Engender Parliamentary Briefing: Coronavirus (Scotland) Bill

BACKGROUND

1. Women and COVID-19

Engender is concerned that the global crisis that the COVID-19 pandemic represents poses immediate and long-term threats to women’s lives, economic security, safety and equality. Women’s inequality around the world exacerbates their vulnerability to not only catching the virus, but the social and economic burdens of our collective responses. The evidence from previous pandemics and crises has shown that when the safety nets put in place by the state are stretched to breaking point, it is women that are hit the hardest, and this health crisis is highlighting gaps in UK social and economic policy in an unprecedented way.

We do not believe that, as currently drafted, the Coronavirus (Scotland) Bill adequately takes account of the gendered differences between women’s and men’s lives, and call for equality to be integral to Scotland’s response to this crisis. We therefore urge MSPs to consider women’s specific needs, and the possibility of including a duty to pay due regard to the need to advance equality and eliminate discrimination when exercising powers under the Bill.

SPECIFIC CONSIDERATIONS

1. How do we secure crisis management which understands women’s lives?

Women’s different roles and life experiences place them at an increased risk of catching or spreading COVID-19 and increased risk of facing financial and physical insecurity. Scotland must ensure that:

- Leadership and crisis management teams include women and gender competence - women hold 30.4% of health service chief roles, while 77% of the overall NHS Scotland workforce are women.¹

• Gender mainstreaming is evident within our responses, for example, Italy has adopted specific measures to support women’s jobs, including a dedicated fund for women’s entrepreneurship.  

2. How will COVID-19 impact women’s experience of the health system?

Women as patients:
• Sex disaggregation of data as it emerges from testing and treatment should be prioritised, largely to influence responses in the immediate clinical setting at this stage and longer-term for policy development.
• Women are generally less likely to receive treatment, as diagnosis of conditions in women and women’s pain are treated differently to that of men.  
• Staffing and resourcing of maternity and reproductive health is a key concern for women regardless of, but particularly during, the uncertainty of the pandemic, and without adequate resources to support women their health may be put at risk.

Women as care professionals:
• Data from the Ebola crisis in West Africa did find an increased rate of exposure for women, attributed largely to women’s social and economic roles in frontline and unpaid care.
• Reports that staff lack necessary and adequate PPE are deeply concerning, and put more women at risk of catching the virus.

3. Disproportionate childcare roles and social security

• Women are more likely to be affected by school closures - the UN estimates that women do 2.6 times as much unpaid caregiving and domestic work as their heterosexual partners.
• Engender is concerned that inadequate employee support for flexible working and caregiving will lead many women to give up work during the pandemic, and

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2 Decree-Law no. 18 "Cura Italia" 17 March 2020, for more information see: http://www.andersentaxlegal.it/en/decreelaw-cura-italia-provisions-for-families-and-businesses/
6 Royal College of Nursing (March 2020) Nurse leader calls on First Minister to intervene on protective equipment supply Available at: https://www.rcn.org.uk/news-and-events/news/rcn-writes-to-fm-re-ppe-23-mar-2020
force them into the social security system which isolates them further from
economic independence.
• Universal Credit entrenches a ‘male-breadwinner-female-carer’ model with
many features of its design, including its single household payment.
• Additional impacts of the five-week wait for Universal Credit, benefit cap and
the ‘two-child limit’ will force hardship on many families, and must be
addressed urgently.

4. How does COVID-19 impact women providing social care?

Scotland’s social care system is already operating at crisis levels, with decades of
underfunding and widespread under-staffing failing to meet existing demand:
• Between 59% and 70% of unpaid care is delivered by women in Scotland, worth
approximately £10.8 billion to the economy per annum, and women are twice
as likely to give up work to carry out unpaid care.7
• Staff in social care are poorly paid, while income for unpaid carers through
Carer’s Allowance is just £66.15 per week (plus the twice yearly £221
supplement in Scotland).
• Carers are at an acute risk of becoming unwell themselves as frontline
workers.
• During the SARS outbreak nurses reported immense personal costs and
pressures due to feeling “sandwiched” between personal and professional
responsibilities.8

5. How does COVID-19 undermine women’s economic security?

The experience of the period of austerity in the UK and further afield has
demonstrated starkly the extent to which women face a double whammy of reliance
on state entitlements and public services; women are twice as likely to rely on social
security payments as part of their incomes as men, while Scotland’s gender pay gap
remains stubborn at 13.3%.9 Furthermore:

• Women are significantly over-represented in part-time and insecure work,
which gives them increased exposure to economic shocks.
• Women are over-represented in industries at risk of contraction during COVID-
19, including tourism, retail, services, and hospitality.

