

United Nations Convention on the Elimination of All Forms of Discrimination against Women

Shadow Report to CEDAW in response to the
United Kingdom Government's 5th Periodic Report

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EXECUTIVE SUMMARY

1. This Shadow Report highlights the multiple discrimination experienced by women in the United Kingdom (UK) and the ways in which gender discrimination intersects with other forms of discrimination. It is principally focused on the equality strands, specifically black and minority ethnic (BME) women, disabled women, lesbian, bisexual and transgender (LBT) women, refugees and asylum seekers as well as younger women, older women, women with learning difficulties and traveller and gypsy women.
2. While women in the UK have seen improvements in the status of women, we agree with the UK Minister for Women, the Rt. Hon Patricia Hewitt, that there is still more to do. We have illustrated some of the areas where further, and urgent, efforts are needed. We have also described some of the Government policies and legislation which are impeding gender equality and which are directly discriminating against women.
3. Poverty affects all facets of women's lives and has a particular relationship to human rights, discrimination, the equalities agenda and the status of women. As such, we have treated poverty as a 'cross-cutting' theme in this Shadow Report and it is reported on under several Articles.
4. One of the key problems highlighted throughout this Shadow Report is the lack of gender disaggregated data and data on women which is further broken down by ethnicity, age, disability, sexual orientation etc. There must be a concerted effort by both Government and non-Governmental organisations (NGOs) to systematically collect, collate and publicise disaggregated information. This is essential to the development of effective and appropriate policy, planning, legislation and strategies and, therefore, must be a priority.
5. Greater support for women's groups is needed. The survival of women's voluntary and community organisations is not an issue solely for the women's NGO sector. Millions of women depend on women's groups, as does the Government, to address the ongoing discrimination against women and gender based violence in this country.

INTRODUCTION

6. This Shadow Report is a collective effort developed from research, information and testimony provided by a number of NGOs who are concerned about discrimination against women (see Appendix I). In June 2004, a consultation meeting was organised for the purpose of disseminating information about the Convention and gathering data for this Shadow Report. The writing of this report was undertaken by a collective of NGOs who volunteered at the consultation.
7. The scope of this Shadow Report is limited and the information is mostly gathered from London based NGOs. It has not been possible to include information about each equality strand under each article. This report is designed to complement the Shadow Reports of the Women's National Commission and WOMANKIND Worldwide et al and as such, we have avoided, as far as possible, duplication of information. As a result, we have not reported on Articles 3, 4, 5 or 14.
8. Enormous thanks to all the women who have contributed information and/or attended the consultation, including the team who have written this report. Our thanks also to the Mayor of London and the Greater London Authority for allowing us to use their meeting rooms for the consultation. Special thanks to the **Webb Memorial Trust** for providing funding towards the consultation costs and the publication of this Shadow Report.

INSTITUTIONS PROMOTING THE ADVANCEMENT OF WOMEN

Women's NGO Sector

9. It is extremely disappointing to see that the Government report makes no reference to the overall contribution of the women's NGO sector in eliminating discrimination against women. Despite the significant contribution made by the women's NGO sector, the lack of investment in it continues to leave women's groups in vulnerable positions.

10. There are many issues facing women's NGOs, all of which are heavily impacting on the sustainability of the women's NGO sector. Funding continues to be the primary issue affecting women's groups, as women are rarely prioritised, funding becomes more competitive and many groups struggle to obtain adequate core-cost funding. Whilst we welcome the mainstreaming of gender, this is increasingly being seen as a 'double-edged sword' for women's groups and many have found themselves competing against large generic organisations (who are able to employ professional fundraisers) who have started delivering services to women. There must be a commitment to organisations run by women, for women. Worryingly, there have been some reports of organisations being coerced or forced into opening up their services to men. A study of women's groups in London showed that 38% of groups had to end or reduce a service, project or position due to a lack of funding. This rose to 46% for BME women's groups.² There have been a number of women's organisations closing due to lack of funding in the last four years. Because funding is short term, some organisations have had to increase their fundraising efforts, often at the expense of service delivery. In a study of BME women's groups, an example was given of an organisation which was forced to close a service in order to create a fundraising position to ensure the organisation's survival.³

11. Recruitment and retention are also issues facing women's NGOs and in one study, 48% of women's groups had to re-advertise a position at least once. Remuneration has been cited as one of the key factors influencing recruitment and retention difficulties. Despite the Disability Discrimination Act coming into force in October 2004, 42% of women's groups studied did not have disability access to their premises.

12. With increasing moves towards e-Government, and the general importance of information and communication technology proficiency, many women's groups will be disadvantaged by their lack of capacity - just under half of women's groups surveyed did not have a website and 43% did not have an organisational email. This affects their ability to effectively advertise their services to service users, funders and potential partners.⁴

13. Whilst some organisations have successfully managed to influence the policy decision making process, most have not, particularly those women's groups working with issues of multiple discrimination. These groups, however, are often in the best position to critique policy. Very few women's groups are engaged in their Local Strategic Partnerships, one of the primary mechanisms where the NGO sector can influence service provision, funding and planning in their local boroughs.

14. It is widely acknowledged that most women's groups lack capacity to effectively engage with other NGOs, funders and Government. Whilst we welcome Government financial initiatives to address the issue of NGO capacity, the terms may be unsuitable for women's groups who are thereby excluded from accessing capacity building funds. For example, the new *futurebuilders* infrastructure investment fund is unsuitable for the majority of women's groups as it requires organisations to have or be preparing to have a contracting relationship with local authorities. The vast majority of women's groups are grant dependent.

Q: How will the Government ensure that women's NGOs are sustainable?

Single Equality Body

15. The Government is proposing to create a single equality body, the Commission for Equality and Human Rights (CEHR), which would replace the existing bodies dealing with race, gender and disability. The new body would address these three equality strands, plus religion, sexuality, age and human rights. We are concerned that the CEHR may effectively decrease the amount of funding and attention given to sex equality issues in comparison with other equality strands, reflecting the current situation in which the Equal Opportunities Commission (EOC) receives less funding than the Commission for Racial Equality (CRE) or the Disability Rights Commission (DRC). The Government has not yet made a commitment to a minimum level of funding for the CEHR and there are concerns that the proposals are a cost-cutting exercise. We support the recommendation by the current Commissions that the CEHR has an annual budget of at least £125m, plus £80m start up costs.

16. We are concerned that the CEHR's Board of Commissioners will not be sufficiently diverse or representative as there has been no commitment as to a minimum number of women on the Board. Neither has a commitment been expressed regarding the establishment of a women's/gender committee to address the complexities of discrimination against women, particularly with regard to the way in which gender intersects with other kinds of discrimination (racism, homophobia, ageism and discrimination against disabled women etc) and human rights abuses.

17. The recent Government consultation on the CEHR proposals took place over the summer school holidays, when it is more difficult for women, in particular, to respond. The summary document and versions of the document accessible to disabled people and those in other languages were not produced until half-way through the 12 week consultation period, giving some women less time to prepare their responses.

18. A Single Equality Act is now needed to ensure that there is equal protection against discrimination across all equality strands and we regret that the Government's support for the CEHR is not matched by support for a Single Equality Act. Such an Act would provide a meaningful way of dealing with some of the inconsistencies inherent in current equality legislation.

Q: How will the Government ensure that sex equality issues receive adequate funding and attention within a single Commission? How will the Government ensure adequate representation of women within the CEHR, particularly as Board members? When will the Government introduce a Single Equality Act?

ARTICLE I: DISCRIMINATION

Convention on the Elimination of All Forms of Discrimination against Women

19. In 2002, the Women's Resource Centre conducted a brief survey amongst women's groups on knowledge of the Convention. Although the survey was not large enough to draw firm conclusions, it did signal a lack of awareness amongst women's groups about the Convention (53% had never heard of the Convention) and how it can be used (73% had never referred to the Convention). This indicates that women's groups need information and training to be able to use the Convention, particularly in light of the pending ratification of the Optional Protocol. Priority must be given to women's groups who work with issues of multiple discrimination such as BME, refugee, disabled and LBT women's NGOs as these organisations are least likely to have access to information. Given the current funding and capacity issues faced by NGOs, there must be support from Government for the NGO sector to participate in and to provide training and education about the Convention.

20. It is disappointing that the Convention is rarely referred to in Government policies, legislation or consultations on issues affecting equalities, discrimination, human rights or women. For example, the Convention was not referred to in the Government's major consultation on domestic violence, *Safety and Justice*. This was strongly noted by many women's organisations. There is no reference to the Convention in the Government's latest consultation on prostitution, *Paying the Price*.

Q: What will the Government do to ensure greater knowledge of and reference to the Convention, both within Government and amongst NGOs?

Optional Protocol

21. We are very pleased that the Government intends to ratify the Optional Protocol. However, given the current lack of knowledge and information about the Convention amongst NGOs, in order to ensure that the Optional Protocol is a useful and accessible tool, greater education about, and training on, the Convention and Optional Protocol is needed.

Q: How will the Government publicise the Optional Protocol?

ARTICLE 2: POLICY MEASURES

Prisons

22. In 2004, the UK is heading towards record numbers of incarcerated women. Over the past 10 years there has been a 192% increase in the female prison population and the rate of increase is accelerating at a higher rate than the male population.⁵ However, compared to men, women commit less crime and their offences are generally less serious⁶ - over half of offences committed are minor and the perpetrators "were not a threat to others, but simply petty criminals who were trapped in the 'revolving door' cycle of crime".⁷ One survey revealed that 25% of women prisoners had been taken into local authority care as a child. The equivalent figure for the general population is just 2%. Once in prison, women often do not receive the drug or mental health treatment needed. Women tend to place a greater demand on medical services than men with approximately 20% of women prisoners asking to see a doctor or nurse each day, almost twice as many as male prisoners.

Women on Remand

23. In 2002, two-thirds of women entering prison were on remand. The number of women in prison on remand in England and Wales has more than trebled over the last ten years and is almost four times the comparable rate for men. However, over 75% of women's offences are non-violent or minor (such as shoplifting) and 71% of women had never received a prison sentence before. Six out of ten women are eventually acquitted or given non-custodial sentences. However, even though their detention is short-term, it places further stress on their lives (particularly the care of their children and contact with families), which are "often already marred by chaos and distress".⁸ We support Lady Kennedy QC's recent comment that the current system is "inhumane and unjust" and also her call for a review of remand and bail policy and practices in relation to women.⁹

Young Women

24. Young women prisoners account for 12% of the total female prison population and 5.3% of the total young prisoners population. Women's offending peaks at the age of 15 and then gradually declines.¹⁰ The reconviction rate within two years of release (during 1995) was 55% compared to 45% for adult women. Young female prisoners are particularly volatile and have intensive needs. They are more likely than older women to challenge authority, to commit assaults and to harm themselves. There are significant

developmental differences between younger and older prisoners and their care and custody needs are different.

