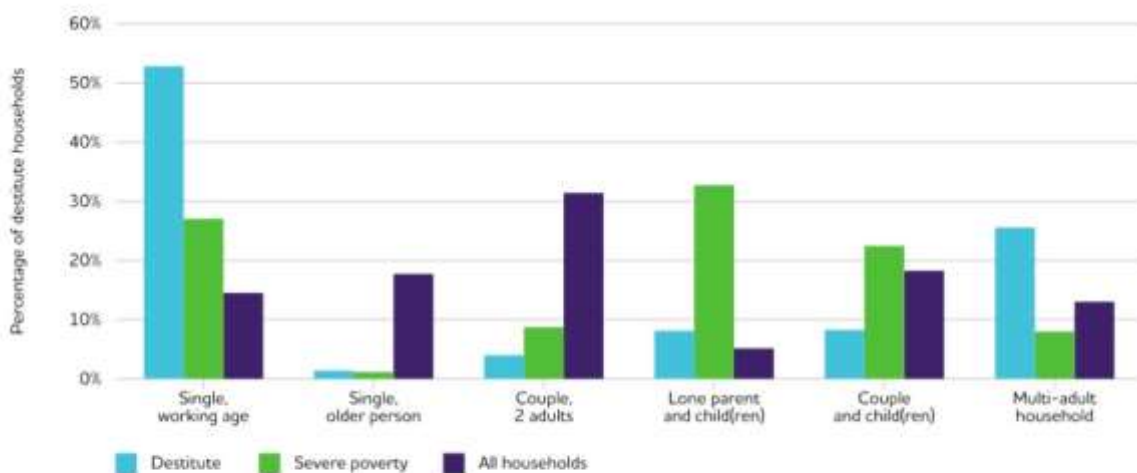
<sup>146</sup> What is the cost of a healthy food basket in Northern Ireland in 2020?, Safefood, The Consumer Council and the Food Standards Agency, June 2021 <https://bit.ly/3zT3ESD>

### 1.4.8. Destitution

Research by the Joseph Rowntree Foundation shows that even before COVID-19 destitution levels in the UK were rapidly growing.<sup>147</sup> Their estimates show that the number of households experiencing destitution increased by 35% between 2017 and 2019. More than a million UK households containing 2.4 million people, including 550,000 children, experienced destitution at some point in 2019. This means that these households could not afford to buy the bare essentials needed to eat, stay warm and dry, and keep clean.

Destitute households were slightly more likely to be headed by a man than the average UK household (46% versus 43%). Households in severe poverty were predominantly (68%) headed by a woman (many of whom would be lone parents) - see Figure 27 below.

**Figure 27: Household type of destitute households, households in severe poverty and all UK households**



Note: This household type classification includes people in hostels or sleeping rough, who are nearly all classified as single. People living with relatives or friends are classified as multi-adult households (which might include some children as well). About 9.5% of cases are missing from this analysis of the destitution survey.

Source: 2019 destitution survey (national-annual weighting); UKHLS waves 7–9 (2015/16–2017/18).

Source: *Destitution in the UK 2020*, Joseph Rowntree Foundation, December 2020

<sup>147</sup> Destitution in the UK 2020, Joseph Rowntree Foundation, December 2020  
<https://bit.ly/3xlyJGA>

More recent analysis by the National Institute of Economic and Social Research (NIESR), which includes COVID-19 impacts on destitution levels, indicates the number of UK households living in destitution rose from 0.7% of all households in 2019 to 1.5% in 2020.<sup>148</sup>

### 1.4.9. Impact of COVID-19

A decade of austerity has meant many families were already struggling to make ends meet. The onset of the COVID-19 pandemic means that these families and many more will face new challenges. Countless people have lost their jobs, experienced cuts in their working hours and lost earnings as a result of the pandemic. The consequence of this loss of income has meant that people have been forced to take action to mitigate the economic effects of the pandemic including reducing their spending, using savings, borrowing money, applying for Universal Credit and approaching charities, including food banks, for help.

There is a substantial body of research on the impact of the pandemic on families and those on the lowest incomes. The household incomes of UK families with dependent children have been disproportionately hit by a pandemic-related loss of earnings. Compared with February 2020, in January 2021, around three in ten families with children (27%) were living on a reduced income, as a direct result of pandemic-related loss of earnings – compared with 17% of households without children.<sup>149</sup> This research shows that single parents have been particularly hard hit, the majority of whom are women. Single parents were much more likely to have been economically and financially impacted by COVID-19 and to have lower financial resilience on which to fall back. They were also more likely to have newly claimed Universal Credit (15% compared to 7%) or to have seen their household income decrease by more than a third (18% compared to 13%).<sup>150</sup>

Research by the Joseph Rowntree Foundation and Save the Children<sup>151</sup> has shown that parents who were caught in poverty pre-crisis are around 50% more likely to have lost their jobs than parents who were better off. This research into the experiences of families with children claiming Universal Credit or Child Tax Credits has also shown the crisis is causing 7 in 10 of these families to cut back on essentials, 6 in 10 to borrow money and over 5 in 10 to be behind on rent or other essential bills. Further research by Child Poverty Action Group (CPAG) and the

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<sup>148</sup> NIESR: Destitution Levels are Rising Across the Country (February 2021): <https://bit.ly/3xMLdwO>

<sup>149</sup> Bearing the Brunt: The Impact of the Crisis on Families with Children, Findings from the 4th Coronavirus Financial Impact Tracker Survey, University of Bristol and Standard Life Foundation, March 2021 <https://bit.ly/2SSfJqy>

<sup>150</sup> Ibid

<sup>151</sup> A lifeline for our children: Strengthening the social security system for families with children during this pandemic, Briefing by Joseph Rowntree Foundation and Save the Children, June 2020: <https://bit.ly/3xMFas8>



Church of England<sup>152</sup> into the financial impact of COVID-19 on low-income families showed that around 8 in 10 respondents to their survey reported being in a worse financial position than before the pandemic and half were much worse off.

Research by the Institute for Social and Economic Research at the University of Essex has shown that the economic shocks caused by the pandemic have affected people unevenly across the UK with single mothers and the lowest paid being hardest hit by the loss of income.<sup>153</sup>

The pandemic has had a huge impact on the number of Universal Credit claims due to the scale of job losses and the impacts on people's working lives during the lockdown. On 1 March 2020, 70,000 people were claiming Universal Credit in Northern Ireland and by 26 April this number had risen by 80% to 126,000. The number of applications during this 8-week period totalled 65,700 with a ten-fold increase in new claims recorded at the height of the crisis in mid-March.<sup>154</sup> Latest available figures from the DfC show that as of 30 November 2020, 118,510 households were on Universal Credit.<sup>155</sup>

#### 1.4.10. Investment in Social Security

The pandemic has highlighted the need for the benefits system to act as a safety net for people in difficult times. It is likely that as the economy emerges from lockdown and faces a significant recession, many household finances will continue to struggle. Part of the solution must be to ensure that the benefits system provides sufficient support to those facing a temporary income shock as well as those facing longer-term financial hardship. Universal Credit's role as the main safety net for new benefit claimants is likely to be the focus of attention as we emerge from the pandemic.

Before the pandemic, women were already more vulnerable to poverty as they made up the majority of lone parents, those with precarious/low-paid jobs and those with caring responsibilities which limited their time available for paid work. Women were also more likely to claim social security benefits. Job losses and the need to provide increasing levels of unpaid care as a result of the pandemic are likely to increase poverty and dependence on social security benefits, especially for women. It is therefore imperative that as society emerges from the pandemic

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<sup>152</sup> Poverty in the Pandemic: The impact of coronavirus on low-income families and children, CPAG and The Church of England, August 2020 <https://bit.ly/3j4D0zY>

<sup>153</sup> COVID-19 Survey, Briefing Note, Wave 1: April 2020, Understanding Society: The UK Household Longitudinal Study, Institute for Social and Economic Research, University of Essex, May 2020: <https://bit.ly/3d8ipHf>

<sup>154</sup> See Communities NI Minister published information on impact of COVID-19 on Universal Credit Claims (May 2020): <https://bit.ly/3zUHVd4>

<sup>155</sup> Universal Credit: Northern Ireland, Data to November 2020, NISRA & DfC, February 2021: <https://bit.ly/3qIzTFv>

and the resulting recession, women must not pay the price for COVID-19 as they did for the previous financial crisis.

The Women's Budget Group (WBG) has urged the Government not to turn to austerity measures to pay for the cost of the crisis. The WBG stressed that this will repeat the past and impact poor, BAME and disabled women the most. They suggested a range of alternative ways to pay for the measures needed including investment in social infrastructure to boost the economy, increased taxes on wealth and tackling tax evasion, avoidance and havens.<sup>156</sup> They have further suggested longer-term reform of the social security system so that it protects all people against risk, poverty and destitution.

It makes economic sense to invest in the social security system. Reducing support to those on the lowest incomes through the benefits system would damage recovery efforts as it reduces the amount of money that people have to spend in local economies, reducing demand at a time when action is needed to create jobs and revive businesses. Professionals working in the advice sector have long advocated the principles of the 'multiplier effect'. This argues that there are economic advantages to high levels of benefit take-up as claimants spend money on goods and services in the local community. Ambrose and Stone (2003) found that a multiplier effect of 1.7 exists, meaning each pound raised in benefit entitlements for claimants should be multiplied by 1.7 to give a much greater overall financial benefit to the economy.<sup>157</sup>

The Cambridge University Economist Ha Joon-Chang argues that the mainstream political narrative that welfare spending is a drain and should be reduced is illogical. He asserts that 'a lot of welfare spending is investment' and believes that appropriate funding in areas such as unemployment benefits can improve productivity and workforce capability.<sup>158</sup> Investments in social security benefits are spent and not saved and moreover it is spent in local economies. This means that investment in these areas not only provides better results in terms of the individuals concerned but to local communities and the wider economy in general.

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<sup>156</sup> Easing Lockdown: Potential Problems for Women, Women's Budget Group, May 2020: <https://bit.ly/3qhxyzPW>

<sup>157</sup> Four reasons why welfare reform is a delusion, London School of Economics Blog, June 2017: <https://bit.ly/3j6szfp>

<sup>158</sup> Ibid

Spending within the social security system saves money in the long-term as it works to prevent poverty and many of the issues which come from living in poverty. Poverty is harmful to people, families and local communities. Living in poverty has negative physical and mental health impacts and these are often long-term, affecting educational attainment, happiness and wellbeing, life chances and even life expectancy. Women's poverty is especially harmful because of the strong links between women's poverty and child poverty. It is simply too costly to let poverty take hold and destroy the lives of future generations in Northern Ireland; it must be a priority for actions coming out of this pandemic.

It is vital therefore that the social security system is compassionate and can provide a safety net for people in these difficult times. Investing in the social security system is a sensible approach and an important way to tackle some of the most adverse impacts of welfare reform and help people get through the COVID-19 crisis. It will also particularly benefit many Section 75 groups including women, people with disabilities, people with dependents and people from different racial groups.

### Recommendations for changes in relation to social security benefits:

- The level of Child Benefit should be increased by at least £10 per week and an extra amount of at least £10 per week should be added to the child element within Universal Credit and Tax Credits. These payments would help families on the lowest incomes stay out of poverty/debt, reflect the additional costs facing parents and provide specific support to families with children who have been so impacted by the pandemic.
- As Universal Credit is one of the key benefits for those who have lost their jobs or suffered significantly reduced income as a result of the pandemic, a range of changes are required to help ensure it provides better support:
  - The Government should not cut the £20 increase to Universal Credit but should instead keep this lifeline. This would go some way to making sure that Universal Credit provides a decent income for people to live on and give families the stability they need.
  - The Government should remove the five-week wait or, if this is not possible, Advance Payments should be converted from loans to non-repayable grants to ensure people are supported to get through the five-week wait without risking hardship or debt.
  - In Northern Ireland, consideration should be given to providing an automatic grant from the Universal Credit Contingency Fund for all those claiming Universal Credit for the first time, reducing the devastating impact of the five-week wait, as suggested by the Cliff Edge Coalition.

- Amend the Universal Credit Regulations so that Maternity Allowance is treated in the same way as Statutory Maternity Pay.
- Make split payments of Universal Credit the default option.
- Enable childcare costs to be paid directly to childcare providers. This would alleviate the problem of prohibitive upfront costs, help claimants with budgeting, and give providers much-needed certainty of income as well as reducing the risk of fraud and error.
- The two-child limit in Tax Credits and Universal Credit should be scrapped, which would help to protect against predicted increases in child poverty as a result of the pandemic.
  - If the two-child limit remains, consideration should be given in Northern Ireland to providing an additional mitigation payment to families who are impacted by the two-child limit as suggested by the Cliff Edge Coalition.
- Scrap the Benefit Cap which disproportionately impacts on women and BAME families and is likely to impact many more people as a result of the pandemic.
- The Department for Communities is to be commended for extending the existing mitigation payments for the Benefit Cap and Bedroom Tax in Northern Ireland, however further action must be taken in relation to mitigations:
  - Government must legislate to extend the existing mitigations and close the loopholes around the Benefit Cap and Bedroom Tax urgently.
  - The pandemic makes it clear that an urgent review of mitigation payments is needed to ensure a strengthened safety net to prevent and alleviate child poverty and homelessness.
  - Government should work to develop targeted mitigations to specifically help those most impacted by welfare reform including women, lone parents and disabled people as suggested by NIHRC.<sup>159</sup> This could include implementing the Cost of Work Allowance, payments for low income families with young children and payments for households with disabled people. This would also help to benefit those most impacted by the pandemic including women, low-income families and BAME families.
  - Ensure any underspend in the mitigations package is ring-fenced for anti-poverty work.
- Introduce a new non-taxable weekly Child Payment for all 0-4 year olds and for 5-15 year olds in receipt of free school meals.

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<sup>159</sup> NI Human Rights Commission (November 2019) <https://bit.ly/3qhxRq0>

- Increase the funding available to the Universal Credit Contingency Fund, use it to make automatic payments to new claimants impacted by the 5-week wait, work to increase awareness/uptake of the Fund and make it easier to apply.
- Extend the £20 per week increase to Universal Credit to those in receipt of legacy benefits who have been denied this much needed increase since March 2020.
- Increase the basic level of Carer's Allowance and consider a further supplement of £20 a week to match the rise in Universal Credit as suggested by Carers UK.<sup>160</sup> This would particularly benefit women who provide higher levels of care.
- The Department of Education is to be commended for committing to pay free school meals for all eligible children during all school holidays until April 2022 but the Government should make a permanent commitment to this so that no child in Northern Ireland ever suffers from holiday hunger.
- The welfare reform agenda and the COVID-19 pandemic has created a crisis situation where women need more help in the form of support, education and advice. However, support services for women are under serious threat from funding cuts, which is compounded by fears that Brexit will also mean the loss of valuable EU funding. Government should ensure proper recognition of, and support for, the role of community-based women-only provision in addressing women's vulnerability and poverty in rural and disadvantaged areas. This should include a commitment to increase and provide longer-term funding for women's organisations to enable them to continue and develop the vital services they provide in these increasingly difficult times.



<sup>160</sup> Carers Week (2020), <https://bit.ly/3qiOrFQ>

## 1.5 Increasing Financial Hardship and Debt



“Pandemic made me very isolated, my mental health suffered, we came into financial difficulties”.

“I have lost half my income. I live on my own and at times during lock down this was very challenging.”

“20% pay cut due to reduced hours, more spending on electricity, heat, food, but reduction on travel costs, childcare, clothes & entertainment”.

“Less savings, Increased debt, struggling to pay bills.”

“I have 2 credit card debts a huge overdraft and credit union loans I didn’t have before this.”

“Assessed wrongly [for universal credit] and demanded that I pay back, increasing the debt I have.”

- Testimonies from WPG Primary Research



There was already a debt crisis before the pandemic struck and it will undoubtedly add to the numbers of people in financial hardship, debt and in need of help to resolve problem debts. This increasing level of debt has the potential to have significant impacts for the health and wellbeing of people, stifle economic recovery and mean that debt advice agencies will be inundated when the impact of the crisis on people's personal finances becomes evident in due course.

Widespread job losses, reductions in income and increasing household bills as a result of lockdowns and rises in the cost of living will mean that many people will have little or nothing to fall back on during this unprecedented crisis. Many people on low incomes with little or no savings will have no other option than to borrow money. These families often struggle to manage their debts and are vulnerable to spiralling into long-term, problem debt.

In a Northern Ireland context, the likely impact of the pandemic on financial wellbeing and debt is particularly concerning given the circumstances of the population before the pandemic. According to Financial Conduct Authority research<sup>161</sup> fewer adults in Northern Ireland have a savings account (52% compared to 59% in the UK) and fewer have any investment product (23% compared to 29% in the UK). In Northern Ireland 12% of adults have no savings or investments while 60% have savings and investments of less than £10,000 (compared to 49% in the UK).

A greater proportion of people in Northern Ireland (56%) are considered potentially vulnerable due to their financial circumstances (compared to the UK average of 50%). 8% of adults in Northern Ireland said they could cover their living expenses for less than a week and 20% reported being over-indebted, both of which are characteristics of potential vulnerability. This leaves them less able to cope with any sudden change of circumstances or income shocks such as those presented by the pandemic.

Figures from the Money and Pensions Service on levels of over-indebtedness for 2019 show that 18% of adults in Northern Ireland are 'over-indebted' and women in Northern Ireland are more likely to be over-indebted than men (20% compared to 17%).<sup>162</sup>

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<sup>161</sup> Financial Conduct Authority (June 2018) <https://bit.ly/2UrafDn> Updated January 2020

<sup>162</sup> Figures provided in an email to the Women's Support Network by the Money Advice Service, November 2020



### 1.5.1. Impact of COVID-19 on Financial Wellbeing and Debt

Latest research by the Financial Conduct Authority<sup>163</sup> shows the impact of COVID-19 on the financial situation of adults in the UK. COVID-19 has reversed downwards trends in vulnerability and low financial resilience. 27.7 million people have characteristics of vulnerability in October 2020 an increase of 3.7 million since February 2020 and 14.2 million have low financial resilience in October 2020, an increase of 3.5 million since February 2020.

Citizens Advice research has shown that 1 in 9 people (the equivalent of 6 million people across the UK) have reported falling behind on household bills because of COVID-19.<sup>164</sup>

The impact of the pandemic on personal finances has been uneven. While some have seen household spending fall and savings rise others have seen increased spending. According to the Resolution Foundation<sup>165</sup> one in five (20%) of working-age adults reported that their spending during 2020 was higher than it was pre-pandemic with households on high pre-pandemic incomes being much more likely to have seen spending fall (and rates of saving rise) during 2020 than those on lower pre-pandemic incomes. The research found that families on a low income and families with dependent children are more likely to report increased spending during the pandemic. In particular, families with children on the lowest pre-pandemic incomes were twice as likely to report an increase in spending (36%) than a decrease (18%).<sup>166</sup> The reasons for this include increased spending on food, energy, the extra costs associated with home schooling and having to find ways to entertain children.

Over the course of 2020 there was an increase in the number of people borrowing more money and in larger amounts. This coincided with a decrease in people being able to save for the year ahead with lower income groups one of the most affected groups. At the end of June 2020, 10.8% of adults reported borrowing money, rising to 17.4% in December 2020. Of those, the proportion borrowing more than £1,000 increased from 34.7% to 45.1% in the same period. As the pandemic progressed, increasing proportions of people reported that they would not be able to save for the year ahead. At the end of March 2020, 31.6% of people said they would be unable to save, increasing to 38.4% in mid-December 2020.<sup>167</sup>

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<sup>163</sup> Financial Conduct Authority (February 2021) <https://bit.ly/3xL9Kma>

<sup>164</sup> Citizens Advice Press Release, (August 2020) <https://bit.ly/2SSgFLA>

<sup>165</sup> Mike Brewer & Ruth Patrick, Resolution Foundation (January 2021) <https://bit.ly/3j6tbSf>

<sup>166</sup> Ibid

<sup>167</sup> Office for National Statistics (January 2021) [Personal and economic well-being in Great Britain: January 2021](#)

StepChange debt advice charity research<sup>168</sup> has shown that since the pandemic began 14.3 million adults have experienced a fall in income that affected their ability to meet day to day costs. 11.3 million of those affected say their income had not recovered in January 2021. 10.6 million people borrowed to make ends meet since the beginning of the pandemic. 2.8 million people borrowed using high-cost credit and 2 in 5 people who borrowed using high-cost credit are experiencing problem debt. 1.7 million people have exhausted their savings to pay for essentials and a further 1.4 million people have used more than half of their savings.

StepChange research also shows that some groups have been hit harder by the pandemic, particularly single parents. 31% of single parents have seen their income fall since March 2020. 33% are showing signs of financial difficulty, 11% are in problem debt, 19% are in arrears on household bills, 31% have experienced hardship, 40% have borrowed to make ends meet and 16% report that they are probably or certainly unable to pay for essentials in the next 12 months. Single parents are less likely to have run down their savings than other groups who have been hardest hit by the pandemic, but this likely reflects lower pre-existing levels of savings among this group.<sup>169</sup>

Further research by StepChange also shows that private renters are most at risk from Covid related arrears and debt with nearly half a million (460,000) private sector tenants behind on rent payments. Since March 2020, half (49%) of private renters have experienced a drop in income.<sup>170</sup> Locally, Housing Rights research<sup>171</sup> suggests that those in the private rented sector have been disproportionately impacted by the pandemic. Private rented sector contacts to Housing Rights in 2020 in relation to affordability, Notice to Quit/evictions showed a marked increase from pre-pandemic levels.

Joseph Rowntree Foundation research<sup>172</sup> also shows that renters are faring worse than homeowners. A fifth of renters (20%) are worried about paying rent or mortgage over the next three months compared to one in ten (10%) of those buying with a mortgage. Joseph Rowntree has highlighted that the proportion of low-income renting households in arrears compared to those on higher incomes paints a worrying picture of a two-tier recovery. More than one in four (27%) of renting households with gross annual income under £25,000 per annum are in arrears with general household bills which is significantly higher than the 7% of households with gross annual income over £50,000 per annum. In terms of rent arrears 8% of lower-income households report being in rent arrears, versus 1% of

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<sup>168</sup> StepChange (April 2021) <https://bit.ly/3zQRKbW>

<sup>169</sup> Ibid

<sup>170</sup> StepChange (March 2021) <https://bit.ly/2UraBtH>

<sup>171</sup> Dr Martina McAuley, Housing Rights (November 2020) <https://bit.ly/3zNXisi>

<sup>172</sup> Joseph Rowntree Foundation (May 2021) <https://bit.ly/3d7hB5A>

households with income over £50,000. Statistics for Northern Ireland show that more women (23%) are private rented sector tenants compared to men (16%).<sup>173</sup>

## 1.5.2. Women and Debt

For many reasons women were already more likely to be in debt even before the pandemic struck. As previously stated, women are more likely than men to claim social security benefits, more likely to be in low-paid, part-time and insecure work, more likely to be providing care for children and other family members and more likely to have to make up for cuts to services through unpaid work. Women have lower financial wellbeing, have fewer retirement plans and smaller pension pots than men as well as being less likely to save regularly (56%) compared to men (63%).<sup>174</sup> More women (52%) have never put their money into an investment product compared to 37% of men.<sup>175</sup>

Borrowing and debt is far from gender neutral. As women's incomes are generally lower over their lifetimes this leaves them vulnerable to short-term financial problems or income shocks making them more likely to have to rely on borrowing and debt to make ends meet. Many women who are struggling financially on benefits and in low-income work are vulnerable to high-cost credit and in some cases this can lead to a never-ending spiral of debt which they struggle to escape from.

Pre-crisis ONS data<sup>176</sup> shows that women are consistently more vulnerable to poverty and debt. 35% of women and 29% of men reported it was a struggle to keep up with bills some or most of the time, 26% of women and 23% of men said they ran out of money by the end of the month, and 29% of women and 25% of men said they would not be able to make ends meet for a month or less if they lost their main source of income. Local research by the Women's Regional Consortium<sup>177</sup> on women's access to lending in Northern Ireland showed that 87% of the women involved in the research needed to borrow money in the last three years. Most had little or no savings and many had no ability to save due to low income or living on benefits.

Single parents are likely to be particularly affected by financial hardship and debt. In Northern Ireland the majority of single parent households are headed by a

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<sup>173</sup> Northern Ireland Housing Executive <https://bit.ly/3j6tBbh>

<sup>174</sup> Money & Pensions Service, <https://bit.ly/3gUWogo>

<sup>175</sup> Ibid

<sup>176</sup> Office for National Statistics (August 2020) <https://bit.ly/3zQHHn7>

<sup>177</sup> Women's Regional Consortium (February 2020) <https://bit.ly/3xOMcwr>

woman (91%).<sup>178</sup> Gingerbread research<sup>179</sup> shows that few single parents have a financial buffer with almost six in ten (59%) rarely or never saving money while approximately half view keeping up with their bills and credit commitments as at least a 'constant struggle.' Gingerbread found that most single parents had to make cutbacks or borrow money to keep up with their bills and credit commitments, whether unexpected or routine, and to fund essential or standard items.

Debt advice agencies also report that single parents may be particularly vulnerable to debt as they are more likely to be in low-paid and part-time work as well as disproportionately impacted by welfare reform and increases in the cost of living. StepChange reports that single parents are over-represented amongst their debt clients compared to the UK population. In 2019, 24% of their clients were single parents, compared to 6% of UK households.<sup>180</sup> In Northern Ireland Christians Against Poverty (CAP) reported that 27% of their clients are single parents (25% of which are single mothers).<sup>181</sup>

As already outlined the pandemic is having an impact on financial wellbeing and debt levels and worryingly the impact is likely to be felt more by women. Women have been more impacted by job losses as a result of the pandemic as they are concentrated in the sectors which have been most affected by the crisis including retail, hospitality and travel. Research has shown that women were about a third more likely to work in a sector that is now shut down than men with 17% of female employees in such sectors compared to 13% male.<sup>182</sup>

Many families will have struggled to meet the additional living costs associated with being at home during lockdown particularly those on the lowest incomes. It is also clear that many will struggle once job support and temporary forbearance measures are withdrawn. Many will have borrowed to get by and those who have had payment holidays or bills suspended during lockdown will face high interest rates and the potential for spiralling debts.

Research by the TUC on the impact of the pandemic on household finances shows that women were more likely to report a drop in disposable income than men (41% compared to 34%), women were more likely to be cutting back on spending as a result of the pandemic (36% compared to 31%) and women were slightly more likely than men to report higher levels of debt (23% compared to 20%).<sup>183</sup> StepChange research also shows that 30% of women report being negatively affected financially by the pandemic compared to 26% of men.<sup>184</sup> Locally, research

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<sup>178</sup> Ronan Savage and Dr Raymond Russell, Northern Ireland Assembly Research and Information Service Paper (September 2014) <https://bit.ly/35JxlaX>

<sup>179</sup> Gingerbread (May 2019) <https://bit.ly/3xMMO60>

<sup>180</sup> StepChange, Press Release, <https://bit.ly/3jce7mh>

<sup>181</sup> Christians Against Poverty (April 2019) <https://bit.ly/3xLzBKE>

<sup>182</sup> Robert Joyce and Xiaowei Xu, Institute for Fiscal Studies (April 2020) <https://bit.ly/3d4w566>

<sup>183</sup> TUC (February 2021) <https://bit.ly/2TIXPSI>

<sup>184</sup> StepChange (June 2020) <https://bit.ly/3A0pLqn>

by NISRA showed that slightly more women (13.6%) than men (11.7%) reported having to borrow more money/use more credit than usual since the Covid-19 outbreak.<sup>185</sup>

StepChange research<sup>186</sup> has shown that COVID-19 has had a negative impact on single parent's household finances compared to couple parents. Half (49%) of single parents reported taking on more debt since the pandemic while 13% had less debt compared to 44% of couple parents who had taken on more debt and 16% who had taken on less debt. The average amount of debt held by single parents increased by around 15% during the pandemic compared to around 8% for couple parents. 22% of single parents reported that temporary increases in the cost of living had negatively impacted their household finances compared to 15% of couple parents.

It is clear that for a variety of reasons women are more likely to experience debt and the pandemic has worsened the situation particularly for lone parents and those on the lowest incomes. Many will have got into debt or further into debt because of the pandemic and will struggle to meet their existing debt repayments both coming out of lockdown and long into the future. Action is therefore needed to provide protection against financial hardship and debt particularly for those groups who have been most impacted.

### 1.5.3. The Social Security System and Debt

Research shows that over half those in problem debt (54%) receive support through the social security system<sup>187</sup> and 43% of those receiving social security support have used credit to pay for essentials which is a key risk factor in developing debt problems. This StepChange research also shows that a quarter of all people in Britain who receive Universal Credit are facing very serious debt problems. This figure is three times the rate in the general population (8%) and (11%) more than those receiving legacy benefits (14%). Two thirds of StepChange clients say being on Universal Credit has made it harder for them to budget and manage their financial situation.

As Universal Credit will be the main benefit claimed by those who have lost their jobs, or who have suffered reduced incomes as a result of the pandemic, it is clear that existing problems with this benefit could also lead to debt problems - see section 1.4.1.

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<sup>185</sup> NISRA <https://bit.ly/3gZqPlj>

<sup>186</sup> Gingerbread & StepChange (February 2021) <https://bit.ly/3d63ILG>

<sup>187</sup> StepChange, 'Problem Debt and the Social Security System' (January 2020) <https://bit.ly/3zQlQuV>

Research by the Joseph Rowntree Foundation and Save the Children found that 60% of families on Universal Credit and Child Tax Credits have been forced to borrow money since the start of the crisis with many relying on payday loans or credit cards.<sup>188</sup>

Citizens Advice reports<sup>189</sup> that in a survey of those who applied for Universal Credit as a result of the Coronavirus outbreak, more than half (53%) have faced hardship during the five week wait for their first payment. The five-week wait for Universal Credit has been described as “a real shock for people navigating the benefits system for the first time” by a welfare adviser in Citizens Advice in evidence to the Work & Pensions Committee. The five-week wait has been widely criticised since Universal Credit was introduced putting an enormous strain on people both financially and emotionally.

Research by the Resolution Foundation<sup>190</sup> shows that some 45% of families who were new to claiming Universal Credit (their claim had begun in or after March 2020) said their disposable income (including their Universal Credit payments) had fallen by at least a quarter from its pre-pandemic levels. At least 34% of new Universal Credit families had seen income falls of more than 40%. One in five Universal Credit families (21%) have fallen behind on their essential (non-housing) bills during the crisis. Among Universal Credit families whose claims pre-dated the crisis one in four (24%) were also behind on their bills. 31% of all Universal Credit families in the Resolution Foundation survey said they were more in debt now than in February 2020 compared to just 13% across all families.

#### 1.5.3.1. Discretionary Support

Changes to the Social Fund as a result of welfare reform mean that there is less help available through the social security system for those with extreme, exceptional or crisis situations. Since the Social Fund has been replaced by Discretionary Support there has been a weakening of this safety net for the most vulnerable borrowers meaning that it no longer provides the support it once did. Restrictive eligibility conditions including an income threshold and limits on the number and amount of debt a person can have through Discretionary Support have reduced expenditure on these awards.

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<sup>188</sup> Joseph Rowntree Foundation and Save the Children, ‘Nearly two thirds of families on Universal Credit forced into lockdown debt nightmare’ (June 2020) <https://bit.ly/3j7Pg2D>

<sup>189</sup> Citizens Advice, Press Release: ‘Coronavirus claimants facing further hardship in wait for Universal Credit’ (10 June 2020) <https://bit.ly/3j30GF2>

<sup>190</sup> The Resolution Foundation, ‘The Debts that Divide Us’ (February 2021) <https://bit.ly/3xJOVYI>



The Northern Ireland Audit Office (NIAO) report on Welfare Reforms in Northern Ireland<sup>191</sup> showed that between 2014-15 and 2017-18, the number of grants and loans awarded has declined from 115,000 to 47,000, a reduction of 60%. As a result, annual expenditure has also reduced from £27 million in 2014-15 to £11 million in 2017-18. The Department for Communities explained that the reduction is due to the criteria for loans and grants becoming more stringent. This has the potential to push more people into the path of expensive lenders.

### 1.5.3.2. Government Debts

60% of all Universal Credit claimants, some 1.5 million people, are living on less than the standard rate of Universal Credit because they are paying back various forms of benefit debt.<sup>192</sup> About half of those are repaying an advance payment (under current rules they must pay it off in the first year though this will change in October 2021 when they will be given 24 months rather than 12 to repay).

Some 30% of all claimants are receiving larger deductions than that to repay past benefit debt. Almost a fifth of Universal Credit claimants are having 30% or more of their standard allowance deducted. The largest single element of this debt relates to tax credits.<sup>193</sup> This repayment of debt is likely to become an even bigger issue for Universal Credit as more former tax credit claimants move on to the benefit.

The Trussell Trust food bank has reported that almost half of people at food banks have money taken by the government from their benefit payments during this economic crisis.<sup>194</sup> Their figures show that 47% of households using their food banks owed money to the Department of Work and Pensions (DWP) due to loans and overpayment of benefits. This compares to 37% at the start of the year before the pandemic hit. 73% of households on Universal Credit at food banks over the summer were repaying an advance payment to the government.

Local figures available through a Northern Ireland Assembly Written Question<sup>195</sup> show that there were 121,083 Universal Credit statements of award during January 2021 and 33,684 of these statements (27.8%) had deductions applied to the award (including for example tax credit or other benefit overpayments, repayable loans and third party deductions).

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<sup>191</sup> Northern Ireland Audit Office, 'Welfare Reforms in Northern Ireland' (January 2019) <https://bit.ly/3zRki4T>

<sup>192</sup> Nicholas Timmins, Institute for Government, 'Universal Credit, Getting it to Work Better' (March 2020) <https://bit.ly/3gYs7NB>

<sup>193</sup> Ibid

<sup>194</sup> The Trussell Trust, 'Lift the Burden, Tackling the Government Debts facing people at Food Banks' (December 2020) <https://bit.ly/2UkUT3d>

<sup>195</sup> AQW15195/17-22 asked by Gerry Carroll MLA, answered 04/03/2021 <https://bit.ly/3zPvb7i>



Research by the Joseph Rowntree Foundation<sup>196</sup> found that problem debt and arrears on bills was common among those experiencing destitution. These were largely 'public sector' debts owed to the DWP, local authorities and utility companies and they mainly pre-dated the COVID-19 pandemic rather than being triggered by it. The research stated that the temporary halting of most debt-related deductions from social security benefits during the lockdown was vital in easing the pressure on many destitute households.

This is a serious issue for many social security claimants. Taking money off social security payments to repay these debts makes people struggle to afford the essentials, drives them into poverty and further debt and impacts on their mental health.

### Recommendations for changes to protect people from financial hardship and getting into problem debt:

- Households struggling with arrears and debt should be provided with strong protections against unaffordable repayment demands and housing insecurity. Government should consider introducing further protections on a range of credit repayments, benefit debt repayments (including Advance Payments) and in housing (including mortgage holidays, increases in Local Housing Allowance rates, extending notice to quit periods, etc). This would provide a sustainable route back to normality over a longer-term period for households whose incomes may recover but who are left with a backlog of debt.
- No-one should lose their home as a result of the pandemic. Government should provide an emergency support package to help private renters clear rent arrears as a result of the pandemic and prevent people losing their homes. This could include grants, no-interest loans and protection from eviction.
- Increase the funding available for Discretionary Housing Payments (DHPs) and change how they are administered to provide greater levels of support for renters in financial difficulties and arrears.
- Increase Local Housing Allowance rates in line with local rents for those in receipt of Housing Benefit or the housing costs element of Universal Credit to provide greater financial support and ensure they keep pace with increases in housing costs.
- Flexible terms are needed once payment holidays end to prevent a 'cliff edge' for people who have to start paying back their debts. Government should work with stakeholders to develop a package of protections for those

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<sup>196</sup> Joseph Rowntree Foundation, 'Destitution in the UK' (December 2020) <https://bit.ly/3xlyJGA>

negatively affected by COVID-19 which allows them a safe route out of difficulty including allowing for repayments to be made at an affordable level without increasing their debt or incurring poor credit ratings.

- Many people will have turned to high-cost credit to make ends meet since the crisis began. Financial support through the benefits system and through crisis payments is central to preventing crisis borrowing but the need for alternatives to high-cost credit is more pressing than ever. Government should work with charities, financial institutions and other investors to introduce or underwrite the development of schemes to provide low or no interest loans to help those on the lowest incomes access affordable credit. This should include support from the government for a no-interest loan for essential items in the form of a reformed Social Fund which would benefit many people on the lowest incomes.
- Providing short-term relief on debt repayments and evictions is not enough and in many cases will simply defer arrears until a later date. Both StepChange and Citizens Advice have recommended that in order to be effective in tackling the debt crisis as a result of the pandemic, the government must provide financial support. StepChange have recommended the establishment of a central fund to enable grants for those households negatively impacted by COVID-19 to address arrears and debts accumulated to pay for essential costs during the crisis. The fund should be reserved for the worst affected where realistic chances of repayment may not exist. Citizens Advice have recommended one-off or time-limited financial support for arrears built up due to COVID-19 with the cost of relief shared fairly between government, creditors and individuals. This could include grants, payment matching or government-backed loans.
- As previously recommended in Section 1.4 a series of reforms to Universal Credit are needed to protect people from financial hardship and debt including ending the five-week wait, converting Advance Payments to grants rather than loans or in Northern Ireland making non-repayable grants from the Contingency Fund to those claiming Universal Credit for the first time through the Contingency Fund.

*(continued on next page)*

- Provide greater financial resilience for those on the lowest incomes by making the £20 increase to the standard allowance of Universal Credit permanent and extending it to legacy benefits.
- Government should also consider providing greater support for low-income families with children, particularly for lone parents, whose finances have been so impacted by the COVID-19 pandemic. As previously recommended in Section 1.4 this could include increasing the level of Child Benefit, adding an extra amount to the child element within Universal Credit and Tax Credits and introducing a new Child Payment for those in receipt of free school meals.
- As previously recommended in Section 1.4 existing welfare mitigations in Northern Ireland should be extended and strengthened to include new challenges such as Universal Credit (which has seen significant increases in claimant numbers as a result of the pandemic). This would help to ensure that those on the lowest incomes did not slide deeper into poverty and debt.
- Government should increase the budget for Discretionary Support, remove the income ceiling, extend the eligibility criteria and make more payments as grants rather than loans so that more people can access this help.
- Government must address the issue of historic benefit debt repayment to reduce the impact of this debt that is leaving many Universal Credit claimants living on less than the standard allowance and therefore on extremely low incomes. Government should either write off this debt or significantly slow down repayments.
- Sufficient funding should be made available to debt advice agencies to not only continue with their free debt advice services but also to expand in order to meet increasing demand as a result of the pandemic.
- Government should acknowledge and support the role of community-based women-only provision in addressing women's poverty and financial vulnerability in disadvantaged and rural areas. This should include a commitment to increase and provide longer-term funding for grassroots women's organisations to enable them to continue and develop the vital services they provide to financially vulnerable women and their families.

## 1.6 Childcare

“It has directly affected my finances as I could not go back to work after having my son. Not only was I too afraid and childcare became even more scarce than before, I also have a 13 year old daughter who could not be placed in childcare so it was impossible. A Lot of relationships became broken and also fear stopping family connecting especially as there was a lack of everyone able to get on zoom. I became suicidal at one point and have heard many stories of people feeling this way also including children.”

“It has been isolating and stressful. Coping with a child with autism while being a key worker has taken its toll.”

“Children home more you use more electric, gas, food”

“Food and the cost of childcare has increased, wage has remained the same, my child is having to do without.”

“In the second lockdown when schools closed, we had to pay for childcare to allow us to work - key workers were allowed to send children into school but as we weren't key workers, we had to pay £35 per day.”

“I had no access to childcare for 4 months over the pandemic as creche was closed & put pressures on my work & relationship.”

“I was on maternity during the first lockdown, couldn't get a childcare place, had to leave my home and go to my parents to get childcare support.”

“My husband and I worked from home during the first lockdown and took care of the children at home, and I home-schooled them both. During the second lockdown my husband went back to the office, and I cared for and home-schooled (and worked my 31 hours per week) from home. We saved money on private after-school care, but it was tough on me.”

“As a childcare provider I struggle to meet family's needs for childcare due to ratios and restrictions here in N. Ireland.”



“My in-laws previously provided childcare for me pre-covid but unfortunately, my father-in-law had to shield during the first year of the pandemic so as the only parent working from home, I held the main childcare responsibilities. Trying to home-school (with very little support from the school), entertain, feed the children and keep them safe whilst trying to work from home was extremely difficult. It meant I had to start my working day slightly later which then went on longer into the evening which made it more difficult to switch off and sleep and then before you know it the next day the cycle continued.”

“Unclear message and being made to feel as a frontline worker we should not be sending the child to school.”

“While I do not have children, almost all my friends who do have essentially vanished from my life. I think this is due to the burden of childcare falling to them instead of their children's fathers. Extremely disheartening to see this is still the case today.”

“There has been a little bit of flexibility for working parents but mostly just expected to get on with it and it was very tough to get schoolwork done and do proper work during the day so a lot of night working.”

“I have struggled with childcare due to schools reducing services as I relied on the breakfast clubs and afterschool clubs to allow me to work my full hours.”

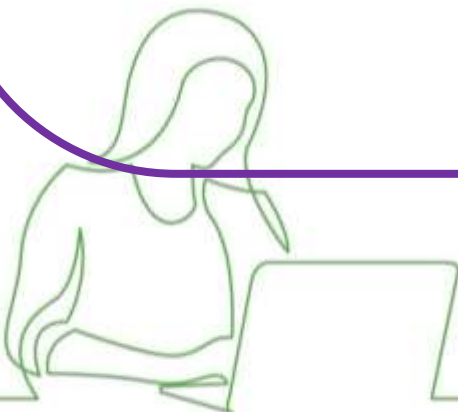
“I did not want my children at school during lockdown but had to go in to teach other key workers' children. We had no choice.”

The childcare bill has gone up, the cost of inflation. My wages haven't gone up, because I'm in probation in my new job, so not eligible for the increase everyone else gets.”

“My child with autism depended on me even more during lockdowns. We had no support. We had to manage his home learning while working full time.”

“I am a child minder, so the main impact was not being able to look after the children I had for years and so less children meant less money.”

- Testimonies from WPG Primary Research



## 1.6.1 Childcare in Northern Ireland

The Women's Policy Group supports the [Childcare for All Campaign](#) and believes that universal, affordable, high quality childcare provision, which meets the diverse needs of all children and families, is essential for economic recovery in Northern Ireland. This is fundamental to facilitating women's participation in and ability to access paid work, education and training and to progressing gender equality in paid and unpaid work.

Like many other aspects of society, great inequalities existed that have now been exacerbated by the COVID-19 pandemic, and childcare is no exception to this. Many women faced stark choices between their work and childcare commitments, as school closures and limited access to childcare settings created significant challenges for families, particularly during the first few months of the pandemic when childcare was closed to all except the children of key workers and vulnerable children. Research has shown that women are more likely to care for children and other family members, either in addition to their work, or instead of paid work. This can apply particularly to parents in certain situations, for example, to parents of a child with a disability, as childcare options are extremely limited even in ordinary circumstances or to those in lone parent households. This increases the risk of poverty and is also likely to have health impacts for parents.

Particularly in the initial lockdown period, we know anecdotally of families who faced stark choices between losing employment or presenting health risks to grandparents where no other childcare was available. The risks are increased for women who are key workers in low-income positions in care, cleaning and retail, or other essential positions such as teachers. The initial eligibility for registered childcare was restricted only to certain key workers as defined by the Department of Health meaning some key worker parents were forced to risk being infected due to the nature of their work, or were unable to work. Economically, we know that gender segregated markets in Northern Ireland sees women overrepresented in the hospitality and leisure sectors and subsequently, women face disproportionate ramifications of the health and economic crisis.

Whilst the Job Retention Scheme, amendments to Universal Credit and other benefits and expansion of the definition of key workers – and eventual removal, with childcare open to all - did provide a degree of support for some women, a longer-term plan is required to ensure all women affected by job losses can provide for themselves and their families both now and in the recovery phase. To do this, access to affordable and accessible childcare provision is crucial. As Northern Ireland transitions to recovery planning, with the roll out of the COVID-19 vaccination programme, there have been welcome steps taken to ease the COVID-19 lockdown.

However, it has been both concerning and disappointing that the issue of access to childcare has been noticeably absent from key policy and strategy documents including the first NI Executive Roadmap to recovery; an alarming omission that was also the case in the UK and Ireland recovery roadmaps. Furthermore, the Economic Recovery Action Plan setting out a range of actions to help kick-start economic recovery failed to mention childcare as a central part of our economic recovery from COVID-19. There was also limited recognition of how the recovery plan can support women<sup>197</sup>. It was equally disappointing that the '10X Economy: An Economic Vision for a decade of innovation'<sup>198</sup> based on creating a change in how we think about our economy, did not include childcare. This is particularly concerning given the report's recognition of the 'challenging levels of economic inactivity' – it's vital that the key role of affordable and accessible childcare in helping parents to get into and stay in work is considered. Access to childcare is a critical part of our economic infrastructure and it is necessary for people to be able to return to workplace settings, as well as for those working from home, and a key component to any pathway to recovery. It will not be possible to secure a sustainable, meaningful economic recovery that is experienced by everyone without childcare being treated as a major contributing factor<sup>199</sup>.

It is essential for governments to look ahead to the future sustainability of childcare and consider what policies are needed to create a strong, secure childcare infrastructure that supports the rebuilding of the economy. Research suggests that as many as 10,000 childcare settings across the UK may be unable to reopen after COVID-19, as roughly 75% blamed financial difficulties and 25% referenced fears of parents being able to afford or need the childcare they had previously used<sup>200</sup>.

Positively, the Northern Ireland Executive accepted the need to provide financial support for the childcare sector at this unprecedented time, allocating approximately £32 million in support up to the end of March 2021 in a series of schemes rolled out by the Department of Education<sup>201</sup>. This funding has been critical to the sustainability of the sector, and while there were initial issues such as the slow process of issuing funds and insufficient amounts allocated to childminders, these were rectified following feedback from the sector, and the support has been broadly welcomed. However, many continue to face ongoing

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<sup>197</sup> Department for the Economy, 'Economic Recovery Action Plan' (25 February 2021) <https://bit.ly/3d1R89x>

<sup>198</sup> Department for the Economy, 'A 10x Economy' (11 May 2021) <https://bit.ly/3zTizvO>

<sup>199</sup> Childcare for All Campaign Statements on Childcare and COVID-19: [Childcare for All Campaign – COVID-19 Statement \(childcareforallni.com\)](#) (May 2020), [Childcare for All Campaign – Childcare critical to families and economy \(childcareforallni.com\)](#) (June 2020)

<sup>200</sup> See: Richard Adams (April 2020), 'UK childcare industry 'crushed' by coronavirus crisis', The Guardian, (available online) <https://bit.ly/3xOyUjw> see also: Christine Berry, (May 2020), 'If we need childcare to reopen the UK economy, why is it so undervalued?', The Guardian, (available online) <https://bit.ly/3j6w4Cz>

<sup>201</sup> Department of Education, 'Weir announces further measures to support childcare providers' (February 2021) <https://bit.ly/3gWgw1E>



challenges including increased expenditure and workforce issues in relation to recruiting and retaining staff. While these issues are not new, and many existed long before the pandemic, it has certainly exacerbated them meaning that, without longer term investment, providers will continue to struggle with their sustainability with the result that parents may face further challenges in accessing and affording the childcare they need. At the time of writing, it is unknown if any further financial support will be made available to childcare providers in the short to medium term, but it's clear that a long-term strategy to support the childcare sector is urgently needed.

Research from the Nevin Economic Research Institute found that, despite the fact that 40% of families in Northern Ireland (around 350,000 workers) have dependent children, little consideration was given in the early months of the pandemic to the misalignment between the reopening of many sectors of our economy while childcare options remained limited<sup>202</sup>. As highlighted under the gender segregation and care work section of this pillar, many families were forced to rely on support from other family members for childcare to enable them to access the workforce. In the most recent lockdown, from January 2021 in Northern Ireland no restrictions were placed on parents' ability to access registered childcare, recognising the vital role of childcare in enabling parents to work – including those working from home. While schools reverted to virtual learning to all but the children of key workers and vulnerable children, registered childcare settings have remained open, providing a vital service.

Research from the Fawcett Society, UK Women's Budget Group and academics found that by May 2020, half of parents with young children were struggling to make ends meet and women key workers were facing significantly more anxiety and under pressure to work<sup>203</sup>.

Additional findings on parents and key workers' concerns include:

- Almost half (48%) of parents say they are worried about how they will pay their rent or mortgage,
- 57% of parents of under-11s believe they will come out of COVID-19 with more debt than before,
- 32% of women, compared to 15% of men, say their employer is pressuring them to continue to work outside the home,
- 57% of women working outside the home say that they cannot afford to stay at home; compared to 34% of men,

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<sup>202</sup> See: Dr Lisa Wilson, (May 2020), 'Employment and access to childcare during the Covid-19 crisis', Nevin Economic Research Institute, (available online): <https://bit.ly/2UkW8PV>, p.3.

<sup>203</sup> O UKWBG et. al., (May 2020), 'Half of parents with young children struggling to make ends meet', UK Women's Budget Group, Fawcett Society, QMUS and LSE, (available online): <https://bit.ly/3h1p86Y>

- 41% of women working outside the home say they have additional workload due to COVID-19, compared to 28% of men.

The economic impact of COVID-19 has been severe, and failure to invest longer term in our vital childcare infrastructure in Northern Ireland will exacerbate many of the concerns highlighted above as we move further out of lockdown and more women either readjust to work outside the home, or struggle with unemployment. The childcare sector in Northern Ireland continues to face challenges, which may in turn mean that barriers for women accessing work, education and training will remain in place.

In 2020, [Employers For Childcare](#) conducted two surveys examining childcare in Northern Ireland – one prior to the pandemic, in February and March 2020, and one in September 2020, following months of lockdown and as children started to move back into school. The findings provide a vital insight into the childcare challenges of 2020 – those which it is clear existed prior to the COVID-19 pandemic, and those that have been exacerbated by it.

In the first few months of the pandemic – April to June 2020, childcare was closed to all but the children of key workers (as defined by the Department of Health), and a lockdown restriction was placed on inter-household interactions, ensuring that access to childcare was a real challenge in the initial months of the pandemic for parents. As a result, 64% of respondents said they experienced a change to their working arrangements during the pandemic, whether that meant working from home, changing their hours of work or being placed on furlough.

Where childcare was impacted, the effect on parents in terms of their work was clear:

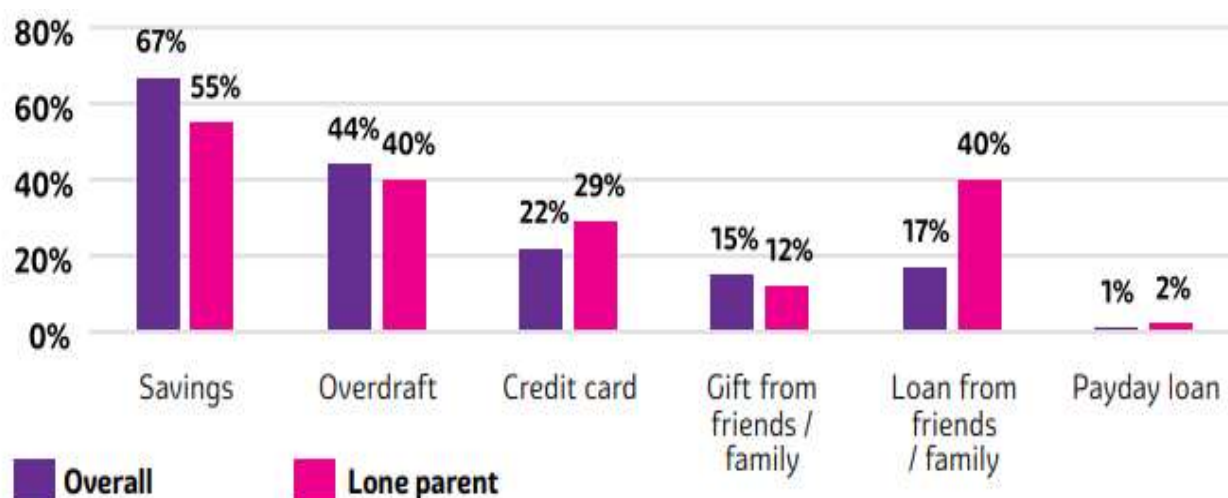
- 18% had to use unpaid leave or annual leave to manage childcare – rising to 20% of mothers, and 31% of lone parents,
- 28% had to work outside of their normal working hours to manage childcare – rising to 31% of mothers and 38% of lone parents,
- 57% had to balance working alongside childcare responsibilities - rising to 61% of mothers and 82% of lone parents,
- 2% had to leave work entirely - rising to 3% of mothers and 8% of lone parents.

Looking at the broader affordability and accessibility of childcare for parents and childcare providers, the survey results show:

- For a third of families, the childcare bill is the largest monthly outgoing – more than their mortgage or rent,
- 44% reported regularly using means other than their income to pay for childcare including savings, overdrafts, credit cards and even payday loans,
- 50% of parents report that their family is ‘going without’ in order to meet their childcare costs,
- Almost one third of childcare providers (32%) reported a decrease in their income in the previous year, with 72% having either just broken even or made a loss.

