Response to the OFMDFM Consultation on "A Sense of Belonging: Delivering Social Change through a Racial Equality Strategy" from the Black and Minority Ethnic Women's Network

"The aim of the Ethnic Minority Women's Network is to promote gender and racial equality for Black and Minority Ethnic (BME) women in Northern Ireland, through the development of BME women's capacity so that they can support and assist their communities on gender and racial equality related policies and services; the development of community based leadership; the empowerment of BME women through education, training and the development of role models; the promotion of BME women's participation in public life; the identification of BME women's issues and needs through data collection and research; and the organisation of BME women in Northern Ireland through the development of programmes, activities and events."

1. Introduction

1.1 "Ethnic and minority women are underrepresented in all areas of the labour market....[and] in political and public life."

(The UN Committee on the Elimination of Discrimination Against Women 2008)

- 1.2 This is the response from the Black and Minority Ethnic Women's Network (BMEWN)¹, this response has been informed by inequalities suffered by BME women identified by NICEM through 2 research reports and a specific dedicated meeting of the network co-ordinated and convened by NICEM in August 2014. ²
- 1.3 Discrimination impacts BME women in specific ways that are different from ethnic minority men or non-BME women. Barriers that BME women face in accessing services or the job marker are often due to a specific combination of their gender and ethnicity. This response will seek to highlight some of those specific issues.
- 1.4 At the outset of this response we would like to highlight the wonderful contribution that BME women make to creating a better more vibrant and more diverse northern Ireland, something not acknowledged in the Ministerial Foreword of the document. BME women are often disproportionately represented in some of the most difficult but most essential jobs in NI, such as

¹ See annex 1 for more information about the network.

² Isal, S., 'The Experiences of Ethnic Minority Women in Northern Ireland' (2013) Available at: http://nicem.org.uk/wp-content/uploads/2014/03/EoEMWiNI-11.pdf [Accessed: 05/09/14], McWilliams, M. and Priyamvada Yarnell, 'The Protection and Rights of Black and Minority Ethnic Women Experiencing Domestic Violence in Northern Ireland' (2013) Available at: http://nicem.org.uk/wp-content/uploads/2014/03/PRBMEWEDVNI-1.pdf [Accessed 08/09/14]

care home nurses and factory workers. They are also disproportionately represented when it comes to poverty (Moosa and Woodroffe report that in the UK 40% of BME women live in poverty, twice the proportion of non-BME women.)³

- 1.5 If OFMDFM are to adequately address such disproportionate issues of discrimination then the Racial Equality Strategy must meaningfully recognize the multiple and intersectional discrimination faced by BME women.
- 1.6 The response will highlight the following issues:
 - Multiple identity issues
 - Childcare needs
 - Domestic abuse and violence against women
 - Forced marriage and "honour" based violence
 - Healthcare
 - Qualifications and Employment
 - Political Participation

2. Multiple Identity Issues

- 2.1 The issue of multiple identities has particular significance for ethnic minority women in Northern Ireland. BME women may face additional obstacles in many fields, including healthcare, employment and access to justice, due to their status as both ethnic minorities and women.⁴ The 2013 concluding observations of the Committee on the Elimination of Discrimination Against Women (CEDAW) emphasised the issue of multiple identities in Northern Ireland, and expressed concern at the fact that multiple discrimination is not legislatively recognised, urging the State to take measures to recognise multiple discrimination in Northern Ireland.⁵
- 2.2 Therefore, the BMEWN is extremely concerned by the fact that no actions to combat multiple discrimination, or commitments to legislatively recognise

³ Moosa, Z and Woodroffe, J "Poverty Pathways Pathways:ethnic minority women's livelihoods" (2009)

⁴ See, for example: European Agency for Fundamental Rights, 'Inequalities and Multiple Discrimination in Access to and Quality of Healthcare' (2013) Available at: http://fra.europa.eu/sites/default/files/inequalities-discrimination-healthcare_en.pdf [Accessed: 05/09/14]; Sheppard, C., 'Multiple Discrimination in the World of Work' (2011) Available at: https://wcms_170015.pdf [Accessed 05/09/14]; Milieu Ltd., 'Comparative Study on Access to Justice in Gender Equality and Anti-Discrimination Law' (2011) Available at:

<ec.europa.eu/justice/...sept.../final_report_access_to_justice_final_en.pdf> [Accessed: 05/09/14] pp.7-8

⁵ Committee on the Elimination of Discrimination Against Women, 'Concluding Observations on the Seventh Periodic Report of the United Kingdom of Great Britain and Northern Ireland' (2013) Available at:

http://www.scottishhumanrights.com/application/resources/documents/ConcObsCEDAW.do c> [Accessed: 05/09/14] paras. 18 and 19

the reality of multiple discrimination, are provided within the text of the draft Strategy. Additionally, the fact that key gender-related strategies, such as the Gender Equality Strategy and the Domestic and Sexual Violence Strategy, are not mentioned in Chapter 4, which considers the relationship between the Racial Equality Strategy (RES) and other relevant Strategies, amounts to a failure to adequately address the reality of multiple discrimination.

