



OFFICIAL REPORT
AITHISG OIFIGEIL

Equalities, Human Rights and Civil Justice Committee

Tuesday 14 September 2021

Session 6



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Pàrlamaid na h-Alba

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EQUALITIES, HUMAN RIGHTS AND CIVIL JUSTICE COMMITTEE
3rd Meeting 2021, Session 6

CONVENER

*Joe FitzPatrick (Dundee City West) (SNP)

DEPUTY CONVENER

*Maggie Chapman (North East Scotland) (Green)

COMMITTEE MEMBERS

*Karen Adam (Banffshire and Buchan Coast) (SNP)

*Pam Duncan-Glancy (Glasgow) (Lab)

*Pam Gosal (West Scotland) (Con)

*Fulton MacGregor (Coatbridge and Chryston) (SNP)

*Alexander Stewart (Mid Scotland and Fife) (Con)

*attended

THE FOLLOWING ALSO PARTICIPATED:

Dr Rebecca Crowther (Equality Network)

Paul Daly (LGBT Youth Scotland)

Jess Dolan (Scottish Government)

Shona Robison (Cabinet Secretary for Social Justice, Housing and Local Government)

Megan Snedden (Stonewall Scotland)

Vic Valentine (Scottish Trans Alliance)

CLERK TO THE COMMITTEE

Katrina Venters

LOCATION

The James Clerk Maxwell Room (CR4)

Scottish Parliament

Equalities, Human Rights and Civil Justice Committee

Tuesday 14 September 2021

[The Convener opened the meeting at 10:00]

Decision on Taking Business in Private

The Convener (Joe FitzPatrick): Welcome to the Equalities, Human Rights and Civil Justice Committee's third meeting. All members are present. Karen Adam MSP joins us remotely on the BlueJeans platform.

Agenda item 1 is a decision on whether to take items 5 and 6, which are consideration of today's evidence, in private. Do members agree to take items 5 and 6 in private?

Members indicated agreement.

Petition

Conversion Therapy (PE1817)

10:01

The Convener: Item 2 is further evidence on petition PE1817, which calls for an end to conversion therapy. I welcome to the meeting our first panel of witnesses: Megan Snedden, policy and campaigns manager for Stonewall Scotland; Dr Rebecca Crowther, policy co-ordinator for the Equality Network; Vic Valentine, manager for the Scottish Trans Alliance; and Paul Daly, policy and research manager for LGBT Youth Scotland.

We are keen to hear a brief introduction from each of the witnesses. I ask Megan Snedden to kick off.

Megan Snedden (Stonewall Scotland): Rebecca Crowther and I have prepared a short opening statement, so I will start that.

We thank the committee for inviting us to give evidence and for commencing its consideration of the petition so early in this session of the Parliament. Our organisations—Stonewall Scotland, the Equality Network, the Scottish Trans Alliance and LGBT Youth Scotland—have been collaboratively engaging with the Parliament on the petition since the Public Petitions Committee first considered it in the previous parliamentary session. We strongly support the principles of the petition to end conversion therapy. We also support calls for a comprehensive ban that will root out conversion therapy practices in all their forms. In order to protect LGBTQ+ communities from harm, action must be taken to prohibit conversion therapy from being provided and promoted in Scotland.

The United Nations independent expert on protection against violence and discrimination based on sexual orientation and gender identity has called for a global ban on conversion therapy. In a 2020 report to the UN Human Rights Council, he stated that conversion therapy practices inflict

“severe pain and suffering and result in psychological and physical damage”,

and that they are

“by their very nature degrading, inhuman and cruel and create a significant risk of torture.”

He further states that such practices are

“based on the incorrect and harmful notion that sexual and gender diversity are disorders to be corrected”.

Dr Rebecca Crowther (Equality Network): The independent forensic expert group recognised that conversion therapies have

“no medical or scientific validity”,

that there is no sound scientific evidence that conversion therapy in any form is effective in changing LGBTQ+ identities, and that there is

“no medical justification for inflicting on individuals torture or other cruel, inhuman, or degrading treatment or punishment.”

We note that there is a united call across the LGBTI sector in Scotland and the rest of the United Kingdom for an end to conversion therapy. We also note that, as the committee has seen in the responses to the call for views, NHS Greater Glasgow and Clyde, the memorandum of understanding on conversion therapy coalition—the MOU coalition—the Royal College of Psychiatrists, the Royal College of General Practitioners, the Mental Health Foundation, the Equalities and Human Rights Commission, the Scottish Human Rights Commission, Children in Scotland, Amnesty International, the Human Rights Consortium Scotland, the Humanist Society Scotland, the National Secular Society and many religious bodies, including Sukkat Shalom Edinburgh Liberal Jewish Community, the Religious Society of Friends, known as the Quakers, and many smaller Christian denominations, are all in favour of a comprehensive ban.

We hope that the committee will consider holding a private evidence-taking session if there are survivors who need such privacy. Several survivors responded to the call for views. One said:

“I am a victim of a form of conversion therapy. I have struggled with my mental health and made attempts to take my own life. I do not want other ... LGBTQ+ people to go through what I did at school. It is hard to believe that conversion therapy can and does still happen ... Being cast out and isolated had a deep and long lasting impact on me ... Some LGBTQ+ people can be extremely vulnerable and feel isolated because we are already part of a minority and pressure to fit into a religious community can be a powerful driver in people feeling like they should change or suppress the fact they're LGBTQ+.

I have been so damaged by prayers”.

The Convener: Thank you very much. Unless Vic Valentine or Paul Daly wants to make an opening statement, we will go straight to questions.

There are a fair number of areas that we want to ask about and, with four witnesses on the panel, it will take for ever if everyone answers every question. The witnesses should make some sort of signal as to who will answer a question so that I know to bring them in. Some committee members might direct their questions at one witness or another.

I will ask the first question that I asked last week. In the written evidence that we received, many people from both sides—whether they are in

favour of or against a ban—made the point that it is important that we define conversion therapy. Obviously, before we ban something, we need to know what that something is. Does Vic Valentine want to kick off on that?

Vic Valentine (Scottish Trans Alliance): We agree that it is important to define conversion therapy clearly so that people know what they should and should not do. One of the best examples of that is in the legislation that was passed recently in Victoria. In essence, conversion therapy is an approach that has a predetermined outcome for what it wants to do to an LGBT+ person: it wants to change or suppress their sexual orientation or gender identity. It is not about providing space for the person to seek support from someone, explore how they feel or talk to someone if they are struggling with their identity. Nor is it about working through what steps they might take or how they might live their life to come to peace with who they are. It is specifically about someone going into such conversations or practices knowing in their mind that being LGBT+ is unacceptable and seeking to change or suppress it in some way.

Dr Crowther: We are talking about all directive practices that seek to change people with or without their consent. That does not include gender-affirmative, supportive healthcare, which is a good thing. A ban is not intended to prevent supportive pastoral care, explorative supports or prayer that does not seek to change people. It does not include non-directive counselling or therapy. Nor does it include conversion to Christianity or any other faith as long as that conversion does not try to encourage changing or suppressing one's sexual orientation or gender identity.

Pam Duncan-Glancy (Glasgow) (Lab): I thank the witnesses for coming. I declare an interest: I supported the campaign to end conversion therapy in all its forms.

The committee has received various suggestions relating to the concern that some medical practitioners might be criminalised if they do not affirm a young person's gender identity. Rebecca Crowther mentioned what is included in the witnesses' definition. What is your response to the suggestion that medical practitioners might be criminalised? Would the definition of conversion therapy provide clarity on the type of practice that is and is not acceptable from the medical profession?

Dr Crowther: On a base level, we agree that any support for someone to explore their gender identity is positive. People often need support through their exploration of their gender identity. It is not easy for most people, so we agree that it is great to provide support.

There is a lot of talk about a staunchly affirmative approach. The idea is that people only affirm and ask no questions, which is not normally the case in conversations about someone's gender identity in services.

Vic Valentine is probably the best person to answer the question.

Vic Valentine: People sometimes misunderstand what “affirmative” means in this context. They rush to the assumption that it means that, if someone were to approach a medical professional and say, “I think I might be trans,” the professional would be expected to respond by saying, “Yes, you absolutely are. Fabulous!”

I brought along the definition used by the American Academy of Pediatrics, which works with trans and gender-diverse young people in America, which says that affirmative therapy is

“appropriate care that is oriented toward understanding and appreciating the youth's gender experience.”

It says:

“A strong, nonjudgmental partnership with youth and their families can facilitate exploration of complicated emotions and gender-diverse expressions while allowing questions and concerns to be raised in a supportive environment.”

By “affirmation” we mean that, if someone has questions or concerns about who they are, a medical professional will respond to them with care and empathy and tell them that it is okay that they feel that way and that they can explore it together and find out what it means for the person. It does not necessarily mean that the professional points someone in a pro-transition or anti-transition direction. It is about holding the space for the individual to find out who they are and ensuring that they can come to that decision themselves.

Pam Duncan-Glancy: Thank you. That is helpful. Your submissions speak about the need for a comprehensive ban. What do you consider such a ban to be? Is it likely that the United Kingdom Government will bring in a comprehensive ban when it introduces legislation to ban conversion therapy? Do you have concerns about, for example, the Prime Minister's reference to “gay conversion therapy”, as opposed to LGBT conversion therapy?

