



OFFICIAL REPORT
AITHISG OIFIGEIL

Equalities, Human Rights and Civil Justice Committee

Tuesday 7 December 2021

Session 6



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EQUALITIES, HUMAN RIGHTS AND CIVIL JUSTICE COMMITTEE
11th 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:

Professor Norin Arshed (University of Dundee)

Ruth Boyle (Close the Gap)

Eilidh Dickson (Engender)

CLERK TO THE COMMITTEE

Katrina Venters

LOCATION

The James Clerk Maxwell Room (CR4)

Scottish Parliament
Equalities, Human Rights and
Civil Justice Committee

Tuesday 7 December 2021

[The Convener opened the meeting at 10:00]

Decision on Taking Business in
Private

The Convener (Joe FitzPatrick): Welcome to the 11th meeting in session 6 of the Equalities, Human Rights and Civil Justice Committee. We have no apologies. Fulton MacGregor joins us virtually.

Under the first agenda item, do members agree to take in private item 3, which is consideration of today's evidence?

Members indicated agreement.

Women's Unfair Responsibility
for Unpaid Care and Domestic
Work

10:00

The Convener: Item 2 is to take evidence from our panel of witnesses on women's unfair responsibility for unpaid care and domestic work. I am pleased to welcome Ruth Boyle, policy and parliamentary manager, Close the Gap—Ruth joins us remotely; Eilidh Dickson, policy and parliamentary manager, Engender; and Professor Norin Arshed, chair in entrepreneurship and innovation, school of business, University of Dundee. I invite each to make a short opening statement.

Eilidh Dickson (Engender): I thank the committee for organising this session and for inviting me to be part of it.

In early spring 2020, Engender quickly realised and foresaw the impact that the pandemic was likely to have for women when we started to look at the research on the experience of the SARS, Zika and Ebola outbreaks.

We published our first briefing, summarising the key issues that we could foresee happening in Scotland, on 26 March 2020. It covered the lack of attention to gender mainstreaming, the exclusion of women from decision making, increased care and reproductive labour, increased violence against women, and greater exposure to poverty and insecurity. Our concerns at that time have only proven to be right when it comes to the subsequent impacts of the pandemic.

It is often said that the pandemic has exacerbated deeply rooted inequalities that are experienced by women, racialised communities, disabled people and other groups. I often cite the warning from United Nations Women that the pandemic risks setting back global strides towards equality by 25 years.

The lack of prioritisation of care in the response to the pandemic is, itself, gendered. The underlying assumption that was necessary for the closing of schools and other institutions was that the displaced childcare, home schooling and care for older adults and disabled people would, and could, be picked up in the home.

Women's access to paid work, leisure time and power remains heavily constrained by traditional social roles as carers and mothers, even as women have increasingly entered and remained in the labour market over the past few decades. On average, even before Covid, women in Scotland living in opposite-sex-headed households did around 68 per cent of the housework and 68 per

cent of the childcare. Those patterns of distribution have been stubbornly slow to disrupt, and have only been cemented even further by the pandemic.

In June 2020, Engender published a short report on women and unpaid work, in which we found that, despite popular descriptions of a crashing productivity crisis in the so-called “real economy”, women were, in fact, busier than they had ever been. Those findings were then reinforced by data from a joint survey project looking at the impacts of Covid-19 that was developed by Engender, Close the Gap and other United Kingdom women’s organisations and carried out between December 2020 and July 2021.

Those themes were repeated in the many stories that were shared with Engender through our online platform, using the hashtag #WomenCovidScot. One woman told us:

“My employer is offering flexibility, but there just aren’t enough hours in the day for both me and my partner to do all the work we have to do and make sure that our wee people are taken care of. I’m worried about my mental health, but mostly about my children. My partner earns a lot more than me and I’m seriously considering resigning.”

We heard such things over and over again—as, I am sure, have many in the room—and I am therefore extremely pleased that the committee is focusing today on the unpaid work that is delivered by women and its impacts now and in the longer term.

Professor Norin Arshed (University of Dundee): Thank you for inviting me to the committee. I will give you some background on the report “The impact of COVID-19 on Scotland’s women entrepreneurs”. Its aim was to provide an in-depth understanding of the impact of Covid-19 on women entrepreneurs in Scotland and to explore the support that was available to them during and after the pandemic.

The research for that project was undertaken between October 2020 and March 2021. It is a qualitative study and was based on 12 focus groups with women entrepreneurs—six with start-ups and six with growth businesses—in six different regions of Scotland. In addition, monthly individual interviews were carried out with 12 women entrepreneurs for four months, in order to build a better picture, rather than a snapshot in time, of the challenges that they were facing. I also undertook interviews with 26 enterprise support organisations, 11 of which were focused on women-only support.

The findings of the report highlight the fact that the challenges that women entrepreneurs face were amplified during the pandemic. The main challenges focused on historically reported barriers for women entrepreneurs.

The first barrier is access to finance. Many sectors that are dominated by women were the first to be hit, they were hit the hardest and they were the last to receive financial assistance. The second barrier is networking and relates to understanding how women entrepreneurs could ensure that their businesses were promoted. The last factor is social and cultural barriers and challenges, including the areas of childcare, unpaid domestic work, working from home and community care. However, opportunities arose for many in learning new skills, exploiting digitisation, continuing the relationship with their communities and spending more time with their children.

The enterprise support organisations were quick to attempt to support women entrepreneurs. However, women entrepreneurs found much of the support confusing, particularly the financing and funding element in relation to childcare responsibilities. Those organisations did not consider the heterogeneity of women and their needs.

Policy actions arising from the evidence that was gathered in the research include: providing access to quicker funding routes by investing in the creation of a one-stop shop for financial support and assistance; facilitating access to kick-starter and/or seed funding for women entrepreneurs; creating new approaches to sourcing capital investment, such as crowdfunding and impact investment; creating digital centres based in local infrastructure, such as libraries, universities, colleges and community centres, which are easily accessible for women; creating and coaching mentoring champions in all Scottish regions for women entrepreneurs; expanding childcare and lowering its cost, which can include greater investment in after-school care and early years services; and offering childcare options within the social infrastructure.