2.3 The BMEWN recommends that the Strategy provide for real, measurable actions to address multiple discrimination. These should include a commitment to recognise the existence of multiple discrimination, through the introduction of timetabled legislation or policy. Additionally, Chapter 4 should delineate how the Strategy will interact with key gender-related strategies, including the Gender Equality Strategy and the Domestic and Sexual Violence Strategy.

Childcare

- 3.1 Accessing Childcare is an issue that presents unique difficulties for many BME women. For example, it appears that sufficient effort has not been made to inform ethnic minority families of the availability of relevant entitlements one piece of research demonstrated how 29% of respondents were not aware of their entitlement to funded pre-school care. Other research has shown that 63.9% of respondents had difficulty in accessing information on childcare and that most participants were unaware of their eligibility for financial assistance to support childcare.
- 3.2 Furthermore, the expense of using formal childcare may prove particularly onerous a burden for some BME families. Recent research has shown that some individuals have had to choose between paying for childcare and paying their bills. This financial quandary is exacerbated by the fact that BME parents who do not have a family support network in the country do not have the option to leave children in the care of relatives. Indeed, 54.9% of respondents didn't have any family members in the country to assist them with childcare.
- 3.3 Additionally, some families have expressed the fact that childcare in Northern Ireland may not be sensitive to the cultural practices and values that

10 ibid p.6

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⁶ Isal, S., 'The Experiences of Ethnic Minority Women in Northern Ireland' (2013) Available at: http://nicem.org.uk/wp-content/uploads/2014/03/EoEMWiNI-11.pdf [Accessed: 05/09/14] p.25

⁷ Northern Ireland Council for Ethnic Minorities and Barnardo's Northern Ireland, 'Believe in Childcare? Executive Summary' (2014) Available at: http://nicem.org.uk/wp-content/uploads/2014/03/Believe-in-Childcare-Executive-Summary-English.pdf [Accessed: 05/09/14] pp.3 and 4

⁸ Kernaghan, D., 'Believe in Childcare?' (2014) Available at: http://nicem.org.uk/wp-content/uploads/2014/03/Believe-in-Childcare-NICEM-and-Barnardos-NI-Dr-Donna-Kernaghan.pdf [Accessed: 05/09/14] p.38

⁹ ibid p.33

they deem important, therefore they prefer to leave their children in the care of relatives if they have the option to do so.¹¹

- 3.4 The difficulty in securing childcare due to irregular working hours is also an issue that particularly affects BME families. Indeed, a key recommendation arising from NICEM and Barnardo's childcare research was to ensure the availability of flexible childcare services, to allow provision for families where the parents work atypical hours or are working subject to zero-hour contracts.¹²
- 3.5 Therefore, the BMEWN is concerned by the fact that the draft RES makes no mention of childcare issues and makes no provision for actions to address the inequalities that BME families face in accessing and using these services in Northern Ireland.
- 3.6 The BMEWN recommends that the finalised RES acknowledge the particular difficulties faced by BME families, and provide for specific actions to combat the inequalities faced by these families in utilising the services available. Additionally, a commitment should be made to develop mechanisms for raising awareness of relevant childcare entitlements amongst BME communities.

Domestic Abuse and Violence Against Women

- 4.1 Domestic abuse is an issue that particularly affects BME communities in Northern Ireland. Over 5% of domestic abuse victims in 2013/14 had an ethnic minority background¹³, which constitutes a significant overrepresentation of the BME population in Northern Ireland. Indeed, CoEDAW's 2013 Concluding Observations on the United Kingdom highlight the fact that domestic violence particularly affects black and ethnic minority women.¹⁴ Nevertheless, these figures likely represent only a fraction of the true scale of abuse, with respondents to recent research on domestic abuse in BME communities in Northern Ireland emphasising that these offences were widely underreported.¹⁵
- 4.2 This underreporting is a consequence of the particular difficulties that many BME women face in escaping domestic abuse, due to isolation and other specific issues. For example, women who are migrants and who derive their leave to remain in the United Kingdom from their partner/spouse may feel unable to jeopardise their livelihood by reporting abuse. Additionally,

