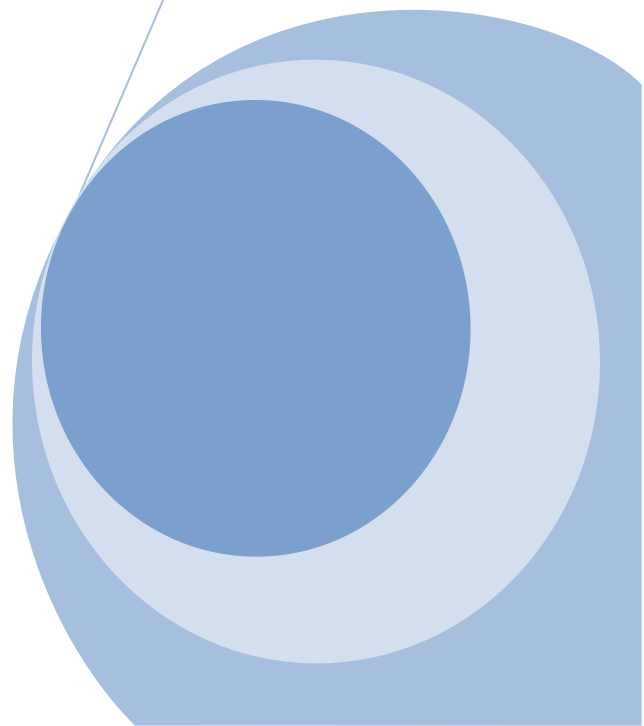




Equality Counting Case Studies and Learning Brief

Case Studies and Learning Briefs from
Engenders Equality Counting project
funded by the Equality and Human
Rights Commission

July 2011



Funded by



Contents

Background & aims of the project.....	4
Introduction to the Communities of Interest.....	4
Methodology.....	5
Processes.....	6
Expectations.....	7
Outcomes.....	8
Roles.....	8
Impacts on Individuals.....	9

Case Studies

Women Thinking Trans Issues.....	10
Women Thinking Disability.....	19
Women Thinking Inclusive Communication.....	29

Learning Briefs

Women Thinking Trans Issues.....	39
Women Thinking Disability.....	40
Women Thinking Inclusive Communication.....	41

Background and aims of project

'Equality Counting' at Engender was funded by the UK Equality and Human Rights Commission (EHRC) to promote the effective implementation of the equalities duties by establishing opportunities for dialogue between public service providers and women using their services. The project worked with women to:

- Organise as communities of interest around a shared concern
- Research the impact of policy and practice on this issue from a gendered equality perspective
- Articulate the lived experience of this impact in ways that help them engage with the relevant public service provider(s) to achieve the desired change

We have produced case studies describing the work of the three communities of interest (c-o-i) who have been involved in 'Equality Counting' in 2010:

1. Women Thinking Trans Issues (WTTI)
2. Women Thinking Disability
3. Women Thinking Inclusive Communication (Women TIC)

Each case study will outline the processes, expectations and outcomes for the different groups. There will also be some discussion of roles adopted and impacts on some of the individual members.

Introduction to the communities of interest (C-O-Is)

Women Thinking Trans Issues

At the end of January 2010 an email went out through the Scottish Transgender Alliance network targeting trans women to let them know about the project and ask if they were interested in taking part.

In March/April 2010, eight trans women joined together for the initial six-week training on Participatory Research Methods. Some of the women already knew each other from other groups or networks but most did not and given that none of the women had had any previous contact with Engender it was a new and exciting venture for all concerned.

Women Thinking Disability

Women Thinking Disability comprised two groups:

1. A group of mothers and grandmothers linked to Oaklands School, Edinburgh, who initially came together in December 2009 around the issue of proposed education cuts.
2. A group of disabled women living in a residential care home in Perth who want to raise issues around access to services.

Women Thinking Inclusive Communication Needs

In April 2010 Engender met with Communication Forum Scotland (CFS) to discuss the possibility of joining together the aims of the Civic Participation Network Project (a CFS project funded by the Scottish Government) and those of Equality Counting. That is to say, making it easier for people with diverse communication support needs to access training and capacity building events, thereby increasing voice and participation.

An email was sent through the CFS network and several groups and individuals came forward to note their interest in becoming involved in 'Equality Counting.' The response was very positive and there was quite a wide geographical spread of interest from groups in Aberdeen, East Lothian and Inverness.

Methodology

Participatory research (PR) is known by a number of different names, including action research, collaborative inquiry, and contextual action research, but all are variations on a theme. Put simply, participatory research is "learning by doing" - a group of people identify a problem, do something to resolve it, see how successful their efforts were, and if not satisfied, try again.

PR is used in real situations, rather than in contrived, experimental studies, since its primary focus is on solving real problems.

The 'Equality Counting' project outline states that "women will be trained to design and carry out PR then supported to apply these acquired skills, knowledge and confidence to design a PR project around their disadvantage in accessing appropriate public services due to their gender or gendered inequality".

The WTTI women were supported to develop their own research questions and research plan to explore the issue(s) at hand and then design the appropriate PR tools and approach. They were given a basket of tools (choices) and some shared knowledge to add to their own experience so that they could develop their own approach.

The onus is on service providers to face the challenges of enabling true participation of disabled people and people with diverse communication support needs in decision-making processes, recognising that disabled people wish to participate in different ways. For 'Equality Counting' this had implications for the way in which we were able to introduce the PR methods and tools. For some people, particularly those with communication disabilities, the issue of time can be crucial to an inclusive communication environment and a slower tempo can be the only accessible pace to ensure understanding and allow participation. Access in meetings and training sessions therefore required attention to their length and timing.

Processes

In using PR approaches across the three c-o-is it was vitally important to hold to strong communication support principles alongside recognised good practice in community engagement.

- Involving the women from the start of the process

This encouraged working in partnership, meaning that participants did not feel decisions had already been made without them.

- Working at a pace that suited both Engender and the women

We knew how important it was to allow enough time for group members to consider the issues properly and it was important to us that they were able to do so.

- Providing information that was clear, timely and accessible

If we didn't allow the women enough time to take in the information, we would effectively have excluded them from the participation process.

- Providing a range of ways to participate

Not everyone necessarily wanted to get involved at the same level or in the same way at different stages of the process. By providing a range of participation methods we were able to increase the opportunities for women to get involved in a way that suited them.

- Providing support to increase the opportunity for involvement

As well as support with communication, some participants required help with transport to meetings, or required support to build confidence and capacity.

- Providing participants with feedback and outcomes from all sessions

The establishment of shared goals between the women across the different geographical areas was not particularly difficult since the issues and priorities for action were depressingly similar. The main challenge was in supporting the women to organise in ways and around issues as appropriate to them.