Black and Minority Ethnic and Foreign National Women

25. In 2003, 31% of women in custody were from minority ethnic groups compared to 24% of men. The higher level of female foreign nationals may in part account for this. Foreign national women account for the largest proportionate rise in the prison population in the last five years and represent 20% of the women in prison, compared to about 11% in the male estate.¹¹ Almost half of this group are Jamaican women who have been convicted of drug offences and the majority of these women are single parents and first-time offenders. There is substantial evidence to suggest that coercion plays a major part in their decision to become a drug courier, against a background of violent, abusive and exploitative relationships and poverty.¹² Support services for these women are limited and the NGO sector is attempting to fill the gap in provision. However, as women's prisons are critically over crowded, these services are not always available to them.

Mothers

26. Two-thirds of women prisoners are mothers and each year up to 17,000 children are separated from their mothers by imprisonment. Around 55% of women in prison have children under 16 and over one-third have a child under five years of age. Due to the small number of women prisons, they are often jailed at considerable distances from home, making retaining important links with family more difficult.¹³ Moreover, a considerably higher proportion of the children of women prisoners than those of males end up in care.¹⁴ Forty-two women in Holloway prison had no idea who was looking after their children and 19 children under 16 years were looking after themselves. At least 52% of mothers surveyed in police stations were lone parents. In addition, 79% of mothers had poor mental health.¹⁵

Poverty

27. There is an overarching correlation between women in prison and poverty - poor women are most likely to come to the attention of the criminal justice system and other State agencies. In a recent study, 4% of women prisoners were currently of no fixed abode and 43% were experiencing housing related problems, such as being declared 'intentionally homeless', incurring rent arrears and lapsed benefit.¹⁶ The housing trend suggests that the levels of housing problems are likely to rise significantly by the time the women are released. Over 40% of women in prison had not worked for at least five years before their imprisonment and only 39% had any qualifications, compared with 82% of the general population.

Mental Health

28. In a recent study, over 66% of women in prison were assessed as having a neurotic disorder such as depression, anxiety or phobias compared to 20% in the general community.¹⁷ Remand prisoners are a particularly vulnerable group as they are more likely than sentenced prisoners to suffer from personality and neurotic disorders and to have had contact with mental health services before entering custody.¹⁸ Women who have mental health issues are not only being imprisoned for minor crimes but are also being sentenced inappropriately.

Shoplifting:	A 35 year old woman with 5 dependents, housing problems, a history of contact with mental health services and a current diagnosis of depression.
Untaxed Car:	A 20 year old with drug, alcohol and housing problems.
Deception:	A 65 year old woman on medication with a history of contact with mental health services, housing problems and a current diagnosis of depression. ¹⁹

29. We support the Revolving Doors Agency's statement that: "Placing women with a mental health problem in prison on a sentence of less than a month wreaks havoc on employment, housing, social inclusion and, most importantly children. Too many women have to place their children in potentially dangerous, ad-hoc care. This produces anxiety among mothers worrying about their children at risk of abuse".²⁰

Medication

30. A study at Holloway Prison revealed that 33% of women were taking medication on arrival, but this rises to 90-95% during sentence. This alarming rise in prescribed drugs suggests an increasing incidence of mental health needs²¹ and the frequency with which prison officials are willing to simply medicate women. Women with mental health problems often feel stigmatized and mental health problems may remain ignored or hidden for years.²²

Suicide and Self-Harm

31. Men are most likely to commit and attempt suicide in the general population but this is dramatically reversed in the prison system. The suicide rates for women in prisons have increased in the past ten years from 1 in 1993 to 9 in 2002.²³ However, attempted suicide rates in the prison service are substantially higher - one in three women attempted suicide in prison and 37% had previously attempted to take their own lives.²⁴ Officers at Holloway Prison are, on average, saving five women per day from attempted suicides.²⁵ The Prison Service has found a link between overcrowding and suicide.²⁶ Women account for over 25% of self-harm incidents in prison but are only 6% of the prison population. In 2003, 30% of all women prisoners had harmed themselves, compared with 6% of men.²⁷ Incidents of self-harm almost doubled in 2003 (to 4,344) from 2001. Over the past year at New Hall Prison there have been more than 1,500 self-harm incidents - a 200% rise.²⁸ Young female prisoners are more likely to self-harm in prison than the general prison population.²⁹

32. In light of the glaring evidence that the current system is failing women, and that it is unable to take into account the contexts in which women's offending occurs, we urge the Government to implement the range of recommendations made by various NGOs and review the issue of inappropriate sentencing, including community service and probation orders as an alternative to custodial sentences for non-violent female offenders.

Q: When will the Government review sentencing of non-violent female offenders? What are the Government's proposals to reduce the impacts of incarcerating women? How will the Government address mental health issues of female offenders?

Employment Equality (Sexual Orientation) Regulations

33. We are very pleased that various legislation has been introduced or amended to give and/or protect the rights of lesbians, gay men, bisexuals and transgender people. The Employment Equality (Sexual Orientation) Regulations (EE(SO)R), which outlaws discrimination in the workplace on the basis of sexual orientation, have been generally welcomed. However, there are two provisions which enable discrimination against lesbian and bisexual women. In relation to pensions, an employer's scheme which only gives benefits to married couples is effectively discriminatory because same-sex marriage is not legal. Secondly, employers purporting to have a particular religious ethos or belief can exclude or dismiss people on the grounds of their sexual orientation "so as to comply with the doctrines of the religion - or so as to avoid conflicting with the strongly held religious convictions of a significant number of the religion's followers".

34. Despite the new Regulations, we were very dismayed when, in May 2004, Lesbian and Gay Employment Rights (LAGER) was forced to close due to its funding being cut. LAGER was a specialist organisation and the only one of its kind, representing lesbians and gay men for over 20 years and their

closure will impact on lesbian and bisexual women's ability to access skilled and affordable representation to challenge discriminating employers as per the Regulations. The Government must ensure that NGOs who are at the forefront of tackling homophobia and discrimination are adequately supported and sustained.

Q: How will the Government enforce these Regulations, especially since the proposed CEHR will not be introduced until 2006? When will the Government repeal the discriminatory provisions in the EE(SO)R?

ARTICLE 6: PROSTITUTION

Girls and Young Women

35. Of the estimated 80,000 people involved in prostitution in the UK, up to 5,000 children may be involved at any one time, with a female to male ratio of four to one.³⁰ Research suggests that the numbers of under-age girls exploited in prostitution is increasing.³¹ Studies also indicate that up to 75% of women involved in prostitution began when they were under 18 years of age³² and that most teenagers are involved in street prostitution, which is estimated to be ten times more dangerous than working from houses or flats.³³

36. Girls and young women have all too often been subject to a series of inequalities, abuses and discrimination, therefore making them especially vulnerable to coerced/ forced involvement in, or exploitation through, prostitution. Evidence suggests there is a strong correlation between prostitution and experiences of abuse in childhood or adolescence.³⁴ Girls and young women are almost twice as likely to be on the child protection register for sexual abuse as boys and young men.³⁵

37. Studies indicate that as many as 75% of children who become involved in prostitution have interrupted or prematurely terminated educational careers.³⁶ Lack of educational qualifications and opportunities thereafter puts girls in vulnerable positions, where prostitution may appear as one of only a few options available to them.³⁷

38. It is estimated that 100,000 young people under the age of 16 run away from home or care each year. Children in care are more likely to abscond, with girls being twice as likely to run away than boys. Runaway children are vulnerable to physical and/or sexual abuse.³⁸ Evidence suggests a high level of homelessness amongst those involved in prostitution.

39. Despite the fact that a criminal record can have life-long consequences for young women, the Government maintains there are “compelling arguments” for maintaining criminal offences for sex workers under 18 years. We seriously question whether this is an effective and just response to the issue of young sex workers.

Poverty

40. The 'issue' of prostitution is multi-layered. Whilst some view the issue as being the exploitation, commodification and abuse of women, others will see it as a decriminalisation and labour relations matter. The reasons why women enter into sex work are diverse and may involve factors such as force, coercion, drug and alcohol misuse, homelessness, violence, economic coercion and debt etc. There is a clear link to poverty and the Government, in their consultation document, *Paying the Price* (a review of prostitution), stated that 74% of women involved in prostitution cited poverty, the need to pay household expenses and support their children, as a primary motivator for entering sex work.³⁹ Young women who become involved in sex work are invariably poor.⁴⁰

Legislation

41. Many women suffer multiple discrimination that may influence their decision to enter prostitution. Once involved, they are at further risk of experiencing gender based inequalities ranging from violence and rape to institutional gender discrimination in the criminal justice system. Many women's groups believe that a publicly and widely held view exists of sex workers as women who are undeserving of public sympathy (when they are assaulted or murdered) and that this continues to prejudice the way in which their complaints and deaths are investigated and tried and reported in the media.

42. Women involved in prostitution suffer discrimination through the inappropriate use of Anti-Social Behaviour Orders (ASBOs).⁴¹ ASBOs are civil orders originally devised to resolve the problem of nuisance neighbours and are increasingly being used against women involved in street based prostitution. Whilst ASBOs are civil orders, a breach carries a custodial sentence which doubles each time the person is caught or reoffends. Custodial sentences for women involved in prostitution were repealed in the Criminal Justice Act 1982. In effect, the use of ASBOs reintroduces prison sentences for loitering and soliciting despite the earlier repeal of this penalty. It leaves women with criminal records, thus making it harder for them to find alternative employment etc. We urge Government to end the serving of ASBOs on sex workers - it can jeopardise women's safety as they are pushed into unsafe areas and make hurried decisions about a client.

43. The planned reforms to the Rehabilitation of Offenders Act 1974 must ensure that women need not disclose convictions for prostitution when seeking employment in the formal labour market. In the interests of safety, sections 33-36 of the Sexual Offences Act 1956, which prevent two persons from practising prostitution on the same premises, should be revoked.

44. For women who wish to exit prostitution, holistic strategies must be facilitated and supported by national and local Government agencies, including support for NGOs working with women involved in prostitution. Multi-agency support services must include advocacy, information, housing, drug treatment (it is estimated that as many as 95% of women involved in prostitution have a drug or alcohol addiction), therapeutic counselling, childcare, basic skills and vocational training.