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¹¹ ibid pp.37 and 43

¹² ibid p.52

¹³ Police Service of Northern Ireland, 'Trends in Domestic Abuse Incidents and Crimes Recorded by the Police in Northern Ireland 2004/05 to 2013/14' (2014) Available at: http://www.psni.police.uk/domestic_abuse_incidents_and_crimes_in_northern_ireland_2004-05_to_2013-14.pdf [Accessed 08/09/14] p.27

¹⁵ McWilliams, M. and Priyamvada Yarnell, 'The Protection and Rights of Black and Minority Ethnic Women Experiencing Domestic Violence in Northern Ireland' (2014) Available at: http://nicem.org.uk/wp-content/uploads/2014/03/PRBMEWEDVNI-1.pdf [Accessed 08/09/14]

women who have migrated from another State may be unaware of their legal entitlements in the United Kingdom. Furthermore, the legacy of a poor police response, both in Northern Ireland and, if applicable, in the individual's country of origin may result in a reluctance to report offences. 16 Indeed, CEDAW has received reports indicating a negative police attitude towards victims of domestic violence in the UK.¹⁷ These, along with various other factors, make domestic abuse an especially underreported category of offence amongst BME women in Northern Ireland.

- 4.4 Institutional racism has also been identified as a problem for BME victims of domestic abuse. Research has highlighted an example of a public authority tacitly accepting abuse on the basis that the perpetrator is from a BME background, opining that they 'don't really know any better' or excusing abuse as a cultural issue. 18 This is a particularly unacceptable perspective to maintain, as Article 4 of the UN Declaration on the Elimination of Violence Against Women states that States should not 'invoke any custom, tradition or religious consideration to avoid their obligations with respect to [the elimination of violence against women]'. Additionally, cases have been highlighted where the Housing Executive and Social Services have responded to complaints of domestic abuse and sexual violence by purchasing the victim a plane ticket 'home' to their country of origin.¹⁹
- 4.5 The functioning of the benefit system also places many BME women at a greater risk of domestic abuse. Child benefits are often issued in the father's name as a matter of expediting the claim, as the male partner generally enters the country in advance to their partner. However, this renders many women financially dependent on their partner, which puts them at a significant risk of exploitation. This is exacerbated by the Child Benefit Agency's insistence that the father's permission is sought prior to the transfer of any benefits and thirty days be allowed for his response, even where the mother has been positively identified as a victim of domestic abuse 20
- 4.6 A further complication arises where the victim has no recourse to public funds due to their residency status. This means that these victims cannot benefit from shelters provided by Women's Aid, as they are not entitled to any public funds to cover the costs of these shelters. While the Government has provided funds to provide for victims in this situation before, it has since terminated them, thus leaving some ethnic minority women with a choice between remaining in an abusive relationship and becoming destitute.²¹
- 4.7 It is further notable that international commentary provided by the UN Special Rapporteur on Violence Against Women has noted the problems faced by women experiencing violence in Northern Ireland, highlighting the

¹⁶ ibid p.9

op cit n 2 para.34

¹⁸ ibid p.14

¹⁹ ibid pp.14-15

²⁰ ibid p.19

²¹ ibid pp.20-21

fact that most women's experiences of violence both during and after the conflict have not been recognised. Additionally, the Rapporteur emphasised the need to address the specific problems facing BME women who have experienced violence, via the establishment of specific taskforces or working groups that have representation from BME communities, to ensure that policy in relevant areas is appropriately guided.²²

- 4.8 Female Genital Mutilation (FGM) is also a significant issue in the United Kingdom. CEDAW has expressed concern in its 2013 concluding observations that there had been no convictions for FGM to date²³, which remains the case today. Indeed, the Female Genital Mutilation Initiative noted the difficulties in taking comprehensive, unified action to tackle FGM in the United Kingdom, due to the lack of an overarching national policy for local authorities to follow and the 'patchy and inadequate' local statutory responses to the issue.²⁴ We Welcome the fact that guidelines on FGM have recently been published but more need to be done to ensure front line staff and those who are in a position to identify such issues are adequately trained
- 4.9 The BMEWN is concerned, therefore, by the fact that the draft Strategy neither proposes any actions to tackle the particular difficulties faced by BME women in terms of violence and abuse, nor does it make an acknowledgement of these particular difficulties. Additionally, no commitment is made, or actions envisioned, for addressing the ineffectiveness of the current approach for tackling FGM.
- 4.10 The BMEWN recommends that the finalised Strategy acknowledge the particular difficulties faced by BME women who are victims of violent treatment or abuse, including FGM. Additionally, actions should be committed to that tackle these inequalities, particularly those arising from institutional discrimination.
- 4.11 Regarding FGM, measures should be taken to establish a robust framework for preventing this offence from taking place, as the current approach is demonstrably ineffective. A commitment should also be made to foster greater involvement of BME women in informing policy, by ensuring that the bodies arising from the RES have representation from this sector of society.