Those policies can be actioned by simplifying the women’s entrepreneurial ecosystem; producing a toolkit to help women navigate the support and advice that are available to them; providing long-term evaluation and gender-disaggregated data; establishing regional women’s business centre hubs; and collaborating with financial institutions to provide accessible and appropriate finance that is available to women entrepreneurs.

We understand that Scotland has a long-standing policy framework for women’s enterprise, but those challenges are still being amplified and have not reduced over the past 15 to 20 years. More recently, the Scottish Government has been working towards remedying the current women’s entrepreneurial system, with the First Minister announcing and pledging £50 million to fund a women’s business centre. We welcome the

commitment in the programme for government to make progress in establishing that centre but, currently, there is little—if any—information about what it will look like and what facilities and functions it will provide for women entrepreneurs. Perhaps we could discuss that further.

Ruth Boyle (Close the Gap): I thank the committee for inviting Close the Gap to give evidence. We are pleased to be here. I also thank the clerks for accommodating me remotely.

Close the Gap is Scotland's policy advocacy organisation working on women's labour market equality. We have 20 years' experience of working with employers, trade unions and policymakers to encourage substantive action on the causes of the gender pay gap. Our analysis shows that women's increased likelihood of having primary responsibility for childcare, care and unpaid domestic work remains a key cause of the gender pay gap in Scotland.

The lack of flexibility offered in the Scottish labour market, coupled with continued barriers to accessible, affordable and flexible childcare, creates something of a perfect storm for women who are trying to balance paid and unpaid work. That creates challenges for women with caring responsibilities in entering the labour market, but it also prevents women's in-work progression, limiting their opportunities to enter senior roles or increase their hours and earnings.

As a result of having to balance earning with caring, women account for 75 per cent of part-time workers in Scotland. That is significant, because most part-time work is found in the lowest-paid jobs and sectors of the Scottish economy. That reinforces women's low pay and makes it difficult for women to find work that matches their skill level.

Covid-19 has brought those issues into sharp focus, as it has fallen to women to manage increasing levels of unpaid work. Over the pandemic, Close the Gap has published briefings and analysis on the impact of the crisis on women's labour market equality. That work has highlighted the point that the crisis has created huge challenges for women in maintaining paid work, with many women having to reduce their hours or leave work entirely to care.

We really welcome the committee's focus on the topic. It is positive to see attention being afforded to unpaid care, which is often a peripheral policy issue. Tackling the issues that we will discuss is vital to unlocking women's labour market equality and tackling the gender pay gap, as well as meeting Scotland's child poverty targets.

The Convener: Thank you all for your opening remarks.

We move on to questions and answers. Members might direct questions at particular witnesses but, if they do not, and Ruth Boyle wants to respond, she should put R in the chat function. Fulton MacGregor knows how to ensure that I am aware that he wants to come in. The witnesses in the room should just indicate that they want to respond. I will keep my eyes open.

Maggie Chapman (North East Scotland) (Green): Good morning. I thank the witnesses for being with us and for their opening remarks.

I am interested in understanding a bit about the difference across different age groups of women. The witnesses all alluded to the pandemic's amplification of existing inequalities. We know that the pandemic was particularly acutely felt by younger women—those in the 18 to 30 age group—who experience financial precarity anyway. Will you give us a bit more detail on that and how it compares to the effect on older women? Are there areas that we should consider looking at for women who are much older but still working age? How does the impact change across women's lives?

Eilidh Dickson: There are a couple of things that I can say about that. In my opening remarks, I mentioned that Close the Gap and Engender undertook some polling that specifically considered Scotland—there was a United Kingdom project, but we specifically looked at Scotland. Some of that work focused on young women. I will give you a bit of a snapshot.

The survey showed us that young women reported even greater vulnerability to economic precarity. That is not surprising because we know that younger women and black and minority ethnic women are more likely to be concentrated in the sectors that were first affected, and most greatly affected, by the results of the pandemic.

We found that 53 per cent of young men had their furlough salary topped up by their employer, compared with just 35 per cent of young women. For BME young women, the figure was just 27 per cent. Younger women were seven percentage points more likely than their male counterparts to say that their financial situation had worsened since the start of the pandemic. That was the response of 41 per cent of the young women we spoke to. Disabled young women were 20 percentage points more likely than non-disabled young women to say that their financial situation had worsened as a direct result of the pandemic.

We know that, although the gender pay gap exists at every age, it widens sharply when women reach 30 and continues to widen sharply. The lack of available childcare certainly plays a role in that. Ruth Boyle can perhaps say more on the interrelation of those two things.

Young women's mental health has been of particular concern. I talked about the #WomenCovidScot project that we ran, for which we asked women to submit anonymously—either publicly or directly to us—their stories of the pandemic. Over and over, a crushing sense of mounting pressure came through. Women were expected to do more with the same amount of time. They were expected to do home schooling for children in multiple different year groups. There was more domestic work because the whole family was at home and, although, if they had a male partner, he did more, the women were still doing more.

That sense of pressure is not surprising but, in the polling that we did, 62 per cent of young women also said that their mental health had worsened since the outbreak of Covid compared with 55 per cent of young men. We are at a bit of a crisis point.

The existing mental health strategy, which is due to run until 2027, was clearly developed in a pre-pandemic world. There are genuine questions to be asked about whether that document is fit for purpose. A transition plan exists, which takes a bit more of a gendered focus. The lack of focus on gendered differences in mental health presentation and experiences is a chronic problem that is pervasive throughout mental health policy.

10:15

Maggie Chapman: Thank you. Does Ruth Boyle want to come in on that question?

Ruth Boyle: Yes. I was going to pick up on the polling that we have done, so it is useful that Eilidh Dickson has given that context. When we look at young women's experience of employment during the pandemic, we see that they were more likely to be furloughed than their male counterparts and also more likely to work in a sector that was shut down. We have been talking about women being more adversely affected by job disruption. That is because it is based on women's pre-existing inequalities in the labour market.