The figures above are extremely concerning, especially for lone parents in Northern Ireland. Figure 28 below from the Northern Ireland Childcare Survey 2020 shows the various methods that parents who are struggling may resort to pay their childcare bill, other than their salary, with lone parents in particular being more likely to resort to a credit card or a loan from friends or family:

Figure 28: Means of Paying for Childcare Bill

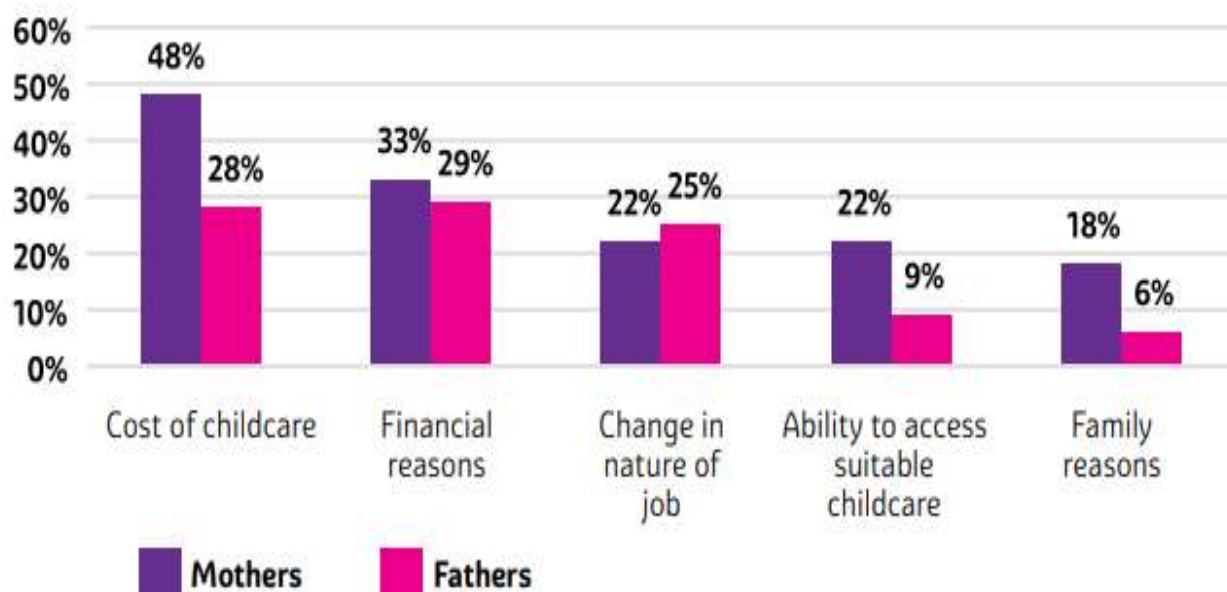


Source: *Employers for Childcare, Northern Ireland Childcare Survey (2020)*, p.42

Employers For Childcare research also found that in the last year, over half (52%) of parents had experienced a change in their working hours. 12% of parents had either decreased their hours of work or left work altogether. Across households, mothers were more likely to experience a change in their working hours, 17% of mothers decreased their hours of work or left work altogether compared to just 4% of fathers. Similarly, mothers were more likely to report a change in their working patterns. Where there was a change, we asked respondents to identify

the reasons for this – see figure 29 below which highlights that the most common reason was linked to the cost of childcare, with almost half of mothers (48%) citing this as a reason, compared to 28% of fathers. Almost a quarter of mothers linked a change in their working hours to the ability to access suitable childcare, while only 9% of fathers attributed this reason to a change in their working hours.

Figure 29: Reasons for Changes to Working Patterns



Source: *Employers For Childcare, Northern Ireland Childcare Survey (2020)*, p.46

A recent TUC report on ‘Forced out: The cost of getting childcare wrong’<sup>204</sup> provided some further evidence and recommendations on measures to prevent widespread and unnecessary job loss among working parents. In particular, this report raised the grave concerns of

‘Not having enough childcare for working parents and how the risk of this reversing decades of progress women have made in the labour market, and increasing the gender pay gap - as well as having a damaging impact on our national economic productivity’<sup>205</sup>

The WPG believes that childcare should be treated as a key part of our economic infrastructure and a public good, rather than a private family matter that is preventing many women from working. Some relevant statistics on childcare,

<sup>204</sup> TUC (June 2020), ‘Forced out: The cost of getting childcare wrong’, TUC, (available online) <https://bit.ly/3d9kp2a>

<sup>205</sup> Ibid, p.2.

flexible working and gender in England and Wales that follow patterns in Northern Ireland include:

- 54,000 women per year are forced out of work due to pregnancy and maternity discrimination<sup>206</sup>
- Five years after a child's birth, only 13% of mums have increased earnings compared to 26% of dads<sup>207</sup>
- 56.2% of mothers had to make a change to their employment due to childcare, compared to 22.4% of fathers<sup>208</sup>

In particular, we would like to reference TUC concerns<sup>209</sup> that:

“as the job retention scheme winds down and employers begin to make decisions about job losses, women with caring responsibilities and those returning from maternity leave are at higher risk of being unfairly targeted for redundancy and dismissal due to difficulties with their childcare. The Equality and Human Rights Commission have already warned that pregnant women and new mums face being made redundant during the crisis due to discrimination. Our affiliated unions are also hearing from mums returning from maternity leave who are stuck without any childcare at all, as the limited places on offer are to children already in a setting prior to Covid-19.

BME and disabled women also face intersecting barriers to equal participation in the labour market that prevent them from accessing and thriving in the labour market fairly and additional difficulties accessing childcare could intensify and damage the discrimination they face [...] the government must also do their part to ensure employers are compliant with their obligations under existing legislation such as the Public Sector Equality Duty and strengthen the rights of pregnant women, those on maternity leave and with caring responsibilities to ensure their jobs and incomes are protected.

Employers must be given clear messages from the government, highlighting existing guidance, that redundancy procedures and the criteria used must not unlawfully discriminate against workers with protected characteristics.”

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<sup>206</sup> ONS (2019) Families and the Labour Market found in (n51), p.5.

<sup>207</sup> Ibid

<sup>208</sup> Ibid

<sup>209</sup> TUC (June 2020), 'Forced out: The cost of getting childcare wrong', TUC, (available online) <https://bit.ly/3d9kp2a>

It has also been reported that since the crisis began, mums are 1.5 times more likely than dads to have quit or lost their job or been furloughed<sup>210</sup>. The above statistics from the TUC coupled with the Northern Ireland specific data from Employers for Childcare, ICTU and the Nevin Economic Research Institute paint a stark picture of the growing unsustainability and crisis of childcare across the UK. This is a UK wide issue that needs urgently addressed through devolved mechanisms in any COVID-19 recovery planning.

For workers in the childcare sector who have worked tirelessly on the front line during the pandemic, to seek to minimise the negative effects on the learning and development of children, major concerns relating to the attitudes of undervaluing care work through the underinvestment and gender segregation in the sector. The Low Pay Commission found pay to be low in the childcare sector<sup>211</sup> and almost half of all childcare workers earn below the real living wage (48%). This is a significantly higher figure than the proportion of all workers who earn below the real living wage (30%). More worryingly, the median annual gross pay for childcare workers is almost half of that compared to the average of all workers (£11,028 compared to £21,254). This is related to the fact that not only are childcare workers likely to earn significantly less per hour worked than the average employee, but they are also more likely to work on a part-time basis.

There is little evidence that experience, skills or additional qualifications will reap much reward in the childcare sector with much smaller gaps between the lowest paid and the highest paid in the sector. Specifically, the median wage at the 10th percentile is £7.36, whilst the median wage at the 80th percentile is £10.24 per hour. Owing to sample size constraints it is not possible to get an estimate at the 90th or higher percentiles. A ratio of around 1.4:1. Comparing this to workers as a whole the median wage at the 10th percentile is £7.50, and £18.27 at the 80th percentile. A ratio of around 2.5:1.

If the goal of childcare policy is to make such a service more affordable and available, this cannot be at the expense of pay and conditions for workers in the sector. If childcare is to become an important and valued service, then the workers who provide that service also require to be valued. The current situation regarding pay and job quality shows that workers are underpaid and undervalued. To bring workers into the childcare sector, to maintain staff morale and reduce turnover, there needs to be significant action in properly valuing childcare workers and rewarding skills and experience.

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<sup>210</sup> 2 IFS (2020) 'How are mothers and fathers balancing work and family under lockdown?', (available online) <https://bit.ly/2UA071N>

<sup>211</sup> Low Pay Commission (2020) [National Minimum Wage \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

Unionisation and collective bargaining or a system of sectoral agreements provide a mechanism to introduce a skills and wage infrastructure that could improve job quality. Previous research has shown the role that unions have historically played in introducing specificity in occupations and skills recognition. Furthermore, devolved bargaining structures such as works councils in Germany implement sectoral agreements at the ground level, have also been shown to give the greatest premium to low paid workers.

The evidence highlighted throughout this section on childcare is stark, and it is clear that a gendered approach to dealing with childcare is urgently needed. Northern Ireland still does not have a childcare strategy, despite commitments in the New Decade, New Approach agreement. The childcare sector is one facing a sustainability crisis and deep gender segregation. Focus needs to be placed on creating greater diversity within the sector to support the needs of BME families and children with disabilities, to remove stereotypes of working in childcare being seen as a “woman’s job”, and to ensure that any provision in place is one that supports the needs of women, families, children, providers and wider society.

In an important development since the start of the pandemic, a new [All Party Group on Early Education and Childcare](#) was established at Stormont in the summer of 2020. One of the group’s first meetings was themed on the role of childcare to our economic recovery from COVID-19, with a focus on maternal employment and the gendered impact of COVID-19<sup>212</sup>. Presentations from Dr Corina Miller (Research Fellow, Administrative Data Research Centre NI), Tina McKenzie (Managing Director, Staffline Ireland and Policy Chair, FSB NI) and Rachel Powell (Women’s Sector Lobbyist, Women’s Resource and Development Agency) highlighted how accessible and affordable childcare is fundamental to facilitating women’s full and equal participation in both our economy and society. It was emphasised throughout the meeting that, without this provision, women do not have equal access to paid work, education and training, and employers do not have access to the full range of talent for their workforce. The gendered impact of COVID-19 was also demonstrated. It was noted that the childcare workforce can be predominantly female, and it is important to ensure that their vital work is recognised through decent pay and progression. Looking ahead, the All-Party Group will be an important vehicle for securing progress on a Childcare Strategy for Northern Ireland.

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<sup>212</sup> See Employers for Childcare APG: <https://bit.ly/3j6wZD1>



## 1.6.2. The Women's Centres Childcare Fund (WCCF)

The Women's Centres Childcare Fund (WCCF) was established in April 2008 and followed on from the Children and Young Peoples Fund (C&YPF) as part of an emergency Departmental response to ensure key childcare services provided in 14 women's centres operating in disadvantaged communities were kept open pending an Executive decision about their future funding.

WCCF enables Women's Centres to provide childcare places that are 100% supported for the most disadvantaged children and families. These sessional places (77,000 two-hour sessions) ensure that disadvantaged children have an opportunity to experience a childcare setting, to socialise, interact, play and learn in a supported environment.

Parents who avail of WCCF supported childcare also access a wide range of programmes available in their communities. Many of the services involve support to parents including: parenting skills, back to work programmes, advice services and health programmes. Therefore, WCCF enables the most excluded in disadvantaged communities to access support and engage in community development activities.

For some women (including ethnic minorities and lone parents) the prospect of increased economic participation can depend on the availability of appropriate integrated childcare and access to education/training opportunities at community level. A lack of appropriate integrated childcare and community education acts as a fundamental barrier to the engagement of socio-economically disadvantaged women in education, training and employment. This is the kind of integrated provision that is provided by WCCF and is so vital to these women and now even more so with the impact of the pandemic.

WCCF contributes to reducing child poverty, provides opportunities for parents (especially women) to access training, education and work and also to contribute to their communities thereby tackling disadvantage. As such the WCCF strongly aligns with a number of government strategies including the Child Poverty Strategy, the Anti-Poverty Strategy and the Gender Equality Strategy. It also aligns with one of the immediate priorities of the Executive: 'Delivering a fair and compassionate society that supports working families and the most vulnerable' as detailed in New Decade, New Approach.<sup>213</sup>

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<sup>213</sup> New Decade, New Approach, January 2020

Despite the importance of this childcare offering in tackling disadvantage and promoting equality WCCF continues to be administered on an annual basis and has been subject to Departmental cuts/austerity measures since 2012 which has seen the overall allocation reduced by just over 20% in that period. Progress on childcare provision in Northern Ireland must recognise the need for low cost/no cost childcare provision for marginalised women in disadvantaged and rural areas.

### Recommendations:

- Investing adequately, based on an informed assessment of realistic needs, to deliver a high-quality childcare infrastructure that is affordable for all to access, and providers to deliver.
- Fully implementing the CEDAW recommendations, noting the particular reference to Northern Ireland where we call on the Government to introduce a fully costed Childcare Strategy, underpinned by legislation, that meets the needs of children, parents, childcare providers and benefits the local economy.
- Work extensively with the women's sector and childcare sector in the development of a childcare strategy Northern Ireland.
- Ensuring all parents and childcare providers are accessing the financial help they are entitled to.
- Address the gender segregation of the childcare sector through the creation of sectoral agreements to provide a mechanism to introduce a skills and wage infrastructure that could improve job quality
- Promoting family friendly policies and practices across all sectors to reduce barriers to women accessing and progressing in the workforce.
- Government must recognise the case for properly sustaining childcare provision through the WCCF model on a ring-fenced, protected basis given the Fund's positive evaluation<sup>214</sup> in terms of need, impact and value for money.

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<sup>214</sup> Evaluation of Regional Support Arrangements for the Voluntary and Community Sector, Final Report, June 2015, DSD and DARD

## 1.7 Rural Women



“I live in a rural area with only 1 day care which had no spaces and the childminder couldn't look after my wee one because she was home-schooling 3 children of her own”

“While it is good not to have a shared space getting deliveries etc has been hard.”

“My mother is on life-long medication she requires daily. This means lots of visits to pharmacies back and forth - often with only 1 day or 2 days medication available or none and having to return. With long queues to collect outdoors in winter / Northern Ireland weather - this has been exhausting. I had covid in March 2020. I was expected back to work after 14 days - I was terribly ill with Covid for 13 days. I was in bed with a fever for over a week. I had two children at home with me. My employer begrudgingly allowed me an extra week off which I used from my statutory sick not coronavirus related as this was not allowed...

Working from home with two children recovering from this illness was an awful experience. I had a breakdown after 3 weeks which resulted in me being off work sick again. There is no support / clinic for me to go to with long covid symptoms which remain over a year later. There was no support whatsoever from GP or health services for me alone at home when I had covid and recovering. Nothing - They did not want to know. I felt like I was going to die at home with my children downstairs.”

“My rural community worked together to support locals - it was a very positive experience.”

- Testimonies from WPG Primary Research



### 1.7.1 Rural Women Economy – Context

Women in NI have not been afforded the opportunity to participate equally in progressing the country from a post conflict society to a peaceful society. This is having a negative impact on their social and economic development, particularly those already experiencing disadvantage, such as rural women. The onset of a global pandemic will undoubtedly exacerbate this existing inequality if Covid-19 recovery planning does not take active measures to acknowledge and redress this. It is imperative that our region has 'visible' women at decision-making level if a gender equal sustainable future is to be achieved.

Gender inequality is amplified for women in rural areas due to Access Poverty<sup>215</sup>. The accessibility of education, training, work and childcare provision and the cost and availability of public transport are factors in determining women's participation; particularly in rural areas<sup>216</sup>. Women in NI remain under-represented in public and political life<sup>217</sup> and rural women's participation in public and political life is further hindered by geography and distance from decision making spaces. Even recent welcome initiatives such as 'Women in Public Life' Programme<sup>218</sup> is based in Belfast and this is echoed in the location of the majority of public appointments; even within the wider women's sector rural women still need a stronger voice<sup>219</sup> and support: 'There are also stark inequities between Government funding for service delivery to women's groups between rural and urban (1.3% v 98.7%)'<sup>220</sup>.

NIRWN as the only dedicated rural women's network; provides the regional rural element of support to women through the Regional Support for Women in Disadvantaged and Rural Areas Programme (funded by DAERA Rural Affairs Programmes). The vision of this Programme is: 'That women living in disadvantage in both Urban and Rural will be provided with the specialist support they require to enable them to tackle disadvantage and fulfil their potential in overcoming the barriers that give rise to their marginalisation, experience of poverty and exclusion'.

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<sup>215</sup> Tackling Rural Poverty and Social Isolation, DAERA

<sup>216</sup> Rural Women's Manifesto Rural Women Speak NIRWN June 2015

<sup>217</sup> Women and Public Appointments in NI <https://bit.ly/2TlvMx1>

<sup>218</sup> See Politics Plus Women in Public Appointments Programme: <https://bit.ly/2UMGflv>

<sup>219</sup> Evaluation of the Regional Infrastructure Support Programme (Final Report, June 2015)

<sup>220</sup> Ibid

An independent Evaluation of this Consortium work<sup>221</sup> concluded that rural women needed additional financial support in this Programme:

‘The rural investment in proportional terms is not sufficient to animate and build critical mass versus urban interests (circa 20% of staff resources in the Consortium are linked to rural delivery i.e. two 25 hour posts in NIRWN) which is out of step with the proportion of rural dwellers in NI’

As a result of no Executive in place for 3 years this has never been redressed. It is imperative that women in rural areas have proposed future budgets; Programme for government and policy recovery planning assessed for rural impacts<sup>222</sup> to ensure the inequity of Government resourcing does not continue. NI Government funding support for the work of the only dedicated regional service to support rural women in their communities (NIRWN) is now only 13% of what it was in 2007<sup>223</sup>.

### Recommendations:

- The rural investment in women is equitable, proportional and sufficient to animate and build critical mass versus urban interests.
- Proposed budgets, PfG and policy recovery plans take account of rural needs.
- Historic underinvestment in rural women is recognised and efforts made to redress when future resourcing is being planned.
- Recognition that all Government Departments have a responsibility to deliver for rural women, not only DAERA.

## 1.7.2 Rural Business

Labour intensive businesses, or those that rely heavily upon occupations and skills deemed by governments to be non-essential, are most immediately at risk and a principal source of wider supply chain disruption, everything else being equal. In this regard, two characteristics of rural economies are pertinent. Firstly, rural areas, typically have a population distribution skewed to older people compared to urban areas<sup>224</sup>. Older people are more likely to require critical care and/or die as a result of a coronavirus infection<sup>225</sup>. There are also more older women than men as

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<sup>221</sup> Evaluation of the Regional Infrastructure Support Programme (Final Report, June 2015)

<sup>222</sup> Rural Needs Act, 2016

<sup>223</sup> NI Rural Women's Network

<sup>224</sup> Eurostat. Statistics on Rural Areas in the EU Eurostat; Eurostat: Brussels, Belgium, 2017

<sup>225</sup> Wu, Z.; McGoogan, J.M. Characteristics of and Important Lessons from the Coronavirus Disease 2019 (COVID-19) Outbreak in China: Summary of a Report of 72 314 Cases From the Chinese Center for Disease Control and Prevention. JAMA 2020, 323, 1239–1242. [CrossRef] [PubMed]

women have a longer average life span. UK Government advice, which mirrors that in many other European countries, is that those aged over 70 should socially isolate, making them dependent on others in rural communities to collect shopping and medical prescriptions. It follows that self-isolating and shielding behaviour will also disproportionately impact rural areas through the availability of ('grey') labour for businesses, social enterprises and volunteer work and through the impact of their reduced expenditure on goods and services from local businesses ('grey pound').

Secondly, as labour relocates to a home working context, this could be more difficult in those rural areas suffering from inferior access to high quality broadband<sup>226</sup>. This weakness will also affect homeschooling during closures and be exacerbated by concurrent demands for limited available bandwidth (data transfer capacity) among multiple household members.<sup>227</sup> As the Covid-19 pandemic progressed it was clear that in the reality of living with digital exclusion daily in many rural areas was contributing to the isolation of rural dwellers and reducing the work from home and homeschooling options for many. 68509 homes in NI faced the Covid-19 lockdown with inadequate access to Internet broadband services<sup>228</sup>

### Recommendations:

- Succession planning support in rural businesses and community settings
- Genuine, flexible working solutions for rural areas that includes access to Broadband and care support.
- Interim Broadband and digital inclusion support as Project Stratum<sup>229</sup> rolls out such as; opening up wi-fi in publicly funded facilities.

## 1.7.3 COVID-19 and Rural Development

The outbreak of COVID-19 has significantly affected all aspects of life across Europe. In addition to threatening our health, the pandemic is also posing serious challenges to our socio-economic systems. In rural areas, farmers, businesses and communities are particularly affected. The COVID-19 crisis is predicted to have far-reaching consequences that will be felt for years to come. The trajectory of rural development has thus changed, and so must we. We must think differently and

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<sup>226</sup> Commission for Rural Communities. Rural Micro-Businesses: What Makes Some Thrive in a Challenging Economic Climate? Commission for Rural Communities: Gloucester, UK, 2013. 13. OFCOM.

<sup>227</sup> The COVID-19 Pandemic and Its Implications for Rural Economies; Jeremy Phillipson et al; Northumbria University, May 2020 <https://bit.ly/3AmiZXp>

<sup>228</sup> PPR, No One Left Behind, Breaking the Digital Divide <https://bit.ly/3A64ueC>

<sup>229</sup> See Strategic Investment Board: Project Stratum, <https://bit.ly/3hiqrP6>

be ready to do “business unusual”<sup>230</sup> to help rural entrepreneurs cope with economic stresses amid the pandemic. The added difficulty we face in NI is that as part of the UK we are exiting the EU and will no longer have access to EU Rural Development funding and policy development, and we have no indigenous rural development policy of our own as yet. Development of our own rural policy post Brexit has been halted to prioritising dealing with the pandemic but the timeline for the Protocol implementation and transition period has progressed with clear business and community impacts.

### EU response:

The European Commission coordinated a common European response to the COVID-19 crisis, not only to support the healthcare systems of the EU Member States, but also to mobilise resources to support businesses hit by the crisis, including farm holdings, agri-food companies, and rural businesses. The European Commission has released their latest package of exceptional measures to further support the agricultural and food sectors most affected by the coronavirus crisis. A clear example of how this can positively impact on women is the dedicated resource support to rural women in Georgia amid the Covid-19 pandemic.<sup>231</sup> NI is no longer in a position to take advantage of this new resourcing and innovations and so must be proactive and develop our own resourcing supports and priorities that address the needs of rural women post pandemic.

### Recommendations:

- Rural women are engaged in future rural development policy planning and development.
- Rural women have dedicated rural development resourcing that takes account of gender differentials and Covid-19 impacts.
- NI continues post Brexit to learn from EU policy development and innovation in order to replicate what is advantageous to NI.
- NI Executive work quickly on ensuring we have a future Rural Development policy that supports vibrant, gender equal, rural communities.

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<sup>230</sup> International Institute of Rural Reconstruction

<sup>231</sup> EU Neighbours News (June 2020\_, ‘EU Supports Women in Georgia’s Rural Areas Amid COVID-19 Pandemic’, <https://bit.ly/3hqqVTA>



### 1.7.4 Rural VCSE

Rural areas have often been at the vanguard of community and social enterprise<sup>232</sup>, and COVID-19 is itself leading to the promulgation of many positive examples of community, neighbour and volunteer support. How public, private and third sectors effectively work together - and, crucially, how they work with the rural voluntary, community and social enterprise (VCSE) ecosystem - is critical to immediate emergency response and will be vital to longer-term recovery. However, whilst the VCSE sector is adept at balancing social, economic and environmental needs, it has been heavily stretched in the years leading up to the pandemic and now faces a range of challenges<sup>233</sup>. With social shielding of older populations, who are an important source of volunteer labour, the sector too is facing challenges linked to labour availability. Thus, while the crisis offers opportunities for rural communities to make use of and to strengthen existing volunteering and neighbourliness, a weakness of the rural social support system is its reliance on older volunteers to look out for an ageing population.

In research conducted in 2018<sup>234</sup> rural women identified the importance of community spaces and community informal networks of support. There was agreement amongst those surveyed that, rural women needed a place to meet and a reason to meet up. The conversations around this primarily linked inextricably to the provision of education and training for women in rural areas and the lack thereof. In relation to addressing social isolation those we spoke with concurred that being able to provide any class locally, should it be: yoga, craft classes, information talks etc, created a mechanism to engage those who were socially isolated. NIRWN's member groups operate within their local area and as such hold local knowledge such as, who has recently suffered a bereavement, who is experiencing a difficult time, who has overwhelming caring responsibilities and as such they quietly and discreetly attempt to engage these people in their activities and offer to bring them along. This however is only possible if they are in a position to deliver activities locally; without exception all were finding that 'It is increasingly difficult to find funding to support overheads like room rental to be able to run any activities'. This research was conducted pre pandemic but it follows that in a post pandemic environment it is critical to recognise and resource this work so rural women and their communities can 'Build Back Better'.

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<sup>232</sup> Steinerowski, A.A.; Steinerowska-Streb, I. Can social enterprise contribute to creating sustainable rural communities? Using the lens of structuration theory to analyse the emergence of rural social enterprise. *Local Econ.* 2012, 27, 167–182. [CrossRef] 25. Townsend, L.; Wallace, C.; Smart, A.; Norman, T. Building Virtual Bridges: How Rural Micro-Enterprises Develop Social Capital in Online and Face-to-Face Settings. *Sociol. Rural.* 2016, 56, 29–47

<sup>233</sup> Milbourne, L.; Cushman, M. Complying, Transforming or Resisting in the New Austerity? Realigning Social Welfare and Independent Action among English Voluntary Organisations. *J. Soc. Policy* 2015, 44, 463–485

<sup>234</sup> Rural Voices Report NIRWN 2018

This sector is driven by a large number of female leaders and volunteers; women predominate in voluntary and community organisations, for example, comprising 75% of the paid workforce of voluntary organisations in Northern Ireland<sup>235</sup> largely, it could be argued, because employment is often insecure and reliant on time bound funding. There is a need for governments to view organisations in this sector in a similar light to private and public businesses and employees, providing financial support to sustain their viability. Support is especially justified, given that in many rural communities these organisations play the leading role in organising and supporting older, young and vulnerable residents.

The VSCE organisations constitute the 'horizontal' relationships important for social capital, community-based networks that comprise both 'bonding' capital within communities and 'bridging' capital between communities on the basis of issues such as equality or domestic violence. The idea of utilising input from civil society to increase the quality of democratic participation should accord with the principle of equality, allowing women to have equal influence on policy-making structures<sup>236</sup> in their localities. There may be a need to bolster younger volunteering and neighbourliness and repurpose older volunteering to fit with current restraints and the limits placed on their movement. These extra demands need external support, but the VCSE sector often falls between business, charity and household policy frameworks<sup>237</sup>. COVID-19 serves to further emphasise the imperative for community capacity building and support through the rural VCSE sector, to allow it to help individuals, households and communities during the pandemic and recovery.

## Recommendations

- Government to view organisations in this sector in a similar light to private and public businesses and employees, providing financial support to sustain their viability.
- Recognition and support of the critical role women have in community organisations and on enhancing social cohesion.
- Resourcing and support for rural community capacity building to aid Covid-19 recovery and sustainability.

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<sup>235</sup> Workforce Survey (2014), NICVA

<sup>236</sup> Women, Civil Society and Peacebuilding in Northern Ireland: Paths to Peace through Women's Empowerment (2004), Michael Potter

<sup>237</sup> Agapitova, N.; Sanchez, B.; Tinsley, E. Government Support to the Social Enterprise Sector: Comparative Review of Policy Frameworks and Tools; The World Bank: Washington, DC, USA, 2017

### 1.7.5 Gender and the Rural Economy

The impacts of COVID-19 are experienced differently between genders<sup>238</sup>. Many of the frontline occupations affected by the virus impact disproportionately on women. Teachers, carers and nurses are predominantly women. Throughout the EU, women are predominantly responsible for childcare<sup>239</sup> and home schooling is likely to have gendered implications within families. Female rural entrepreneurs and women who have undertaken farm diversification initiatives have often done so to fit around their other childcare and caring responsibilities<sup>240</sup>. Maintaining these businesses while undertaking additional COVID-19 caring roles will be a challenge. There may be gendered effects that will mean differential access to household assets that can be used to buffer the effects of the coronavirus on firms. During Foot and Mouth Disease, male-owned firms were far more likely to draw on unpaid labour of household members, and female-owned businesses were less likely to use household savings to ease cash flow or to take on additional loans or debts, in order to limit risks to families and households<sup>241</sup>. There is currently a high level of anxiety amongst rural women about the impact of lack of and cost of childcare as we move into a new school year that seems inevitably to include some form of blended learning.

#### Recommendations:

- Recognition that the impacts of Covid-19 have been experienced differently by rural women who proportionately take on more caring responsibilities,
- Rural business support initiatives are required,
- Rural care solutions need to be created to support rural women business owners and workers as we move forward.

### 1.7.6 Rural Women & the Digital Economy

This is the opportune time to increase rural women's participation in the digital economy, including digital marketing and digital trade. Of course, this means that the necessary enablers must first be addressed, starting with increasing digital identification for rural SMEs to allow innovative ways of securing collateral and credit histories — for example, through the use of data from utilities, trade

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<sup>238</sup> The COVID-19 Pandemic and Its Implications for Rural Economies; Jeremy Phillipson et al; Northumbria University, May 2020 <https://bit.ly/3AmIZXp>

<sup>239</sup> Erhel, C.; Guergoat-Larivière, M. Labor Market Regimes, Family Policies, and Women's Behavior in the EU. *Fem. Econ.* 2013, 19, 76–109.

<sup>240</sup> Shortall, S.; Sutherland, L.; McKee, A.; Hopkins, J. Women in Farming and the Agriculture Sector; Scottish Government: Edinburgh, Scotland, 2017.

<sup>241</sup> Phillipson, J.; Bennett, K.; Lowe, P.; Raley, M. Adaptive responses and asset strategies: The experience of rural micro-firms and Foot and Mouth Disease. *J. Rural Stud.* 2004, 20, 227–243. [CrossRef]

creditors, and purchases of inputs<sup>242</sup>. With the social distancing phenomena, the era of gathering rural people in groups for capacity building will end. Development organisations should adapt to ICT-based capacity building. This includes providing digital, virtual, and mobile-based business training, coaching, and mentoring related to economic recovery, digital marketing and communication channels, and overall digital financial literacy.

### Recommendations:

- Increase rural women's participation and opportunities in the digital economy, including digital marketing and digital trade.
- Increase digital identification for rural SMEs to allow innovative ways of securing collateral and credit histories.
- This includes providing digital, virtual, and mobile-based business training, coaching, and mentoring related to economic recovery, digital marketing and communication channels, and overall digital financial literacy.

### 1.7.7 Covid-19 and Rural Mental Health

There is no doubt that the Covid-19 pandemic has impacted mental health; bereavement, social isolation, uncertainty and financial insecurity have all impacted on wellbeing. It is also well known that early intervention is important as it can help prevent the escalation of the presenting mental health issues. We do not have data on the specific rural mental health impacts yet however we do know that rural areas are much less likely to have access to the relevant support at their local GP e.g., 40% of GP Practices across west Tyrone offer in-house counselling compared to 100% in East Antrim<sup>243</sup>.

Those in need of mental health support should have quick and easy access to counselling and it should not be determined by your post code or your socio-economic status. The number of sessions should also be determined by the need of the patient and not determined by economics.

Scottish research<sup>244</sup> indicated that stigma related to mental health issues is also particularly problematic. Rural areas are known to have strong communities and whilst this can act as a protective factor for people with mental health issues it can also be a barrier to them seeking and accessing services due to the perceived stigma of their circumstances. It was noted that decision makers do not have the same level of information and evidence regarding rural areas and this makes is

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<sup>242</sup> DEVEX International Development.

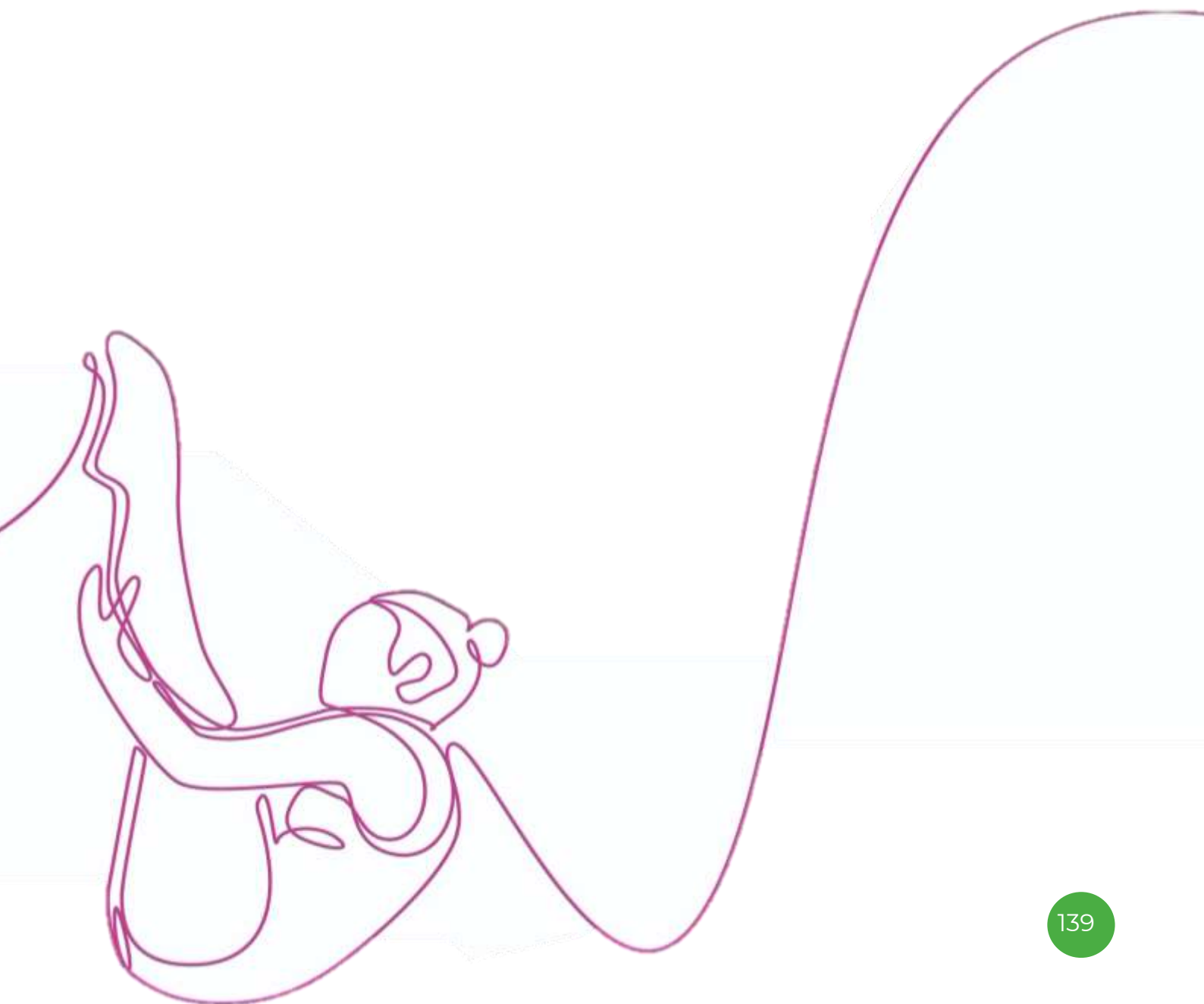
<sup>243</sup> PPR #123GP map (2020), 'FOI Data Reveals a Postcode Lottery When it Comes to Counselling Through GP Practices', <https://bit.ly/3jyuU37>

<sup>244</sup> Voluntary Health Scotland (February 2020), 'Mental Wellbeing in Rural Scotland', <https://bit.ly/3jrNhGI>

harder to come up with solutions. We would argue that data to support a Mental Health Strategy in its development and delivery requires quality data that is both gender-disaggregated and takes account of rural and urban experiences.

### Recommendations:

- The Programme for Government, Budgets and future policies take account of rural women's needs.
- Ensure that all GP practices are adequately resourced to provide timely access to counselling for everyone who needs it.
- Ensure that nobody waits longer than 28 days for a routine appointment and no longer than 2 days for an urgent one.
- Provide people with options for accessing counselling – in their local GP practice or through the Talking Therapy Hubs run by the Trusts.
- Mental Health data that is both gender-disaggregated and takes account of rural and urban experiences.



## 1.8 A Feminist & Human Rights-Based Housing Recovery



“Paying rent for a privately owned university house which I have not lived in since October. Ended up in a new job in the supermarket industry due to no furlough from previous hospitality role.”

“Left paying for a house I wasn’t allowed to live in because I’m a student.”

“My housing situation just came to a complete standstill. My housing officer literally turned ‘round and said to me ‘your window would have to be put through, one of yous would have to be attacked, or you would need to get pregnant again’ [to get permanent housing].”

“I’m imagining how embarrassing it must’ve been for [my daughter] being in school and having to say to anybody, look, when you say can I go back to your house, no you can’t, I live in a hostel. Or, no you can’t, cause my flat’s not big enough.”

- Testimonies from WPG Primary Research



The right to housing, shelter or appropriate accommodation is covered extensively by many international treaties and human rights bodies. Article 25 of the Universal Declaration of Human Rights (UDHR) and Article 11(1) of the International Covenant on Economic, Social and Cultural Rights (ICESCR) include the right to housing as part of the right to an adequate standard of living. This is expanded upon in the Yogyakarta Principles, which cover the application of human rights law in relation to sexual and gender minorities. The Principles state:

"Everyone has the right to adequate housing, including protection from eviction, without discrimination and that States shall a) take all necessary legislative, administrative and other measures to ensure security of tenure and access to affordable, habitable, accessible, culturally appropriate and safe housing, not including shelters and other emergency accommodation, without discrimination on the basis of sexual orientation, gender identity or material or family status; b) take all necessary legislative, administrative and other measures to prohibit the execution of evictions that are not in conformity with their international human rights obligations, and ensure that adequate and effective legal or other appropriate remedies are available to any person claiming that a right to protection against forced evictions has been violated or is under threat of violation, including the right to resettlement, which includes the right to alternative land of better or equal quality and to adequate housing, without discrimination."

Despite this right being comprehensively covered in human rights law, its application on the ground and interpretation by party states - including the UK and, more specifically, Northern Ireland - has been significantly lacking. Housing is commodified: land to be bought and sold, turned for a profit, or squeezed for as much overhead as possible. Instead of being treated as a right it is a privilege, one to be paid for and one which can be taken from you with little warning. However, even within this flawed commodified housing model, there are ways in which the situation could be drastically improved to better serve our communities, especially those who are homeless or living in precarious housing situations.



Those who find themselves homeless are too often moved on from public spaces by the PSNI and the support that is provided often attempts to address symptoms of the problem - such as mental illness and substance misuse - rather than addressing the issue of the lack of homes in the first instance. This “Treatment First” approach places an expectation on our homeless population to deal with mental and physical health problems, drugs and alcohol misuse, poverty, and unemployment, without first having a home from which to action this recovery. In a two year trial assessing the effectiveness of a “Housing First” policy combined with Assertive Community Treatment (ACT) to support those with mental health issues who were homeless or in precarious living situations, Housing First was seen to improve the mental and physical health of those who were engaged in the pilot and worked to eradicate homelessness in a much quicker time<sup>245</sup>. It also encouraged community cohesion and the integration of these individuals into their communities and society, something sorely lacking for our homeless population currently.

The main problem with applying this policy in Northern Ireland is the availability of social housing stock. Currently there are approximately 807,812 houses in Northern Ireland<sup>246</sup>. According to the Department for Communities, the average household contains 2.5 individuals, and the total housing stock per 1,000 NI residents is 422. In an ideal world, this would be enough houses to accommodate everyone in Northern Ireland, eradicating homelessness in the region. However, only 10% of current housing is rented by the NIHE, with 70% of housing stock being privately owned and 15% privately rented<sup>247</sup>. Given the 38,725 people on the NIHE waiting list for housing, this model clearly isn’t working.

It also doesn’t seem likely to change anytime soon. Of the 7,314 houses having completed construction in Northern Ireland from 2019-2020, only 710 of those are adding to our social housing stock<sup>248</sup>. There is an urgent need to adopt quotas requiring the building of adequate levels of social and affordable housing in any new major accommodation development. There is also a need for a monumental buy-back scheme, focusing on those holding ownership over multiple properties. Introducing steep and progressive taxes on multiple property ownership and using the revenue generated to launch a wide-ranging property buy-back scheme would clamp down on landlord monopolies and dramatically increase our social housing stock. Rent controls, particularly in urban and urbanising areas, would also be necessary to ensure the cost of multiple-property taxation isn’t passed on to tenants renting from large housing monopolies.

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<sup>245</sup> BMC Public Health (2019) ‘A randomized controlled trial of the effectiveness of Housing First in a small Canadian City’: <https://bit.ly/3zOQt55>

<sup>246</sup> Figure drawn from NISRA 2019-20 [NI Housing Statistics](#).

<sup>247</sup> *ibid*.

<sup>248</sup> *ibid*.

Despite private renting being the most accessible form of housing for young people, those in precarious working arrangements, and those escaping domestic abuse or violence, etc, it is also the most expensive form of housing due to the sheer volume of private rental accommodation. In Northern Ireland, the average weekly spend on housing costs varies massively depending on the type of housing you are accessing: £97 for private renters, £82 for social renters and £46 for those buying with a mortgage<sup>249</sup>. It is very clear that, especially for young women working in underpaying/undervalued sectors such as retail, hospitality, and care work, the housing market simply is not fit for purpose, and the idea of buying a house and affording a mortgage deposit seems very out of reach for so many of our young people.

This has a specifically negative impact on women, LGBTQI+ people, BME people, disabled people, and working-class people generally, often leading to an inability to access housing and engage with this marketised model. Many of these groups experience homelessness in disproportionate levels, often stemming from experiences of financial or other means of coercive control, domestic or sexual violence, and/or discrimination from private landlords. Many individuals are also trapped within coercive and abusive situations, in the knowledge that if they were to attempt to leave, they would be at the mercy of an unforgiving housing market, with limited access to specialised support or refuges specific to their community.

Human rights can never be conditional. The right to freedom from torture or inhumane treatment should not have conditions attached, and therefore neither should the right to housing. Encouraging profiteering through multiple property ownership leading to the exploitation of renters and the seizure of housing stock not only ensures the build-up of wealth at the top of our society, but also generates artificial housing shortages and housing anxiety which hurts working communities on the ground. This ensures that individuals and families are stuck living in unsuitable and unstable housing, or no housing at all.

While there is no one-size-fits-all approach that will fully address our housing woes, and no quick fix to entirely restructure the economy and move away from a commodified property system, there are commonsense policies which can be adopted here and now to drastically increase social housing stock, tackle the rampant exploitation of private renters, and provide everyone with a home from which they can live and grow.

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<sup>249</sup> Family Resources Survey 2018-2019: <https://bit.ly/3xQyFop>

In the long term, decommodifying the housing system would remove the significant rent pressures on the most vulnerable in society. Paying for housing and property upkeep through taxation instead of inflated and unpredictable rent requests - which often line pockets instead of going towards upkeep - should be the end-goal of our move towards a Northern Ireland where each individual and family are housed appropriately, fulfilling any accessibility requirements, and tackling the propensity for abuse through financial and housing coercion.

Outside of the wider need for complete reform of our housing system, there is also a need for specific, culturally competent and community-led DV/SV refuges, in particular for BME communities and LGBTQI+ communities who are often unable to access mainstream refuges or support services. More detailed recommendations on this can be found in the domestic and sexual violence section of this report.

While the process of ground-up housing reform is long and requires significant political investment, it will ensure that the right to housing is meaningfully enshrined in our state, and will provide a shining example of the positive change that can come through the recovery from Coronavirus to other administrations in Ireland and the UK, as well as further afield.

### Recommendations:

- Adopt a 50/50 social/private quota for new housing developments, enshrining the creation of more social housing in law.
- Introduce progressive taxation on multiple-property ownership, targeting landlord monopolies and multinational investors scooping up housing stock.
- Launch a wide-ranging property buy-back scheme, funded through taxation on multiple-property-ownership.
- Introduce targeted rent controls across Northern Ireland, particularly in urban and rapidly urbanising areas where rent is steadily climbing.
- Adopt a “Housing First” policy to support homeless populations, focusing on providing housing and socio-economic stability as a means to addressing the other issues they may be experiencing.
- Improve & expand council powers to reprimand landlords/estate agents for maintaining unsuitable accommodation (i.e. those where tenants are living in unsuitable conditions or the property is not upkeep).
- Establish an expert inquiry into housing reform in Northern Ireland, with the aim of moving to a de-commodified housing system.

## 1.9 A Feminist Green Economy

Northern Ireland remains the only part of the UK or Ireland with no binding greenhouse gas reduction targets and this needs to change urgently. It is crucial that any targets set in a Northern Ireland Climate Change Bill are based on the most up-to-date scientific evidence available, rather than political opinion.<sup>250</sup>

The lockdown exposed the severe impact of governmental decisions to neglect public services on our society. Many of the existing socio-economic inequalities were exacerbated during the lockdown, as the lack of resilience or ability to cope with the ramifications of the pandemic became glaringly obvious.

The need for basic levels of income, access to food, childcare, a fully-functioning health service, education, changing considerations of “low-skilled” work to essential work, recognising the importance of unpaid care, digital poverty, holiday hunger, access to the internet and many more factors have been the topic of a lot of conversations in recent months. Now, more than ever, it is necessary to reassess our economic decision making and recent history of severely under-resourced public goods. Northern Ireland would not have been able to cope without those working in the areas above, and it is necessary to recognise this undervalued work; redistribute care responsibilities and reduce the levels of harm to our social, health, economic and environmental infrastructures.

The Women’s Policy Group (WPG) NI endorses the UK Women’s Budget Group (WBG) and Women’s Environmental Network (WEN) paper for the WBG Commission on a Gender-Equal Economy, ‘Towards a Feminist Green New Deal for the UK.’<sup>251</sup> As described by Cohen and MacGregor in the WBG and WEN paper, discussions on Green New Deal frameworks rarely incorporate gender, race and class.<sup>252</sup> The UK WBG and WEN paper looks at a Green New Deal from an intersectional feminist perspective, and it is an approach that the WPG would endorse for Northern Ireland in relation to our economic recovery and the NI Executive’s aims for tackling climate change. The WPG submitted a response to the Environment, Agriculture and Rural Affairs Committee on the Climate Change Bill in July 2021. This can be viewed [here](#).

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<sup>250</sup> Women’s Policy Group NI (2021) to Discussion Document on a Climate Change Bill: <https://bit.ly/3zRn2PJ>

<sup>251</sup> Maeve Cohen and Sherilyn MacGregor (2020), ‘[Towards a Feminist Green New Deal for the UK: A Paper for the WBG Commission on a Gender-Equal Economy](#)’, *UK Women’s Budget Group and Women’s Environmental Network*. <https://bit.ly/3xOOiVl>

<sup>252</sup> Maeve Cohen and Sherilyn MacGregor (May 2020), ‘[What would a Feminist Green New Deal look like?](#) - Summary Briefing’, *UK WBG and WEN*. <https://bit.ly/3zTvptY>

### 1.9.1 Why is Climate Justice a Feminist Issue?

As discussed in the WEN and UK WBG's Report 'Towards a Feminist Green New Deal',<sup>253</sup> gender equality must be at the heart of plans to tackle the climate crisis. The climate crisis requires urgent action to transform the economy and society. Some key statistics on women's current situation in the UK include:<sup>254</sup>

- \* 85% of care jobs are done by women
- \* 32% of MPs in the House of Commons are women
- \* 80% of people displaced by climate change are women.

Women are disproportionately represented in the care work sector, both in paid and unpaid roles. As WEN argue:

"Paid and unpaid care work are an integral part of a transition to a green economy, and are, for the most part, already low carbon. The systemic lack of recognition and investment in social infrastructure has created industries in which small amounts of investment can create significant returns in both employment opportunities and service improvement...

From a feminist perspective, it is essential to balance the emphasis on decarbonising the economy with the stated commitment to redressing social injustice, and this requires both awareness of and strategies for changing gender norms and stereotypes...

Central to feminist ecological economics is the normative claim that gender equality should not be achieved at the expense of ecological degradation or the exploitation of nature and other species, and that environmental sustainability must not be achieved by exploiting feminised labour."

### 1.9.2 Care Work: A Key Sustainable Industry

The WPG would also like to endorse the following evidence and recommendations from the Feminist Green New Deal:

"WBG research indicates that a 2% GDP investment in care (social care, childcare, parental leave etc.), creates double the amount of jobs for women and almost as

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<sup>253</sup> Women's Environmental Network and UK Women's Budget Group (2020) '[Towards A Feminist Green New Deal](https://bit.ly/3xOOiVl)': <https://bit.ly/3xOOiVl>

<sup>254</sup> Women's Environmental Network (2021) '[Feminist Green New Deal](https://bit.ly/3j3r69x)' <https://bit.ly/3j3r69x>

many for men than the same investment in construction.<sup>255</sup> Investment in free universal childcare especially, returns almost all of its initial investment.”<sup>256</sup>

“The care industry is 30% less polluting (in terms of greenhouse gas emissions) than the construction industry and, the education industry is 62% less polluting than the construction industry.”<sup>257</sup>

This is of particular importance to Northern Ireland given our calls for a universal, free and high quality childcare provision. If the Northern Ireland Assembly, and the Department of Education, introduce free universal childcare, statistics from the WBG submission to HM Treasury indicate that a full return would be made on this investment through additional tax revenue generated by the additional jobs created.<sup>258</sup>

### 1.9.3 A Feminist Green New Deal for Northern Ireland

We note the NI Executive commitments to ‘tackle climate change head on with a strategy to address the immediate and longer-term impacts of climate change’ in the New Decade, New Approach agreement.<sup>259</sup> The NI Executive commitments include:<sup>260</sup>

- The Executive’s strategies to reduce carbon emissions will be reviewed in light of the Paris Climate Change Accord and the climate crisis.
- A new Energy Strategy will set ambitious targets and actions for a fair and just transition to a zero carbon society.
- The Executive should bring forward a Climate Change Act to give environmental targets a strong legal underpinning.
- The Executive will establish an Independent Environmental Protection Agency to oversee this work and ensure targets are met.
- The Economic Strategy will support clean and inclusive growth and create jobs as part of a Green New Deal.
- The Executive will create a plan to eliminate plastic pollution.
- RHI will be closed down and replaced by a scheme that effectively cuts carbon emissions.

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<sup>255</sup> ITUC (2016), ‘[Investing in a Care Economy](https://bit.ly/3zQsYIG)’: A gender analysis of employment stimulus in seven OECD countries’, ITUC. <https://bit.ly/3zQsYIG>

<sup>256</sup> Ibid, p.1.

<sup>257</sup> WBG calculations from Eurostat data: <https://bit.ly/3d5qUD9>

<sup>258</sup> Women’s Budget Group (2020) ‘[Budget Representation to HM Treasury](https://bit.ly/2T2cPiK)’: Invest in Social Infrastructure’, UK Women’s Budget Group. <https://bit.ly/2T2cPiK>

<sup>259</sup> [New Decade, New Approach Agreement](#), p.8.

<sup>260</sup> Ibid, p.44.

In particular, the WPG would like to make reference to aims for a “fair and just transition” alongside the Economic Strategy that will “support clean and inclusive growth and create jobs as part of a Green New Deal.” Before highlighting what a Feminist Green New Deal may look like, it is important to consider what Green New Deals typically include. Typical priorities highlighted by the UK WBG and WEN include:

- \* Decarbonising the economy,
- \* Democratising the economy,
- \* Creating fair green jobs,
- \* Preserving the natural environment,
- \* Reform of finance and banking systems,
- \* Community organising and ownership,
- \* International responsibilities to repay debts and inequalities.

In their proposed Feminist Green New Deal, these priorities would be combined with aims of gender-equality, including:

- Redressing economic and social disadvantages faced by women,
- Changing social norms of gender at home and at work to share and value care,
- Increasing women’s representation in all aspects of public life and decision-making,
- Ending violence against women and girls.

The WPG would add that in the context of Northern Ireland, the need for women’s involvement in peacebuilding processes should also be a priority, as set out in UN Security Council Resolution 1325 on Women, Peace and Security.<sup>261</sup>

The WBG and WEN Feminist Green New Deal has several recommendations under five broad themes:

1. Investment in (social) infrastructure - including transport, housing, agriculture and social infrastructure such as jobs and training for carers and educators,
2. Green jobs - emphasising the need to be aware of reproducing occupational gender segregation and take steps to enroll women in STEM jobs crucial to a green economy,

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<sup>261</sup> United Nations (2000) Security Council: [Resolution 1325](#) (UNSCR 1325), *Women, Peace and Security*.



3. Sharing Care - recognising that paid care jobs are low carbon and redress gender inequality and women undertake the majority of unpaid care work,
4. Democracy and Ownership - encouraging women's community involvement in governance, especially BAME and disabled women, as they are underrepresented in all areas of political life and this needs rectified to democratise the economy,
5. (Inter)national responsibilities - reducing and redressing international inequalities.