45. *Paying the Price* focuses on prosecuting women rather than those who buy sexual services, as mirrored by conviction rates.⁴² The Government's own figures for 2002 show that there were 2,678 convictions for soliciting in comparison to only 993 convictions for kerb crawling.⁴³ Focusing primarily on those who solicit villainises and discriminates against women whilst failing to address the issues surrounding the buying of sexual services and harmful male behaviour.⁴⁴ We believe that a radical and long-term approach to tackling women's poverty would be more effective in addressing prostitution than maintaining/increasing punitive measures against sex workers.

46. The current laws concerning prostitution are piecemeal, confusing and ineffective and we welcome a review of the legislation. The Government's *Paying the Price* consultation, however, fails to adequately address a number of important issues including the ethnicity and sexual orientation of women involved in sex work, transgender sex workers or women involved in sex work in rural areas. There is no thorough analysis of off-street prostitution and how the safety of these women might be addressed. We urge the Government to seriously consider international models when reforming legislation, including decriminalisation and measures to prosecute users of underage girls and vulnerable women, and to commission further research which is disaggregated.

Q: What preventative measures does the Government propose, particularly in regards to young women? How does the Government intend to increase the safety of women involved

in prostitution? How will the Government ensure a holistic approach to supporting women who want to exit sex work? How does the Government intend to counter the effects of a criminal conviction for those women who wish to enter the formal employment market?

ARTICLE 7: POLITICAL AND PUBLIC LIFE

Political Representatives

47. The number of women Members of Parliament (MPs) is not reflective of the diversity or volume of women involved in 'grassroots' and community politics. Why women community and grassroots activists do not make the transition to regional, national and international politics (in the same numbers) is documented as being partly related to the gender division in politics, where women (who may often have caring responsibilities) are discriminated against in overt and covert ways. Another possible influencing factor is the manner in which female MPs are viewed and treated by male MPs, which reflects wider society's views on women. For example, the unprecedented number of female MPs who entered the House of Commons in 1997 were known as 'Blair's Babes' and were put under greater scrutiny than male MPs. At the consultation event for this Shadow Report, many attendees expressed disappointment that women who are elected into positions of 'power' are not championing women's views or having a high level impact on the status of women in general.

48. Prejudice within local selection committees is often cited by women MPs as being a main reason for the low number of women MPs - 41% of parliamentary candidates have said that selection committees in their parties look more favourably on male than female candidates.⁴⁵ Research into women's experiences of candidate selection, carried out after the 2001 election, revealed both direct and indirect discrimination against female candidates as well as incidents of sexual harassment.⁴⁶

49. Just under a quarter of Members of the European Parliament (MEPs) are women; only one of them is from a BME group.⁴⁷

50. Just over a quarter of local authority councillors are women and, to date, no region has reached the threshold of one-third female councillors. There is significant disparity between individual councils, for example, Cotswolds council has 51.1% female councillors, while the Isle of Anglesey has just 5% female councillors.

Disabled Women

51. There are very few disabled women in political positions. Those disabled women who have reached positions of political power may find that they are routinely discriminated against.

A disabled woman has gone on record to say she has never suffered more "hurt and humiliation" than in the year she spent as Mayor of the London borough of Islington. Wheelchair user Doreen Scott found herself turned away from many important functions, or was forced to use the goods lift, because of lack of access. At the Queen's Garden Party, she had to be pulled into the grounds backwards by courtiers. Her worst experience however was at a New Year's Day parade, where she was left virtually on her own for hours while other guests were having a party upstairs.⁴⁸

Voting

Black and Minority Ethnic Women

52. Black women are 8% less likely to vote than black men. However, in general, studies about voting amongst minority groups are not disaggregated according to gender making an in-depth analysis impossible.

Young Women

53. Young women are the least likely group to be politically active with 61% saying they do not follow politics closely. Forty-two per cent say there is only a 50-50 chance or less that they would vote in a Proportional Representation (PR) referendum⁴⁹ despite strong support for a PR system amongst young women (with 79% in favour). Many young women feel disconnected from the voting system, where they feel their vote is wasted in a 'safe-seat' constituency. Research on women voters found that many women are put off politics by the way that they see politicians behave.

Public Sector, Civil Service and Political Organisations

54. Nearly one-third of employed women work in the public sector (twice the rate of men), 40% of whom are black women from African and Caribbean backgrounds. However, the number of women in senior roles is significantly less than their male counterparts. For example, women make up 1% in senior ranks in the armed forces⁵⁰, 23% in civil service top management⁵¹, 18% of trade union General Secretaries or equivalent⁵² and only 13% of local authority Chief Executives.⁵³ While nearly half of appointments and re-appointments in the National Health Service are women, only 30% of women are executives and women are less likely than men to be appointed Chair.⁵⁴

55. There are 1,890 women in the public sector and civil service earning over £45,000 per annum and only 100 are minority ethnic women. This is compared with 5,960 men. There are 220 men with disabilities, compared to 110 women with disabilities, who earn over £45,000.⁵⁵

56. Women make up 7% of senior police officers in England and Wales.⁵⁶ In London's Metropolitan Police, there are just 900 black police officers, 15% of whom are minority ethnic women (1% of the total number of police officers). None of these women are in the senior levels, despite the fact that there are almost 900,000 minority ethnic women over 16 years of age in London. Perhaps one of the influencing factors in recruitment difficulties, despite targeted efforts, is the experiences of BME communities and perceptions of the Police - the alarming number of black deaths in custody, the discriminatory nature of the 'Stop and Search' policy and the exposure of racism in the Police (as detailed in the MacPherson Report among others).

Q: How will the Government address overt and covert discrimination and actively promote diverse representation of women in public and political life?

ARTICLE 8: REPRESENTATION

NGO Representatives

57. Although outside the remit of the Convention, we feel that it is important to note the issue of international NGO representation. Primarily due to the lack of capacity of women's organisations to engage in international instruments (such as the Convention and the Beijing Platform for Action), very few women's organisations have the opportunity to represent the UK NGO sector at an international level. We believe that improved support to enable the building of capacity is needed in order to increase the number of women knowledgeable about international instruments and create a more democratic process for selecting NGO sector representation. We urge the Government to look to international models of good practice. For example, in 2000, the New Zealand Government fully funded three NGO representatives, who were formally elected by the NGO sector, to attend the Beijing +5 Special Session in New York. The NGO representatives were registered as part of the official Government delegation and therefore had full access to the General Assembly and negotiations, which proved invaluable to their ability to actively participate in the parallel NGO session. Funding has also been made available for NGO CEDAW representation.

Q: What support will the Government provide to the women's NGO sector to build capacity of international NGO representation?

ARTICLE 9: NATIONALITY

Feminisation of Migration

58. Mainstream theories of migration have traditionally tended to be gendered. Women have been primarily seen as dependents of the male 'breadwinner' and this analysis has ignored the fact that women are a significant and growing migratory population. Economic factors, trafficking of women, family reunification, refugees and asylum seekers and the rise in domestic service work, have all played intrinsic parts in increased female migration in the past 20 years.

Domestic Workers

59. A significant number of women migrants in Europe work in domestic service, many of whom are undocumented and with limited rights. The Philippines is particularly associated with this 'trade', receiving £1.3 billion yearly remittance from overseas workers.⁵⁷ Women often enter the UK under the so-called concession (an exception to immigration law, dating from 1991, which allows people coming to Britain to bring their own domestic staff).⁵⁸ Migrant domestic workers may be subject to abuse and have no rights. Nor do they have recourse to public funds. A recent study found that 63% of migrant domestic workers' passports were withheld by their employers.⁵⁹ Apart from being a criminal offence in the UK, withholding the passports of migrant domestic workers further exacerbates difficulties in leaving abusive or exploitative employers. Workers are at risk of having no identity documents or proof of immigration status. Because of their precarious immigration status, workers may not seek redress under the UK's employment laws fearing deportation and/or recrimination from their employers. Indeed, they may not know such laws exist. Isolation and language barriers exacerbate this.

Q: What are the Government's proposals to address abuse and exploitation of migrant workers?

Refugee and Asylum Seeking Women

60. The recent Asylum and Immigration Act 2004 does not address the problem of quality decision making and there are serious concerns about the treatment of refugees and asylum seekers during the asylum process. Neither does the Act address the particular issues impacting on women and there is insufficient protection from gender persecution.⁶⁰ Many NGOs have criticised the Act for its 'gender blind' approach. For example, the measure on entering the UK without a passport is more likely to affect women because they are less likely than men to have access to a passport and may need permission from a male relative to obtain one. Additionally, there have been reports of asylum seeking women being detained in police cells for travelling on false documents (passports) - ignoring the fact that false passports are the only way in which many women can flee violence and persecution.

61. An estimated 50% of women seeking asylum in the UK are rape survivors.⁶¹ However, successive British governments have failed to recognise rape as grounds for asylum. Because these women have no recourse to public funds they are given no statutory support. Women refugees and asylum seekers have a responsibility to co-operate with the authorities considering their application, including making an independent claim on arrival in the UK and going through an asylum interview. These women may fear that they will not be understood and may find the process difficult and traumatic, particularly where the interviewer is guided by gender-blind procedures that are based on disbelief. Additionally, there is little

allowance made for the difficulty women may face in speaking publicly about their experiences, especially where there is an element of sexual abuse. Furthermore, translation may be inadequate and interviewers untrained. With such inaccurate or incomplete information it is not surprising that an inappropriate decision (on whether or not to grant asylum) may be reached.

62. The Government maintains that it intends to process most claims (and subsequent appeals) within four weeks, during which the asylum seeker may be detained for part or all of the time. However, the reality is quite different. Claims processing times vary greatly, during which some claimants are detained without a time limit and with no healthcare, legal representation or counselling. The case of a young woman, fleeing the threat of genital mutilation and rape, who was eventually granted refugee status after a year in detention illustrates this point. Asylum seekers who cannot substantiate their claims on arrival in this country are placed in detention centres for varying amounts of time, effectively criminalising and re-victimising women who may have undergone detention and torture in their countries. These detention centres should be abolished.

Lesbians

63. No protection or special measures are in place for lesbian asylum seekers to the UK, partially as a result of the status of 'refugee' being perceived as 'de-sexed'. The NGO sector has reported increasing numbers of women who seek asylum here because of persecution related to their sexuality in their homeland. They, like many refugee and asylum seeking women, have been subject to rape and abuse. The support for these women in the UK is primarily provided by the NGO sector. Their persecution continues however, when they arrive here, as they are often housed with homophobic asylum seekers. They rarely receive counselling for their trauma, and, as a result, present symptoms of Post Traumatic Stress Disorder, neurosis and psychosis. The recent abolition of Section 28 is a move forward, however, lesbian asylum seekers continue to face repression and institutional discrimination in the UK. Although there has been some success in achieving recognition that homophobia and fear of persecution based on sexual orientation are legitimate grounds for asylum, the situation for lesbian asylum seekers is uncertain.