When we look at where young women are employed, we see that they are concentrated in low-paid, precarious sectors—predominantly the service sectors, such as retail and hospitality, that were shut down during the pandemic. We know that, because of that, young women were already more likely to be experiencing in-work poverty and less likely to have savings to fall back on during the pandemic. Four in 10 people working in the retail sector are paid less than the real living wage, for example, and 80 per cent of people working in hospitality reported that they were already struggling with their finances pre-Covid. We saw an exacerbation of pre-existing financial precarity

for young women and, as Eilidh Dickson said, we also saw that young women were less likely to have their furloughed salary topped up by their employer.

There are also pre-existing issues for young women in accessing training and development in the labour market. That is often because training and development is not a focus in the sectors where women are dominant. The recent report by the YWCA Scotland Young Women's Movement, "Status of Young Women in Scotland 2020/2021", found that only 44 per cent of young women felt supported by their employer to develop skills at work. That is particularly pertinent for young women with caring responsibilities, who are concentrated in low-paid jobs and sectors. That is significant for Scotland's child poverty targets, because young mothers are a target group within that plan. The polling that Eilidh Dickson mentioned found that one in 10 young women reported that their caring responsibilities were a key barrier to them accessing training and development or employment support. By contrast, no young men who were polled as part of that project highlighted caring responsibilities as a barrier to employment or training.

Eilidh Dickson also raised mental health issues. We know that women's experience of mental health is fundamentally linked to gendered care and income inequalities. The pandemic has worsened those factors, so it is clear why there is a growing mental health crisis among women—and young women, in particular.

We also know that women are, in effect, poverty managers in the home. They often go without clothing, warmth or food in order to provide for their children. During the pandemic, when women reported that they were struggling to make ends meet, they were having to do that gender dynamic of poverty management in the home, which could have increased their problems with mental health and wider mental wellbeing. Those issues relate to the exacerbation of women's pre-existing inequality in the labour market.

As Eilidh Dickson said, that is not to say that there are no issues for older women in the labour market. I am just doing our latest gender pay gap analysis paper and we can see a gender pay gap for all age groups. However, the gap is higher than average for women over 40. That is where we see the motherhood penalty playing out in terms of pay data and the gender pay gap. Women are undertaking the bulk of unpaid care, perhaps reducing their working hours or leaving work entirely for a period of time. That has lifetime implications for their pay rate.

Although there has, rightly, been a lot of focus on young women's employment, the data show that towards the end of the furlough scheme it was

older women who were more likely still to be furloughed. Work needs to be done to understand the impact of the pandemic on older women's employment, because we also know that there are real barriers to older women accessing employment and training and development.

Maggie Chapman: Thank you very much for that, Ruth. That is really helpful.

I put the million dollar question to Norin Arshed. What we do about the points that have been made? What are the key steps that the Parliament and Government need to take to ensure that the financial precarity is not exacerbated as we move forward?

Professor Arshed: I completely agree with the comments that Ruth Boyle and Eilidh Dickson made. From the perspective of a women's entrepreneurship background and the studies that I have undertaken into women entrepreneurs before and since Covid, it seems that age does not matter because the women are all in the same boat: they are predominantly in the service sector, cannot access or find their way around finance, have childcare responsibilities and have unpaid domestic work to deal with. I had 70-plus women in my focus groups. Three quarters of those women had children but only one had a partner who helped with those responsibilities. That is a snapshot of a small sample but it is very applicable to Scotland and the UK.

Given that situation, the Scottish Government, MSPs and our organisations need to undertake long-term evaluation. We need gender-disaggregated data so that we can understand what is happening on the ground and whether it is effective. We need to know what impact is being made socially and economically.

We need to collaborate with financial institutions to understand access to financial support—what is the easiest route and what is appropriate—because women are not just one group. They have different roles. They have unpaid domestic work and they have businesses or are working, but many of them also do a lot of community work. How do we assist and support them in their different roles? How do we ensure that such support is holistic rather than only helping women entrepreneurs or another specific group of women?

I am bouncing that question back to you. You have the resources and the power. The question is how we approach the issue holistically.

Pam Gosal (West Scotland) (Con): Good morning and thank you very much for coming. It was useful to hear the opening statements on how women have suffered over the pandemic. The issue is at the heart of the committee's remit, which is why we decided to work on it.

The evidence shows that women, disabled women, BME people and lone parents have been disproportionately affected by the pandemic. Should those groups have received, or should they receive, focused support to ensure that they have full access to employment as we embark on our socio-economic recovery from the pandemic? If so, what kind of policies should the Parliament consider?

Ruth Boyle: That is a really important question. I mentioned that Close the Gap has done a lot of analysis of the labour market impacts of the pandemic, examining the specific impact on women's employment. Throughout that work, we have tried hard to take an intersectional approach and consider the impacts on specific groups of women. I note that we have been hindered in doing that by a lack of intersectional labour market data.

We talk about this a lot, but we are far from having consistent gendered labour market data. That means that we are very far from having consistent intersectional labour market data. For example, we were unable to access data for black and minority ethnic women or disabled women relating to furlough, unemployment, occupational segregation or pay. That makes it difficult to demonstrate the different experiences of particular different groups of women in the labour market. Therefore, an early policy priority should be the gathering of gender-disaggregated, intersectional data as standard across all policy responses. In particular, it is really important to gather labour market data and skills programmes data.

We are able to predict the impact on different groups of women based on the data that we have. We expect that job disruption has been particularly acute for black and minority ethnic women because of them being concentrated in low-paid, precarious sectors. Those sectors were more likely to be shut down during the pandemic.

In the polling data that Eilidh Dickson mentioned, 21 per cent of black and minority ethnic women who responded felt that they were unfairly chosen for furlough by their employer, compared with only 1 per cent of white women. Equally, 19 per cent of disabled women felt that they were unfairly chosen, compared with only 1 per cent of non-disabled women. We have questions about the discrimination that that perhaps shows.