Megan Snedden: When we refer to “a comprehensive ban”, we mean banning conversion practices that cover sexual orientation and gender identity to protect all LGBTQ+ people. We are talking about a ban that protects people of all ages equally—not only children and young people, but adults, too. We also mean a ban that covers practices across all settings, whether those are public, private, faith based, health or domestic. The most important thing for us is the motivation

or intention to change or suppress someone's sexual orientation or gender identity, rather than where it takes place or who conducts it. We also do not want to introduce any other restrictions on who can be protected by a ban on conversion therapy, such as people who are said to have consented to the practices. We are keen to ensure that there are no loopholes in the legislation in relation to whom it protects.

We are still unsure what the UK Government's proposals will look like. We are aware that the Government is committed to banning conversion therapy, and it seems likely that that will cover sexual orientation and gender identity. The consultation on those proposals is likely to open at the end of September or the start of October and run for six weeks. That process should give us more indication of the proposals and whom they will cover.

We are keen for the Scottish Government to develop a policy position on the way in which it would like to see conversion therapy banned that sets out the red lines, so that we can mark the devolved action against the UK Government's proposals. However, we were interested to see in the committee papers Kemi Badenoch's comments to the Minister for Equalities and Older People stating that the ban's territorial application is likely to cover only England and Wales, apart from in reserved areas, in which it would apply to the whole UK. That is an interesting indication that we are likely to need legislation in the Scottish Parliament, and we hope that the Scottish Government will develop its position on that.

Dr Crowther: Alongside an effective comprehensive legislative ban, we hope to see other work, including awareness raising and work with faith leaders, across different cultural spaces and with different communities, which will come at the matter from completely different perspectives. Of course, people who have suffered conversion therapy in different communities and cultural backgrounds will have different experiences of what it looks like. That is another reason why it is important for the committee to engage with survivors.

We also hope to see some civic work on investigations. The bill that was passed in Victoria in Australia this year gives that right to an equalities commission, and we suggest that a similar role could be given to the Scottish Human Rights Commission. It does not have those powers currently, although we note that the “National Taskforce for Human Rights Leadership Report” suggests that the SHRC could have more powers, such as the power to explore and investigate.

Education is important—we know that Karen Adam has some interest in that and might want to

ask more questions on that—but it would be a mistake not to do the wider work. Cultural sensitivities must be recognised, otherwise a ban could just drive conversion therapy further underground and further alienate and harm the community.

The Convener: Fulton MacGregor, that is connected to the area that you were going to ask about, so do you want to come in?

10:15

Fulton MacGregor (Coatbridge and Chryston) (SNP): I was thinking that as well, convener, and I got a good cover on it. Like Pam Duncan-Glancy, I declare an interest, as I also signed the end conversion therapy petition during the election campaign.

Megan Snedden has already given a good overview of the issues and, given what the convener said, I do not want folk to have to go over things, but I wonder whether any of the other panel members want to talk about the complexities of legislation, such as what the UK Government is likely to legislate on, what we can legislate on and how those areas might interact, where that interaction might hold us back and where it might present opportunities to go further. Does anyone want to elaborate on the points that have already been made or bring new points to the table?

Vic Valentine: The two main areas that might be reserved are around protection from abduction from the country, such as removing people from Scotland to undergo conversion therapy elsewhere, as well as an approach to regulating public bodies that is above and beyond the existing memorandum of understanding between many health organisations. As Becky Crowther said, a lot of the wraparound and civil stuff is potentially of significantly greater importance, but the bulk of the legislative aspect is about the criminal ban, and that would be fully devolved to the Scottish Parliament.

Fulton MacGregor: I have a supplementary question. We do not know exactly what the UK Government legislation will be in that area but, from our panel of witnesses last week, we heard tentative concerns about how it might be impacted by certain types of lobbying. Based on what you said, there is scope for the Scottish Parliament to go further and be more robust in the legislation that we bring out, given the concerns that have already been raised on the record and to the committee.

Vic Valentine: I do not think that there is any specific reason to wait for the UK Government's proposals in order to try and work jointly with legislation that comes out at Westminster. It is fully within this Parliament's powers to enact a criminal

ban so, given that the committee is putting so much effort into hearing views and engaging with people, it would make perfect sense—and be a positive thing—for this Parliament to shape the direction of what the legislation might look like in Scotland, rather than waiting on Westminster, when we do not know exactly when that legislation will be delivered or what it will look like.

Fulton MacGregor: Thank you. I see by your fellow witnesses nodding their heads that they are very much in agreement.

Maggie Chapman (North East Scotland) (Green): I thank the witnesses for coming along this morning; like Pam Duncan-Glancy and Fulton MacGregor, I also signed the end conversion therapy petition during the election campaign.

I will pick up on a couple of things that you have said around cultural sensitivities and the definition of conversion therapy being all-encompassing, including behaviour or activity that is “with or without” consent or without consent and the notion of partnership working. If we look at those issues with particular reference to religious and faith groups and the tensions between religious and faith beliefs, understandings and practices, in particular, that “with or without” consent part could be quite tricky and might cause concern for some faith leaders. Could you say a little more about that? Do we need to consider any exceptions, specifically around the expression of religious freedoms?

Dr Crowther: I took the time to read through all 426 of the responses that have been published so far, and something that frequently came up, particularly from religious people, groups and organisations and those who support religious LGBT people, is that question about religious freedom. The concern that most people seem to have around that is the right to prayer and freedom of speech, which we came up against with the Hate Crime and Public Order (Scotland) Bill as well.

We are all for freedom of speech, and we are certainly not anti-religion. We are very happy about and open to people praying with and supporting other people pastorally and, as Vic Valentine said, engaging empathically. However, a line needs to be drawn where that treads into coercive control and is practised “upon” people and in a directive, agenda-led way to change that person.

It is going to be a task to get that definition right, but I think that most would agree that, if you know that you are actively doing something to someone in the hope that it will change who they are—in a futile way, because we know that we cannot change LGBTQ identity—you know that that is wrong. Banning that, or involving it in a legislative

ban, would not encroach on religious freedom, in our thinking. Nothing within everyday religious or church practices should or would change. People can give a sermon or speak to their followers or lead a church service and say basically whatever they like, as long as they are not actively trying to change who somebody is, either in a private or in a one-on-one space, or by calling them out during those services and inflicting harm on them.

There is an idea that such prayer is lesser than, for example, electroshock therapy, but we know, and reading the evidence certainly shows, that that kind of prayer is harmful. It can lead to feelings of self-doubt, isolation and minority stress, and we know that that leads to mental health problems and can lead to acute mental health problems and suicidal ideation. It is just as harmful, to a degree.

Megan Snedden: I would like to make a couple points. A key defining feature of conversion therapy is that it has a predetermined, one-directional outcome: it tries to change or suppress someone's sexual orientation or gender identity. On the contrary, neutral or supportive and affirming therapies, prayers or faith-based practices that allow people to come to terms with, understand and accept their identity are an entirely different thing. Those should be encouraged, and faith leaders should be encouraged to provide that kind of spiritual support.

On consent, I echo the comments that were made at last week's committee meeting that people should not be able to consent to abuse. It is important to consider the question of why people would agree to conversion therapy. Many LGBTQ+ people will feel uncomfortable about that identity, will find it difficult to accept and will want to change it. That is because of the views of society and the marginalisation and stigmatisation of those identities. Conversion therapy is another form of repression and discrimination, and the state has a role to step in with regard to it.

There is also the question whether people can actually give informed consent to conversion therapy. The evidence shows that it is not effective, but it is harmful. The independent forensic experts group, which functions under the International Rehabilitation Council for Torture Victims, concluded that for an individual to give informed consent to conversion therapy, they would need to be

"informed about the practices that will be applied, as well as their ineffectiveness, the likely physical and psychological harm that will result, and the inability to achieve the desired result."

We also note that the law in Victoria defines conversion therapy as practices that are carried out

"with or without the person's consent",

and the bill that is going through New Zealand's Parliament includes a provision stating that a person's consent for the treatment "is not a defence".

Paul Daly (LGBT Youth Scotland): On the point about religious freedom, I draw the committee's attention to the submission from Amnesty International, Human Rights Consortium Scotland and JustRight Scotland, who said that the United Nations special rapporteur has said that discrimination and violence against LGBT people cannot be justified by religious beliefs, that the state has a responsibility to

"protect the life, dignity, health and equality of LGBTI+ persons",

and that

"banning such discredited, ineffective, and unsafe practices ... is not a violation of the right to freedom of religion or belief under international law."

Maggie Chapman: Thank you for that. Who, then, has the responsibility for ensuring that victims of coercion or the kind of non-consensual approach in a faith-based setting, which Megan Snedden talked about, know that what is happening is wrong? I suppose that it comes back to education and collective responsibility in society. Does anyone have something else to say about that? If people do not know that what is happening to them is wrong, how can they get out of that situation and get support?

Dr Crowther: I will make one comment and then pass the question over to Paul Daly, who will be keen to answer it. It might be a good idea for the committee to speak to people in the women's sector who have a lot of experience around understanding how coercion works in the context of domestic abuse, and to ask them about how they message people who are suffering or have survived coercion. They might have something useful to say.

Paul Daly: Becky Crowther covered this issue earlier. The bill in Victoria places obligations on the state's human rights commission to receive and investigate reports on institutions that are undertaking conversion therapy and to educate in that regard. There is a place for involving the institutions that we have here and ensuring that they can visit establishments and educate people who might be given conversion therapy.