Forced Marriage and 'Honour' Based Violence

²² Office of the High Commissioner for Human Rights, 'Special Rapporteur on violence against women finalizes country mission to the United Kingdom and Northern Ireland and calls for urgent action to address the accountability deficit and also the adverse impacts of changes in funding and services' (2014) Available at:

http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=14514&LangID=E > [Accessed 09/09/14] (not paginated)

op cit n 2 para.36

²⁴ Esmee Fairbairn Foundation et al, 'Tackling Female Genital Mutilation in the UK: What Works in Community-Based Prevention Work' (2013) Available at:

http://esmeefairbairn.org.uk/uploads/documents/Publications/FGM Final Evaluation summ ary 2013.pdf> [Accessed 09/09/14] p.2

- 5.1 Forced marriage is another issue of concern for BME women in Northern Ireland. The Police Service of Northern Ireland (PSNI) notes that although men and women both may be affected by forced marriage, victims are mostly women and girls aged between 13 and 30.²⁵ The particular isolation and suffering endured by women subjected to forced marriage is emphasised by the PSNI's service procedure on forced marriage, which states that victims frequently endure rape, forced pregnancy, withdrawal from education and the creation of an economic dependence upon their abuser. ²⁶
- 5.2 The BMEWN is particularly concerned by the fact that forced marriage is not currently outlawed in Northern Ireland, meaning that legal authorities must pursue perpetrators on the basis of offences committed as a consequence of forcing an individual to marry (such as rape, kidnap, forced abortion et cetera). This approach provides an added obstacle to the work of relevant authorities in combating forced marriage. However, the full extent of this obstacle is difficult to scope, as the PSNI does not publish statistics on the number of forced marriage incidents that it encounters. This is despite the fact that the PSNI gathers this information a 2011 freedom of information request unveiled data for that year. However, it is concerning that this data illustrated that there had been zero recorded incidents of forced marriage and that more recent data issued by the Forced Marriage Unit has shown that Northern Ireland has the lowest number of forced marriage incident detections of any UK region²⁹, thus reinforcing the case for suggesting that the current indirect approach to tackling forced marriage is cumbersome and ineffective.
- 5.3 The issue of honour-based violence (HBV) is also of concern to the BMEWN. Despite the fact that HBV is a widely acknowledged issue in Great Britain with the vast majority of Public Protection Units addressing HBV³⁰ and the publication of statistical data by the Crown Prosecution Service (CPS)³¹, Northern Ireland's treatment of this issue is lax. In contrast to Great Britain, the prevalence of HBV in Northern Ireland is difficult to gauge due to the lack of data available. Available information has to be obtained via freedom of information requests, meaning that publicly accessible data is sparse, and the Public Prosecution Service (PPS) does not publish data on

 27 ibid p.3

²⁵ Police Service of Northern Ireland, 'Police Response to Forced Marriage' (2011) SP 3/2011 HQ Ref: 764155 p.7

²⁶ ibid

Police Service of Northern Ireland, 'Freedom of Information Request: Honour Based Violence' (2012) Req. No. F-2012-02613
 Forced Marriage Unit, 'Statistics January to December 2012' (2013) Available at:

²⁹ Forced Marriage Unit, 'Statistics January to December 2012' (2013) Available at: https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/141823/Stats_2012.pdf [Accessed 10/09/14]; Forced Marriage Unit, 'Statistics January to December 2013' (2014) Available

at:https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/291855/FM U 2013 statistics.pdf> [Accessed 10/09/14]

³⁰ Bunting, L, Hayes, D. and Clifford, G., 'Special Measures for Vulnerable Witnesses in Northern Ireland' (2013) Available at: < http://www.dojni.gov.uk/special-measures-for-vulnerable-witnesses-in-northern-ireland> [Accessed 12/09/14] p.7

³¹ Crown Prosecution Service, 'Violence Against Women and Girls Crime Report 2013-2014' (2014) Available at: http://www.cps.gov.uk/publications/docs/cps_vawg_report_2014.pdf [Accessed 12/09/14] p.61

HBV equivalent to that made available in Great Britain. Data that has entered the public domain illustrates a significant lack of incident detections – in 2011, there was only a single HBV incident recorded and no conviction was secured.32