For example, instead of following the route taken by WTTI, the Women TIC chose instead to participate in focused peer discussions on their chosen issues and to make important links with to the shortfalls and pitfalls in service provision as also highlighted by the Women Thinking Disability.

Expectations

From the outset we had to consider Engender's expectations of 'Equality Counting' as a project. Beyond enabling communities of women to address their issues of concern it was our hope and expectation that increased participatory research and support work with a diverse range of communities-of-interest would improve our capacity to serve women in Scotland by grounding our policy work in the real experiences of women managing the consequences of their multiple/ intersecting identities.

We also had to consider the expectations of the WTTI group and also be aware of the expectations of individual group members. These expectations did shift in emphasis to varying degrees for individuals over the process of the project and we had to be able to adapt and respond to such shifts in terms of the support provided to the community and to individuals with it.

"Learning, sharing ideas... a sense of doing something no one has done before with a group of people who I share values with."

The Women TIC carer's group was keen to participate in 'Equality Counting' and to consider not only their own issues but to highlight that information should be a right, not something that has to be searched for by people who are in vulnerable situations such as experienced by relatives of stroke patients.

Another aspect to be mindful of was that, over time, as the different c-o-is had increasing contact with 'Stakeholders', (the EHRC, the Equality Unit at the Scottish Government, NHS Boards, Local Authority Equalities Officers etc.) they were also each bringing their own expectations.

Outcomes

Across the Equality Counting project we were looking to effect change for women who suffer inequality and disadvantage, supporting them to have greater choice, control and empowerment over their own lives in relation to accessing public services.

For the women involved in the WTTI community of interest, the desired outcome was to gain skills and confidence to build on their existing knowledge and experience so they could carry out participatory action research on inequality of access to health services by transsexual women.

It is really important to note that the most positive outcome for Engender as an organisation has been our move further along the path towards trans inclusion. We hope that this will not only help us in our work tackling gender inequality but will also help other organisations and agencies to improve transgender inclusion in their services. We have also had a wonderful opportunity to work closely with the other two communities of women we had previously had limited direct contact with (disabled women and women with diverse communication support needs). Important links were made and we are committed to doing further work with Communication Forum Scotland and Chest, Heart & Stroke Scotland as well as Capability Scotland, Oaklands School and any other interested organisations, agencies and groups.

Roles

We actually employed two Participatory Researchers to work with us on Equality Counting since we were covering a bit of ground both geographically and metaphorically speaking.

Our Projects Director also worked with all the groups, facilitating discussions, conducting individual interviews and supporting the work of the Participatory Researchers. We also had a number of wonderful volunteers and interns working with us on the project over the year.

Group members took on a variety of team/group roles. Each bringing valuable strengths to the group while at the same time having limitations which together the group worked around. Everyone had at least one and possibly as many as four natural team roles which included:

- Implementer – turning ideas into practical actions. Turning decisions into manageable tasks.
- Completer-finisher – Painstaking and conscientious, seeing tasks through to completion.

- Monitor-evaluator – Offers critical analysis. Has a strategic view seeing all options.
- Shaper – Task orientated, making things happen. Dynamic, outgoing and challenging.
- Resource-Investigator – Diplomat with many contacts. Improviser, exploring opportunities. Enthusiastic and communicative.

Impacts on individuals

Through the process of the project, members of each of the c-o-is were able to build their confidence and ability to articulate their concerns in a variety of settings, to describe their campaign objectives and strategy to a range of audiences and to communicate their progress in a variety of ways.

Many of the women who participated in the project have since become Engender members and we hope that together we can continue to move forward, learning from each other to the benefit of women in Scotland.

Case Study

Women Thinking Trans Issues (WTTI)

The following is a case study describing the story of a group of Transsexual Women who came together in a community of interest through 'Equality Counting'. The case study will outline the processes, expectations and outcomes *of* and *for* the group. It will also examine roles adopted and impacts on some of the individual members.

Introduction to community of interest

A male-to-female transsexual woman (trans woman) is someone who was labelled male at birth but has a female gender identity, and therefore transitions to live completely and permanently as a woman. This condition is referred to as Gender Dysphoria or Gender Identity Disorder,

Transsexual women seek to bring their physical bodies and gender expressions into better accord with their strong gender identities so that their identities as women finally become clearly visible to their friends, families and colleagues. However, some may be restricted by their personal or social circumstances in their ability to achieve this. Transsexual women often experience significant emotional distress, if unable to live fully as women.

The lengthy and difficult process which transsexual women go through in order to achieve this is called Gender Reassignment (or transitioning) and involves undergoing significant medical assistance in the form of hormone treatment and sometimes various surgical procedures. They may get this medical assistance from the National Health Service (NHS) or from Private Healthcare Providers. However, transitioning is not purely about changes in a person's physical appearance.

During transition, social and personal relationship dynamics also change to better reflect the gender identity of the transsexual woman. This can be both challenging and rewarding for the transsexual woman and her friends and family. (Scottish Transgender Alliance www.scottishtrans.org)

Women Thinking Trans Inclusion

At the end of January 2010 an email went out through the Scottish Transgender Alliance network targeting trans women to let them know about the project and ask if they were interested in taking part.

In March/April 2010, eight trans women joined together for the initial six-week training on Participatory Research Methods. Some of the women already knew each other from other groups or networks but most did not and given that none of the

women had had any previous contact with Engender it was a new and exciting venture for all concerned.

It should be noted that in joining in the project the women were already coming with an idea of the issue(s) that they wished to address. What 'Equality Counting' offered was support and training to organise around the issue(s), research and articulate it/them in ways that used the opportunities in equalities legislation to change and challenge policies with the aim of effecting change. One of the first tasks of the group was to decide on its name and members quickly agreed that 'Women Thinking Trans Issues' (WITTI) was a suitable name and clearly identified their purpose.

Methodology

Participatory research (PR) is known by a number of different names, including action research, collaborative inquiry, and contextual action research, but all are variations on a theme. Put simply, participatory research is "learning by doing" - a group of people identify a problem, do something to resolve it, see how successful their efforts were, and if not satisfied, try again.

PR is used in real situations, rather than in contrived, experimental studies, since its primary focus is on solving real problems.

The 'Equality Counting' project outline states that "*women will be trained to design and carry out PR then supported to apply these acquired skills, knowledge and confidence to design a PR project around their disadvantage in accessing appropriate public services due to their gender or gendered inequality*".

The WITTI women were supported to develop their own research questions and research plan to explore the issue(s) at hand and then design the appropriate PR tools and approach. They were given a basket of tools (choices) and some shared knowledge to add to their own experience so that they could develop their own approach.

Processes

One of the important aspects of building a research team such as WITTI was the establishment of shared goals that were clear and considered important and worthwhile by all members.

There was a need also to build trust and establish norms and the group took time to agree how they would work together, communicate with each other and within the research project.