Q: When will the Government include rape, violence against women and violence based on sexual orientation as grounds for asylum?

Poverty

64. Poverty and destitution is one of the most serious issues facing refugee and asylum seeking women in the UK. Despite the misinformation espoused by the (generally right-wing) media, the support available to refugee and asylum seeking women is meagre - women can be expected to survive on as little as £30.84 per week. Unable to legally engage in paid employment, many women are completely dependent on NGOs for survival.

When the baby came out, it was hard. I did not have anything for the baby, no money, no clothes. One of the outreach staff gave me a kettle so that I could boil water for the baby. It was very difficult, as I had to leave the baby to queue for food. I was frightened it would choke. I often went without food.⁶²

Dispersal

65. The Government's dispersal policy (where refugees and asylum seekers are placed at various and different locations across the UK) has extreme impacts on the health and safety of women refugees and asylum seekers.

66. Research has found that doctors are concerned about the dispersal policy and its impact on HIV-positive women, such as disrupted and compromised HIV care which may lead to increased transmission

and avoidable morbidity and mortality. The short notice of dispersal and inadequate transfer of medical information is affecting asylum seekers' health including resistance to antiretrovirals, mother-to-baby transmission of HIV and, in the worst cases, has contributed to patient deaths. (Also see Article 12)

67. A recent study found that refugee and asylum seeking women lived in constant fear of violence in the UK and feel so unsafe that 83% lived under self-imposed curfew. A third of interviewees walked everywhere because they could not afford public transport, adding to their feeling of vulnerability, and a further third had been verbally or physically abused, including being spat on or shouted at.⁶³ Women asylum seekers are subject to racism (both physical and verbal attacks) and exclusion. The dispersal policy is augmenting the problem, as women are sent to parts of the country that are not prepared for, or welcoming of, refugees and asylum seekers.

As an asylum seeker, I discovered what racism really means when I was 'dispersed' to Middlesborough. I believe that in Middlesborough, where the Home Office has placed me, I am not safe. I was a successful businesswoman in Kenya and I would love to work and contribute taxes to British society rather than get benefits - but I am not allowed to. On buses people refuse to sit next to me and shout out "monkey" and "asylum seeker". In the street a big, strong man struck me on my back with his fists and said: "You are illegal, you should go back to your country". Boys spit at me and throw stones when I walk down the street. I fled Kenya after a period in detention where I was raped and burned with acid and cigarettes because I belonged to a group which opposed the government. I was released on bail and was convinced that it was only a matter of time before I was jailed and tortured again. I left everything to escape to a place where I thought I'd be safe. I came to England for one reason only, because I'd heard it was a country that respects human rights. In London, where I was initially placed, I felt safe for the first time in years. There are support services for traumatised asylum seekers, including the only services in the country for female asylum seekers who have been raped.

I was shocked when the immigration authorities told me I was being 'dispersed' to Middlesborough and that if I didn't go my support would be cut off. I knew of asylum seekers who refused to leave London. They ended up sleeping on the streets and going hungry. I felt I had no choice but to go. We were transported at night by coach and placed in our new accommodation with a small amount of cash. I was given a flat on a council estate where I am the only black person. The council's asylum unit handed us a welcome pack when we arrived. It warned us about the possibility of racist attacks on asylum seekers and told us who to complain to if we experienced anything from verbal abuse to physical violence. "While members of the team are happy to listen to your concerns, they can't deal with non-emergencies", concludes the warning.

The fact that an explicit warning is given to us suggests to me that the government knows exactly what they are sending us to. They have a duty of care to asylum seekers, but deliberately placing us in this environment seems to me to be wilful neglect of that duty. There have been cases of asylum seekers being murdered in this part of the country and in Scotland. Every moment for me is fear.

I have been diagnosed with post-traumatic stress syndrome as a result of what happened to me in Kenya and am experiencing suicidal feelings. I'm scared of walking down the street and only go out when I have to. I'm scared of going out after 5.30pm because I know the risk of attack rises as evening approaches. There are too many things to have nightmares about. I escaped from Kenya because I wanted to live, but in Middlesborough all I can think about is how much I want to die.⁶⁴

Q: Does the Government intend to review its dispersal policy, which is clearly placing women at risk?

ARTICLE 10: EDUCATION

Young Mothers

68. Education is becoming increasingly important in getting and keeping a job, yet less than half of young pregnant women and young mothers, in a recent study, were able to access a full curriculum. In another study, 60% of teenage mothers had no qualifications by their early 20s compared with 25% of women who had become mothers after their teenage years. Young mothers may often have had problems with schooling prior to becoming pregnant, rather than as a result of pregnancy. We support the range of recommendations made by the YWCA, including the implementation of specialist education provision in every local education authority by 2008.⁶⁵

Lesbian and Bisexual Students

69. In a recent study, just over half of schools reported homophobic bullying in the last term, but only 6% of schools had bullying policies that specifically mentioned homophobic bullying.⁶⁶ Young lesbians, bisexual women and those questioning their sexuality are especially at risk of social exclusion, mental health problems, self-harm and suicide as a result of homophobia and bullying in schools.

Young Women's Exclusion from Education

70. Because girls comprise just 17% of permanent exclusions, they have been largely overlooked in school exclusion prevention strategies and research. However, recorded permanent exclusions are a small proportion of the total number of girls excluded as many more are excluded either informally or for a fixed period. The remedial actions of many educational authorities are male based.

71. Official statistics concerning girls' absences from school underestimate the extent of truancy. Numerous studies have shown that a considerable number of girls who truant do so unknowing to the school. The pupils would attend class in the morning to be registered, leave following their registration and return in the afternoon for registration. Self-exclusion or 'school avoidance' (as suggested by some researchers) is one strategy adopted by girls to manage difficulties, such as antagonistic relationships with teachers, bullying by peers or difficulties managing the curriculum. A high proportion of girl non-attenders are often carers in the home with responsibilities for taking care of younger siblings, elder relatives or disabled parents.⁶⁷

72. Lesbian, gay, bisexual and transgender (LGBT) self-excluders, who feel socially isolated at school, are more likely to have a history of absenteeism and to leave school at 16, often despite having achieved grades that would have allowed them to take 'A' levels and go on to university.⁶⁸ Racist bullying is also cited as a reason for girls choosing to exclude themselves from school and South Asian girls are reported to be more vulnerable to self-exclusion, particularly as a result of racist bullying, than other minority ethnic groups.

Q: Does the Government acknowledge the significance and consequence of girls' exclusion and self-exclusion from school? How does it aim to tackle this problem?

Refugee and Asylum Seeking Women

73. Half of newly arrived refugee and asylum seeking women find they are effectively barred from English language classes by the lack of childcare facilities. Studies show that course completion is of major concern. Some lone parent women had difficulties completing language classes due to childcare or family commitments. The Government drive to place refugees and asylum seekers in housing centres also deters women from accessing education, as these centres are often not able to cope with the demand for classes or provide the necessary support. The high number of professional women refugees who

enter this country are faced with barriers to having their qualifications recognised, including a bureaucratic system of recognition, not having the correct documents and/or the right language skills and not understanding the system.

Adult Learners

74. Seventy-three per cent of adult learner enrolments in 2003 were by women and women account for proportionally more of the sports and fitness enrolments (82%), but proportionally fewer of the enrolments in languages (64%) and basic education (67%).⁶⁹ However, there are concerns about the levels of women adult learners who complete their courses. Research suggests that access to appropriate childcare is a major barrier to women graduating from courses. For women on Job Seekers Allowance, education is often not an option as according to the Department of Work and Pensions these women are 'employable' even if the only jobs available are minimum wage jobs. Similarly, payments for education can cause difficulties. If the college course does not occupy sufficient hours per week (12), no payment is made. In one study, a GCSE (secondary school qualification) programme was abandoned because it only occupied 11.5 hours per week.

University Debt

75. The prospect of high student debt deters female pupils from going to university more than male pupils. Female graduates earn, on average, 15% less than their male counterparts at the age of 24, with this gender pay gap widening with age (increasing to 40.5% for women graduates aged 41-45). Additionally, BME and disabled women experience an even greater 'gap' and earn less than non-BME and non-disabled women. If graduate debt rises to £26,000 (which is likely under the Government's proposals for 'top-up' fees) it would take a woman earning £36,000 with two children, 19.5 years to pay back her student loan. In contrast, a man earning the same salary would take 15 years to repay this debt.⁷⁰

Women Employed in Educational Institutions

76. Of the 170 heads of higher education institutions - which include universities as well as specialist colleges - only 13% are women and there are only ten women vice-chancellors of universities (8% of the total).⁷¹

77. Women are under-represented in management positions in schools. This is particularly true in the secondary sector where only 31% of secondary heads are female.⁷² As females predominantly make up the part-time and supply staff in schools, they experience problems accessing continuing professional development and promotion. Research suggests that most schools have equal opportunities policies, but equal opportunity practices vary. Since management and budgets are devolved to schools, Local Education Authorities are perceived as having less of an influence on the practises of the schools. Therefore, the development of teachers is largely now dependent on individual head teachers.

Disabled Women Teachers

78. Research on disabled women teachers highlights the difficulties in entering and making progress in the profession. Disabled teachers were more likely than any other group to think about leaving the profession (72%) compared to other teachers (54%). Forty-three per cent of teachers surveyed believe that a disability would negatively influence promotion prospects.⁷³ Estimates of the number of disabled teachers who become head teachers vary from 0.05%⁷⁴ to 1%.⁷⁵ These figures are not disaggregated by gender.

Black and Minority Ethnic Women Teachers

79. Research shows that teachers from minority ethnic groups are more likely to seek promotion than others. Many BME teachers also believe that they have not received promotion commensurate with their qualifications and experience, for example, very experienced white teachers with 15 years or more teaching experience have about a one in five chance of being a head teacher, whereas the proportion is significantly less for black and Asian teachers.⁷⁶

Lesbian and Bisexual Women Teachers

80. In a recent research report, 22% of survey respondents regarded sexual orientation to be of some importance in promotion prospects.⁷⁷ There is evidence that there is a 'glass ceiling' operating against lesbian and gay teachers in academic posts and that they do not hold the ranks of principal lecturers, readers or professors in the numbers that would be expected on the basis of their age and other characteristics. There is also considerable evidence that lesbian teachers do not feel comfortable in the workplace with 30% of lesbians reporting discrimination and 41% reporting harassment. These figures are above those for heterosexual women (26% and 30%).⁷⁸

Q: How will the Government address the institutional inequalities that exist in the teaching profession?