We are concerned that the pandemic has exacerbated pre-existing inequality in the labour market for black and minority ethnic women. They were already more likely to experience in-work poverty, they were concentrated in precarious work and they faced barriers to progression. Close the Gap published research in 2019, "Still Not Visible", which looked at the experience of black

and minority ethnic women in employment in Scotland. That research found high levels of racism, racial discrimination, prejudice and bias in the Scottish labour market.

On the issues that we are talking about today, 49 per cent of women who responded to the survey felt that they had been overlooked for a training or development opportunity because of racism, prejudice or bias, and 42 per cent felt that they had been discriminated against at interview stage. There could be issues for black and minority ethnic women who lost their job during the pandemic when trying to re-enter the labour market.

The research also highlighted that black and minority ethnic women experience the barriers that all women face in the labour market around caring responsibilities, but the experience was intensified for those women, who also reported barriers in accessing appropriate childcare. Migrant black and minority ethnic women highlighted that a lack of access to informal networks also made it difficult for them to enter the labour market because it increased their reliance on formal, expensive childcare. That made it difficult for them to find work that was financially viable. They also reported that their employers showed a lack of understanding that the fact that they did not have people to rely on meant that, if their child was sick, for example, they had to work from home or have the day off in order to care for them. Those barriers for black and minority ethnic women, in particular, could be intensified by the pandemic.

There is a real lack of data on disabled women in the labour market. Close the Gap is planning some research on disabled women's experiences of employment in Scotland in an attempt to find data that could plug some of the gaps. We know that flexible and remote working is particularly important for disabled women, so the increase in that is likely to have had a positive impact on their experience of employment. However, we are concerned that the increase in flexibility might not be maintained in the aftermath of the pandemic. I hope that we will have time to talk about flexible working in more detail. As Eilidh Dickson highlighted, we know from the polling data that the financial impact of the pandemic has been particularly acute for disabled women. They were more likely to report that they were struggling to make ends meet and reported greater rates of anxiety and stress.

Finally, I touch on lone parents, who are trapped in poverty by a range of factors including a lack of flexible and part-time work, a lack of affordable childcare and a lack of access to appropriate training and development. We know that the issues that all women have experienced in the pandemic have been particularly acute for lone

parents, who have perhaps not been able to rely on informal networks or family members to assist with childcare. More than 90 per cent of lone parents in Scotland are women, so when we talk about their experience it is a gendered issue. It is likely that lone parents, in particular, have had to leave work or reduce their hours in order to care, which has impacts on their financial security. That, again, is significant because they are a priority group within the child poverty delivery plan.

Pam Gosal: Thank you. I have a question for Norin Arshed. You talked about your survey from October 2020 to March 2021 and the three challenges of access to finance, networking and cultural barriers. That survey was a snapshot, but had you done anything before that to be able to say whether the situation has got worse through Covid? Were the inequalities that Eilidh Dickson mentioned already there, or have they just come out? What is the comparison?

10:30

Professor Arshed: The survey was qualitative, using focus groups and interviews. Before lockdown happened, I was an independent adviser to Jamie Hepburn for a year when he was Minister for Business, Fair Work and Skills. There was no pandemic then and I had just produced a report that highlighted those three challenges. It looked at more than 100 women from the whole of Scotland and included 20 case studies, so it was similar to the survey. It was in-depth work that took a year, but publication was held back. It has been released now, but it was due in April 2020. When everything got locked down we thought, "Oh my God, everything is going to change. Halt the report and let's see how things pan out."

I undertook the more recent study as a Scottish Parliament fellow and was interested to see what has happened since. Funnily enough, the three challenges still exist. They have existed for the past 20 years, but they have been amplified during the pandemic. Access to finance, networking and social and cultural barriers are global challenges for women entrepreneurs. No Government has managed to address, halt or fix those challenges, as many other studies of women in other cultures, societies and labour markets have found. Women have been hit the hardest by the pandemic and the challenges have been amplified.

Pam Gosal: My next question is for both Norin Arshed and Ruth Boyle. If the challenges were there before the pandemic and have now come out even more, what policies or practices should the Government put in place? What is the way forward?

Professor Arshed: Women entrepreneurs, specifically, need an easier route for access to

finance, understanding that they are not looking for a million pounds, but are often looking for small pots of funding to tide them over. A key thing that relates to the focus of this meeting is that expanding childcare and lowering its cost is a must. That could include higher investment in early years childcare and after-school childcare and embedding childcare options within the social and economic infrastructure. We do not have that. The expense is impossible. Women have had to give up their businesses to home school and look after their children, to help in the community and to help elderly parents.

We need long-term evaluations of what is and is not working. It is unbelievable how much is happening out in the women's entrepreneurial ecosystem, but there is duplication and we do not know what is effective, who is doing what or which women are going where. We need to align that activity in different sectors, not just in the business world but in the labour market, to simplify it so that we can understand what is happening and what is effective. We do not know that at the moment. Again, it goes back to the three main challenges. If we knew what was happening on the ground and how effective it was, we would surely be able to address those. Why are the three challenges still happening?

Alexander Stewart (Mid Scotland and Fife) (Con): I have a quick supplementary. You talked earlier about the women's business centre and the funding that has been put together. Will that be a game changer and, if so, what kind of game changer? Will it just assess and look at where we are and what is required? Will there still be a gap, even with that centre and the resource behind it?

Professor Arshed: We know what women need and how that can be addressed. The funding that the First Minister announced was, I think, £50 million over five years. I tried to chase up several people on that. It is a new initiative and very early, so I cannot really answer the question because I do not know what the centre will look like or where it will be based. Will it be digital or bricks and mortar? What facilities and functions will it have? We know the challenges and how they can be addressed, but how will that be done using the £50 million for a women's business centre? My key question is what that will look like.

Alexander Stewart: We need to find that out. Thank you.

Karen Adam (Banffshire and Buchan Coast) (SNP): I was going to ask questions about mental health, but I think that the witnesses have answered some of those, so I would like to shift the focus a bit.