As part of the training the women explored ethics in research and together they considered whether as a research group they felt they had the capacity to meet ethical requirements.

They then, individually, spent some time considering the generative themes from their discussions and exercises to give an indication of their priorities. Splitting into small groups the women were then able to process and reflect on their findings before presenting back to the whole group thereby creating space for critical thinking. Essentially they were able to demonstrate skills in processing data and reflecting on it to reach a conclusion. Their findings showed that equal access to health services and health needs of the transgender community emerged as a clear priority.

The next step was for the women to consider what they wanted to achieve through their research. They needed to decide on:

- Their research focus and purpose
- What methods they would use
- How they would involve others, including service providers
- And how they would report their findings, conclusions and recommendations.

Research aims, objectives and design

The WTTI research project had two strands:

1. Were there inconsistencies around Scotland in how long Transsexual women wait for Gender Reassignment Services and what effects do short or long waiting times or refusal of funding for treatment have on their lives?

The group used an online survey to gather data on this strand since this was seen to be the most effective way to reach this 'hidden' community. Using LGBT, trans community and voluntary sector networks, the survey was publicised widely via emails, in newsletters, on websites and with postcards.

2. Do Health Boards' Equality Impact Assessment (EIA) processes consider the needs of transsexual women effectively and do they result in positive outcomes in improved services for trans women?

Small group interviews were planned with health service managers in NHS Forth Valley, Lanarkshire, Greater Glasgow and Clyde and Lothian about their processes for conducting EIAs, staff training for EIAs and impacts on services so far.

To gather more qualitative data on transitioning experiences and develop a clear picture of transsexual women's priorities for improvement of Gender Reassignment Services, three focus groups of trans women were facilitated.

Expectations

From the outset we had to consider Engender's expectations of Equality Counting as a project. Beyond enabling communities of women to address their issues of concern it was our hope and expectation that increased participatory research and support work with a diverse range of communities-of-interest would improve our capacity to serve women in Scotland by grounding our policy work in the real experiences of women managing the consequences of their multiple/ intersecting identities.

We also had to consider the expectations of the WTTI group and also be aware of the expectations of individual group members. These expectations did shift in emphasis to varying degrees for individuals over the process of the project and we had to be able to adapt and respond to such shifts in terms of the support provided to the community and to individuals with it.

"I want to be able to contribute really effectively, alongside working fulltime... I want clarity and a firm set of actions I have a personal responsibility to deliver – that is important to me from a „how I work? perspective."

"I wanted to learn about the process of carrying out research... the meetings are a good mixture of serious study and participation, with some lighter moments."

"Learning, sharing ideas... a sense of doing something no one has done before with a group of people who I share values with."

Another aspect to be mindful of was that, over time, as the community had increasing contact with „Stakeholders?, (the EHRC, the Equality Unit at the Scottish Government, the NHS Boards, Local Authority Equalities Officers, the Scottish Transgender Alliance etc.) they were each bringing their own expectations.

Outcomes

Across the 'Equality Counting' project we were looking to effect change for women who suffer inequality and disadvantage, supporting them to have greater choice, control and empowerment over their own lives in relation to accessing public services.

For the women involved in the WTTI community of interest, the desired outcome was to gain skills and confidence to build on their existing knowledge and experience so they could carry out participatory action research on inequality of access to health services by transsexual women.

“I needed – still do need – involvement in a community of interest. I had found involvement in political parties and “politically” based organisations never met my need to do something to effect real change. This is different – perhaps mostly because there is no dogma – the point is to help and effect change in the lives of others”.

WITTI outcomes were outlined as their community based indicators:

- Equality Impact Assessments (EIA) undertaken by NHS Health Boards (evidence would be how the EIA?s resulted in meaningful and measurable action for Transsexual women and indeed for how many Transsexual women)
- Waiting times for gender reassignment services (evidence would be numbers of women accessing the services within a „reasonable? time-scale – requiring clarity about what is „reasonable?)
- Training and awareness for NHS staff – patient pathway type model (evidence would be as above)

It is really important to note that the most positive outcome for Engender as an organisation has been our move further along the path towards trans inclusion. We hope that this will not only help us in our work tackling gender inequality but will also help other organisations and agencies to improve transgender inclusion in their services.

Roles

Recruited in March 2010, our **Participatory Researcher** worked with the communities of interest to provide the initial PR training, to facilitate dialogue and foster reflective analysis among the women. It was her role also to provide the groups with periodic reports, and to assist with the preparation for the writing of final reports.

Group members took on a variety of team/group roles. Each bringing valuable strengths to the group while at the same time having limitations which together the group worked around. Everyone had at least one and possibly as many as four natural team roles which included:

- Implementer – turning ideas into practical actions. Turning decisions into manageable tasks.
- Completer-finisher – Painstaking and conscientious, seeing tasks through to completion.
- Monitor-evaluator – Offers critical analysis. Has a strategic view seeing all options.
- Shaper – Task orientated, making things happen. Dynamic, outgoing and challenging.
- Resource-Investigator – Diplomat with many contacts. Improviser, exploring opportunities. Enthusiastic and communicative.

Impacts on individuals

Through the process of the project, WTTI members were able to build their confidence and ability to articulate their concerns in a variety of settings, to describe their campaign objectives and strategy to a range of audiences and to communicate their progress through presentations and their research report.

“It was different, refreshing and challenging on lots of levels all at once. The most important things I got out of the sessions were understanding my own identity and gender a lot more and an introduction to a method of research (PR) that is non-confrontational and goes beyond simple statistics, instead treating each person in a group as an individual.”

Evaluation of campaign impact

- In early July 2010 a short (five question) survey was sent to Equality Officers across all the Scottish NHS Boards.
- In August letters were sent out to the EHRC and to NHS Health Board Chief Executives
- Semi-structured interviews were organised with senior officials in each of the four chosen Health Board areas
- At the beginning of September focus groups were carried out in Glasgow and Edinburgh with trans women who were encouraged to consider, ‘What does a better Health Service look like to you?’

- The research to compare waiting times for gender reassignment services for trans women involved:
 - In July, setting up a Facebook group „Engender Research – Women Thinking Trans Issues?
 - In early August, sending out a survey monkey (live till end October 2010)
 - At the end of August the Projects Director at Engender was invited to participate in a Research Report launch (Transgender Experiences of domestic abuse) and Consultation Event. Her remit was to speak specifically on examples and progress in trans inclusion in the women’s sector. Following her presentation she was approached by a representative from the Equality Unit at the Scottish Govt to ask for more information about Engender’s approach to trans inclusion.
 - At the end of September carrying out a group interview with survey respondents based in Edinburgh (who will all be funded by Lothian Health Board).