The Convener: A number of witnesses have mentioned Victoria. Karen Adam has questions that are relevant in that regard, so I will bring her in.

Karen Adam (Banffshire and Buchan Coast) (SNP): Good morning. I declare that I, too, supported the campaign.

There has been momentum towards a ban, internationally, although some countries that committed to enacting a ban have stalled at the consultation process. In some nations, there is not the political or cultural will to counter the form of torture that we are talking about. Do the witnesses think that there is the political and cultural will here?

Megan Snedden: We warmly welcome that the five parties that were elected to Holyrood in the recent elections have all committed, in one form or another, to banning or ending conversion therapy. That is a really good starting point for this session of the Parliament.

The Convener: Do people have wider observations to make about the international picture?

As they do not, I will bring Karen Adam back in.

Karen Adam: It comes back to education, which Rebecca Crowther touched on. Outreach and partnership work might be needed with organisations that fear the consequences of a ban. Some organisations might have misconceptions about the implications of a ban for their freedom of speech. The issue is about striking the right balance and getting the point across that there is also a freedom of choice angle. Are we considering the international perspective and looking at what has stalled work on bans, so that we in Scotland can learn from that?

10:30

Dr Crowther: It is actually really difficult to garner what is best practice or how things are working internationally, which I think is why we all kept our mouths shut when you asked that question. The legislation in Victoria is the only one that has been fully enacted, and that was only last year, so we have no longitudinal studies of, for example, how it is affecting people, whether it is going well, how it is affecting different culturally diverse communities or how education is landing in those communities. It is therefore hard to comment on that.

However, what we would all encourage and hope for is engagement with groups representing diverse communities. Edinburgh's liberal Jewish community responded to the consultation, as did Hidayah LGBT, which supports and advocates for Muslim LGBTQ people. We are aware of some churches in Glasgow that are putting videos on YouTube, allegedly, of engagement in conversion therapy in the community, which is predominantly African. Those groups are best placed to speak on how to educate their community or work with community elders.

It would also be great if the committee were able to speak to the SHRC, which has done a lot of research on the different legislation around the world and how that is implicated in human rights. We know that, in Scotland, there is a bid to move towards a more human rights-based framework, and I think that that is a really important way of approaching the matter.

Megan Snedden: The international issue is challenging, but, as far as bans in other parts of the world are concerned, we have been pointing to around 20 US states, a few Australian states—Victoria, Queensland and the Australian Capital Territory—as well as Germany and Malta.

However, the challenge with looking at the longer-term effectiveness of such bans is that they have only been in place for up to five years; indeed, as Rebecca Crowther has pointed out, the Victoria law was passed only this year. That said, a number of other countries are looking at the issue, too; I am not sure what point of the process they have reached, but I am thinking of Canada, New Zealand, France, Finland and, of course, England and Wales. It is also important to recognise that Scotland would be one of the first countries in the world to ban conversion therapy, which again would set us out as a world leader on this matter. We should recognise the harms caused by these practices and take action on the back of that.

The Convener: I will bring in Paul Daly at this point. Perhaps, Paul, you can also touch on what it would mean to young LGBT+ people if Scotland was a world leader in this area.

Paul Daly: Sure. First, though, on the international question, one of the difficulties is that we do not know how prevalent this is, and it is really difficult to gauge how many people are affected. That is partly because conversion therapy works through shame—hiding things away and putting them in a box. We are never going to get any longitudinal studies of the impact of, say, the Victoria legislation, because we do not know the baseline. If we do not know that, we will never know the final outcome.

That is why it is so important that the committee hears directly from survivors. We are all happy to be here today, but people with lived experience need to have the opportunity to share it. After all, the impact of this will be felt by them and people like them.

As for the impacts of conversion therapy on young people, the report from the United Nations independent expert on protection against violence and discrimination based on sexual orientation and gender identity points out that young people are disproportionately subjected to such therapy. It highlights a recent global survey that suggests that

four out of five persons subjected to it were 24 years of age or younger at the time and that roughly half of them were under 18. This is therefore a significant problem for younger LGBT people—and, of course, the implications last a lifetime. The report recommends that states take urgent action to protect children and young people and that they carry out campaigns to raise awareness among parents, families and communities of the invalidity and ineffectiveness of such therapy.

Briefly on education, there is also a bit of supportive work to be done around this, not necessarily in legislation. For example, there could be awareness raising in schools and further education institutions, which might be the only safe spaces for young people who are experiencing conversion therapy. It is important that young people have some sort of safe space within schools and that guidance teachers and pastoral care teachers have some knowledge and are educated to be able to identify and support young people who are experiencing conversion therapy.

Dr Crowther: I will just jump in to make a few more points on the prevalence of conversion therapy. I think that it was mentioned at the evidence session with Blair Anderson and Tristan Gray that the UK Government's national LGBT survey in 2018, which surveyed 108,000 people across the UK, identified the scale of the provision and promotion of conversion therapy practice in the UK and found that 7 per cent of LGBTQ people in Scotland had either undergone or been offered conversion therapy, including 10 per cent of trans people in Scotland. The practice was performed by a faith organisation or group; by a parent, guardian or other family member; by a healthcare provider or medical professional; or by other, non-listed individuals and organisations. It is important that, whatever is done, it reaches all those people.

Research in 2018 by the Ozanne Foundation determined that 58.8 per cent of those who had been subject to such practice in the UK had been left with mental health issues. Of those, 68.7 per cent had had suicidal thoughts, 59.8 per cent had been left with depression requiring medication, 40 per cent indicated having committed self-harm, 32 per cent indicated having attempted suicide and 24.6 per cent were left with eating disorders.

Last week, Pam Duncan-Glancy raised the issue of some people in the LGBT community—for example, disabled people—being further marginalised and perhaps facing more significant barriers. Disabled people may have carers, they may be unable to leave their home without support or they may be unable to speak to other people. It is important that such further marginalised people

are looked out for. That is another argument for listening to survivors.

Megan Snedden: The question was asked last week whether disabled people are more likely to experience conversion therapy. I had a look at the data viewer for the UK Government's national LGBT survey and found that, across the UK, 2 per cent of non-disabled LGBT people had experienced conversion therapy. That rose to 4.4 per cent among LGBT disabled people. There was a similar pattern among those who had been offered therapy but had not taken it up.

Pam Gosal (West Scotland) (Con): Good morning, and thank you for coming along to give evidence.

At last week's evidence session, I asked one of the witnesses what impact their proposals would have on the support that is provided by religious leaders, specifically with regard to barriers of language and culture. Their answers were enlightening, and that has brought me to my questions today. Blair Anderson mentioned that

“around 60-plus per cent of respondents to the national faith and sexuality survey that I have mentioned came from Christian households”.—[*Official Report, Equalities, Human Rights and Civil Justice Committee*, 7 September 2021; c 15.]

I want to make clear something else that was mentioned last week: this is not just about religion. Scotland is a very diverse place, and it is crucial that the legislation reaches everyone from all religions, not just Christianity. No matter what we do, religious barriers exist, and we all know that they are often hidden. Rebecca Crowther mentioned cultural sensitivities, different communities and how we have to reach out to them differently. Paul Daly touched on how the issue affects people in different ways.

With that in mind, do you think that more research and evidence are necessary to support a ban on conversion therapy in Scotland? If so, what type of research is required and why? What about the outreach behind this? On the other hand, should we just press ahead with legislation and deal with any future issues surrounding religion later on, perhaps in secondary legislation? What role do the Parliament and this committee have in educating people? There are three areas there to think about.

Dr Crowther: That is a lot, although I tried to write down the questions.

My gut instinct is that, call it what you like—research, evidence gathering, focus groups, forums or whatever—the answer to all those questions is to listen to survivors from multiple faith groups and to engage with multiple faith groups and the organisations that work with them. That is not us, unfortunately. However, as I have

noted previously, a few of those groups have responded to the call for views. My gut is therefore saying yes, press on, but press on by putting survivors' voices at the forefront. Regardless of the views of any faith, the people who have suffered conversion therapy need to be heard if you are to hear how much harm it has caused.

You also need to hear about their experience within their own community. I am not a person of faith and I do not think that any of the witnesses is, so we do not have that sound understanding of different religions and how such practices work within them. Again, I just say to listen to the survivors.

Megan Snedden: We have compiled some case studies from across the UK of people who have experienced conversion therapy. They are available to view on the Ban Conversion Therapy website, and they include stories of people from Christian, Jewish, Muslim and non-religious backgrounds. I echo Rebecca Crowther's comments about listening to the views of survivors.

The national LGBT survey found that 4.2 per cent of Christian people had experienced this, but the figures increased for Jewish people and people of Hindu faith, and the highest figure was for Muslims. We definitely need to engage with survivors from across our diverse communities and ensure that the additional measures that we are putting in place around education, outreach and awareness raising are getting to all our communities and are available in different languages.

Perhaps we could take some learning from other jurisdictions, maybe looking at Germany or Victoria. The committee might wish to speak to people from those jurisdictions to see what they have learned.

Paul Daly: On communicating with different communities meaningfully, there is a history of legislation that does that sensitively, I believe, such as the legislation on female genital mutilation. That is not my area of expertise, but a lot of work was done to make sure that that message got through and there was successful and meaningful communication with the communities—the correct languages were used and things like that. It might be worth speaking to communities that were involved in that legislation and were impacted by that engagement to see whether there are things that we can replicate.