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7 Carers UK (2015) Valuing carers 2015 Available at: https://www.carersuk.org/for-
business Available at: https://www.skillsforcare.org.uk/Documentlibrary/Skills/Carers/Partthree.pdf
review 55.1 Pages 27-33.
• Women are also more likely to be ineligible for statutory sick pay, due to the number of hours that they work or job insecurity.\textsuperscript{10}
• Evidence from the experience of social security shows that women typically act as ‘poverty managers’, going without food and other vital resources so that other family members do not.\textsuperscript{11}

6. How will COVID-19 impact women’s mental health?

• Mental health experiences differ between men and women, with more women suffering from anxiety, and depression in women highly increased amongst those with caring responsibilities.\textsuperscript{12}
• Women providing care in home and clinical settings seem highly likely to be exposed to trauma, depression and poor wellbeing both during and post-crisis.
• With pregnant women and new mothers isolated from familial support networks, the Scottish Government’s work to tackle maternal mental health will be even more vital and must be expanded.

7. How will COVID-19 make women more unsafe and vulnerable to men’s violence?

• Periods of isolation and social distancing may exacerbate women’s experiences of domestic abuse, effectively trapping them in unsafe situations with limited access to vital support and escape.
• Early reports from the lockdown in China suggest that reported cases of domestic abuse were three times higher in one local authority, although we acknowledge differences in how domestic abuse is understood and measured in different states.\textsuperscript{13}
• With many more people likely to depend on Universal Credit, women are at further risk of increased economic dependency and abuse.
• Refugee and asylum-seeking women, and those with no recourse to public funds, must be protected and able to access resources to keep them from destitution.
• We urge support for bold options to avoid further impediments to women’s access to justice following rape and sexual assault, including jury-less trials.

\textsuperscript{10} UK Women’s Budget Group (March 2020) Covid-19 Crisis: Questions for the Chancellor Available at: https://wbg.org.uk/blog/covid-19-crisis-questions-for-the-chancellor/
\textsuperscript{12} The Mental Health Foundation Women and Mental Health https://www.mentalhealth.org.uk/a-to-z/women-and-mental-health Accessed on 26.3.20
\textsuperscript{13} BBC ‘Coronavirus: Five ways virus upheaval is hitting women in Asia cites Feng Yuan, the director of Beijing-based women’s rights non-profit Weiping, who said the organisation had received three times as many inquiries from victims than they did before quarantines were in place. Available at: https://www.bbc.co.uk/news/world-asia-51705199
CONCLUSION

Engender believes that it is vital that the Coronavirus (Scotland) Bill ensures that policymakers take a gendered response to this crisis. Without an understanding of women’s lives and realities built into policies pursued to manage the effects, COVID-19 may follow the path of other pandemic responses, which have deepened inequality between women and men and made it even harder to dismantle.

We therefore urge MSPs to support an equality and non-discrimination duty built into the operation of emergency powers. A duty to consider the need to advance equality and eliminate discrimination would be the first step in developing responses with gender mainstreamed throughout, and mitigate the worst effects of the coronavirus crisis for women and gender equality.

Engender Supplementary Briefing Note on Amendment 54: Coronavirus (Scotland) Bill

Women are going to be deeply affected by every aspect of the coronavirus crisis and the ways in which Scotland responds to it. The evidence from other pandemics and crises, such as the great recession, shows us that well-intentioned measures that fail to take account of the difference between men’s and women’s lives can make women poorer, more unsafe, more unwell, and less equal over the short and medium term.

We therefore call on MSPs to support Amendment 54 in the name of Ruth Maguire MSP at Stage 2 of the Coronavirus (Scotland) Bill. This amendment will ensure that decision makers must consider the impact of measures introduced under this Bill on women and other protected groups. This duty reflects the mainstreaming obligations under the Equality Act 2010 without adding additional reporting obligations during this period of crisis. It will ensure that Scotland’s efforts to eradicate gender inequality do not roll back during this pandemic.

Equality is vital in every circumstance, and it is particularly vital during emergencies such as COVID-19, when we need to take action quickly, in order to prevent women experiencing disproportionately worse outcomes now and in the future.

Amendment text:

Before section 9 insert —
< Advancement of equality and non-discrimination

In exercising a function conferred by virtue of Part 1 (including a function of making subordinate legislation), the Scottish Ministers must have regard to opportunities to advance equality and non-discrimination.>
FOR FURTHER INFORMATION
Contact: Eilidh Dickson, Policy and Parliamentary Manager, Engender
Email: eilidh.dickson@engender.org.uk

ABOUT US
Engender is a membership organisation working on feminist agendas in Scotland and Europe, to increase women’s power and influence and to make visible the impact of sexism on women, men and society. We provide support to individuals, organisations and institutions who seek to achieve gender equality and justice.