Stakeholder Event 17 November 2010

In advance of the WTTI research group writing its report, the women invited stakeholders to reflect on the findings with them so that practical actions to address issues can be agreed and taken forward in partnership. Stakeholders included Transsexual women who participated in the research, LGBT organisations, EHRC staff, as well as Equalities Officers and Health Board managers who had an interest in the project were invited.

“It was a great event and good to see some of the key players listening to what was said. Also good to see it one of the biggest ever surveys /action research work with the community.” (EHRC) “Thank you for yesterday’s meeting, it was extremely interesting and I really enjoyed it...The Equality Team in NHS Health Scotland co-ordinates a network for the Equality and Diversity leads within all Health Boards and we would be happy to disseminate the final research report to this network once it is available as a way of ensuring that all health boards receive the information.” (Equality Team NHS Health Scotland)

“Since we met we have been working to influence key people in NHS Lothian on the issues you raised in the recent study and event... “

Following a request from the Scottish Government the National Improvement Programme within the Equality team in NHS Health Scotland will shortly begin a short term piece of work on the development of a separate gender reassignment services protocol, including access criteria for surgical treatment. Gender identify disorder currently sits within the Exceptional Aesthetic Referral Protocol (EARP). The project will also explore improvements to the access of gender reassignment services.

A short life working group has been established and will be meeting soon to begin the development of the protocol. Membership to the working group has been informed by the Scottish Government and is made up of clinicians directly involved in gender reassignment services, the Scottish Transgender Alliance (STA), service users and the Scottish Government.

We will be kept informed of the progress of this work via email or updates through Equality Lead network meetings as the protocol develops.

This national approach is welcomed and we are likely to be able to make faster progress this way. I am hopeful that your report will provide some of the evidence required and may have even stimulated the need for this group.” (Health Inequalities, Edinburgh, East and Midlothian CHPs and REAS)

Conclusion

At the time of preparing this case study the WTTI research report is being written up along with a strategy for dissemination. It will be a major priority to ensure that local service providers are aware of and taking action to address the concerns raised by the WTTI campaign, and are engaging the WTTI community-of-interest in dialogue for change.

Further Reading

RC Psych Intercollegiate SoC Committee (06 Nov 2006) DRAFT DOC.

Good practice Guidelines for the Assessment and Treatment of Gender Dysphoria

Equal Opportunities Commission. Gender Equality Duty – Guidelines for NHS Scotland www.eoc.org.uk/fairforallgender

Dept of Health (2007). Reducing Health Inequalities for LGBT people www.dh.gov.uk/publication

Scottish Transgender Alliance: Transgender Experiences in Scotland (2008) www.scottishtrans.org

Stonewall Scotland. NHS Scotland. Getting it Right – LGBT Research Guidelines booklet

Sandyford Initiatives Protocols

Equality Network: Survey of the Service Provision Experiences of people in Scotland with a Trans or Intersex Background or Identity

Whittle, S., Turner, L., Combs, R., Rhodes, S. (2008). Transgender Euro study: legal survey and focus on the transgender experience of health care

Case Study

Women Thinking Disability

The social model of disability understands people to be disabled by attitudes and barriers in our social environment. The solution to the problem is focussed on recognising this discrimination and the role that society plays in disabling its citizens. The task then is to remove barriers and secure support for disabled people to participate equally.

The following is a case study describing the story of a group of disabled women and women with disabled children who came together as a community-of-interest (c-o-i) through 'Equality Counting'. This case study along with the Oakland's story will outline group processes, expectations, impacts and outcomes.

Introduction to community of interest

Disabled people are frequently literally invisible in our society. There is almost a parallel society for people with disabilities with different schools, play facilities, transport, toilets, health services, not to mention the very many public spaces that cannot be accessed by people with mobility difficulties for example.

Our economic system and our values mirror one another so people who face discrimination are devalued in monetary terms, both in their ability to earn money and in their access to services that are paid for from tax revenues because they are seen as a 'cost' or a 'burden' to the system. Presently disabled people are twice as likely to live in poverty as non-disabled people.

The Women Thinking Disability c-o-i (a group of mothers and grandmothers linked to **Oaklands School**, Edinburgh) initially came together in December 2009 around the issue of proposed education cuts.

By chance one of the mothers was attending an Engender training session on Gender Budgeting and using the Gender Duty and in one of the discussion slots she spoke about the proposed cuts. We suggested that the woman should 'ask the question' in relation to equality impact assessment and encouraged her and the other mothers to keep asking the question. This was the beginning of our working relationship with the Oaklands parents (see Oaklands case study).

Having been made aware of the difficulties faced by this group of women we were particularly keen to tap into other campaigning issues around transition from children's services to adult services.

The women were keen to use participatory research methods to look into the pressure they have experienced from Social Work and other professionals towards certain benefits which do not take full account of individual family circumstances.

In March 2010 we entered into discussions with agencies including the Families Advice and Information Resource (FAIR), and 'Contact a Family' to offer Participatory Research Training to local campaigning groups in order to cascade the strategies through to the benefit of families with disabled children.

In June we organised an Involvement Workshop session for female disabled volunteers at Capability Scotland. One of the participants at this session later attended our Equality Counting Workshop on Opportunities in Equalities Legislation and instigated the creation of a second c-o-i under the Women Thinking Disability umbrella.

Opportunities in Equalities Legislation Workshop

On the 31 July we held an interactive workshop with input from each of the three 'Equality Counting' c-o-i's as a way of bringing them together to share experiences and learning. We used Power point presentations combined with handouts and question and answer time to explore opportunities in equalities legislation, focusing on the Equality Act (2010).

Together we discussed the importance of making equality count and how we were organising and participating in the project to this end. We discussed:

- Public sector duties
- Resources and spending decisions
- Service design
- Public scrutiny and challenge
- Budget analysis

We had a presentation by one of the Oaklands women and we had arranged for Glasgow Disability Alliance to show their 'Rights to Reality?' DVD and have input to the discussion on the day.

Women Thinking Disability

One of the most exciting outcomes from the July workshop was that a young disabled woman asked if we could come and work with a group in Perth who were interested in becoming involved in 'Equality Counting' to address a number of issues around access to services.

Over the next few months our Participatory Researcher worked with the group to introduce PR methods and identify which issues the group wanted to research. They looked in particular at the new Equality Act focusing on the implications for disabled people and their carers; how the changes affect public services, banks, colleges and transport. They wanted to explore how the new law could be used to tackle the issues important to them as a community. Proposed funding cuts were and continue to be a huge issue for this c-o-i with the potential to impact on all areas of the women's lives including access to education, independent living and health care.

Methodology

The Equality Counting project outline states that *“women will be trained to design and carry out PR then supported to apply these acquired skills, knowledge and confidence to design a PR project around their disadvantage in accessing appropriate public services due to their gender or gendered inequality”*.