### Recommendations:

Recommendations from the WBG and WEN, which we have applied to Northern Ireland, include:

#### *Investment in (social) infrastructure:*

- Co-designing social infrastructure at a local level with the needs of women taken into account,
- Taking the differing transport needs of women with caring responsibilities into account when creating transport plans; particularly given issues in Northern Ireland of inadequate rural public transport and the fact that women are more likely to rely on public transport.

#### *Green Jobs:*

- Provide subsidies and other incentives, including paid education leave, to support women, particularly low-income and BAME women, in accessing training and development programmes in high-skilled work in a new green economy,
- Provide subsidies and other incentives to those working in jobs at high risk of being replaced by automaton, particularly as women are at much higher risk of this,
- Encourage women and girls into male-dominated green sectors that are encouraged through a Northern Ireland Green New Deal.

#### *Sharing Care:*

- Recognising the dual-benefit job creation and increased tax revenue through investing in paid care jobs that are already done in an unpaid capacity by majority women,
- Through increased investment in care jobs and the care sector, not only will women's employment and economic opportunities increase, but

children from disadvantaged backgrounds will benefit from increasing qualities of childcare and education,

- Broaden definitions of 'green jobs' beyond construction and technology to incorporate the care sector as an already existing low carbon, high compensate sector that is increasingly neglected,
- Ensure that all green jobs in Northern Ireland include a real living wage, are securely contracted, ethically procured and unionised,
- Implement a 30-hour paid work week in recognition of unavoidable unpaid care,
- Actively encourage and incentivise care leave and caring responsibilities being undertaken by men,
- Establish a Universal Basic Income or Universal Basic Services to ensure minimum living standards and recognise and remunerate the £4.6 billion unpaid carers contribute to Northern Ireland each year,
- Balance recommendations for greater food self-reliance with recognition of the gendered, unpaid and low-paid labour involved in producing and providing food, particularly as Northern Ireland may be disproportionately impacted by different food standards to Great Britain post-Brexit,
- Supporting and developing sustainable small businesses that reduce domestic work through mass preparation and distribution of locally grown food.

#### *Democracy and Ownership:*

- Promoting economic, ecological and carbon education campaigns for schools and the wider public to be adequately funded through a Climate Change Act and within the Programme for Government,
- Ensure equality impact assessments of all environmental policies and ensure consultation on policies with groups representing various genders, races and classes within civil society,
- Make socio-economic equality of protected characteristics a key goal of any green new deal framework and ensure co-design of planning and policies with the Women's Sector,
- Promote a cultural shift towards valuing care as a key part of the infrastructure of the environment and economy.

#### *(Inter)national Responsibilities:*

- Ending the hostile environment in the UK towards migrants and fully remove information exchanges between public bodies (including those in Northern Ireland) and the Home Office,

- Promote fair tax policies which close tax loopholes, redistribute wealth between women and men and hold transnational corporations to account for exploitation of people and harm to the planet,<sup>262</sup>
- Introduce a Bill of Rights for Northern Ireland,
- Protecting human rights, including sexual rights, reproductive rights, and working rights,
- Promote trade justice within supply chains and create ethical procurement guidelines in line with the above recommendations.

It is crucial that efforts are taken to mitigate against the impacts of the climate crisis on all people in Northern Ireland, but particularly women. Tackling gender equality must be at the core of these efforts, and recognition must be given to the unavoidable links between environmental and feminist issues. The above recommendations would support the NI Executive in meeting the requirements set out in New Decade, New Approach, whilst applying a gender lens to support a care economy and gender equality in any new green economy.

For further information on the issues highlighted in this section, please see the Women's Policy Group's Response to the Department for Agriculture, Environment and Rural Affairs' Discussion Document on a Climate Change Bill (February 2021) which can be accessed [here](#).

Several members of the WPG were also on the Gender Equality Strategy Expert Advisory Panel, and we would like to take this opportunity to highlight recommendations made by the expert panel in their report published in March 2021:

#### Recommendations:<sup>263</sup>

- Co-design social infrastructure at a local level with the needs of women taken into account. This should include transport which is one of the biggest contributors to climate change, taking into account inadequate rural public transport in Northern Ireland and the fact that women are more likely to rely on public transport.
- Conduct a skills-needs analysis to establish the skills required by men and women to equally participate and benefit from opportunities created in the green economy. The information should be used to create targeted green skills development and training initiatives for both men and women.

<sup>262</sup> Examples provided by the WBG and WEN include a fossil fuels tax for corporations, a financial transaction tax and reforms of progressive taxation like income and corporation tax.

<sup>263</sup> Gender Equality Strategy Expert Advisory Panel Report (2021), <https://bit.ly/2SRZcmu> p.171

- Provide subsidies and other incentives, including paid education leave, to support women, particularly low-income and BAME women, in accessing training and development programmes in high-skilled work in any new green economy.
- Ensure funding and resource allocation prioritises programs that train women and girls for non-traditional roles to enable them to make the transition into male-dominated occupations in the green economy.
- Ensure that all green jobs in Northern Ireland are paid at a real living wage, are securely contracted, ethically procured and unionised.
- Put in place accountability procedures to ensure all relevant stakeholders are held accountable for operating in a gender-responsive manner to achieve gender equality outcomes in the green economy. This can be done through gender responsive planning, monitoring and evaluation mechanisms to ensure that measures to advance gender equality in the green economy are having the desired impact.
- Invest in gender-disaggregated data which is critical for understanding the constraints affecting women and men's equal representation and participation in green job sectors.
- Broaden definitions of 'green jobs' beyond construction and technology to incorporate the care sector as an already existing low carbon, high recompense sector.
- Promote a cultural shift towards valuing care as a key part of the infrastructure of the environment and economy.
- Recognise the dual-benefit of job creation and increased tax revenue through investing in paid care jobs that are mostly done by women.
- Actively encourage and incentivise care leave and caring responsibilities being undertaken by men.
- Promote economic, ecological and carbon education campaigns for schools and the wider public to be adequately funded through a Climate Change Act and within the Programme for Government.
- Ensure the equal participation of rural women and girls in policy making processes on disaster mitigation and climate change.
- Ensure rural women are a target group in the development and delivery of a new Rural Development Programme for NI.
- Ensure equality impact assessments of all environmental policies and ensure consultation on policies with groups representing all Section 75 characteristics.
- Reallocate spending according to equality, wellbeing and sustainability objectives, for example, from polluting industries to green industries.

## 1.10 Paramilitarism, Gate Keeping and Control of Funding

Paramilitarism is a reality in Northern Ireland, and one that persists fully 23 years after the Good Friday/Belfast Agreement. In fact, the Spring of 2021 saw widespread rioting, largely ascribed to anxiety over the Northern Ireland Protocol and the anxiety and uncertainty this has produced. There is credible reason to believe that at least some of the violence was facilitated and encouraged by paramilitary groups. The same period saw a viable explosive device planted under a police officer's car by dissident Republican paramilitaries. Realistically there is little prospect that this situation will change without considerable intervention.

It is a particularly thorny problem because the reality of our history means that it is difficult to draw a line under the legacy of the violence of the past, and those who were involved with it. Paramilitary organisations continue to exist, despite, in most cases, ceasefires being in place and the conflict being behind us. Further, many of those who are involved in paramilitary activity are not the same actors that were involved during the conflict, and the activities that continue to come under the umbrella name of "paramilitary activity" are not the same as those carried out during the conflict, and many continue to actively recruit members. Paramilitaries are known to be involved in loan sharking and this particularly impacts upon those with limited incomes, especially women, as shown in research carried out by Women's Support Network. This fact increases their control over vulnerable communities while also demonstrating the fact that they are a malign influence.

Race hate crime as it occurs in Northern Ireland is often linked at the source to paramilitarism. It is a reductive approach to say that a racist hate crime (i.e. intimidation with the intent of forcing someone from their home) committed by a paramilitary member or on the orders of a paramilitary group is a matter of race and race alone. In communities which have endured and indeed suffered under paramilitary community control for decades, paramilitaries are incentivised to target perceived "newcomer" communities on the pretext of racism and xenophobia to justify their grip and coercive control over the community as a whole. The NI Executive can bear no claim to tackling hate crime against any marginalised group in good faith if its response to those brutalised by it is the same response given to anyone facing paramilitary intimidation: Move house.

More than a year into the COVID-19 pandemic, paramilitary activity in Northern Ireland shows no sign of slowing or stopping. In fact lockdown may have further entrenched the influence of these groups in local communities, based on the increased levels of unrest and violence in recent months. Undeniably, the time has come to face the continued paramilitary activity that exists. Evidently, these organisations continue to recruit new members, and to engage in activities that

would ordinarily be categorised as common criminality; loan-sharking, protection rackets, and drug dealing.

Justice Minister, Naomi Long, introduced Unexplained Wealth Orders, in October 2020, and worked with Home Secretary Priti Patel on this. The UWOs are not unique to Northern Ireland, having been introduced in GB during the time that the Assembly was non-functional between 2017-20; they are not designed specifically to deal with paramilitary activity, but since so much of modern paramilitary activity involves criminality which can be especially financially lucrative, it is a useful tool in the arsenal. This represents a welcome change, but it is vital that these are used properly and wherever appropriate to tackle paramilitarism. Since they have existed only for a few months, it remains difficult at this stage to assess their usefulness in this regard.

Another, and arguably more difficult barrier, is the concern that there may be a lack of political will to truly uproot the paramilitary organisations behind some of this criminality. This perception is widely shared by the women's groups that WRDA has worked with in the course of our Good Relations work, and beyond.

Paramilitary run organisations continue to act as community organisations within many vulnerable communities and many are in receipt of public money. These same community workers and organisations can act as gatekeepers within their communities, choosing favoured organisations to work alongside and choking off support to groups that may challenge or question paramilitary influence. These organisations are often highly male-dominated, leading (both incidentally and deliberately) to the silencing of women's voices within the local community while reinforcing gender divisions. This problem has been further exacerbated by the UK's refusal to apply UNSCR 1325 to the Northern Ireland conflict, a situation which must be corrected in order to ensure the peace, particularly at this sensitive juncture in our history. We also see the repercussions of this in the relative lack of women's involvement in politics and public life more generally, see section 3.2 for more information on this.

We need more robust and routine checks on the bona fides of community organisations to screen out those with active involvement in ongoing paramilitary and/or criminal activity. It is unacceptable that public money should contribute to the coffers of organisations that have associations with criminal elements, while groups doing genuine peacebuilding work suffer through lack of support. In the immediate aftermath of the April 2021 riots, around £10 million in funding was made available to "community groups" to allow them to transition from paramilitary activity<sup>264</sup>. More than two decades since the Good Friday / Belfast Agreement, it seems difficult to see an end to this process, and there is no

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<sup>264</sup> Belfast Telegraph (2021), 'Funding Must Not End Up in Arms of Paramilitaries': <https://bit.ly/3xKt4jh>

incentive for this to stop; paramilitary activity appears to be rewarded by public funds, while those behind it hold communities to ransom and endanger the young people who they exploit and manipulate into doing their bidding<sup>265</sup>. We recommend an urgent reappraisal of the process for awarding of public funds for community work, in order to ensure that these funds reach those most in need and do not perpetuate the issues that the work is designed to address.

Recent research by the Independent Reporting Commission, compiled by Monica McWilliams, confirms that paramilitary activity remains a constant issue in Northern Ireland, and laments that civil society has apparently learned to live with it. She describes the situation as one of “coercive control” of entire communities<sup>266</sup>. In addition, paramilitary affiliation, or alleged affiliation, is used to enact coercive control within domestic relationships and after they end, as outlined in the section on stalking in this document, part of 4.1.

The Paramilitary Crime Task Force has arrested multiple individuals and seized the proceeds of criminal activity, but it has not been able to stamp out the organisations themselves. More robust action against these organisations would ultimately free up money to be invested in the communities that are currently being harmed by this coercive control, many of which have some of the worst levels of deprivation in the UK and even in Europe.

These actions must be considered urgent and acted upon robustly, for the well-being of women, children and the most vulnerable communities in Northern Ireland.

### Recommendations:

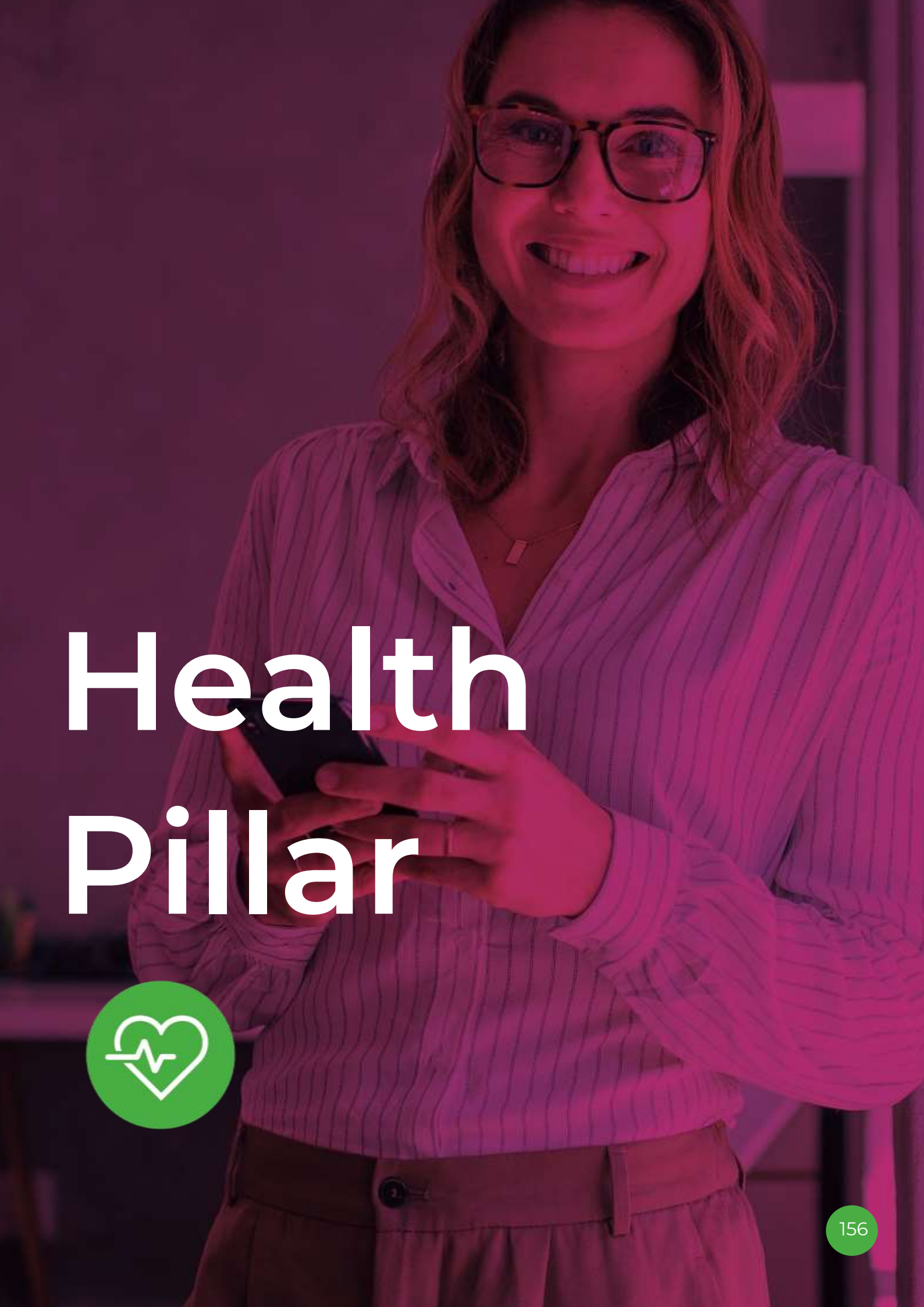
- An urgent, sector-wide review on the eligibility criteria regarding eligibility for public funding.
- Practical guidance and assistance for those in poverty, integrated with and informed by the Anti-Poverty Strategy, that will divert vulnerable people from accessing loans from loan sharks by providing practical short-term and long-term routes out of poverty.
- A scoping exercise into the practicalities of adopting a policy position that advocates for the decriminalisation and regulation of drugs, so that this powerful method of community control and financial reward is taken out of the hands of paramilitaries.
- Advocate for the application of UNSCR 1325 in Northern Ireland.

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<sup>265</sup> BBC News (April 2021), ‘NI Riots: Adult Influence in Disorder Amounts to Child Abuse’ <https://bbc.in/3gWIClk> See:

<sup>266</sup> See Independent Reporting Commission: <https://bit.ly/3vTMpNA>





# Health Pillar



## 2. Health Pillar

### 2.1 Mental Health Concerns due to COVID-19

“Financially I'm struggling. I'm self-employed. I'm struggling to access adequate medical support even just a simple phone call with my GP is rushed and a 3 day wait.”

“It has impacted negatively on my mental health & well being”

“My emotional health & wellbeing has suffered. I have used counselling & attended mindfulness classes online to help.”

“Negatively impacted my mental health, particularly when I had to self-isolate. I also feel like it impacted me academically as the entire final year of my degree was online.”

“I have received great support from many charities and agencies. However, my family life and mental health has been deeply affected.”

“Huge impact on my mental health and well-being.”

“It has really affected my mental health and my freedom. Thankfully, my job was secure financially and so was my partners but has been soo stressful as he has had to work from home. which meant we were seeing each other 24/7 which was too much for us both and it did affect our relationship a bit.”

“It has negatively affected my health, mental health, relationships and trust in others.”



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“My health has changed, I have put more effort into fitness, however I have decreased my quality and quantity of sleep causing me to almost constantly be shaking. I have just started to be able to feel socially comfortable these last few months but I still seem to be facing the same levels of anxiety. I have only now started to see a decrease in anxiety attacks which are the most extreme my anxiety has gotten. I have gotten closer to my family but I didn't get to consolidate relationships before my friends left for university”

“My health was affected very badly with stress, mentally, and isolated and frightened.”

- Testimonies from WPG Primary Research

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Along with the vital physical health considerations, one of the most concerning health implications from the COVID-19 lockdown is the impact on women's mental health. The Women's Policy Group is deeply concerned that out of a total £90 million health allocation, just £1.5 million was requested for the Mental Health Action Plan by Health Minister Robin Swann. The health foundation states that 'good mental health is an asset and is also linked to good physical health - both of which support positive social and economic outcomes for individuals and society'<sup>267</sup>. Northern Ireland has faced a mental health crisis for many years, and this is only likely to have worsened due to the lockdown. Urgent measures need to be taken to address this crisis and support the women impacted by poor mental health in Northern Ireland.

Research by the Office for National Statistics (ONS)<sup>268</sup> provides an insight into the mental health of adults during the COVID-19 pandemic and highlighted that women were more likely than men to experience some form of depression across all age groups. It showed:

- Around 1 in 5 (21%) of adults experienced some form of depression in early 2021 (27 January to 7 March); this is an increase since November 2020 (19%) and more than double that observed before the COVID-19 pandemic (10%).
- Around 1 in 3 (35%) adults who reported being unable to afford an unexpected expense of £850 experienced depressive symptoms in early 2021, compared with 1 in 5 (21%) adults before the pandemic.

Over the period 27 January to 7 March 2021:

- Younger adults and women were more likely to experience some form of depression, with over 4 in 10 (43%) women aged 16 to 29 years experiencing depressive symptoms, compared with 26% of men of the same age.
- Disabled (39%) and clinically extremely vulnerable (CEV) adults (31%) were more likely to experience some form of depression than non-disabled (13%) and non-CEV adults (20%).
- A higher proportion of adults renting their home experienced some form of depression (31%) when compared with adults who own their home outright (13%).

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<sup>267</sup> Marshall, L. et. al. The Health Foundation (June 2020), <https://bit.ly/2TTWU6k>

<sup>268</sup> Office for National Statistics (May 2021) <https://bit.ly/35JuiPQ>

An analysis of the impact of the pandemic on women by the Women's Budget Group<sup>269</sup> highlighted that:

- A large-scale study published in September 2020 found that being younger and female was associated with significantly greater levels of stress, anxiety and depression during the COVID-19 pandemic than for other groups,
- 44% of young women with a disability or long-term health condition said they are struggling during the COVID-19 pandemic (compared to 27% without a disability or long-term health condition),
- 43% of young women feel their mental health had become worse over the last 12 months (compared to 32% of young men) and over 50% said they were worried about their mental health,
- Lone parents (the vast majority of whom are women) were twice as likely to have poor mental health, compared with other family types, immediately before and in the early stages of the crisis. Overall, 51% of single parents reported having depression, bad nerves or anxiety compared with 27% of couple parents.

The University of Essex<sup>270</sup> has identified that women are more likely to experience a negative impact on their mental wellbeing due to increased family responsibilities, financial worries and loneliness. Research evidence provided by the Women's Budget Group (WBG) shows this burden is even greater for single parents.<sup>271</sup> Some of the starkest differences in the WBG survey were in the rates of high anxiety among mothers compared with fathers, although both represent significant spikes compared to normal data. The WBG states that recovery from the pandemic will not only need to address economic harm but the damage done to the population's mental health and particularly to women's and mothers' mental health.

Cambridge University has also reported evidence<sup>272</sup> that the COVID-19 pandemic has had a larger adverse impact on the mental health and wellbeing of some groups than others. Young adults and women have been more likely to report worse mental health and wellbeing during the pandemic than older adults and men. Women reported a larger increase in

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<sup>269</sup> Women's Budget Group, 'Lessons Learned: Where Women Stand in 2021' (January 2021) <https://bit.ly/3vQ268K>

<sup>270</sup> ISER (June 2020) The gender gap in mental well-being during the Covid-19 outbreak: evidence from the UK, Working Paper Series' <https://bit.ly/3x3F9ju>

<sup>271</sup> Women's Budget Group, Fawcett Society, The London School of Economics and Political Science and Queen Mary University of London (August 2020) Parenting and Covid-19 – Research evidence, <https://bit.ly/3vOH2zq>

<sup>272</sup> Chandola, T. et al, (December 2020) The mental health impact of COVID-19 and lockdown-related stressors among adults in the UK Cambridge University Press, <https://bit.ly/35PCz4V>

loneliness during the pandemic, as well as a greater degree of family and caring responsibilities, which could partially account for their higher levels of poor mental health compared to men. This research also found that similar to pre-pandemic trends, adults with low household income or socio-economic position reported more anxiety and depression than adults with higher household income or socio-economic position.

Research on the impact of COVID-19 on unpaid care work and psychological distress in the UK<sup>273</sup> found that every week women spent 5 more hours on housework and 10 more hours on childcare than men during lockdown. This increased housework and childcare was associated with higher levels of psychological distress for women. One-third of parents adapted their work patterns because of childcare/homeschooling. Men and women who adapted their work patterns had on average higher GHQ scores (indicating a possible psychiatric disorder) than those who did not. This association was much stronger if he or she was the only member in the household who adapted their work patterns or if she was a lone mother. Only 10% of fathers reduced work hours due to care work compared to 20% of mothers.

Combining employment with increased childcare, homeschooling and housework may have increased feelings of psychological distress through reduced time for sleep and leisure, and the stress of trying to meet competing demands. This research<sup>274</sup> suggests that lockdown has hit people with young families and lone mothers particularly hard in terms of mental health. Continued gender inequality in divisions of unpaid care work during lockdown may put women at a greater risk of psychological distress. Awareness of continued gender biases in divisions of labour and their impact on psychological health is an important consideration going forward.

A survey by Parentkind showed that 86% of children's and 84% of parents' mental health and well-being have been negatively affected by the disruption to schooling since the start of the first lockdown.<sup>275</sup> Interestingly this research noted that parents in Northern Ireland are far more likely to have been impacted negatively by the current arrangements for their child's schooling than their English counterparts: whilst 84% of parents in Northern Ireland said their mental health and well-being has been negatively impacted 45% of parents in England say the same.

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<sup>273</sup> Xue, B. and McMunn, A., (August 2020) Gender differences in the impact of the Covid-19 lockdown on unpaid care work and psychological distress in the UK, UCL Research Department of Epidemiology & Public Health, <https://bit.ly/3vRshM0>

<sup>274</sup> Ibid

<sup>275</sup> Parentkind (March 2021) Coronavirus Parent Survey Results Northern Ireland, <https://bit.ly/3vVbmrT>



In addition, prescribing statistics for anti-depressants are on the increase as a result of the pandemic. Anti-depressant prescription rates in the UK are among the highest in Western Europe with prescription rates in Northern Ireland significantly higher than the rest of the UK. Recent figures show that from January to December 2020 more than 2.75 million items were dispensed in Northern Ireland compared to 2.5 million in 2019 and 2.4 million in 2018.<sup>276</sup> During the year 2020/21 anti-depressants were dispensed to nearly 1 in 5 people in Northern Ireland (over 357,000 people) which is almost 19% of the population. 63.7% of those receiving anti-depressants were female with the highest proportion seen among females aged 45 to 64. These figures indicate that anti-depressants were dispensed to 23.6% of Northern Ireland's female population compared to 13.8% for males.<sup>277</sup>

### 2.1.1. Social Determinants of Health

It is essential to recognise that poor mental health is strongly associated with social and economic circumstances, including living in poverty, low-quality work, unemployment and housing.<sup>278</sup> Studies from past viral outbreaks show well-documented increases in mental health disorders. The drivers for this include social isolation, job and financial losses, housing insecurity and quality, working in a front-line service, loss of coping mechanisms and reduced access to mental health services. As previously stated in this document, women are disproportionately represented in poverty, social housing, and employment related to frontline services and care-giving.

Research shows that poverty increases the risk of mental health problems and that poverty can be both a cause of mental health problems as well as a result of them. Statistics from the Mental Health Foundation show that those living in lower socio-economic groups are more likely to experience chronic ill-health and those in the most deprived areas of Northern Ireland are twice as likely to show signs of a mental health problem (30%) than those in the least deprived areas (15%).<sup>279</sup> Austerity and public cuts have also hit Northern Ireland hardest as it relies more heavily on public spending for its output compared to the UK.

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<sup>276</sup>Madden, A. Belfast Telegraph (18th March 2021) Concern as amount of anti-depressants dispensed in NI rises, <https://bit.ly/3vOHIOU>

<sup>277</sup> General Pharmaceutical Services (June 2021), Annual Statistics 2020/21, NIRSA, <https://bit.ly/3vUkUn0>

<sup>278</sup> Marshall, L. et. al. The Health Foundation (June 2020), 'Emerging evidence on COVID-19's impact on mental health and health inequalities', <https://bit.ly/2TTWU6k>

<sup>279</sup> Mental Health Foundation (2016) Mental Health in Northern Ireland: Fundamental Facts, <https://bit.ly/2TTWU6k>



Research by the Trussell Trust shows that the population of people referred to food banks in their network during the pandemic saw an increase in the proportion of people reporting mental health problems from 51% in early 2020 to 72% in mid-2020.<sup>280</sup>

Medical professionals have warned that existing health inequalities are likely to widen without urgent action to support the most vulnerable to the economic and other effects of social distancing measures<sup>281</sup>. Action to address poor mental health and promote positive mental health can therefore not be achieved without addressing the broader social and economic determinants of ill health such as poverty, unemployment, low paid and low quality work.

Sir Michael Marmot who carried out a government review on health inequality has said that increasing out-of-work benefits and support for low-paid workers as the country emerges from the pandemic could have a big impact in curbing a mental health crisis and even save lives. He said in an interview that Government Ministers should not “fiddle around the edges” and instead should drastically reform the “uncaring” system in place. He said: “I have seen evidence that for some people in receipt of Universal Credit, there are mental health consequences. It is a brutalising system. Everyone should have at least the minimum income necessary for a healthy life.” He went on to say that: “And in work, they should be paid a living wage. If they can’t work, for whatever reason, then the welfare system should be sufficiently generous for their health not to be damaged by that experience. We know what needs to be done. Let’s do it.”<sup>282</sup>

Northern Ireland’s Interim Mental Health Champion, Professor Siobhán O’Neill has called for a “recovery plan” across society to deal with the impact of the pandemic on mental health.<sup>283</sup> Professor O’Neill has stressed that the budget for mental health services in Northern Ireland needs to be increased given the greater demand which is likely to be placed on mental health services in the aftermath of the pandemic. She also addressed the groups who are particularly vulnerable to mental health challenges as a result of the pandemic, including young people, women and people with children at home, as well as those with pre-existing medical conditions and those on low incomes. The plan includes interventions for those in socially deprived

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<sup>280</sup> The Trussell Trust (May 2021) State of Hunger, Building the evidence on poverty, destitution, and food insecurity in the UK, Year two main report, <https://bit.ly/2TTCxH>

<sup>281</sup> Margaret Douglas et. al. The British Medical Journal (April 2020), Mitigating the wider health effects of covid-19 pandemic response, <https://bit.ly/2U0uyXZ>

<sup>282</sup> Savage, M., The Guardian (March 2021) Raise benefits to curb UK crises in mental health, expert urges, <https://bit.ly/3vQ3tEq>

<sup>283</sup> Leeboddy, C., Belfast Telegraph (March 2021) NI’s mental health champion calls for ‘recovery plan’ in aftermath of pandemic, <https://bit.ly/3gPTJWd>

areas with Professor O'Neill stressing the benefits of targeting specific low-income locations and the benefit this has on mental health.

### 2.1.2. Mental Health among Marginalised Groups

We welcome the publication of the Mental Health Action Plan by the Department of Health and the recent consultation on a new Mental Health Strategy for Northern Ireland, although it is extremely disappointing to see that considerations have not been given towards the increased mental health difficulties faced by the LGBTQ+ community (particularly trans individuals), disabled women, black and minority ethnic women and other groups that face social isolation and vast health inequalities. A policy that applies to all is not enough to address the health inequalities faced by marginalised groups and much more nuanced, intersectional approaches are needed to support these groups.

Mental health care cannot ignore race, gender, sexuality, or disability, and mental health professionals must be culturally competent in the language and experiences of women in these communities in order to properly care for them. For the women in these communities, not only are there significant barriers to accessing these services as a result of lengthy waiting times and inaccessible referral pathways, but once having accessed the services, there is not a guarantee that their experiences will be understood or affirmed due to lack of training and experience. The Department of Health should specifically ring-fence funding for the development of cultural competency within mental health services in direct collaboration with community organisations that represent these women.

Some of the marginalised groups we recommend need urgent mental health support, through increased access to mental health services; specialised medical interventions; and higher levels of specialised support include:

#### 2.1.2.1 Victims of Domestic and Sexual Violence and Abuse

The number of domestic abuse incidents recorded in 2019/20 is 31,817. This is the highest level since the data series was first compiled in 2004/05 and shows a 53% increase on the figure for 2004/05 which was 20,959. The latest figure of 31,817 incidents shows an increase of 135 and is 0.4% higher than 2018/19 which was 31,682. The number of domestic abuse crimes recorded was 18,640. This shows an increase of 2,476 (15.3%) compared to the previous twelve months and is the highest level recorded since these statistics started being collected in 2004/05 showing a 93% increase on the level of 9,647 recorded in 2004/05. In relation to gender breakdown of offenders

69% victims of all domestic abuse crimes were female and 30% were male. Of all offenders dealt with by police in 2019/20 in connection with domestic abuse crimes that resulted in an outcome, 86% were male and 12% were female. The majority (94%) of offenders were aged 18 and over.

Our first lockdown in NI began on 23<sup>rd</sup> March 2020 and within this year, up until 23<sup>rd</sup> March 2021, eight women have lost their lives, murdered by a partner or a family member. We know the links between domestic homicide and high-risk indicators such as coercive and controlling behaviour, stalking and domestic violence.

Victims of domestic violence require specific and appropriate mental health services, including safety planning, therapy, and/or counseling. These services should be available to the victim regardless of whether or not she is currently in a relationship with the abuser. The services should be provided by people trained in the dynamics of domestic violence. Some of these services are currently being provided (for example through organisations such as Women's Aid), but should be expanded and funded as a matter of urgency due to the increased risk of domestic violence as a result of the COVID-19 pandemic.

Victims of sexual violence also require appropriate therapy and counselling services. Any person who self-identifies as a victim of sexual violence should be able to access services from therapists trained in trauma informed care and victim responses to sexual violence. These services should be provided within a timely manner and prioritised as a matter of urgency. There needs to be greater recognition of intimate partner sexual abuse and both the short and long term traumatic impacts on individuals, but this is not addressed adequately within the Gillen Review.

We recommend that specific funding is allocated for appropriate, safe and rapid therapeutic services to victims of domestic violence and sexual violence. Funding needs to be allocated to specialised services based on skills.

### 2.1.2.2 LGBTQ+ People

LGBTQ+ communities in Northern Ireland experience mental health issues at disproportionately high levels due to widespread social stigma, abuse, and institutionalised homophobia, biphobia and transphobia. Mental health issues within the community are exacerbated in a myriad of ways by statutory services which fail to meet their needs including: failure to adequately fund and competently advertise sexual & reproductive health services, leading to significant HIV/STI anxiety; failure to provide transition-related-care for trans individuals in a timely and culturally competent manner; failure to fund access to IVF for lesbian and bisexual couples; failure

to enforce equality legislation in schools and adequately clamp down on anti-LGBTQ+ bullying; failure to address poverty, homelessness, and criminalising drug use; among many others.

These issues, compounded with the chronic underfunding of mental health services and lack of cultural competency within such, has led to a mental health crisis within LGBTQ+ communities. This manifests itself in a variety of different mental health issues, such as depression, suicide, substance abuse, self-harm, unemployment and homelessness.

We must adequately fund mental health services and engage in meaningful co-development and coproduction of training and service provision with LGBTQ+ communities. Specifically, LGBTQ+ counselling and mental health services should be funded and delivered in collaboration with community organisations (including those already doing this work, i.e. Rainbow). Service providers need to be specifically trained on supporting LGBTQ+ people, with this training delivered by/developed with LGBTQ+ community orgs. For trans people, mental health support, community support, and access to gender affirming care should have clear and defined pathways between them and be integrated in such a way that improves access to all while not requiring access to mental health care as a prerequisite to other care.

We must also recognise that the disproportionate mental health issues within LGBTQ+ communities are not inevitable, and are contributed to significantly by the institutionalised issues explored above. In order to improve the mental health of LGBTQ+ communities, the conditions which led to that poor health must be addressed.

### 2.1.2.3 Carers

The COVID-19 pandemic has resulted in increases in the numbers of women with caring responsibilities and issues with a lack of support for carers. This has had an impact on the mental health of these carers. Across the UK almost two thirds of carers (64%) say that their mental health has worsened as a result of the pandemic. 65% of women said their mental health had suffered compared to 58% of men.<sup>284</sup>

Before the crisis, carers in Northern Ireland were already providing substantial hours of care. In April 2020, 78% said they were providing more care than before. Six months on, this figure had increased to 85% of carers reporting they were providing more care.<sup>285</sup> 61% of carers in Northern Ireland have not been able to take any breaks from their caring role during

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<sup>284</sup> Carers UK (October 2020) [Caring behind closed doors: six months on](#)

<sup>285</sup> Ibid

the COVID-19 pandemic, while 17% said that they had not been able to take as many breaks as they felt they needed. This has affected carers' health and wellbeing, with almost two thirds (65%) reporting that their mental health has worsened due to the COVID-19 pandemic.<sup>286</sup> Information on the impact of caring responsibilities will be expanded on in section 2.2.

### 2.1.3. Women's Centres work on Mental Health

Women's Centres across Northern Ireland carry out a range of work and programmes in relation to mental health in local communities. This important work has continued during lockdown and many have seen considerable increases in demand for their wellbeing and mindfulness classes as well as for one to one counselling as a result.

Some of the examples of the courses, programmes and services that the Centres provide include the Maternal Advocacy and Support (MAS) project (see section 2.5.2.) Mindfulness, 5 Steps to Wellbeing, Art as Therapy, Declutter Your Mind, Managing Stress, Mood Matters, Benefit Checker and Financial Support (to support women who have difficulties understanding the benefits system) and offering social spaces which are women-only safe spaces for women to meet, talk and make friends. The Centres also have close links with Women's Aid NI, social services, the Probation Board, PSNI, Health Trusts, Mental Health nurses, social workers, psychiatrists, local churches and community and voluntary organisations to provide holistic services to women and their families.

The range of services that Women's Centres can offer in relation to mental health can depend on funding. In some cases where funding is not available services can depend on the availability of trained volunteers to carry out this work. Some of the Women's Centres have funded provision for counselling but many operate this counselling on a voluntary basis. Many of the Centres have seen their counselling services grow considerably as a result of the pandemic.

Chrysalis Women's Centre in Craigavon does not get any specific funding and relies on trained volunteer counsellors. Demand is growing in the local area with the impacts of lockdown, COVID-19 and unemployment.

"I think we are just at the start. I think we are going to get a pandemic of mental health issues after the Covid pandemic."

- (Ruth McKeever, Manager of Chrysalis Women's Centre, Craigavon)

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<sup>286</sup> Ibid

Atlas Women's Centre in Lisburn has also seen significant increases in demand for their counselling services from people of all ages. They receive many referrals from local GPs, Community Psychiatric Nurses, the Mental Health Team and health visitors. They have nine counsellors and they receive no set funding for any of them and are all voluntary.

The Centre has seen significant mental health issues for parents as a result of the COVID-19 pandemic including isolation, homeschooling and children out of their routines. Many of the women have had new babies and are suffering fear, anxiety, loneliness and isolation. There have been a lot of pregnancies in the area and the mental health of these women has really been impacted because they have not been able to access the same level of care and have not had continuity of care. Many women are experiencing financial worries and some have had small local beauty businesses which have been really affected by lockdowns. The Centre is also seeing a lot of relationship issues with separations and cases of domestic violence. They are seeing examples among the women they work with whose mental health has improved in the last number of years because of the services they provide, losing this progress as a result of lockdown and a reduced ability to access these important services.

Atlas Women's Centre has seen increasing demand for its range of programmes supporting mental health and isolation. Although prior to the pandemic they were able to accommodate 250 places per week, that will not be possible coming out of lockdown with social distancing and safety precautions impacting on the numbers of people who can access their services. They are concerned about how they will meet demand for their services, given the impact on mental health of the pandemic and lockdown.

"Atlas women's centre is so important to women in this area and the services we provide will be needed even more coming out of lockdown."

- (Gay Sherry-Bingham, Manager of Atlas Women's Centre, Lisburn)

Kilcooley Women's Centre recognises that health and wellbeing initiatives underpin everything they do in the Centre. The Centre believes it is important to provide low level wellbeing improvement opportunities on a regular basis. In addition, it is key to have good links with other community organisations in order to provide higher level wellbeing support when needed such as financial advice, domestic abuse support and counselling. Kilcooley Women's Centre offers a broad and varied range of wellbeing support programmes alongside low-cost, affordable, onsite childcare to make all opportunities as accessible as possible.

“During lockdown many of our classes moved online via Zoom. In order to provide appropriate support we have been making regular weekly calls to all participants to ensure they are supported and can be directed to appropriate services during the pandemic. We also created a local ‘lockdown’ specific directory for all services across the Borough which was designed to help people by making it easier to avail of services and local support.”

- (Alison Blayney, Manager of Kilcooley Women’s Centre, Bangor)

Women’s Centres play a crucial role in relation to mental health services in local communities and are often able to reach and engage with those who are the most marginalised. They provide trusted, local spaces where women and men can access help in relation to mental health issues. The services provided are holistic so that the full range of issues that are impacting on a person’s mental health can be addressed. Early intervention is an important area of their work to ensure that mental health issues do not get the chance to take hold and cause even greater problems for those impacted.

The fact that the women’s centres provide childcare to enable people to avail of courses and counselling is a major aspect of this work. It enables people to take advantage of help with their mental health without having to disclose to friends/family if they do not wish to do so and removes a significant barrier to access for these important services especially for women.

Despite the importance of the work of women’s centres across Northern Ireland in relation to mental health, this work often goes unseen in the wider mental health structures and its value is untold and unrecognised. In fact, funding for the work of women’s centres is being cut. Funding for the women’s sector in Northern Ireland has been continually diminishing over the past ten years. In the last five years alone, the women’s sector has faced cuts of 2 – 5% per year from budgets. Women’s organisations have seen a shift from core funding to short-term project funding. This limits their ability to respond to emerging issues, retain key staff and develop any long-term planning to meet the needs of women. This lack of funding only serves to further compound the marginalisation of women and of those who are at the greatest risk of poverty, ill health and social isolation.



## Recommendations:

- Increase the budget for mental health services as a result of greater demands arising from the pandemic.
- Developing pandemic-related mental health policies to take into account those who have been most impacted including women, young people, those on low incomes, BAME and LGBTQ+ people and carers. Government should devise policies that consider the mental health impacts on these groups and provide funding and services to specifically improve their mental health and economic wellbeing.
- Health and Social Care Trusts should ensure carers in Northern Ireland are informed of their right to a Carer's Assessment so that carers are alerted to the mental health supports available to them and to help ensure that those at most risk of poor wellbeing and burn out get the support they need.
- Identify carers as a priority group requiring emotional support services and develop agreed pathways for them to access mental health interventions.
- Reducing poverty through significant investment in welfare and debt prevention to ensure people have sufficient income to live on both during the crisis and into the future as society gradually emerges from the pandemic and its longer-term impacts - see sections 1.4-1.5.
- Improving access to culturally competent sexual health services (reducing STI/HIV anxiety).
- Decommodifying housing and ensuring quick access to alternative accommodation in cases of DV/SV/homo- + trans-phobia from housemates and family.
- Improving cultural competency within drug cessation services, safe injection rooms, etc.
- Removing crisis/mental health response from PSNI duties, developing emergency community healthcare support for mental health crisis situations.
- Adequate long-term funding must be provided to the wider women's sector and to the network of women's centres across Northern Ireland for their work on mental health issues. Funding and support must be increased so that they can continue, develop and strengthen their work in relation to mental health which has seen increased demand as a result of the pandemic and which is unlikely to diminish for some considerable time.

## 2.2 Women with Caring Responsibilities and Dependents



"[COVID-19] affected my maternity care, lost mum due to covid."

"I have been isolated, because of my health and being pregnant at the beginning of the lock downs I was off work. The lack of exercise, social interaction all added to my isolation and affected my mental health."

"It's taken a big toll on my mental health as I tried working from home while caring for 3 kids, one of which is autistic. The loss of all our usual external support services was very difficult. It felt like I was struggling to balance it all."

"It's anxiety-inducing that the people I care for are vaccine hesitant and are too scared to get a vaccine despite being medically vulnerable. It's been a tough adjustment to provide additional care. I can't access Carers Allowance as I earn slightly too much in my PT job."

"Stressed to the hilt trying to juggle work and caring, especially trying to access help etc from statutory bodies."

"Trying to juggle caring with work and home-schooling/school runs and homework and trying to take some time for myself has been extremely difficult. I am tired all the time. I was caring for both parents during the pandemic, however my mother's caring needs increased during the pandemic due to the progressive nature of her illness which meant trying to coordinate the care of 2 people. We couldn't accompany mum to chemo or hospital which was difficult emotionally as it felt like she was going through it all on her own. I found caring during covid very emotionally difficult and physically draining. When mum got more ill at Christmas I was travelling up and down to Belfast or staying overnight with her to coordinate her care etc which meant I didn't get to see my husband, children or friends for many months. I had to reduce my hours in work in order to try to juggle everything but then was getting more stressed because I wasn't getting all the work done that I needed to."





“More responsibility has meant less time to unwind and relax.”

“Stressful making sure my parent is safe and has everything they need practical and mental health.”

“[caring responsibilities mean] less time to complete university work.”

“I care for a relative on the shielding list and my mental health suffered due to fear for them. My work was affected as I had to put my care recipient first and his safety was compromised through my line of work.”

“Been harder to look after my own mental health as I worry about my children’s.”

““I feel more concerned about staying away from others, I constantly would get tests before the person I look after got vaccinated. I felt more anxiety ensuring that their risks of contracting COVID were low.”

“As an unpaid carer to my mother I had to do all her shopping and cleaning. She became more reliant on me as she was not seeing anyone outside our family bubble.”

“I now have an increased workload as working for the NHSCT, as well as balancing caring for my disabled mum who no longer can do things for herself due to covid, we used to have a cleaner who was employed for 4 hrs a week over 2 days to enable me to spend time with my husband and 4 year old unfortunately she stopped and [no] longer cleans for my mum due to the risk of Covid, unfortunately this has fallen on to me to manage as well.”

“My daughter is vulnerable and has a rare genetic condition, she was at home even though special schools had reopened so I had less time to myself which was difficult. However, my daughter coped better being at home and her overall behaviour improved.”

“My life is now essentially home working and continuous care. My calendar is dictated by the date on blister packs of medicine, calls to GPs, etc in addition to working an average 10 hours a day. I worry that I do not have enough time for 'activities' with my mother who has major problems following strokes. I am neglecting my partner.”





“Too hard; too much; always struggling; feel lost...”

My adult son is autistic & also has a learning disability. This time has been very difficult for both of us however we just muddled through and helped and supported each other when times got tough. I have found that you have to demand support from SE health trust and not back down. Also limited access to GP and other health care professionals as you don't want to be a nuisance, you just get on with daily challenges.”

“I had to care for my son and work later in the evenings. My wellbeing has suffered. I feel quite isolated even now that lockdown is over.”

“It's made it harder being stuck at home 24/7 caring for someone with no way outside.”

- Testimonies from WPG Primary Research



Information on the impact of caring throughout the pandemic has already been highlighted in detail in section 1. However, it is still worth analysing the impact of caring responsibilities on carers' health. The numbers of people with caring responsibilities in the UK increased dramatically throughout the COVID-19 pandemic. Urgent action is needed to address the increasing mental health concerns of carers. As the majority of carers are also in paid employment, if action is not taken to support this group, it is likely to have long-term detrimental impacts on the workforce. Some statistics on impact of increased caring responsibilities during COVID-19 from the Carers Week report includes<sup>287</sup>:

The top three most frequently chosen challenges by all unpaid carers:

- managing the stress and responsibility (71%)
- the negative impacts on their physical and mental health (70%)
- not being able to take time away from caring (66%).

These results closely matched what the public, who had never been unpaid carers, thought the challenges that unpaid carers face were:

- not being able to take time away from caring (72%)
- managing the stress and responsibility (70%)
- the negative impacts on their physical and mental health (69%).

There were other important challenges that were frequently chosen by unpaid carers:

- the impact it has on other personal relationships (e.g. with family, friends, partners etc.) (63%)
- the negative impact it has on their ability to do paid work (55%)
- the financial impact of the additional care costs (eg specialist care equipment, home adaptations (53%)
- not having anyone to talk to about the challenges of caring (50%).

The general public, who don't have a caring role, were asked what worries they would have if they took on an unpaid caring role. Their top three worries were:

- The negative impact on their own physical and mental health (56%)

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<sup>287</sup> Carers Week (2020), 'Carers Week 2020 Research Report: The rise in the number of unpaid carers during the coronavirus (COVID-19) outbreak', Making Caring Visible, (available online): <https://bit.ly/35MKMXG> p.7.

- Not being able to cope financially, not being able to afford care services or equipment required (50%)
- Not knowing or understanding what help is available to carers (49%).

For too long, women and unpaid carers have provided social support that upholds the health and wellbeing of society whilst propping up the NI economy to the value of £4.6 billion per year. Earlier in this plan, statistics were given of the economic benefits of investing in care for both gender equality and in addressing climate change. The needs of carers' health should be a priority in any recovery planning in Northern Ireland.



## 2.3 Additional Health Concerns

“I have felt incredibly isolated and I have found that it's affect my ability to concentrate and do uni work. I have lost contact with friends during the pandemic due to no longer seeing them in person and my mental health had definitely been up and down.”

“My health has been totally shot. I was a young healthy woman, able to do everything, and now am unable to even leave my house due to long covid sickness.”

“Having had COVID-19, it has left me with breathing difficulties, dizziness and extreme tiredness.”

“I have become very isolated and now feel like it is Stockholm syndrome I can go out but don't want to.”

“[COVID-19] Impacted my health more than anything.”

“Diminished all areas of well-being.”

“It has caused me to develop anxiety and chronic insomnia.”

“Badly. I am getting divorced and I have been left with severe anxiety and depression.”

“Very negatively, my education has struggled moving online and my social well-being has been massively affected.”

“I've become more socially isolated. (I'm in the vulnerable category and live alone). I've become more fearful when I do venture out (which is kept to a minimum). In the first lockdown it was especially hard to get any supplies without going out. I've avoided family birthdays even though lock down has ended for fear of picking up something.”

“I am in the vulnerable category and have been isolating from the first lock down until I was fully vaccinated. My fitness level is now v poor due to not being able to attend water fitness class. Isolation has been an issue and being separated from family members. Access to my GP is the main issue only able to have phone consultation.”

“Have put off contacting the doctors with issues I would have normally been happy to talk to a doctor face to face but feel uncomfortable having to briefly explain to a receptionist. I have also had trouble trying to register with a new dentist.”



“Basically the button was paused on waiting list since March 2020, was told at Christmas 2019 would have first appointment in Sept 2020, I'm still waiting.....”

“Still not accessed appointment and I have no idea where I am on a [waiting] list... if any.”

“Possibly an extra year [waiting time]. Had to borrow money to see a private consultant for a diagnosis.”

“Still waiting for a Cardiology appointment so don't know how long it will be. It impacts my personal wellbeing because my heart function is reduced.”

“I've already been waiting 3 years for surgery - all I've been told is that it will take even longer now because of the pandemic.”

“I haven't seen the specialist I was referred to 18 months ago.”

“Unknown [waiting time] but estimated to be between 18months to 3 years.”

“Not sure of extension but already waiting two years for gallbladder operation.”

“Smear test was delayed, and other tests I need to get.”

“My daughter's cardiology review was to be in July 2020. I am still waiting on the review, she has three holes in her heart, it has been very stressful.”

“I am on the urgent waiting list to have some moles checked on my face. I have been told it could be two years before I'm seen. As some of the moles have changed colour and shape this is very worrying.”

“My son is waiting on workshops and medical assessments. He has had no support or interventions. Constantly contacting the Health Trust is futile as we just keep moving to different waiting lists.”

- Testimonies from WPG Primary Research



In addition to the increased mental health implications of the various lockdowns throughout the COVID-19 pandemic, there are other concerning implications on women's physical health as a result of the pandemic. This includes the ramifications of cancelled cancer screenings, increased waiting lists, the ongoing health impacts of austerity cuts and poverty, and issues around accessing abortion and maternal health services, and how this impacts upon women's bodily autonomy. We also have specific concerns for the health of immigrant women, women of colour, trans women and disabled women.

### 2.3.1 Ramifications of Cancelled Cancer Screenings

In the initial FRP launched last July, data from Cancer Research UK showed the vast impact of just 10 weeks of lockdown on cancer screenings and the long-term impact on cancer services and individual health<sup>288</sup>. Based on the average number of people screened per week (210,000), just 10 weeks of lockdown created a backlog of 2,100,000 screening appointments, tests and treatments by the beginning of June 2020. As lockdowns continued for most of 2020 and into 2021, this has significantly worsened.

For every week that screenings were paused, Cancer Research UK estimated that 7,000 people weren't referred for further tests and 380 cancers were not diagnosed. While cancer screenings resumed across the UK after the first lockdown, recent data from The Lancet Oncology shows that:

"COVID-19 has had devastating effects on patients with cancer, with huge numbers of missed diagnoses and delayed treatments due to health systems under pressure and patient reluctance to seek medical care. Despite repeated reassurances from officials that the UK's National Health Service (NHS) remained open for urgent care, a [study](#) estimated that 45% of those with potential cancer symptoms did not contact their doctor during the UK's first wave of the pandemic (March–August, 2020), citing reasons including fear of contracting COVID-19 and avoiding placing extra strain on the NHS. Consequently, suspected cancer referrals fell by 350 000 compared with the same period in 2019. Combined with interruptions in cancer screening programmes and delays in scans and diagnostics, a spike in late cancer presentations and diagnoses is anticipated, making some previously curable

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<sup>288</sup> Katie Rovers, (June 2020), 'Over 2 million people waiting for cancer screening, tests and treatments', Cancer Research UK, (available online): <https://bit.ly/3qmxH0k>

tumours more difficult to treat and, unfortunately, further excess deaths unavoidable.<sup>289</sup>

Organisations such as the Women's Resource and Development Agency (WRDA) travel across Northern Ireland to deliver sessions to increase awareness of the need for people to assess themselves and attend Breast, Cervical and Bowel cancer screenings; and these services must be prioritised as we move out of the lockdown.

### 2.3.2 Increased Waiting Lists

According to the Lancet Oncology, waiting lists are a growing concern across the UK:

"The UK's NHS currently has more than 4.6 million people on waiting lists for surgery and 300 000 people have been on hold for more than 12 months—a wait time that is 100-times higher than before the pandemic.<sup>290</sup>

As a result of this, the NHS Confederation has continued calls for urgent emergency funding and long-term spending by the UK government<sup>291</sup>. This is an issue that is drastically worse in Northern Ireland and should be an urgent priority for both the Northern Ireland Executive and the UK Government. Northern Ireland has the worst waiting lists across the UK and the Department of Health has stated what without significant and recurrent funding from the Executive, it could take up to 10 years to tackle Northern Ireland's current waiting lists<sup>292</sup>.

In Northern Ireland, more than 335,000 people are waiting for a first consultant-led appointment, and more than half of those people (189,753) have been waiting longer than a year for this first appointment<sup>293</sup>. People waiting more than a year on a waiting list increased by more than 20,000 compared to the end of December 2020 when 167,806 people had been waiting more than a year, and more than 70,000 compared to March 2020 when 117,066 had been waiting more than a year. On top of this, another 12,476 people were waiting for a first appointment for cataract treatment at a day procedure. The Department of Health target is that at least half of all

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<sup>289</sup> The Lancet Oncology, (April 2021), 'COVID-19 and cancer: 1 year on', Vol.22, Issue 4: <https://bit.ly/2TUHXAX>

<sup>290</sup> Ibid.

