



The Scottish Parliament
Pàrlamaid na h-Alba

Siobhian Brown MSP,
Convener, COVID-19 Recovery
Committee

Via email only

Equalities Human Rights and Civil Justice
Committee
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22 March 2022

Dear Convener,

Coronavirus (Recovery and Reform) (Scotland) Bill

The Equalities, Human Rights and Civil Justice Committee welcomes the opportunity to contribute to the Covid-19 Committee's scrutiny of the Coronavirus (Recovery and Reform) (Scotland) Bill.

Further to our letter of 24 February, we write to provide a further update on the short inquiry that our Committee has undertaken in relation to "Women's unfair responsibility for unpaid care and domestic work". We hope the findings from our sessions will be of interest and relevance to your Committee's scrutiny of the Bill.

We have now concluded our evidence taking for the time being. The Committee has agreed to undertake some further work on this inquiry following summer recess. As part of that work, we will explore in more detail the employment and training opportunities available to women with protected characteristics, particularly disabled and ethnic minority women, and how these have been impacted over the last two years as a result of the Covid pandemic.

Our work to date comprised a total of four evidence sessions (7 and 14 December 2021 and 1 and 8 March 2022). The key issues which arose are provided as an Annex to this letter. Links to the Official Reports from each session are also provided should your Members wish to review the evidence in further detail.

Should you have any questions on any of the sessions, please do not hesitate to contact the clerks.

Yours sincerely,

A handwritten signature in blue ink that reads "Joe FitzPatrick". The signature is written in a cursive style with a long horizontal flourish at the end.

Joe FitzPatrick MSP
Convener
Equalities, Human Rights and Civil Justice Committee

Women's Unfair Responsibility for unpaid care and domestic work

1. The Committee agreed to undertake work in this area following evidence it received as part of its pre-budget scrutiny. Members heard that the burden placed on women in relation to unpaid caring duties for elderly parents, children and disabled people and an increase in domestic work during lockdown, and as the country emerges from the pandemic, is likely to have a long-term negative impact on their future rights and economic prospects.
2. On [7 December 2021](#) the Committee held an introductory session on this issue with groups representing women's rights. It took evidence from—
 - Ruth Boyle, Policy and Parliamentary Manager, Close the Gap;
 - Eilidh Dickson, Policy and Parliamentary Manager, Engender;
 - Professor Norin Arshed, Chair in Entrepreneurship and Innovation, School of Business, University of Dundee.
3. The Committee held a second session on [14 December 2021](#) which focused on the financial impact on women in protected groups and the impact on their mental health and wellbeing; to what extent they have suffered disproportionately when compared with women who do not fall into these groups; what support has been available, and what further measures are required as the country emerges from the pandemic. The Committee heard from—
 - Satwat Rehman, Chief Executive Officer, One Parent Families Scotland;
 - Catriona Melville, Policy Engagement and Campaigns Officer, Age Scotland;
 - Margaret Lance, BEMIS and Ethnic Minority Resilience Network;
 - Dr Patrycja Kupjec, Chief Executive Officer, YWCA Scotland;
 - Susie Fitton, Policy Manager, Inclusion.
4. Following these sessions, the Committee agreed to take further evidence on intersectional aspects and hold two further sessions to explore the impact of the pandemic on minority ethnic women and on disabled women.
5. On [1 March 2022](#), it heard from
 - Farah Farzana, Race Equality Mainstreaming Officer, CEMVO Scotland
 - Mariam Ahmed, Chief Executive Officer, Amina- the Muslim Women's Resource Centre;
 - Trishna Singh OBE, Director, Sikh Sanjog;
 - Joy Lewis, Chief Executive Officer, AAI Employability;
 - Sara Medel Jiménez, Member, NASUWT, Equality Advisory Group
6. On [8 March 2022](#), it heard from
 - Jenny Miller, PAMIS, Promoting a more inclusive Scotland;

- Dr Pauline Nolan, Inclusion Scotland
7. Over the course of the sessions, there was agreement among the panels that the pandemic had exacerbated pre-existing inequalities for women and these were more keenly felt by those with additional protected characteristics.
 8. Disabled people including women experienced elevated clinical risk, the worsening of existing poverty and inequalities and barriers in accessing vital services. The lockdowns had an impact on disabled women who were more likely to be socially isolated and digitally excluded.
 9. Minority ethnic women faced increased responsibility for household tasks, childcare and home schooling and faced higher levels of poverty, isolation and were more likely to be digitally excluded. Minority ethnic women were also more likely to be employed within roles and sectors which experience higher Covid-19 exposure and reduced safety measures. Migrants and asylum seekers also experienced barriers in accessing public health messaging, Covid-19 testing and related health services.
 10. Witnesses over the course of the four sessions highlighted a number of key areas:

Access to the labour market

- Younger women worked in sectors which were most affected by the pandemic, for example, in hospitality and retail that were completely shut down. Many were struggling before the pandemic as they were paid less than the living wage, and when they had to stop working, they were less likely to have savings to fall back on.
- Older women who return to work after having children face the 'motherhood penalty'. It was suggested more work could be done on the impact of the pandemic on older women and furlough.
- For young women, there was also an impact on being able to undertake training. Caring responsibilities were cited as a barrier, while no men cited caring responsibilities as a barrier to training.
- In terms of intersectionality, it is difficult to analyse the labour market because there is a lack of intersectional data. There is also a lack of gender disaggregated data. For example, it is not possible to access data on furlough or pay for disabled women or minority ethnic women.
- For minority ethnic women, racism remains a barrier in accessing employment commensurate to skills levels, often this is hidden. There is widespread, institutional racism including in healthcare settings and a need for diversity in leadership positions, flexible training and a workplace that accepts and embraces diversity. Language barriers also still exist.

- Underemployment is also a problem for minority ethnic women. Employability programmes, positive action measures and flexibility from employers that was sensitive to minority ethnic women's culture and their responsibilities would be beneficial. Many minority ethnic women considered they were more likely than their colleagues to be furloughed.
- Public services and public leaders need to be held to account in following through on public sector equality duty and additional resources given to organisations supporting minority ethnic women to access mainstream services. Organisations supporting these women often do not have sustainable funding streams as they do not fall under a statutory umbrella.
- Public services need more training on cultural awareness and implementation of race equality in front line services. Some excellent work has been undertaken but it is not translating into improvements for minority ethnic women.
- For women who are caring for disabled children or young people it is difficult to find employment because of their caring responsibilities. Many would like to work and provide for their families and this would also enable them to be lifted out of poverty, but they do not have the opportunity to do so due to the time they are required to spend providing care.

Increased levels of financial insecurity

- The increased cost of living was a particular concern for women caring for disabled children and young people who have additional costs to factor in such as increased energy costs, taxis, additional equipment and care costs. Benefits need to be uplifted to take account of these extra expenses.
- Rising fuel costs are particularly acute and concerning for those with a child with complex needs. Many families have additional energy costs for example the need to run the washing machine several times a day and may be making choices such as choosing only to heat the bedroom of their disabled child.

Unpaid, informal care and household duties

- During the pandemic, women took on more unpaid work (home-schooling, child care, domestic chores) than men.
- There was a recognition that women have a range of different roles in society, including community work, and that it's important to support that too.
- Evidence suggested that women entrepreneurs still take on the majority of childcare.
- At the first lockdown, there was an assumption that there was someone at home to look after the children. Analysis of time use data shows that women undertook more childcare than their male partners.

- Key workers were able to access childcare, of whom 70-80% were women. However, they could only access this if their partner was also a key worker, and some partners refused to provide childcare.
- Minority ethnic women were more likely to be carrying out the majority of the chores and childcare pre-pandemic and this increased during the pandemic whether or not they were in employment. Women, in general, but particularly minority ethnic women are seen as a “soft touch” or a “soft target” by employers and others to take on additional responsibilities.
- Minority ethnic women also face cultural barriers where family hierarchy is ingrained, and women are brought up to service elders and respect etiquette. Many struggle with belonging to two cultures and with the expectations placed on them.
- Many carers who support disabled young people and adults are women. The caring role is intense, complex, prolonged and demanding. As a result, they suffered a deterioration in their physical and mental wellbeing during the pandemic.
- Women providing a caring role for disabled children may also have other children to care for and are more likely to be lone parents. There is no specialist support available for women caring for children with complex needs which lead to life limiting conditions and this can increase the mental load.
- There is a widespread belief that the family caregiver role is reserved for women while men are not required to make the same commitment.
- There is also an expectation and norm that families, but most often women will provide the carer role for disabled children and young people. We heard “Their right to be a mother is overtaken by the need to be the nurse, physio, teacher, occupational therapist, speech therapist and care assistant leaving no time to be a “mum””.