For this c-o-i, as with the Women TIC group, access to training sessions and meetings required attention to their length and timing. Following discussion with the women, together we decided that basic requirements would include:

- Arranging short sessions (2-3hrs) with plenty of comfort breaks – issues with concentration, need to move around etc.
- Considering having one day training sessions to begin the process then move to shorter fortnightly meetings
- Ensuring an appropriate and fully accessible venue
- Checking timing with group as some members may have a number of different health appointments etc.

Two full day training sessions on PR methods, using equalities legislation, ‘getting to work on our priority issues’ and ‘reflective analysis’ were organised.

Further meetings took place to follow progress and ensure that the group members were adequately supported to deal with responses to their enquiries, analyse survey data and devise strategies for action as appropriate.

The Women Thinking Disability (Perth) group

The group identified an issue with **Bank services** which appeared to be unable to provide access to the full range of their services for disabled customers. The women

conducted a PR exercise surveying fellow residents at Upper Springlands care home to gather information from a sample of bank customers.

They looked at some of the major banks' websites to research their policies for disabled customers and also drafted a standard letter to be sent to the Head Offices of some of the major High Street banks asking about their policy on supporting customers with complex disabilities.

At the time of writing this case study, none of the banks had responded to the letter so the group members are now going to pursue the matter on an individual basis with their own banks.

Several of the women had encountered difficulties in accessing Education. The group were keen to explore how the Equality Act might be used to address such issues. One problem was a lack of course information made available in clear and understandable format. The problem was exacerbated by a lack of support and guidance from colleges prior to disabled students enrolling on courses.

Two group members wrote to the Additional Support Coordinator at their college to request a copy of their Personal Learning and Support Plans. They are now awaiting reviews.

Another issue of concern to the group was access to Health Care. Group members have to pay for physiotherapy services as this is a service available on the NHS only for conditions which are deemed "curable". If individuals want to access physiotherapy to offer short-term relief, or for long-term management of conditions then it has to be paid for. The group contacted the EHRC to enquire about this situation, in particular whether or not it constituted indirect discrimination.

A Caseworker with the EHRC responded to clarify provision under the Equality Act. The group decided to pursue the issue with NHS Tayside. They will ask whether NHS Tayside have considered making adjustments to their restrictions to physiotherapy for people with some or all disabilities and what steps they have taken to meet their Disability Equality Duty.

Processes

In using PR approaches with this c-o-i it was vitally important to hold to strong communication support principles alongside recognised good practice in community engagement.

- Involving the women from the start of the process

This encouraged working in partnership, meaning that participants did not feel decisions had already been made without them.

- Working at a pace that suited both Engender and the women

We knew how important it was to allow enough time for group members to consider the issues properly and it was important to us that they were able to do so.

- Providing information that was clear, timely and accessible

If we didn't allow the women enough time to take in the information, we would effectively have excluded them from the participation process.

- Providing a range of ways to participate

Not everyone necessarily wanted to get involved at the same level or in the same way at different stages of the process.

By providing a range of participation methods we were able to increase the opportunities for women to get involved in a way that suited them.

- Providing support to increase the opportunity for involvement

As well as support with communication, some participants required help with transport to meetings, or required support to build confidence and capacity.

- Providing participants with feedback and outcomes from all sessions

Expectations

From the outset we had to consider Engender's expectations of Equality Counting as a project. Beyond enabling communities of women to address their issues of concern it was our hope and expectation that increased participatory research and support work with a diverse range of communities-of-interest would improve our capacity to serve women in Scotland by grounding our policy work in the real experiences of women managing the consequences of their multiple/ intersecting identities.

The young woman who had initially expressed an interest in working on Equality Counting? continued to play a central role in galvanizing the group. She has been an inspiration to us all during her participation in the project.

"I want to kick some ass!"

We are delighted that she has become an Engender member.

Oaklands Parents' Council

It is important to state at the outset that the Oaklands Parents' Council is not a women's group and there are of course fathers and other male family members involved and supportive of all actions to protect and maintain the excellent service provided by the School.

As quite a typical statistic, approximately one third of the Oaklands' parents are lone-mothers.

This case study is written from the perspective of the work undertaken by the women who have been in communication with Engender during the lifetime of the Equality Counting project. The women have included us in Parent Council meetings and school events and they have attended a session we organised for them on, „Understanding Tools and Levers for Change.? They have given us access to all the emails and letters that they have sent on behalf of the Parents Council. The information within this case study is taken directly from communications between these women and the local authority and all other actions taken, including organising meetings, contacting the press, establishing the Facebook group and making presentations to the Council.

Introduction

On 03 Dec 2009 Engender held a workshop on Understanding Gender Budgeting and holding public bodies to account on their responsibilities under the Gender Equality Duty (and other equalities legislation). During the group discussions one of the women raised the issue of proposed education cuts of 2.5% across all schools in Edinburgh. A flyer alerting parents of this proposal had been sent home in the children's schoolbags and a Parent Council Meeting was taking place that evening to discuss the threat.

It transpired that the proposal was that special schools (including Oaklands) were to face the same cuts as mainstream schools. The parents were concerned about the disproportionate effect that budgetary cuts would have on Oaklands School and did not feel that due consideration had been given to this.

The Director of Engender recommended that in the first instance the parents ask whether an Equality Impact Assessment (EIA) had been undertaken.

Getting organised

In the run up to the City of Edinburgh Council Revenue Meeting on **16 Dec 2009** (open to all Parent Council Chairs) the Oaklands mothers (and grandmothers)

galvanised and wrote to the First Minister and to all the MSPs that sit on the Cross party groups for disability and learning disability.

On 12 Dec 2009 one of the women wrote, on behalf of the Parents? Council, to all local Councillors to invite them to come and meet the children, parents and staff of Oaklands School on 25 January 2010.

“As you know, the council will be meeting in February to decide on budgets and among the proposals being put forward for consideration are cuts in funding for special schools. Before you make a decision on this, we feel that it is important to fully understand the needs of children who attend Oaklands need and what the impact of reducing the level of support that they receive may be”.

Only two Councillors actually came along on the day.

The Finance Convenor declined to visit because he said, *“It is not appropriate for me to be involved with the individual items that may come up in the budget.”*

Asking the question

On **16 Dec** at the Council Revenue Meeting the woman who had attended our training on 03 Dec asked whether Children and Families had conducted an equality impact assessment on the budget proposal to reduce the number of learning assistants in special schools.

She was told by the Children and Families Resources Manager that yes it had and that no school would be disproportionately affected.

Two days later, on **18 Dec**, the Resources Manager emailed her to say that this in fact was not correct.

“I am told we have in fact only conducted an equalities relevance assessment and not an equalities impact assessment as I thought. The proposal is highly relevant and an assessment will be required.

My sincere apologies for inadvertently misleading you. I will ensure the error is noted in the minutes of the meeting which should be available next week”.