<sup>291</sup> BBC News, 'Coronavirus: NHS waiting lists 'could hit 10 million this year'', BBC News Health, (available online): <https://bbc.in/2TZBMLP>

<sup>292</sup> BBC News (April 2021), 'NI hospital waiting lists could take up to 10 years to tackle', <https://bbc.in/3gPybZR>

<sup>293</sup> BBC News (May 2021), 'NI Hospital Waiting Lists 'undermining' Free Health Service', <https://bbc.in/3gObEfz>

patients should wait no longer than nine weeks for a first appointment and that no one should wait longer than a year. While more people were seen in the first quarter of 2021 (71,078) compared to quarter 4 of 2020 (66,055), there were still 34,190 fewer people seen compared to quarter 1 in 2020, where 105,268 people had their first appointment.

This is reflective of the significant backlog created due to both COVID-19, and insufficient funding to address the issue. A worrying development is in the impact this has on worsening inequalities. In the year April 2020 to April 2021, 5,200 procedures were undertaken by trust consultants in private and independent sector facilities, which helped time-critical cancer surgeries during the pandemic. However, private healthcare is unattainable for many in Northern Ireland and cannot be seen as a long term solution to increased waiting lists, as this drastically undermines the principle of universal, free healthcare and can create barriers to those unable to afford to go private. Given the information provided in section 2.1.1 on the social determinants of health, this is particularly concerning to the WPG.

In 2021, in the first case of its kind, two women have taken legal action to highlight Northern Ireland's lengthy waiting lists and have been granted leave for judicial review<sup>294</sup>. It has been argued that the vast waiting lists in Northern Ireland are a "glaring breach of the duty to the public to provide basic healthcare"<sup>295</sup>. Further, a 2019 review of Northern Ireland waiting lists found that a person in Northern Ireland is 48 times more likely as a person in Wales to wait more than a year for care. When compared to England and Scotland, where approximately 1 in 12 people were on elective waiting lists, 1 in 5 people in Northern Ireland were on waiting lists for more than a year. This is an issue that has inevitably been exacerbated by backlogs due to the pandemic. This situation is creating real risks to patients' quality of life and increases disease and preventable death.

A potential solution for this is to create elective care centres, which may be politically and financially easier than closing sites to centralise care; given huge problems with access poverty and public transport in Northern Ireland. More information on the health impacts of austerity on women will be outlined in the following section 2.4.

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<sup>294</sup> BBC News (January 2021), 'Waiting lists: Legal action over lengthy NI lists clears first hurdle', <https://bbc.in/3qIUvnE>

<sup>295</sup> Ibid, n198.

### Recommendations:

- Introduce multi-year budgets to allow for measures to be implemented to address the waiting list crisis in Northern Ireland.
- Develop a 10-year strategy to address waiting lists in Northern Ireland and ensure private healthcare does not become the norm nor create further barriers for those unable to afford private healthcare.
- The NI Assembly should actively lobby against any steps that towards the privatisation of the NHS by the UK Government.



## 2.4 Health Impacts of Austerity on Women

In the past rising levels of government debt have led to austerity and welfare reform policies which prioritised rapid reductions in government spending through cuts to health and social services. As stated earlier in this plan, women in Northern Ireland were disproportionately and cruelly impacted by years of austerity and welfare reform policies introduced as a result of the 2008 financial crash. Not only does austerity have significant impacts on economic standing, it also has been proven to have profound health impacts. Research by the British Medical Association highlights:

‘Austerity and welfare reform in the UK has resulted in substantial reductions in public spending, principally through budgetary cuts on departments and services. This has significantly affected local government funding and welfare support. The broad impact has been to hamper progress in reducing inequality and job prospects; a decrease in the number of households achieving a minimum income for healthy living; increases in relative child poverty; and increased levels of material deprivation. These factors can impact negatively on health and wellbeing in the absence of strong support systems.’<sup>296</sup>

Research has shown that economic crises and their countermeasures have pronounced and unintended effects on public health. It shows that austerity measures can exacerbate the short-term public health effect of economic crises, for example, through cost-cutting or increased cost-sharing in health care which reduce access and shift the financial burden to households. Strong social protection mechanisms (both formal and informal) can mitigate some negative effects of recession on health such as increasing suicides.<sup>297</sup>

Evidence from countries such as Iceland, Sweden, Canada and Norway highlights the importance of maintaining high levels of public spending on social welfare and health as important mechanisms for improving health outcomes and narrowing health inequalities, while supporting long-term, sustainable economic growth. In addition to the direct impacts of the Covid-19 pandemic on health there will be broader health impacts on mental health, the misuse of drugs and alcohol, suicidal behaviour and instances of domestic abuse. Austerity policies are only ever likely to worsen these impacts. A study on the impact of austerity measures on health reported

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<sup>296</sup> BMA (2016), ‘Health in all policies: health, austerity and welfare reform: A briefing from the board of science’, British Medical Association, (available online): <https://bit.ly/3wV2Cng>

<sup>297</sup> Financial crisis, austerity, and health in Europe, The Lancet, March 2013, <https://bit.ly/3vOIJwM>

that austerity policies were implicated in worsening mental health, increased suicide rates, heightened mortality in older age groups and greater unmet health care needs.<sup>298</sup>

The Marmot Review into health inequality<sup>299</sup> showed that life expectancy in England has stalled. Among women particularly, life expectancy declined in the more deprived areas of the country. Sir Michael Marmot said in relation to the findings that while his report is concerned with England, in Scotland, Wales and Northern Ireland the damage to health and wellbeing is similarly unprecedented.<sup>300</sup> He said: “Austerity has taken a significant toll on equity and health, and it is likely to continue to do so. If you ask me if that is the reason for the worsening health picture, I’d say it is highly likely that is responsible for the life expectancy flat-lining, people’s health deteriorating and the widening of health inequalities.”<sup>301</sup>

If the government uses austerity policies as a response to the Covid-19 crisis this has the potential to cause widespread damage to health. Policies that prioritise economic and social support as well as increasing access to care are more likely to reduce the health impacts of this economic crisis and should be the focus of government action.

In the context of an upcoming recession due to COVID-19, we support recommendations from the British Medical Association to:

- Increase investment in social protection systems - such as unemployment programmes, housing support and income maintenance - to counter the projected recession and austerity,
- Increase investment in healthcare and public health services in the short and long-term, including adequate funding for evidence based preventative and early intervention services.

Throughout this recovery plan, we have presented evidence of the extremely negative impact austerity has had on Northern Ireland. Suffering for women due to a decade of austerity was immense; socially, economically and in terms of their health and wellbeing. In addressing the health crisis we currently face, tackling health inequalities for women and the unequal health ramifications of economic decision making needs to be a priority.

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<sup>298</sup> Austerity and health: the impact in the UK and Europe, The European Journal of Public Health, October 2017, <https://bit.ly/3qiE4SC>

<sup>299</sup> Health Equity in England: The Marmot Review 10 Years On, The Health Foundation, February 2020, <https://bit.ly/3gVqnGh>

<sup>300</sup> The Guardian (February 2020), ‘Austerity Blamed for Life Expectancy Stalling for First Time in Century’, <https://bit.ly/3gPyFz4>

<sup>301</sup> Ibid



## 2.5 Abortion, Maternal Mental Health and Bodily Autonomy

“I was a first-time mum during COVID. My baby was 3.5 months when we went into the first lockdown. I felt separated from family and friends and lacked the support I needed. My baby also missed out on health visitor check-ups. I felt mentally drained as I felt like I had to overcompensate on all the interactions and stimulation she was missing out on with having others around.”

“Front line hospital staff while pregnant was very stressful”.

““I’m still waiting on a physio referral for injured abdominal muscles during pregnancy - my child is 8 months old. I can’t exercise properly and suffer back pain constantly””.

“I had to go to baby scans and appointments on my own”.

“I waited 4 months for an implant removal and ended up having to go private for the appointment as wait times were too long.”

“[Access to abortion] - It was for my daughter and after a few phone calls she was able to access pills.”

“[Access to abortion or contraception] - You did feel that because NHS was overloaded you could not ring your GP”

“Women need access to abortion services and counselling, Covid is NOT AN EXCUSE TO REFUSE SERVICES WHICH HAVE BEEN LAID DOWN BY WESTMINSTER - STOP THE EXCUSES”

“Was able to access ema [Early Medical Abortion] in a local clinic in Western Trust area. Luckily at that time services were still ongoing. I don't know what I would have done if the process wasn't so easily accessible at the time. I did face a longer wait than I'd have liked due to one doctor carrying out the service but the care I received was excellent.”

“It was honestly awful doing scans alone, I have severe medical anxiety. I had a very concerning 20 week scan alone + follow up appointments including amniocentesis alone. My partner had to leave an hour after I gave birth. I then spent three days (jaundiced babe) attempting to establish breastfeeding in the hospital with one hour worth of visit, to shower and eat and sleep in. I was delirious after those days of 0 sleep and my arms would shake when I was trying to hold her to feed. I was so exhausted & had no help. I still get panicky when I think back to the hospital and also get really angry seeing about people in the pub when I had to do that alone. It’s made me very bitter about how my first child was brought into the world and made me really worry about having any more.”

“The Health Visitor has not seen my infant son since his 6 mth check in October 2019, there has been no phone or virtual contact. I am now pregnant again and would be a high risk, all appointments with GP are by phone only, refusing to see any patients in person. Thankfully all maternity hospital appts have continued as normal.”

“I was on Maternity Leave when the pandemic started, so access to Health Visitors stopped along with dental care.”

“It was awful, I feel traumatised because of this.”

“All appts ran to time, husband wasn't allowed to attend”

“I did need to access contraception during the pandemic. The limited availability of easy to access service, over reliance on GPs to provide this here in Northern Ireland limits our options and restricts our lives unnecessarily. You should be able to be prescribed contraception from your local pharmacy.”

“Went to 20 week scan alone, got ill with sepsis during labour and had a prolonged stay in hospital, found this very difficult with restrictions on visiting.”

“Scans, appointments and visiting EOU was terrible having to do it on my own, however during labour I found it pretty much the same as my first before the pandemic.”

“I had a miscarriage during the pandemic and I was offered no support.”

“Frustrating as not all services available, which lead to extended hospital stay instead of at-home treatment.”

“I have gotten sexual health counselling and mental wellbeing. As a nervous person it was nice to be able to do these over the phone.”

“Having to attend all appointments alone was stressful, and I had complications which led to emergency surgery and my son being sent home without me even though he was ebf. This has really impacted my mental health.”

“Child born At start of lockdown. He was a forgotten child as far as health care visits etc. Absolutely disgraceful. No support from healthcare system during pandemic

Thankfully I'm not a first-time mother so I wasn't in dire need.”

“Seeking support on incident of sexual assault, been on a waiting list for months with no support. Luckily I have found some online resources to tide me over.”

“Miscarriage in EPU was difficult as had to go alone and no aftercare offered.”

“It was post-birth. Could not visit GP when I felt like I needed help as it was at the height of the pandemic.”

- Testimonies from WPG Primary Research



## 2.5.1 Abortion and Bodily Autonomy

### 2.5.1.1 Abortion: Legislation, Access & Education

Since 22nd October 2019, new legislation decriminalised abortion in Northern Ireland. Instead of access becoming mainstreamed within the health service over a year after the regulations were laid the Minister for Health has failed to commission the services required by law. . Alliance for Choice (AfC) have maintained public and political pressure to enact our legal access to abortion. While AfC are incredibly productive, often responding directly to abortion seekers, therefore we cannot reflect every achievement. Whilst the onset of COVID-19 presented challenges for AfC, we adapted creative ways to engage on abortion rights as an access and justice issue firmly on the political agenda. Without the support of the Joseph Rowntree Reform Trust (JRRT) we would not have been able to continue our push against an incalcitrant government, talk to religious groups or build a movement.

### 2.5.1.2 Access to Services

NI now has the most progressive law on these islands, especially with the recommendations from the CEDAW inquiry into Abortion in NI now enshrined in primary legislation. The WPG wish for the abortion legislation to be honoured to the letter and urgently. The NI Executive blockage of Health Trusts interim Early Medical Abortion (EMA) services initially, and their subsequent precarity, illustrates clearly how the Department of Health and one of the main political parties is governing against the best interests of people living in NI. It is testament to the public campaigns of AfC, Doctors for Choice NI, the work of individuals within the trusts and the Royal College of Obstetricians and Gynaecologists (RCOG) that the Executive relented and allowed the Trusts to provide abortions without commissioning. AfC continues to signpost access to the online EMA pills and train ordinary people on how to self-manage pills safely for themselves. AfC provides these services because of an urgent need but they should not have to. The Health Trusts should have been supported with what the World Health Organisation (WHO) has classed as essential services.

There has been a 28% increase in NI requests to the Women on Web services since the law was changed. This is unacceptable. Though these services are safe and it is legal for women and pregnant people to use them, they have nominal fees and present no aftercare, which could be offered by a locally NHS run telemedicine service. Since the beginning of the outbreak WHO recommended that services related to reproductive health are considered part of essential services during COVID-19. In June 2020, WHO recommended that abortion provision in the global pandemic should:

“Minimise facility visits and provider–client contacts through the use of telemedicine and self-management approaches, when applicable, ensuring access to a trained provider if needed.”

(World Health Organization (1 June 2020) 2.1.4 Sexual and reproductive health services, Maintaining essential health services: operational guidance for the COVID-19 context, Interim guidance (pp. 29))

Abortion telemedicine has been available throughout Ireland, England, Scotland and Wales since the onset of the pandemic. Northern Ireland remains the only place where a safe, cost effective and practical method of abortion care has been denied to individuals seeking abortions. Emma Campbell of AfC said: "There is no evidence-based reason for blocking these services, they have proven to be safe, effective and preferable to many people unable to travel even outside of a global Covid-19 outbreak."

In October 2020 an Open Letter was sent to the Health Minister for Northern Ireland, Robin Swann.<sup>302</sup> This letter included 76 organisational signatures calling on the Minister for Health to commission abortion services in line with the regulations and WHO recommendations. The letter highlighted:

“On Monday 5th October 2020, the Northern Health Trust reluctantly advised they are no longer in a position to provide early medical abortions due to lack of resources. This was as a direct result of a failure of the Department of Health to commission or fund ANY services. This is just as the confirmed cases of COVID-19 have surged in that same Trust, with risk of contagion amongst the highest across the UK and Ireland. The blocking of EMA services and a complete lack of telemedicine as a result of the DoH inaction, means those seeking abortions will have to travel to GB, which directly contravenes WHO guidance, placing service users and healthcare workers at increased risk of COVID-19 and adding unnecessary cost and pressure to NHS services...

Since April 2020, over 150 women and pregnant people from Northern Ireland have had to use the Central Booking system of the British Pregnancy Advisory Service (BPAS) and have been

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<sup>302</sup> Open Letter to Robin Swann, Health Minister for Northern Ireland – 21st October 2020

forced to travel to GB in order to access the care they require, more have used Women on Web and Women Help Women services when a straightforward pathway was unavailable to them.”

The Secretary of State for Northern Ireland and the Department of Health led by Robin Swann need to do their jobs, uphold the law and deliver the services they were charged with implementing. Without this there will continue to be issues with the provision of abortion services across the Health Trusts as evidenced by the fact that there are now no longer EMA services available in the South Eastern Trust since January 2021.<sup>303</sup>

Because abortion has been more heavily restricted in Northern Ireland it has fostered a society that is in many ways, decades behind on women’s reproductive healthcare. In adolescence this manifests in our relationship and sex education (RSE) in schools. Roughly 70% of post-primary schools in NI use abstinence based RSE, provided from an evangelical Christian perspective. Many schools, utilise the ethical elements of religious studies to teach only a “Christian” perspective on abortion. Yet groups recently formed such as the [Faith Voices for Reproductive Justice](#) demonstrate there is no singular “Christian” perspective on abortion. Many people of faith require access to the full spectrum of reproductive healthcare. Aspects of sexual pleasure, consent and LGBT+ relationships are ignored, within current RSE provision. As a consequence our young people are put at greater risk of STIs and an inability to recognise the red flags of abusive relationships. According to a survey by [Love to Know NI](#), 96.8% of respondents wanted change in how RSE is delivered island-wide, with those responding describing their RSE experience as “inadequate”, “terrible” and “useless”.

Stigma continues around women’s sexuality, resulting in barriers to contraception and abortion services. In January this year, over 700 women were contacted regarding poor placement of contraceptive implants between 2017 and 2020. A number became pregnant and many would have been unable to access abortion services at home or been at risk of prosecution for seeking telemedicine services from online providers. On top of these barriers, there are long waiting lists for long-acting reversible contraception and vasectomies, up to 2 years in some cases. Many people can become pregnant more than once in that time.

For those wishing to become pregnant, there is a shameful lack of funded access to fertility treatments in NI, with only one fresh and one frozen embryo transfer funded by the Health and Social Care Board. This is yet one more inequity between NI and the rest of the UK. There is even less access

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<sup>303</sup> [AfC statement on South Eastern Trust closure of services](#) – 5<sup>th</sup> January 2021

for those not in heterosexual relationships, or wishing to parent alone and there are no sperm banks.

Many women report high levels of satisfaction with maternal care during pregnancy and childbirth, however NI has one of the lowest rates of breastfeeding in the world, with 24% of women wanting more support in breastfeeding according to the Birth NI survey. Until 2021 there was zero funding for perinatal mental health treatment and no mother and baby psychiatric care unit. Thanks to brave campaigners like the [Maternal Advocacy and Support Project](#) and [Lindsay Robinson](#) this has changed and funding for a unit for new mothers with postnatal mental illness will now be granted.

Lifelong issues for women, such as chronic menstrual pain are also, unsurprisingly, not treated well in Northern Ireland. With an 8 and a half year wait for women to be diagnosed with endometriosis, a condition that impacts on as many as 1 in 10 women, they are left in chronic monthly pain with no state-funded access to diagnosis or treatment. With only one specialist surgeon for endometriosis in NI, it is no surprise that so many women experience delays in surgery for debilitating pain.<sup>304</sup> These are disgraceful examples of how women's healthcare is underserved, women's pain disbelieved, and women's experiences ignored.

Finally, the horrific experiences of people trying to access the care that is available needs to be ameliorated with the passing of the Private Members Bill on safe access zones and a detailed list of NHS sanctioned treatment needs to be published to avoid women being misled to the door of the likes of Stanton Healthcare.<sup>305</sup>

### Recommendations:

- Delivery of access to services to ensure we deliver on the current legislative framework which is in line with current minimum human rights recommendations from the UN without unnecessary delays from consultations and delivery design.
- Overcome institutional barriers to implementation of abortion legislation and regulations in institutions concerned with women's health, including health trusts, hospitals, schools, youth organisations and other statutory bodies via training, education and funding.

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<sup>304</sup> Northern Ireland women with endometriosis in eight-year wait for diagnosis, Belfast Telegraph, April 2021, <https://bit.ly/3vOgLkv>  
Northern Ireland women with endometriosis in eight-year wait for diagnosis - BelfastTelegraph.co.uk

<sup>305</sup> Stanton Healthcare needs to answer for deliberately misleading abortion seekers in Belfast - Shado Magazine (shado-mag.com), April 2021, <https://bit.ly/3gPRouB>



- De-stigmatisation of abortion to ensure media narratives reflect wider societal attitudes and the concerns of those most keenly impacted rather than those with strongly held beliefs but no direct impact.
- Telemedicine in line with the rest of the UK and Ireland.
- Equal access to fertility treatment.
- Adoption of preventive and timely strategies to deal with acute and chronic long term reproductive health conditions such as Polycystic Ovary Syndrome and endometriosis.
- Roll out RSE according to the CEDAW minimum recommendations as set out in our primary legislation.
- Enact buffer zones with haste to allow women and pregnant people safe access to abortion and contraception healthcare.
- End the Executive block on abortion by allowing the Secretary of State for NI to step in and fund, resource and commission services.
- Publish information on all current abortion services on the Public Health Agency, Department of Health and Trust websites.
- Investigation of false claims of service delivery by rogue pregnancy services.
- Proper funding of mental health services throughout pregnancy and early years parenting.

## 2.5.2 Maternal Mental Health

Maternal Mental Health provision in Northern Ireland has been extremely limited and it is great news that funding has been released to have specialist perinatal mental health services in all five trusts in Northern Ireland. This will mean that all five trusts in Northern Ireland will have adequate provision. Currently there is just a limited perinatal mental health service in the Belfast Trust. Plans for the services are currently underway and it is hoped that all provision will be in place by the end of 2021.

This is welcome news for campaigners who have worked tirelessly to make this happen and for the women who will now be able to access this service. The Everyone's Business Campaign has been instrumental in lobbying for equality and the end of the postcode lottery in maternal mental health services across the UK.<sup>306</sup> It is important to note that the specialist services criteria is aimed at women with severe or complex mental health illness. The majority of women with mild to moderate perinatal mental health illness would not meet the criteria for this service. It is essential that communication and co-operation, strengthening of primary care, universal

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<sup>306</sup> [The Everyone's Business Campaign | Maternal Mental Health Alliance](#)

services and co-design with the community voluntary sector is implemented and improved fully.

With plans for a mother and baby unit in Wales, Northern Ireland remains the only part of the UK with no Mother and Baby Unit (MBU) and women who need hospital care must be admitted to a general psychiatric ward and be separated from their babies. The business case for an MBU in Northern Ireland is still under development, we would urge that this is prioritised so that women who require the highest level of care can do so without separation from their babies. Northern Ireland has lagged behind the rest of the UK for too long with its perinatal mental health care, it is essential that women here receive the same equality of care.

WRDA's Maternal Advocacy and Support (Mas) project is a Big Lottery Community funded project and provides peer support across 8 women's centres.<sup>307</sup> The project also provides advocacy and engages the women in the journey of improving services. Projects such as Mas need to have long term statutory funding to provide support for women who may have been severely unwell in the past so that they can stay well and also as an early intervention tool to minimise the risk of deterioration for women who would be considered to have a mild to moderate perinatal mental health condition.

Women have indicated the difference that compassion, support and an appropriate response to the disclosure of low mood and poor mental health can make. So far, many participants on the Mas project have expressed how they have felt let down by health professionals and that lack of consistency in staff has been detrimental. There have also been examples of good practice that left women feeling hopeful and supported. The Mas project aims to provide the environment for women to express their lived experience with the aim of improving services in the future.

It is important to create an environment where women do not feel stigmatised or judged for accessing support for their mental health. It is also essential that women from lower socio-economic backgrounds do not feel that this is a further barrier to them accessing support.

The Mas project not only provides peer support for women but offers a real opportunity for change and primary care service improvement, led by women with lived experience. It is also important that peer support in the community secures long-term statutory funding demonstrating a real commitment to women with maternal mental health difficulties. The Women's Centres provide a safe, supported environment for the Mas project with family support, childcare and a range of holistic services on site.

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<sup>307</sup> [Maternal Advocacy and Support Project \(MAS\) – Women's Resource and Development Agency \(wrda.net\)](https://www.wrda.net)

As well as many of the Women's Centres offering counselling and complementary therapies there are links and progression to adult education for women.

There is also a need for the Mental Health Strategy to include a commitment to promoting and improving infant mental health, improving care to the most vulnerable babies and young children as highlighted by the Association for Infant Mental Health Northern Ireland.<sup>308</sup> We also commend the NSPCC Fight for a Fair Start Campaign that urges governments across the UK to ensure that babies, parents and children receive the mental health support they need.<sup>309</sup> PPR's #123GP campaign aims to end the current postcode lottery in relation to access to counselling in surgeries. The campaign highlights that the majority of maternal mental health patients receive support from primary care services that are in need of urgent funding and improvement.

The Maternal Mental Health Alliance report on the impact of the pandemic highlights that the pandemic has had a disproportionate impact on women compared to men as they are more vulnerable to socioeconomic inequalities, gender inequalities, domestic violence and economic insecurity. Further, women from specific communities have been more markedly affected than others. The report points to the fact that perinatal mental health services had worrying gaps before the pandemic but anxiety, reduced social and family support, changes to birth plans, reductions in support services for women and the change to virtual contact have exacerbated existing problems.<sup>310</sup>

### Recommendations:

- Urgent commitment to funding for a Mother and Baby Unit in Northern Ireland.
- Excellent communication and referral pathways established between specialist services, primary care and the community and voluntary sector.
- Long-term sustainability and funding provided for community and voluntary sector maternal mental health projects such as the Mas project.
- The views of women with lived experience are utilised to improve patient care provided by primary services.

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<sup>308</sup> [AIMH\(NI\) Home \(aimhni.co.uk\)](https://aimhni.co.uk/)

<sup>309</sup> [Fight for a Fair Start | NSPCC](#)

<sup>310</sup> Maternal Mental Health Alliance (March 2021), 'Maternal mental health during a pandemic, A rapid evidence review of Covid-19's impact', <https://bit.ly/3wRwJvL>

- Commitment and funding for mental health prioritised for infants, children and families who need support including the provision of counselling services.

### 2.5.3 Maternal Death Rates Among Ethnic Minorities and Women in Poverty

From 2016-2018, 217 women died during or up to six weeks after pregnancy from causes associated with their pregnancy, among 2,235,159 women giving birth in the UK<sup>311</sup>. This equates to 9.7 women per 100,000 that died during pregnancy or up to six weeks after childbirth or the end of pregnancy. The most common reasons included cardiac disease (23%), blood clots (15%), epilepsy and stroke (13%), mental health condition (13%), sepsis (11%), bleeding (9%), other physical conditions (7%), cancer (3%), pre-eclampsia (2%) and other (4%)<sup>312</sup>. Crucially, improvements in care which may have made a difference to the outcome were identified for 51% of women who died.

Within the UK, Black women are four times more likely to die in pregnancy or childbirth compared to white women, and Asian ethnic backgrounds face twice the risk<sup>313</sup>. Urgent action is needed to tackle systemic biases contributing to the unequal mortality outcomes in ethnic minority women and women facing deprivation<sup>314</sup>. New research by Oxford University Department of Population Health say that the COVID-19 pandemic is likely to have worsened these disparities<sup>315</sup>. In addition, women living in the most deprived areas of the UK are almost three times more likely to die than those in the most affluent areas and women experiencing multiple disadvantages when they died increased by a third since 2019 from 6% to 8%. In 2016-2018, 547 women died during or up to a year after pregnancy from causes associated with their pregnancy, among 2.2 million women who gave birth in the UK. Within this period, 34 Black women died among every 100,000 compared to 15 Asian women in every 100,000 and 8 white women in 100,000. The figures were fundamentally unchanged compared to previous reports and recommendations despite consistent campaigns to encourage

<sup>311</sup> MBRRACE-UK (December 2020), 'Saving Lives: Improving Mothers' Care', <https://bit.ly/3dsKXvV>

<sup>312</sup> *ibid.*

<sup>313</sup> Hannah Summers (January 2021), 'Black women in the UK four times more likely to die in pregnancy or childbirth', <https://bit.ly/3jsN1Y3>

<sup>314</sup> British Medical Journal (January 2021), 'Disparity in maternal death rates because of ethnicity is "unacceptable"', BMJ 2021;372:n152, <https://bit.ly/2UUbg7h>

<sup>315</sup> MBRRACE-UK (December 2020), 'Saving Lives: Improving Mothers' Care', <https://bit.ly/3dsKXvV>

responses from the NHS and government agencies to address racial and socio-economic disparities.

The disparity in maternal death rates simply due to a woman's ethnicity, socio-economic background or disability is wholly unacceptable and lower standards of care for these groups must be urgently addressed. The WRDA Consultation Response to the NICE Draft Guidelines on Inducing Labour for Black and Brown women, women over 35 and women with high BMIs and the WPG Endorsement Response submitted in July 2021 are available [here](#).

### Recommendations:

- Systemic biases leading to higher maternal death rates among Black women, Asian women, disabled women, and women from areas of deprivation must be urgently addressed, particularly as COVID-19 has amplified social and ethnic inequalities in the UK.
- Implement all recommendations highlighted by MBBRACE UK in relation to improving patient care for professional organisations, policymakers, service-planners, commissioners, service managers and health professionals<sup>316</sup>,
- Improve implementation of maternal care recommendations by ensuring Maternity Networks work with their member organisations and professional groups to support all relevant healthcare professionals to deliver care for pregnant women in line with these recommendations,
- Increase and improve care for women with neurological complications, pre-existing health conditions, disability, medical or surgical disorders and infection.

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<sup>316</sup> MBBRACE-UK (December 2020), 'Saving Lives: Improving Mothers' Care', <https://bit.ly/3dsKXvv>

## 2.6 Health Inequalities and Hostile Environment for Migrants and Black and Minority Ethnic People



“I have experienced issues in attempting to access health services”

“Not being able to get through on the phone to the surgery & having to rely on out of hours services or private healthcare.”

“Discrimination by Drs based on minority status, complaint filed with Trust, whitewash b/c of their poor complaints procedure (Northern Trust) and lack of procedures for communication.”

“[NRPF is] HORRIBLE as, even though not needed thankfully, just knowing that there was no LIFELINE was extremely STRESSFUL. A lot of pressure to get jobs, basic work, in an environment which is NOT WELCOMING to foreign-born residents and citizens.”

“You end up having all of these people, whether its doctors, bankers or whoever it is, acting as police officers...policing you, policing people.”

“I know people who I work with... if their immigration status is unstable, they will not seek healthcare. They will not seek to get medical support if they needed it.”

- Testimonies from WPG Primary Research



“Black, [Asian] and Minority Ethnic (BME) communities are generally considered to be at increased risk of poor mental health (Bhui and McKenzie, 2008; UK Department of Health, 2011; Fernando, 2012) and frequently have less confidence using available services (Rooney, 2013).”<sup>317</sup> Furthermore, Black, Asian and minority ethnic people living in Northern Ireland are at a heightened risk of discrimination and racist hate crimes in Northern Ireland.<sup>318</sup> Prejudice and hate crimes impart a significant psychological toll on victims. Any attempt to address the mental health needs of the Black, Asian and minority ethnic community in Northern Ireland needs to encompass a strategy to combat racism, particularly institutional racism in the health care system.

Some of the identified challenges to minority ethnic and migrant communities accessing mental health services include language barriers, discrimination, difficulty with GP registration and other aspects of accessing care and the stigma associated with accessing mental health services.<sup>319</sup> Further, the culture and power dynamics of psychiatry - a field dominated by white men - can be off-putting to BME people attempting to access care.

A report commissioned by Migrant Centre NI and the Black and Minority Ethnic Women’s Network found that a substantial minority (34.7%) of migrant women surveyed did not know or were unsure of what healthcare they were entitled to under their immigration status<sup>320</sup>. Though there is interpreter provision available through the NHS, in practice some women report that they are not always provided with interpreter services even upon request and 16.6% of BAME women surveyed report being unable to adequately express their needs to their healthcare provider. Black African and Caribbean Women rated their experiences of healthcare among the most negative of all respondents.

These women, compared demographically to the rest of the group, represented a lower proportion of English speakers, a higher proportion of refugee and asylum seekers, higher rates of unemployment, lower household income and lower levels of educational attainment. This is illustrative of the impact of systemic racism and anti-Blackness to account

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<sup>317</sup> Institute for Conflict Research (December 2015)

‘Waking this thin line Report’ Black and Minority Ethnic (BME) Experiences of Mental Health Wellbeing in N.Ireland (conflictresearch.org.uk), <https://bit.ly/2TYhkei>

<sup>318</sup> BBC News Northern Ireland 12 June 2020 ‘Racism: More than 600 hate crimes reported to PSNI’, <https://bbc.in/3qkQrgK>

<sup>319</sup> Institute for Conflict Research (December 2015) ‘Walking this thin line Report: Black and Minority Ethnic (BME) Experiences of Mental Health Wellbeing in N.Ireland’, <https://bit.ly/2TYhkei>

<sup>320</sup> Austin, J. (2017) Ethnic Minority Women’s Access To Quality Healthcare In Northern Ireland, Migrant Centre NI and Black and Minority Ethnic Women’s Network.



for even starker levels of health inequalities for Black African and Caribbean communities.

Refugee and asylum seekers reported additional health needs related to the trauma of persecution and fleeing their countries of origin which are not adequately addressed by local health providers due to lack of awareness, lack of resourcing, perceived discrimination, or the barriers outlined above. Women with no or low levels of formal education reported the highest levels of need compared to the group, particularly the need for interpreter provision, being able to communicate healthcare needs, comfort with exclusively seeing a female GP, comfort expressing women's health issues and unmet healthcare needs, in particular, gynaecological and sexual healthcare needs. Women who took part in the survey made specific reference to community organisations who helped them to access care including GP registration and assistance with appointment scheduling, highlighting the importance of adequate funding and resourcing for organisations doing this work.

Health outcomes for Traveller communities in Northern Ireland are among the worst in the country, illustrating severe disenfranchisement and systemic neglect. A report completed by Strabane Access Youth Engagement commissioned by Migrant Centre NI found that health outcomes in Traveller communities were not only lower than those in the general population but also compared to those in other socially deprived areas<sup>321</sup>. 33.5% of all respondents surveyed reported their health as "poor" or "very poor". 89.5% of respondents indicated that at least one person in their household has a disability or limiting long-term illness. Irish Travellers are nearly seven times as likely to die by suicide than the general population. From a gendered perspective, there are severe inequalities in maternal healthcare, with Traveller women experiencing significantly higher rates of miscarriage, stillbirth, neonatal deaths as well as maternal deaths during and shortly after pregnancy.

A conservative estimate of life expectancy gaps between Traveller women and settled women shows that Traveller women's life expectancy is 12 years shorter. Barriers to healthcare include discrimination by GP surgeries to require proof of permanent address to register, inadequate or inappropriate public health outreach, awareness, and education to meet the needs of Traveller communities experiencing higher levels of illiteracy, anticipation of discrimination and a lack of cultural awareness on the part of healthcare providers. These barriers are embedded within broader social frameworks

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<sup>321</sup> Strabane Access Youth Engagement (2018) The Needs and Issues of the Traveller Community in Northern Ireland, , Migrant Centre NI

of systemic discrimination and socio-economic disenfranchisement of Travellers.

It is also the case that, should an individual have a negative experience in accessing mental health care or any kind of health care, they will be unlikely to engage in the future. The lack of cultural competency on caring for BME people, widespread language barriers and the UK Government's hostile environment policy have ensured that these off-putting negative experiences happen more often to people of colour accessing services, to the detriment of community health.

Members of the migrant community, particularly those without secure immigration status may be put off from accessing healthcare for themselves or their families during COVID-19 because of the continued operation of 'hostile environment' measures which have the NHS sharing migrant data with the Home Office. This impacts some of the most vulnerable women in society such as pregnant women, victims of trafficking and domestic violence and persons living with HIV.

The history of data sharing between the Home Office and the NHS differs across the UK. In England a 2016 Memorandum between the NHS, English Department of Health and Social Care and the Home Office previously allowed the Home Office to request confidential patient information for immigration enforcement purposes, including for minor immigration infractions.<sup>322</sup> This Memorandum was halted in November 2018 following condemnation from a Health & Social Care Select Committee inquiry and legal action taken by Migrant Rights Network, represented by Liberty.<sup>323</sup> UK wide data sharing continues between the NHS and the Home Office regarding migrants who have incurred a debt to the NHS.<sup>324</sup>

Migrant women and mothers are specifically targeted and harmed under the UK's hostile environment immigration policies. Utilisation of the NHS to document and report patients' immigration status discourages women to access care, important medical screenings and specialist services (including prenatal and antenatal care) or report domestic abuse<sup>325</sup>. Women not considered "ordinarily resident" in the UK, including those who are undocumented or are awaiting an asylum decision, do not have their

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<sup>322</sup> [Memorandum of Understanding](#) between Health and Social Care Information Centre and the Home Office and the Department of Health (came into effect January 2017, subsequently withdrawn)

<sup>323</sup> Liberty [press release](#), Legal victory against Government's hostile environment (November 2018)

<sup>324</sup> Department of Health & Social Care (March 2019) Overseas chargeable patients, NHS debt and immigration rules, <https://bit.ly/3gRZmn4>

<sup>325</sup> Equality and Human Rights Commission (2018) The lived experiences of access to healthcare for people seeking and refused asylum, <https://bit.ly/2U1x5S4>

maternity care costs covered under the NHS. Reports exist of asylum seekers being told that debts incurred to the NHS for maternity services will be used against them in decisions on the outcome of their asylum claims<sup>326</sup>. Xenophobic rhetoric targets migrant mothers specifically, with the UK government and media stoking fears of “heavily pregnant” migrant women using the NHS en masse despite no empirical evidence to support this. NISRA figures for 2019 show that just under 11 per cent of births were to mothers from outside Northern Ireland, the UK and Ireland; this figure has stayed relatively stable since recording began in 2009.<sup>327</sup>

NI legislation such as the Provision of Health Services to Persons not Ordinarily Resident Regulations (Northern Ireland) 2015 does not embed hostile environment practices in the same manner that equivalent English legislation does. However, data sharing related to migrants who have incurred debt to the NHS does apply to treatment received in Northern Ireland.

The Health Minister Robin Swann publicly said in a debate on 24 March 2020 that data on migrants/Asylum seekers accessing treatment for COVID-19 would not be passed on to the Home Office. At the same time, he also gave a (clearer) assurance that treatment would be free to everyone. This was later backed up by a response from the Minister to a written question from Gerry Carroll MLA ([AQW 3899/17-22](#)), which was answered in May 2020, almost two months after the question was first tabled. While these assurances are welcome, the atmosphere of fear created by the hostile environment policies means that this is not enough to ensure migrants will seek treatment. At no point has this information been widely publicised by the NI Executive or another public authority. A public information campaign would have allayed the fears of many migrants.

A different approach was taken in the Republic of Ireland where Simon Harris TD gave a clear, widely reported declaration at the start of the crisis that all people, documented or undocumented, could access health services in Ireland without their details being passed on the Department of Justice and Equality.

It is crucial that all persons in Northern Ireland, including migrants living here without immigration status, feel safe contacting health services to report COVID-19 symptoms and to seek advice. It is not enough to remove charging practices without also making it clear that no person’s data will be shared with the Home Office during the crisis. With the statutory basis for data sharing practices in Northern Ireland unclear and healthcare a

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<sup>326</sup>Coddington, K. (2020) Incompatible With Life: Embodied Borders, Migrant Fertility, and the UK’s ‘Hostile Environment’, *Politics and Space*, 0 1-14. <https://bit.ly/3vV6X8u>

<sup>327</sup> NISRA (December 2020) Registrar General Annual Report 2019, <https://bit.ly/3wQLHSt>

devolved competence, it is within the power of the NI Executive to take action to address this issue.

There has also been a lack of clarity regarding access to the vaccination programme for people living in Northern Ireland without status. It appears clear from the regulations that there are legal entitlements to all persons to receive health services – including vaccines – relating to COVID-19 for free (with the sole exception of persons travelling for vaccination).<sup>328</sup> However, this is not always reflected in practice. There is evidence of individuals being informed that there are British citizenship requirements for vaccinations. This may be an isolated case but a systemic problem also relates to booking on the HSC COVID-19 online portal which asks questions regarding GP registration and place of residence.<sup>329</sup> People who cannot answer yes to questions on GP and residence are then told that they are not eligible. Anyone who is told they are not eligible for the vaccine is then advised to email if they ‘still think’ they are eligible. The process is confusing and requiring people to follow up themselves is not appropriate. Online guidance on eligibility is also unclear stating the vaccine is available ‘If you live in Northern Ireland and are entitled to treatment by the Health Service’.<sup>330</sup> This statement is misleading as many migrants will not be eligible for all healthcare and others will pay fees, which may lead them to believe they aren’t eligible for vaccination. Further, there does not appear to be guidance on vaccine eligibility available in languages other than English.

A lack of clarity on access to vaccines will prevent people accessing the programme and undermines public health. Clear messaging is particularly essential for members of the migrant community who may have been restricted from accessing healthcare previously and who may have a fear of coming forward due to hostile environment practices. A clear public statement from the Department of Health is needed to confirm that all persons can access the COVID-19 vaccination programme, regardless of status and that no data on people accessing vaccines will be shared with the Home Office.

Article 12 of the International Covenant on Economic, Social and Cultural Rights provides the right of everyone to the enjoyment of the highest attainable standard of physical and mental health and includes steps which should be taken by states to achieve this.<sup>331</sup> The UN Committee on

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<sup>328</sup> UK Government (2020), The Provision of Health Services to Persons Not Ordinarily Resident (Amendment) Regulations (Northern Ireland) 2020, <https://bit.ly/35JyOOi>

<sup>329</sup> [Get Vaccinated](#) | COVID-19 (Coronavirus) Northern Ireland

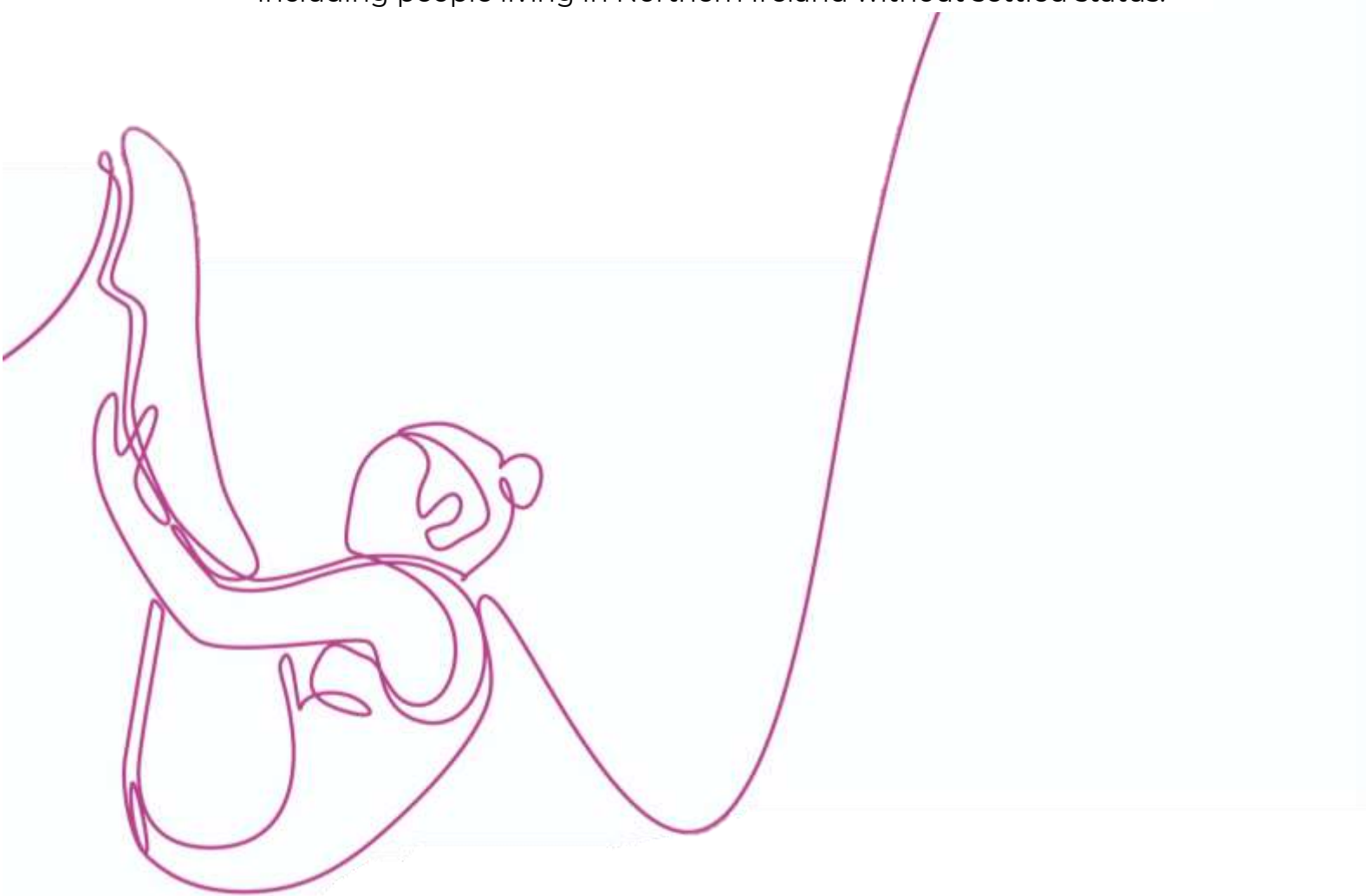
<sup>330</sup> [Am I eligible to use the vaccine service?](#) | Guidance | COVID-19 (Coronavirus) Northern Ireland (hscni.net)

<sup>331</sup> [International Covenant on Economic, Social and Cultural Rights](#) (adopted December 1966)

Economic, Social and Cultural Rights has clearly stated that this obligation also applies to migrants with or without status.<sup>332</sup> The right to health and wellbeing is also found in Article 25 of the Universal Declaration of Human Rights. Therefore, removing barriers to access to healthcare is an approach grounded in human rights.

### Recommendations:

- Going forward, as we recover from the pandemic, it is our belief that all NHS Charging and data-sharing with the Home Office should be suspended indefinitely and this must be accompanied by a public information campaign reassuring people that it will be safe for them to access healthcare, regardless of their immigration status.
- The Department of Health must issue clear public guidance on eligibility for vaccinations for members of the migrant community, including people living in Northern Ireland without settled status.



<sup>332</sup> [CESCR General Comment No. 14](#) (August 2013)

## 2.7 Trans Healthcare

“[I was] sent messages saying I should die/kill myself because I’m not straight or cisgender, saying I should be raped to make me “realize I’m actually straight”, being told I’m disgusting and an embarrassment to my family.”

- Testimony from WPG Primary Research

The Brackenburn Clinic, which provides gender transition related health care to adult trans people in Northern Ireland, did not accept any new patients for around 3 years since early 2018, and many of those on the waiting list (now 485 long as of May 2021, with around 382 of those waiting longer than a year) have so far been waiting up to 4 years and 4 months for a first appointment. Recently, a clinician from Scotland has been funded for a few days per month providing initial consultation to those on the waiting list, however this has resulted in many of those waiting - who may have accessed healthcare privately, self-medicated, etc - being pushed right back to the start of their treatment pathway, causing further unnecessary delays.

Gender-affirming healthcare is recognised as essential healthcare by the World Health Organisation and by regulatory bodies in Europe and the UK, and timely access is crucial. Trans communities suffer disproportionately from both mental health problems and from societal stigma and violence, both of which can be helped substantially by access to care. Currently, Northern Ireland - and the island of Ireland generally - has some of the worst waiting lists and worst future prospects for access to care of any part of the UK and Ireland. The COVID-19 pandemic has made the situation worse.

Waiting lists at the Brackenburn Clinic were and are predominantly due to the excessive psychiatric and psychosocial assessment processes used; the gender affirming care system will never be sustainable with this approach. These psychiatric assessments are not seen at such intensity anywhere else in healthcare, and demonstrate the disproportionate institutional barriers to reproductive care, bodily autonomy and basic human rights placed in the way of trans people of all genders.

Individuals who are denied care due to long waiting lists are highly likely to access care in the private sector, at high cost. As trans communities are more likely to experience poverty, this has disproportionate effects on housing security, health and quality of life. Those who are unable to afford private care often self-medicate with hormonal therapies acquired online through unregulated sources or via friends and family. This is particularly difficult for individuals requiring testosterone, which is a controlled substance. People who are unable to access these options, or those who are but are unable to access other essential care like fertility treatment or surgery, are highly likely to self-medicate with alcohol, smoking or drugs. All self-medication options are usually without any medical or endocrine oversight to ensure safety. Those who are unable to access gender-affirming care in a timely and appropriate manner are disproportionately likely to experience severe mental health problems, self-harm and suicide attempts.

The WPG supports the provision of community-based, sexual-health based models of gender-affirming care in line with global best practice, both to ensure access to care is provided, and to reduce the high costs inherent in the current care pathways. These services must be meaningfully co-produced and co-delivered with organisations working within trans communities and the communities themselves in line with HSCNI policy and human rights treaty law.

We understand that there is currently a review of gender affirming healthcare services up to the point of surgery provision. While this is encouraging, this review will not address the persistent problem of trans individuals being forced to travel abroad for healthcare, ignoring the complete lack of publicly funded gender affirming surgeons on the island of Ireland. Further, many issues have come up over the past number of months, including under-18s and their families being forced (unnecessarily) through traumatising court battles to access hormone blocking treatment, and the provision of bottom surgery for trans men ceasing temporarily across the UK. While COVID-19, the resulting lockdowns and impact on the health service has contributed to these issues, they are symptomatic of a wider reluctance to view gender affirming care as essential healthcare and worthy of investment and support.

### Recommendations:

- Specialised gender identity services, following a human rights compliant and culturally competent service model, should be fully commissioned by the Department of Health and be available for trans and questioning people who wish to access them to explore their gender identity. This should not be a centralised service for all trans



people and access to these services should not be a prerequisite to accessing gender-transition-related healthcare,

- The reinforcement of gender roles and stereotypes within Gender Identity Services causes detrimental harm to trans and gender non-conforming patients, in particular those who identify outside the gender binary, and should be removed in favour of a model which affirms the gender identity of the patient and supports diverse gender expression,
- New policies, service models or reforms within the health service which will have an impact on trans communities should be developed in consultation with civil society organisations and the trans community at large,
- Any new gender affirming services should be based in the community and on a sexual health model of care,
- The Department should conduct an exploratory review into the feasibility of all-Ireland commissioning of gender affirming surgeons with their counterparts in the Republic of Ireland,
- Trans men who have had their surgery processes interrupted by the current commissioning issues across the UK should be given priority for accessing surgeries when that commissioning process has completed,
- Following the recent High Court judgement ruling court orders unnecessary for many under 18s accessing puberty blockers, we urge the BHSCT & Department of Health to review their legal advice forcing young people through the courts for basic care, and communicate effectively with trans communities and organisations on this issue,
- A cross-border expert working group made up of trans-led organisations and trans expertise should be established to explore how best to ensure access to gender affirming services in border areas & on a cross-border basis,
- A review of access to mainstream healthcare services for trans patients, and adaptation of materials/advertising to recognise and include trans experiences, should be undertaken by the Department of Health.

## 2.8 Disabled Women

“My husband cares for me as I am disabled. I care for my daughter.”

“I am deaf in both ears and wear hearing aids in both I waited an extra 6mths to get an appointment at hospital for my hearing aids to be fixed and without these I have no real social aspect to my life and can't function without help from others and during covid getting the help from others was impossible so my mental health declined a lot”

“Almost a 2 year wait for an ASD assessment which was eventually directed to a private clinic because the NHS didn't have adequate staff.”

“I have two chronic conditions, one neurological and one gynaecological. It was very difficult to access care for both my illnesses and now I have to go private for surgery for endometriosis in England next year as the waiting list is 2+ years in NI.”

“I have not been able to meet my consultant in person and testing takes months now.”

“My bowel is attached to my ovary, scar tissue, I've been in pain since October.”

“PAIN CLINIC HAS GONE FROM A 3 YEAR WAIT TO 4 YEARS WHICH FOR A PAIN CLINIC IS JUST UNACCEPTABLE, WHILE STILL TRYING TO HOLD DOWN A FULLTIME JOB AND CARE FOR MY DISABLED MUM, AND I HAVE ALREADY BEEN ON THE WAITING LIST FOR 1 YEAR SO IT WILL NOW BE 5 YEARS BEFORE I GET TO BE SEEN.”

“Still waiting for a cataract appointment. Not even on the list yet (2 years later) Sight in one eye deteriorating.”

“Plus four years [on waiting list]. Feel debilitated”

“6 years [on waiting list] and losing my sight. Appointment cancelled rescheduled and cancelled again and no rescheduled Appointment date confirmed.”

“Have been told that I will wait 4 years for a neurology appt. The GP refuses to send me for an MRI back scan due to financial constraints within the NHS. Currently saving for MRI scan to be completed privately.”

“Unable to access therapies and the gym to manage chronic pain conditions, long queues going into shops which would flare up my conditions, but because I'm young I didn't feel able to disclose that I was in pain or needed a seat.”



“I have struggled more with uni work in relation to my disability than in other years.”

“Absolutely. My mental health disability apparently made me susceptible to Covid-19, which I had no idea of at the time, and I was hospitalised when I got the illness.”

“I suffer from a number of illnesses and due to these I faced a bleak outlook during covid afraid to go out afraid to let people near you afraid of literally everything and everyone mentally I struggled a lot emotionally I fell apart and always afraid to ask for help for fear of judgement as a single parent trying to cope.”

“No swimming pools open to help with Cerebral Palsy. Limited GP appoints to assist with Bi-Polar.”

“YES, Not being able to access Doctors for appointments, to try and manage increasing pain due to extra work load and not being able to go swimming as this helps keep me by keeping me mobile and on my feet, by the time you manage to get through all appointments have been allocated out. unable to use the swimming pool to keep me mobile and on my feet has been a real struggle. unable to get delivery slots for shopping which has in turn has left me to get my mums shopping as well as my own.”

“I am autistic and lockdown was actually really good for me in that regard. I struggled to socialise and find other people very overwhelming and lockdown really provided a time to step away. However, accessing mental health support and medical care all became harder. I was twice admitted to hospital for appendicitis and because of lockdown rules I couldn't have visitors. I became very distressed and paranoid in hospital as a result.”