ARTICLE 11: EMPLOYMENT

Black and Minority Ethnic Women

81. In the UK, 47% of minority ethnic women aged 17-24 are in higher education and are just as likely as white women to hold a qualification. However, the statistics indicate that barriers to employment (such as adequate care facilities, transport, racism and sexism) continue - only 46% of minority ethnic women are in paid employment compared to 61% of minority ethnic men and 68% of white women. BME graduates experience unemployment at a seriously disproportionate rate to white graduates.⁷⁹

82. In London, BME women are 44% of all unemployed women yet represent 30% of the female population.⁸⁰ Minority ethnic women are more likely to work full-time compared to white women but earn less per hour on average than all men (regardless of ethnicity) and white women.

Lesbian and Bisexual Women

83. In a study of lesbian, gay and bisexual trade unionists, 44% reported discrimination due to their sexuality.⁸¹ In another study, two-thirds of lesbians and gay men surveyed reported workplace discrimination including dismissal, physical and sexual assault, ridicule and verbal abuse.⁸² (Also see the EE(SO)R under Article 2)

Rural Women

84. Women represent 50% of rural employees and 31% of the self-employed. Because rural women are likely to have to travel further to obtain flexible and well paid employment, the lack of public transport makes this difficult. Women in paid employment may be under-employed because of childcare commitments. Women who are under-qualified but have high levels of skills do not have the value of their skills represented in their salaries, which tend to be low. There is no single strategic initiative to enable rural women to enter the labour market, although 40% of rural women of working age not in paid employment have said they would like to be.⁸³

Transgender Women

85. Despite changes in the law there is still evidence of discrimination against transgender women in the workplace. Rates of unemployment and under-employment tend to be higher for transgender people than amongst the general population. However, organisations have seen improvements since the Sex Discrimination Act was held to apply to transgender people from 1995 onwards. Very few organisations specifically mention gender identity or reassignment in their equal opportunities policies although it is encouraging to see this situation improving, particularly amongst NGOs.⁸⁴

Young Women

86. In the 1990s, young people experienced twice the average rate of unemployment. Currently, nearly half of all teenage mothers are in the bottom fifth of income distributions. There are different minimum wage levels for young people. We urge the Government to set one minimum wage for all, thereby ending the current system that discriminates against the young by setting lower rates of pay for the under 22s and under 18s.⁸⁵

Women with Learning Difficulties

87. Most people with learning difficulties do not have jobs even though they want to work. There are also examples of women with learning difficulties being paid in vouchers rather than money.

Lone Parents

88. Lone parents in London (92% of whom are women⁸⁶) are most vulnerable to poverty for a range of reasons and they are not necessarily better off in paid employment. For example, a study in 2003 found that a lone mother with two children and high childcare costs would need to earn at least £7.76 per hour to be better off than if she were on a benefit, and this is especially true for young lone mothers and BME women (who make up 40% of lone parents) because they earn less than older and white women. However, jobs that might be appropriate may pay significantly less than this, for example a checkout operator who earns (on average) £5.24 per hour.⁸⁷

Q: What strategies will the Government develop to reduce barriers to employment and a living wage, particularly for women who face multiple discrimination?

Childcare

89. Childcare is continually cited as the primary issue inhibiting women's employment and learning opportunities. The cost per year in inner London, for day nursery, for a child under two years is typically £8,700⁸⁸ or around £168 per week - 25% higher than the average cost anywhere else in England. Yet the extra costs associated with living in London are not reflected in tax credits.⁸⁹ However, it is crucial to note that the childcare sector, overwhelmingly female, is the worst paid occupation in the UK - for example, nursery workers in private nurseries earn, on average, £8,000 per year. The current situation does not favour women, either as employees or daycare users.

90. Immigrant women who work in the UK, and can stay here only on a work permit, are not entitled to child benefit or any kind of other State funded social support or help with child care. Unless they earn very high salaries, immigrant women have very few options - poverty, terminating their pregnancy or leaving the UK. Immigrant women, in general, do not have the choice to be a single and working mother.

Q: How will the Government address remuneration issues in the childcare sector and the cost of childcare?

Employment Legislation

91. Presently, individuals cannot access public funding for employment tribunals. Complainants unable to meet their own legal costs are thereby dependant upon trade unions or other complainant aid groups in the NGO sector to provide support. In 2003, only 29.1% of workers were in trade unions. Many workers who are low paid, exploited and denied their employment rights are likely to be women in non-unionised work places. We are concerned about access to justice, particularly for women seeking legal remedies for sex discrimination e.g. pregnancy/maternity related claims, sexual harassment, equal pay etc. Many workers are simply unaware of or unable to access basic employment rights.

92. Current employment legislation does not provide for class actions. This has implications for groups of women taking equal pay cases. Under the present system, each woman is required to lodge proceedings individually. This means that even if she or a group of women acting together are successful in an equal pay claim, the employer does not have to apply this to other women workers who may also have a legitimate claim but have not lodged proceedings. We believe this creates a real barrier to assisting women to achieve pay parity.

Sexual Harassment

93. Sexual harassment and sex discrimination continue to hinder the progress of women at work. Over an 18 month period, the Equal Opportunities Commission (EOC) received 140 formal complaints of sexual harassment from female postal workers.⁹⁰ With the closure of the NGO Women Against Sexual Harassment in 2001, the EOC is the main source of assistance for women experiencing gender based discrimination in employment. The EOC is under resourced and is unable to provide legal representation to every woman who seeks its assistance. Trade unions sometimes stand accused of failing to support their women members and it is not unknown for women to have to face the prospect of taking legal action against employers and trade unions for failing to act on such complaints. Public funding should be made available for complaints to employment tribunals.

Pregnancy Discrimination

94. The EOC receives more calls from women facing problems at work because of their pregnancy, than on any other subject. Approximately 1,000 women per year in England and Wales take legal action after being dismissed because of their pregnancy.⁹¹ Recent EOC research has found that more than 25% of employers cannot refer to a single statutory entitlement for pregnant women.⁹² Although maternity leave entitlement is higher in the United Kingdom than in most other European Union countries, the amount of maternity pay is amongst the lowest in the European Union. The average award for injury to feelings in sex discrimination cases involving pregnancy related dismissal is £2,000 lower than in non-pregnancy related dismissal cases. The EOC's latest study has found that nearly 25% of women who made an employment tribunal claim had been dismissed within hours of telling their employer about their pregnancy and one in five women returning from maternity leave were given lower grade jobs. Pregnancy and maternity related discrimination is occurring despite the fact it is unlawful.⁹³

Q: What action does the Government propose to take to remedy continuing pregnancy and maternity related discrimination against women?

Women's NGO Sector

95. Over 66% of paid staff in the voluntary and community sector are women. The voluntary and community sector provides 4% of London's jobs. However, women working in women's groups tend to be paid less than those working in generic voluntary and community organisations and it is acknowledged that salary is an influencing factor in recruitment and retention (as the staff turnover in women's groups is generally high).

96. The unpaid contributions of women in the voluntary and community sector are significant and for many women's groups the work of volunteers is critical to the survival of the organisation. In the wider UK voluntary and community sector, 22 million adults are involved in formal volunteering and the economic value is estimated at £40 billion per annum. In a London survey, volunteers in 69 women's groups worked an average of 2,630 hours per week - equivalent to 75 full-time staff. Women's organisations who are working across equality strands are most likely to experience difficulties in recruiting and retaining volunteers. For example, an LGBT organisation stated that their difficulty was with volunteering agencies who were uncomfortable in sourcing LGBT volunteers.⁹⁴

ARTICLE 12: HEALTH

Black and Minority Ethnic Women

97. Research shows that BME women believe they are stereotyped and stigmatised in the health service. Research also shows that health professionals are aware of this pervasive way of thinking.

I think there are very unsympathetic doctors out there. I think if you come in as the stereotypical image of being single, having children by more than one father and have limited English, I think that the service is probably diabolical....I think it's their impatience and prioritisation and how they see things, especially when they are coming back quite often for social reasons....presenting symptoms of headaches and pains when actually it's stress and the difficulties of life.⁹⁵

98. A high proportion of Irish women suffer from various mental health problems and Irish women have the highest rates of suicide and self-harm. Admission rates for depression amongst Irish women are 410 (per 100,000), compared with a rate of 166 amongst English women.⁹⁶ However, although Irish women tend to suffer disproportionately from such high degrees of mental health problems, they are least likely to consult primary care medical professionals. This can be contributed to perceptions of stereotypical and discriminatory attitudes directed at them in the health care system. Older Irish people in particular are likely to fear statutory services, given the history of discrimination against Irish people in Britain. Additionally, the needs of Irish women, as a distinct ethnic category, are often overlooked because they are white and speak English. Data collected by gender and ethnicity must ensure statistics on Irish women are not lost within 'White UK' or 'White Other'.

99. People from Pakistani and Bangladeshi communities are one and a half times more likely to suffer ill health than the white population and are more than five times more likely to be diagnosed with diabetes than white people. Caribbean women have a higher prevalence of cardio-vascular disease and they and Pakistani women are also 20% more likely to have high blood pressure and to be obese than women in the general population.⁹⁷

100. Women whose first language is not English often rely on their children to assist them in accessing health services. Studies report high numbers of children being kept out of school to accompany their parents to doctor and hospital appointments to act as interpreters.

101. Women are now the fastest growing group of newly diagnosed HIV-positive people in the UK, with a significant percentage of them being from minority ethnic communities, mainly black African. In 1992, women made up 12% of people living with HIV and AIDS in the UK. By 1998, the proportion had grown to 35%. An overwhelming majority of those women were black African (at least 80%) and had been infected from a male partner. Violence against women is the common method of exposure to HIV.

Refugee and Asylum Seeking Women

102. Refugee and asylum seeking women suffer from severe stress, yet trying to communicate their needs is often difficult. One study showed that more than half (56%) of interviewees suffered from depression, one in five found the first person they spoke to at the doctor's surgery unhelpful and only half had access to interpreters when visiting their doctor. Problems with communication is the main difficulty they experience when visiting health services, with fewer than 17% of the study's participants describing their English as good or fluent.⁹⁸

103. It is estimated that over 50% of women refugee and asylum seekers in the UK, the majority of whom come from Africa, are fleeing rape - mostly perpetrated by soldiers, police or agents of the state. The intersection of HIV epidemiology with gender and race may expose black African women to multiple stigma and discrimination because of their race and their presumed or actual status.