On **20 Dec** the woman responded to the Resources Manager, thanking him for clarifying the position regarding an equality impact assessment on the proposal to reduce the number of learning assistants in special schools. She stated that she was pleased that a full assessment would be being carried out and stressed the importance of considering the varying degrees of disability of the children that attend special schools.

“They are not a uniform group that can be considered as a whole. We would particularly ask you to consider the most profoundly disabled children with the highest level of support needs that attend Oaklands School. We would sincerely hope that an impact assessment will involve gaining a full understanding of what is involved in ensuring that these children are able to live high quality lives. The level of their dependence on adult support cannot be underestimated and assessing impact cannot be meaningful without involving those that are experts in the care of these children”.

Asking the question again

On **21 Jan 2010** the women followed up a phone call with an email to the Principal Officer Equalities at CEC requesting confirmation of how the EIA would be undertaken given the lack of time with the Budget Meeting set for 11 February.

They received an email response from the Principal Officer, Equalities on **26 Jan** which said, *“I can confirm that staff are carrying out an Equalities Relevance Assessment of those areas of budget savings that are of concern to you.*

In terms of the reduction in out-of-authority placements, it was agreed that this is of significance. However, as a managed and consensual process with alternative arrangements in place within the Throughcare and Aftercare Service, it was concluded that any negative impact would not be substantial.

In terms of the review of Special School Services, a meeting is to take place with Special School Head Teachers early next week which will, amongst other things clarify whether or not a full equality impact assessment is required”.

This was confusing information since it had earlier been stated that an equalities relevance assessment had been undertaken and “While accepting that budget reductions will be difficult to manage for all schools we do not believe that any school will be disproportionately affected”.

The women requested a definitive answer on this point.

The Open Day

Meantime the Open Day for Councillors to meet with parents, children and staff took place on 25 Jan with only two local Councillors attending.

Despite apologies, with varying degrees of support and/or understanding, coming from 16 other Councillors only one suggested that he would like to make another

time to visit. (This was immediately followed up by one of the women who arranged to meet the Councillor at the school on 03 February).

The following day an email letter from Oaklands Parents' Council, expressing their concerns, was sent out to all Councillors. There were many responses to this letter, once again with varying levels of support and understanding and demonstrating clearly that party lines were being drawn over the budget.

An article appeared in the Evening News on **28 Jan**, focusing on one mother's situation and appearing under the headline, 'Care school cuts could cost lives'.

The parents established a Face book group 'Save Oaklands School from Budget Cuts' which gained tremendous support with more than 340 people signing up within a week.

The women kept up their dialogue with individual Councillors and requested a deputation at the 11 Feb Council Meeting when the budget was to be decided.

Eleventh hour 'reprieve'

*On **10 Feb** an email came through from the Convenor of Education which said, "I understand that the Parent Council intended to come to the Budget Meeting tomorrow as a deputation. I thought it might be useful to tell you that the only cut to the Special Schools Budget is the reduction of absence cover from 5 to 4 days, which is the same as in primary schools. So thankfully there is minimal impact on the DSM of Special Schools this year. As an Administration we have been very keen to prioritise education and young people services in this Budget and a number of pressures have been covered centrally.*

As tomorrow's meeting has attracted a large number of deputations, it may be that you would wish to consider whether you and your colleagues still wish to attend".

The women decided to go ahead and make a shorter version of their planned presentation. There was still clearly a deal of confusion on the part of individual Councillors as to whether or not an EIA had been carried out.

What have we learned from this?

First and foremost there was a complete lack of transparency in the processes of the decision-makers communicating with the people who were going to be most affected by the decisions taken.

There was a lack of accountability from the decision-makers in their handling of the EIA question.

There appeared to be a lack of appropriate understanding of the requirements of the Disability Duty and other legislation including the Additional Support for Learning Act, under which all of the children at Oaklands have coordinated support plans that are legal documents outlining how their educational needs will be met (thus requiring adequate resources for implementation).

What next?

The parents have mountains to climb on a daily basis in their dealings with all sorts of services in relation to their children's additional support needs. They have limited time and energy for engaging with projects such as ours which aims to put policy into practice and to ground equalities legislation and practice in people's lived experiences.

Engender will continue to work with the women using participatory research methods to help keep them in dialogue with the local authority on these issues. The women will explore ways in which to paint a picture of life with a child with profound additional support needs and how to promote great understanding of the issues and the impacts that the decisions taken have on the lives of whole families. They will also gain knowledge on the legislative tools and levers for change which we already have in Scotland and to which our public bodies must be accountable.

Case Study

Women Thinking Inclusive Communication (Women TIC)

Engender's Equality Counting project, funded by the UK Equality and Human Rights Commission (EHRC), is about promoting good practice in using the equalities duties and addressing issues such as the double discrimination faced by women with diverse communication support needs.

Women and men have an equal right to have their voices heard by policy/decision makers, for example in local authorities, health services or any other statutory service. The objective is to achieve public policy and practice that responds effectively and appropriately to their particular need.

This is true for all women and men including those with diverse communication support needs that are represented across age and interest groups. They may face barriers to expressing their views. It is vitally important that service providers understand how to support people to participate and put resources in place so they are on an equal footing in society. Groups working with equalities issues need to lead by example and understand the value and importance of inclusive communication and work to promote it across our organisations and through the work that we do.

The following is a case study describing the story of a group of women with a specific interest in diverse communication support needs who came together as a community-of-interest through 'Equality Counting'. The case study will outline the processes, expectations and outcomes *of and for* the group. It will also examine impacts of the project on some of the individual members.

Introduction to the Community of Interest

The people who came together in this 'community-of-interest' (c-o-i) were a mix of women who had experienced strokes, women who had sustained head injuries and a group of women (and one man) who were caring for a partner who had had a stroke in the past two years.

People with diverse communication support needs, and their carers who often have to be a "voice for the voice-less", have had much to say about the ways in which health and professional care workers communicate with them. The development of inclusive communication is a complex process that includes, though goes well beyond, active listening. It will support people with and without language impairment to enrich communication practice, share power and celebrate the creativity and challenge of communication difference.

Women TIC

“Without a vision of how things should and ought to be, it is easy to lose your way and give up in the face of adversity and opposition . . .

We all need a world where impairment is valued and celebrated and all disabling barriers are eradicated. Such a world would be inclusionary for all.”

(Oliver and Barnes 1998)

In April 2010 Engender met with Communication Forum Scotland (CFS) to discuss the possibility of joining together the aims of the Civic Participation Network Project (a CFS project funded by the Scottish Government) and those of ‘Equality Counting’. That is to say, making it easier for people with diverse communication support needs to access training and capacity building events, thereby increasing voice and participation.