“People with Mental illnesses feel even more isolated.”

“Initially I was unable to access delivery slots for local supermarkets and eventually I had no choice but to go to the supermarket as I was running out of food and supplies at home. I fall into the vulnerable category as I have a compromised immune system and physical disability. Venturing out was quite scary at that time so I only went out when supplies ran out.”

“I have depression and live alone. Before bubbles were introduced for those living alone I was completely isolated.”

“I am currently in a position at work where I'm being forced to not provide a disabled person with goods, because they want to keep limited stock for people that can pay full price. I can't complain because I am on probation.”

- Testimonies from WPG Primary Research

## 2.8.1 Disabled Women and COVID-19

Disabled women and girls can be subject to discrimination on two levels; marginalised on account of their disability and on their gender. The Government needs to recognise and implement the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) effectively within Northern Ireland to ensure that disabled women live in an equal society which is free from economic, social and cultural barriers.

Only 7% of disabled people are employed, but those who are face low-paid work and underemployment. In addition, disabled women earn 22.1% less than non-disabled men, 11.8% less than disabled men and 26% of households with a disabled person live in poverty compared to 22% of households overall. Disabled women are set to lose 13% of their annual net income by 2021 due to cumulative tax-benefit changes and austerity. Furthermore, disabled single mothers will have lost 21% of their net income by 2021, and 32% if their child is also disabled.<sup>333</sup>

The impact of the COVID-19 pandemic on disabled people has been drastic, as the Health Foundation highlighted following the release of ONS death figures for disabled people in England in February 2021<sup>334</sup>:

“COVID-19 has had an unequal impact on disabled people who have been among the hardest hit in terms of deaths from the virus. Worryingly, today’s data confirms this trend, showing that 6 out of 10 people who have died with COVID-19 are disabled.

Today’s figures clearly show that current measures to protect disabled people are not enough and that there is an urgent need for more and better support. Disabled people are more likely to have one or more long-term health conditions, which means they are at greater risk of suffering severe symptoms if they get COVID-19.

However, as well as protecting disabled people from exposure to the virus, measures must account for the potential negative effects of lockdown and shielding. A significant number report that, due to lockdown, their health care needs are not being fully met or that they had treatment cancelled or delayed. Further action should include careful review of the support that

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<sup>333</sup> Women’s Budget Group (2018), ‘Disabled Women and Austerity’, (available online): <https://bit.ly/3qouNsi>

<sup>334</sup> Health Foundation (February 2021), ‘6 out of 10 people who have died from COVID-19 are disabled’, <https://bit.ly/35JnOAF>

is available to disabled people so they can access the care and essential services they need at home. It is also crucial that employment policy ensures that more disabled people get the support they need to work from home.

The high number of COVID-19 deaths among disabled people ultimately reflects wider failures in how the UK supports those who are vulnerable. Addressing this will require the government to address the major and long-standing inequalities that the pandemic has highlighted.”

The initial Feminist Recovery Plan provided a comprehensive overview of Sisters of Frida Disabled Women’s Collective recommendations on supporting disabled women throughout COVID-19<sup>335</sup>. This included emergency measures relating to access to food, health and medical services, including the voices of disabled mothers, access to support/paid and unpaid care and the right to independent living. One year on, widespread systemic discrimination against disabled women remains and we would like to again highlight some of the recommendations from Sisters of Frida from 2020:

#### General Rights of Disabled Women and COVID-19:

- Ensure all disabled women’s rights are upheld and protected throughout the entirety and recovery of COVID-19,
- Require all councils to release information on the specific supports they are delivering to disabled people during the easing of the lockdown.

#### Disabled Women and Domestic Violence/Abuse:

- Provide guidance and support to frontline violence against women organisations and refuges to the needs of disabled women in danger of domestic abuse; including the communication and access needs of disabled women and reasonable adjustments,

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<sup>335</sup> Sisters of Frida, (April 2020), ‘The Impact of COVID-19 on Disabled Women from Sisters of Frida: Voices of Disabled women in the pandemic’, (available online): <https://bit.ly/3vOxLqu>

- Create greater flexibility in the provision of care packages, particularly for disabled women trapped in social isolation and in danger from Domestic Abuse,
- Support particular provisions of support for disabled women in both the Domestic Abuse Bill (for example, the Staysafe East amendments) and through specific support in any miscellaneous bill to follow the Domestic Abuse and Civil Proceedings Bill.

In addition, Sisters of Frida have since launched a 2021 research report on the impact of COVID-19 on disabled women and independent living<sup>336</sup>. Some of the key findings include:

- The cost of living for Disabled women increased however income decreased. Many Disabled women were not eligible to access the government's £20 increase to Universal Credit. Discriminatory work practices and the government's failure to implement fair employment regulations led to unemployment, reduced work hours and reduced pay.
- Disabled women became more reliant on partners, family members and friends for financial support and care needs. Despite this, Disabled mothers were predominantly responsible for domestic duties, to the detriment of their impairments.
- The sourcing of food, basic household products, medication (including menstrual hygiene products) was made inaccessible by supermarkets, the medical system and local authority services.
- Disabled women's social care needs were not met, and many Disabled women found themselves without any personal assistance. Information on their social care needs was inaccessible, unreliable, often wrong and many struggled to get basic support such as PPE.
- Disabled women's mental health deteriorated sharply since the pandemic. Those with care responsibilities felt under-supported. Many Disabled queer people and shielders felt abandoned and experienced extreme loneliness and depression.
- Disabled women felt let down by the public's attitudes to social distancing and mask wearing. This impacted on their access to the community and green spaces.

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<sup>336</sup> Sisters of Frida (May 2021), 'Disabled Women's Perspectives on Independent Living During the Pandemic', <https://bit.ly/3vRwjE8>

- Disabled women's health got worse as their healthcare needs were drastically deprioritised by medical professionals. Many have also been deprioritised in the vaccine prioritisation process.
- Citizens Advice shows that in 2020, 1 in 4 Disabled people were facing redundancy<sup>337</sup>. Moreover, half of those who are clinically extremely vulnerable (shielders) were facing redundancy. Citizens Advice further reports that during the pandemic, there has been a 370% increase in their services being accessed by people seeking advice on fair redundancy processes.
- The Trade Union Congress (TUC) have also raised concerns about Disabled workers' inability to get support when in work through the Access to Work scheme<sup>338</sup>.
- Women of colour are more likely to be in insecure work than white employees<sup>339</sup>. Structural barriers such as lack of workplace adjustments and accessibility are an additional barrier for Disabled women of colour. Due to intersectional discrimination pertaining to race inequality, gender discrimination and disableism, Disabled women of colour are at a disadvantaged position at work.

### Recommendations:

- Ensure that programmes and policies dealing with the elimination of exploitation, violence and abuse contain specific actions for disabled women.
- Urgently address the issue of disabled women being denied the same access to maternal health services, including sexual and reproductive health, as other women.
- Promote the employment of disabled women in all sectors, and support entrepreneurship development.
- Urgently review the Access to Work Scheme to improve disabled women's ability to overcome structural barriers to employment.
- Introduce staff education programmes, based on the social model of disability, to effect attitudinal change in all sectors; but particularly health and education sectors.
- Urgently address and reform the Personal Independence Payment (PIP) application process, Universal Credit and Welfare Reform, to prevent any further discrimination against disabled women in Northern Ireland.

<sup>337</sup> See Citizens Advice: <https://bit.ly/3vRwIMq>

<sup>338</sup> See TUC: <https://bit.ly/3wQMFy5>

<sup>339</sup> TUC, (2020), 'BME Women and Work', <https://bit.ly/3wQvop3>



- Increase mental health funding to be allocated for those facing intersectional discrimination such as disabled people, people of colour, members of the LGBTQI+ community and those on low incomes.
- Develop an inquiry into accessibility and independent living during the pandemic and implement accessibility measures to support all forms of independent living including BSL/ISL interpretation with all public provisions, accessible online bookings for essential services such as supermarkets and more.
- Ensure COVID-19 information is available in accessible formats such as Easy read, Large print, and in BSL/ISL and in various languages.
- Ensure all essential public broadcasts and NI Assembly updates are translated into BSL and ISL. Ensure people are aware of the alternative services, volunteer programmes, and how to access them including those not able to access the internet.
- There should be intersectional strategies for future emergencies on the groups that share protected characteristics so that disabled people impacted will not be deprived of food, similar to that of a crisis zone.
- Safeguarding of volunteers and carers should be reviewed to ensure that disabled people are not put at further risk.
- Ensure personal assistants and family carers are allowed to accompany disabled people with other physical or communication support needs at any time they are in hospital.
- Inquiry into the deaths of disabled people during the pandemic.

## 2.8.2. Personal Independence Payment (PIP)

Northern Ireland has traditionally had a much higher proportion of people claiming disability benefits than other areas of the UK. Prior to the introduction of PIP around one in nine people in Northern Ireland (208,760 people) were in receipt of Disability Living Allowance (DLA).<sup>340</sup> At that time Northern Ireland had proportionately twice as many people claiming DLA compared to the rest of the UK. The latest PIP statistics available show that there were 153,680 PIP claims in payment as at February 2021<sup>341</sup> and of these

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<sup>340</sup> Northern Ireland Benefits Statistics Summary, Department for Social Development, November 2015 <https://bit.ly/3govl1k>

<sup>341</sup> Personal Independence Payment (PIP) Experimental Statistics, Department for Communities & NISRA, February 2021, <https://bit.ly/2U1ydVO>

81,220 (53%) were paid to women.<sup>342</sup> Northern Ireland has a higher incidence of mental health conditions per head of the population than GB.<sup>343</sup> PIP claimant statistics show that psychiatric disorders are the main disabling condition accounting for 42% of awards.<sup>344</sup>

While there are no significant gender differences in claimant numbers for PIP (53% of PIP claims in payment were paid to women) there are implications for women if the person they care for is turned down for PIP on migration from DLA. If the person they care for loses their PIP award then they will lose their Carer's Allowance payment (although this is currently mitigated for one year). This is likely to have greater implications for women than men as statistics show that women are more likely to be carers than men (64% of carers are women)<sup>345</sup> and women are more likely to be in receipt of Carer's Allowance than men (69% of Carer's Allowance recipients are women).<sup>346</sup>

The introduction of PIP has been controversial in Northern Ireland with many claimants reporting they have lost the benefit after inaccurate assessments carried out by private firms. The PIP assessment process has been widely criticised and labelled "demeaning and degrading"<sup>347</sup> by many claimants, voluntary and community organisations as well as local politicians. Problems with the process and assessments have led to an increasing number of PIP appeals.

A written answer to an Assembly Question asked by Rachel Woods MLA in September 2020 on the number of successful PIP appeals as a percentage of all PIP appeals received highlights the rise in the numbers of successful appeals over the last number of years. The percentage of PIP appeals that were successful has risen from 0.2% in 2016/17 (PIP was introduced in June 2016), to 20% in 2017/18, 35.3% in 2018/19 and to 76.4% in 2019/20.<sup>348</sup> This clearly points to the fact that there is something wrong with the assessment process for PIP.

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<sup>342</sup> Personal Independence Payment Statistics - February 2021 | Department for Communities, <https://bit.ly/3vLAAsJ>

<sup>343</sup> Mental Health in Northern Ireland, Northern Ireland Assembly Research and Information Service, NIAR 412-16, January 2017 <https://bit.ly/2Snb7sb>

<sup>344</sup> Personal Independence Payment (PIP) Experimental Statistics, Department for Communities & NISRA, February 2021 <https://bit.ly/2UlydVO>

<sup>345</sup> See Carers UK Facts and Figures: <https://bit.ly/3gObtkM>

<sup>346</sup> Benefits Statistics Summary Publication (National Statistics) - February 2021, <https://bit.ly/3vQif2j>

<sup>347</sup> BBC News, (2018), 'PIP: New Benefits System Demeaning and Degrading' <https://bbc.in/3wOz3mx>

<sup>348</sup> AQW 6277/17-22: <https://bit.ly/3gPH9GH>

The Covid-19 pandemic has had an impact on the PIP process particularly in relation to the appeals process which is having the effect of delaying this important financial support to people with long term illnesses and disabilities. There has been a significant reduction in appeal hearings with thousands of people in Northern Ireland waiting for their appeal to be heard due to a backlog caused by the crisis.<sup>349</sup> Between March and July 2020 all PIP appeals were suspended and since then Covid-19 restrictions mean that accommodation to hear appeals has been severely restricted. The delay in appeals has also meant that first time applicants appealing refusal of PIP are being excluded from Covid support payments such as the Covid-19 heating payment worth £200.



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<sup>349</sup> BBC News (November 2020), 'Coronavirus: More than 4,000 people waiting for PIP appeals in NI', <https://bbc.in/35JKqRq>

# Social Justice Pillar



## 3. Social Justice Pillar

### 3.1 Racial Justice Overview

“[The Noah Donohoe case] sent a very clear message to women with bi-racial children...if your child goes missing, we’re not going to do as much as we would do if he was white.”

“There are plenty of people here who are black and Irish and British... those people’s voices are never heard.”

“I think my whole life in Northern Ireland has been shaped by the hate crimes and racism that I’ve faced.”

“It seems that, as an ethnic minority woman, everybody felt that they needed to save me without allowing myself to save myself... everybody felt that they were my saviour... I needed to save myself.”

- Testimonies from WPG Primary Research



There is a need for cohesion between the Department for Communities proposed Social Inclusion Strategies that is not currently being met, as evidenced by the fact that there is no mention of gender in the Racial Equality Strategy. Rather than treating issues of gender, race, ability, and sexual orientation as disparate and atomised markers of identity there is a need for intersectional policy implementation across the strategies.

The failure to date of the Westminster Government and the Northern Ireland government to introduce a Bill of Rights is a missed opportunity to enshrine rights that protect on the basis of race and gender as well as their intersection, and to link the aims of the Social Inclusion Strategies.

Good relations work carried out in Northern Ireland should encompass ethnic minority communities. While the NI Executive maintains that programming carried out through Together Building United Communities (TBUC) is meant to encompass all good relations programming including race relations, this is not the case in practice. Statutory funding for good relations programming is still filtered almost exclusively through an “Orange and Green” lens without regard for the input of ethnic minority population in good community relations.

Black and Ethnic Minority women and gender minorities may experience discrimination or require additional services to attain equity that are inextricable from both their race/ethnicity and gender, i.e., the need for specialist service provision for BAME victims of domestic abuse, which does not currently exist in Northern Ireland.

The issue of policing is inextricably linked to the matter of racial justice and has been brought to the forefront in the Northern Ireland context with the disproportionate policing of the Black Lives Matter protests in the summer of 2020. The fines for the protestors have yet to be dropped and the PSNI refuses to renege on this issue despite admitting that the policing of the event was disproportionate compared to the policing of Loyalist protests (Superintendent Gerry McGrath, Belfast Migrant Forum Meeting March 2020).



A report from the Northern Ireland Council for Ethnic Minorities and Traveller and Gypsy Network NI detailed in 2014 the disproportionate policing of Traveller communities in Northern Ireland, creating conditions in which they are “over policed and under protected”.<sup>350</sup> These conditions continue. There is evidence of racial profiling of Travellers as well as discriminatory employment of stop and search weaponised against Travellers under the Police and Criminal Evidence Act. The report details low levels of social inclusion and discrimination in housing, education, and employment in particular. The impacts of economic disenfranchisement have particularly detrimental effects on Traveller women given the relationship between gender and poverty as detailed in depth in this Recovery Plan.

### 3.1.1 Black Lives Matter

The WPG stands in solidarity with the Black Lives Matter movement. From Minneapolis to Northern Ireland, the message is the same, we cannot tolerate racism in our society and we all have a duty to work to remove the barriers that uphold systemic racism. It is absolutely essential that we all take action to urgently address the harm systemic racism has caused in our society.

We are deeply concerned about how the PSNI treated the Black Lives Matter protesters in Belfast and Derry/Londonderry on Saturday 6th June 2020. We note that it has been confirmed that a last-minute amendment was made to the Health Protection (Coronavirus, Restrictions) Regulations (Northern Ireland) 2020<sup>351</sup> just hours before the anti-racism protests started, which attached enforcement powers to the regulations and enabled the PSNI to fine those in attendance; despite evidence of safety and social distancing being in place.

While it was recently announced that fines issued to protesters might be cancelled, we are still particularly concerned with the fact that these fines were issued in the first place, especially as there have been several allegations of black protesters being specifically targeted and fined. We also believe that the last-minute introduction of this legal basis to create penalties is completely unacceptable and largely disproportionate. There is a balance to be drawn between the right to protest and a public health emergency and, given the social distancing measures implemented by protest organisers, the measures taken by the PSNI are deeply concerning.

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<sup>350</sup> Scullion, G. and Rogers, S. (2014). Traveller Voices for Change: Mapping the views of Irish Travellers on integration and their sense of belonging in Northern Ireland. Northern Ireland Council for Ethnic Minorities and Traveller and Gypsy Network NI.

<sup>351</sup> The Health Protection (Coronavirus, Restrictions) (Amendment No. 5) Regulations (Northern Ireland) 2020 <https://bit.ly/3vRkyO3>



We need to stress that racism is not a problem confined to the USA or Great Britain but is an issue that is highly prevalent in Northern Ireland. We need our representatives to take steps to address this. In 2016-17, statistics show that racially motivated hate crime overtook sectarian hate crimes<sup>352</sup> for the first time in the history of Northern Ireland. More recently, the PSNI recorded 936 racist incidents including 626 racist crimes<sup>353</sup> between April 2019 and March 2020. Many people may not have felt able to report to the police and so the real figure is likely much higher. We are calling for the urgent creation and implementation of a Racial Equality Strategy (which was already committed to within the New Decade, New Approach agreement) and for further measures to be taken in the Programme for Government to tackle the systemic racism that exists in NI.

In Northern Ireland, racism is so deeply embedded in our society that it is even in our built environment. In Newry, there is a statue and a street dedicated to John Mitchel, a supporter of the trade in enslaved people who called for the reopening of the African slave trade in 1957 and described Black people as “innately inferior”. We have a duty to recognise our own privilege and begin to dismantle the pillars that uphold systemic racism; including aspects of our built environment that glorify prominent racists. This is evidence of the endemic nature of racism in NI.

We also support calls for the closure of the Larne House Immigration Detention Centre in the Larne PSNI Station. This centre houses women and men together. There is no women-only recreation space and so many women are forced to self-confine to their rooms due to safety concerns. The poor conditions and inadequate facilities for traumatised people needlessly incarcerated here has been highlighted by HM Inspectorate of Prisons multiple times. It is entirely inappropriate to house an immigration detention centre in a PSNI station as this prevents people with irregular immigration status from coming to the PSNI for help. This is a situation that disproportionately impacts people of colour.

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<sup>352</sup> Police Service of Northern Ireland Trends in Hate Motivated Incidents and Crimes Recorded by the Police in Northern Ireland 2004/05 to 2017/18 Annual Bulletin published 31 October 2018, p.6: <https://bit.ly/3vRKpoY>

<sup>353</sup> Incidents and Crimes with a Hate Motivation Recorded by the Police in Northern Ireland Update to 31 March 2020 published 15 May 2020, p.4: <https://bit.ly/3wWgehW>

### 3.1.2 COVID-19 and the Disproportionate Impact on Black and Minority Ethnic People in Health and Social Care Trusts:

In the context of COVID-19, evidence suggests that the pandemic is having a disproportionate impact on BME communities and health and care staff. The NHS Confederation BME Leadership Network have outlined the below concerns to ensure senior health leaders and policy makers can make informed decision-making to address this<sup>354</sup>:

- Early analysis points to an overrepresentation of BME health and care professionals among COVID-19 fatalities.
- Some BME groups are at higher risk of certain diseases and conditions and a number of BME staff from various socio-economic backgrounds, including hospital consultants, nurses, healthcare assistants and cleaners have died from the virus.
- Better and more transparent collection and reporting of ethnicity data is needed to understand the full impact of COVID-19.

Research from the WBG, LSE, Queen Mary University of London and the Fawcett Society has also produced significant evidence on BAME women and the impact of COVID-19<sup>355</sup>:

#### Poverty and Debt

- Women of colour are more worried about debt as a result of the pandemic - 49.9% compared to 37.1% of white women and 34.2% of white men. 42.9% of women of colour also said they would struggle to make ends meet over the next three months. A quarter of BAME mothers reported that they are struggling to feed their children (23.7%).

#### Work and Employment

- Work-related anxiety for those working outside the home was highest among people of colour, with 65.1% of women and 73.8% of men reporting anxiety.
- Of those working from home, a higher proportion of people of colour (41.0% of women and 39.8% of men) reported working more than they

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<sup>354</sup> NHS Confederation BME Leadership Network Member Briefing April 2020:

<https://bit.ly/3gROBZS>

<sup>355</sup> WBG et. al. (2020), 'BAME women and COVID-19 - Research Evidence', (available online):

<https://bit.ly/35NbPSA>

did before the pandemic compared to white people (29.2% of women and 28.5% of men).

### Domestic Care and Work

- Nearly half of women of colour (45.4%) said they were struggling to cope with all the different demands on their time at the moment (work, home schooling, unpaid care, domestic labour) compared to 34.6% of white women and 29.6% of white men.
- Around  $\frac{3}{4}$  of all women reported doing the majority of housework and childcare during the lockdown.
- For all questions regarding struggling to balance paid work and unpaid care, women of colour were the most likely to report struggling and white men were the least likely.

### Access to Support

- Twice as many women and men of colour reported that they had recently lost support from the government (42.5% and 48.3%) than white women and men (12.7% and 20.6%).
- People of colour were also more likely to have lost support from other people (48.3% compared to 34.0%) and were less likely to say there were people outside of their household who they could rely on for help (47.4% compared to 57.2%).
- Over half of women of colour said that they were not sure where to turn for help as a result of the pandemic compared to 18.7% of white respondents.

### Recommendations:

- While the decision to cancel fines issued to Black Lives Matter protesters is welcomed, it is unacceptable that these fines were issued in the first place and that it took over a year for this to happen; particularly as there have been several allegations of Black protesters being specifically targeted and fined. Action must be taken to address the allegations of racial targeting and to address the harm this caused towards the Black community in Northern Ireland.
- Urgently implement the Racial Equality Strategy and incorporate accountability mechanisms into the Programme for Government to address systemic racism.
- Better and more transparent collection and reporting of ethnicity data is needed to understand the full impact of COVID-19; including

reports from employers of redundancies with breakdowns of protected characteristics.

- As recommended elsewhere in this plan, immediately increase child benefit to £50 per child per week; scrap the two-child cap which can disproportionately impact BAME families across the UK; make UC advanced payments grants instead of loans.
- Scrap No Recourse to Public Funds.
- Ban exploitative zero-hour contracts and increase the real living wage to improve the working conditions of people of colour, particularly women, who are over-represented in low-paid precarious work.
- Complete and publish meaningful and comprehensive equality impact assessments of all COVID-19 policy decisions informed by intersectional data.
- Support families' access to educational resources and equipment at home to minimise the increased racial attainment gaps - including the provision of IT equipment and additional support for parents.
- Introduce quotas and shortlists to increase the levels of representation of people of colour, especially women, in public life in Northern Ireland given the non-existent representation at present.
- There have been 3,500 racist hate crimes reported to the police within five years. Racist hate crimes have been steadily growing and have outnumbered sectarian hate crimes for the past four years. Issues with low levels of reporting, and extremely low conviction rates (half compared to other crimes), need to be urgently addressed.
- Immediately close the Larne Detention Centre.
- The human rights violations within direct provision centres, including specific issues of violence against women, need to be urgently investigated. The industrialisation of immigration detention centres needs to end and all asylum seekers should have the right to seek asylum under Article 14 of the Universal Declaration of Human Rights, rather than being housed within a police station;
- LGBTQI+ asylum seekers are routinely required to justify or prove their sexuality and gender identity to the Home Office in order to qualify for asylum. This is tantamount to cruel and inhumane treatment and there should be a Westminster review treatment of LGBTQI+ asylum seekers alongside the implementation of measures to protect asylum seekers from this in Northern Ireland.

## 3.2 Politics, Public Life, Peacebuilding and Decision Making



“I ran for election in the local council elections in 2019 and was subject to abuse via social media and email. It made me scared to use social media or speak out in public on social justice issues. I no longer use twitter.”

““I have had misogynistic abuse. After speaking outside against the misogyny of PSNI on Twitter I got about 100 abusive messages some threatening me with rape and death. This made me feel very unsafe and drastically impacted my mental health where I felt depressed and anxious.””

““I have had people tell me to die for my pro-choice and leftist stances and make threatening comments in reference to my sexual orientation.”

- Testimonies from WPG Primary Research



### 3.2.1 Women, Peace and Security issues in light of COVID-19

As the impact of COVID-19 is deeply gendered, a rights-based approach and gender post-conflict analysis of the Northern Irish context must therefore be at the centre of the COVID-19 response and recovery process. The Women, Peace and Security Agenda provides an essential framework for analysing and responding to COVID-19, however dispute over the legal status of the conflict in Northern Ireland continues to preclude application of UNSCR 1325 on Women, Peace and Security to the region in full. Despite this, there is commitment from the UK government to implement the principles of UNSCR 1325 in Northern Ireland.

The CEDAW Committee has repeatedly called for the implementation of the women, peace and security agenda in Northern Ireland.<sup>356</sup> UNSCR 1325 on Women, Peace and Security in NI, as has the UN Special Rapporteur on Violence against Women<sup>357</sup>. A consultation on legacy issues<sup>358</sup> (2018) acknowledged that a 'disproportionate number of survivors and family members are women' but did not suggest any specific action. It is important that the legacy initiatives announced in the Queen's Speech in May 2021, including legislation, effectively address the needs of women<sup>359</sup>, which have been well documented and range from health care needs and addressing the legacy of gender-based violence during the conflict.

The overarching message from available evidence, outlined for example in an Inquiry undertaken by the Westminster All Party Parliamentary Group on Women, Peace and Security and the Northern Ireland Assembly All Party Group on UNSCR 1325, Women, Peace and Security<sup>360</sup>, is that women need to be heard and have an equal role not only in peacebuilding, but in leadership at all levels. This is in line with the principles of UNSCR 1325, but extensive consultation with women<sup>361</sup> has found that many feel disempowered, have difficulty circumnavigating community gatekeepers (including paramilitary groups) and fear harm if they were to speak out.

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<sup>356</sup> [Concluding Observations](#) 2019, 2013, 2008 on examinations of the UK under CEDAW

<sup>357</sup> Convention on the Elimination of All Forms of Discrimination against Women (CEDAW, 1979), articles 1 and 2. The UK signed the Convention in 1981 and ratified in 1986

<sup>358</sup> Northern Ireland Office (2018) Addressing the Legacy of Northern Ireland's Past consultation document, <https://bit.ly/3gQg5ad>

<sup>359</sup> [Queen's Speech 2021](#)

<sup>360</sup> Westminster APPG on Women, Peace and Security and NI Assembly APG on UNSCR 1325, Women, Peace and Security (2014) An Inquiry into the position of women in Northern Ireland since the Peace Agreement, <https://bit.ly/2TZGKbr>

<sup>361</sup> Hinds, B and Donnelly D (2014) Women, Peace and Security: Women's Rights and Gender Equality - Strategic Guide and Toolkit, <https://bit.ly/2TY2GUo>

This has been highlighted in the recent unrest, where women and women's needs were invisible in the debate regarding factors leading to the current situation. However, the women's sector, and especially women's centres, have a long history of grassroots peacebuilding, and it is vital that women's voices are heard in developing new and sustainable solutions.

There is work ongoing in the sector to update the evidence from the above Inquiry at the time of writing, with findings due by early 2022; however, findings are likely to underline the urgency of implementing the principles of UNSCR 1325 as part of policy making in Northern Ireland. Specifically, the CEDAW Concluding Observations 2019 call for effective participation of women in post conflict reconstruction, and addressing obstacles including paramilitary intimidation<sup>362</sup>.

Despite this, there has been little progress on increasing women's participation in securing peace or in post conflict reconstruction. The response to COVID-19 has highlighted the impact of a lack of clear mechanisms, structures and aims for engagement, most visibly through the lack of representation of women on COVID-19 taskforces and a lack of focus on gender and gender equality in COVID-19 recovery plans. As an example of the latter, the original Feminist Recovery Plan was presented to the Northern Ireland Assembly's All-Party Group on UNSCR 1325, Women, Peace and Security in July 2020, which in turn referred it to the Head of the Civil Service for a response. The response, with contributions from all but one Government Department, demonstrates the very poor policy framework and practice in respect of securing gender equality.

The All-Party Group on UNSCR 1325, Women, Peace and Security has been very active in highlighting the lack of focus on gender, including through a series of Assembly Questions and seeking presentations from Departments. However, in order to ensure that gender, as well as the women, peace and security agenda, is an integral consideration in policy making, more systematic structures are required, in addition to a strengthened understanding of equality duties across the Northern Ireland Civil Service. A justiciable Bill of Rights (see section 5.3) is also essential to ensure women have clarity regarding their rights, including the right to contribute to decision making at all levels.

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<sup>362</sup> CEDAW Committee (March 2019) [Concluding Observations on the 8<sup>th</sup> periodic report of the UK](#)



The COVID-19 crisis with its particular impacts on women's income, socioeconomic independence and increased caring responsibilities has compounded barriers to women's involvement in peacebuilding and decision-making processes, particularly through limiting opportunities for meeting and collaboration to online fora, which are not necessarily well placed to support peace building and good relations work. Focused action is even more important than previously to enable women's active inclusion. As the Women, Peace and Security agenda provides an essential framework for analysing and responding to COVID-19, the structures, policies and guidance contained in the agenda should be applied to the COVID-19 response in Northern Ireland.

### 3.2.2 Good Friday Agreement and Underrepresentation of Women

The Good Friday/Belfast Agreement committed to increasing women's representation in public and political life, yet women remain under-represented in all spheres of political life, at Westminster, in the Stormont Assembly and in local government, as well as in public life and economic decision making. The 2014 Stormont House Agreement (SHA), the latest agreement outlining structures to deal with the past in Northern Ireland, contained no specific mechanisms for increasing the involvement of women.

Gender equality in public appointments has not been reached, and COVID-19 is likely to have curtailed in particular women's opportunities to seek public appointments. Multiple reports, including annual reports of the Commissioner for Public Appointments for Northern Ireland; the report on Women in Politics and the Northern Ireland Assembly by the Assembly Executive Review Committee (2015); the Inquiry by the All-Party Parliamentary Group on UNSCR 1325 Women, Peace and Security (2014); and repeated CEDAW Committee Concluding Observations (most recently March 2019), have concluded that women's under-representation in political and public life and peacebuilding in Northern Ireland is a serious matter to be addressed as a matter of urgency.

CEDAW includes provision for temporary special measures to promote equality, and the provision at Section 43A of the Sex Discrimination (NI) Order 1976<sup>363</sup>, which allows for lawful positive action in the selection of candidates. However, no political party has used this provision, and the 2015 Assembly Review Committee inquiry did not make a clear recommendation

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<sup>363</sup> See: [Sex Discrimination \(Northern Ireland\) Order 1976](#)

in this regard<sup>364</sup>. However, in Ireland gender quotas for general elections were introduced in 2012 and have seen an increase in female candidates, although not yet a significant increase in women elected<sup>365</sup>. The recent Citizens' Assembly on gender equality has recommended expanding quotas to all elections, increasing penalties for breaches as well as introducing quotas for boards of private companies<sup>366</sup>. Consideration should be given to introducing quotas, as a temporary measure to address underrepresentation, not only of women but also minoritised groups including Black people, ethnic minorities, LGBTQI+ people and disabled people.

One positive development over the past year was the legal change ending the requirement for electoral candidates to publish their home address<sup>367</sup>. The requirement breaches the privacy of candidates and creates potential risk to personal safety, as highlighted by Mairia Cahill who took the High Court case leading to the law change<sup>368</sup>, and overturning the requirement will remove this specific barrier for women to stand for election. However, significant further work to tackle barriers for women, as well as Black and minoritised people, disabled people, LGBTQI+ people and lone parents is required. This includes strengthening access to training building the required skills and competences to seek election, strengthening understanding of diversity within political parties and institutions, as well as addressing practical barriers such as access to childcare and adjusting meeting times.

### 3.3.3 New Decade, New Approach

In the context of COVID-19 recovery planning, it is imperative that women are included in decision making across all departments in Northern Ireland. Already, we have seen recovery planning take place with little to no consultation with the women's sector, who have been consistently producing evidence of the disproportionate impact COVID-19 is having on women. Voluntary and community sector groups have been set up without women's organisations being initially invited. Additionally, the Department for Economy's Economic Advisory Group was established without the

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<sup>364</sup> Northern Ireland Assembly, Assembly and Executive Review Committee (2015) Review into women in politics and the Assembly, <https://bit.ly/3wRg0sq>

<sup>365</sup> See eg. Economic and Social Research Institute (2020) [Female representation in politics in Ireland](#)

<sup>366</sup> Citizens' Assembly on Gender Equality press release 24 April 2021 'Recommendations of the Citizens' Assembly on Gender Equality', <https://bit.ly/3qiUJoU>

<sup>367</sup> [The Local Elections \(Northern Ireland\) \(Amendment\) Order 2020](#)

<sup>368</sup> The News Letter (February 2021) 'Mairia Cahill court victory in bid to challenge election address stipulation', <https://bit.ly/35MS11O>

inclusion of any civil society organisations, trade unions, or the women's sector. We have also seen significant delays to all commitments set out in the New Decade, New Approach agreement. COVID-19 is exacerbating existing inequalities, and women's equality cannot be deprioritised due to COVID-19 response planning. Rather, gender equality should be embedded within all governmental decision-making relating to COVID-19, health, the economy, infrastructure, budgets, the Programme for Government and more.

Commitments to introduce a number of strategies were upheld during the year, with work initiated on a suite of social inclusion strategies including a gender equality strategy, an LGBTQI+ strategy, an anti-poverty strategy and a strategy on disability<sup>369</sup>. In addition, Invest NI published a call for evidence for a new Investment Strategy<sup>370</sup>. However, significant strategies vital to women and gender equality remain outstanding: chief among these is a childcare strategy, which has not been initiated at the time of writing, despite indications to the contrary. Other core but outstanding pieces of legislation and strategies include:

- An effective Climate Change Act and associated strategy
- Energy Strategy
- Racial Equality Strategy
- Active Ageing Strategy
- Children and Young People's Strategy

The women's sector has been involved in development of the gender equality strategy; however, it is vital that evidence and recommendations shared by the sector and the Expert Panel that guided the strategy are translated into effective action, including action cutting across strategies. It is also vital that all social inclusion strategies use a gender lens, to ensure that gender equality is not treated as an isolated issue, but an outcome shaped by wider social and economic factors and conditions.

Women's participation is key in the creation of all of the above strategies, which are set to be the basis of the Programme for Government. The evidence and recommendations throughout this plan should also be considered, as key evidence providing a gender lens to decision making. Worryingly, the New Decade, New Approach agreement did not mention women at all, and already we have seen the impact of women's participation being absent from emergency response planning; the 2021 Pathway to Recovery plan<sup>371</sup> continues the initial Executive roadmap to

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<sup>369</sup> Details available on the Department for Communities website, [Social Inclusion](#) section

<sup>370</sup> Strategic Investment Board for Northern Ireland (2020) [The new Investment Strategy](#)

<sup>371</sup> NI Executive (March 2021) [Moving forward: The Executive's pathway out of restrictions](#)

recovery<sup>372</sup> approach that neglected to mention childcare, the Economic Recovery Plan<sup>373</sup> lacks a focus of women beyond a mention of increasing women in STEM fields, and women remain absent from COVID-19 taskforces.

Future mechanisms for dealing with the legacy of the past in NI must actively encourage the participation of women, regardless of what exact form they take. Broader adoption of the 'Gender Principles for Dealing with the Legacy of the Past'<sup>374</sup>, which were developed in 2015 by a multi-disciplinary group of human rights experts and academics, could assist in achieving this. In conclusion, approaches to dealing with both the legacy of the past and the present must go beyond traditional binaries of all kinds, taking account of the diverse society Northern Ireland has become and taking account of the multiple, intersecting identities all of us have, in order to create a sustainable future that integrates women and girls, as well as other underrepresented groups, into decision making structures.

### Recommendations:

- Recognition of intersectionalities which compound barriers to participation e.g., specific issues impacting BME women, disabled women, rural women, LGBTQ+ women, younger women, lone parents and those with childcare responsibilities,
- Embed gender mainstreaming, gender proofing and gender budgeting into all decision-making process in the Northern Ireland Assembly,
- Urgent implementation of all commitments outlined in New Decade, New Approach.

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<sup>372</sup> NI Executive (May 2020) [Coronavirus recovery plan](#)

<sup>373</sup> Department for the Economy (February 2021) [Economic recovery action plan](#)

<sup>374</sup> Catherine O'Rourke et. al. (2015), 'Gender Principles for Dealing with the Legacy of the Past', Transitional Justice Institute, (available online): <https://bit.ly/3qISlBd>

### 3.3 Restorative Justice

In the Independent Hate Crime Legislation Review led by Judge Desmond Marrinan,<sup>375</sup> restorative justice is described as a mechanism that “gives victims the chance to meet, or communicate with, the relevant people who have harmed, to explain the impact the crime has had on their lives. This has the potential to help some victims by giving them a voice within a safe and supportive setting and giving them a sense of closure”. We believe restorative justice does have a place within the criminal justice process in dealing with hate crime in Northern Ireland. This is particularly important as it has been argued that the needs of hate crime victims are not always addressed through the conventional punitive approach and many victims may benefit further from restorative justice.

Further, research illustrates restorative justice mechanisms reduce levels of anger, anxiety and fear and that they can prevent further incidents from recurring or escalating. It is also clear that punitive responses such as prison sentences can have limited deterrent value and can act as breeding groups for intolerance and hate. To reduce hate crimes in NI, a range of approaches are likely to be needed, but there should be a focus on phasing out punitive measures in favour of processes more likely to reduce violence against already marginalised communities, such as restorative justice, increased education etc.

However, any restorative justice process that is created needs to be entirely victim-led. Victims must not be put into a position where they can be pressured by the offender, for example through the virtue of their relationship, to opt for restorative justice measures as an alternative to seeking punitive justice. Any form of restorative justice needs to work alongside the judicial system and be made up of adequately trained professionals. Further, restorative justice should only be an option in cases of “low-level” crimes. In order to test the effectiveness of reducing recurring incidents and increasing awareness, the changing attitudes or views of the perpetrator needs to be evaluated and tested.

In relation to domestic violence and sexual abuse, it is regrettable that we have a system that does not prioritise true rehabilitation, but alternatives within the current system are not feasible. In the case of the often-suggested approach of restorative justice, there are serious concerns as it applies to the crime of domestic abuse. Restorative justice, even if victim-led, is not appropriate if there are power disparities between participants, and in the case of a victim and abuser, power resides with the abuser by the nature of the offence. It is widely accepted that psychological abuse is

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<sup>375</sup> Judge Desmond Marrinan (Nov 2020) [Review of Hate Crime Legislation](#), para 11.2

routine in these cases, and it damages a victim's self-esteem to such a degree that they regularly need several abortive attempts to leave before they have the necessary resources to do so. In light of this knowledge, it is important that we remember that restorative practices may be initiated by a victim who simply wants the legal trouble to "go away" and the relationship to resume. Further, power-dynamics must be acknowledged, and many victims may feel pressured to undergo restorative justice practices by their abusers. The WPG is mindful also that survivors should not be belittled, and it remains necessary for a very robust system of safeguards to be in place to ensure that this cannot be the case.

The prominence of the Black Lives Matter movement in political discussions this year has led to increased awareness of and movement towards many of their political asks, particularly, the defunding of police and rethinking of how we can ensure justice while prioritizing care for our communities. Resourcing and centring restorative justice is an important step in that process, yes, but it is not the only step. The demilitarisation and defunding of the police service would free up funds to go directly to communities, reducing poverty and hence reducing crime. It would also allow for a more fit-for-purpose system for dealing with cases requiring genuine community care where armed officers may not be as helpful as, for instance, mental health crisis teams with extensive training on de-escalation and suicide prevention, or a for-purpose domestic violence response team based in social care.

Rethinking what justice means and moving away from a punitive and carceral criminal justice system is imperative to reducing harm in our communities and building a Northern Ireland on foundations of care over violence. We welcome the current consultation process from the Department of Justice on Restorative Justice but recognise that a consultation does not ensure action. The Department of Justice should commence work into the demilitarisation of the Police Service and move to prioritising care in our communities. The WPG will provide further recommendations on restorative justice in this consultation process.

Women's Aid launched a petition with regard to a VAWG Strategy in NI on 8<sup>th</sup> March 2021, as we are the only part of the United Kingdom that does not have a specific strategy dedicated to tackling gender-based violence, which means that our women and girls are being let down, simply because of where they live.

It is well documented that domestic violence and abuse and all gender-based violence disproportionately affects women and girls, however here in NI, there is nothing in place to address this. A specific strategy means that there is a meaningful focus from our own regional government on the need to stop gender-based violence against women and girls. It is important to note that a strategy tackling gender-based violence will not discount the valid experiences of other gender identities, but instead will address the reality of the situation which is that women and girls are disproportionately affected. A paper was presented by the Justice Committee to the Executive Office and is currently with them for consideration. The WPG will continue to lobby and campaign on the need for this strategy until it comes to fruition with resources and funding attached.

Domestic and sexual abuse continue to be under-reported and prosecutions remain low and, as noted by CEDAW, Domestic Abuse Legislation in Northern Ireland remains inadequate. To effectively tackle violence against women, coordinated action from government is required, including preventative measures, early intervention and protection, and victim-centred justice to address the lack of services and barriers faced by women and girls.





### 3.4 Digital Divide and Access Poverty



“The [universal credit] system online is workable.”

“I have struggled to access healthcare services during the pandemic. My internet connection is not stable.”

“Broadband atrocious for working from home.”

“We have no broadband here which made being expected to work from home and home-schooling almost impossible and hugely stressful.”

“Feeling isolated especially during lockdown.”

“Access to food like the DfC boxes didn't seem to be about in my rural area.”

“Plan ahead especially during winter months when weather is so bad that driving conditions can be considered dangerous. Fortunately I have a PIP car however that will be reassessed in 2 years so a worry obviously. Lack of community here sometimes I think it would be best if I moved back to the Glens Antrim where family members reside.”

“I haven't been able to travel (train) for my volunteering or to see friends and family.”

- Testimonies from WPG Primary Research



Access to digital technologies is still limited in Northern Ireland, primarily due to uneven broadband access and coverage, especially in rural areas. Many women, in particular older women, also report lack of skills and confidence in using technology.

In December 2020, Ofcom released its latest research into the UK's communications infrastructure, Connected Nations 2020. Ofcom's key findings included that around 190,000 UK premises cannot get a decent broadband service from either fixed or fixed wireless, 19,000 of which are in Northern Ireland<sup>376</sup>. Additionally, NI was found to have the lowest level of superfast broadband of all UK regions and coverage of faster broadband was specifically noted to be lower in rural areas.<sup>377</sup>

Northern Ireland Women's European Platform (NIWEP) hosted a conference on CEDAW in January 2020, featuring CEDAW Committee vice chair Nicole Ameline as keynote speaker. In her keynote, Mme Ameline highlighted the gender aspects of the digital divide and emphasised that women and girls need to be fully engaged in the development of technology, including artificial intelligence. Mme Ameline emphasised the risks of artificial intelligence, as current evidence indicates algorithms are male oriented and often produce discriminatory results for women in all spheres of life, from assessing eligibility for loans or credit cards to accessing social protection. This is also true when it comes to the use of facial recognition technologies (where it is allowed) as women are more likely to be misidentified.

The Covid-19 pandemic has highlighted the gender aspects of the digital divide, with reports of mothers struggling to support their children's education on mobile phones, and teenagers scrambling to complete schoolwork on mobiles or a single family laptop. Older women are among the groups least likely to be digitally connected and computer literate, although efforts were made to address this particularly during the pandemic. According to the Office for National Statistics from data gathered in 2018, women aged 75+ were the least likely of all groups to have accessed the internet in the prior three months by a considerable margin (more than 10%).<sup>378</sup> This same research also found that 'internet non-users' were most likely to come from Northern Ireland.

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<sup>376</sup> Ofcom (2020), 'Connected Nations Report', <https://bit.ly/2TR4lFX>

<sup>377</sup> Ofcom (2020), 'Connected Nations 2020 Northern Ireland Report' <https://bit.ly/3qITi9j>

<sup>378</sup> See OFN statistics on '[Exploring the UK's digital divide](#)' available online here. These figures were last updated in 2019.

Newcomer, asylum seeking and refugee families also face challenges in accessing affordable internet services, which are critical for them to maintain contact with their extended families and through this, support their health and wellbeing.

It is also important to note that digital literacy and poverty among vulnerable sections of our community is likely to be a barrier to the effectiveness of contact tracing apps and any future 'vaccine passport' app. This includes, though is not exclusive to, the elderly and those with irregular immigration status. However, the COVID-19 pandemic has highlighted the potential of technology in connecting people and also in providing support services.

### Recommendations:

- The NI Executive should publish a (co-designed) digital inclusion strategy, which is aligned with other anti-poverty efforts and responsive to the real life issues that emerged during the pandemic. This should complement existing strategies on the expansion of digital technologies within NI and inform all work being undertaken to expand and improve internet access in NI.
- Strengthen access to high quality broadband services across Northern Ireland.
- Work with telecommunications providers to ensure access to affordable broadband services.
- Provide a paper alternative to any future digital 'vaccine passport'.
- Expand and promote more widely the '[Go ON NI](#)' scheme to improve digital literacy in NI.
- Work with the women's sector to ensure women have the appropriate skills to benefit from digital services and communications technologies.
- Ensure women, including women end users, are engaged in development of digital technologies and services, including artificial intelligence and assistive technologies.

### 3.5 No Recourse to Public Funds/Immigration

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“I am particularly concerned about the immigration rules [post-Brexit] and the right to work going forward esp for women who may not have access to applying for themselves relying on males in the family etc.”

“[On hostile environments] You end up having all of these people, whether its doctors, bankers or whoever it is, acting as police officers...policing you, policing people.”

“I know people who I work with... if their immigration status is unstable, they will not seek healthcare. They will not seek to get medical support if they needed it.”

- Testimonies from WPG Primary Research

”



The barriers in accessing social security for the migrant community have been painfully highlighted during the economic uncertainty of the COVID-19 crisis.

Section 3(1)(c)(ii) of the Immigration Act 1971 provides that limited leave to enter or remain in the United Kingdom may be subject to a condition requiring that person maintain themselves, and any dependants, without recourse to public funds. This is known as ‘No Recourse to Public Funds’ or NRPF. Since 2012, a ‘NRPF condition’ has been imposed on nearly all migrants granted the right to live or work in the UK.

The Home Office justifies this condition on the basis that people seeking to establish their family life in the UK must do so on a basis that “prevents burdens on the taxpayer and promotes integration”.<sup>379</sup> This covers a huge number of visas including those for spouses, parents and adult dependants. The effect of this condition is that the person holding leave is permitted to work in the UK and pays taxes but is prohibited from accessing the safety net of public funds paid for by those very taxes. Other migrants such as those without status, or those subject to a sponsor maintenance undertaking, can also be prevented from accessing welfare benefits. Collectively these are known as NRPF groups. Breaching a NRPF condition can result in a criminal conviction and can negatively impact future immigration status.

Paragraph 6 of the Immigration Rules lists the benefits considered as ‘public funds’ for the purpose of the Immigration Rules.<sup>380</sup> This definition covers most benefits which are paid for by the state such as child benefit, housing benefit or Universal Credit. It does not include benefits that are based on National Insurance contributions, such as statutory sick pay or statutory maternity pay.

The imposition of NRPF by the Home Office is discretionary, but in practice this discretion is rarely exercised. Generally, discretion will only be exercised where the applicant is destitute or there are particularly compelling reasons relating to the welfare of a child or they provide proof of other exceptional circumstances relating to their finances.

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<sup>379</sup> UK Home Office (January 2021), ‘Family Policy, Family life (as a partner or parent), private life and exceptional circumstances’, <https://bit.ly/3qIToxH>

<sup>380</sup> UK Home Office (February 2016), UK Immigration Rules, <https://bit.ly/2TZ7Vn2>

Some people who have a NRPF condition on their visa can apply to have it lifted, but they must show they have become destitute, or have particularly compelling reasons relating to the welfare of a child, or exceptional circumstances relating to their finances. This option is also limited to persons on certain visa routes such as family and private life. Applying to have NRPF lifted can also result in your visa renewal period being changed to a ten-year route; effectively doubling the time it will take for the person to gain indefinite leave to remain in the UK.<sup>381</sup>

Local authority and social services departments have some limited statutory duties to provide support to people who are subject to NRPF. For example, in Northern Ireland social services commonly are required to step in and protect the welfare of children who have become destitute due to NRPF under Article 18 of the Children (Northern Ireland) Order 1995.<sup>382</sup> However, some NRPF groups are excluded from local authority support, unless it is necessary to prevent a breach of their human rights. In practice it can be very difficult to obtain support from social services.

NRPF stands out as a particularly draconian element of the hostile environment because it impacts such a broad range of migrants. A report by the Migration Observatory found that around 1.376 million people hold valid UK visas that would usually be subject to the NRPF condition.<sup>383</sup> People who have been living, working and contributing to taxes in the UK for years are subject to this measure.

The policy also disproportionately impacts vulnerable groups such as single parent households, pregnant women and people subject to domestic violence, leaving them without the safety net of social welfare and throwing families into destitution.<sup>384</sup> This was exacerbated during the COVID-19 crisis as job losses and economic uncertainty left people subject to NRPF unable to access support, leaving them forced to work in unsafe conditions, trapped in unsafe housing and unable to self-isolate and support their families. An example in Northern Ireland is the Discretionary Support (Amendment) (COVID-19) Regulations (Northern Ireland) 2020 which created a Discretionary Support Grant designed to urgently support those affected by the COVID-19 crisis.<sup>385</sup> However, these grants are listed as a

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<sup>381</sup> UK Government (March 2014) Application for change of conditions of leave to allow access to public funds if your circumstances change, UK Visas and Immigration, <https://bit.ly/3zQ5Udg>

<sup>382</sup> [The Children \(Northern Ireland\) Order 1995](#)

<sup>383</sup> The Migration Observatory (June 2020), Between a rock and a hard place: the Covid-19 crisis and migrants with No Recourse to Public Funds (NRPF), <https://bit.ly/3zON9qt>

<sup>384</sup> Maternity Action (June 2020) Migrant Women, No Recourse to Public Funds and the Pandemic, <https://bit.ly/2Uv5eKa>

<sup>385</sup> [The Discretionary Support \(Amendment\) \(Covid-19\) Regulations \(Northern Ireland\) 2020](#)

public fund in Paragraph 6 of the Immigration rules, excluding persons subject to NRPF from accessing them.

A recent High Court challenge to the NRPF policy has led to a slight softening of the rules. In *R (W, A Child By His Litigation Friend J) v Secretary of State for the Home Department & Anor*, the court found the Home Office's policy of imposing NRPF under paragraph GEN.1.11A of Appendix FM to be unlawful and a breach of Article 3 ECHR.<sup>386</sup> This decision only addresses the fact that Home Office guidance does not provide for those who are not yet suffering inhuman and degrading treatment, but are about to. This ruling did not abolish NRPF but required the Home Office to publish a revised policy instruction.

The Home Office amended its guidance to state that: "In all cases where an applicant has been granted leave, or is seeking leave, under the family or private life routes the NRPF condition must be lifted or not imposed if an applicant is destitute or is at risk of imminent destitution without recourse to public funds."<sup>387</sup> A further recent High Court challenge to the NRPF also found that the scheme does not comply with the Home Office duties to safeguard and promote the welfare of children under Section 55 of the Borders, Citizenship and Immigration Act 2009.<sup>388</sup> It remains to be seen how the Home Office will respond to this ruling.

There is a vocal movement from Westminster and external stakeholders calling for the suspension or complete lifting of NRPF in light of the COVID-19 crisis.<sup>389</sup> Boris Johnson even appeared to call for a review into the policy on the 27<sup>th</sup> May 2020 when he stated before the Liaison Committee "people who've worked hard for this country who live and work here should have support of one kind or another".<sup>390</sup> However, a review is not enough, the human rights and equality impact of NRPF is shockingly clear and the stated policy goal of preventing migrants becoming a burden to the taxpayer is not proportionate to the detrimental impacts caused.

Advocates for migrant justice and against No Recourse to Public Funds are consistently told at the devolved level in Northern Ireland that it is a reserved issue so as to absolve responsibility at the local level to mitigate the effects of this harmful policy. This is not good enough. The NI Executive must

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<sup>386</sup> [R \(W, A Child By His Litigation Friend J\) v Secretary of State for the Home Department & Anor](#)

<sup>387</sup> Home Office (January 2021), Family Policy, Family life (as a partner or parent), private life and exceptional circumstances, <https://bit.ly/3qIToxH>

<sup>388</sup> [ST & Anor v Secretary of State for the Home Department](#) [2021] EWHC 1085 (bailii.org)

<sup>389</sup> The Guardian (May 2020), Scrap UK rule that has left 1m migrant workers at risk of destitution, say MPs, <https://bit.ly/3xRrJaF>

<sup>390</sup> The Guardian (May 2020), If Boris Johnson is baffled by Britain's cruel migration laws he should change them, <https://bit.ly/3zMsC69>



commit to adequately resourcing organisations which support those with No Recourse To Public Funds, including women's organisations and refugees who assist victims of domestic abuse with NRPF, as well as sufficiently resourcing immigration advice provision for women applying to the Domestic Violence Disclosure Scheme and the EU Settlement Scheme.