We have heard about women often going without food and clothing to prioritise others'

needs. Women's health is often deprioritised. Women tend to have more physical disruptions—for want of a better word—such as menstrual-related health issues, pregnancy and birth, postpartum care, and menopause, which has multiple layers of health issues. All of those can impact day-to-day living without appropriate care. For example, heart disease in women is a silent killer, as it is often overlooked or dismissed.

Job access equality and working out of the home often depend on being physically able. Where does women's physical health come into that? Was that also deprioritised or overlooked? Did you see within your remit any effects of women's health inequalities that perhaps became more apparent at the height of the pandemic? Is that a noted factor in gender-based inequality?

Eilidh Dickson: The polling that Ruth Boyle and I keep mentioning looked at physical health and activity levels, and it found that, across the board, women were doing less physical activity and had lower access to that, and that their nutrition had been deprioritised. For example, 42 per cent of young women compared with 30 per cent of young men believed that their physical health had worsened since the start of the pandemic, and nearly half of disabled young women compared with 38 per cent of non-disabled young women reported that their physical health had deteriorated. We know that that was a key theme.

As I have said over and over again in different contexts, it would have been really interesting to look at the first lockdown, when we all had one hour a day in which we could go out, to see how women used that hour. Many women without gardens had to take their children out to play, but the playgrounds were closed. Many women tried to do paid work, and they could not go for a run at night when it was dark, because they did not feel safe in the streets. How did women prioritise their access to physical activity?

The time use data published by the Scottish Government showed that, during the pandemic in 2020, women tended to spend a bit more time on social leisure activities than men did. The examples that were used were letter writing and emails. I suspect that we all think that they were on Zoom and that they were checking in on people, for example. However, men had considerably more access to leisure time, more time out of the house, more time on the internet, and more time relaxing. We have seen that pattern over and over.

We have all skirted around the issue of childcare, where there was a significant impact. Childcare was deprioritised in the initial stages of the pandemic. As I mentioned in my opening remarks, the assumption was that there was somebody there to do that care when we had to

close the schools. I am not suggesting that we should not have closed the schools by any measure, but that consideration of who would do that care simply did not appear in any of the pandemic planning.

We saw a complete lack of gender mainstreaming. That is true across the board. Obviously, we all know about the considerable pressure that health services have been under but, if we look at some of the stories and reporting from the anecdotal evidence, we see the impact of restrictions on maternity services. Women found out terrible things, such as that they had lost their baby or that they were going to have a difficult delivery and they could not have a birthing partner with them. There was a lack of focus and attention, which cemented many of the pre-existing inequalities and, unfortunately, will have led to worse outcomes in women's health.

Health equality needs to be prioritised in the forthcoming independent inquiry. We have been advocating that equality and gender equality specifically—because gender does not get looked at if it is not mentioned—should be mentioned in the terms of reference that the Scottish Government will set for that inquiry. Obviously, the inquiry will be independent, and it will be up to those involved how they look at that. However, health is one of the things that they really need to pay attention to.

Ruth Boyle: We do not do a great deal of work on women's physical health, although it impacts women's access to the labour market. In recent months, and perhaps over the past year, we have seen increased focus on menopause as a workplace issue. An inquiry on that issue is taking place at Westminster, which I am sure Close the Gap will pick up on in due course.

I also want to highlight women's experience of long Covid, the health impact of which is affecting their access to the labour market. Women are more likely to experience long Covid, and inadequate employer responses to long Covid are making it difficult for women to maintain paid work. Therefore, long Covid has become another means by which women's inequality is being exacerbated by the pandemic.

In a recent Trades Union Congress survey, more than half of respondents said that they had experienced some form of discrimination or disadvantage due to long Covid, and one in 20 respondents said that they had been forced out of their job because of long Covid. We also know that women are less likely to be in jobs that give them access to statutory sick pay. Women hold around 70 per cent of jobs that are not entitled to statutory sick pay, which could be another way in which women's financial precarity is increased.

We also know that the current system of employment injury assistance does not meet women's needs. Therefore, if women acquire injuries in the workplace, they are less likely to be able to access the support that they need. We have responded to the consultation on Mark Griffin's proposed Scottish employment injuries advisory council bill. We should be thinking about that in terms of how women's physical health is impacting their ability to maintain their work, and how they can gain support if they have acquired an injury or health issue in the workplace.

With regard to the previous question, I realise that I did not highlight any policy responses despite that being a core part of it. Therefore, I will highlight what, for us, are some of the key areas in which we need change. The first is gender-sensitive employability support and gender-sensitive skills and training support. We also need to extend further the funded childcare entitlement—we have called for an extension to 50 hours a week—and ensure that we have high-quality social care that enables women to enter the labour market.

We need to designate care as a key growth sector, grow that sector and revalue women's work in such sectors. We also need to increase access to quality flexible working and part-time work, and reassess our policies around shared parental leave. Those are some of the key priorities with regard to allowing women with caring responsibilities to re-enter the labour market or maintain paid work.

The Convener: Thank you. I know that Fulton MacGregor wants to come in on shared parenting later, but Alexander Stewart will come in now.

Alexander Stewart: I thank the witnesses for their evidence so far. You have talked about the difficulties of being at home, and how that might not be the safest place due to multiple pressures. Financial instability was mentioned, as was the fact that more unpaid domestic work is being carried out. There is no doubt that, during the pandemic, there has once again been an increase in violence against women. The pandemic creates the perfect storm as people trapped in that environment are not able to access the support that they need.

What lessons can we learn, and what do they tell us about the support mechanisms that we need to put in place so that we do not abandon people to such circumstances? Agencies might need to be involved, but some of them were taking longer to get involved because, understandably, they had other priorities and commitment to deal with. However, that put individuals in a very precarious situation, which has continued throughout the pandemic. That in itself created even more difficulties, and there will be

consequences as a result. It would be good to get your thoughts on that issue. Eilidh, perhaps you could start, given that you spoke about the issue earlier.

Eilidh Dickson: Of course. As you say, when we discuss violence against women, it is really important to be clear that coronavirus does not cause violence. It is the measures that have been put in place to manage the public health impacts that have created and exacerbated the circumstances in which women are made more acutely vulnerable and perpetrators' abuse is more easily facilitated. That includes women being exposed to poverty. If women have to give up work because of childcare and they suddenly find themselves being reliant on their partner's income, that much more easily facilitates the partner's control over resources. Universal credit is a state design that does the same thing—if women find themselves on it, access to resources can again be constrained.