104. The Government's asylum and immigration policies indirectly discriminate against HIV positive women including instances where some Primary Care Trusts have failed to provide treatments to prevent onward transmission of HIV from mother to child because of the unclear immigration status of the mothers concerned. There have also been reports that the National Asylum Support Service sometimes penalises pregnant refugees and asylum seekers by not providing them with milk tokens, forcing some HIV-positive women to breast-feed their babies. Similarly, detention has a detrimental impact on pregnant refugees and asylum seekers, especially HIV positive women, by depriving them of food and adequate pregnancy-related health care, as well as exposing them to communicable diseases. The All-Party Parliamentary Group on AIDS have undertaken a report on migration and HIV which mentions that, in some cases, the effect of the dispersal policy on pregnant women has led to children being born HIV-positive due to insufficient care provided outside of London.

Women with Learning Difficulties

105. A high proportion of women with learning difficulties are placed on medication for depression. Little attention is paid to the impacts of discrimination on the mental and physical health of women with learning difficulties. Instead, as shown with women in prisons, women are simply medicated.

At least 20% of people with learning difficulties are said to have depression or other mental health problems. We get given drugs by the doctor but is that the answer when a lot of the reason behind it is because of the ways we are treated unfairly in society? ⁹⁹

106. Sexual and reproductive health and rights are often considered to be non-issues for women with learning difficulties who are routinely denied control over their sexual and reproductive choices. Frequently they are excluded from decision-making regarding their sexual and reproductive health, denied access to information and may be forced or coerced into decisions made by carers or health professionals. There have been examples of forced sterilisation for women with learning difficulties.

We have sterilisations forced on us to stop us having kids. My mum forced it, forced me to have a sterilisation when I was 19... sterilise me because I have epilepsy and learning difficulties. She said to me for me to have sex would be naughty. Later on in my life I learned it's not and me and my husband looked into it being reversed but it can't be. I had known my husband really wants children. That hurts.¹⁰⁰

107. Health care is often not accessible to women with learning difficulties and it is common that little attempt is made to ensure that women understand the information given to them, either verbal or written.

A lot of women with learning difficulties do not know what the menopause is. I went to the GP and they gave me a leaflet on how to check my breasts. I couldn't understand it so I went back and they said "we gave you a leaflet already, goodbye".¹⁰¹

108. The health needs of women with learning difficulties or high support needs is often not taken seriously or considered unimportant and in extreme cases they are denied treatments, sometimes critical treatments or transplants or regular treatments such as smear tests. The Disability Discrimination Act does not cover situations like this. Additionally, women with learning difficulties may experience a lower quality of life which is exacerbated by being in the lower economic group.

Lesbian and Bisexual Women

109. Lesbian and bisexual women have been found to experience higher levels of anxiety and depression, self-harm, suicide and attempted suicide, than heterosexual women.¹⁰² In the UK, research found that of LGBT adults who had been bullied at school, 53% had contemplated self-harm or suicide and 40% had attempted suicide at least once (75% of this group had attempted suicide more than once).¹⁰³ In accordance with international obligations, health and social service providers must consider setting up tailored mental health mechanisms to deal with the needs of young lesbian and bisexual women to overcome the stress of 'coming out', victimisation, bullying and discrimination.

110. Lesbians are often seen as a sexually healthy group of the adult population and the lack of specific information on lesbian and bisexual women's health needs leads many to believe that they are not at risk of problems like cervical cancer and HIV.¹⁰⁴ Yet lesbians can, and do, acquire sexually transmitted infections through sex with either men or women. However, the UK's first *National Strategy for Sexual Health and HIV*¹⁰⁵ does not mention the word 'lesbian' and makes no reference to women who have sex with other women.

111. Lesbian patients have reported hostility, judgement and poor treatment when they disclose their sexual orientation to their doctor.

One young woman reported that her doctor said to her that "gay people go to hell". He 'outed' her to her family and wanted to book her in to see a psychiatrist, "I felt guilty to be gay and depressed. So I went to see another doctor. But he was also making comments and I was still depressed".¹⁰⁶

112. Failure to provide appropriate services and access to these services can lead to greater isolation and deterioration of health for older lesbians. Services for older people are usually inappropriate for older lesbians and a combination of homophobia and ageism deters many older lesbians from using general community facilities. Government documents relating to older people, when addressing needs of minorities, usually fail to mention older lesbians and bisexual women or gay/bisexual men (for instance, the *National Health Service's National Service Framework for Older People*) and this influences service provision locally. Where services have been specifically set-up for the LGBT community, they have tended (for historical reasons) to focus on the needs of (usually younger) gay men. Justified community safety concerns often lead to older lesbians remaining withdrawn from their local communities and the fear of harassment and discrimination (in the home, street or by people they rely on) can lead to serious mental health effects. The general tendency to regard older people as asexual makes older lesbians more invisible to service providers and also to the LGBT community. This subsequently amplifies isolation.

Gypsy and Traveller Women

113. It is estimated that, on average, gypsy and traveller women live 12 years less than women in the general population.¹⁰⁷ The gypsy birth rate is high and peri-natal mortality, stillbirths and infant mortality

are significantly higher than the national average.¹⁰⁸ Both mobile and settled gypsies and travellers report difficulties in registering with a doctor or for other health care. Research shows that almost a third of women had been refused registration at a doctor's surgery at least once. This is due partly to bureaucracy and paperwork but also due to ignorance about gypsies' and travellers' needs and indifference stemming from prejudice.¹⁰⁹ Many gypsies and travellers go straight to Accident and Emergency if they need treatment resulting in sporadic and disjointed health care and very limited access to advice, support and preventive care.

Disabled Women

I 14. As with most public services, disabled women continue to be discriminated against in the health service because of the lack of physical access and ill thought-out planning, for example lack of passenger lifts, distances between different departments which make walking difficult, breast screening machines which require women to stand etc.

A woman had attended the doctor's surgery for a postnatal check up, part of which was to be a cervical smear. However the couch was not accessible to her and the woman was told that the situation would be addressed and that she would be advised of another appointment date. That was ten years ago and she has never been contacted. This participant had also experienced difficulties in finding a dentist, optician and chiropodist, which are accessible.¹¹⁰

I 15. Assumptions, based on ignorance and stereotypes, are often made of disabled women and their health needs. For example, the sexual and reproductive health and needs of disabled women are routinely ignored. Many women have encountered health professionals who believe that disabled women should not and/or could not have children and disabled women are often denied a sexual identity.

Mothers

I 16. The lack of childcare (generally) and child-friendly facilities in the health services, in particular, is alarming. Insensitive planning often means that doctor's clinics aimed, in theory, at women (as the main service users) are actually excluding them.

I can't tell you the amount of times I referred women to doctors for their six week post natal check up and they won't go because they have to bring the baby [and] they weren't able to leave the baby anywhere. The GP refuses to do physical examination (with the baby present)....[and the woman] ends up not having her check up....[The doctors] don't care - the onus is on the woman to provide her own childcare.... I don't think they give a second thought to it.¹¹¹

Q: How will the Government ensure that all women have access to rights based, patient centred, appropriate and quality health care, particularly those women who have been routinely denied such care?

Mental Health

I 17. Gender plays a significant role in the development and diagnosis of mental health problems, both in its very definition and in the provision of services. Women are the biggest consumers of antidepressants and this is of great concern - it is a 'quiet' form of oppression which maintains women in a socially acceptable/'required' role. Research shows that eight out of ten doctors said they prescribed more antidepressants than they should, many to women.¹¹² Social factors have a significant impact on women's mental health,¹¹³ however mental health services fail to provide care which takes account of the contexts of women's lives. Furthermore, targets are not being met in terms of women only community day

services or women only wards. Only 19% of Primary Care Trusts have women only community day services and 31% provide women only wards.¹¹⁴

118. The *National Health Service (NHS) Plan 2000* prioritised mental health along with cancer and heart disease as an area in need of reform and modernisation. The recent report on *Mainstreaming Gender and Women's Mental Health* was welcomed. However, the updated *NHS Improvement Plan 2004* makes little mention of mental health which raises questions about the Government's commitment to this area.

119. The Department of Health emphasises the need for service providers to analyse data by sex and ethnicity to inform service delivery and planning. Whilst information systems are capable of providing this information, the experience of organisations working in the field is that staff often have no access to computers or do not have enough time to record this information. In addition, using information this way should not overlook the individual needs of women based on other factors such as sexual orientation, disability, age, faith, or status. The framework for the development of mental health services for women has no targets. Rather, the emphasis is placed on local services to arrange their own monitoring arrangements which can result in inconsistencies. There is also a lack of integration with other policies. The framework does not identify the resources needed to support implementation. The framework fails to adequately discuss the needs of particular groups of women including BME women, women with physical or sensory disabilities, lesbians, asylum seeking and refugee women or the needs of young women leaving care, in spite of evidence that they are particularly vulnerable and socially excluded.¹¹⁵

Q: How is the Government going to ensure that *Mainstreaming Gender and Women's Mental Health* is implemented?

ARTICLE 13: ECONOMIC AND SOCIAL BENEFITS

Working Tax Credit

120. The combination of low wages and the fact that the working tax credit (WTC) does not cover all childcare costs means that many mothers are financially disadvantaged when taking up paid employment. This can, in part, explain the low take up of the WTC in the London region, with only 14% of all families benefiting, compared to an average of 20% in England and Wales. Less than 25% of lone parent families in London were receiving the WTC in July 2003, compared with an average of over 41% in England and Wales.¹¹⁶ WTCs also create budgeting difficulties for mothers because childcare costs have to be paid up front yet the WTC is paid in arrears.

Benefits

121. Benefits do not reflect the real cost of raising children or basic living costs. For example, parents whose children are entitled to free school meals during school term time receive no extra support in non-term time. Budgets, therefore, must be stretched to five additional meals per child for each non-school week.

Young Mothers

122. Ninety per cent of teenage parents receive some income support from the State. However, benefits are paid at different rates depending on the age of the mother. Currently, the most a young mother under 18 years can claim is £44.05 per week (excluding housing). The low benefit rates during pregnancy can undermine a young pregnant woman's health. Research has shown that young pregnant women living away from home have less to spend on food than the minimum recommendation by the Food Commission (for a modest but adequate diet) of £20.25 per week.¹¹⁷

Refugee and Asylum Seeking Women

123. As a result of their Section 55 (immigration) status, refugee and asylum seeking women can neither work nor collect benefits. In the meantime, they cannot get a bank account and access to medical care is difficult. Language barriers compound exclusion and make bureaucracy even more difficult to negotiate.

Women with Learning Difficulties

124. The benefits system is complicated and frustratingly bureaucratic. For women with learning difficulties, this is exacerbated. There has been a move to pay benefits straight into people's bank accounts which is not necessarily easy for women with learning difficulties to access. Many people with learning difficulties do not have enough identification or other necessary documentation (such as a utility bill) to open a bank account.