An email was sent through the CFS network and several groups and individuals came forward to note their interest in becoming involved in ‘Equality Counting’. The response was very positive and there was quite a wide geographical spread of interest from groups in Aberdeen, East Lothian and Inverness.

It quickly became very clear that the training programme as outlined in our ‘Equality Counting’ project plan was going to have to be tailored to the specific needs of this c-o-i. This provided an opportunity to demonstrate how the flexibility of the Participatory Research (PR) approach works very well across a diversity of groups.

Methodology

The onus is on service providers to face the challenges of enabling true participation of disabled people in decision-making processes, recognising that disabled people wish to participate in different ways. For ‘Equality Counting’ this had implications for the way in which we were able to introduce the PR methods and tools. For some people, particularly those with communication disabilities, the issue of time can be crucial to an inclusive communication environment and a slower tempo can be the only accessible pace to ensure understanding and allow participation. Access in meetings will require attention to their length and timing. Together with the groups in Aberdeen and in East Lothian we decided that basic requirements would include:

- Arranging short sessions (2-3hrs) with plenty of comfort breaks – issues with concentration, need to move around etc.

- Considering having two consecutive days to start off then move to fortnightly sessions
- Finding appropriate and fully accessible venue (considering the diversity of communication support needs with the group)
- Checking timing with group as some members may be carers and work part-time

Very early in our discussions with the different groups, uncovering their issues and planning for how we could work together through 'Equality Counting' we recognised it was important for Engender, as an organisation committed to improving its inclusive communication, that we should consider our own practice.

Inclusive communication: putting communication support into practice

In June we organised a very interesting and practical one-day training session for Engender staff, interns/volunteers and associates/participatory researchers. The day was aimed at sharing ideas and resources.

Following a trainee's journey, exploring barriers and solutions we looked at:

- the diversity of communication support needs, which go wider than those related to sensory impairment
- basic good practice in inclusive communication
- adapting training activities to meet the diversity of need.

Issues

Women TIC members in Aberdeen raised specific concerns over funding cuts – loss of taxi-cards, concessionary bus passes and dial-a-bus services. They were keen to do some work on these issues and felt this would move them on in actually having a chance to influence change.

Transport issues were also a big problem for the women in East Lothian, who were members of a Headway (the brain injury association) group. Their issues were very similar to those experienced by the Aberdeen women and greatly affected their ability to participate in activities, training and support groups etc. The limited local bus service gave priority to school children if there were any difficulties i.e there was no back up if the bus broke down.

The women felt that there should be equal priority given to people with disabilities needing to travel to centres and activities in order to get out of the house and join

together with other people. The dial-a-bus service, while not having been cut altogether was not very satisfactory since it had to be booked approximately two weeks in advance and no standing orders for transport were allowed. This, alongside the fact that taxi cards were only accepted by certain taxi firms and not all drivers were trained in ‘transferring’ clients in wheelchairs, severely restricted the independent movement of the women and their ability to have a social life.

Some group members identified the stigma they face through sometimes having ‘invisible’ disabilities (for example, as a result of brain injury) and they reported also that there was very little help for them as carers caring for their adult children.

“My son was in the car accident with me and he still depends heavily on me even though he is a young man now... he has slipped through the crack between children and adult services. I need help to help him but it is just not available...”

Processes

The establishment of shared goals between the women across the different geographical areas was not particularly difficult since the issues and priorities for action were depressingly similar (as above). The main challenge was in supporting the women to organise as a research team and put their participatory research skills into action.

Instead of following the route taken by the Women Thinking Trans Issues the Women TIC chose instead to participate in focused peer discussions on their chosen issues and to make important links with to the shortfalls and pitfalls in service provision as highlighted by the Women Thinking Disability c-o-i.

In working with Women TIC we were mindful of six key communication support principles:

1. Recognise that every community or group may include people with communication support needs
2. Find out what support is required
3. Match the way you communicate to the ways people understand
4. Respond sensitively to all the ways an individual uses to express themselves
5. Give people the opportunity to communicate to the best of their abilities: environment, timing, methods of communication, support from carer and/or support worker, positive communication style, budget
6. Keep trying.¹

¹ Talk for Scotland Toolkit www.communicationforumscotland.org.uk

Continued resources are required to bring the different geographically placed groups together as a c-o-i and Engender would urge that there is a need to develop creative and effective ways to enable this.

Carers – a voice for the voice-less

At the beginning of June we were invited to meet with a group of carers through NHS Highland in Inverness. Members of this group (4 women and 1 man) each have a partner who has had a stroke or strokes in the last two years resulting in severely impaired communication. There were very many gendered issues uncovered here including the need to seek power of attorney and/or guardianship in order to take financial decisions for the family, negotiating the legal, health and care systems. Issues around disempowerment linked to caring responsibilities and voice-less-ness (ironically whilst attempting to advocate for a literally voice-less partner)

Expectations

In terms of Engender's expectations of 'Equality Counting' as a project, it was our aim to improve our capacity to serve women in Scotland by grounding our policy work in the real experiences of women managing the consequences of their multiple/intersecting identities. We knew that as an organisation we wanted to examine our own practices and anticipated that this would be a very interesting 'learning curve' for us.

The carer's group was keen to participate in 'Equality Counting' and to consider not only their own issues but to highlight that information should be a right, not something that has to be searched for by people who are in vulnerable situations such as experienced by relatives of stroke patients.

"We have to battle just to get basic needs met and systems are not adequate for our (self and partner) situation... help should be given and not have to be searched for..."

Some of the women voiced that they had not been adequately prepared for coping with the range of situations that arose following the discharge of their partner home from hospital. Their expectations in terms of receiving appropriate support and useful information from medical and social services at the point when they most needed it had effectively been shattered.

"It has been said that there are worse things than death..."

Outcomes

Across the 'Equality Counting' project we were looking to effect change for women who suffer inequality and disadvantage, supporting them to have greater choice, control and empowerment over their own lives in relation to accessing public services.

The Chest, Heart & Stroke Scotland (CHSS) Aberdeen South, Service-Users Involvement Group had piloted the Civic Participation Training (CFS). This was very successful and led to several changes with members joining local committees and feeling much more empowered to participate in meetings, influencing how minutes are taken, which venues are used and what ground rules the groups have (which contribute to effective communication). One member was asked to join the Scottish Intercollegiate Guidelines Network (SIGN) Committee participating in developing guidelines for services for stroke rehabilitation.

The Aberdeen group had hoped that the time was right to join the 'Equality Counting' project to keep up the momentum, to work on issues and actually have a chance to influence change.

However, the Aberdeen City CHSS Service-User groups underwent a process of restructuring following staffing changes and this precluded further participation in Equality Counting.

Engender has plans for future work with CHSS in Edinburgh and the Scottish Borders to carry forward the aims and objectives of 'Equality Counting' with Women TIC 2011. We will aim to pick up with the Aberdeen women again at this time.