In March 2020, the distribution of National Insurance Numbers (NINs) was halted across the UK. However, services resumed in England, Scotland and Wales after the first lockdown – Northern Ireland offices remained shut until 2021. The reasoning for the continued delays to NIN distribution in Northern Ireland was linked to the need to reshuffle staff to help process increased benefits claims<sup>391</sup>. At the time, NI Direct said that if the individual could prove they have the right to work in the UK under normal circumstances, then they could work without the NIN<sup>392</sup>. Further confusion was created as most employers were not made aware of this. For those who were able to obtain work without a NIN, many were placed in the emergency tax bracket, paying a higher rate than they normally should<sup>393</sup>. NIN services have resumed, but the impacts faced by those who were unable to get hired, those who paid higher taxes, or those who were affected in other ways due to the disproportionately long closure of the Northern Ireland NIN Office need to be addressed and mitigated.

### Recommendations:

- The NRPF policy must be suspended in light of the COVID-19 pandemic and the economic downturn faced as we move out of lockdown.
- Long term, the policy must be abolished in order to ensure that those who have worked and contributed taxes and the most vulnerable in our society can access the support they need to live in safety and dignity.
- The NI Executive must commit to adequately resourcing organisations which support those with No Recourse To Public Funds, including community organisations and women's refuges who assist victims of domestic abuse with NRPF as well as sufficiently resourced immigration advice provision for women applying to the Domestic Violence Disclosure Scheme and the EU Settlement Scheme.
- Address and mitigate the impacts caused by the delay in reopening the Northern Ireland National Insurance Number Office.

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<sup>391</sup> BBC News (October 2020), 'Thousands unable to get an NI number because of coronavirus', <https://bbc.in/3zUnpcf>

<sup>392</sup> Ibid

<sup>393</sup> Advice NI, 'THINK Policy Newsletter' (April 2021), <https://bit.ly/3xL5NO7>

## 3.6 Women in Prisons

### 3.6.1 Growing Incarceration Rates for Women in Northern Ireland

In Northern Ireland, the vast majority of prisoners are men. However, the number of men being sent to custody has dropped, while the women's imprisonment rate continues to rise significantly. Across the UK and Ireland, campaigners are calling for the decarceration of women through groups such as Prison Reform Trust, Women in Prison and Irish Penal Reform Trust. These calls are based on substantial mounting research on the distinct vulnerability and gender-specific needs of criminalised women<sup>394</sup>. In Northern Ireland, trends show that the levels of imprisoned women have been increasing each year since 2000.

In July 2019, there were 84 women imprisoned in Northern Ireland at one time, which was significantly higher than prison capacity and much higher than the average of 57 during 2017-18. Evidence suggests that the majority of women imprisoned are in relation to low-level offences as in 2018/19, 90.3% of women were imprisoned for a year or less, while 64% of women imprisoned received a sentence of six months or less and 29% were sentenced to three months or less<sup>395</sup>. Approximately 58% of women sent to prison are remand prisoners, where they have been arrested and charged with an offence and must await trial in prison.

This is a gender equality issue due to the proportionality of punishment towards often vulnerable and marginalised groups of women. Research from Dr Gillian McNaul also shows that many women are remanded due not to the severity of their crime, but instead for issues relating to mental health vulnerability, social care need, homelessness and addiction<sup>396</sup>. Further, women in prisons in Northern Ireland are predominantly non-violent offenders and tend to commit “victimless crimes” such as theft (which accounts for 30% of women's offences in Northern Ireland), which can often be survival based and connected to poverty.

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<sup>394</sup> See Contributions from Dr Gillian McNaul to NIACRO Issue 42 (2019), p.4: <https://bit.ly/3gXELMN>

<sup>395</sup> Department of Justice (2019), 'The Northern Ireland Prison Population 2018/19', <https://bit.ly/2SXzMDI>

<sup>396</sup> Gillian McNaul, (2019), 'The problem with women's prisons – and why they do more harm than good', <https://bit.ly/3d6eZVz>

The high levels of women sent to prison on remand also suggests that prison is being used as a replacement for alternative forms of support that have not been resourced in relation to housing, mental health support, refuge and addiction support. The gaps in community support and gender appropriate hostel accommodation has also impacted court decision making, as women are being imprisoned unnecessarily as there is nowhere else for courts to send them<sup>397</sup>.

With women's imprisonment rates in Northern Ireland going against trends elsewhere, the department of Justice needs to address this inconsistency urgently, particularly as the Northern Ireland Prison Service is developing a new estate strategy for imprisoning women. Without addressing gaps in social and community care, increased prison capacity for women will continue to punish marginalised women as a result of having nowhere else to send them. Similar to the issues mentioned in section 8.5, there is a lack of guidance in relation to trans people in prisons, and this has led to issues of trans women being placed in men's prisons and trans men being placed in women's prisons and a lack of access to healthcare and support for trans inmates.

The carceral justice system in Northern Ireland also favours incarceration instead of rehabilitation processes or restorative justice. Other issues with the criminal justice system and incarceration include the failure to effectively deal with gender-based crime and hate crime, particularly given the high levels of re-offending in relation to domestic abuse. It is clear a wide body of work is needed in relation to the criminal justice system to deal with the particular failings towards women and the general lack of understanding of gender.

### 3.6.2 Detention of Trafficking Victims

There is specific concern that victims of trafficking are ending up in detention. Between January 2019 and September 2020, 4,102 people who were referred into the UK's modern slavery framework (the National Referral Mechanism, or 'NRM') were locked up in detention. This included 658 women with trafficking indicators.

In 2020 alone, despite a significant overall reduction in the use of detention due to the Covid-19 pandemic, 969 people with trafficking indicators were detained. Women for Refugee Women has highlighted concern that although fewer women than men are being detained, women are increasingly being held in facilities intended for men, where lack of privacy and support make disclosing trafficking and seeking adequate support

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<sup>397</sup> Ibid.

even more difficult<sup>398</sup>. These concerns have previously been raised in relation to asylum detention centres.<sup>399</sup>

### 3.6.3 Asylum Detention

For asylum seeking, migrant and refugee women new UK rules on immigration further limit access to legal aid for immigration and asylum cases by making it financially impossible for lawyers to take on complex cases<sup>400</sup>. New asylum proposals by the government will make it even more difficult for women to claim asylum<sup>401</sup>.

Across the UK, the women's sector has highlighted extreme concern over planned new detention centres for women<sup>402</sup> following the closure of Yarl's Wood, which was dogged by accusations of sexual abuse<sup>403</sup>, hunger strikes<sup>404</sup> and critical inspection reports<sup>405</sup> and where women were threatened with accelerated deportation.<sup>406</sup> The new centre is proposed for Co Durham, to hold 80 women and is the first new detention centre to open in seven years. Campaigners in England have repeatedly highlighted the harmful consequences of asylum detention to women, including suicidality and depression, and emphasise that women seeking asylum frequently escape sexual violence and torture, therefore requiring care and support rather than detention.<sup>407</sup> There are concerns that many cases are mishandled, and therefore women with evidenced claims are being turned down and threatened with deportation.<sup>408</sup>

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<sup>398</sup> Women for Refugee Women (2021) Survivors behind bars, <https://bit.ly/3h2xeMV>

<sup>399</sup> See eg. Engender, NIWEP, WEN Wales and Women's Resource Centre (2019) [Four nations CEDAW shadow report](#)

<sup>400</sup> [Civil Legal Aid \(Remuneration\) \(Amendment\) \(Coronavirus\) Regulations 2020](#). Even before this, minoritised women who are subjected to VAWG including so-called honour-based violence, forced marriage, and trafficking, will continue to face barriers to legal support with a 56% drop in the number of asylum and immigration legal aid providers since 2005. [Refugee Action and NACCOM, \(2018\) Tipping the Scales: Access to Justice in the Asylum System.](#)

<sup>401</sup> See Refugee Women: <https://bit.ly/3je7AHo>

<sup>402</sup> See Refugee Women: <https://bit.ly/3h0mr5E>

<sup>403</sup> Guardian (2013), 'Sexual Abuse Yarl's Wood Immigration', <https://bit.ly/3xI5fZx>

<sup>404</sup> Guardian (2018), 'Minister defends deportation threats over Yarl's Wood hunger strike', <https://bit.ly/3h1Kst2>

<sup>405</sup> Guardian (2017), 'More Rape and Torture Victims being held at Yarl's Wood', <https://bit.ly/3gVUZGI>

<sup>406</sup> Medical Justice confirmed it had been consulted but said it had been highly critical of the policy. It said it had voiced concern at the time about the threat to expedite removals: <https://bit.ly/3h1Kst2>

<sup>407</sup> See Refugee Women: <https://bit.ly/3h0mr5E>

<sup>408</sup> Women's Resource Centre (2021) CEDAW Interim report

Throughout the pandemic, concern has been raised regarding the health and wellbeing of asylum seeking and refugee women, including many who were forced to leave as detention centres were emptied over concerns relating to issues including lack of social distancing measures. All asylum seeking and refugee women overall have experienced hunger and homelessness, while the mental health of many women has deteriorated and women with pre-existing health conditions have struggled to access healthcare. Women have experienced high levels of social isolation as a result of digital poverty and haven't been able to secure basic items such as soap and hand sanitiser.<sup>409</sup>

### Key findings/ Recommendations:

- Whilst the vast majority of prisoners in Northern Ireland are men, the number of men imprisoned has been decreasing while the number of women prisoners has been increasing each year since 2000.
- There is substantial evidence that supports the need for the decarceration of women based on the distinct vulnerability and gender-specific needs of women imprisoned in Northern Ireland.
- Evidence shows that the majority of women imprisoned in Northern Ireland are incarcerated in relation to mental health issues, homelessness, addiction and poverty. 57% of women sent to prison are awaiting trial and are sent to prison as there are no alternative resourced forms of support.
- Prison is being used in the absence of social and community care for vulnerable women, and the Department of Justice plans to further develop new estate strategies for imprisoning women should be focusing on inconsistencies in increasing levels of women prisoners and gaps in community care, rather than increasing prison capacity.
- The Department of Justice should monitor all aspects of the criminal justice system by gender and other identities and ensure that there is better understanding of how mental health, poverty and vulnerability impacts the likelihood of women coming in contact with the justice system.
- Close Larne House Detention Centre immediately.
- Take immediate action to ensure all refugee and asylum seeker women have access to legal aid for immigration and asylum cases.

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<sup>409</sup> Sisters Not Strangers (2020) [Hear us](#)

# Cultural Pillar





## 4. Cultural Pillar

### 4.1 Women and Girls in the Media, Rape Culture and Violence Against Women

“I was physically assaulted more than once at home during lockdown. It felt like I had nowhere to go and was making too big of a deal over these incidents. Being isolated has made getting out of bad situations worse.”

“Understanding of consent is low, permissiveness and 'boys will be boys' attitude remains, people don't even realise they are victim blaming when they do it and we have no RSE to undo the myths that our parents and peers pass on to us. I have personally been sexually assaulted as a younger woman and not reported because i didn't even recognise that it was sexual assault. I just passed it off as what happens in a club /bar / night out. It shocks me now that I and my friends all felt that way.”

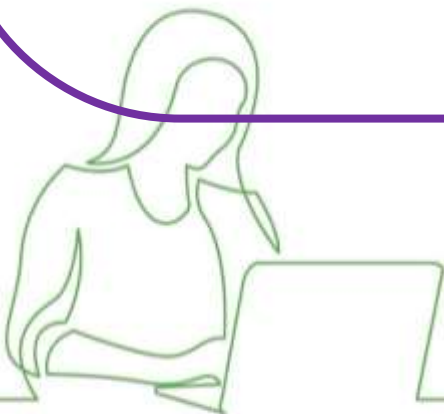
“There's an expectation that the way a woman dresses or behaves (especially when alcohol is involved) is an open invitation to sexual activity. Consent is a huge issue that needs more targeted interventions and awareness.”

“There is a problem of rape culture anywhere patriarchy is normalized as the status quo such as street harassment, being molested by a friend who acted like it was no big deal, and several instances of being subtly blaming people like myself who are assaulted.”

“We as a country indulge too much in lad culture which I believe is deeply entrenched in rape culture. Too often we excuse the “jokes” of cis men rather than calling them out for what they are.”

“Just looking at the comments section on facebook when rape/abuse cases are reported.”

“Because I honestly do not know any woman who has not been harassed, assaulted or raped.”





“Toxic masculinity is rife in our community. Men/boys feel entitled to speak to women however they like or touch them without consent. I have personally received vile comments and been touched inappropriately by men in public.”

“I believe we still very much blame women as a society, what was she doing / wearing/ what did she say / she wanted it.”

“Saying that "boys will be boys" and that to stop sexual harassment, the women have to be taught differently, not the men, and experiences include cat calling, uncomfortable compliments from strangers, being cornered and touched by men I didn't know.”

“Men putting their hands on my waist to pass me at work (aged 16) catcalling (which disturbingly I have received less as my body matured).”

“We have a very outdated view on progressive social issues in Northern Ireland. I have experienced harassment, cat calling, groping, unwanted attention, unsolicited dick pics etc.”

“Women are still judged for their appearance and the blame culture is still there.”

“The blasé attitude towards sexual assault (eg groping) and the fact that women in this country have clearly been denied justice following sexual assault or rape.”

“It is not being spoken up enough. It has to be a constant thing, a normal thing and information needs to be shown and accessible in every school, doctors and situation. I as a person who is a woman feel unprotected, uncared for and that my rights and fights are only a thing to be talked about when something bad happens and I am very tired of it.”

“The Rugby Trial was frankly terrible as was the hell that young woman had to endure yet again after she so bravely brought the case. All that to let the rapists off Still sad that it turned out so badly. My child is old enough to understand the news and I tried to prevent her from hearing the details but it was a difficult responsibility. It's all too common and won't be the last case of abuse/violence/coercion to give no help or solace to the survivors of the abuse.”

“I’m terrified of going to clubs and pubs when they reopen without social distancing measures as I find the behaviour in NI society from men is appalling. There is no sense of consent and many feel they can just grab or harass you as they please.”

“The case of attacks in South Belfast was met with glee by groups of young men who took advantage of the heightened anxiety by further threatening women for their own amusement. Rather than stand in solidarity with women and girls they used this as an opportunity to harass.”

“The conflict here has also meant women and girls and their issues are not represented or championed by this country.”

“The stereotypical idea of the rapist as a sinister stranger down an alleyway is perpetuated here with men choosing to favour exceptionalism rather than accept any responsibility for their behaviour and how it, in fact, can often be construed as damaging to women. Too many experiences to detail (street harassment, issues of consent, online etc.).”

“My father was very cruel to my mother and us. He used Power and Control at every stage of his living with us. A man who I accepted a lift with tried to murder me. I was in my twenties and still bear the scars mentally. He was never caught.”

“In my early 30’s I had a breakdown and lived in a women’s aid refuge for over 1 year.”

“The domestic abuse continued harassment through court regarding child and online abuse orchestrated by my ex and his new partner have had the single most negative impact on my mental and physical wellbeing in my whole life. In my experience the PSNI, women’s aid etc are excellent, courts are archaic and about 100 years behind in dealing with these things.”

- Testimonies from WPG Primary Research



### 4.1.1 Sexism and the Portrayal of Women and Girls in the Media

Sexism and the portrayal of women and girls in the media remains a serious issue. Although it is most visibly focused on women in public life, it impacts not just those women, but women and girls who are exposed to it. Research by Girlguiding UK shows that the single biggest reason listed by girls aged 11-16 that they are put off entering public life is because “women leaders are criticised more than male leaders”, with the third largest percentage saying that “there is too much focus on how they look and not on what they do”<sup>410</sup>. This demonstrates clearly the impact that this kind of media coverage has; while the women directly named may have developed a “thick skin”, the young women looking on will often exclude themselves for careers they would otherwise choose because of this scrutiny.

The same research from Girlguiding UK reports that young women are negatively influenced by advertising, in both traditional media and social media, that promotes certain beauty standards and encourages the use of cosmetic surgery, extremely restrictive dieting and similar methods including medically unsafe detox and diet products. With eating disorders on the rise<sup>411</sup> and the damage that they can do is known to medical professionals, this is something that needs to be strictly regulated.

Further, media can be especially critical when considering the intersectional identities that people have, with trans women and women of colour particularly impacted by intense media scrutiny. In recent years trans people - women and children in particular - have been the subject of a kind of “moral panic”, particularly in the UK media. Some of the media rhetoric has focused on the supposed danger that these people pose to women and girls. There is an urgent need to address the manner in which these topics are addressed in the media, with a focus on counteracting the disproportionate focus on the alleged risks and dangers of the right of trans individuals to self-identify. The issue would benefit from the elevation of trans voices and a tighter control of the manner in which these topics are discussed, particularly given the relative vulnerability of the minority to which it refers. There are health implications for this, too, covered in section 2.7 of this document.

In addition to this, there are serious issues with the way the media report on sexual offences and on domestic abuse, violence and homicide. Many headlines, in particular, mislead the reader and can reinforce myths around

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<sup>410</sup> Girlguiding, (2019), ‘Girls attitudes survey’, (available online): <https://bit.ly/3gWCdys>

<sup>411</sup> Guardian (2019), ‘Hospital admissions for Eating Disorders Surge to Highest in 8 years’, <https://bit.ly/3j1D8jU>

sexual and intimate partner violence. There have been some successful strides made in persuading media outlets to accept that guidelines are needed in the reporting of domestic abuse and especially domestic homicide. Level Up campaigned to have guidelines accepted to prevent further trauma to victims and their families and to avoid sending the wrong message about the nature of intimate partner violence. While they were successful, there are still numerous instances of this occurring in the media and therefore, guidelines need to be enforced more stringently.

Their suggested guidelines on reporting domestic homicide<sup>412</sup> were as follows:

1. Accountability: Place responsibility solely on the killer, which means avoiding speculative “reasons” or “triggers”, or describing the murder as an uncharacteristic event. Homicides are usually underpinned by a longstanding sense of ownership, coercive control and possessive behaviours: they are not a random event.
2. Accuracy: Name the crime as domestic violence, instead of “tragedy” or “horror”, and include the National Domestic Violence Helpline at the end of the piece.
3. Dignity: Avoid sensationalising language, invasive or graphic details that compromise the dignity of the dead woman or her surviving family members.
4. Equality: Avoid insensitive or trivialising language or images
5. Images: Avoid using stock images that reinforce the myth that it’s only a physical crime.

#### 4.1.2 Rape Myths and Rape Culture

Since the original Feminist Recovery Plan in July 2020, we are pleased to note that there have been some significant moves to enact the recommendations contained in the Gillen Review. Most notably the process has begun to provide legal counsel to complainants in sexual assault and rape cases, as per one of the Gillen recommendations. This, like many of the changes recommended in the Gillen Review have the potential to be transformative for the experience of reporting rape or other serious sexual offences, and since the Review was commissioned by the state there is an imperative to act upon all of its recommendations as soon as possible,

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<sup>412</sup> Independent (April 2019), ‘Feminist Group wins Campaign to Change How Domestic Abuse is Reported’, <https://bit.ly/3h255Wb>

including those that require new legislation. We urge action on this as soon as possible, and at least a timetable of the plans moving forward.

One specific recommendation of the Gillen Review that will be vital for addressing this issue is a public awareness campaign, funded by the state, to tackle rape myths and to counter misinformation and confusion on the issue of consent, and we welcome the news that this campaign is in the design stages at present. As more and more people come forward with complaints of sexual misconduct, it is apparent that we need this as urgently as ever.

Recent research by Victim Support highlights this, with their court observer's report underlining the prevailing rape myths that are heard in court rooms during trials dealing with serious sexual offences, concluding that "Rape myths were widely used during trial, especially during the defence's cross-examination of complainants, and these myths were rarely challenged effectively" and that "The treatment of complainants during trial is falling short of the dignity and respect they are entitled to. This was particularly the case regarding their treatment during cross-examination by the defence".<sup>413</sup>

Public awareness can also begin in formal educational institutions, specifically schools and third level organisations, and such a programme must deal with issues around consent and boundaries, in an age-appropriate manner, without fudging the issue. Relationships and sexuality education (RSE) is, at present, dependent on individual schools who can choose who to invite to cover the topic and can do so in a way that does not deal with these issues directly, guided by their ethos. In addition, they are sometimes entirely heteronormative, not covering LGBTQ+ relationships at all, and therefore not providing the necessary skills to an especially vulnerable demographic. With the recent focus on issues like these, particularly evident in an Assembly debate in March 2021 following the murder of Sarah Everard in England and, shortly afterwards, the murder of two local women by a man known to them, there has been a renewed focus on the urgent need for appropriate RSE in schools. We renew calls for the urgent introduction for standardised, mandatory and inclusive RSE in all schools.

With regards to rape myths, following the example of organisations that have successfully won agreement to standards of reporting around domestic abuse and death by suicide, Raise Your Voice has submitted evidence to IPSO on guidelines for the reporting of sexual violence. In it, they argue that there are many myths about rape and there will be more as

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<sup>413</sup> Victim Support (February 2021), 'Bearing Witness: Report of the Northern Ireland Court Observer Panel 2018-2019' <https://bit.ly/3gWmkbf>

society and technology evolve; all of this has been verified by Victim Support's original research, published in February 2021.

The real danger of rape myths is their persistence. The research shows how pernicious they can be, and research also shows that these myths pass down through generations, with college-aged men likely to espouse them when their father does, too<sup>414</sup>. A recent YouGov survey in the UK showed a similar trend among Britons, with a quarter of those 4,000 surveyed believing that marital rape does not exist<sup>415</sup> and many more expressing confusion regarding whether rape can occur where there is no (non-sexual) violence.

In the Gillen Review, one of his key recommendations with regards to tackling rape myths is Recommendation Number 18: "That the press and media should be party to a voluntary protocol governing how serious sexual offences are reported." This is especially true when reporting on rape myths<sup>416</sup>. Gillen writes:

"Rape myths are a trial reality and can often form the basis of aggressive cross-examination and may attract the unreasonable thinking of jurors. Moreover, for all kinds of societal reasons, complainants often buy into these myths, blaming themselves. I regard them as potentially a major challenge to the concept of a fair trial."

If these myths are a barrier to a trial, when the jurors are in receipt of careful legal instruction, they are certainly a barrier to tackling sexual violence in society as a whole. We call on the media and press to adhere to a protocol in the reporting of sexual offences.

Raise Your Voice made the following recommendations to IPSO which the WPG endorse:

- Guidance must require reports to specify who they are quoting when quotations are used, particularly when they are quoting defence teams' characterisation of a complainant or complainant's behaviour.
- Guidance should encourage fact-based headlines, because merely using quotation marks around words does not necessarily convey to the reader that this is a person's opinion or a defence's argument.

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<sup>414</sup> Jessica Turnchik (2011), 'Rape Myths', <https://bit.ly/3xJJ7Om>

<sup>415</sup> The Week (2018), 'When Did Marital Rape Become a Crime?', <https://bit.ly/3j8f9zl>

<sup>416</sup> Gillen Review Report (2019): <https://bit.ly/3gWmS0N>

- Guidance that encourages the centring of victims, particularly after a guilty verdict, as opposed to centring the wasted potential or the tribulations of the convicted sex offender.
- Guidelines requiring the clear identification of rape myths as rape myths, for example when a defence lawyer says, “why didn’t she shout or fight”, a responsible publication will follow that reporting with the proviso that in fact that most rape victims do not shout or fight.
- The detailed reporting of the very few cases where somebody has been falsely accused of rape or sexual assault should always be balanced by accounting for how rare these cases actually are. Failure to do so fuels a dangerous and common myth that these kinds of false accusations are common.
- Endeavour to make clear the difference between a failure to prosecute or a failure to convict and a proven false accusation.
- In the case of online content, publications should actively and adequately monitor comments or close comment sections entirely. Publications have a responsibility with regards to the spreading of misinformation and the potential damage to the public as well as to the complainant in any given case.
- When reporting on sexual crimes and especially serious sexual crimes, helplines and helpful websites for victims and survivors should be included at the end of the piece.

#### Further WPG recommendations to tackle rape culture include:

- Beginning a public awareness campaign as soon as possible and ensuring that funds are identified and ring fenced in order to make sure that this happens without delay.
- In the interim a timetable for implementing the Gillen Review recommendations must be published.
- We also recommend that a comprehensive, inclusive programme is developed on relationships and sexuality education (RSE), for all schools and 3rd level institutions.
- Ensure all awareness raising programmes in schools are in line with CEDAW General Recommendation 35, with a focus on informing and educating individuals on consent, sexual harassment and victim blaming to dismantle the belief that women and girls are responsible for their own safety.
- Ensure that effective measures are taken within the justice system to address high attrition and low conviction rates.



- Ensure that Violence Against Women and Girls is being reported in a responsible manner across media platforms so as to discourage victim blaming and rape myths as laid out in article 17 of the Istanbul Convention.
- Address issues with reporting gender based violence and threats to eradicate practices of victim-blaming, perpetuating myths and suggestions that women's behaviour should change. Have gender based violence, threats and abuse included as a protected characteristic in any upcoming Hate Crime Legislation Review in Northern Ireland.

### 4.1.3 Violence Against Women

The Women's Policy Group welcomes the introduction of the Domestic Abuse and Civil Proceedings Act which will be in operation in November 2021 and received Royal Assent on 1<sup>st</sup> March 2021. The WPG NI welcomed the proposed legislative changes regarding domestic abuse and violence both within the Northern Ireland Assembly and in Westminster Parliament. Activists, women's organisations and support providers have spent many years calling for adequate domestic abuse legislation in Northern Ireland. In the current global pandemic, domestic abuse and violence have sharply increased as many are put at greater risk due to the ongoing government-issued social distancing and lockdown measures. Creating adequate domestic abuse and violence legislation could not be more pertinent than it is right now. Lessons can be learnt from other jurisdictions and ensure that the women's sector is included in the application and implementation of relevant legislation moving forward.

Our full evidence submission, with detailed recommendations relating to the content of the bill, and most significantly, what is missing, can be read [here](#). A summary includes:

#### Recommendations:

- Remove the 'reasonable defence' clause 12
- Introduction of Stalking legislation
- Introduction of non-fatal and fatal strangulation legislation
- Recognition of Violence against Women and Girls and gender-based violence in line with the Istanbul Convention

- Grant of Secure tenancies in cases of domestic violence and abuse with recognition of the differing needs of disabled women, Traveller women, trans communities, rural women, migrant women etc.
- Review of the court systems in NI including criminal, civil and family courts
- Introduce a Domestic Abuse Commissioner for Northern Ireland (already in post for England and Wales)
- Secure funding for specialised services and a review of tendering and procurement in relation to domestic violence and abuse services
- Provide guidelines to employers on recognising the signs of abusive behaviour
- Fully funded programme to raise public awareness of domestic abuse
- Tackle heteronormative assumptions and increase awareness of domestic violence within the context of LGBT+ people
- Recognition of disproportionate impact on rural women, areas of paramilitary control, migrant women, LGBT+ groups, disabled women etc.,
- Powers to deal with domestic abuse:
  - Introduction of domestic abuse protection order
  - Introduction of domestic abuse protection notices
- Safer family court and child contact system
- Improve child safety through:
  - Prohibiting unsupervised child contact for a parent on bail for domestic violence and abuse, or where there are ongoing criminal proceedings.
  - Child contact in cases of domestic abuse is based on an informed judgement on what is in the best interests of children, not the presumption of parental involvement.
  - An independent statutory review of family courts in NI to assess how they deal with domestic abuse cases to work towards consistent outcomes across NI.
- More rigorous and innovative evidence collection approaches to support successful prosecutions including:
  - Use of the Domestic Violence register showing the number of times police have been called to the house, to build a picture of the frequency and nature of abuse (in line with CEDAW Recommendation 35 on gender-based violence),
  - Use of PSNI intelligence and evidence gathered from incidents to build a picture of coercive control as a course of conduct,
  - Use of body worn camera evidence from the scene on each occasion to effectively demonstrate the impact and seriousness

of abuse. In parts of England where body worn cameras have been rolled out, there is a marked increase in the severity of sentences for domestic violence related crimes.

- NI has not fully implemented an Independent Domestic Violence Advisor service nine years after it's recommendation; any service should be specialised and not gender-neutral and consideration should be give to the introduction of children's IDVAs and making IDVAs mandatory in police stations
- Ensure there is effective reporting and monitoring of all Section 75 groups by the PSNI to ensure the diverse needs of victims from various minority groups can be met
- Addressing re-offending – highlighting the lack of a framework of prevention, rehabilitation and restorative justice in NI
- Guidelines for sentencing for coercive control
- Guidelines for measuring non-physical harm
- Ensure victims' statements cannot be weaponised by prosecutors
- Provide guarantees that women with uncertain immigration status can seek justice without their cases being reported to the Home Office
- Create an inter-departmental approach for the implementation and creation of other legislation with the collaboration of the third sector

#### Further recommendations (in regards to policy developments):

- Serial perpetrator register for the whole of the UK
- Clarify the use of 'barring orders' in the family courts to prevent abusive ex-partners from repeatedly dragging their victims back to court – which can be used as a form of continuing domestic abuse – we would need them in place first (as above)
- Controlling or coercive behaviour offence extended to include abuse where perpetrators and victims no longer live together
- 'Revenge porn' offence widened to cover threats to share intimate images

#### Other key asks:

- If NI gets a VAWG Strategy – oversight on that strategy – at present the oversight for existing strategy does not work nor do the yearly Action Plans, this strategy has achieved very little now in the 6<sup>th</sup> of 7 years. Strategy also needs to be cross departmental – too much focus in NI of Department of Justice and Health taking lead on all things

related to domestic and sexual violence – there is also no money attached to this strategy

- A Minister for Women and Safeguarding
- Changes to housing and homelessness legislation for those escaping domestic violence and abuse
- Ensure that welfare policies protect women and their children
- Reforms to ensure migrant survivors have equal access to protection and support
- Funding and resourcing of the current Domestic Abuse & Civil Proceedings Act 2021 which is essential to respond to domestic violence and abuse
- Review of the MARAC process
- Domestic Abuse specialist courts
- Training for all Judges

#### 4.1.4 Protection from Stalking

Members of the WPG gave evidence to the Justice Committee on the Protection from Stalking Bill which is currently at committee stage. Please see link to full submission and recommendations from WPG [here](#). The WPG welcomes that there is another piece of legislation that is moving forward through our local Assembly and at last all victims of stalking will have appropriate legislation to protect them.

In March 2021 it was announced that the Executive Office will soon introduce a strategy on Violence Against Women & Girls (VAWG) for the first time. We welcome the recognition that there is now an urgent need to act on this, but note with regret that it has taken until now to act on this malign force in NI society, which has seen a sharp increase in domestic homicides during the pandemic. The details of the VAWG strategy remain to be seen at time of writing, but we urge that it be fully funded and take a thorough, preventative approach. This is best achieved by co-designing the strategy with the relevant organisations working in the sector, during the design process rather than via consultation on a finished proposal. We urge the Executive Office to begin work on this immediately; with the combined resources in the sector and the wealth of work already completed in related fields, there is no reason that this can not be completed by the end of this mandate.

We also welcome the work done to introduce a law on Stalking to Northern Ireland for the first time. The WPG submitted evidence to the Justice Committee in respect of this in April 2021<sup>417</sup> and we carried out primary research in order to inform our evidence and conclusions and ensure victims' and survivors' voices were at the core of our evidence.

We included a range of both quantitative and qualitative questions for respondents to answer anonymously. This included the following questions:

1. Are you (please click all that apply) LGBTQ+; Disabled; Black or Ethnic Minority Community; Female; Male; Non-binary; Trans Woman; Trans Man; Prefer not to say?
2. How many times have you been a victim of stalking?
3. Was your stalker known to you?
4. If you wish to, please detail your stalking experience(s)
5. Did you report any stalking incident you experienced?
6. If you reported this, who did you report it to (for example, police, employer, teacher etc.)?
7. If you reported it, was the response helpful? Can you tell us why?
8. Are you aware of "Clare's Law" or the Domestic Violence Disclosure Scheme?
9. If so, was this useful to you or your care? Please tell us how or why?
10. Did the stalking happen online, in real life or both?
11. How did the stalking end? Please describe anything you wish to tell us?
12. What would have made you feel safer?
13. What do you think would stop someone from harassing or stalking?
14. If you wish, please tell us the impact that stalking has had on you?

Given the challenging nature of the questions at hand, no questions were compulsory, and we provided signposting to support service providers for those who had been affected by the issue and required support.

While there is much to be gleaned from the survey outcomes, the most universal theme in these experiences was the reported serious long-term impacts on survivors. 100% of respondents listed long term impacts on their mental health because of their experiences, from those cases where the harassment was ongoing to those where it had ended decades before. Three respondents specifically mentioned living with PTSD as a result. Some feared for their physical safety, others suffered damage to their career.

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<sup>417</sup> WPG Joint Evidence Submission to Justice Department on the Protection from Stalking Bill (April 2021): <https://bit.ly/2UxMOII>

Other key themes include:

- The coexistence of in-person and digital stalking,
- The prevalence of individuals experiencing stalking by more than one perpetrator,
- The rise of Image Based Sexual Abuse (IBSA) also known as “revenge porn”,
- The connection between perpetrators’ perceived “sense of entitlement” and their behaviour, and how gaps in the law enable this,
- Confusion over how best to deal with the issue,
- A wide variety of responses from institutions including the police, justice system, educational establishments and workplaces.

In terms of reporting stalking and the responses from various organisations, including the PSNI, the survey found patterns of reports to agencies coming quite late into the pattern of behaviour, because of a mixture of fear of disbelief, embarrassment, a hope it would “all go away”, and taking some time to realise what was happening:

- Employers putting practical supports in place at a higher rate than Universities or Schools,
- Family members being forced to provide practical help where police did not,
- Reports happening only when necessity has forced them,
- Fear of being disbelieved leading to non-reporting,
- Mixed experience with police, depending on the individual Officer,
- Police “hands tied” with regard to enforcement,
- Repeated breaches of orders such as NMOs

With regards to the way that the stalking had ended, or in many cases, how it continued, the survey found:

- Perpetrators tended to be creative and endlessly persistent in their stalking, and digital stalking allowed them that flexibility,
- The majority of respondents experienced both forms of stalking - this is an indicator again of the persistence of stalkers,
- The access that is afforded to people’s locations via social media platforms and options like geotagging allow perpetrators to blur the line between real life and digital stalking, using their digital stalking to plan their in-person stalking,
- Image Based Sexual Abuse (IBSA) also illustrates this blurring; having or gaining access to intimate images of the victim makes them

vulnerable to very real-life consequences through deliberate sharing designed to control and humiliate the victim which are in perpetuity,

- Perpetrators are acutely aware of how lacking legislation is in this area and use this to control their victims and increase their sense of vulnerability.

With regards to the proposed solutions - short-term and long term - to tackle the issue of stalking behaviours and to help victims and survivors, the respondents to the survey suggested:

- Being taken seriously by the police,
- Aftercare and information from the police,
- Knowing the law would be sufficient to stop the experience,
- Better mediation/counselling services when families break down,
- Education / training / awareness to prevent this from happening,
- Tackling entitlement and refusal to accept rejection or the end of a relationship by the perpetrator,
- Many believe education is central in dismantling this entitlement,
- More robust police responses and training so that they know how to do this,
- More robust court actions and Orders that are powerful enough to deter first-time offences and re-offences,
- Mental health support for perpetrators and victims,
- Practical information e.g. on registering to vote without making your address public,
- Better information for employers, security staff, organisations, the general public, etc. about how they can protect others from stalking or intervene.

An additional, Northern Ireland specific consideration that must be part of any plan to tackle the scourge of stalking behaviours is ongoing paramilitarism. Twenty-three years after the Good Friday / Belfast Agreement, paramilitary activity still exists. We see the public-facing side of this activity quite often, but much is hidden behind closed doors. In the 2018 report *Intimate Partner Violence in Conflict and Post-Conflict Societies*, referring to 2016 research, Professor Monica McWilliams writes<sup>418</sup>:

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<sup>418</sup>Jessica Leigh Doyle et. al. PSRP (2019), 'Intimate Partner Violence in Conflict and Post-Conflict Societies', <https://bit.ly/3h0q4lO>



“The continuation of paramilitary control on women experiencing IPV remains a concern although it is two decades since the cessation of formal paramilitary hostilities. In the 2016 study, 11 of 53 participants (21%) raised the impact of paramilitarism on their lives when asked about the impact and legacy of the conflict in Northern Ireland, making it a relevant issue. The impact of paramilitarism was evident in two main respects: on the one hand, affiliation to paramilitary groups provided a source of power to perpetrators of IPV; while, on the other hand, the armed groups represented an alternative and more rapid response to IPV for victims.”

She notes also that coercive control was maintained within the home by claims by the perpetrator that they were connected with paramilitary groups and that “many participants who raised this issue claiming these connections had been fabricated with the specific intent of controlling and threatening them. Most participants, however, had only discovered the fabrication after exiting the relationship, showing that these threats had the same impact as if they were real. The fact that perpetrators of IPV use their affiliation with armed groups to threaten and abuse their partners points towards the different sources of power that may be open to perpetrators of IPV in conflict and post-conflict contexts.”

There is little reason to believe that this is not still an ongoing reality, particularly as many paramilitary groups seem to be increasing their activity and recruitment in light of heightened tensions. In addition, paramilitary involvement by the perpetrator - or the suggestion thereof - may make reporting to the PSNI difficult or impossible. It may also mean that surveillance of victims can continue even if a perpetrator is imprisoned, as their affiliations may mean that the victim will still be monitored and controlled.

Indeed, many women’s centers across NI deal with the fall out of this, by providing care packs to women they know who are trapped or stalked by violent men who also happen to be ‘well-connected’, but they must do so quietly to avoid raising suspicions and inviting repercussions.

There is an urgent need to address ongoing paramilitarism in Northern Ireland for a number of reasons. There has always been a strong correlation with paramilitarism and coercive and controlling family violence, and their effect on public safety is demonstrably corrosive. This is a part of their influence that needs particular attention.

For all of these reasons, our recommendations focused on the specific text of the proposed Protection from Stalking legislation, but also on ways that stalking could be prevented. In regard to education and prevention, we note that there is nothing in the Bill covering these issues, without which the response will be incomplete.

Any serious attempt to deal with stalking must take preventative measures into account, and we note that there is nothing in the Bill about preventative measures. As outlined under section 3 above, stalking is a gendered crime with roots in misogyny, entitlement and deeply flawed and dangerous notions of love and romance. These attitudes must be subject to serious and urgent interventions when they present themselves, but we have a duty to include these issues in the education that our young people receive in schools in Relationships and Sexuality Education. It must be standardised, mandatory and seek to model healthy relationships and attitudes towards people of all genders.

In addition, we need a fully funded public awareness campaign that will inform the public about what stalking is. The fact that victims/survivors often do not report until the 100th incident is a damning indictment of how our society as a whole minimises and misunderstands this issue. The Stormont Executive has both a moral and legal duty to meet this educational need for our young people, as per the Executive Formation etc. NI Act 2019 which enshrined into law the obligation to fulfill the 2018 CEDAW recommendation for age-appropriate, comprehensive and scientifically accurate education on sexual and reproductive health and rights, which would include sessions on consent, IBSA, stalking and harassment.<sup>419</sup>

The need for a new, comprehensive RSE curriculum is also highlighted in the Gillen Report<sup>420</sup>, and we have underlined elsewhere in this document how important it is with regards to tackling sexual violence. Crucial to this is modelling healthy relationships in young people's education, enabling them to understand and recognise abusive behaviour, to understand consent and, in the case of stalking behaviours, to disrupt the attitudes of entitlement that were identified as central to the phenomenon. This applies to behaviour that was intended as a "grand, romantic gesture" or as an attempt at ongoing control after a relationship had ended.

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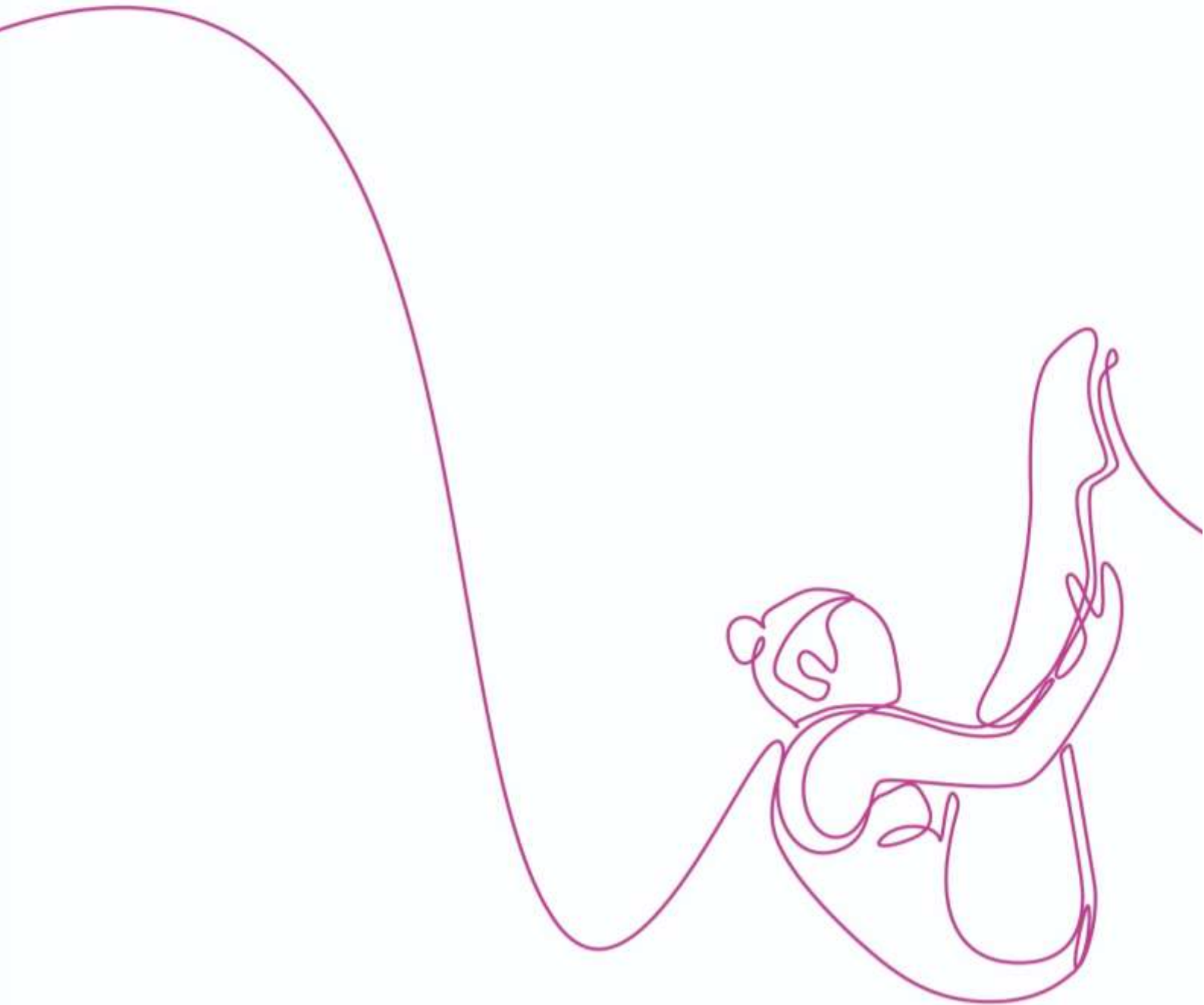
<sup>419</sup> Northern Ireland Executive Formation Act (2019): <https://bit.ly/3j7MSJe>

<sup>420</sup> Gillen Review Report Recommendations (2019): <https://bit.ly/3gWmSON>

Therefore, in addition to the specific responses that the WPG has sent to the Justice Committee in regards to the provisions in the Bill, we further urge the following:

#### Recommendations:

- The immediate introduction of a comprehensive, mandatory and inclusive curriculum on relationships and sexuality education (RSE),
- A public awareness campaign that outlines the nature of stalking and its impacts, as well as the details of the new law,
- Education and training for police, social services and others who may have to provide services to victims / survivors of stalking.



#### 4.1.5 Consent to Harm for Sexual Gratification ('Rough Sex Defence')

In December 2020 - January 2021, the Justice Department consulted on provisions to ban the use of the so-called "rough sex defence". The WPG took the view that this consultation presented an opportunity to examine an alternative approach to that taken in England and Wales, one that will help victims and their families more than the formalisation in legislation of the existing *R v Brown* case law. There is no way to prevent defendants claiming that death occurred by accident, which is the essence of the so-called "rough sex defence". The approach taken in England & Wales was attempting to address this, but the defence amounts to a lack of mens rea for murder and therefore cannot be banned as such. In practice, this usually means that the charge becomes one of manslaughter rather than murder, and this is why these cases tend to result in unsatisfactory outcomes, and leaves families feeling like justice has not been delivered.<sup>421</sup>

To truly bring justice for these crimes we need a new offence that would capture these reckless and negligent forms of sexual manslaughter and allow for appropriate sentencing in accordance with the culpability of the defendant. We have argued for this and outlined a suggested shape for the kind of offence that we have in mind as below, once the *R v Brown* ruling is formalised in law. We also take the view that education is central to addressing this issue in a way that might prevent further cases and indeed cases of sexual violence more broadly.

We believe that the best course of action would be the drafting of a new, bespoke law designed with this issue in mind which would best deal with the concerns raised around the so-called "rough sex defence". Since the legal system cannot prevent defendants claiming that death was the accidental outcome of consensual activity, sexual or otherwise, this new law would provide for these cases. In these cases this argument can be addressed with a new charge – that the sexual activity was reckless or negligent to such a degree that a reasonable person must know that serious injury or death would be the likely outcome, akin to how the offence of causing death by dangerous driving charge creates a specific category of culpable manslaughter for cases where death or serious injury should have been foreseen as a possible outcome of the driver's conduct.

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<sup>421</sup> WPG (January 2021), Response to DOJ Public Consultation on 'Consent to Harm for Sexual Gratification: Not a Defence', <https://bit.ly/3d9Onmq>

We propose that this law should be a new category of sexual offence, based partially on the work of Dr Alison Cronin, Dr Jamie Fletcher and Dr Samuel Walker at Bournemouth University, whose work has informed our argument here. In the article *Homicide and Violence in Sexual Activity, Moving from Defence to Offence* they provide a persuasive argument that the legislation that would formalise the findings of *R v Brown* (1994) cannot actually prevent people from claiming that death caused during sexual activity was accidental, whatever its cause, resulting in the outcome that most of these cases are prosecuted as manslaughter or the defendant pleads guilty to the lesser charge of manslaughter.

This cannot be mitigated against by formalising *R v Brown*, as per the approach in England and Wales; “in order to avoid a major legal pitfall, campaigners need to articulate the problem and their aim more clearly, engage with the current law and adopt the legal terminology that will effectively make their point. It is suggested that this could amount to a momentous change in criminal law that would see justice for victims who die as the result of violent sexual attacks. In order to achieve this, campaigners must move on from their discussion of defendants using a defence, which is not in law technically correct, and towards reform of the offence that the defendant has committed.”<sup>422</sup>

Accordingly, we are specifically advocating the enactment of a sexual homicide offence, as an addition to the provisions of the Sexual Offences (NI) Order, that encompasses the existing law on manslaughter in the forms of unlawful and dangerous act, gross negligence, and reckless manslaughter with the additional element of sexual activity.

The importance of categorising this as a sexual offence is as follows:

1. It accords with the principle of “fair labelling” and would allow for the development of fair and proportionate sentencing guidelines for this category of homicide.
2. Categorisation as a sexual offence has the procedural advantage that evidence of the victim’s past sexual history could be restricted by an extension of the Youth Justice and Criminal Evidence Act 1999 ss. 41 and 42 provisions. This would address widespread criticism that the current procedural approach in homicide cases contains no bar to the inclusion of the victim’s past sexual history.
3. Framing the offence in terms of a sexual nature is preferable to the contextualisation as domestic abuse that has occurred in England

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<sup>422</sup> STARS (2019), ‘Homicide and Violence in Sexual Activity, moving from defence to offence’, <https://bit.ly/3xNfBaA>

and Wales. This approach would recognise that sexual relations also occur outside “domestic” relationships and that joint consensual engagement in a dangerous activity does not necessarily amount to “domestic abuse” – to suggest that it would be a denial of the autonomy of both parties and R v Wilson has shown a reluctance within the legal system to intrude on the domestic relationship from a paternalistic standpoint.

### Recommendations:

- Formalisation of R v Brown (understood to be forthcoming as part of the Justice Bill)
- Introduction and enactment of a sexual homicide offence, as an addition to the provisions of the Sexual Offences (NI) Order, that encompasses the existing law on manslaughter in the forms of unlawful and dangerous act, gross negligence, and reckless manslaughter with the additional element of sexual activity.
- RSE reform in schools and a specific public awareness campaign addressing the issues that arise with regards to “rough sex”, consensual or otherwise.
- Separately, the introduction of legislation on non-fatal strangulation.

#### 4.1.6 Honour-Based Abuse

*Please Note: This section is informed by the research of Coumilah Manjoo on Honour-Based Abuse in Northern Ireland compared to the rest of the United Kingdom. This research relates to how Inter-Faith, Inter-Racial and Cross-Cultural Marriages can provide additional challenges, including disapproval from families and communities, associations of shame, and the potential for honour-based abuse or violence (HBA/HBV). HBA/HBV is not an attribute to any specific culture, faith or religion.<sup>423</sup>*

Honour-based abuse (HBA) is a prevalent issue that is often misunderstood in Northern Ireland. While gender-based violence is usually described as violence that is directed at a woman because she is a woman or violence that affects women disproportionately<sup>424</sup>, HBA is often described as the violence predominantly inflicted on women who are thought to have

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<sup>423</sup> See More: Manjoo, C. (2018) “Shame” and “Honour”: Comparison of the Prevalence of “Honour”-Based Abuse/Violence in Northern Ireland and the Rest of the United Kingdom’, Queen’s University Belfast.

<sup>424</sup> The Committee on the elimination of discrimination against women, 'General Recommendations Adopted by the Committee on the Elimination of Discrimination against Women' (OHCHR 1992) <https://bit.ly/3d6U8SO>

brought shame and dishonour to their family through actual or perceived immoral behaviour<sup>425</sup>.

In the UK, there is no specific offence of “honour-based crime”. Instead, HBA is used as an umbrella term to cover various offences covered by existing legislation (although most of this legislation does not apply to Northern Ireland)<sup>426</sup>. The Crown Prosecution Services describe HBA as relating to a collection of practices which are used to control behaviour within families or other social groups to protect perceived cultural and religious beliefs and/or honour<sup>427</sup>. Such behaviour can occur when perpetrators perceive that a relative has shamed the family and/or community by breaking their honour code.

The Honour Ambassadors against Shame Practices (HASP) define HBA and honour-based violence as:

“A collection of practices which are used to control behaviour and exert power within families to protect perceived cultural and religious beliefs and/or honour. Such violence can occur when perpetrators consider that an individual, usually a woman, has shamed the family and/or community by breaking their honour code. The individual is being punished for actually or allegedly undermining what the family or community believes to be the correct code of behaviour.

Honour based violence is a fundamental abuse of Human Rights. There is no honour in the carrying out or commissioning of murder, kidnap and the many other acts, behaviour and conduct which make up violence in the name of honour.”<sup>428</sup>

HBA can take place in many forms such as (but not limited to): threatening behaviour, assault, rape, kidnap, abduction, forced abortion, forced marriage, threats to kill and false imprisonment. Worryingly, the UK is considered one of the worst areas within Europe with almost 3000 ‘honour’ attacks per year and 12 ‘honour’ killings per year<sup>429</sup>.

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<sup>425</sup> HASP – Honour Ambassadors against Shame Practices, 'Honour Related Violence in the United Kingdom' (HASP – Honour Ambassadors against Shame Practices 2017) 2-90.

<sup>426</sup> Crown Prosecution Service, 'Honour Based Violence and Forced Marriage', <https://bit.ly/3d6tYik>

<sup>427</sup> Ibid, n362.

<sup>428</sup> HASP Scope - <https://bit.ly/3d50pgQ>

<sup>429</sup> European Parliament, 'Briefing European Parliamentary Research Service' (European Parliament 2015) 4.



Within the UK, the most common motivations behind these 'honour' killings have related to dressing or behaving in a 'western style', maintaining a close relationship with somebody that the victim's family do not approve of, refusing a marriage proposal brought by the family or extended family, seeking divorce or being a member of the LGBTQ+ community.

What is of further concern is how HBA can manifest itself through domestic abuse and how this violence and abuse is perpetrated within the family through links to concepts such as 'shame' and honour'<sup>430</sup>. In the UK, the working definition of 'honour' crimes relates to a form of domestic abuse governed by the code of 'honour'. It is crucial that attempts to understand the concepts of 'honour' based violence are considered in their connection to gender-based violence and misogyny. In examining the interconnected relationship between HBA and gender-based violence, it is also crucial that there is not an inappropriate focus on the alleged cultural aspects of such violence, which treats the phenomenon as a species separate from wider domestic violence<sup>431</sup>.