During the pandemic, as you mentioned, women have found it much more difficult to interact with the support services and agencies with which they would normally interact, and health and education services that might ordinarily identify risks for women were unable to do that.

10:45

Men's violence is a cause and a consequence of women's inequality, so we need to think about the issue on two tracks. Work needs to be done to better support the services that women rely on, which means core funding being provided for women's aid services and men's violence against women services such as Rape Crisis Scotland and Scottish Women's Aid. That was done—the Scottish Government gave out more funding—but there is still a big problem with security of funding and long-term funding. When those services had to redesign themselves, there was a lot of scrambling around to access resources that they could use to develop new forms of services.

Scottish Women's Aid carried out a survey of services in June 2020, and about only a quarter of them said that there had been no impact on them or that the number of inquiries about support had decreased. Most services had seen either a huge increase or fluctuating increases, which are, in some ways, more complex because, where they occur, people have to try to respond and design services in a new way without knowing what the demand will be. There have also been pipeline issues with getting women out of their homes into refuge accommodation and then into other forms of more permanent accommodation.

There are many things that we need to tackle. Financial support has been talked about a lot in

the recent 16 days of activism debates, but the backlog in the justice system is also having a significant impact on women who are victim survivors of abuse and men's violence. There really needs to be concrete action to speed up the reopening of court processes.

Cultural attitudes are complicated but vital. When we did the work for our unpaid work paper, we found that attitudes to which roles women should or should not play have not changed as much as we would have thought. Between the 1980s and 2012—I apologise if the latter date is wrong—the number of people who said that women should be predominantly responsible for care decreased by only 10 per cent. There was still an underlying assumption that women would take on the majority of childcare and that they would give up work to do that. That cultural attitude underpins everything.

We are at risk of entering a vicious cycle in which women become further detached from the labour market and from the support systems and finance that allow them to take advantage of opportunities and develop their careers and social contributions. As a result, they do more care and unpaid work and they then have fewer opportunities.

We are in that endless cycle, and it is really important that we look for the policy interventions that will disrupt it. They include the 50 hours of wraparound, cultural, flexible childcare, the work to make social care and childcare key economic infrastructure and the need to invest in those sectors. We need to take a whole-system approach. If we look at flexible working as a silver bullet while we are in that cycle of women becoming more and more detached from the labour market, it could inadvertently lead to women being required to take on more care.

We need to think holistically about all those things. We need to think about violence against women, about funding for women's organisations and about how those two aspects interact with each other. That was a very long answer to your question, which is everything and nothing.

Ruth Boyle: I would reiterate everything that Eilidh Dickson has said, particularly on funding and the nuance that is required in describing the increase in violence against women during the pandemic.

I want to touch on some of the workplace implications. We know that violence against women affects all aspects of women's lives, and the workplace is no exception. Three quarters of women who experience domestic abuse are targeted at work.

A recent survey by Close the Gap that was conducted as part of our employer accreditation

programme found that 75 per cent of respondents had experienced or witnessed sexual harassment over a 12-month period. As Eilidh Dickson said, we see an intensification of that in the Covid-19 context. In cases in which women were working from home in unsafe situations, we see that perpetrators might have prevented victim survivors from working by denying access to necessary equipment or insisting that women have responsibility for childcare.

With regard to sexual harassment in the workplace, we see that perpetrators had new access to women because of a reliance on online communication. Further, women reported that they faced increased barriers to reporting sexual harassment during the pandemic, because they did not believe that that was a priority for the employer during the crisis. That is concerning because, before the pandemic, 80 per cent of those experiencing sexual harassment in the workplace did not make a report because of a fear of not being believed, of being blamed or of losing their job.

As Eilidh Dickson outlined, violence against women is a cause and consequence of gender inequality. Therefore, tackling women's labour market inequality is key to tackling violence against women.

I just want to flag up the fact that Close the Gap runs an employer accreditation programme called Equally Safe at Work, which focuses on the link between gender equality and violence against women. It underscores the employer's role in tackling violence against women and highlights that employers can improve their employment practice to address the barriers that women experience at work. In the aftermath of the pandemic, we have an important opportunity for employers to reassess their employment practice and see how they can better support women and victim survivors of violence against women in the workplace.

As Eilidh Dickson said, flexible working is key to enabling victim survivors of domestic abuse to enter the labour market and stay in employment. Although there has been a narrative that flexible working is now the workplace norm because of the pandemic, we are unsure whether that is the reality. Further, in some cases, if there has been an increase in flexible working, it is not predetermined that that increase will be maintained in the aftermath of the pandemic. Ultimately, the increase in flexible working was a reactive decision on the part of employers that was made in response to public health restrictions rather than a strategic business decision. There is a danger that we risk being complacent about flexible working when, in reality, there continue to be real barriers to it.

Pam Duncan-Glancy (Glasgow) (Lab): It is important that we get right under the skin of the issue not only because what you have said about the UN's warning about women's equality, but because of the impact that the situation is having on women, as we all see in our constituencies every day. We need to get ahead of the issue, so thanks for helping us to do that.

My questions are around the impact on unpaid care. I have spoken to a number of unpaid carers, before the pandemic and since, and their stories are bleak and can be pretty grim. Will you tell us a bit about your assessment of the impact of the pandemic on unpaid carers? Can you also cover the impact that the reduction in health and social care services has had on people's expectation that women will do unpaid care? Are there any particular groups of women—for example, younger women, disabled women and lone parents—who have, in your experience, ended up doing more of that unpaid care as a result of services shutting down and so on?

Professor Arshed: That was rather a lot of questions—I should have written them down. As I mentioned earlier, three quarters of the women entrepreneurs we gathered evidence from had children but only one said that she had help from her partner. I can give you lots of problematic examples. One self-employed woman was earning more from her business than her husband was earning from his employment, but they decided that she would stop her business and look after the children because his job was seen as being more important. I am not being facetious. That kind of story occurred over and over again.