National Insurance Contributions

125. Seventeen per cent of working women in the UK do not earn enough to pay National Insurance compared to 4% of men. This means that they are not entitled to certain benefits, such as the contribution based Jobseeker's Allowance, Incapacity Benefit and State pensions.¹¹⁸ In addition, women are more likely to have an interrupted National Insurance record due to a broken employment history caused by taking time away from work to raise and care for a family. Consequently, this restricts the benefits to which they are entitled.¹¹⁹ More women claim benefits, such as Income Support, that do not require a National Insurance record, than men. However, because Income Support is means tested, if a woman's partner is working, she will not be entitled to the benefit. If poverty were measured on the basis of individual income, 52% of married women would be under the income support poverty line as compared to just 11% of men.¹²⁰

Q: What does the Government propose to improve WTCs and benefits for women?

Pensions

126. Sixty-four per cent of people living on State pensions are women and they are more likely to rely on these pensions as their sole source of income.¹²¹ One in four single women pensioners live in poverty. In 1996/7, the average independent income received by women in retired couples was 40% of that of men's.¹²² For every £1 a man earns from a pension, a woman gets 32 pence.¹²³ In London, men's average weekly state pension is £80.42, whereas women received an average of £58.14. Only 43% of women received a state pension based on their own National Insurance contributions (compared with almost all men) because their National Insurance contribution records are insufficient due to family/childcare interruptions and their low pay.¹²⁴ Women have disproportionately low access to pension schemes with only 65% of full-time workers and 33% of part-timers as members of either an occupational/personal pension scheme, compared to 75% of male full-time workers.¹²⁵ Women who cannot contribute to their pensions themselves should be able to benefit from rules which allow a family member or friend to contribute to their pensions, such as better paid (probably male) relatives and friends.

Lesbians

127. Most pension schemes provide a widow's pension if one partner dies before the other. Even after civil registration of gay and lesbian couples comes into force, coverage of same-sex couples within pension schemes will not be mandatory. Partners of lesbian employees are not covered by many other employer benefits, such as health insurance. Lesbian couples are not exempt from capital gains tax on property transferred between couples and are liable for inheritance tax, unlike heterosexual partners.¹²⁶ We urge the Government to rectify these situations and remove the discrimination faced by same sex couples. (Also see comments about the EE(SO)R under Article 2)

Disabled Older Women

128. Disabled older men receive proportionately more social services than older women with an equal disability. Older women are also less likely to be able to 'buy-in' extra care owing to their smaller incomes. Consequently the health and well being of older women is unfairly and adversely affected.

Q: How will the Government address the inequalities women face in pensions?

Housing

129. Women are disadvantaged in accessing housing on the open market through their lower economic status. High rents, deposits and rent guarantees put an additional burden on those on low incomes. Women are less likely to head households in the private rented sector. For women on low incomes, dependence on Housing Benefit (HB) may also limit access to the private rented sector. Private landlords are not as willing to accept tenants in receipt of HB because of delays and administrative problems with the current system.

Women with Learning Difficulties

130. Women with learning difficulties often find it difficult to find a place to live that has the right balance of independence, support and location. Often, they face barriers to exercising choice over where they want to live. People with learning difficulties are limited to narrow options, conservative options, for example a 'choice' of living with family or in a group home.

Other people might choose to live in a commune but those choices are not available for people with learning difficulties. We are not expected to move...Over protective parents can stop you moving out and force you to stay at home. Social workers do not ask if you want to move out, only if they notice a problem or you really push them. If you want to rent privately some landlords have a snobby attitude and do not want to rent to people on benefits.¹²⁷

Disabled Women

131. Disabled women are not prioritised with regards to housing. They are often housed in 'sheltered accommodation' for elderly people which is wholly unsuitable to the needs of young, active disabled women. The suitability of the housing, location, wider community, proximity to amenities and transport, other facilities and services are not considered. They are often being denied such basic rights as choosing when they can go to the lavatory, when they might be assisted to bathe or when they might go to bed.¹²⁸

I came into this housing as a young bride of 23 - it was a ghetto of old people...I was different - disabled. Now I'm 64 and I'm still different and I don't fit in...My neighbours are jealous of me as I have a PA [Personal Assistant]and I've been reported to the councils etc. They would evict me, but there is nowhere to evict me to....People don't have a clue how disabled people live. We get sent to inner city places that are unsafe, big estates where it is not possible to go out on your own even though you might have a PA, it doesn't mean you always want to be with them, but that's not possible in the places where we are put.¹²⁹

132. A research project highlighted the difficulties of disabled lesbian women. One woman reported that when her home carer found her in bed with her partner she refused to work with her and resigned. This had happened to her on more than one occasion. Disabled lesbians taking part in the project wanted to be able to choose their own home carers.¹³⁰

133. Disabled women with physical or sensory impairments must be given appropriate allocations and landlords should have a good knowledge of the accessible housing in their areas, in order to match

people who need adaptations or equipment with appropriate properties. We support the call from the disability NGO sector that the use of disability housing registers by both social and private landlords should be promoted by Government at all levels. These registers record details of both accessible housing and disabled people in need of accessible housing. Lifetime Homes Standards must take into account the needs of other disabled people other than just wheelchair users (e.g. deaf and hearing impaired people).

Older Women

134. Over 20% of people aged over 75 live in poor housing conditions. Lone older people are more likely to live in poor housing conditions (23%) than are older couples (15%), which is particularly relevant as women make up 78% of lone person households over 60 years in London.

Older Lesbians

135. Older lesbians experience discrimination when using community facilities for older people or when living in sheltered housing, residential or nursing homes. They may encounter homophobia from staff or other users or experience mental health effects from concealing their sexual orientation. Inability to be 'out' denies them not only a sexual identity but also their history and recognition of their social networks and relationships. There are no residential facilities that are exclusively lesbian and few, if any, social or commercial landlords take into account the needs of older and/or disabled lesbians.

Black and Minority Ethnic Women

136. BME women endure higher levels of homelessness, discrimination and deprivation than white women.¹³¹ Amongst Bangladeshi households headed by women in London, 40% live in accommodation with more than one person per room (20 times the national average for all female headed households) and 17% live in accommodation with more than 1.5 persons per room (compared with an average of 1% amongst all households headed by women). Almost half of all Bangladeshi households and a fifth of Pakistani households in London are living below the bedroom standard. Harassment has a major impact on the quality of life of BME women and acts to limit their housing choices. Four in ten Asian (Indian, Pakistani or Bangladeshi) women and one third of black women nationally are "very worried" about racist attacks,¹³² yet racial harassment is seldomly addressed in housing policy.¹³³ Because their immigration motivations and patterns are different to other BME groups, Irish people are most likely to live in single person households which often exacerbates isolation and social exclusion.

Refugee and Asylum Seeking Women

137. Poor conditions, overcrowding and fire risks are common in housing offered to asylum seekers and refugees¹³⁴ and this often leads to poor quality of life and health effects. Women may be inappropriately housed with men.

Transgender Women

138. Transgender women are especially vulnerable to harassment, especially where they live, sometimes forcing them to find new accommodation. This impacts on their health and may result in losing valuable support networks.

Young Women

139. Although there is a popular stereotype that young women become pregnant in order to secure council housing from the State, the reality is that most young mums stay at home. However, for many other young mothers this is not possible because of difficult family relationships. When young mothers are offered council housing, it is often poor quality in deprived areas with high crime rates and few amenities.¹³⁵

I40. Vulnerable young people are particularly at risk of homelessness or being taken into care. One in four runaway children will sleep rough and 67% of young runaways will stay with a stranger who will abuse them.¹³⁶

I41. Poverty amongst the young is exacerbated by changes to the welfare support system including the removal of the right to benefits for 16 and 17 year olds and reduced levels of benefit for those aged between 18-25 (Social Security Act 1988). Housing Benefit should be reinstated for the under 18s and welfare entitlements should be equalised for 16 and 17 year olds. Young women employed in the formal labour market are concentrated in poorly paid, insecure, temporary and low skilled occupational jobs. Given the high costs of accommodation, especially in relation to pay, young women may find it impossible to support themselves in safe and appropriate accommodation. Homelessness creates a range of risks for women (and especially young women) including violence, worsening poverty, committing offences, deteriorating health etc.

Temporary Accommodation

I42. Domestic violence is one of the main causes of women's homelessness. The policy of most housing departments in London is to make one reasonable offer of permanent accommodation to homeless households. This is not the most appropriate option for women survivors of domestic violence due to the need to possibly vacate the area, poor facilities, overcrowding, isolation, lack of security, possible harassment from other residents or no provision for children.

I43. There is an unmet demand for services for disabled women and women with learning difficulties who are experiencing domestic violence. Presently, there is only one shelter in London for women with learning difficulties who have been abused which is over subscribed and expensive and some social service departments are unwilling to refer. Refuge accommodation in London does not meet the recommended provision of one family space per 10,000 of the population. There is also a need for second stage housing for women experiencing domestic violence (low support environment before making the transition to permanent accommodation). There is evidence that women with mental health problems find it more difficult to access housing support services as accommodation is not available to meet their needs and women may be housed in refuges which are unable to provide mental health support.

Q: What policies will the Government implement to address the impacts of housing on women's health and safety?

ARTICLE 15: LAW

Public Funding of Legal Representation

I44. Public funding is a vital part of access to justice for women in the UK. We are therefore extremely concerned at the serious and worsening problems in publicly funded work in the UK. The third Law Society Gazette Legal Aid Survey, undertaken in 2004, found that 74% of solicitors' firms offering legal aid had turned away clients in the last year, with the percentage rising to 86% in London. Almost 75% said they did not expect to be doing the same amount of legal aid work in five years time. Family law provision is in particularly dire straits - of the 20% of respondents to the survey who had dropped an area of work, 19% had ceased doing family cases. Overall, 91% of respondents said they were dissatisfied with the system, with 88% feeling more pessimistic than they did last year.¹³⁸

I45. Vulnerable members of society may find it very difficult to get help with family problems, and this is especially dangerous where women are experiencing domestic violence. We believe the current and

worsening situation will lead to real threats to the safety of women and children who are unable to get access to legal help. Problems of access are especially acute for women from rural communities. The Beijing Platform for Action, of which the UK Government is a signatory, calls on Governments to: "Strengthen existing or establish readily available and free or affordable alternative administrative mechanisms and legal aid programmes to assist disadvantaged women seeking redress for violation of their rights".

Q: How does the Government intend to secure women's access to justice in the light of the deepening crisis in publicly funded legal work?

Women in the Judiciary System

146. We welcomed the package of legal reforms outlined in the Constitutional Reform Bill presented to Parliament in February 2004. The reforms were intended to address, among other things, the representation of women in the judiciary, the Queen's Counsel (QC) system and the creation of a Supreme Court. We regret that the House of Lords rejected the first proposals, and would encourage the Government to work with peers to ensure that the reforms go through.