Dr Crowther: My comment was also going to be about FGM. Clearly, we spoke before we came here today.

I had a conversation with one of the people at the Scottish Government who worked on the FGM bill. One thing that we would hate to see here is no

engagement with cultural sensitivities or diverse communities, because all that would do is drive the practice further underground, further alienating and marginalising people and causing further harm. I think that I said that before, but it is really important. If people do not understand conversion therapy, or if they are not aware of its implications or believe that it is the right thing to do—that is often the case; people do not necessarily intend to cause harm—it will just be more hidden and there will be more stigma around it.

Pam Gosal: Thank you for your responses. Rebecca Crowther, you just said that we should press on with the legislation but that there is further work to be done and we should engage with communities. Do you think that work should be done around the characteristics of race, religion, age and disability to identify the particular issue in different groups so that we can see what is going on in those groups? If you were to look at that, what would your outreach or research look like?

Dr Crowther: I agree—100 per cent—that we should look at the issue intersectionally and recognise the different experiences and barriers, whether by speaking to Inclusion Scotland about disability or by speaking to the Coalition for Racial Equality and Rights about racial equalities and rights, for example. Those things are really important, because the practice is experienced so drastically differently in different groups.

What was the second part of your question?

Pam Gosal: I was just asking what the research that pulled all the characteristics together would look like.

Dr Crowther: I am probably the biggest advocate of qualitative research around. I absolutely think that experience and qualitative data are the most important issue in understanding what is going on. We are talking about something that happens to a minority of people in the community, so any kind of statistical research on it probably will not tell you much other than that it happens. Even then, you will not know the extent to which it happens, because people might not be open about it. It is important to have qualitative research and to speak to survivors and people across diverse faith backgrounds.

10:45

Alexander Stewart (Mid Scotland and Fife) (Con): I thank our witnesses for attending this morning. The discussion has been enlightening.

In her opening statement, Megan Snedden talked about the loneliness, the suffering, the damage and the risks that individuals who identify in certain ways face. I would like to tease out

something about the further measures that might be in place to support people. We have heard suggestions that a legislative ban might not be enough to end conversion therapy, and we have taken some evidence from organisations and individuals who have stressed that there needs to be a range of supportive measures in place across many sectors. Those measures might be practical mental health support, education and awareness work, support for survivors, and a range of developments across regulatory standards for professionals in many sectors who might be involved in such support. It is important that we understand that. What further support measures might need to be in place to ensure that a ban is successful in ending conversion therapy?

Vic Valentine: Wraparound measures outside are just as important as the legislation, if not more so. At the heart of this issue is the harm that is done to LGBT+ people through conversion therapy, and it is important to provide support to survivors and offer people who are undergoing conversion therapy an escape route.

There is a range of things that are important. We know that there will be people who have undergone conversion therapy quite far in the past but who are still experiencing long-term mental health difficulties, and there must be support for them around that. Obviously, however, there must be measures in relation to people who are undergoing conversion therapy right now. Those measures should include a way to report what is happening to a body that is able to understand the implications of that and to advise that individual about ways in which they can seek a route to escape what is being offered to them.

The issue of advocacy is also important. We know that, for lots of survivors of traumatic experiences, the criminal justice system can be retraumatising, particularly for people who do not know a lot about how to navigate the system. Sometimes, the system can be quite adversarial, and having to recount your trauma in a setting that is targeted at finding out whether you are telling the truth can be retraumatising. It is important that we have people who are able to help survivors to navigate the criminal justice system.

There are probably many other measures that I have forgotten about, but I am sure that one of my colleagues will pick them up.

Paul Daly: The wraparound support should not be brought in only after we have legislation; it needs to be brought in now. LGBT Youth Scotland is a youth work organisation, and people have reached out to us to talk about experiences that they have had. The more this topic is raised in the media and on social media, the more people will realise that other people have had the same experiences as they have had and will seek

support in addressing the impact that those experiences have had on them. Wraparound support is needed, but it should not be brought in in the future; it should have been put in place a long time ago.

Dr Crowther: I will add a brief comment, because this is something that we come up against a lot when we are talking about the LGBT+ community. A lot of work still needs to be done to understand how many things affect LGBTIQ people's mental health. Many LGBT people have been through so many things in their lives that have a long-term impact, from not being able to serve in the army to being criminalised for kissing, and from living through the AIDS crisis to experiencing minority stress and social prejudice or living in a rural area and not having social spaces. Those things are just a small part of why LGBT people are a community that disproportionately suffers poor mental health. There is so much to understand around that issue.

The Scottish Government already does work around Covid recovery and the mental health of minority groups. A forum is in place in the mental health directorate that looks at equalities, mental health and the various protected characteristics. That kind of work can happen and, as Paul said, it can start happening ahead of anything else.

Alexander Stewart: Each of your organisations exists to manage issues and support people, and you all have your ways of doing that. It would be useful to get a flavour of how you identify different needs and how you target support to ensure that survivors and people who are at risk come forward. Each individual is different, and, as you have identified, the experiences that people have gone through can be traumatic. Although some people might not wish to unravel some of those experiences, others might look to do so. How do you strike a balance so that people feel that they have the opportunity to come forward and get the support that they need?

Dr Crowther: We have many ideas, and we have had many conversations around that issue. Vic Valentine and I spoke to a national health service chaplain who also works in different churches and spaces around Edinburgh, and we all agreed that it was positive to give people a space in which to share their story but that it needed to be a space in which somebody could handle listening to that story responsibly. Talking about trauma often opens a Pandora's box, and opening it but not being able to deal with what comes out does a person a massive disservice for the sake of policy work.

We are primarily a policy organisation, not a support organisation. Although we undertake community engagement, we do not have the training to support people. If we were to

encourage you to listen to those stories, we would encourage the use of a very safe space—perhaps a one-on-one situation or a transcription of those spoken experiences. Somebody could be there who was not in any way a psychologist—we would not want to pathologise people further—but was a good, empathic, active listener who could handle the story well. I do not think that any of us provides proper support, apart from to young people.

Paul Daly: We are a youth work organisation.

Dr Crowther: Speaking to LGBT Health and Wellbeing might be a good way to start. We know that its staff have received many calls and are adept at speaking to people about these kinds of things.

Alexander Stewart: It is important that people feel comfortable. We have already touched on culture, religion and other aspects, including disability, all of which add to the complexity that an individual might feel they have to break through and the weight of what they want to express. They need to know that whomever they are speaking to will give them support and advice and, as Dr Crowther said, will not open a Pandora's box that creates a more difficult situation for them in the future. Each of your organisations has an ability to balance that support. LGBT Youth Scotland does it through the youth work sector and others look at a wider area in trying to manage these issues. The challenge is in co-ordinating it.

Dr Crowther: Anecdotally, I know that seeing the committee take the issue seriously has already made a difference to people, who feel that they will be heard and that they might want to share their story. At first, many people saw the petition and thought that nothing would be done, or they did not even think that it was an issue in the first place. The fact that the committee has taken the issue so seriously and that it is here to listen to people's experiences and views has already made a world of difference.

It is about providing that space—which is what we, as an organisation, specialise in—and facilitating those conversations, bringing people to the table and allowing them the space to explore. We will never be able to deal with everybody's trauma. We would hope that people would have the strength to come forward; if they did not, we would not encourage them to do so. People do not have to share their experience, but we hope that there are people who will.

The Convener: Fulton MacGregor might have a further question.

Fulton MacGregor: I had a round-up question to finish on, but I think that a lot of the issues have been covered. However, I will look at a specific angle.

The witnesses have talked about those we might be able to hear from to inform the committee further, and they have talked a lot about getting in people with lived experience, which I agree is very important. The clerking teams in this and other parliamentary committees are good at ensuring that that happens in a safe space. I know that from being a member of committees in the previous parliamentary session, and I am sure that we will make that happen.

Can the witnesses expand on the value they think the committee will get from hearing from those people? The answer might seem obvious, but it would be good to get it on the record. What do you think the value of that will be for the committee in taking the petition forward?

Dr Crowther: You will get clarity in a way that you will not get it from organisations that are not within the religious arena—if I can call it that—and whose people have not experienced conversion therapy. Hearing about the worst of a situation is sometimes the best way in which to gain clarity about what you need to do to prevent it from happening again.

Vic Valentine: This maybe touches on what Karen Adam asked about earlier. The committee will likely hear from LGBT+ survivors who are people of faith, but it is important to remember that we certainly do not see this issue as one where there are religious people on one side and LGBT+ people on the other. In fact, the survivors of conversion therapy are overwhelmingly, though not entirely, LGBT+ people of faith. Knowing that will probably help to bring a bit of nuance to the conversation and will perhaps diffuse the sense that it is an oppositional discussion. The majority of people who are impacted by conversion therapy are very much both LGBT+ and religious.

Fulton MacGregor: That point has been made clearly by this panel and the panel at last week's committee meeting. It is helpful to have it on the record again.

The Convener: We are out of time, so I thank the witnesses for their helpful evidence to the committee. Obviously, our deliberations on the petition will continue and we will hear from people—not least survivors, at an appropriate point—in a lot more evidence sessions on it.

I suspend the meeting briefly to change over witnesses.

10:58

Meeting suspended.