Impact on mental and physical health

- The pandemic has taken a toll on young women’s mental health. Engender referred to it as a ‘crisis point’.
- Lone parents were ‘trapped’ and found the pandemic particularly hard.
- Impact of isolation, for unpaid carers in particular, is continuing, and has an effect on their mental health.
- In terms of the impact on physical health, menopause is a workplace issue and affects access to the labour market. Long-Covid seems to affect more women than men, and this affects their access to the labour market because some employers have an inadequate response to it. Women are also likely to be in jobs that does not entitle them to statutory sick pay.

- For some minority ethnic women, the additional responsibilities of childcare, home schooling and additional chores had a significant impact. Those who did not have access to Wi-Fi were increasingly isolated during the pandemic.
- Women providing care for disabled children and young adults provided additional care during the pandemic, often this was round the clock care. The impact of providing care restricts their ability to work and leaves many living below the poverty line.
- Many women providing care to disabled or elderly children or relatives have raised levels of anxiety and depression and feel exhausted, abandoned, isolated and invisible.
- Disabled children also saw a deterioration in their mental and physical health during the pandemic due to the lack of supported leisure time or time outdoors.
- The strain on families struggling to care for a disabled child with very little or no respite leads to family breakdown. There needs to be more support put in place to give carers opportunities for a break from their caring role.

Violence against women/domestic abuse

- The restrictions of the pandemic put some women in an economically vulnerable situation in terms of relying on a partner's income. Women found it more difficult to interact with normal support services during this time. While there was core funding for women's support services, eg domestic abuse, there is an issue with security of funding.
- Women's inequality is a cause and a consequence of violence. Public attitudes about the roles men and women should undertake, have not changed that much over the years. There is still an underlying assumption that women will take on the majority of childcare. Women are at risk of entering a vicious circle where they become further detached from the labour market, to take advantage of opportunities and develop their own careers. There is therefore a need to look at policy interventions that will interrupt this cycle.

Lone parents

- Within the UK there are approximately 2.9 million lone parents, around 90% of whom are women.
- A higher proportion of lone parents are disabled or minority ethnic, compared with two parent families.
- Lone parent families have experienced some of the worst socio-economic impacts of the pandemic across society, including high levels of social isolation.

11. Some positive impacts were also presented. For example, the pandemic demonstrated the resilience of women entrepreneurs, provided opportunities in learning new skills and in maximizing digitization. The pandemic highlighted that men can take on more in terms of unpaid, informal care and household duties. The public are also starting to value childcare and social care more.
12. There was a general theme that any policy solutions must be gender sensitive and take account of intersectionality.

For example—

- Gender sensitive employment support. The pandemic has shown that many jobs can be done on a flexible basis, so the Scottish Government could consider how to integrate flexible working into [Fair Work](#) criteria.
- Increased access to flexible childcare, seeing it as part of the infrastructure.
- The [public inquiry into the handling of the Covid-19 pandemic in Scotland](#) should have a gender focus within its remit.
- Any solutions that require a gender sensitive focus will need to be underpinned by gender disaggregated data.
- Disabled people and families with caring responsibilities need to be involved in setting ambitions for the new disability equality plan. It needs to be realistic with achievable ambitions. It should be implemented and co-designed with disabled women.
- An immediate method of easing the strain for disabled people would be to reopen the independent living fund for new applications and to extend what funds can be used for.
- There needs to be empathetic employment which builds in flexibility for those with caring roles. Consideration should also be given to how existing skills that carers have gained could be translated into accredited vocational qualifications.
- There is a need to tackle gender inequality in relation to social care and support and sustained public investment in a modern infrastructure of social care support to protect promote and ensure human rights and to tackle inequalities.
- For minority ethnic women there cannot be a “one size fits all” approach. There needs to be more in-depth knowledge focussing on specific communities and what their particular needs are.

13. On 22 December 2021, the EHRCJ Committee [wrote](#) to the Deputy First Minister and Cabinet Secretary for Covid Recovery, seeking reassurance that the Scottish Government, in any approach to future restrictions, would take into account the

significant impact restrictions had for women and, particularly on those with protected characteristics, and asked that the Scottish Government consider taking a gender-based approach to inform any decision making process.