147. Meaningful access to and administration of justice is dependent on having a diverse and representative legal profession, at all levels. Women are under-represented in the legal profession as a whole, and particularly at the higher levels, including among the judiciary. Women from disadvantaged or socially excluded backgrounds are seriously under-represented within the profession, to the detriment of the justice system.

148. Any future strategy on judicial appointments must be thoroughly equality proofed. This means checking the impact of proposals on people within the six equality strands: gender, ethnic background, disability, sexuality, age and religion. In the context of judicial appointments, we would also argue that the social and economic background of judicial applicants should be taken into account in measures intended to result in an appropriately diverse judiciary.

149. The strategy on judicial appointments must make positive steps to encourage women to ascend to the higher levels of the profession. This would include allowing family-friendly working hours, part-time working, and ensuring that women do not suffer disadvantage in returning to the profession after time out to raise children or meet other care responsibilities. We welcome the proposal to have reserved seats for lawyers who have taken career breaks at Recorder and District Judge level.

150. All current and future members of the judiciary should receive compulsory equalities training relating to the strands identified earlier. There should also be mandatory training on key issues including domestic violence, sexual violence, homophobic and racial hate crimes, harassment and discrimination.

151. We believe that the QC system in its current form perpetuates the under-representation of particular groups at the highest levels of the profession and that the system, therefore, needs to be replaced by a quality mark standard involving ongoing quality assurance checks. We believe that such a system would better enable clients to make informed choices about counsel, would increase diversity and accountability at the most senior levels of the Bar, and would consequently make significant improvements to women's access to justice in the UK.¹³⁹

Q: What provisions will the Government make for positive action for disadvantaged women in accessing and progressing through the legal profession and judiciary?

ARTICLE 16: MARRIAGE AND FAMILY LIFE

Domestic Violence

152. We believe that the issues of violence against women engage several Articles under the Convention, however as the UK Government has chosen to deal with domestic violence primarily under Article 16, so do we.

Black and Minority Ethnic Women

153. Little information exists about the experiences of BME women living with domestic violence or the intersection of racism and gender violence in this country. As studies in other countries have shown, racism has a direct impact on experiences and effects of violence on BME women. BME women may be afraid or reluctant to report domestic violence to the Police due to previous experiences, or fear, of racism. They are less likely to have adequate resources to leave the abuser, may not know that services exist or may find it difficult to find organisations that provide culturally appropriate services. Research shows that for these reasons, BME women are likely to endure domestic violence for longer periods.¹⁴⁰

Lesbian, Bisexual and Transgender Women

154. In a national survey undertaken in 1999, 64% of women surveyed had experienced some form of homophobic violence or harassment.¹⁴¹ Seventy-five per cent of lesbians who had been assaulted felt unable to report the crime to the Police.¹⁴² In 2001, 1,600 homophobic incidents were reported to Police yet only 18% were cleared up.¹⁴³ Reports of violence against LBT women indicate that, like violence against women in heterosexual relationships, the perpetrator will be known to the victim yet the clear up rate, when reported to the Police, is low and inconsistent across London boroughs. There are no mainstream services for LBT women fleeing domestic violence in the UK and there is evidence that lesbians routinely face homophobia in women's refuges.¹⁴⁴

Immigrant Women

155. Immigrant women who marry a UK citizen are not permitted recourse to public funds for two years. For many of these women experiencing domestic violence, homelessness, destitution and the threat of deportation are often the alternatives to leaving a violent relationship (although women are able to apply under the Domestic Violence Rule for indefinite leave to remain). The situation is growing worse and women's organisations, particularly BME women's groups, are increasingly feeling the strain on their resources as they rely on rental and housing benefits from Government (which these women are not entitled to). We urge the Government to review the current situation with reference to recommendations made by women's NGOs.

156. Immigrant women married to citizens of the European Community are subjected to five years probation and the Domestic Violence Rule does not apply where the woman's partner is a non-British male citizen. Therefore, these women are extremely vulnerable to deportation if their partner applies for a divorce, as they lose their right to stay in the UK.

Refugee and Asylum Seeking Women

157. We remain deeply concerned by key elements of the existing asylum and immigration system which fails to provide adequate recourse for women experiencing violence.¹⁴⁵ The Nationality Immigration and Asylum Act 2002 has been particularly devastating for women who are often more vulnerable to violence and other social forces than their male counterparts. Women whose immigration status is insecure may also not call the Police for fear of arrest, which invalidates many of the protections of the Nationality Immigration and Asylum Act 2004. We argue that a fair asylum and immigration system with

adequate protection for all women should form an integral part of any effective national strategy for domestic violence.

Domestic Violence Legislation

158. The publication of draft specific domestic violence legislation, the Domestic Violence, Crime and Victims Bill in late 2003 is warmly welcomed. We are encouraged by the high priority given to domestic violence in the Government's legislative agenda, including the commissioning of a review by the Law Commission of the law relating to partial defences to murder.¹⁴⁶ This issue has particular relevance to abused women who kill.

159. Nevertheless, we regret that at the time of writing, the Government has not included in the Bill a satisfactory definition of domestic violence, of the kind that has proven vital in maximizing efficacy of specific domestic violence legislation in New Zealand.

160. We believe that a much stronger and more inclusive definition of domestic violence should be used to frame the strategy and we would endorse that used by the UN Special Rapporteur on Violence Against Women, who cites the United Nations Declaration on the Elimination of Violence Against Women. In Article 2, violence is defined as encompassing but not being limited to "physical, sexual and psychological violence occurring in the family, including battering, sexual abuse of female children in the household, dowry-related violence, marital rape, female genital mutilation and other traditional practices harmful to women, non-spousal violence and violence related to exploitation".

161. The Special Rapporteur has further adopted an expansive definition of violence in the family to include "violence perpetrated in the domestic sphere which targets women because of their role within that sphere or as violence which is intended to impact, directly and negatively, on women within the domestic sphere. Such violence may be carried out by both private and public actors and agents. This conceptual framework departs from traditional definitions of domestic violence, which address violence perpetrated by intimates against intimates, or equates domestic violence with woman-battering".¹⁴⁷

162. The forthcoming legislation must provide an effective and sustainable framework to maximise women's safety and monitoring procedures put in place to ensure that this opportunity is fully taken up. We would recommend that women's organisations and survivors of domestic violence be involved in monitoring, as well as representatives of disabled women, LBT women, and women from BME communities.

163. We believe that no truly integrated and successful legislation on domestic violence will be possible without a thorough engagement with issues of child contact. We favour New Zealand's model which features a rebuttable presumption of non-contact in instances of domestic violence.¹⁴⁹

Access to Justice

164. We would urge the Government to prioritise more accessible Legal Aid funding for nonmolestation orders with powers of arrest attached. This might involve abolishing the means test for survivors of domestic violence, recognising that women may find themselves in real financial difficulty when attempting to deal with a situation of domestic violence. Given the average £2,000 cost of getting a non-molestation order, the lack of Legal Aid currently means that many women in desperate need of an order cannot get one. An alternative to such a policy for all orders might be the establishment of properly funded drop-in centres nationwide where women could get free assistance in applying for orders.

165. We believe that such measures would be essential to meet the Government's obligations under the United Nations Declaration on the Elimination of Violence against Women, and particularly the right to "access to the mechanisms of justice and, as provided for by national legislation, to just and effective remedies for the harm that they have suffered" as provided by Article 4(d). The importance of meaningful access to justice is reiterated by the UN Economic and Social Council resolution 1997/24 on Crime Prevention and Criminal Justice Measures to Eliminate Violence Against Women¹⁴⁹, which urges States to "ensure that women subjected to violence receive, through formal and informal procedures, prompt and fair redress for the harm that they have suffered, including the right to seek restitution or compensation from the offenders or the State".

Q: How will the Government address the lack of appropriate services for marginalised women? How will the success of the Domestic Violence, Crime and Victims Bill and the various measures and projects adopted, be measured?

Sexual Assault and Rape

166. We broadly welcome the Sexual Offences Act 2003 (not least as it forms a partial response to the crisis in prosecutions for sexual offences), although we are concerned about the Act's efficacy not only in improving conviction rates for sexual offences but in increasing reporting of sexual offences. Of the small number of reported rapes, only 5.8% result in conviction.¹⁵⁰ However, there is an urgent need for service providers to implement best practice nationwide. This would help to counteract the massive under-reporting of sexual offences. We would endorse the recommendations made by the Fawcett Society who called for an increased number of Sexual Assault Referral Centres (SARCs) to provide a comprehensive nationwide service.¹⁵²

167. We have also noted with concern the recent demise of the Rape Crisis Federation, the national co-ordinating body of rape crisis services throughout the UK, which followed the closure of the London Rape Crisis Centre. We would urge the Government to ensure adequate service provision including support and counselling is available for all survivors of sexual offences. This must include support for women's voluntary and community organisations who are providing 'by women, for women' services.

168. The relationship between domestic violence and sexual assault is well established, and it is clear that the low conviction rates in both these areas also apply in domestic sexual assaults. The Metropolitan Police found that of the 175 domestic sexual assaults recorded in London between January and March 2001, only four perpetrators received a sentence, the maximum of which was 14 months.¹⁵³ This statistic is particularly shocking in the light of the low reporting rate of such offences. We urge the Government to devote particular attention and resources to increasing conviction rates for domestic sexual assault and to supporting survivors and their children, including services provided by the women's NGO sector.

Q: How will the success of the Sexual Offences Act, and the various measures and projects adopted, be measured? What other steps will the Government take to ensure that conviction and reporting rates for rape and sexual offences substantially improve before the next CEDAW report? What additional provision for counselling and support services will the Government make?

APPENDIX I

Shadow Report Writers

ABANTU International
African HIV Policy Network
Latin American Women's Rights Service
Polari
Rights of Women
The Sainsbury Centre for Mental Health
Women's Resource Centre

Consultation Participants

1990 Trust
African Women's Welfare Association
Brighton Oasis Project
British Council of Disabled People
Christian Women's Hostel
Christian Women's Resource Centre
Community Action
Greater London Action on Disability
Greater London Domestic Violence Project
Greenwich Women's Centre
Imkaan
Justice
London Irish Women's Centre
Newtec
Object
People First
Race on the Agenda
Reading Women's Information Centre
Refugee Council
Revolving Doors Agency
South East Racial Equality Network
South London Fawcett Society
Surestart Westminster
Wandsworth Women's Aid
Women's International League for Peace and Freedom
Women in Planning
YWCA

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