11:08

On resuming—

Scottish Government Priorities for Equalities and Human Rights

The Convener: The next agenda item is to hear from the Cabinet Secretary for Social Justice, Housing and Local Government. The cabinet secretary appears before us today to speak on behalf of both her portfolio and that of the Minister for Equalities and Older People. All our panel 2 witnesses are joining us virtually today. I welcome Shona Robison, the cabinet secretary, who is joined by Scottish Government officials Nick Parton, unit head of the connected communities division; Emma Harvey, divisional performance manager from the business support unit; Elisabeth Campbell, deputy director for human rights; and Jess Dolan, deputy director for equality and inclusion.

I refer members to papers 4 and 5, and I invite the cabinet secretary to make a short opening statement.

The Cabinet Secretary for Social Justice, Housing and Local Government (Shona Robison): Thank you, convener, and good morning to the committee. I am delighted to take on my new portfolio and I welcome new and returning colleagues on the committee. I acknowledge the strong position on equality and human rights on which, thanks to the leadership of current and past ministers, we are able to build. I am sorry that, for understandable reasons, my colleague Christina McKelvie cannot be with us today.

I will take a moment to focus briefly on the on-going situation in Afghanistan. Scotland has a long history of welcoming people of all nationalities and faiths, including those seeking refuge and asylum. Work is under way to ensure that people have the support and services that they need on arrival and as they settle into communities. We are working with the Home Office, the Convention of Scottish Local Authorities, local authorities, the Scottish Refugee Council and other partners to provide people with the safety and security that they need to rebuild their lives.

Events in Afghanistan remind us how important it is that we support human rights around the world, and I look forward to welcoming the latest participants in the Scottish human rights defender fellowship, who will be arriving from Brazil and Columbia later this month.

Our experience during the past 18 months has also reminded us that equality, inclusion and human rights are our collective responsibility. Throughout the pandemic, inequality and human

rights issues have been exacerbated, particularly for women, minority ethnic communities, disabled people and older people. We have taken significant steps to mitigate those impacts, with well over £1 billion committed to efforts to support communities and individuals at risk during the pandemic. We have seen admirable examples of people coming together to support their communities and develop new ways of working.

However, the situation has also exposed where we can do better, and we must continue to ensure that equality, inclusion and human rights are embedded throughout our work as we enter the next stage of renewal and recovery. We have invested an additional £5 million in front-line services tackling gendered violence, and we have started development of a new five-year plan to tackle social isolation and loneliness, with £1 million in funding for organisations this year.

Later this month, we will set out our immediate priorities to tackle racial inequality, building on our learning from the disproportionate impact of the pandemic on our minority ethnic communities. Furthermore, during this year, we will consult on a strategy to mainstream and embed equality, inclusion and human rights better across Government and wider society.

A human rights bill will be introduced in this parliamentary session. That will demonstrate global human rights leadership, placing Scotland at the forefront of human rights legislation and, most important, practice.

We will reform the Gender Recognition Act 2004 with a bill introduced in this parliamentary year, and ensure that LGBT people are protected from the deeply damaging practice of conversion therapy.

We will review our equally safe strategy with COSLA to ensure that we are doing all that we can to tackle the pernicious issue of violence against women and girls. We will also implement our strategy with COSLA to end destitution for those at risk due to immigration restrictions, doing all that we can within devolved powers to protect communities and support people.

Later this year, we will set out progress on tackling hate crime, before working with stakeholders to develop a new hate crime strategy. That will include implementation of the Hate Crime and Public Order (Scotland) Act 2021.

That is just a brief outline of the work to come. I welcome the opportunity to give evidence and take your questions.

The Convener: Thank you. We are keen to explore a number of issues. I do not think that we have time to cover everything today, so we will almost certainly be writing to you about a few

points that we want to pick up on. Committee members will focus on issues that they are particularly interested to hear more about.

We are keen to try to pin you down a little bit more on the timescales for legislation. You mentioned two bills in particular that you expect to be introduced, one of which will be in this parliamentary year. Can you give any further indication about when we can expect legislation to come before the committee? That will help with our planning for the work that we intend to do.

Shona Robison: We expect to move forward with the gender recognition bill next spring, so we will be giving you more information about that. The human rights bill will be introduced later in the session. Good work is being done on the bill, which is very complex. Again, we will be able to give you more defined timescales on that as we move forward. It is a far-reaching piece of legislation. Christina McKelvie recently convened the advisory board that is progressing a lot of the detailed work on the legislation. Good progress is being made.

The Convener: In a second, Pam Gosal will ask about the proposals on gender recognition. First, I will ask about the human rights legislation. You said that work is on-going. Will the committee see some of that work? As you develop the proposals, is the work likely to be published, or will that mainly take place behind closed doors?

11:15

Shona Robison: I am happy to write to the committee to give more detail on work so far, if that would be helpful. A lot of detailed work has gone on. Work is still going on but, certainly, there is plenty that we can update the committee on—in writing, if that would help in terms of time.

The Convener: That would be helpful, so that we can work out what we are going to do prior to any legislation being introduced. As you have said, it is a big piece of work.

Pam Gosal: My question is on gender recognition reform. Is there any way of telling from the individual responses what the level of support was for the draft bill?

Shona Robison: I hope that, when we take forward the bill, we can try to find as many areas of consensus as possible and that it can be done in a respectful environment—in particular, when we discuss the issues in more detail in Parliament.

You might be aware that the first consultation showed that 60 per cent of respondents were in favour of the reform. The second consultation sought views on the draft bill itself, so its approach was qualitative rather than quantitative. For example, it asked whether the minimum age

should be reduced to 16, and it included other specific questions on the bill.

Because of the volume of responses—there were 17,000—an in-depth analysis of them was not possible. That is why only the organisational responses were published; it would have taken an inordinate amount of officials' time to extrapolate all the detail from 17,000 responses. The same approach was taken in the first consultation on the issue and with the equal marriage legislation. It is important to note that there has been an independent analysis of the consultation, which has given a clear summary of views on key aspects of reform such as the minimum age.

Karen Adam: Can the Scottish Government do anything about misinformation on the gender recognition bill? We are seeing some confusion in the public mind about things that are already in place in the Equality Act 2010. Those misconceptions are leading to requests to roll back legislation that is already in place. What messaging is getting out about there being no conflict between the bill and women's rights, and about the difference between the bill and other legislation that is already in place?

Shona Robison: Karen Adam has made important points. In the second consultation, we tried to put out information and to reassure people. There is no conflict between the proposed legislation and the rights of women and girls. The Scottish Government has brought forward a huge amount of work on protecting women and girls. That work continues with the misogyny working group. The equally safe strategy, which we might touch on today, is hugely important. Through the work on the bill, we are trying to make the lives of a small number of people that bit easier by changing the process by which someone can obtain a gender recognition certificate.

Karen Adam made the point that some of the debate seems to indicate a desire to move away from the ability to obtain a gender recognition certificate in any way. I hope that, as parliamentarians, we can focus the debate on making the process—which already exists—easier and on removing the difficulties that make the lives of a small number of people very difficult. It is about making the process easier for those who are affected. As we take forward the proposals, we will ensure that they in no way impact on the rights of women and girls.

Pam Gosal: I will follow on from what Karen Adam said. This is, of course, a very sensitive subject, and a lot of people have opposing views. Mothers, daughters and wives are all very worried that the proposals will take away their protections—it would be pointless to sit here and pretend otherwise.

Cabinet secretary, given that you said that we cannot go through all 17,000 responses, how will the Scottish Government carry out further consultation and engagement on the issue before the bill is introduced? I am mindful that you said that you are looking to introduce it in spring. Should we do any further work to ensure that we protect women's rights, too?

Shona Robison: There have already been two large consultations, which have elicited a huge number of responses, as the member points out. It is not likely that a further consultation will resolve some of the existing polarised views on the bill to which the member alluded. We can best move forward by having open communication, by challenging misconceptions and inaccurate representations and by showing leadership in the Parliament. As I said, there is no conflict between the rights of a small number of trans men and women and the rights of girls and women.

Threats to women and girls come from abusive men, which is an issue that is very close to my heart, as a lifelong feminist. In my experience, those men have never found the need to pretend to be a trans woman in order to abuse women and girls. We have to tackle men's violence in society and to stay focused on where the real threat to women and girls comes from.

That said, as we take forward the bill, we will ensure that we listen to genuine concerns. There are already protections for single-sex spaces and for services that need a level of discretion, and it is important to maintain those protections. That has already been laid out.

As we move forward, even though there are divergent views, I hope that, as MSPs, we can try to take some of the heat out of the debate, dial down some of the rhetoric and consider the issues in a calm and measured way. At the end of the day, we are talking about a small number of very vulnerable people whose lives can be made that much better by the bill.

Fulton MacGregor: I agree with Pam Gosal that this seems to be a very difficult subject—certainly online.

We have talked a lot about engagement, and 17,000 responses seems to be a fairly large response. Will the cabinet secretary comment on the most recent poll on the issue and on many other subjects—I mean the election, of course—and on the manifestos of all the political parties that were elected to Parliament? How important is it that political parties commit to their manifestos when the Parliament restarts its work?

Shona Robison: Fulton MacGregor made the point that social media is not necessarily representative of society on a range of issues. I think that we all know that.

I intend to build as much consensus as possible in Parliament. There was consensus on the issue across most of the manifestos and recognition that it must be resolved. We must build consensus and tackle the issues that have been raised. If there are suggestions about how the proposed bill can be improved, we will try to reassure people as much as possible.