- 5.4 Therefore, it seems remiss that the proposed Strategy does not refer to either forced marriages or HBV. As issues of violence that particularly affect BME women, the omission to mention these problems and commit to concrete action to combat them constitutes a serious detriment to this sector of the Northern Ireland population.
- 5.5 The BMEWN recommends that the finalised Strategy acknowledge the particular risks that many BME women face, in the forms of forced marriage and HBV. A commitment should be made to legislate against forced marriage, to allow a more expeditious approach to be developed towards combating it. Additionally, commitment should be made to publish data on the reported incidents, detections, prosecutions and convictions for forced marriage and HBV. Furthermore, provision should be made for the Public Prosecution Service to develop legal guidance on forced marriage and HBV, in line with that offered by the Crown **Prosecution Service.**

Healthcare

- 6.1 Healthcare has been identified as an issue that worries many BME women in Northern Ireland.³³ In research conducted by the Northern Ireland Council for Ethnic Minorities, 15.8% of respondents stated that they had a poor or very poor experience with visiting a hospital or their GP. In explaining the reasons for this poor experience, many women highlighted the lack of availability of interpretation. This problem was also raised in terms of BME women's experience of giving birth.³⁴ This may indicate the inadequacy of the health services in responding to the growing demand for interpretation services.³⁵ Additionally, some respondents felt that they had been discriminated against while visiting their hospital or GP.³⁶
- 6.2 The BMEWN notes that the UK has obligations under the International Covenant on Economic, Social and Cultural Rights 1966, including the Article 12 right to health. General Comment Number 14 of the Committee on Economic, Social and Cultural Rights has added that this provision entails ensuring accessibility of healthcare, both in terms of non-discrimination and ensuring the accessibility of information.³⁷ Additionally, Article 12 of the Convention on the Elimination of all Forms of Discrimination Against Women

³² op cit n 27

³³ op cit n 3 p.30 op cit n 3 pp.29-30

³⁵ Wallace, A., McAreavey, R. and Atkin, K., 'Poverty and Ethnicity in Northern Ireland: An Evidence Review' (2014) Available at: <www.irf.org.uk/sites/files/jrf/poverty-ethnicity-northernireland-full.pdf> [Accessed 12/09/14] p.15 (fig.5)

³⁷ Economic and Social Council, General Comment No.14 (2000), para.12

(CEDAW) obliges States Party to eliminate discrimination against women in the field of healthcare and ensure that women have access to appropriate services in connection with pregnancy.

6.3 Traveller women experience particularly poor health outcomes; All-Ireland research has shown that Traveller women have, on average, a life-expectancy that is 11.5 years lower than that of their settled peers. This may be attributed in part to lifestyle issues, such as a higher rate of alcohol consumption than the general population, a greater prevalence of smoking and the consumption of a less healthy diet than the general population. However, this research has also illustrated accessibility issues regarding health services; 17.9% of NI respondents felt that their access to Accident and Emergency was worse than that of the general population, with 28.6% of these respondents citing lack of information as the cause of this discontent. Ultimately, this research concluded that 'Traveller respondents either perceive or actually do experience a poorer quality of healthcare service' than the general public.

6.4 It is further notable that an individual's immigration status may also affect their access to healthcare services. Health services are available free of charge to individuals who are deemed to be 'ordinarily resident' within Great Britain or the Channel island, or who meet any of the UK residence qualifications under Regulation 3 of the Provision of Health Services to Persons not Ordinarily Resident Regulations (Northern Ireland) 2005. However, individuals who are in the UK on short-term visas will not meet these requirements and will therefore not be entitled to healthcare other than emergency care and those types of care listed under Regulation 4 of the 2005 Regulations.

6.5 Furthermore, Regulation 3 of the Provision of Health Services to Persons not Ordinarily Resident (Amendment) Regulations (Northern Ireland) 2013, which have yet to come into effect, has introduced the potential for individuals determined to be 'visitors' to be charged for the use of National Health Service (NHS) services. Considering the economic difficulties that many migrants face in today's economic climate⁴⁴, the potential for individuals to be charged for services may produce a significant barrier to accessing healthcare.