In particular, it is important that the interconnected relationship of HBA and domestic violence is understood, as specific distinctions between the two can lead to increased racial tension, greater marginalisation of specific communities and create harmful perceptions of cultural-essentialism<sup>432</sup>. This lack of understanding on the interconnected nature, or in the inappropriate focus on the alleged cultural aspects of HBA can create further barriers for victims seeking support or attempting to flee such abuse.

The Justice Inspectorate review of the response from police to HBA, forced marriage and female genital mutilation found that Northern Ireland had the lowest record of victims making contact with the Forced Marriage Unit (FMU) in 2015<sup>433</sup>. The lack of reporting does not mean that HBA is not prevalent within Northern Ireland, as we have highlighted throughout this plan that data recording and disaggregated data from bodies in Northern Ireland are wholly inadequate.

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<sup>430</sup> Nootash Keyhani, 'Honour Crimes As Gender-Based Violence In The UK: A Critical Assessment' (2013) 2 Journal of Law and Jurisprudence 255-277.

<sup>431</sup> Wendy Aujla and Aisha Gill, 'Conceptualizing 'Honour' Killings In Canada: An Extreme Form Of Domestic Violence?' (2014) 9 International Journal of Criminal Justice Sciences.153-166.

<sup>432</sup> Mohammad Mazher Idriss, 'Not Domestic Violence or Cultural Tradition: Is Honour-Based Violence Distinct From Domestic Violence?' (2017) 39 Journal of Social Welfare and Family Law 3-21.

<sup>433</sup> Metropolitan Police, 'Honour Based Abuse, Forced Marriage And Female Genital Mutilation: A Policing Strategy For England, Wales And Northern Ireland- Eradicating Honour Based Abuse, Force Marriage And Female Genital Mutilation Together' (National Police Chiefs' Council 2015) 16

Rather, the factors leading to low levels of reporting of HBA in Northern Ireland should be examined in relation to barriers victims and survivors face in reporting, lack of understanding of this form of abuse from responders, inadequate data collection and how this form of abuse could be examined in relation to conflict.

The National Police Chiefs' Council (NPCC) Honour Based Abuse Strategy is a policing strategy for England, Wales and Northern Ireland aimed at eradicating HBA, forced marriage and female genital mutilation. However, awareness for HBA is low in Northern Ireland compared to the rest of the UK and it could be argued that it was deprioritised due to ongoing issues relating to the aftermath of the conflict. However, rather than dismissing HBA as an issue that isn't as prevalent in Northern Ireland, an understanding of the unique manifestations of HBA within Northern Ireland must be developed, particularly in how cultural and religious beliefs and the prevalence of paramilitaries can also contribute to HBA.

A 2016 report on 'Intimate Partner Violence in Conflict and Post Conflict Societies'<sup>434</sup> in collaboration with Women's Aid highlights several examples of domestic violence and abuse being perpetuated due to links with paramilitarism and their values, community attitudes and traditional religious belief. The lack of understanding or discussion of the 'honour' element of this form of domestic violence will enable this form of abuse to continue as root causes and societal attitudes are not addressed. Further, failing to recognise the 'honour' element of abuse can further prevent victims from speaking up about the abuse they have endured<sup>435</sup>.

Further, it is crucial that HBA is not just associated with Asian communities or certain religious communities, as evidence is growing of the impact of HBA on Traveller women, too<sup>436</sup>. In order to better address HBA in Northern Ireland, we recommend the following:

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<sup>434</sup> Jessica Leigh Doyle and Monica McWilliams, 'Intimate Partner Violence In Conflict And Post-Conflict Societies' (Political Settlements Research Programme (PSRP) 2018) 1-120.

<sup>435</sup> See more in relation to a case involving an elderly woman who spent her life in a mother and baby institution and the impact this had on her long-term: Patsy McGarry, 'Magdalene Laundries: 'I Often Wondered Why Were They So Cruel'' Irish Times (2018) <https://bit.ly/3d7phom>

<sup>436</sup> Aisha Gill, 'Honour'-Based Violence Runs Deep and Wide based Violence Runs Deep And Wide' The Guardian (2012) <https://bit.ly/3xQuCZh>

## Recommendations:

- Ensure the voices of the most vulnerable and marginalised individuals in society are heard through:
  - Requiring more robust data collection from agencies dealing with abuse,
  - Allocate funding to facilitate training and development to ensure there is a culturally competent understanding of HBA and how to address these harmful practices through co-design with experts in this area,
  - Develop specialist support for victims and survivors of HBA,
  - Ensure women with NRPF and/or insecure immigration status are supported to approach support providers,
  - Work with community leaders and the voluntary and community sector to raise public awareness on the issue and challenge dominant societal attitudes towards women,
- Develop a range of measures to ensure those working in relation to HBA and the broader justice system is equipped with cultural knowledge, awareness and sensitivity,
- Develop more robust recording measures with disaggregated data relating to HBA and implement measures to address under-reporting of HBA in Northern Ireland,
- Recognition that HBA is not attributed to specific cultures, faiths or religions, and has an intersectional impact on victims.
- Ensure funding is attributed to specialist organisations working on both HBA and Domestic Abuse to ensure support organisations can avail of specialist training,
- Update legislation and policy within Northern Ireland to ensure children or adults at risk of HBA are given a safeguarding response to ensure the HBA has been recognised for what it is,
- Develop a strategy for early intervention and consistent intervention/aftercare with those at risk and ensure any upcoming VAWG strategy includes HBA.
- Increase awareness of various forms of HBA across the justice system in Northern Ireland, including Spiritual Abuse and Coercive Control<sup>437</sup> through work with community groups supporting survivors of HBA.

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<sup>437</sup> For more information on spiritual abuse, see: University of Chester, (2021), 'Spiritual Abuse: Coercive Control in Religion', <https://bit.ly/3gZTfM1>; Church Times (2018), 'Understanding Spiritual Times' <https://bit.ly/3zVbv26>; Faith and Violence Against Women and Girls Coalition, (2021), 'Keeping the Faith: What Survivors From Faith Communities Want Us To Know', <https://bit.ly/3zL8uRP>

## 4.2 Hate Crimes and Online Abuse

“The fear I experience as a woman on Belfast streets is acute, particularly on dark nights. During the knife attacks on women in late 2020, I had to be accompanied by a male friend at all times when walking around Belfast in order to feel safe.”

“When I was on my student placement at university, I was sexually harassed by a colleague 13 years older than me. It got to a point where I was receiving multiple emails and texts and messages on all social media platforms, all inappropriate. I reported it to HR and their investigation blamed me and said I could move desks if I didn’t want to sit near him but I had to still work in the same team. Despite me saying I was afraid for my safety and he knew my address. I quit the job. I almost dropped out of university.”

“There is constant harassment while you walk around Belfast, doing it in broad daylight with others watching, it’s disgusting.”

“Yes, I experienced regular domestic abuse in my previous marriage, including violence and coercive control. Many people are not aware of that and frankly would be surprised were they made aware of it. Stereotyping those who experience domestic violence is unhelpful in that it’s misleading. There are many women (and I am sure men) who have had lived experience but have never discussed or shared it even after leaving a relationship.”

“I’ve had strange men online access my personal contact details and send me threatening and abusive emails/DMs/text messages. I posted a few items to sell on Gumtree and received awful sexual harassment by phone and text. The PSNI said I shouldn’t have posted my number online. I received so much abuse on Twitter from men that I’ve made my account private.”



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“I have had misogynistic abuse. After speaking outside against the misogyny of PSNI on Twitter I got about 100 abusive messages some threatening me with rape and death. This made me feel very unsafe and drastically impacted my mental health where I felt depressed and anxious.”

“[online abuse] About my physical appearance and death threats. I didn't go outside for months after.”

“I have been trolled online which has had a huge impact on my mental health. I need to have a social media presence due to my job role but some see that as a license to attack me online for what I have/haven't done. It can be relentless and very hard to switch off from. It affects my mood and that of my family. It has also led me to increase my alcohol consumption as a way to take my mind of it which isn't healthy.”

“t I have had people tell me to die for my pro-choice and leftist stances and make threatening comments in reference to my sexual orientation.”

“[I was] sent messages saying I should die/kill myself because I'm not straight or cisgender, saying I should be raped to make me "realize I'm actually straight", being told I'm disgusted and an embarrassment to my family.”

- Testimonies from WPG Primary Research

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Hate crime in Northern Ireland should be considered within the context of paramilitary community control (see section on paramilitarism).

Hate crime is an intersectional issue. Because gender is not a protected characteristic under current hate crime legislation, women who are targeted for a hate crime ostensibly on the basis of race, disability, sexual orientation, or community background would be categorised by PSNI as following into one of those categories. The factors which make someone a target of a hate crime or hate incident may be related to multiple aspects of a person's identity. Is an ethnic minority woman wearing a headscarf harassed on the street being targeted for her religion, her race, or her gender? These aspects of our identity cannot be so neatly separated from each other.

#### 4.2.1 Misogynistic Hate Crimes

The WPG, alongside many of our colleagues in the women's sector and LGBTQI+ sector, have long campaigned for misogyny to be recognised as a category (i.e. motivation) of hate crime in Northern Ireland.

A chilling and very public illustration of the urgency of this move presented itself in October 2020, when five women were attacked by a man with his fists and a knife in Belfast city centre and around the University area. None of the injuries were life-threatening, but the impacts go far beyond the impact on physical health. These attacks fracture their sense of security on the streets, as well as the security of their families, friends and the community as a whole. Women must be able to move through life safely, and the city should be safe for everyone.

In the immediate aftermath, and before any arrests were made, the PSNI advised people to be careful and not to walk alone. We know that some of those attacked were with others at the time of the assault and therefore this advice is of limited help, and of course it is not always possible for women to be accompanied at all times. Ultimately, and more importantly, the focus in cases like this should and must be on the behaviour of the assailant and not on what women can do to be safe (advice which leads to victim blaming).

These kinds of attacks are examples of gender-based violence. This type of violence takes many forms, but its root is always in antagonism towards women, or misogyny. Misogyny is so normalised in our society that people often deny its existence or seek to minimise it, insisting that women are making a fuss about nothing. The truth is that gender-based violence and

misogyny ruins lives. We must not shy away from thinking about it, discussing it and tackling it in every way we can.

We welcome the motion that was adopted unanimously on 23rd March 2021 on developing a Violence against Women and Girls Strategy for Northern Ireland, recognising crime motivated by misogyny as hate crime and developing standardised, mandatory RSE in schools<sup>438</sup>. However, work must be undertaken by the NI executive to action this motion and implement the adequate Hate Crime legislation that recognised misogyny motivated crime as hate crime.

We are also concerned by the growing prevalence of racist hate crimes in Northern Ireland, particularly the abhorrent racist hate crime attack on the Belfast Multicultural Association in January 2021.<sup>439</sup> We would again like to call for all recommendations from the Hate Crime Review to be implemented and highlight again our own recommendations in relation to intersectionality. The Women's Policy Group submitted a detailed Hate Crime Legislation Review consultation response in 2020 which you can read [here](#).

### Summary of WPG Recommendations made in 2020 in relation to Hate Crime:

- Introduce of an adequate working definition of hate crime,
- Create a consolidated hate crime legislation model for Northern Ireland,
- Replacing the enhanced sentencing model with the statutory aggravation model,
- Apply the statutory aggravation model to all protected characteristics,
- Introduce specific guidelines and extensive programmes of training and education on any new model of hate crime legislation; including what the protected characteristics are and the consequences of committing a hate crime,
- Recognising gender as a protected characteristic through specifically treating misogyny as a standalone hate crime,
- Recognise transgender identity a protected characteristic,
- Recognise intersex identity as a protected characteristic,

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<sup>438</sup> Northern Ireland Assembly (2021), AIMS Portal, Motion on Creating a Violence Against Women and Girls Strategy for Northern Ireland: <https://bit.ly/3gWJM8u>

<sup>439</sup> Irish News (January 2021), 'PSNI treating fire at Belfast Multicultural Centre as Hate Crime', <https://bit.ly/2UqTWGB>



- Create a legal framework that recognises the importance of intersectionality to adequately reflect the experiences and identities of victims and motivations of perpetrators,
- Require the court to state if offences are aggravated, reflect this on court records and outline the difference the aggravation had on sentencing,
- Record aggravated offences on criminal justice records,
- Create a statutory legal definition of “hostility”,
- Add equivalent provisions to Sections 4, 4A and 5 of the Public Order Act 1986 to the Public Order (Northern Ireland) Order 1987,
- Remove “dwelling” defences,
- Include all protected groups under the stirring up provisions of the Public Order (NI) Order 1987,
- Recognise the severe harm caused by online hate speech against women,
- Update and amend existing legislation dealing with public order, malicious communications and harassment to reflect the changing nature of communications due to social media,
- Ensure online harm is fully covered within hate crime legislation,
- Strengthen law relating to public authorities tackling hate expressions in public spaces,
- Implement victim-led restorative justice programmes in collaboration with community-based organisations,
- Commission extensive research specific to Northern Ireland to tackle the under-reporting of hate crime and mistrust from minorities in reporting services,
- Adequately fund and expand the Hate Crime Advocacy Scheme,
- Restrict the press reporting of hate crime victims where appropriate,
- Create measures for legislative consolidations and scrutiny.

#### Additional Recommendation:

- We again urge that misogyny motivated crime be recognised as a category of hate crime and that this phenomenon, the conditions in which it thrives, and a serious attempt to tackle it be incorporated into any VAWG strategy,

## 4.2.2 Online Abuse against Women

There have been 1,220 reports of online violence towards women in Northern Ireland since 2015 (the total could be even higher than the figures suggest as not all crimes specify the gender of the victim). In 2017-18 the PSNI saw the highest annual figure ever recorded with 433 women feeling so threatened that they reported the online abuse to the police – 30 of these involved death threats with another 394-constituting harassment<sup>440</sup>.

The issue of online abuse against women is extremely concerning. It has prompted the creator of the internet, Sir Tim Berners-Lee, to say that “the web is not working for women and girls.<sup>441</sup>” Berners-Lee stated that while the world has made important progress on gender equality he is “seriously concerned that online harms facing women and girls – especially those of colour, from LGBTQ+ communities and other marginalised groups – threaten that progress.” Berners-Lee said that “for many who are online, the web is simply not safe enough” and that online abuse:

“Forces women out of jobs and causes girls to skip school, it damages relationships and leads to tremendous distress. Relentless harassment silences women and deprives the world of their opinions and ideas, with female journalists and politicians pushed off social media and bullied out of office.”

In 2018 Amnesty International published research on ‘Toxic Twitter’<sup>442</sup> which included interviews with journalists, activists and politicians from the UK (including NI) and USA exposing how Twitter is failing to respect women’s rights and warned the social media company that it must take concrete steps to improve how it identifies, addresses and prevents violence and abuse against women on the platform.

The women's testimony details the shocking nature of violence and abuse they are receiving on Twitter, including death threats, rape threats and racist, transphobic and homophobic abuse. Public figures, MPs and journalists are often particular targets, but people who aren’t in the public eye are also experiencing abuse, especially if they speak out about issues like sexism and use campaign hashtags. Several recommendations were made and can be viewed [here](#).

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<sup>440</sup> ITV News (2018), ‘Reports of Online Violence Towards Women in NI’, (available online): <https://bit.ly/3j8BnBA>

<sup>441</sup> Why the web needs to work for women and girls, Sir Tim Berners-Lee, March 2020, <https://bit.ly/2SRAuTi>

<sup>442</sup> Amnesty International, (2018), ‘Toxic Twitter: A Toxic Place for Women’: <https://bit.ly/3zOQS7v>

In the independent review of hate crime in Northern Ireland, Judge Marrinan acknowledged the issue of hateful abuse online as part of this Review citing the abuse that many women politicians both in Westminster and locally in the Northern Ireland Assembly have to endure often on a daily basis.

This is a significant issue as it has led to the resignation of a number of women MPs in recent years with obvious impacts for gender equality and ensuring that the voices of women are at the table. Heidi Allen stood down because of the “nastiness and intimidation” she faced as a politician. Luciana Berger said the abuse she faced made her “physically ill” so much so that she had to work with the police and security for her personal safety. She described the abuse as “personal and sometimes very extreme in its nature. Sometimes it's pornographic, sometimes violent, often very misogynistic.”

Online abuse of some of Northern Ireland's female politicians has prompted calls to establish a cross-party working group on misogyny. Cara Hunter, SDLP MLA and Deputy Mayor of Derry has been subjected to near-constant “sexual and violent messages and threatening voicemails.” DUP MLA Carla Lockhart said that online abuse was something she had become accustomed to. She explained “any time there's a picture of me on Twitter, no matter what it's connected with, I will have someone picking on my appearance.”

There is a real need for action to prevent these online behaviours. It is important to have the best people involved in the Government representing their communities. It is not possible to achieve this if women feel excluded from these positions due to this type of misogyny and online hate. Women make up half the population and their rights and interests cannot be adequately protected unless women are involved in positions of power and in Government. Misogynistic behaviour of this kind limits women's representation and visibility not just in politics but in other spheres and it is therefore vital that this is tackled.

Online abuse against women and girls has specific implications, and often has a specific ferocity and disproportionate volume, for women of colour, LGBTQ+ women, and disabled women. In a wider UK context, the MP who received the most online abuse during the 2017 election was Diane Abbott<sup>443</sup>, the first black woman to be elected MP. Further, online abuse against trans women and girls has skyrocketed in the past number of years, fuelled by animosity in the media, lack of political support, and lack of accountability for multinational social media companies.

The Independent Hate Crime Legislation Review provides an important opportunity for action to be taken on this issue. We have made several recommendations in the WPG consultation response which can be read [here](#). The Protection from Stalking Bill also provides an important opportunity to address online harassment. We have made several recommendations in the WPG Evidence Submission to the Justice Committee which can be read [here](#).



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<sup>443</sup> Amnesty Insights (2017), [‘Unsocial Media: Tracking Twitter Abuse against Women MPs’](#)

## 4.3 Education and Training

NOTE: We received an extremely high number of testimonies relating to RSE which will also be included here.

“No support given to principals of schools from any statutory body. It has been a very lonely year.”

“I think there is lack of sex education in schools and this creates a range of problems. There is limited knowledge and understanding of what consent means and boys grow up thinking it's ok to disrespect women - leading to other forms of abuse. More broadly, jokes about rape and a lack of societal understanding / perceptions create problems and victims may not want to speak out due to these attitudes. Stronger policies are needed to ensure victims are protected and are supported in sharing their experiences.”


“Lack of education, morals and responsibility placed wrongfully on women and young girls. Stereotyping how we should dress and be seen.”

“Staggering lack of understanding surrounding consent among both men and women, particularly in student cohorts.”

“Lack of sex education in schools meaning children are learning through porn. Furthermore, religion still having an impact on people's lives and believing sex before marriage is not allowed etc which leads to lack of understanding. Personally, been subject to comments, looks and assault.”

“There is no education on what a healthy relationship looks like, people don't get RSE. If you read the comments on any article on a rape trial there will be comments that the woman is lying, if a man has killed his partner there will be a list of his accolades in the coverage, frequently there are comments about high profile women's appearance both insulting and objectifying.”






“I first experienced sexual harassment when I was 13 in my school uniform waiting for the bus home. I’ve experienced men’s violence in the form of attempted rape and rape in my own home or a partner’s home, assault and harassment in bars/clubs, sexualised comments and harassment while in work. I’ve lost count of the number of bars I avoid because bouncers won’t believe my or other women’s experiences. I would never report a single incident, because the justice system/PSNI isn’t built to support victims of male violence. I’ve had relationships with women too, but have never once had a woman violate me or do anything without my consent.”

“One specific experience when I was at school but only recognised it for what it was in the last few years. Cornered by an older boy, held against wall, hand up my skirt trying to get in my knickers. Then the inappropriate everyday touching.”

“We had a scaremongering teacher that told us if we had sex before marriage we would get an STD and deserve it. I was petrified to access health clinics for years.”

“My RSE in school was wholly inadequate and perpetuates rape myths, was anti-choice and delivered by a Christian organisation who promoted abstinence. There was no discussion of consent, healthy relationships and boundaries, how to access contraception, power dynamics, pleasure and sexuality. I had already had consensual sex by the time we had RSE and I was out as bisexual, so after the lessons I felt dirty and ashamed. Nothing in those lessons prepared me or supported me to have healthy sexual relationships. It was a brainwashing session to satisfy the school governors!”

“I am so disappointed that I did not receive RSE - this should be taught every year from first to final year. We need to support our young people and to help them understand the importance of RSE - what is right and wrong. The current provision / policy for RSE is failing our young people, especially those who have missed out on so much school over the past year. I worry that other subjects (e.g., maths/English) will take priority, when I believe that RSE is just as important.”



“I feel that we can pass all the domestic abuse laws, amend how the courts treat rape victims, that we like. But if we don't tackle the reason for the behaviours, toxic patriarchal views of men/women/ relationships, we are just using a toothpick to chip away at an iceberg.”

“My son had a brief RSE session in the Catholic school he attends and there was no mention of LGBTQ+ issues and the focus was very much on boy-girl relationships and did not provide sex education. I'm hoping that as it was a Primary School session these issues will be addressed in post-primary.”

“Comprehensive & standardised RSE should be introduced immediately and parents should not have the option to object”

“Never had any sex ed past the basic biology of the sperm and the egg, nothing covering different STDs ext. My only conversations at school on abortion where in GCSE RE as part of the debates of catholic teaching. The only lesson we were due to have was cancelled as one of the students was ill and threw up at the start of class so we never had the lesson.”

“Sex Ed and religion should be entirely separate. My sex education was primarily "if you have sex, you'll get an STD or get pregnant", rather than framing sex as an enjoyable experience between consenting adults. Education was also primarily on hetero relationships.”

“We were allowed to have a talk from a group advocating celibacy despite being a liberal integrated school that supported LBGT students. It made very little sense. Additionally, in our class RSE did not cover anything helpful about relationships or having emotionally healthy sexual relationships - it was all about STDs, etc, and the teacher was as embarrassed as the students!”

“RSE should be mandatory, delivered in all schools and faith or other schools should not be exempted or allowed to teach this according to their own perceptions. Experts in this should set the curriculum for all schools.”

“When we were in upper 6th, our school brought us to a “conference” at queens run by a pro-life group. It was entirely inappropriate and they offered no other RSE”



“As a teacher I feel it is not taken seriously enough. Too many people in N.I are afraid to tackle these subject and worry about parents reaction”

“As I went to a Catholic Grammar school, so the mean form of sex education taught was no sex, consent was briefly touched on, girls weren’t taught how and that’s it’s okay to say no. Even in biology class, instead of teaching us properly about contraception or abortion, they pushed the rhythm method which they said wouldn’t work until you are older and probably married anyway.”

“It’s unacceptable that young people are still kept in the dark and it is worse when there is a creationist/religious side to the teaching of it.”

“It’s not enough this needs to be increased, my sex education was, we were shown a mars bar and told it’s just like your virginity once its gone it gone!”

“I have a teenage daughter and I believe that there is not enough knowledge to both male and female on the impact of domestic abuse, or the signs as such of it, bar the obvious of physical abuse, I believe that if I had been educated on this, and or aware of the signs or gateways of support agencies or any other form of guidance and help, perhaps I may have seen it sooner and left.”

“It is not fit for purpose, even for straight people. I went to a grammar school and it was not adequate education on this topic”

“an absolute lack of any provision of RSE - we were told we were family makers and we needed to ensure our husbands were happy and our children clean and well behaved”

“I went to a catholic grammar school and we were told nothing, I have only recently learnt how my periods actually worked. We were told that we are always fertile and to never have sex.”

“It was as if queer people didn’t exist. I’m trying to learn on my own now at 23 as I’ve put off sexual experiences for the most part and now feel very scared about my lack of knowledge.”

“With children knowing about sex earlier we need to talk to them earlier. Good relationships skills need to be taught and its ok to say no and that no means no pressure.”

- Testimonies from WPG Primary Research

### 4.3.1 Equality Proofing Education Post-COVID-19

The COVID-19 pandemic has had far reaching impacts on all aspects of NI society, not least education, with most pupils withdrawn from school for months at a time during the periods of strict lockdown. Although almost all pupils have now returned to a school setting in NI, it is important that the impact of the pandemic on their education and mental and physical wellbeing is adequately addressed through future education policy.

The diverse needs of pupils must be taken into consideration; it is crucial that those who were already disadvantaged before the onset of the pandemic do not simply continue to become more disadvantaged. Children with Special Educational Needs (SEN) will have experienced even more barriers to remote learning during lockdown than others. Whilst every child will have responded differently - some may have preferred home learning; others will have found it very difficult - the potential impact of the pandemic on the mental health and wellbeing of children is hugely concerning and must be addressed as a major priority within schools. Some children may require specific support from their schools after lockdown. It is also important that the needs of staff are taken into account, with mitigating measures put in place to better promote equality where staff are differentially adversely impacted by changes in policy as a result of COVID-19.

Although it was inevitable that the pandemic would have an impact on how policies were developed by the Department of Education (DE), a worrying pattern emerged last year of the department failing to adequately consult with stakeholders on major decisions. Likewise, there was often a lack of visible equality screening of new policies.<sup>444</sup> Going forwards, as NI returns to something resembling normality, it is vital that departmental decisions subjected to the proper assessment processes to ensure they promote equality of opportunity under Section 75. It is imperative that the DE complies with its own equality scheme, including through direct consultation with affected groups, and conducts proper assessment of policies via screening and/or EQIA. Additionally, teachers must be properly informed, in advance, of changes in policy; they are expected to provide certainty for their pupils, but it is difficult for them to do so if they themselves are facing uncertainty.

Ideally, the return to school will not have to be halted again. However, it is important that contingency planning is undertaken to prepare for future

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<sup>444</sup> See the Equality Coalition's briefing paper, '[Equality proofing the return to school](#)', for specific examples of the rushing through of policies.

closures. Even if there are no further surges of the virus, there is a strong likelihood that individual schools will have to close due to local outbreaks.

### Recommendations:

- Each time a new policy is developed by the Department of Education, it must, as a matter of course, undergo a) Equality screening / Equality Impact Assessment (EQIA); b) Rural Needs Impact Assessment; c) Consultation with relevant stakeholders. Whenever appropriate, the policy should be altered as a result of the above processes to ensure equality of opportunity.
- No child should be left behind as a result of the pandemic. It is likely there will be an increased demand on services supporting pupils with SEN and their teachers. These services should receive any additional resources they require. Likewise, schools must be provided with additional funding to combat any 'attainment gap' among pupils as a result of the pandemic.
- Schools should be supported by the department to take a whole-school, trauma informed approach to the return to school that incorporates a range of methods, such as changes to the formal curriculum, pastoral care, and counselling provision (including tailored support for LGBTQ+ pupils). The classroom must be made a safe space for all pupils. Additional funding should be provided as needed.
- Comprehensive guidance is needed to help teachers and pupils adjust to the 'new normal' within schools. The last guidance on the return to school (which is publicly available) was issued almost a year ago (June 2020)<sup>445</sup>. It is very surprising that this has not been since updated to incorporate lessons learned during the prior return to school and best practice examples, both from within NI and elsewhere.
- Universal free school meals should be provided to all children as a measure to combat poverty, improve educational outcomes, and improve public health.
- It is imperative that contingency planning is undertaken in case further school closures are required, incorporating joined-up working with other departments and resulting in published, publicly available guidance.

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<sup>445</sup> Northern Ireland Reopening School Guidance - New School Day - 19 June 2020. Available [here](#).

### 4.3.2 Equality and Diversity Education

It is evident from the shocking statistics that vulnerable groups in our society have been disproportionately impacted by COVID-19. This is true both within Northern Ireland and the rest of the UK. People living in low-income areas, those with disabilities, older people, and people from minority ethnic backgrounds are all at increased risk of suffering serious illness and death as a result of COVID-19. The pandemic has harshly exposed pre-existing structural divisions and shown the consequences of failing to create a truly equal society. Depending on what happens next, including future government policy, we may be at risk of inequalities deepening even further. As life begins to return to relative normality and children return to school, it is more important than ever before that they receive adequate teaching on equality and diversity.

At present, rather than these themes being integrated across the curriculum, equality and diversity tend only to be taught within particular areas of learning (at primary level) and subjects (at secondary level). Primary school pupils are taught about equality and diversity as one element of Personal Development and Mutual Understanding (PDMU), but how much time is spent on this will vary. Within secondary schools, it can be even more difficult for teachers to find space to look at these themes because of the focus on academic attainment, though subjects such as Religious Education, History, and English Literature are a more common home for teaching on equality and diversity than Mathematics and Science. Furthermore, teaching on diversity can sometimes become narrowly focused on the traditional sectarian divisions within NI, ignoring other complexities and obscuring the wider picture.

This has specific implications for Migrant and Black and Minority Ethnic people in school, where racist bullying may not be handled effectively due to lack of training. It also has implications for LGBTQ+ pupils, who are at higher risk of being bullied while also facing institutional barriers to expressing themselves and being who they are safely in an educational environment. Further training and education, for staff and students, would create a safer and more accepting environment for currently marginalised and often disenfranchised pupils. It would also build the foundations for an education system based in safety for all, centred on care, and focused on preparing our children to be tolerant and well-rounded members of society.

Effective teaching of equality and diversity often relies on there being committed teachers within schools who are willing to look for opportunities to explore these themes fully. Sometimes this involves signing up for optional initiatives such as Connecting Classrooms through Global Learning that have a focus on these areas, bringing in appropriate guest speakers and working directly with communities and civil society to improve learning in these areas. Not all schools will believe they have the time and resources to do this, while others will. This leads to a variation in the quality of equality and diversity education across the NI school system, which fails pupils.

Currently, schools are not subject to the requirements within Section 75 of the Northern Ireland Act, nor the Sex Discrimination (Gender Reassignment) Regulations (Northern Ireland) 1999. There is a significant gap in equality legislation and rights protections across the board in Northern Ireland: nowhere is that more apparent than in our schools.

Current international guidelines for education encourage a focus on diversity and equality. For instance, one of the UN's Sustainable Development Goals (4.7) states:

“By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship and appreciation of cultural diversity and of culture's contribution to sustainable development.”

It is also worth noting that the NI Curriculum used in schools today was first introduced in 2007. So much has changed since then, particularly in the last few months, that an overhaul could be very beneficial to students.

### Recommendations:

- An increased focus on equality and diversity should be introduced into the curriculum when it is next updated.
- Initial teacher training - and subsequent CPD opportunities - should place a greater emphasis on equality and diversity. The teacher competency framework for initial teacher education (ITE) should cover both how to teach about these themes effectively within the classroom and how to meet pupils' diverse social and educational needs. The latter should include consideration of a wide range of

factors that may inhibit children's learning i.e. not just disability, but also covering sexuality or gender identity, etc. Anti-bias training should also be considered.

- Likewise, Principals and senior school managers should, as standard, receive training examining equality and diversity, including the underpinning legislation.
- The Department of Education (DE) should adequately resource the co-development of equality and diversity workshops, for staff and pupils, with community organisations working with BAME, LGBTQ+, disabled, and migrant communities.
- Regular guidance should be issued to schools by the DE on equality and diversity.
- Indicators should be introduced into the inspection process that look specifically at how schools are addressing equality and diversity.
- Furthermore, DE should prioritise measures on equality and diversity explicitly in the processes of school improvement.
- Section 75 requirements and the Sex Discrimination Regulations should be applied to schools, alongside other relevant equality legislation.
- Any relevant recommendations on education from international treaty bodies, such as CEDAW, should be adhered to.

### 4.3.3 Community Based Education and Training

The right to education is an important means to achieve gender equality and in enabling women to achieve their full potential. Women's exclusion from participation may be significantly impacted by educational disadvantage which can profoundly restrict their life prospects and wellbeing. Community-based women's education and training has emerged and evolved in response to this educational disadvantage with the express aim of accommodating unmet learner needs.

Community based education and training is vitally important to women in disadvantaged and rural areas reflecting their individual needs. It is a fundamental building block in supporting women to rebuild their confidence and their capability to enter the workplace and is a means to maintaining overall wellbeing.

This type of education and training is generally delivered based on local community needs and takes account of the complexity of women's lives and the barriers they face such as education, course fees and the academic

environment. This education and training is provided over the course of a lifetime and is adaptable to changing life circumstances.

For some women (including ethnic minorities and lone parents) the prospect of increased economic participation can depend on the availability of appropriate integrated childcare and access to education/training opportunities at community level. A lack of appropriate integrated childcare and community education acts as a fundamental barrier to the engagement of socio-economically disadvantaged women in education and training and in employment. This is the kind of integrated provision that is provided by the Women's Centre Childcare Fund - see section 1.6.1.

Improved employment prospects for mothers through education and training can translate as improved outcomes for children and the reverse is also true restricting well-being for the mother and also the wider family.

Investing in community-based training and education and integrated childcare is an important factor in enabling women in low-income households to access the training and education they need to make the move into work. Investments in this area help to deliver on a number of key priorities including gender equality, employment support, anti-poverty and child poverty work.

#### Recommendation:

- Provide investment for community-based training and education and integrated childcare to enable women in low-income households to access the training and education.

### 4.3.4 Gender Inequality and ApprenticeshipsNI

A significant barrier to women's full participation with the labour market and economic mobility is rooted in the education system. The apprenticeships programme in Northern Ireland is highly unequal – men's representation in ApprenticeshipsNI programme has steadily increased from 59% in 2013/2014 to 70% in 2019/2020, while women's participation has in turn decreased<sup>446</sup>. Women tend to be older than men when entering the ApprenticeshipsNI programme, as men constitute 76% of those aged 16 to 19 in the programme while women only account for 24%. As well, the programme is very segregated, with majority male participants entering traditionally 'male' apprenticeships like building and construction,

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<sup>446</sup> ARK Working Papers (February 2021) ['Case Study: Apprenticeships in Northern Ireland'](#)



engineering, and transport operations and maintenance (99%, 98% and 98% men respectively) and majority female participants entering traditionally 'female' apprenticeships like service enterprises and health and social care (69% and 92% women respectively)<sup>447</sup>.

Not only does the ApprenticeshipsNI programme uphold systemic barriers created by stereotypes and norms, but the public expenditure on the programme disproportionately favours men. Due to the highly segregated nature of the programme, it is clear that there is greater investment in the apprenticeships that are dominated by men and greater investment in apprenticeships for young participants compared to adult participants, the majority of whom are men<sup>448</sup>. According to an ARK working paper, which looked at ApprenticeshipsNI as a gender budgeting case study, the data analysed "suggests a significant 'gendered spend' on apprenticeships, with spend per male apprentice being 53% higher than for female apprenticeships."<sup>449</sup> This disproportionate spend affects participants for the rest of their lives and can inhibit women's economic mobility. The pandemic has shown us how essential sectors like health and social care and service enterprises are to the running of our society – the public expenditure on ApprenticeshipsNI needs to reflect that.

### Recommendations:

- Alter the high-level apprenticeship framework to recognise the contributions of care sector jobs to Northern Ireland's economy.
- Develop short- and long-term SMART targets and performance indicators to tackle occupational gender segregation.
- Consider women-only training programmes for non-traditional sectors, such as construction and engineering, and break down the stereotypes of traditional gender roles at the early-years and school level.

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<sup>447</sup> Ibid.

<sup>448</sup> Ibid.

<sup>449</sup> Ibid.

# Brexit and a Bill of Rights for Northern Ireland



## 5. Brexit, Human Rights and a Bill of Rights for Northern Ireland

### 5.1 Brexit and the Impact on Women: Rights at Risk

“Much of equality legislation originates in EU law (equal pay, maternity rights) & with Brexit they may not be advanced at the same pace as rest of EU.”

“EU regs and directives kept women's rights to a high legal standard. that standard is now no longer guaranteed. Though there has been a promise not to roll back on what we have, I don't trust that this promise will be kept. And we will miss out on future developments.”

“It could lead to our rights diminishing.”

“I fear we may lose what we gained while being in EU.”

“The EU protected a lot of women's rights which I don't believe the assembly will guarantee. EU human rights law was also instrumental in the fight for abortion access here so I'm worried legislation may be threatened post Brexit.”

“Women's rights have been hard fought. They will be lesser than now.”

“The majority of carers in NI are women. As a woman with caring responsibilities I have been fortunate to work for an organisation which provides paid carers leave however very few organisations provide that. Most working carers use Annual Leave, Special Leave, Sick Leave and Unpaid Leave to carry out their caring responsibilities. The EU Directive on Flexible working covered Carers Leave but as yet the UK/NI governments have not committed to delivering this objective here. Unless more support is given to working carers more and more women will have to reduce hours or leave work in order to care. This can have a huge impact on their independent income, personal career development and options for promotion.”

“I fear there will be a row back on hard won equality & human rights.”

“Can't trust the Tory government with human rights never mind women's rights.”

“The Conservative government seems bent on a path to eroding all basic working rights. Women are already disadvantaged with regard to equal pay and discrimination for daring to bear children and will thus be first and hardest hit.”

“Fearful govt will use Brexit to undo the little social protections we have in terms of balancing work and care.”

“I'm concerned that progress made in the EU regarding rights will be stripped in NI.”

“I am worried the UK government is going to gradually unpick all our equality and human rights legislation.”

“Brexit is a mess and I honestly don't know what impact it is going to have”

“I am particularly concerned about the immigration rules and the right to work going forward esp for women who may not have access to applying for themselves relying on males in the family etc.”

“NI needs to be forward looking and provide women/girls all the same rights as in the rest of the UK - NO EXCUSES.”

“Not specifically women's rights, but the rights of all people.”

“Women, especially women of colour and trans women will bear the brunt of social issues impacting after Brexit.”

“I do not trust N.I politicians to support any human rights but as a woman I particularly believe that misogyny in some parties will stop us from moving forward positively and equally.”

“Workers' rights are already being eroded by the furlough scheme and people are unaware of the future impact this will have, and women are often the group most affected by these issues. The government is willing to do what they want to help the wealthy and corporations and walking away of the protection of European laws around maternity is likely to happen.”

“The rights of women were also backed up by the European Union. We have lost a powerful advocate because of Brexit.”

“Our current government are taking our rights away, bringing back zero hrs contracts. our right to protest. and our rights to access abortion rights, I do worry our human rights will be next.”

“A lot of the laws brought in to protect women came from the EU.”

“Most of the initiatives came from EU. Laws and strategies here already stalled for years. Advances from EU likely to be rolled back. Rights on pregnancy and maternity already under threat. Further advances on women's rights from EU will not automatically apply and more likely to be blocked. Many community-based initiatives for women no longer funded!”

“European union is where we get a lot of our rights I don't feel safe our head of state will protect us”

“Our “special status” in the EU should surely leave us in a slightly better position...”

“As ever women will be hit hardest in terms of potential lost jobs, cuts to services and a squeeze on family budgets.”

“Brexit will turn the clock back on any semblance of gender equality. Impact on GDP, public services and workers are key. Women will be hit hardest by job cuts, impact on household budget, food prices, cuts to public services including resulting impact on the NHS. Those affected most will be those disadvantaged most, including women who are already struggling financially and those from minority ethnic backgrounds. Social care, housing and inequality are already at crisis point and will only be exacerbated by Brexit and of course women will be the most disproportionately affected.”

“Most laws/ legislation that protected women seemed to come from EU.”

“Legal changes re freedom of movement, workers' rights could lead to poverty.”

“The EU provided a fail-safe of a minimum standard of rights, we no longer have that. While domestic provision for things like maternity leave may be better than the EU ones, they are also easier to reduce.”

“Worried they may remove maternity pay, risk to NHS and our services and those who are employed.”

- Testimonies from WPG Primary Research



Many areas of women's human rights have yet to be achieved, and Brexit has added a new threat to existing, hard-fought rights women currently have. Northern Ireland faces unique constitutional complexities meaning Brexit presents a unique threat to this region<sup>450</sup>. With women's voices being largely absent from negotiations, at a local, national and EU level, it is necessary to analyse the unique and disproportionate impact Brexit will have on the women of Northern Ireland.

### 5.1.1 European Court of Justice, EU law and the EU Charter

The impact of membership of the European Union on protecting and increasing the human rights and equality of women has been hugely significant in Northern Ireland. A major factor is the role of the European Court of Justice (ECJ). As Michael Ford QC surmised just before the UK referendum on EU membership, "The ECJ has repeatedly acted to correct decisions of the domestic courts which were antithetical to female workers' rights: a history could be written based on the theme of progressive decisions of the ECJ correcting unprogressive tendencies of the domestic courts."<sup>451</sup>

For example, in terms of pregnancy discrimination, when the UK House of Lords referred the Webb case to the ECJ, the ECJ confirmed that pregnancy discrimination was sex discrimination.<sup>452</sup> To formalise this decision, the Pregnant Workers Directive gave specific rights in the event of pregnancy.<sup>453</sup> This process highlights the role the ECJ plays in deepening equality provisions in ways that matter in the lives of women and how EU Directives work to deepen this effect. The issue of pregnancy discrimination is particularly important, because as the Equality Commission for Northern Ireland illustrates in their day to day work<sup>454</sup> and reports,<sup>455</sup> this continues to be an issue that blights the life of pregnant people in Northern Ireland.

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<sup>450</sup> Human Rights Consortium (2018), 'Brexit and Northern Ireland: Rights at Risk Report', (available online):<https://bit.ly/3xFPnXk>, p.32.

<sup>451</sup> Ford, M., 'Workers' rights from Europe: the impact of Brexit', Report for the Trade Union Congress (April 2016), <https://bit.ly/2SSKn34> p.16

<sup>452</sup> Case C-32/93 Webb [1994] ECR I-3567

<sup>453</sup> Fredman, S., 'Discrimination Law' (OUP 2011) p.171

<sup>454</sup> Equality Commission for Northern Ireland, 'Woman wins £28,000 for pregnancy discrimination at Industrial Tribunal', (25 September 2019)<https://bit.ly/3A0T8ZF>

<sup>455</sup> See for example, Equality Commission for Northern Ireland, 'Expecting Equality: A Formal Investigation into the Treatment of Pregnant Workers and mothers in Northern Ireland workplaces', 2016, <https://bit.ly/2T2qeHD>

Protections around equal pay and sex discrimination have been strengthened and simplified through the 2006 directives and particularly, the Gender Recast Directive,<sup>456</sup> which protects against direct or indirect sex discrimination in employment, including pay. This Directive consolidated EU law to ensure rights of women were central to protections of workers.<sup>457</sup> In particular it including the following areas:

- access to employment
- promotion
- vocational training schemes
- working conditions

Another significant area where EU law has protected women's equality, and where potential for real progress still exists is the Charter of Fundamental Rights of the EU. In order to accede to the EU, a State must have signed and ratified the European Convention on Human Rights, and as can be seen by comparing the two, the Charter builds upon the rights contained within the ECHR to offer EU citizens wider protections. In terms of interpretation, the Charter uses the ECHR as a floor, not a ceiling. Indeed Article 52 (3) states,

“In so far as this Charter contains rights which correspond to rights guaranteed by the Convention for the Protection of Human Rights and Fundamental Freedoms, the meaning and scope of those rights shall be the same as those laid down by the said Convention. This provision shall not prevent Union law providing more extensive protection.”

In this vein, commentators have suggested that the ECHR provides a baseline, and the Charter provides more extensive protection.<sup>458</sup> Title III of the Charter is a chapter dedicated to equality, including (unlike the Article 14 of the ECHR) a freestanding right to non-discrimination<sup>459</sup> and a specific article on equality between men and women,<sup>460</sup> which does not prohibit positive action, (a feature of substantive equality which seeks to help to

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<sup>456</sup> Directive 2006/54/EC on the implementation of the principle of equal opportunities and equal treatment of men and women in matters of employment and occupation (recast) (5 July 2006)

<sup>457</sup> Human Rights Consortium, 'Rights at Risk: Brexit, Human Rights and Northern Ireland', January 2018, <https://bit.ly/3xFPnXk>, p. 74

<sup>458</sup> Murray, C., O'Donoghue, A. and Warwick, B., 'Discussion Paper on Brexit' (NIHRC, IHREC, 2018), available <https://bit.ly/2Un5ryO>, p.9

<sup>459</sup> Article 21 'Non-Discrimination'

<sup>460</sup> Article 23 'Equality between women and men'



achieve equality by using a protected characteristic to benefit a disadvantaged group).<sup>461</sup>

Two particularly regrettable outcomes of the Brexit process for women are failure to follow the ECJ and the loss of the Charter. These were drawn as red lines by the UK in its White Paper on the Repeal Bill in March 2017,<sup>462</sup> and in spite of progress made through the NI Protocol, this has not shifted. As examined above, the ECJ has been instrumental in driving forward domestic legislation in the UK to a more substantive application of equality and human rights for women. In addition, the promise of the Charter had not yet fully been explored. The government downplayed the loss of the Charter, asserting that it didn't create any new rights that weren't already available in domestic or international law,<sup>463</sup> but this ignores the dualist nature of the UK, where the rights signed up to, such as through CEDAW, while overseen by a committee of experts, are not directly enforceable in domestic law.

### 5.1.2 Gender Mainstreaming, Data, Pan European Networks and Cross-Border Harmonisation

The EU's current gender equality strategy<sup>464</sup> seeks to, "enhance gender mainstreaming by systematically including a gender perspective in all stages of policy design in all EU policy areas, internal and external."<sup>465</sup> Mainstreaming, notes McCrudden, is a process whereby equality becomes an integral part of all policy making and implementation, rather than something separated into a ghetto.<sup>466</sup>

Gender mainstreaming has been important in increasing and protecting the equality of women in Northern Ireland, particularly in ensuring a gender equality focus for the European Social Fund. Funds such as this, which can provide 'wrap around' services, such as childcare,<sup>467</sup> recognise the indirect inequalities women face that may impede their ability to access skills and training, such as women doing the majority of childcare. By providing childcare, schemes ensure that women can take part. The importance of

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<sup>461</sup> Fredman, S., 'Discrimination Law' (OUP 2011) p.232

<sup>462</sup> Department for Exiting the European Union, 'The Repeal Bill: White Paper', Cm 9446 (March 2017), <https://bit.ly/3d6mETP> particularly para 2.3 on the ECJ and 2.23 on the Charter

<sup>463</sup> Ibid., paras 2.21-2.25

<sup>464</sup> A Union of Equality: Gender Equality Strategy 2020-2025, <https://bit.ly/3xMmSY5>

<sup>465</sup> Ibid.

<sup>466</sup> McCrudden, C., 'Mainstreaming Equality in the Governance of Northern Ireland' (1999) 22 Fordham International Law Journal 1696

<sup>467</sup> Mazey, S., 'The Development Of Eu Equality Policies: Bureaucratic Expansion On Behalf Of Women?', Public Administration, (1995) 73, 4, p.601

these schemes to women, and particularly rural women, in Northern Ireland was explained by grassroots women in a number of reports in the aftermath of the Brexit referendum.<sup>468</sup>

Another key issue that has flowed from gender mainstreaming is gathering gender disaggregated data and benchmarking.<sup>469</sup> Having accurate data is crucial for protecting and increasing the equality of women because it informs policy making and allows impact of government measures to be assessed. It also allows civil society to see where problems are so that they can accurately focus their campaigning and lobbying. Its importance is highlighted by the fact that it is an issue that UN monitoring mechanisms repeatedly raise in their reviews of the UK's compliance with international human rights law.<sup>470</sup> Benchmarking exercises, "reveal the UK to have very high childcare costs, long full-time hours, and wide wage inequalities, providing an important evidence base to counter government claims that the UK's flexible labour market is beneficial for gender equality."<sup>471</sup>

Another important aspect of EU membership in protecting and advancing women's equality in Northern Ireland is through the facilitating and funding of sectoral pan-European networks to work together to push for the advancement of rights and equalities issues.<sup>472</sup> These networks allow women's groups to examine best practice, learn from each other and co-ordinate in order to campaign on issues both at a national and a European level. The Northern Ireland Women's European Platform is the leader of this work in Northern Ireland and their core objective is to, "give women and girls in Northern Ireland a voice at the national and international level,"<sup>473</sup> including through the European Women's Lobby.

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<sup>468</sup> See for example Northern Ireland Rural Women's Network, 'Rural Voices: Action Research and Policy Priorities for Rural Women', (March 2018), <https://bit.ly/2SlDs6O>; Women's Support Network, 'Brexit: Women's Perspectives', (October 2017), <https://bit.ly/35OWtge>; Women's Policy Group Northern Ireland, 'COVID-19 Feminist Recovery Plan', (July 2020), <https://bit.ly/3gOhBcJ>; and GUE/NGL and Sinn Féin, 'Brexit and Women Workshop Defending What We Have: Report', April 2018

<sup>469</sup> Fagan C. and Rubery J., 'Advancing Gender Equality through European Employment Policy: The Impact of the UK's EU Membership and the Risks of Brexit', *Social Policy & Society* (2018) 17:2, p.304-305

<sup>470</sup> See for example Committee on the Elimination of All Forms of Discrimination against Women, 'Concluding observations on the eighth periodic report of the United Kingdom of Great Britain and Northern Ireland', Adopted by the Committee at its seventy-second session (18 February–8 March 2019) at para. 26(d) <https://bit.ly/3wTwvUC>

<sup>471</sup> Fagan C. and Rubery J., 'Advancing Gender Equality through European Employment Policy: The Impact of the UK's EU Membership and the Risks of Brexit', *Social Policy & Society* (2018) 17:2, p.305

<sup>472</sup> Human Rights Consortium, 'Rights at Risk: Brexit, Human Rights and Northern Ireland', January 2018, <https://bit.ly/3xFPnXk>, p. 54

<sup>473</sup> Northern Ireland Women's European Platform's website, available [here](#)

A final aspect to consider is the issue of cross border harmonisation. The geography and the history of the island of Ireland means that people, particularly those living near the border, live their lives on a cross-border basis.<sup>474</sup> For victims of domestic violence, advances by the EU in terms of cross border harmonisation have been crucial. The most obvious example is the European Protection Order, which ensures non-molestation or other protection orders from one EU Member State will continue to protect a victim when they travel to another Member State. Without these measures, Kennedy notes that for women living near the border in Northern Ireland, “a simple matter of crossing the road could render a non-molestation order useless due to the proximity of the border.”<sup>475</sup>

Other measures such as Europol and the European Arrest Warrant have allowed justice to take place across the border, which has particular importance for issues such as domestic violence, where the majority of victims continue to be women. As the Northern Ireland Human Rights Commission noted in October 2019, “EU measures have speeded up and streamlined co-operation; alternatives will result in delay and uncertainty for those accused and for victims and witnesses of crime.”<sup>476</sup>

### 5.1.3 Domestic Provisions, the NI Protocol and the Belfast/Good Friday Agreement

Over the years EU law (including case law) has been brought into domestic legislation in Northern Ireland and has supplemented and enhanced existing protections. For example, the Sex Discrimination Order has been amended multiple times<sup>477</sup> to implement various EU Directives on issues such as defining indirect discrimination,<sup>478</sup> extending sex discrimination to pregnancy and maternity<sup>479</sup> and extending equal treatment to also include goods and services.<sup>480</sup>

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<sup>474</sup> The Centre for Cross Border Studies estimates that around 23,000 cross the Irish border every day for economic purposes (which doesn't include the thousands who cross for non-economic reasons). See Human Rights Consortium, NICVA and Unison, 'Brexit: Charting a way Forward, A Civil Society Dialogue', Conference Report (15 June 2017) p.35

<sup>475</sup> Kennedy, L., 'No Woman's Land: The impact of borders, conflict and Brexit on women affected by Domestic Violence', CCBS Journal (2017), p.106

<sup>476</sup> Northern Ireland Human Rights Commission, 'Brexit and the Implications for Justice Co-operation', Policy Statement, (October 2019), <https://bit.ly/2TYdn9u>

<sup>477</sup> Potter, M., 'Equality and Human Rights Legislation in Northern Ireland: A Review', (August 2011) Research and Information Service Paper, Northern Ireland Assembly, <https://bit.ly/35TrvU9>

<sup>478</sup> EU Directive 2002/73/EC

<sup>479</sup> Ibid.

<sup>480</sup> EU Directive 2004/113/EC

Because the UK constitutional order is based on the concept of Parliamentary Supremacy, ordinarily all of this protection could be undone through an Act of Parliament.<sup>481</sup> However, the Northern Ireland Protocol provides an extra layer of protection for some of these EU measures. Particular reference is made in terms of protection against discrimination and Annex 1 of the Protocol lists the 6 pieces of Union law which will be protected.<sup>482</sup>

While the UK Government has committed to both non-diminution of the rights within these six Directives and to ensure that Northern Ireland will keep pace with any advances to these rights,<sup>483</sup> the content of the annex is still disappointing in terms of the limited amount of EU law that will be protected<sup>484</sup> compared to the various ways that the EU protects and advances women's equality in Northern Ireland. In addition, in the same month that the Dedicated Mechanism began its role of monitoring the Protocol, the Equality Coalition submitted a list of alleged breaches for examination, including in relation to the right of women to full political participation.<sup>485</sup>

Protections for women in Northern Ireland have already started to 'fall behind' those of their counterparts in the EU. The [Work-life Balance Directive](#) 2019, for example, will not be implemented across the UK.<sup>486</sup>

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<sup>481</sup> Murray, C., O'Donoghue, A. and Warwick, B., 'Discussion Paper on Brexit' (NIHRC, IHREC, 2018), <https://bit.ly/2Un5ryQ>, p.16

<sup>482</sup> -Council Directive 2004/113/EC of 13 December 2004 implementing the principle of equal treatment between men and women in the access to and supply of goods and services

-Directive 2006/54/EC of the European Parliament and of the Council of 5 July 2006 on the implementation of the principle of equal opportunities and equal treatment of men and women in matters of employment and occupation

-Council Directive 2000/43/EC of 29 June 2000 implementing the principle of equal treatment between persons irrespective of racial or ethnic origin

-Council Directive 2000/78/EC of 27 November 2000 establishing a general framework for equal treatment in employment and occupation

-Directive 2010/41/EU of the European Parliament and of the Council of 7 July 2010 on the application of the principle of equal treatment between men and women engaged in an activity in a self-employed capacity and repealing Council Directive 86/613/EEC

-Council Directive 79/7/EEC of 19 December 1978 on the progressive implementation of the principle of equal treatment for men and women in matters of social security

<sup>483</sup> ECNI and NIHRC, 'Submission to Northern Ireland Affairs Committee Inquiry on Brexit and the Northern Ireland Protocol,' (December 2020) <https://bit.ly/2SmhnQN>

<sup>484</sup> *ibid*, p. 12

<sup>485</sup> Equality Coalition, 'List of initial breaches of 'Non-Diminution in certain GFA rights due to Brexit' Commitments', (January 2021) <https://bit.ly/3gNOLJK>

<sup>486</sup> Though note the Private Members Bill being brought forward by Martina Anderson MLA with the aim of plugging this gap: <https://www.surveymonkey.co.uk/r/PT6RF65>

This directive introduces a set of legislative actions designed to modernise the existing EU legal and policy frameworks, /with the aims of:

- better supporting a work-life balance for parents and carers,
- encouraging a more equal sharing of parental leave between men and women, and
- addressing women's underrepresentation in the labour market

In addition, in March 2021 the European Commission presented a [proposal](#) on pay transparency that sets out measures, such as:

- pay information for job seekers,
- a right to know the pay levels for workers doing the same work,
- gender pay gap reporting obligations for big companies.