A process for gender recognition certification already exists; the legislation will make it that bit easier. Some who are involved in the debate want to get rid of gender recognition certification entirely. I hope that that is not where Parliament is—I do not believe that is where it is; I do not think that any party in the Scottish Parliament wants that. Therefore, we are discussing what the process for gender recognition certification should be.

The proposition is to make the certification process easier for the small number of people whose lives are affected, and ensure that we safeguard the rights of women and girls as we do so. I have already referred to the exemptions for single-sex services and to the penalties that will exist for any misuse of the gender recognition certification system.

There are safeguards. We can discuss them in more detail and I am happy to work with the committee to do that in a respectful atmosphere.

Fulton MacGregor: I want to ask about the race equality framework and action plan that was published in March, and about—you referred to this—the immediate priorities plan that was announced in the programme for government last week. Will you tell us about the immediate priorities plan and the ethnic pay gap strategy? How will they make a difference as quickly as possible to communities across Scotland?

I was the convener of the cross-party group on racial equality during the previous parliamentary session. You will be aware that organisations representing those communities feel that the Scottish Parliament and Scottish Government have good intentions but that things do not always happen as quickly as they would like them to. Will last week's announcement help in that regard?

Shona Robison: The "Race Equality Immediate Priorities Plan" was published this morning—it is hot off the press. The plan runs for 18 months, until 2023, and sets out actions to tackle the structural disadvantages faced by minority ethnic communities that have been disproportionately impacted by Covid-19. The plan includes the fulfilment of the recommendations of the expert reference group on Covid-19 and ethnicity and the cross-Government work to tackle racism. It will act as a foundation for the development of a long-term programme of systemic change from 2023 to

ensure that, by 2030, Scotland fulfils its vision of being a fair and equal country for all.

Fulton MacGregor also asked about the important issue of the pay gap. In March, we held a public sector leadership summit on race equality and employment to address the recommendations in the Equalities and Human Rights Committee report “Race Equality, Employment and Skills: Making Progress?”

We have also unveiled a joint commitment to take forward and make progress on the committee’s recommendations. In addition, we have engaged in a comprehensive strategic review on race equality policy. We must also engage private sector employers to ensure that they are aware of the need to examine their own policies. A lot of work is going ahead, but there is a lot still to do.

11:30

Pam Gosal: My question is on ethnic minorities in deprived areas. How will the Scottish Government work with those groups that have been disproportionately impacted by the pandemic? How can we help to guide that recovery?

Shona Robison: That is an important question. Part of the Deputy First Minister’s Covid recovery work is focused on listening to the experiences of those communities that have been most impacted. The DFM has undertaken a number of engagements, listening to those with lived experience to find out what their priorities are to build a Covid recovery strategy. Again, I am happy to write to the committee with more detail on that work, if that would be helpful.

Pam Gosal: Throughout the pandemic, as everybody knows, a lot of ethnic minority people have been really affected, especially front-line doctors and nurses. Is the Government doing any work in that regard? With Christmas coming up, and the flu coming—although I hope that it does not—we might go through the same situation again. How do we protect our doctors and nurses who are from ethnic minority groups?

Shona Robison: That is one of the issues that has emerged from the pandemic, not least from work showing that those groups are disproportionately vulnerable to the virus. There is a lot of learning around that to ensure that we understand the issues. In the future, the needs of those with additional vulnerabilities who are working on the front line will need to be taken into account with regard to the protections that are afforded to them in the workplace in particular. Humza Yousaf has been doing some work on that, on the back of the emerging findings from the various pieces of research that have been done.

Of course, we were quite a way into the pandemic before a lot of the evidence started to emerge, so a lot of work is still on-going. Again, I would be happy to write to the committee to furnish you with more information.

The Convener: Fulton, do you want back in on that point, or do you want to move on to your next question?

Fulton MacGregor: I have a range of questions in the same area, so if anyone else has a supplementary, I can wait.

The Convener: I think that Pam Duncan-Glancy wants to come in on this issue.

Pam Duncan-Glancy: If that is okay, convener. I thank Fulton MacGregor for allowing me in.

Last week, I met representatives of an organisation called Tell MAMA—“MAMA” stands for measuring anti-Muslim attacks—who talked about the increase in hate crime that people from ethnic minorities have experienced. One of their concerns is that such crime is being experienced more in a home setting, from neighbours and people in their local community. That has a particular impact on the way in which we use our hate crime legislation. Do you have any plans to look at that issue? Do you plan to work with housing associations, for example, to look at how we could start to address some of those concerns?

Shona Robison: That should be of concern to us all, and I ask Pam Duncan-Glancy to write to me with the details. It is the responsibility of us all, including organisations such as registered social landlords and local authorities, which have a huge role to play in supporting people in communities through their policies where there is an issue. For example, antisocial behaviour that has a racist element might breach tenancy agreements and should be taken incredibly seriously—as I think that it is—by social landlords. There is hate crime legislation in place and there are aggravated offences, so the police should be taking those issues seriously, as I am sure that they are.

I am happy to raise the issue with the Cabinet Secretary for Justice and Veterans, Keith Brown, to ensure that we consider it as we recover from the pandemic. It is perhaps a legacy issue, but it might be that issues have arisen from people being at home. People are spending more time in their homes and if they are feeling unsafe there, that is a very concerning situation.

I will certainly pick up the issue with Keith Brown and we will respond to Pam Duncan-Glancy if she writes to me with some more detail.

Fulton MacGregor: I was going to ask about the public sector leadership summit on race equality and employment, so I am glad that the

cabinet secretary included some comments on that in a previous answer. That issue is really important. As she mentioned, our predecessor committee held an inquiry into the topic, and it is good to hear that the work is being progressed.

I will move on to the Gypsy Traveller action plan. It is worth putting on record that, in the previous parliamentary session, Christina McKelvie, who is not here today, and Mary Fee were big advocates in that area. Will you comment on current progress with the action plan? Is there any evidence that it is having a positive impact on the lives of Gypsy Travellers?

Shona Robison: I am happy to respond to that. I recognise the very important work that Christina McKelvie has done in the area.

We have made good progress, particularly on the accommodation actions in the plan. The £20 million Gypsy Traveller accommodation fund, which was launched in June, will initially be focused on the development of demonstration projects to establish model sites. As part of that, we are working in partnership with members of the Gypsy Traveller community and local authorities to develop a design guide for modern, accessible sites. The fund builds on the £2 million short-term funding that was provided for public sites in 2020-21, as a sustained investment to support local authorities in relation to site provision.

Officials are organising the next community conversation, which is due to take place online later this month. In that conversation, we aim to get further feedback and insight from community members on our on-going work and issues that are important to them. We will also take the opportunity to share an update on where we are with the actions that are set out in the plan. I will be happy to update the committee on that and provide more detail, if that would be helpful.

We will also reconvene the ministerial working group on Gypsy Travellers before the end of this year to oversee progress on the action plan. I am also happy to keep the committee updated on that.

Fulton MacGregor: Thank you. With the convener's permission, I confirm that that would be helpful.

On the same topic, cabinet secretary, I want to draw your attention to a newspaper article that I saw today on Christina McKelvie's social media. Referring to the UK Government, the article has the shocking headline:

"Government says discrimination against black people and Travellers 'objectively justified' with new laws".

Under the headline, it says:

"Documents defend disproportionate impact of Police, Crime, Sentencing and Courts Bill".

I do not know whether you have seen that. I do not expect you to comment if you have not, but I wonder whether, broadly speaking, I can seek an assurance that our Government in Scotland will not seek to have a similar response or ideology, given all the work that you have outlined.

Shona Robison: I have not seen the article, but if Fulton MacGregor wants to pass it to me, I will be happy to have a look at it. I think that I have laid out pretty comprehensively the ethos with which this Government approaches any issue regarding hate crime or, indeed, the needs and rights of people from diverse communities, which is that they should all be protected.

We have taken steps to ensure that that is the case. The proposed human rights bill will be a further iteration of trying to strengthen people's rights, particularly the rights of those who are most vulnerable to hate crime.

I hope that I have given a flavour of the Government's ethos. Obviously, it is for other Governments to defend their actions.

The Convener: I call—

Fulton MacGregor: Sorry, convener—I have a supplementary question on a current issue in the same area.

I thank you for that response, cabinet secretary. You were pretty clear, and it was good to get that on the record.

My final question relates to a matter that affects people in my constituency and throughout the country, but particularly those in the west of Scotland, and which particularly centres around specific football games. It relates to the anti-Catholic or anti-Irish racism that is sometimes seen. I know that that can be more of a criminal justice issue and that what we see on social media and the queries that we get about it can perhaps require police action. Is education on such discrimination part of the plans that you are progressing and the action that you are taking? Education will be crucial if we are going to tackle the issue properly.

Shona Robison: It goes without saying that Scotland is a diverse and multicultural society, that that diversity strengthens us as a nation and that we are better for it. There is absolutely no excuse or justification for hatred, bigotry or prejudice, and we absolutely condemn anti-Catholic prejudice and anti-Irish racism.

Fulton MacGregor has made a good point about tackling sectarianism in our schools. Third sector organisations in particular are doing a lot of good work in our schools to try to tackle those issues. They are not easy to tackle—some of them are deep rooted and generational—but we need to do

absolutely everything that we can to tackle them, and the Government is determined to do so.