40 ibid p.67

³⁸ Our Geels, 'All-Ireland Traveller Health Study' (2010) Available at: http://www.dhsspsni.gov.uk/aiths.pdf [Accessed 12/09/14] p.94

³⁹ ibid p.68

⁴¹ ibid p.71

⁴² ibid p.76

⁴³ ibid p.78

⁴⁴ Northern Ireland Council for Ethnic Minorities, 'The Annual Human Rights and Racial Equality Benchmarking Report 2013/14' (2014) Available at: http://nicem.org.uk/wp-content/uploads/2014/06/Final-Benchmarking-Full-Report-NICEM-web.pdf [Accessed 15/09/14]; McAfee, C., 'The Impact of the Economic Downturn on the Black and Minority Ethnic People in the North West of Northern Ireland' (2014) Available at: http://nicem.org.uk/wp-content/uploads/2014/08/North-West-Economic-Downturn-Report.pdf [Accessed 15/09/14] pp.2-3

- 6.6 The BMEWN finds it concerning, therefore, that the proposed Strategy makes little reference to the particular health needs of BME individuals, and no reference to the particular health needs of BME women in Northern Ireland. This includes the absence of any proposed or example actions to tackle in inequalities faced by BME women in accessing healthcare and in securing beneficial health outcomes.
- 6.7 It is recommended that the finalised Strategy acknowledge the particular difficulties faced by BME women in the field of healthcare. The Strategy should also contain a commitment to provide actions to combat these difficulties, including problems with accessing interpretation, obstacles to accessing healthcare services and relatively poor health outcomes.

Qualifications and Employment

- 7.1 Research has shown that BME women are generally quite highly qualified, with other half of respondents having a degree-level qualification or higher. This exceeds the national average, with only 24% of Northern Ireland's population having a degree-level or above qualification the lowest average in the UK. Despite this, 45.6% of respondents stated that they were unemployed, thus suggesting that there is a serious issue of underemployment of BME women. This is part of an underutilisation of the BME population's skills generally in Northern Ireland.
- 7.2 Attaining recognition of qualifications gained abroad has proven to be a significant obstacle for BME women seeking employment in Northern Ireland. Of a sample of Northern Irish BME women who were unemployed, 81% had qualifications gained abroad, compared to only 27% who had qualifications gained in the UK.⁴⁹
- 7.3 Factors other than non-recognition of qualifications also provide obstacles to BME women seeking employment. Language issues have been cited as a problem for BME women seeking employment, as have caring responsibilities towards family members.⁵⁰
- 7.4 Discrimination may also present as a barrier to gaining employment. BME women may experience discrimination in the application process, with

⁴⁶ Lynn, S., 'Mapping the Deployment of Migrant Labour in Northern Ireland' (2013) Available at:

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⁴⁵ op cit n 3 p.18

http://www.migrationni.org/DataEditorUploads/Mapping%20the%20Deployment%20of%20Migrant%20Labour%20in%20NI.pdf [Accessed 15/09/14] p.13

http://www.migrationni.org/DataEditorUploads/Mapping%20the%20Deployment%20of%20Migrant%20Labour%20in%20NI.pdf [Accessed 15/09/14] p.13

http://www.migrationni.org/DataEditorUploads/Mapping%20the%20Deployment%20of%20Migrant%20Labour%20in%20NI.pdf [Accessed 15/09/14] p.13

⁴⁸ McAfee, C., 'The Impact of the Economic Downturn on the Black and Minority Ethnic People in the North West of Northern Ireland' (2014) Available at: http://nicem.org.uk/wp-content/uploads/2014/08/North-West-Economic-Downturn-Report.pdf [Accessed 15/09/14] p.2

⁴⁹ op cit n 3 p.19

⁵⁰ ibid

employers rejecting them due to the prioritisation of local applicants. Additionally, discrimination may be experienced in the interview process, with employers criticising applicants' level of English or questioning their ability to do the job based on assumptions about their ethnicity, religion or culture.⁵¹ On an anecdotal level, the BMEWN has members who have experienced cultural discrimination in seeking employment.

- 7.5 Even for those who do attain employment, discrimination in the workplace is a significant issue. BME women may face particular kinds of discrimination, such as losing employment due to wearing a headscarf or due to absence when they are pregnant. This discrimination is additional to the discrimination that BME individuals generally face in the UK labour market, which may involve being overlooked for promotion, receiving fewer wages than colleagues and being subjected to overt abuse. Additional to this, BME women also face the discriminatory treatment to which women generally are subjected in the workplace. Due to this confluence of factors, BME women face particularly discriminatory working conditions.
- 7.6 The issues that BME women face in attaining employment form part of a wider pattern of discrimination against women in the field of employment in Northern Ireland. For example, while women make up 81% of NHS staff, only a third of Health and Social Care Trust CEOs are women. In a similar vein, whilst 76% of all schoolteachers are women, there are no female University Vice Chancellors in Northern Ireland and only 13% of Further Education Principles are women. Evidently, senior positions are off-limits to women, including BME women, in Northern Ireland, even in sectors where they constitute the vast majority of the workforce. ⁵⁵
- 7.7 Employment difficulties have been exacerbated by the uncertainty generated by the economic downturn. Research has shown that many BME women are concerned about losing their jobs in the current economic climate, and that their current level of pay will be insufficient to meet their needs. ⁵⁶
- 7.8 Therefore, the BMEWN is concerned by the fact that the proposed Strategy makes no reference to the particular difficulties faced by BME women in the employment sphere. Additionally, the consultation document does not propose any actions or suggested actions to tackle these inequalities. Furthermore, while the document does discuss the economic