As Eilidh Dickson said, there is an assumption that women are the carers. That applies not only to childcare; it applies to community care, caring for elderly parents and care that is provided in lots of different arenas and environments.

When everything was shut down, it was a given that women would take over the caring. With particular regard to the women I spoke to, the fact that services were not available had an impact on their mental health, especially if they had to close their business or put it on the back burner because they did not have the support that they needed from their partner, who was perhaps busy working.

I keep thinking about how we can resolve those issues by embedding childcare throughout the social and economic infrastructure. Childcare must not be there simply for people who are in paid employment; it must be there for everyone who earns money, regardless of whether they do that through running a small or growing businesses or through paid employment, whether that involves flexible working or part-time working. Childcare needs to be available across the board. That is key with regard to how we can take some of the

burden off mothers who participate in and contribute to the Scottish economy.

I will stop there before I go off on a rant.

Ruth Boyle: The experience of unpaid carers is an important aspect of the impact of the pandemic. We know that there are now 1.1 million unpaid carers in Scotland, 60 per cent of whom are women. Work by Carers Scotland found that 78 per cent of carers reported that they were having to provide more care than they had been providing before the pandemic. If the number of unpaid caring hours that someone is having to do is increasing, that will obviously create challenges in maintaining their paid working hours. We know that unpaid carers already had barriers to entering the labour market and maintaining their employment, and the caring responsibilities associated with the pandemic will, obviously, exacerbate that.

Unpaid carers faced mental health challenges before the pandemic, with one in four carers reporting that they had not had a break from caring in five years. We also see that 53 per cent of carers receiving carers allowance reported that they were struggling to make ends meet. A lot of the issues that we have discussed today around financial precarity, barriers to the labour market, mental health and stress are particularly pertinent for unpaid carers in Scotland.

At the start of the pandemic, we saw that care was rapidly redistributed from the state to the individual and, as Eilidh Dickson said, it was always automatically presumed that a woman would step in to fill those gaps. Work from the Alliance, Inclusion Scotland and the Glasgow Disability Alliance has found that, in some instances, social care packages were removed, or the eligibility criteria were tightened, making it harder for people to access social care. That means that a lot of that care was displaced on to female family members, which, again, increased their burden of unpaid care.

I know that I continually bring up flexible working, but flexible working is really pivotal in allowing unpaid carers to manage their unpaid and paid work. Without an increase in flexible working and high-quality part-time work, it is likely that we will push unpaid carers out of the labour market, which will cement their poverty and financial insecurity over the long term.

We have welcomed the increased payments of the carers allowance supplement over the pandemic period, but there needs to be a longer-term mechanism to guarantee unpaid carers financial security. We also need training for carers who are trying to enter the labour market and for employers who are considering how they can

better support unpaid carers with managing their needs in relation to paid and unpaid work.

The Convener: Before I bring in Eilidh Dickson, Fulton MacGregor wants to ask a similar, associated question.

Fulton MacGregor (Coatbridge and Chryston) (SNP): Before I ask my question, I want to thank colleagues, the clerks and the witnesses for allowing me to participate online. The reason why I am doing so is relevant to the subject of today's meeting, as it is in order to allow me to perform childcare functions this morning. However, I should say that, even as a dad who is trying to do a lot more childcare, I do only a fraction of what my partner, who is in the room next door, does with our three children. We need to be honest about such situations and reflect on it.

One member of the panel—I think that it was Eilidh Dickson—talked about the time when we all had an hour day to exercise. I more or less always used that hour for a walk, a run or a cycle, but my partner did not always do that, because we had two kids at that point—it was before the third came along. As men, we need to reflect on these things, too. Thank you, colleagues, for allowing me to say that.

My first question is about women key workers during the pandemic. We have talked a bit about the issue. Could the witnesses elaborate on how women key workers were affected, particularly if they had childcare responsibilities? Nurses, police officers, Royal Mail workers and so on had childcare responsibilities, but still had to work. Help with childcare was non-existent at that point. How were those workers impacted?

I am happy for you to choose the order in which the witnesses will answer, convener.

11:00

The Convener: We will go to Eilidh Dickson, as she will want to pick up on some of the points from the previous question as well.

Eilidh Dickson: I will start with Mr MacGregor's question. We know that between 70 and 80 per cent of key workers in the professions that were listed in the UK Government's list of essential workers were women. We know that essential workers were, in theory, able to access childcare throughout the pandemic, but in most cases that was only if their partner was also an essential or key worker. We heard anecdotal stories about women whose partners simply refused to take on childcare—they simply said that they could not cope with childcare 24 hours a day and that they would not do it. That left women in the incredibly

difficult situation of trying to negotiate with their employer.

We also know that the pandemic had a significant impact on women who were essential workers and lone parents. In some cases, they did not have options, because the forms said, “Is your partner also an essential worker?” What were those women meant to do if they did not have a partner? Through anecdotes, we know that that was a real issue, which attitudinal issues underpinned.

On the question about social care, Ruth Boyle covered a lot of what I was hoping to say. It is worth stressing again that that labour is not free—it is labour that women are not getting paid for, but it is not free labour. In fact, it is estimated that, during the pandemic, unpaid carers saved the UK £530 million a day, so that money is coming from somewhere. If women simply downed tools and refused to do it, the state would have to pay for it. We are still quite a long way away from recognising that. We still think that that labour will magically appear out of nowhere and that women will be available to take on unpaid care; the question is what the state will do if they are not.

Ruth mentioned that organisations have done a significant amount of work that demonstrated the impact on affected households and families of last-minute changes to or the ending of social care packages. That also undermined disabled women’s access to dignified social care, denied them their choice of what they wanted to do with that time and might have denied many of their opportunities to engage in paid work or in other forms of participation. That has been the impact on female family members.

Essentially, we cannot afford to wait for a new national care service, whenever it is created, because all those social care workers are affected now, as Ruth said, and many of them have been exposed to the virus. Some of them are affected by long Covid; in many cases, their personal protective equipment did not fit them appropriately because it was designed for male bodies.