Pam Duncan-Glancy: My question is about disabled people's equality and human rights. You will be aware that the disability employment gap remains high, at around 32 per cent. A number of disabled people still do not get access to the social care that they need, and some of that has stopped and not restarted since the pandemic began. The Fraser of Allander Institute has said that we are not doing enough in Scotland to enable people with learning disabilities

"to live safe, secure and fulfilling lives",

and tens of thousands of disabled people are still waiting for accessible homes.

At the summit that the Government held with disabled people last year—I think that it was in December—it was noted that, given the serious discrimination and inequalities that disabled people face, they rightly want a focus on actions as opposed to problems and continued plans and strategies. I welcome the Government's commitment to a disability equality strategy, but what specific actions will it take in the short term to address the issues that I have raised?

Shona Robison: Pam Duncan-Glancy has asked a number of questions. I will try to cover all of them.

Pam Duncan-Glancy referred to the disability summit last year. That summit, which was very well attended—there were more than 100 participants—was an opportunity for ministers to hear from disabled people's organisations and disabled people in particular in responding to issues that were highlighted. We have a wealth of information from that summit that will help to guide the development of the next disability equality plan.

Pam Duncan-Glancy specifically mentioned employment. "A Fairer Scotland for Disabled People: employment action plan", which is now three years old, sets out the actions to deliver the ambition, working with partners, to at least halve the disability employment gap by 2038.

11:45

The second annual progress report, which was published in March this year, highlights the work that has been undertaken to date in supporting the delivery of that ambition. It shows that the disability employment gap in 2019 was the lowest recorded in recent years. However, that gap widened in 2020, unfortunately. That was particularly in relation to Covid, I suspect. It moved from 32.6 per cent to 33.4 per cent, so we have work to do, and we need to ensure that we take further action to address that.

Pam Duncan-Glancy mentioned social care, and that issue has been raised by stakeholders, as you would imagine. We have ambitious plans for the national care service, which she is more than aware of, and those will be important in restructuring our care services. However, we need to ensure that people are supported. There are undoubtedly lessons to be learned from the pandemic on people's vulnerability and on the situation that they have found themselves in.

Finally, on learning disability, we are taking forward a learning disability, autism and neurodiversity bill to make improvements in that area. There is a commitment to having a commissioner, as we recognise that there is a particular vulnerability and a need for an office to support the rights of those who are most vulnerable.

On accessible homes, the member will be aware that "Housing to 2040" contains a lot about accessibility and ensuring that homes are barrier free as we develop and deliver the affordable housing supply. It is really important that homes stand the test of time and are barrier free, no matter what challenges people have.

Pam Duncan-Glancy: A number of the actions that you have outlined are not necessarily in legislation. For example, the targets on accessible housing are not in legislation; they are a matter for discretion, and that reflects some of the inequalities that still exist for disabled people.

You have said that there are plans for a national transitions strategy. Can you set out why that would be a strategy and not a bill or a legislative right at this stage?

Shona Robison: It is important that we begin work on a new national transitions to adulthood strategy to support disabled young people as they make the transition to adult life. That feels like the right approach. We can keep these things under review and under discussion, but that feels like the right approach to take on that. I am happy to engage directly with Pam Duncan-Glancy on the detail as we take forward that approach.

Maggie Chapman: I have a small supplementary question. You mentioned something about considering a suite of legislation or support for neurodiverse people. Would it be relevant to the scope of that work to include discussion on our approach to conversion therapy? We have been talking about that in the committee in relation to LGBTQ+ rights, but there is an important issue around neurodiverse people who are challenged and people who try to "fix" them. Do you see that as a legitimate area to consider within the scope of that work?

Shona Robison: I will probably have to reflect on that question, which is quite complex. I would

want to write to the committee with a response to that, rather than respond at the moment. I would want to give it further thought.

Maggie Chapman: Thank you.

The Convener: Pam, do you want to come in with your other brief question?

Pam Duncan-Glancy: Yes. It is on a slightly different subject from my previous question—but it is on ending conversion therapy. The cabinet secretary will be aware that, last week and this morning, we took evidence on the need to end conversion therapy. One thing that came across strongly in that evidence is that we need to set out the Government's policy intention in Scotland as soon as we can. Is it your intention to legislate to cover sexual orientation and gender in the conversion therapy ban? Do you intend to include the advertising of conversion therapy and to exclude exemptions in the case of consent?

Shona Robison: We have been in discussion with the UK Government on that matter. As the committee is probably aware, the UK Government has said that it is looking to legislate in the area. We have had communications with it to try to get clarity on the scope of that. We have said all along that, if the scope does not go as far as we want it to, we will look to legislate. There are some complexities in relation to devolved and reserved issues, which we would need to work through. However, we have been pretty clear.

I caught the tail end of the earlier evidence session—very powerful testimony and evidence were given. We need to find out from the UK Government what its intentions are in more detail. However, as we have said, it still stands that, if the UK Government either will not legislate or will not go as far as we want to, we will bring forward our own legislation.

Pam Duncan-Glancy: It was clear from this morning's evidence session that people think that a lot of the legislation in relation to the ban is devolved to Scotland. Is it the Scottish Government's position that any ban in Scotland would include gender as well as sexual orientation? In addition, would the ban include advertising, and not include exemptions in the case of consent?

Shona Robison: We need to reflect on that. I am not in a position to answer at the moment. I would want to come back to the committee to bring more details on those questions, if that is okay.

The Convener: I am sure that we will come back to speak to the cabinet secretary about that issue.

Alexander Stewart: I will move on to the topic of older people.

As we know, we have an ageing population, and a large percentage of our society falls into that bracket. "A Fairer Scotland for Older People—A Framework for Action", which came out in April 2019, identified a number of priorities, including outcomes for access to services, health and social care employment, financial scrutiny and housing. Will the cabinet secretary give an update as to where we are with the framework, and how likely it is that a report will be published? Obviously, the pandemic has had an effect on the report, but it has also had a huge effect on the older population across Scotland.

Shona Robison: I concur with Alexander Stewart; he is right that the pandemic has had a huge impact. I will respond as briefly as I can on what is an important area.

Back in March, the then Cabinet Secretary for Social Security and Older People wrote to the older people's strategic action forum setting out the next steps on the creating a fairer Scotland for older people framework, which is important and which contained 56 actions. We have been able to deliver or partially deliver 48 of those in total, which, given the challenges over the past year and more, is a significant achievement.

Officials will provide a further update towards the end of this year—we can furnish the committee with it, if that would be helpful. We are also mindful that some of the actions may have been superseded by work or policies that have been or will be implemented as a result of Covid-19. We are collecting feedback from the older people's strategic action forum on the framework action updates, particularly around the gaps or actions that are yet to be delivered—that is, the ones that need more progress to be made.

We have had sessions to hear about and reflect on the social renewal advisory board's report and the review of adult social care, and we have committed to updating stakeholders on all the outstanding actions by the end of the year. We also recognise that there is work to be done to help older people recover from the pandemic's impacts, especially as they adapt to potentially new ways of living in, if you like, our new normal.

Policy officials in this area are working across Government to ensure that older people's voices are being heard in wider policy development spanning a number of portfolio areas, and it is important that the lived experience of those people informs that policy making. We must continue to talk to older people through the forum and in other ways.

Alexander Stewart: You have pointed out the progress that has been made and have touched on potential new ways of working. Technology, for example, has developed quite rapidly over the

past 18 months of the pandemic to tackle loneliness and social isolation. I also believe that some work has been done on intergenerational wellbeing. It would be good to hear your thoughts on those two areas, as they will continue to develop over the next few years and during this parliamentary session. We might have to change direction slightly as we tackle such issues, enforce measures and change how things have been done in the past to ensure that we capture as many individuals as we can who fall into the older age group.

Barriers to technology are also a problem for some people, as they might not have full knowledge and understanding of all the technology that is available to support them. How do we enhance that knowledge and ensure that they are exposed to some of that technology and receive the support and training that they need in that respect?

Shona Robison: That is very important. It is relevant to highlight our commitment to starting work on a social isolation and loneliness plan, which is backed by £10 million over five years. Such isolation has been a real challenge, and it has been exacerbated by Covid. We have also recently allocated £1 million to organisations tackling social isolation and loneliness, and the intergenerational dimension that the member referred to will be an important part of that work.

It is important that we take this forward. I highlight the connecting Scotland programme, which has been working to support those who are still excluded from technology or who do not have the right technology to take advantage of opportunities. The programme's digital inclusion element has been really important, and the funding has helped 5,000 older and disabled people to get online and tackle isolation and digital exclusion.

Alexander Stewart: There is a role for the third sector and social enterprises in all that. What discussions are you having with those sectors to capture their projects and proposals and marry them with your work in Government?

Shona Robison: You make an important point. We have provided more than £1 million to partners to tackle isolation among those in greatest need, and that funding includes £100,000 for Befriending Networks. The third sector and social enterprises have played such an important role, and I pay tribute to all of them for their work throughout the pandemic. There is no doubt that without their support people would be much more isolated, lonely and vulnerable, and that work has been important. I also highlight the new social enterprise plan, which is looking to support and grow the social enterprise network, and that, too, will be important in taking forward this work.

12:00

Karen Adam: I note the extra funding to combat gender violence, particularly as the pandemic exposed more of those vulnerabilities. Such funding is vital. Coming from the angle that the majority of that abuse is committed by men, what will be done to support people not just reactively when they have been abused but proactively to get to the root cause of it? Taking a helicopter type approach, would that be within the remit of the misogyny working group?