⁵² ibid p.19

⁵⁶ op cit n 3 p.23

⁵¹ ibid p.24

⁵³ op cit n 34 p.37

⁵⁴ See for example: Aneta Lukovicsova v Spur Steak & Grill, Larspur 6 and Spur Corporation UK Ltd- Nevada Spur (2012) Available at:

 [Accessed 15/09/14]

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⁵⁵ Potter, M., 'Who Runs Northern Ireland? A Summary of Statistics Relating to Gender and Power' (2014) Available at:

http://www.niassembly.gov.uk/Documents/RalSe/Publications/2014/assembly_exec_review/7914.pdf [Accessed 16/09/14] p.5

downturn in the context of how it has affected the majority population's perspective of migrant workers, it does not acknowledge the impact of the economic downturn on migrants and people with a BME background themselves.

7.9 The BMEWN recommends that the Strategy acknowledge the particular inequalities that BME women face in the field of employment and commit to developing actions to tackle the full range of obstacles and discriminatory treatment that BME women experience in this area. This includes actions to counteract the obstacles BME women face in gaining employment, such as language issues, family commitments and discrimination, and actions to address workplace discrimination. Additionally, the impact of the economic downturn on the migrant and BME populations' employment security and experiences should be acknowledged.

Political Participation

- 8.1 BME women's political participation is limited by the fact that many BME women are not aware of their ability to vote. Research has suggested that significant proportion of BME women, 13.6% of respondents, were not aware of whether they were able to vote or not. Indeed, a third of respondents from the EU stated either they could not vote or did not know if they could vote, despite the fact that EU citizens have the right to vote at both local and EU elections.⁵⁷ Therefore, awareness of voting rights is an issue that must be addressed to foster greater political participation from BME women in Northern Ireland.
- 8.2 Awareness is also an issue that affects BME women's intention to vote. From the same research, participants who did not vote largely stated that they did not do so because they did not know who to vote for or that they were disinterested in politics. Additionally, the notion that political representatives in Northern Ireland were not concerned with BME women's issues was raised.⁵⁸ Regarding political participation more generally, members of the BMEWN have raised issues such as a lack of accessibility to meeting grounds and the failure to provide BME women with a platform to speak as barriers to participation.
- 8.3 Both women and ethnic minorities are currently underrepresented in Northern Ireland's devolved Government. There are currently only 22 female MLAs in Stormont, and there is only a single BME representative. This lack of political representation is compounded by the fact that few BME women have expressed an interest in becoming a political representative, with 90% of respondents stating that they had never considered standing for election.⁵⁹ Women are also underrepresented in senior positions in the civil service, with

⁵⁷ op cit n 3 pp.25-26

⁵⁸ ibid p.26 59 ibid

only a third of senior civil servants being women and all permanent secretaries being men.⁶⁰

- 8.4 Despite this underrepresentation, there is little in the way of measures aimed at increasing the number of women in our political system. The only legislative measure currently facilitating increased participation from women is the Sex Discrimination (Election Candidates) Act 2002, which allows positive action measures to avoid contravening anti-discrimination law. Key constitutional legislation, such as the Northern Ireland Act 1998, does not consider the issue of gender equality in the devolved Government.
- 8.5 While legislative reform could be useful in tackling political underrepresentation, softer measures could also be utilised to increase participation. For example, parliamentary procedures may be altered to accommodate female representatives better, such as through the institution of family-friendly sitting hours, the introduction of rules to provide for gender-neutral language in the Assembly, the provision of childcare services and the permission of distance-voting to allow unwell or pregnant representatives to vote.⁶¹
- 8.6 On an international platform, it is notable that Article 7 of CEDAW compels States to 'take all appropriate measures to eliminate discrimination against women in the political and public life of the country'. Additionally, Strategic Objectives G.1 and G.2 of the Beijing Platform for Action 1995 and Principle 6 of the Venice Commission's 2011 Guidelines on Political Participation address the need to increase women's participation in public life. Furthermore, CoEDAW's 2013 concluding observations recommend that the State continue to take targeted measures to improve women's political representation. 62
- 8.7 The BMEWN is concerned, therefore, by the fact that the proposed Strategy, although it makes reference to ensuring equality of opportunity in the political sphere and increasing BME participation, does not acknowledge the barriers to political participation that BME women face. Nor does the text of the document provide for any actions to address these issues.
- 8.8 The BMEWN recommends that the Strategy include an acknowledgement of the barriers to BME women's participation in political life in Northern Ireland, with reference to current research. Priority issues should be identified and addressed through key, targeted actions.