We need investment in social care now; we cannot afford to wait. It comes back to the whole package of measures that we need to take: we need to consider childcare and social care; we need to prioritise infrastructure; and we need to make the attitudinal changes.

Some positive work has been done in other countries—I cannot remember in which countries, but I know that Uganda was involved. Around the world, men did more childcare than they had ever done before, which is a positive story that shows that they can do it. The problem is that women are still doing more. As we go back into whatever normal looks like, whenever that happens,

opportunities exist to redistribute some of that labour internally.

The Convener: Does Fulton MacGregor want to come back in before we go to Ruth Boyle?

Fulton MacGregor: Yes. Before we move on to answers from the other panel members on my question about key workers, I want to pick up on what I have heard as a constituency MSP, which panel members can maybe integrate into their answers.

Although childcare was available in the early days of the lockdown through the education system, it was not well taken up. A lot of people told me that that was because, at that point, we were dealing with a new virus that they were, quite rightly, very anxious about. Key workers, many of whom were women, were being told, “Yes, you can access this childcare”, which they felt put themselves and their families at risk because the virus was running rampant. I wonder whether the witnesses could take that into account, because there does not seem to be an awareness of the gender imbalance in that message.

Ruth Boyle: It is a very important issue and one that, surprisingly, has not had as much prominence as might have been expected. We did an analysis that found that 79 per cent of key workers in Scotland were women—and it is mostly women who work in low-paid, undervalued sectors, such as essential retail, social care, childcare and nursing. Research at the UK level by the Women’s Budget Group found that women accounted for 98 per cent of key workers who earn poverty wages. Those are jobs that were previously branded as unskilled but which are now seen as being essential to a successful pandemic response. We have an important opportunity in the aftermath of the pandemic to reassess the undervaluation of women’s work in those sectors.

Over the pandemic, the importance of social care and childcare infrastructure for women’s access to the labour market has been reinforced. The first lockdown also showed that women rely on informal networks to plug gaps in support, and it is obvious that, in the first lockdown, childcare, both formal and informal, was removed from women. That created real challenges for key workers, and particularly for lone-parent key workers, as Eilidh Dickson outlined.

Schools and nurseries opened for care for essential workers’ children, but for some families there were problems with its accessibility. Many women rely on public transport, and often those childcare services were further away from their homes and their normal services, which might have created challenges in accessing that care.

Eligibility was determined at the local level. Although I have not looked at that issue in detail, I

wonder whether all the different types of key worker jobs that women were doing were covered by the eligibility criteria. Again, that highlights the importance of flexibility of childcare in allowing women to maintain their paid work.

To pick up on the PPE question, there were issues with PPE for women in key worker roles, particularly in social care. The Royal College of Nursing also raised concerns about nursing staff who were working outside hospital environments. There are long-standing issues around PPE being inappropriate for women. The TUC found that only 29 per cent of women who utilised PPE in their work used equipment that was designed for women. That meant that, in the pandemic, PPE was not necessarily keeping women safe in some of those roles. As you outlined, Mr MacGregor, that made it very difficult for women—particularly if they were unpaid carers for disabled or older people, who were perhaps more vulnerable to the virus—to make decisions about whether to go into a workplace. They had to decide whether potentially putting family members or loved ones at risk was worth being able to maintain their paid work.

The key worker experience has brought into sharp focus some of the pre-existing issues that we see for women in the labour market, as well as the continued undervaluation of some of those jobs and sectors.

The Convener: I know that we are past our time, but just before we finish, I am keen to go round everyone for a quick and snappy comment about what we need to do as we move forward. I know that part of the discussion is about looking back at what went wrong, but what positives we can take from the pandemic?

Do you want to go first, Norin?

Professor Arshed: One thing that was highlighted in the study that I mentioned was the fact that women are much more resilient than we give them credit for.

Eilidh Dickson: Among the positives that we can take is that, as I have said, men are doing more than they have ever done, so we should focus on getting some of the burden off women when we finally return to state support for care work. There was also a huge amount of popular support—in fact, more than we have ever seen—for some measures that would make life so much easier for women. For example, there was support for more pay for carers—and pay for unpaid carers—and more support with regard to NHS workers' pay. We know that the public is starting to value care in a way that they might not have done before.

One issue that I think we all have been skirting around and which I was hoping to come back to is

the impact of isolation. People have been locked in their houses, and that situation continues for unpaid carers of disabled people who are vulnerable to the virus, and their families. They are still isolating and removing themselves from a lot of opportunities, which is having an impact on their mental health, what with all the stress and pressure that we have talked about.

We need to look again at mental health. I know that we are meant to be looking forward, but the pandemic is still with us and is still very acute for some members of society.

The Convener: I will give Ruth Boyle the last word this week.

Ruth Boyle: I have already raised a number of issues such as gender-sensitive employment support and gender-sensitive skills and training, both of which are really important. We also need gender mainstreaming in all policy.

One of the benefits of the pandemic is that it has demonstrated that many more jobs in the Scottish economy can be done on a flexible basis, and it has also challenged the cultural assumption against flexibility, which we see in certain jobs and sectors. We must ensure that employers understand the business case for maintaining flexibility in the aftermath of the pandemic by highlighting, for example, productivity gains, enhanced employee wellbeing and morale, the ability to recruit from a wider talent pool and closing the skills gaps in their business. We have seen an increase in home working, but other forms of flexibility have declined over the course of the pandemic, and what is really important for women is to have hours-based flexibility with a focus on part-time work.

We need to take the small glimmer that we have seen with regard to flexible working and try to build on it. How can the Scottish Government integrate flexible working into, say, fair work criteria, and how can we use the various levers that we have to encourage employers to take flexible working forward? We know that 87 per cent of women want to work more flexibly in future, and we need to meet that demand.

The Convener: Thank you very much. We will have another evidence-taking session on this subject next week, when we will look at the issue of intersectionality, which you have all raised.

We now move into private session.

11:13

Meeting continued in private until 12:15.

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