Shona Robison: Karen Adam makes an important point. First, I reiterate that the protection of women and girls is an absolute priority for the Government. The equally safe strategy sets out a clear and decisive focus on preventing violence, advancing gender equality and tackling the underlying attitudes that perpetuate gender-based abuse. That starts young, so a lot of work is being done in schools to make sure that boys and young men understand issues such as consent. That is important, given many of the external factors and influences that impact negatively on the views of stereotypes that girls and boys hold that can damage attitudes in later life.

In August, we launched our Equally Safe at School online platform, which applies a whole-school approach to tackling gender inequality and gender-based violence. The website contains specialist toolkits and other resources for schools. Our partner, Rape Crisis Scotland, has been working with the University of Glasgow and conducting research alongside the pilot and the final online platform. Again, I would be happy to furnish the committee with more information about that really important work.

During the pandemic, when women and girls were particularly vulnerable and home was not a safe place to be for some, we provided new Government funding of £5 million to front-line services to ensure that those who are affected can access more quickly the support that they need. That is also part of £100 million in general support to front-line services during the next three years.

The Convener: Karen, do you want to come back in?

Karen Adam: I just want to thank the cabinet secretary for her answer. When I talk to certain equality and zero tolerance groups, it comes up a lot that there needs to be a wider approach, particularly in the early years, to change the culture of toxic masculinity and misogyny.

The Convener: Alexander Stewart wants to come in.

Alexander Stewart: Cabinet secretary, you talked about the staggering increase in levels of domestic abuse during lockdown in many

communities. The police and other organisations and sectors had to be much more robust in tackling it because, as you identified, home was not a safe place for many individuals. The funding that you talked about will go to support that action but, as we saw, there needs to be more of a crossover between agencies and organisations to capture some of what different groups were identifying using different ways and means. Was information about that collated and transmitted to other support mechanisms to ensure that lessons were being learned about how vulnerable some of these people were and the conditions they were living in?

Shona Robison: The member raises an important issue. A multi-agency approach to tackling domestic abuse has always been important, particularly during the pandemic. We know, for example, that the police have been paying particular attention to the issue and looking at trends. We have got a lot of the information around the heightened levels of domestic abuse from front-line organisations, but the police have been doing a lot of important recording.

If you think about the changes in how domestic abuse has been responded to during the past 10, 15 or 20 years, the approach that the police take now is unrecognisable. They work alongside other statutory partners and third sector organisations to ensure that there is wraparound support for victims.

Of course, the Parliament has also been very important not just in reforming laws and making it easier for people to report domestic abuse and for that to be taken seriously, but in looking at issues around tenancy rights to make sure that victims are not removed from their houses. The Parliament has done some good cross-party work in the area, and I am sure that the cross-party support will continue.

Maggie Chapman: I thank the cabinet secretary for the answers that she has given so far. I add my voice to her earlier comments and put on record my very strong support for reform of the Gender Recognition Act 2004. As a woman, I do not think that it has any impact on my rights or women's rights in general. I think that there is no conflict between those rights and the measures that are being taken to let trans people live as who they are.

I want to ask a couple of questions on new Scots refugees and the support that is available to them. I welcome your unequivocal support for Afghan refugees. The new Scots refugee integration strategy will come to an end next year. Can you provide a little bit more detail about what plans the Scottish Government has, in addition to the £500,000 support for local authorities to accommodate more unaccompanied children, to

refresh and expand the strategy, especially in the light of the increased demand resulting from the refugees coming from Afghanistan?

Shona Robison: The second new Scots refugee integration strategy runs until December next year, and partners have begun discussions on the arrangements to develop the third strategy with the aim of publishing that in 2023. We want the strategy to be shaped by refugees and people with experience of asylum as well as those with expertise in supporting them. During the past few weeks, I have met people who have settled here and have heard their voices directly on some of the issues that remain—some of which are reserved and some of which are devolved—which we need to work through.

The member also made reference to the work with COSLA on the “Ending Destitution Together” strategy, which was published in March. That looks at improving and strengthening the support and provision for people who have no recourse to public funds. The strategy has been informed by powerful testimony from people with lived experience of suffering destitution. It sets out the initial actions to deliver essential needs, to enable access to specialist advice and advocacy and to make sure that people can pursue their ambitions and be active members of our communities. That is very pertinent to the work that we are doing to make sure that Scotland plays its part in supporting those who have come from Afghanistan in terrible circumstances, who are very vulnerable indeed.

Afghan families are already being welcomed into Scottish communities through the Afghan locally employed staff relocation scheme and, so far, 22 local authorities have expressed a keenness to support the Afghan citizens resettlement scheme. We have been pushing the UK Government for more information on that. Last week, Angus Robertson and I had a meeting with UK ministers to consider the details, including funding, to ensure that local authorities have the information that they need. There are some practical issues relating to access to interpreters and ensuring that people who first go to hotels are resettled as quickly as possible.

We have a long history of welcoming people of all nationalities and faiths, including those who are seeking asylum and refuge from war and terror elsewhere. It is important that we continue to play our part.

Maggie Chapman: It is heartening to hear that there is a focus on lived experience, which is a theme across lots of different elements of the committee's work.

What has been the response to the ending destitution together strategy? I am interested

primarily in the response from the third sector organisations with which the strategy needs to work in partnership. How can we appropriately measure the strategy's effectiveness? Quite often, we do not get the volume of quantitative data that is useful in that respect.

Shona Robison: The work of third sector organisations in supporting people who have no recourse to public funds is vital. The UK Government has strict rules on those who have no recourse to public funds, so we have to proceed with caution because, ultimately, at the extreme end of things, we could jeopardise someone's status as having leave to remain if they were to receive funds that the UK Government deemed they should not receive. We have to be extremely careful in that area, which is why funding third sector organisations is the best way of supporting individuals and families who need support.

Many of the people who have come to Scotland through the refugee or asylum process are hugely skilled and valued members of our communities. The sooner they are able to use those skills and work, the better it will be for our communities and our society at large.

Unfortunately, some of the issues remain reserved to the UK Government. Therefore, we continue to have dialogue in order to work through some of the remaining barriers for some of the most vulnerable members of our society.

Pam Duncan-Glancy: Do you understand there to be any gaps in equality data? If so, how could they impact on policy development?

Shona Robison: I am happy to say a little bit about that, but I might bring in my officials, who are a bit closer to the detail on the data challenges. One issue is that, if we do not have data, it is difficult to benchmark and to know what progress is being made and what progress is still to be made. We have strengths and weaknesses in our data collection.

I am trying to think which official it would be best to bring in. It might be Jess Dolan.

Jess Dolan (Scottish Government): I think that it would be best if we wrote to the committee with a full update on the equality data strategy.

The Convener: We look forward to getting that in writing later.

12:15

Maggie Chapman: I have a couple of questions on how we embed equalities and human rights into our budget process in a meaningful way. What steps is the Scottish Government taking to build the capacity of all Scottish Government members and officials to ensure that budget spend

advances our equalities and human rights agenda? Further, how do we ensure that our budget processes are as transparent as possible, especially around those issues? How do we inform those who are doing the budget setting while being transparent in the interests of those who might want to be involved in that process?

Shona Robison: The importance of ensuring that we can do better in that area was flagged up in discussions with the Scottish Green Party. The development of the equality and human rights budget process will build on the 10 key emerging risks in the next equality and fairer Scotland budget statement. We want to ensure that, as far as possible, people's lived experience can be integrated into the budget process. The budget process is not simple and it is not easy to take things forward in it, but we have made a commitment to consider what more we can do in that regard.

One theme of the recommendations from the equality budget advisory group is that we should improve knowledge and understanding in this area. Suffice it to say that we are working on that. We do not have all the answers, but we could come back to the committee with more detail on that if it would be helpful.

In answer to the previous question, I will write to the committee in relation to the gaps. We have published research to improve our understanding of the collection and use of equality data and data on socioeconomic disadvantage by Scottish public sector bodies, and that will help us to understand where the gaps are and how we can fill them.

Maggie Chapman: In that written information, could you clearly address the 10 risks that were identified in the equality and fairer Scotland budget statement? That would help us to be clear about what work is happening against each of those identified risks. Similarly, it would be useful to have information on progress against each of the recommendations of the equality budget advisory group.

Shona Robison: I am happy to do that.

The Convener: That takes us to the end of our questions. We look forward to receiving the information that you have agreed to send us, cabinet secretary. We will see you next month to discuss the budget specifically, when we will be able to return to some of the points that have been raised. For now, however, I thank you and your officials for attending.

Subordinate Legislation

Age of Criminal Responsibility (Scotland) Act 2019 (Register of Child Interview Rights Practitioners) Regulations 2021 (SSI 2021/233)

12:19

The Convener: Our next item of business is consideration of a Scottish statutory instrument that is subject to the negative procedure. I refer members to paper 6.

As no member has indicated that they have any comments to make, are we content formally to make no recommendation to Parliament on the instrument?

Members *indicated agreement.*

The Convener: We will now move into private session for the final items on the agenda.

12:19

Meeting continued in private until 12:30.

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Published in Edinburgh by the Scottish Parliamentary Corporate Body, the Scottish Parliament, Edinburgh, EH99 1SP

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