⁶⁰ op cit n 54 p.4

Legislative Reform

- 9.1 The BMEWN welcomes the draft Strategy's acknowledgment of the support both within and without the Assembly for reform of the Race Relations Order 1997. However, the Network notes that the Strategy does not commit to the reform of this legislation. It is felt that legislative reform is a vital component of securing meaningful change in the area of racial equality in Northern Ireland.
- 9.2 The BMEWN recommends that the finalised Strategy contain a commitment to specific, timetabled reform of the Race Relations Order to bring protections in line with those offered in the rest of the United Kingdom.

Implementation

- 10.1 It is important to ensure that the Strategy makes strong measures for its own implementation, so that real, measurable actions arise from its commitments. The BMEWN notes with concern the fact that the current draft lacks a commitment to establish racial equality champions to oversee Departmental implementation and provide a point of contact for community members and organisations, despite this commitment being provided in the previous Racial Equality Strategy.
- 10.2 Additionally, the BMEWN is concerned by the fact that the draft Strategy does not establish a structure or a timetable for creating action plans to ensure its implementation, and by the fact that the Racial Equality Panel has diminished authority in comparison to mechanisms established under the Together: Building a United Community Strategy.
- 10.3 The BMEWN recommends that the finalised Strategy contain measures to ensure that the Strategy's commitments are adequately implemented, including the introduction of racial equality champions and a bipartite system of Departmental and thematic action plans, with a timetable for the production of these action plans. Racial equality champions should provide annual reports on implementation to the Racial Equality Panel, in order to ensure that implementation is adequately monitored.
- 10.4 The BMEWN also recommends that the Racial Equality Panel have its authority bolstered by being jointly chaired by the two junior ministers and an ethnic minority community representative.

Ethnic Monitoring

- 11.1 The BMEWN welcomes the commitment made within the Strategy to produce a system of ethnic monitoring in order to improve data collection and availability. However, the Network is concerned by the fact that the current proposals do not include a commitment to gather any data that is not already being gathered. Additionally, the draft Strategy suggests that conducting ethnic monitoring will be at the discretion of Department, leaving the possibility that data may not be gathered.
- 11.2 The BMEWN recommends that the finalised Strategy make ethnic monitoring compulsory for Departments to conduct. Additionally, indicators should be drafted that compel the collection of data beyond that which is already being collected.

Annex 1

ABOUT THE NETWORK

Aim

The aim of the network is to promote gender and racial equality for ethnic minority women in Northern Ireland.

Objectives

The network intends to:

- 1. Develop the capacity of BME women in order that they can support and assist their communities on gender and racial equality related policies and services;
- 2. Develop sustainable community based leadership of BME women in Northern Ireland;
- 3. Empowering BME women through education, training and developing role models;
- 4. Promote and increase BME women's participation in all aspects of public life;
- 5. Identify the issues and needs of BME women through data collection and research;
- 6. Organise BME women living in Northern Ireland together through developing programmes and organising activities and events.

History of the Group

In Summer 2013 NICEM prepared a shadow response to the UK's report to the Committee on the Elimination of Discrimination Against women, ⁶³ the response was informed by over 450 questionnaire responses from BME women as well as over 20 focus groups throughout Northern Ireland and a dedicated piece of research looking at domestic violence and minority ethnic women, ⁶⁴ in addition we held several larger scale seminars including a women only event on violence against BME women and CEDAW in February 2013, over 60 women attended and through this work it was identified that a dedicated minority led initiative was needed in order to address the issue and develop links between agencies and community members as well as raising awareness.

Post the examination of the of UK by the Committee on the Elimination of Discrimination Against Women in 2013 and the issuing of the CEDAW committee's concluding comments, the NICEM women's delegation, who had attended the hearing held a follow up meeting in Stormont where it was decided to establish the women's network. Since then there have been 5 meetings of the network. It has been growing since with over 150 women involved. The network has been successful in obtaining funding from the Joseph Rowntree Charitable Trust to continue its work.

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 ⁶³ See our website for all copies of reports referred to, www.nicem.org.uk
 ⁶⁴ "The Protection and Rights of Black and Minority Ethnic Women Experiencing Domestic Violence in NI," Professor Monica McWilliams and Priyamvada Yarnell for NICEM (June 2013)