The issue of a disparity of rights is brought into starker relief when one considers the concept of equivalency of rights across the island of Ireland that was included in the peace agreement. The failure of the UK to ensure we keep par in Northern Ireland with human rights and equality developments brought into the south of Ireland through EU membership is a factor which could undermine the principles on which the Belfast/Good Friday Agreement rests.

### Recommendations:

- Any work to build upon protections of the Northern Ireland Protocol must seek to extend the list of protected Union legislation in Annex 1 to ensure important strides for women's equality are not lost, and that equality and human rights protections in Northern Ireland continue apace with the EU,
- Any re-examination/revision of the Northern Ireland Protocol, or negotiations of the future relationship must ensure that women are adequately represented at the negotiating table and that women's voices are articulated throughout,
- Any funds replacing the European Social Fund, and other sources of EU funding, must include provision for wrap around services to ensure that women and carers can take part,
- Continued access to EU networks for civil society groups must be accommodated and encouraged by the government,
- The governments in Northern Ireland and the UK must produce properly disaggregated data, including breakdowns on all Section 75 groups,

- Nothing must be done to endanger cross-border co-operation. In particular the Human Rights Act must in no way be undermined,
- A strong and inclusive Bill of Rights for Northern Ireland, which includes a comprehensive, freestanding right to equality and non-discrimination (following examples in South Africa, Canada and the EU Charter) and which draws upon international human rights and equality obligations, must be enacted without delay,
- A Single Equality Act, which draws together and enhances existing equality laws, in order to compliment and supplement a Bill of Rights must also be enacted,
- The Northern Ireland Assembly, with its control over equality law, must ensure that progress made in the EU on women's equality, is replicated in Northern Ireland,
- Incorporate rights contained within the EU Charter into domestic legislation.



## 5.2 Bill of Rights, Human Rights Act and International Standards

“NI has no Violence Against Women & Girls strategy, No Bill of Rights, No gender based strategy relating to domestic / sexual violence and abuse. Our Assembly want an 'All Population' take on strategies which typically impact on women to a much greater extent.”

“After how many years after the GFA we still do not have a Bill of Rights in NI. Scandalous situation. In previous employment I did work with NIHRC to address this on behalf of organisation. I completed this work as I personally felt a B of R was vital, I was concerned however within the organisation that there was little interest in this area. And given that I was based in an area where paramilitaries run the show I felt this work was vital”

“One person's rights does not affect another's - a Bill of Rights uplifts us all. It is shocking that this issue has been made into a sectarian political football. I feel that PUL women are being sold a pup as much rights disparity is class and poverty related, not community related. And they are being told to oppose a Bill of Rights to protect themselves from Nationalists, when really it's the political class protecting themselves from working class empowerment.”

“We need our own regional bill.”

“Embed women's rights in law and protect us.”

“It's important that every group is protected.”

“As a foreigner, I would want to know and understand more about the thoughts of locals on this before advocating one way or another. I think yes, but I would want to know who and how that was being created and enforced.”

“Rights enshrined in law are better than unwritten good practice especially if our Executive has anything to do with it....”

“Legal protections for human rights I think is important for society to move on from the troubles.”

“Rights unique to NI would allow us to tailor rights specifically to communities here.”





“It would help and protect more vulnerable people.”

“People need better protection against financial and social discrimination and abuse.”

“Need to have rights set out so that everyone knows what they are and can abide by them. Again sanctions imposed if these rights abuses. Not just for one section of community either.”

“Anything to try to allow people more rights is a good idea to at least try”

“I think a bill of rights would protect the people living in Northern Ireland and the country itself.”

“I feel we need to secure our own rights and not have them set by Westminster who do not care what happens here.”

“I think bills of rights should be personalised to the place as London doesn't need as much rights billing on sectarianism as Northern Ireland does. And from talking to girls from England it does seem that the rape culture in Northern Ireland is worse so therefore harsher rights work should be done to acknowledge this”

“Protect LGBTQ+, Black lives, women children, disabled and young people, POC etc.”

“I'm assuming the panel to choose the rights would do it publicly and hope that it would do it without shoving religious beliefs in our faces.”

“I believe that women need protected and our government is ran by mostly men who have no idea what women need”

“Can't build an inclusive fair and peaceful society without it. Equality and human rights should not be tempered or blocked by party political dogma. Should instead be the framework in which they are required to operate. Social and economic rights critical to lift us out of poverty. It was promised in the GFA.”

“Any clear outlining of rights of individual should be welcomed.”

“Needed to ensure socio and economic rights.”

“It could be an opportunity to be enshrine and protect minorities and progress social issues... It must also not be targeted by abuse of the petition of concern.”





“We should be able to have our own rights in relation to what matters to us and our culture.”

“Being raised a Presbyterian I am aware that it was Presbyterians who campaigned for a Bill of Rights within the US constitution. Unfortunately, this history has been erased and this fact should be highlighted within WC loyalist communities which it is not! I really despaired at times that young people within the PUL community were not aware of the work of the NIHRC or the value of being a member of a trade union!”

“If it were to be proposed we would need to be very careful about it considering the reputation certain political parties have and also from examining how things such as the Constitution have damaged women in the Republic.”

“Obviously now that we've withdrawn from the EU, we no longer have to follow those common laws which governed us. I believe a Bill of Rights could secure all manner of rights in law to protect various freedoms and individuals. That will enshrine rights for people in law and not be 'coloured' by any religious thinking which denies certain rights, as is all too frequent in NI.”

“‘It is a framework that must speak to the core aspects of the conflict and address them convincingly but should be wrapped within the inclusive embrace of a culture of respect for human rights that protects everyone. The NIHRC’s advice from 2008 went a long way towards doing precisely that. We could usefully return to it at this time.’ (Dr A Smith, Prof C Harvey 2018) I think this sums it up.”

“Need to have guarantees and assurances, all too absent in the North and must be enshrined in law. Must be afforded human rights protections and a BOR is an essential safeguard for all.”

“N. Ireland politicians are not exactly known for their support and interest in women and as such I have little faith in them looking out for my rights.”

“Not sure if our politicians are the right sort to do this fairly.”

“Everyone deserves to be protected by a Bill of Rights.”

“It would guarantee a minimum standard of rights that could not be changed by a political party.”

- Testimonies from WPG Primary Research



## 5.2.1 Bill of Rights

Provision for a Bill of Rights for Northern Ireland, which was to build upon the rights contained within the European Convention of Human Rights (ECHR) by including supplementary rights influenced by International Standards and our local circumstances, was provided for in the Belfast/Good Friday Agreement<sup>487</sup> and voted for by an overwhelming majority of people in Northern Ireland through referendum. This commitment to establishing a framework of human rights that was to run throughout the Agreement and the government institutions it established was to be an important confidence building measure in a society that had just experienced decades of conflict.

The Northern Ireland Human Rights Commission (NIHRC), created and tasked by this Agreement with providing advice on the content of a Bill of Rights for Northern Ireland, fulfilled that duty in 2008. The NIHRC advice called for the inclusion of additional economic, social and cultural rights such as:

- the right to health (including access to gender-sensitive and appropriate healthcare services and information)
- the right to an adequate standard of living
- the right to work (including fair wages and equal remuneration for work of equal value without distinction of any kind)
- environmental rights
- social security rights
- children's rights (including play and leisure)

It also added to and strengthened many of the civil and political rights contained within the ECHR, for example by suggesting:

- a freestanding right to equality
- the prohibition of discrimination
- the facilitation of the full and equal participation of women in political and public life
- the right of everyone to be free from violence, exploitation and harassment (including domestic violence or harassment, sexual violence of harassment and gender-related violence and harassment).<sup>488</sup>

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<sup>487</sup> See Strand Three, 'Rights, Safeguards and Equality of Opportunity', The Belfast Agreement 1998, <https://bit.ly/3qjhJEv>

<sup>488</sup> The NIHRC Advice can be accessed here: <https://bit.ly/3gRRKAZ>

A Bill of Rights for Northern Ireland based on a model advised by the NIHRC would have provided a practical mechanism for the realisation of many of the rights contained within international treaties of which the UK is a signatory. The advice was based on extensive participatory consultation with thousands of people across NI over the course of 8 years, and therefore represents a clear articulation of public opinion in this regard.

In December 2009, the UK government produced a consultation document, which rejected the majority of the advice provided by the Northern Ireland Human Rights Commission. In their reasoning for failing to include the extensive advice of the NIHRC, the government stated that they did not see these additional rights as falling within the test of being particular to Northern Ireland or of not being the most appropriate method to realise the particular rights. Within the consultation document this view was expressed as follows: “It is the Government’s view that the introduction of such rights in Northern Ireland would either be unworkable in practice, or could give rise to unjustified inequalities across the UK.”<sup>489</sup>

Since the 1998 peace agreement there has been a consistent need for a Bill of Rights for NI, given its potential to build confidence within communities that abuses of the past will not be repeated, and that those abuses which did occur will be rectified. However, given the current time of uncertainty created by the UK exit from the EU, the potential repeal of the Human Rights Act, the impact of years of austerity and those of coronavirus, (each of which impact differently on women than on the rest of society, as already explored in this paper), a Bill of Rights for Northern Ireland is even more valuable as it could provide assurance and stability that whatever the future of Northern Ireland, the rights of all will be protected, respected and fulfilled.

### 5.2.2 The Human Rights Act

The Human Rights Act 1998 (HRA) gave further effect to rights from the European Convention of Human Rights (ECHR) in domestic legislation across the UK and allowed access to UK courts for violations of Convention rights. The development of this legislation was also a key provision of the Belfast/Good Friday Agreement and took on special significance in Northern Ireland where it acted as one of the key safeguards to prevent against inequalities or abuse of human rights in the exercise of power by the new Stormont Government.

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<sup>489</sup> Northern Ireland Office Consultation Paper, ‘A Bill of Rights for Northern Ireland: Next Steps’, November 2009, pp 3.15

The Conservative Government is currently undertaking a review of the Human Rights Act,<sup>490</sup> which, according to the terms of reference will examine the following:

- the relationship between domestic courts and the European Court of Human Rights (ECtHR)
- the impact of the HRA on the relationship between the judiciary, the executive and the legislature

Members of the Women's Policy Group responded to a recent consultation by the review panel to make it clear that nothing should be done to undermine the Human Rights Act or how the rights contained within it are enjoyed.<sup>491</sup> In particular, the way in which the HRA has protected women was highlighted, including by protecting unmarried spouses in relation to receipt of benefits on the death of a partner and also access to abortion.<sup>492</sup>

While the term of reference of the current review are limited, the Women's Policy Group remain concerned about the future of the HRA, particularly given statements in recent years by members of the Conservative Party:

- "If we want to reform human rights laws in this country, it isn't the EU we should leave but the ECHR and the jurisdiction of its Court." Theresa May (then Home Secretary) April 2016,
- "The Government is committed to scrapping the Human Rights Act and introducing a British Bill of Rights." Elizabeth Truss, (then) Lord Chancellor and Secretary of State for Justice, September 2016,
- "We will not repeal or replace the Human Rights Act while the process of Brexit is underway but we will consider our human rights legal framework when the process of leaving the EU concludes." Conservative Party Manifesto 2017,
- "There is a discussion to be had around how essential the Human Rights Act is to protecting rights. But with Brexit, now is not the right time to have that discussion." David Gauke, Lord Chancellor and Secretary of State for Justice, May 2018,
- "We will update the Human Rights Act and administrative law to ensure that there is a proper balance between the rights of individuals, our vital national security and effective government." Conservative Party Manifesto 2019.

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<sup>490</sup> See: <https://bit.ly/3qkl6ty>

<sup>491</sup> See for example the response from the CAJ [here](#) and the response from the Human Rights Consortium [here](#)

<sup>492</sup> [HRC](#) submission

Public support in Northern Ireland for the Human Rights Act remains high. Polling by the Human Rights Consortium in 2017 revealed that over 85% of the population in Northern Ireland feel that the HRA is either good or very good for Northern Ireland and as such any efforts to downgrade the HRA would be clearly counter to the wishes of the wider community here.<sup>493</sup>

While nothing must be done to undermine the HRA, this is not to say that it cannot be improved and expanded. The HRA does not represent the full protection of the ECHR. For example, there is no free-standing right to prohibition of discrimination (this is included in Article 1 of Protocol No. 12 of the ECHR, which the UK has not ratified). In order to protect enjoyment of the full range of ECHR rights, they should be fully incorporated into a Bill of Rights for Northern Ireland.

### 5.2.3 International Standards – Progress in Scotland and Wales

The United Kingdom is a signatory to seven of the nine UN Human Rights Treaties,<sup>494</sup> meaning it has agreed to be bound by them. Because of the dualist system of the UK, these rights are not automatically enforceable once the UK becomes a signatory. However, the two other devolved nations of the United Kingdom, Scotland and Wales, have both made strides to incorporate international standards into domestic decision making and laws. They have used powers within their own devolved competencies in order to give further effect to the rights in these treaties which represent international obligations to which the UK has agreed to be bound.

The Rights of Children and Young Persons (Wales) Measure 2011 requires that Welsh Ministers, in exercising any of their functions, have due regard to Part 1 of the Convention on the Rights of the Child and also select articles from the first and second optional protocols.<sup>495</sup> Similarly, Part 1 of the Children and Young People (Scotland) Act 2014 imposes duties on Scottish Ministers and other public bodies to comply with UNCRC.<sup>496</sup> At the very minimum, the Northern Ireland Assembly could follow similar steps in order

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<sup>493</sup> Attitudes to Human Rights in Northern Ireland: Polling Data <https://bit.ly/3gS2nU4>

<sup>494</sup> [International Convention on the Elimination of All Forms of Racial Discrimination](#) 1965 (ICERD)

[International Covenant on Economic, Social and Cultural Rights 1966](#) (ICESCR)

[International Covenant on Civil and Political Rights 1966](#) (ICCPR)

[Convention on the Elimination of All Forms of Discrimination against Women 1979](#) (CEDAW)

[Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment 1984](#) (CAT)

[Convention on the Rights of the Child 1989](#) (CRC)

[Convention on the Rights of Persons with Disabilities 2006](#) (CRPD)

<sup>495</sup> For more information, see this briefing to the Ad Hoc Committee on a Bill of Rights by Professor Simon Hoffman, <https://bit.ly/2TZRTZP>

<sup>496</sup> For more information, see this briefing to the Ad Hoc Committee on a Bill of Rights by Professor Tobias Lock <https://bit.ly/2TRf5JT>

to give further effect to treaties such as CEDAW, ICESCR, CRC, ICERD, ICCPR, CRPD and CAT. This would be possible within its own devolved competencies.

The UNCRC (Incorporation) (Scotland) Bill<sup>497</sup> was passed unanimously on 16 March 2021. This bill seeks to bring the United Nations Convention on the Rights of the Child ‘fully and directly’ into Scots law. While there is currently a challenge in the Supreme Court around whether some aspects are outwith the Scottish Parliament’s powers,<sup>498</sup> some of its key features are really interesting in terms of what could be achieved in Northern Ireland. The following provisions are included in the bill:

- Public authorities must not act in a way that is incompatible with the UNCRC requirements,
- Courts will have powers to decide if legislation is compatible with the UNCRC requirements,
- Scottish Government can change laws to make sure they are compatible with the UNCRC requirements,
- The Children and Young People’s Commissioner Scotland and Scottish Human Rights Commission will have powers to take legal action to protect children’s rights,
- Scottish Government must publish a Children’s Rights Scheme to show how it is meeting UNCRC requirements and explain their future plans to progress children’s rights,
- Scottish Government must review how the Children’s Rights Scheme is working each year,
- Other authorities listed in the Bill must report every three years on what they are doing to meet the UNCRC requirements.

In addition, in March 2021 the Scottish Equalities Secretary announced plans for a new Human Rights Bill to incorporate four additional United Nations Human Rights treaties into Scots Law. The new Bill, which will be introduced in the next parliamentary session will include specific rights, subject to devolved competence, from:

- the International Covenant on Economic, Social and Cultural Rights
- the Convention on the Elimination of All Forms of Discrimination against Women

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<sup>497</sup> Scottish Parliament - UN Convention on the Rights of the Child: <https://bit.ly/3vNVSGd>

<sup>498</sup> Challenge to Scottish Bill to Enshrine UNCRC in Law at Supreme Court: <https://bit.ly/3wSTgrV>



- the Convention on the Elimination of All Forms of Racial Discrimination
- the Convention on the Rights of Persons with Disabilities

Clearly protection for rights in the other devolved areas, particularly in Scotland, has outpaced Northern Ireland. This does not have to be the case, especially because unlike Scotland and Wales, provision was made for a Bill of Rights for Northern Ireland in the Belfast/Good Friday Agreement, and this Bill of Rights was to be enacted through Westminster legislation. There is no similar limit to the powers of Westminster to legislate as there is for the devolved institutions, therefore complete incorporation of these UN treaties would be possible through a Northern Ireland Bill of Rights.

### Recommendations:

- Call upon the UK government to bring forward a strong and inclusive Bill of Rights for Northern Ireland, which incorporates, but is not limited to, the 2008 advice from the NIHR,
- Complete incorporation of the ECHR into domestic legislation in Northern Ireland – in particular ensuring a freestanding right to prohibition of discrimination,
- Make it clear to the UK Government that any attempts to undermine the Human Rights Act 1998 will be directly opposed to the will of the people of Northern Ireland and would breach the Belfast/Good Friday Agreement,
- Until a Bill of Rights, as provided for in the Belfast/Good Friday Agreement, is provided for in Westminster legislation, follow Scotland's lead of investigating options for incorporating international instruments into domestic legislation, including CEDAW, ICESCR, CRC, ICERD, ICCPR, CRPD and CAT.

## 5.3 New Decade, New Approach and the Ad Hoc Committee on a Bill of Rights

### 5.3.1 Ad Hoc Committee on a Bill of Rights

A series of agreements in Northern Ireland in recent years<sup>499</sup> have made mention of the Bill of Rights without making any actual progress towards delivering a meaningful set of rights.

Indeed, in the New Decade New Approach document, beyond provision for new languages legislation, there is little evidence of positive progress in advancing the legal protection of rights formally. The New Decade New Approach document strays from previous agreements in recent years in that it provides for the (now functioning) Ad Hoc Committee on a Bill of Rights. However, with no agreed process for delivery of a meaningful set of rights outcomes when the Committee concludes its work, concern remains that the Committee could simply become the latest delaying tactic in this long running process. Despite these concerns, the Women's Movement in Northern Ireland has worked hard to cooperate with and assist the Ad Hoc Committee in their task.

From December 2020 – February 2021, the Human Rights Consortium conducted 15 separate workshops with a wide range of groups to encourage and equip them to fill in a consultation document by the Ad Hoc Committee on a Bill of Rights, including a number of joint engagements with members of the Women's Policy Group.<sup>500</sup> During these workshops people's priorities for a Bill of Rights were discussed. Some of the comments made by women during these workshops are included below:

“Covid has shown that more than ever we really need a Bill of Rights. All the countries in the world who are trying to get a grip on fairness in society start off with the basis of a Bill of Rights – it makes it that bit fairer for everyone.”

- (Participant at Consultation Event)

“We have to keep knocking on doors and fighting for our rights. Women bear the brunt of a lot of issues. In families it is women who are fighting for rights.”

- (Participant at Consultation Event)

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<sup>499</sup> New Decade New Approach, A Fresh Start, Stormont House Agreement

<sup>500</sup> An example of a session can be viewed here: <https://bit.ly/3gOiWAh>

“You have these rights in theory, but you can’t go to court for them – like access to health, education, etc.”

- (Participant at Consultation Event)

“We need to get away from the orange and green in a Bill of Rights. We have a mixed society and all needs should be reflected. A Bill of Rights should be for everybody. Everyone is entitled to the same rights as part of our community and adding to our society. We need to tackle this through a Bill of Rights – it has to be for everyone.”

- (Participant at Consultation Event)

“The Bill of Rights has to look after us after Covid. They brought in the £20 increase to Universal Credit as a result of Covid but they are not committing to keep it.”

- (Participant at Consultation Event)

“Our situation in NI is unique because of Brexit. A Bill of Rights is really necessary to support NI. Really important a Bill of Rights is put in place and can actually protect people. Because NI is unique in this situation it is really important.”

- (Participant at Consultation Event)

“The Bill of Rights is a way we can try and do something about poverty issues, the spread of food banks. We can use it to try and ensure fewer people slip through the net and have better lives for themselves, their children and families.”

- (Participant at Consultation Event)

“There are changes with Brexit and a lot of our equality laws came from the EU. I’m worried about equality legislation when we are out of the EU. We need a Bill of Rights to protect these.”

- (Participant at Consultation Event)

“You would hate to think that your daughter would have to go through the same things you did as nothing has changed. We don’t want our children to go through the wrongs we went through.”

- (Participant at Consultation Event)

“We don’t want this to be like many of the agreements over the years – just signed and put on the shelf and not enforceable so that it doesn’t make any difference to people.”

- (Participant at Consultation Event)

“It needs to be actionable, measurable and make a real difference to people’s lives. You can’t live on aspirational visions.”

- (Participant at Consultation Event)

Members of the Women’s Policy Group made submissions to the Ad Hoc Committee’s consultation,<sup>501</sup> provided oral and written evidence<sup>502</sup> and also attended specific engagement events. Due in no small part to these efforts, the Ad Hoc Committee has received a strong evidence base as to why the Bill of Rights must be delivered, the ball is now in their court to reach agreement and present a strong report to press the UK government to legislate for our Bill of Rights.

The clear message from women in Northern Ireland is that now, more than ever we need our Bill of Rights to be delivered. The continued threats to the Human Rights Act, the risks Brexit presents to rights and the impact felt on rights due to the pandemic, mean that a strong and inclusive Bill of Rights must be delivered.

### Recommendations:

- The Ad Hoc Committee must build and evidence cross party and cross community support for the Bill of Rights and call upon the UK government to finally deliver a strong and inclusive Bill of Rights for Northern Ireland which helps to protect the rights of all, including women, and incorporates international human rights standards into domestic law.

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<sup>501</sup> See the Women’s Regional Consortium response [here](#)

<sup>502</sup> Including evidence from the [Equality Coalition](#), the [Human Rights Consortium](#), the [CAJ](#), [NIWEP](#), [ICTU](#), and the [Children’s Law Centre](#)

### 5.3.2 Additional Commitments in New Decade New Approach

While the commitments in New Decade, New Approach (NDNA) relating to a Bill of Rights have been mentioned in the previous section, alongside other commitments mentioned in section 3.3.3, the WPG has several concerns relating to NDNA.

As stated previously, NDNA made no reference at all to women, and little progress has been made on many of the commitments outlined in the 2020 NDNA agreement. At the time of writing, over 500 days have passed since the agreement was signed and we are approaching the end of another Assembly mandate. The commitments from NDNA cannot be deprioritised or abandoned either in the remainder of this Assembly term nor in the next mandate.

This includes work that the women's sector has been heavily involved in, such as the suite of social inclusion strategies, alongside a number of other commitments such as an Executive Childcare Strategy, Climate Change Act, implementation of the Racial Equality Strategy, addressing inadequate access to IVF and other fertility treatments, an Irish Language Act, creating greater transparency within government decision making and more.

Given the unstable political climate in Northern Ireland and the blocking of many human rights and equality issues over decades, the commitments within the NDNA agreement should be embedded into a programme for government as a means to preventing further abuse of the St. Andrew's Veto; particularly in relation to issues affecting women, minority rights and LGBTQ+ people.

The WPG submitted a response to the Draft Budget 2021-2022, subsequent departmental equality screenings and the Draft Outcomes for the Programme for Government which highlights these issues in more detail. This can be accessed [here](#). A summary of this response is available below:

“Whilst we appreciate the merit in incorporating an outcomes-based approach into a Programme for Government, the ongoing consultation on the Programme for Government Outcomes Framework (launched on 25th January 2021) provides no commitment to consult on an actual Programme for Government.

Under the Belfast/Good Friday Agreement (GFA) and its implementation law, the NI Executive is responsible for annually seeking to agree and review a Programme for Government “incorporating an agreed budget linked to policies and

programmes”<sup>503</sup>. Despite being over a year on since the NI Executive was restored in January 2020, and a draft outline PfG was negotiated and included in the New Decade, New Approach (NDNA) agreement, there is still no agreed PfG. The WPG is extremely concerned with this given that there is only one year remaining in the current Assembly term. The draft PfG that was established through NDNA included commitments to tackle disadvantage and drive economic growth “on the basis of objective need” underpinned by “key supporting strategies”<sup>504</sup>.

The WPG notes that progress has been made through expert-led advisory groups and co-design working groups, of which several WPG members have been involved in, to develop the Gender Equality Strategy, Disability Strategy, LGBTQI+ Strategy and Anti-Poverty Strategy.

However, without the specific adoption of these crucial social inclusion strategies within the PfG, the work of these expert-led community groups and development of these strategies are at risk of being blocked by individual Ministers through the ‘St. Andrews veto’. This is particularly concerning given the time-bound implementation of these strategies and the recent use of the St. Andrews Veto to block public health measures in relation to the ongoing pandemic. Therefore, the WPG is concerned that an “outcomes-based” PfG framework creates a risk of crucial social inclusion strategies not being implemented in this Assembly term.

In addition to this, the WPG would also like to raise our concerns about other strategies still not being developed, despite time-bound commitments in NDNA. For instance, there has been no progress made clear to the public on the development of the Racial Equality Strategy, Childcare Strategy or Climate Change Strategy. The launch of a consultation on an Outcomes-Framework for a Programme for Government that is ‘intended only as an aid to the conversation - a starting point for discussion and debate’<sup>505</sup> without the commitment to consult

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<sup>503</sup> See Section 20(3) of the Northern Ireland Act (1998), with reference to paragraph 20 of strand 1 of the GFA which reads: “20. The Executive Committee will seek to agree each year, and review as necessary, a programme incorporating an agreed budget linked to policies and programmes, subject to approval by the Assembly, after scrutiny in Assembly Committees, on a cross-community basis.”

<sup>504</sup> NDNA, Annex D Programme for Government, paragraphs 4.1, 4.6.

<sup>505</sup> PfG Draft Outcomes Framework Consultation Document, (January 2021), p.7.

fully on an actual PfG that incorporates commitments to various social inclusion strategies is concerning to the WPG given the limited time remaining in this Assembly Term. We would welcome clarification from the Executive Office on this issue.<sup>506</sup>

**Recommendation:**

- Urgent action must be taken to implement all commitments outlined in the NDNA agreement, and these should be embedded into the Programme for Government.

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<sup>506</sup> WPG Response to the Draft Budget 2021-2022, Departmental Equality Screenings and Draft Outcomes for the PfG Consultation: <https://bit.ly/3wQNmaT>



# International Best Practice



## 6. International Best Practice

The UK, including Northern Ireland, has obligations in international law to recognise gender-based violence against women as a specific human rights issue. As a State Party to the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the UK is required to take action on gender equality, which the Convention defines as a prerequisite to women and girls enjoying their full human rights.

The overall aim of CEDAW is to strengthen gender equality, and the CEDAW Committee has highlighted the importance of action in Northern Ireland in their Concluding Observations to all recent periodic reports submitted by the UK. The most recent Concluding Observations (2019) emphasise putting protections for women in Northern Ireland on an equal footing with protections elsewhere in the UK.

The UK is also a member of the Council of Europe - it established the integration of gender equality as one of its policy goals. The Council has adopted Standards for Gender Equality, which set out a list of measures to be taken across policy areas, including violence against women. The Standards state that 'Violence against women is one of the most serious violations of human rights and fundamental freedoms of women and an obstacle to the enjoyment of those rights and freedoms.

Furthermore, violence against women is a waste of capacities and resources for economic and social development; it is also one of the means by which women are forced into a subordinate position compared with men and is, therefore, a decisive impediment to the achievement of gender equality'. In 2011, the Council adopted the Istanbul Convention on preventing violence against women and combating domestic violence, which sets out clear standards for states to implement. Compliance with requirements is essential to enable states to ratify the Convention; the UK is yet to ratify. It is vital that concerned action across the UK is taken to ensure the UK is compliant with the Convention and can complete ratification.

### 6.1 International Case Studies

#### 6.1.1 Amnesty International UK - International Outlook

In May 2020, Amnesty International, Women's Link Worldwide and International Planned Parenthood Federation published 'A Guide for Europe: Protecting the Rights of Women and Girls in times of Covid-19 pandemic and its aftermath'.

The guide highlighted that the COVID-19 pandemic — like all crises — has a distinct impact on women and girls that is both immediate and that poses the risk of exacerbating pre-existing gender-based and other intersecting inequalities. This crisis has exposed the structural and systemic discrimination that women and girls have long faced. The women and girls who already experience marginalisation are being differentially and disproportionately affected by the pandemic. Unless their rights are protected, their voices are heard and their needs are met, they will be further deprived of justice.<sup>507</sup>

The United Nations (UN) High Commissioner for Human Rights, the UN Special Rapporteur on violence against women, the Council of Europe, the European Union Agency for Fundamental Rights and other regional and international bodies have issued clear guidelines that States should use to respond to the pandemic in line with their human rights obligations. States need to live up to their obligations to address the gender-based violence and discrimination faced by women and girls, including trans women, and by non-binary, gender non-conforming and intersex persons. Specific measures are required to minimise the short and long term impacts this health and economic crisis may have on them, their families, and their communities. As UN Women has noted, violence against women is “the most widespread human rights violation in the world.”<sup>508</sup>

The guide outlines urgent actions Governments should undertake to protect the rights of women and girls and can be viewed in full [here](#).

## 6.1.2 Northern Ireland Women’s European Platform - International Outlook

Across the world, violence against women and girls has increased during the pandemic to the extent that the UN has called this ‘the shadow pandemic’.<sup>509,510</sup> Current evidence shows that the increase in violence is associated with loss of jobs and income, uncertainty regarding the future and poor support systems, as well as isolation, where victims are trapped with their abuser; lockdowns have directly led to increases in violence. In

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<sup>507</sup> Amnesty International, Women’s Link Worldwide and International Planned Parenthood Federation -. A Guide for Europe: Protecting the rights of women and girls in times of Covid19 pandemic and its aftermath, <https://bit.ly/3wR01KJ>

<sup>508</sup> *ibid.*

<sup>509</sup> UN Women (2020) [Impact of COVID-19 on violence against women and girls: Through the lens of civil society and women's rights organization](#)

<sup>510</sup> UN Secretary General statement 9 April 2020 ["Put women and girls at the centre of efforts to recover from COVID-19"](#)

short, the pandemic does not only have disproportionate impacts on women, but directly increases the risk of violence against women and girls. The UN has called on member states to prioritise women and girls in both the immediate response and recovery.<sup>511</sup><sup>512</sup> This requires a gender lens in all decision making, which also forms part of the Sustainable Development Goals, in particular SDG5 gender equality.<sup>513</sup>

The UN also emphasises the importance of comprehensive social protection systems, with targeted support for those on the lowest incomes and most at risk of marginalisation, ensuring gender equal COVID-19 taskforce and developing gender sensitive budgeting.<sup>514</sup> In short, there is an international mandate and urgent call to put women and girls at the centre of the COVID-19 response, to mitigate disproportionate harms on women and support new policies on gender equality in the post pandemic period.

While the global response to COVID-19 has fallen short of adequately supporting women, girls and minoritised groups, examples of approaches more supportive for women do exist. In Germany, the job support scheme is more generous to people with children, and increases over time, while in Norway, additional payments were made to the lowest paid workers, who are disproportionately female.<sup>515</sup>

A number of countries have also improved access to childcare, including Czech Republic, where parents of children under 13 can take leave to look after children without losing pay.<sup>516</sup> In Luxembourg, parental leave on full pay is made available throughout the school closure period. In Belgium, parents can reduce their working time by 50 per cent on a higher rate of pay than they would usually get on parental leave.<sup>517</sup> Other countries, including Australia and several of the Nordic countries, have ensured childcare remains open throughout lockdowns.<sup>518</sup>

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<sup>511</sup> UN (April 2020) [UN Secretary-General's policy brief: The impact of COVID-19 on women](#)

<sup>512</sup> See eg. Khan, Z & K Gifford (March 2021) [COVID-19 and fiscal policy: Applying gender-responsive budgeting in support and recovery](#). New York: UN Women.

<sup>513</sup> See eg. [UN SDGs website](#)

<sup>514</sup> Freizer, S, G Azcona et al (June 2020) [COVID-19 and women's leadership: From an effective response to building back better](#)

<sup>515</sup> Cook, R (2021) Covid-19 has been a crisis for women – but some governments have recognised this better than others. In Global Institute of Women's Leadership (2021) [Essays on equality](#). London: King's College London.

<sup>516</sup> Eversheds-Sutherland (May 2021) [Coronavirus – a practical guide for employers in the Czech Republic](#)

<sup>517</sup> Cook, R (2021) Covid-19 has been a crisis for women – but some governments have recognised this better than others. In Global Institute of Women's Leadership (2021) [Essays on equality](#). London: King's College London.

<sup>518</sup> UN Women (November 2020) [Whose time to care?](#)

At the EU level, the approach to gender based violence in Ireland has been highlighted among promising practice, alongside Spain, Belgium and Slovenia. Cross sectoral collaboration, additional funding and contingency plans to support helplines operate remotely were among key elements of approaches taken in each of these countries. In Ireland, AirBnB also offered free emergency accommodation, which was identified as a promising initiative. Recognising domestic violence organisations as essential services is also a key measure that can help strengthen service provision beyond the pandemic.<sup>519</sup>

### 6.1.3 A Caring Economy

Care remains the single most important issue to address in order to support women and strengthen gender equality globally, as well as locally. The impacts described throughout this document are repeated in communities and economies across the world, with women shouldering the majority of additional childcare as well as adult care needs. In the US, up to a quarter of women, including women in senior positions, have left the workforce during the pandemic due to caring commitments<sup>520</sup>, while data from UN Women show that the time women spend on childcare has risen, on average, by five hours to over 30 hours per week, compared to just over 20 hours - an increase of three hours - for men<sup>521</sup>.

A caring economy is therefore critical for a gender equal recovery and 'building back better'. This was first emphasised in a Feminist Recovery Plan launched by the Hawaii Commission on the Status of Women<sup>522</sup> as early as April 2020, and has since been highlighted by organisations from the UN<sup>523,524</sup> to the Bill and Melinda Gates Foundation<sup>525</sup>. Ultimately, a caring economy seeks to support everyone, in particular the increasing cohort of people in need of care for a dignified life, but it is closely aligned with women's economic empowerment, which is the foundation for gender equality as women gain the ability to make genuine, independent and

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<sup>519</sup> European Institute on Gender Equality (March 2021). [The Covid-19 pandemic and intimate partner violence against women in the EU](#).

<sup>520</sup> McKinsey & Lean In (May 2021) [Women in the workplace 2020](#)

<sup>521</sup> UN Women (November 2020) [Whose time to care?](#)

<sup>522</sup> Hawaii Commission on the Status of Women (April 2020) [Building Bridges, Not Walking on Backs: Hawai'i State Commission on the Status of Women Department of Human Services State of Hawai'i A Feminist Economic Recovery Plan for COVID-19](#)

<sup>523</sup> UN Economic Commission for Europe (November 2020) [Women's economic empowerment and the care economy in the ECE region: The impact of economic and social policies during the COVID-19 response and recovery](#)

<sup>524</sup> UN Women (June 2020) [COVID-19 and the care economy: Immediate action and structural transformation for a gender-responsive recovery](#)

<sup>525</sup> Bill and Melinda Gates Foundation (March 2021) [Prioritizing gender equality in the wake of COVID-19](#)



informed choices. Addressing unpaid care is a core element of a caring economy, but it goes beyond this, focusing on wellbeing, social and environmental impact and value as core outcomes and indicators alongside, or instead of, market value. This reimagines investment, with a focus on sectors that add value to wellbeing and create sustainable jobs, such as public transport, green infrastructure, education and community development. A caring economy can also be a resilient and green economy, firstly as the demand for care is not directly linked to economic conditions, and secondly, as it emphasises care towards the planet: care is three times less polluting per job created than construction<sup>526</sup>.

The Department of the Economy 'Economic Recovery Action Plan' makes reference to women in STEM subjects and fields, which is welcome, provided that this extends through to school curricula and apprenticeships. However, focused action to support women and girls and address gender based norms is needed, as bias against women as well as sexual harassment remain rife across the field, from academia to technology companies. In the US, women have left the STEM and also medicine workforce in significant numbers during the pandemic, due to caring commitments that employers do not accommodate, and there is also growing evidence that such commitments lead to women being overlooked for promotion<sup>527</sup>.

It is also vital to consider gender in relation to digitisation and automatisisation of work, including development of artificial intelligence (AI) technologies. Current estimates suggest that 60 percent of jobs at risk (in the US) from automation and AI are female dominated, highlighting the importance of reviewing school curricula and public investment in further and higher education to ensure women and girls have access to the fullest range of job opportunities also in the future.<sup>528</sup> Importantly, care work is one of the areas where a human workforce remains essential, and therefore it is critical to both invest in a caring economy and ensure a living, sustainable wage across the care sector.

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<sup>526</sup> Women's Budget Group (September 2020). [CREATING A CARING ECONOMY: A CALL TO ACTION](#)

<sup>527</sup> The Scientist 10 March 2021 '[Pandemic May "Roll Back" Women's Gains in STEM: NASEM Report](#)'

<sup>528</sup> Newsweek 20 November 2018 '[AI and Automation Will Replace Most Human Workers Because They Don't Have to Be Perfect—Just Better Than You](#)'

Globally, there is also increasing recognition that climate justice and gender justice are inextricably linked. COVID-19 recovery offers a crucial opportunity to develop policy and practice that underpins both sustainable and equitable policies. The UN has urged for the Paris Agreement and the Sustainable Development Goals (SDGs) to act as the roadmap to recovery, as the SDGs are agreed as a global compact and encompass social justice and equity as well as environmental goals<sup>529</sup>. A caring economy, education for girls and reproductive rights are at the centre of both gender and climate justice; in addition, there needs to be gender parity in discussions and negotiations at all levels, from COP26 to local level.<sup>530,531</sup>

#### 6.1.4 Gender Parity in Decision Making

As a concluding note, there is one thread cutting across all issues: women's leadership. Much has been made of the relatively strong COVID-19 performance of female led countries including New Zealand, Taiwan and Finland<sup>532</sup>. However, it is vital to note that women's leadership goes beyond individuals, and is about ensuring women are equally represented in policy and decision making at local, regional and national levels and that women's needs are integral to decision making<sup>533</sup>. This is equally critical for all areas of women's lives, from health and wellbeing to climate justice and peace, security and sustainable institutions; current evidence stresses that peace accords are more sustainable when women have an equal role in negotiations<sup>534</sup> as well as subsequent peace building<sup>535</sup>.

Globally, women are represented on only a minority of COVID-19 taskforces, and the UN has called for gender parity in order to strengthen the focus on women's needs in COVID-19 recovery<sup>536</sup>. This needs to go beyond the electoral level, and include an equal and integral role for women in local communities, as well as within public bodies and private companies and

<sup>529</sup> UN (October 2020) [COVID-19, Inequalities and Building Back Better](#)

<sup>530</sup> See eg. Irish Government (2018) [Women as agents of change: towards a climate and gender justice approach](#)

<sup>531</sup> Morrow, K. L. (2020) "Tackling climate change and gender justice – integral; not optional", *Oñati Socio-Legal Series*, 11(1), pp. 207–230. Available at: <https://opo.iisj.net/index.php/osls/article/view/1215> (Accessed: 19 May 2021).

<sup>532</sup> Forbes 8 September 2020 [‘Women Leaders’ Competence On COVID: The Proof](#)

<sup>533</sup> Wenham, C & Herten-Krabb, A (2021) 'It's a distraction to focus on the success of individual women leaders during Covid'. In Global Institute of Women's Leadership (2021) [Essays on equality](#). London: King's College London.

<sup>534</sup> Cabrera-Balleza, M, Fal-Dutra Santos, A et al (2020). [Gender-sensitive provisions in peace agreements and women's political and economic inclusion post-conflict](#). New York: Global Network of Women Peacebuilders and Center for Global Affairs of the School of Professional Studies at New York University

<sup>535</sup> Global Network of Women Peacebuilders (2020) [Building peace from the grassroots: Learning from women peacebuilders to advance the WPS agenda](#)

<sup>536</sup> UN Women press release 22 March 2021 [‘Women's absence from COVID-19 task forces will perpetuate gender divide, says UNDP, UN Women’](#)



trusts. As noted in the Politics, Public Life, Peacebuilding and Decision Making section, some countries including Ireland have successfully introduced gender quotas<sup>537</sup>; other measures that for example the CEDAW Committee is seeking information on in country reports include investing in capacity building for women and girls, tackling gender stereotypes across society and financial measures and supports, including tax deductions, for organisations and initiatives seeking to strengthen gender equality<sup>538</sup>. This involves adequately resourcing women's rights organisations, which play an important role in both supporting women and building capacity for women to engage in policy and decision making.<sup>539</sup>

Women's leadership also includes a gender perspective on policy and decision making, including budget setting; gender budgeting offers a tool that can be used to assess the impact of budgets in detail and ensure targeting for maximum impact across population groups, and has been highlighted as having potential in a briefing by the RalSE service to the Northern Ireland Assembly Ad hoc Committee on a Bill of Rights<sup>540</sup>. For example Austria<sup>541</sup> and Finland<sup>542</sup> are working to integrate gender into budgeting processes. Meanwhile, New Zealand has demonstrated an increasing focus on gender in policy making, as highlighted through initiatives on domestic abuse leave<sup>543</sup>, free period products in schools<sup>544</sup> and paid leave for parents experiencing pregnancy loss and stillbirth<sup>545</sup>. There are numerous models and ample evidence to build on; the critical issue is to ensure women and gender equality are integral to policy and decision making.

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<sup>537</sup> See eg. Economic and Social Research Institute (2020) [Female representation in politics in Ireland](#)

<sup>538</sup> CEDAW Committee (2019). [Guidance note for States parties for the preparation of reports under article 18 of the Convention on the Elimination of All Forms of Discrimination against Women in the context of the Sustainable Development Goals](#)

<sup>539</sup> UN Women (March 2021) [COVID-19 and women's rights organizations: bridging response gaps and demanding a more just future](#)

<sup>540</sup> Regan, E (April 2021). [NI Assembly Research and Information Service Briefing Paper: Gender budgeting in government: a comparative perspective on legal bases.](#)

<sup>541</sup> See eg. United Nations and the Rule of Law website on [Austria: Gender budgeting](#)

<sup>542</sup> Elomäki, A; Haataja, A et al (2018). [Gender equality in the government budget – gender impact assessment of the budget and gender budgeting](#). Helsinki: Prime Minister's Office.

<sup>543</sup> See New Zealand Government website on [Domestic violence leave](#)

<sup>544</sup> See New Zealand Ministry of Education website on [Access to free period products](#)

<sup>545</sup> See Employment New Zealand website on [Bereavement leave to cover miscarriage, stillbirth](#)

# Appendices

## Appendix 1

### Key Economic Indicators – Definitions:

**Employed:** According to the Northern Ireland Statistics and Research Agency (NISRA) and the Labour Force Survey (LFS), those considered LFS employed are ‘people aged 16 or over who did at least one hour of paid work in the reference week (whether as an employee or self-employed); those who had a paid job that they were temporarily away from; those on government-supported training and employee programmes and those doing unpaid family work’<sup>546</sup>. The employment rate is, therefore, calculated by taking the number of employed people aged 16-64 as a proportion of all working age people.

**Unemployed:** LFS unemployment refers to the International Labour Organisation (ILO) definition of unemployed, which includes ‘those without a job who were able to start work in the two weeks following their LFS interview and had either looked for work in the four weeks prior to interview or were waiting to start a job they had already obtained (numbers and rates refer to 16+ population)’<sup>547</sup>. The unemployment rate is, therefore, calculated by taking total number of those aged 16 and over who are unemployed as a proportion of all economically active people aged 16 and over.

**Underemployed:** refers to those who are employees but would like to work more hours either in their current job, a supplementary job, or in a new job.

**Economically Active:** Those who are considered “economically active” encompasses those (16+) who are either in employment or unemployed and looking for work. a part of the labour market.

**Economically Inactive:** Those who are considered “economically inactive” encompasses those who are voluntarily unemployed and not a part of the labour market. This includes all people who are neither in employment nor unemployed on the ILO measure. This group includes those who are looking after a home, long term sick or disabled, students and retired (numbers refer to 16+ population, rates refer to 16-64 years)<sup>548</sup>. The economic inactivity rate is, therefore, calculated by taking the number of economically inactive people aged 16-64 as a proportion of all working age people.

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<sup>546</sup> NISRA Labour Market Survey 2020: Women in Northern Ireland: <https://bit.ly/2UqVHnf> p.6.

<sup>547</sup> Ibid, p.9.

<sup>548</sup> Ibid, p.10.

It is worth noting that for many women, this is not a voluntary choice, as family commitments and caring for dependents is something overwhelmingly undertaken by women. In many cases, the lack of affordable childcare, inadequate levels of social care for dependents, workplace discrimination against mothers and societal norms of women being considered carers lead to women being forced out of the labour market.

**Motherhood gap:** The motherhood pay gap measures the pay gap between mothers and non-mothers, the latter defined in most econometric studies as women without dependent children. It also measures the pay gap between mothers and fathers.

**Furlough Scheme:** A scheme introduced by the UK government during the COVID-19 pandemic. If employees and employers both agree, employers might be able to keep staff on the payroll if they're unable to operate or if they've reduced or no work for you to do because of coronavirus (COVID-19). A proportion of wages are still paid to the employee and taxes are still paid on income.

**Redundancy:** Under the Employment Rights Act 1996, redundancy arises when employees are dismissed because: the employer has ceased, or intends to cease, to carry on the business for the purposes of which the employee was employed or the requirements of the business for employees to carry out work of a particular kind has ceased or diminished or are expected to diminish<sup>549</sup>.

**Claimant Count:** consists of all people claiming Jobseeker's Allowance (JSA) plus those Universal Credit (UC) claimants who were claiming principally for the reason of being unemployed. Some claimants are wholly unemployed and seeking work, while others may be employed but with low earnings that make them eligible for unemployment related benefit support.

**Collective Bargaining:** is the process in which workers, through their trade unions, negotiate with their employers to determine their terms and conditions of employment, including pay, hours of work, holiday leave, sick pay and other benefits.

**Small to Medium Enterprise (SME):** The UK government adheres to the EU definition of an SME, which is: micro-business = less than 10 employees and turnover under €2 million; small business = less than 50 employees and turnover under €10 million; medium-sized business = less than 250 employees and turnover under €50 million.

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<sup>549</sup> Full definition of redundancy can be found here: <https://bit.ly/3qz9KmQ>

## Appendix 2

### Primary Research Methodology

Primary research was conducted by an independent Research Contractor, contracted by the Women's Resource and Development Agency (WRDA). This research included conducting one-to-one interviews and launching a survey that invited anonymous written submissions on the topic of experiences during the pandemic. The goal of this research was to hear directly from women who have been impacted by the issues raised in the Feminist Recovery Plan and to make sure that women's voices were at the heart of the policy recommendations laid out in this re-launched document.

### Interviews

Interviews were conducted with women across Northern Ireland to gather evidence of their experiences, relating to various issues in the Feminist Recovery Plan, during the pandemic. The Research Contractor sought interview participants by contacting women's sector organisations, cultural centres, trade unions, women's centres and individuals who had spoken at past Feminist Recovery Plan Webinars. Siobhán Harding from the Women's Support Network also contacted various women's centres across Northern Ireland seeking participants. The Research Contractor contacted individuals who agreed to take part in interviews via email and text message. Participants were sent an information sheet and consent form which was signed in advance of interviews. In total, 12 interviews took place, including one group interview, with a total of 15 participants.

The interviews took place via several different modes, such as Zoom, phone-call and in-person. These interviews took a semi-structured format and lasted approximately thirty to forty minutes. Based on these interviews, the Research Contractor developed 14 anonymised case studies which were approved by all participants before being included in the WPG Feminist Recovery Plan Supplementary Report: Putting Women's Voices at the Core of Recovery. These case studies highlight the impact of a range of issues on women in Northern Ireland, such as: poverty, childcare, mental health, maternal health, racism, disability, abortion, domestic abuse and hate crime. The Research Contractor would like to sincerely thank the women who took part in these interviews and who openly shared their experiences for the purposes of this research project.

## Survey

The Research Contractor developed a survey in Google Forms which included a mix of qualitative and quantitative questions, inviting written responses as well as multiple choice options. The questions covered a broad range of topics from the WPG Feminist Recovery Plan such as economic justice, health, social justice, culture and Brexit. There were 25 questions in total and 141 responses were received. The survey was open for 25 days between 20<sup>th</sup> May 2021 and 14<sup>th</sup> June 2021. This survey was advertised on social media and was also promoted by women's sector organisations and organisation newsletters. A full list of the survey questions can be found below.

N.B. For some questions, respondents could select multiple option responses. In some cases, this caused overall percentages for some questions to not add up to 100%. Where there were duplicated qualitative responses from the same individual, the duplications were removed.

### Overview of survey questions:

Q.1. Overall, how has the COVID-19 pandemic impacted your life, in terms of your financial, personal, health and social well-being?

Q. 2-4 – Demographics

Q. 5. What is your employment status? Has it been affected as a result of the COVID-19 pandemic? If so, how?

Q. 6. Has your financial situation been affected by the COVID-19 pandemic? If so, how?

Q. 7. Do you have children? If so, have you been able to access childcare during the pandemic?

Q. 8. How have your caring responsibilities been impacted by the pandemic? Have you been able to access Carers' Allowance?

Q. 9. Have you ever had to access food banks? If so, what was this experience like?

Q. 10. Have you ever been a recipient of Universal Credit? If so, what was this experience like?

Q. 11. Do you live rurally? If so, how has this impacted your experiences during the pandemic?

Q. 12. How has your physical and mental health been affected by the COVID-19 pandemic?

Q. 13. Have you been impacted by increased waiting lists for hospital appointments?

Q. 14. Have you accessed or attempted to access abortion services during the pandemic? If so, what was this experience like?

Q. 15. If you belong to an ethnic minority community, what has been your experience in regards to accessing healthcare services?

Q. 16. Have you accessed or attempted to access healthcare services relating to maternity, pregnancy, perinatal mental health or birth-giving during the pandemic? If so, what was this experience like?

Q. 17. If you are a disabled person, have you faced hardship as a result of your disability during the pandemic? If so, in what ways?

Q. 18. If you are a migrant, have you ever been subject to the 'No Recourse to Public Funds' condition? If so, what was this experience like?

Q. 19. Do you believe there is a problem of 'rape culture' in Northern Irish society? What are your reasons for this?

Q. 20. Have you ever experienced domestic abuse, stalking, harassment, hate crime or assault? Could you please tell us about this experience?

Q. 21. Have you ever been targeted by online abuse? If so, in what way and how did this impact your personal wellbeing?

Q. 22. Did you attend school in Northern Ireland and if so, do you feel that you received an adequate Relationships and Sexuality Education (RSE)? Could you please explain your reasons for this?

Q. 23. Are you concerned about the impact of Brexit on women's rights in Northern Ireland? Could you please explain your reasons for this?

Q. 24. Would you support the introduction of a Bill of Rights for Northern Ireland? Could you please explain your reasons for this?

Q. 25. Please detail any other experiences you would like to share from the past year in relation to the pandemic.

A supplementary report on the WPG NI COVID-19 Feminist Recovery Plan: Putting Women's Voices at the Core is also available in addition to this full WPG NI COVID-19 Feminist Recovery Plan.



ENDS

For questions or queries about the WPG NI COVID-19 Feminist Recovery Plan Relaunch – One Year On, or any other WPG FRP documents, please contact Rachel Powell, Women’s Sector Lobbyist, [rachel.powell@wrda.net](mailto:rachel.powell@wrda.net).