The Inverness carers have continued to work with our Participatory Researcher to explore their communications needs across a range of life circumstances:

- With health and other support staff and agencies
- With friends and relatives as they find they are the interface between their partner and others in the immediate friendship/family circle
- With their partner, especially with regard to accurately imparting their partner's needs and views on medical and financial decisions

This exploration covers:

- Working with a group where there is a 'shadow' group present, as members include what they believe their partners would say/feel
- What 'good' communication would be like
- What problems 'bad'/inadequate communication causes for them and their partner

The carers' outcomes were outlined as their community based indicators:

- Training/ Guidelines for NHS staff on 'What is Good Communication' between patients/carers and service providers
- Procedure for patient assessment (evidence no need for multiple assessments)

The Scottish Government has already expressed a commitment to these outcomes in its Better Health Better Care: Action Plan (2007).

"I want us to move to a more mutual NHS where partners have a real involvement, representation and a voice that is heard." (Nicola Sturgeon MSP)

The benefits are for all and Engender recognises that working with a diverse range of groups will improve our own capacity to serve women in Scotland. Our policy work will be grounded in the real experiences of women managing the consequences of their multiple/intersecting identities.

"Someone was interested in where we were coming from"

Impacts on individuals

Group members have been involved (depending on time and energy constraints around their carer roles) in a range of meetings and discussion sessions on issues around Equalities and Human Rights. One woman was keen to have further discussion on the matter of female residents, in care homes, receiving intimate care from male care assistants and whether residents were offered a choice of female or male carers (unlikely).

Meetings have been held with the Highland Council Director of Social Work. NHS Highland will now handle the budget for care of elderly.

"I managed to go to a meeting with Managers... it was daunting but I did it!"

"We got positive reactions and encouragement"

Members have also attended a care home meeting with NHS managers where key points discussed included:

1. People in private homes are not deemed a priority
2. Equipment in the home is an issue as some relatives wanted to know if the family bought specialist items for their relative whether staff would use it?

3. Identifying a formal contract with residents that set out their rights
4. There is an annual review with the resident, carer, care home and social worker

Members will examine the care home brochures to check what details they contain about a contract (point 3).

“People who have had a stroke are discriminated against because many of those providing intimate care have not had specialist stroke training. Some very good staff are aware of this lack and have even offered to pay for their own training.”

Following an incident involving a senior staff member at a care home, which distressed group member(s), a meeting was convened with relatives.

Key points:

- Suggestions to improve communication were offered by relatives including the development of a communication sheet for staff to fill in. This should be read by the carer and the relatives and should be signed.
- It was asserted that some care staff fail to persist in taking the time to understand what the resident is saying or otherwise attempting to communicate to them
- It is not clear to relatives what rights the resident has or are being denied in that situation
- Relatives are concerned that if they complain then this may affect the treatment /experience of the resident in the care home

Outcome of this discussion

The group will find out what the complain protocols are and familiarise themselves with the carer home’s complaints procedure.

Conclusion

“We knew we were united”

Work on ‘Equality Counting’ with Women TIC has proved a challenging but very exciting opportunity for Engender and one which we are keen to progress. The pace of work with this community is one of the biggest challenges in terms of working within the timeframe of a funded project but such investment is vitally important if we are to eradicate disabling barriers and truly value an inclusive society.

We have forged positive links with CHSS and together hope to be able to organise and facilitate workshops and training embodying the aims and objectives of 'Equality Counting'.

"This has stimulated me to keep on fighting!"

Further Reading

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Oliver, M. and Barnes, C. (1998) *Disabled People and Social Policy: From Exclusion to Inclusion*, London: Longman.

Pound, C, and Hewitt, A (2004) Communication barriers: Building access and identity. In J. Swain, S. French , C. Barnes and C. Thomas (eds.) *Disabling Barriers - Enabling Environments* (2nd ed.). Sage. London

Thompson, N. (1998) *Promoting Equality: Challenging discrimination and oppression*

Websites

http://www.chss.org.uk/voices_scotland/stroke_voices/

<http://www.chss.org.uk/forums/>

<http://www.headway.org.uk/Regions/Scotland.aspx>

Learning Brief

Policy Implications - Equality Counting

What are the implications of our learning from Equality Counting for the use of equality legislation?

Project Background

The 'Equality Counting' project at Engender, was funded by the UK Equality and Human Rights Commission (EHRC) to promote the effective implementation of the equality duties by establishing opportunities for dialogue between public service providers and women using their services about the impact of equality blind or neutral, particularly gender blind or neutral policy decisions and consequential practice.

A reoccurring theme generated by each community of interest (Trans women, disabled women and women with disabled children, and women with diverse communication support needs) was the lack of understanding that many public bodies have regarding their responsibilities under the existing equalities legislation. This indicates that further instruction and training is necessary for public bodies to comply with legislation, and more importantly to be able to understand how to translate them into their policy and practice.

Equality Duty 2010 and Equality Impact Assessments

Clearly laid out in the Equality Act 2010, a public authority must -

- (a) eliminate harassment, discrimination, and victimisation and any other conduct that is prohibited by or under this act.
- (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
- (c) foster good relations between persons who share a relevant characteristic and persons who do not share it.

Additionally, clearly defined in the Equality Impact Assessment tool -

'The public sector equality duties for race, gender and disability require the Scottish Executive to equality impact assess. It is a legislative requirement. More importantly, however, at the end of most policies, there are people. If your policy affects people you will need to consider undertaking an equality impact assessment. People are not the same and policies should reflect the fact that different people have different needs' (Equality Impact Assessment Tool, <http://www.scotland.gov.uk/Topics/People/Equality/18507/EQIAtool/EQIA2>).

Work with communities of interest through the Equality Counting project demonstrates clearly that the requirements listed in these statements are not being effectively translated into the working practices of public authorities.

The Equality Duty and the EQIA requirement are tools for continuous improvement and need to be used as such by public authorities.

Women Thinking Trans Issues

Transsexual women seek to bring their physical bodies and gender expressions into better accordance with their female identity so that it become clearly visible to their friends, families and colleagues. The lengthy and difficult process which transsexual women go through in order to achieve this is called Gender Reassignment (or transitioning).

Case Study - NHS wait times for gender reassignment surgery

The length of the process can vary significantly based where the transsexual woman lives, with rural women experiencing longer wait times than those based in Glasgow for example.

Policy Implications

- **Avoidance verses Evasion**

- Public bodies failed, in many of the case studies, to fulfil their requirement to involve the relevant groups before coming to the conclusion that no group would be disproportionately affected by a policy or budget cut.
- It is important to distinguish whether the public bodies thought that this lawful neglect of their duty or whether they intentionally disregarded these groups in order to push their policies though without due regard for the protected characteristics.

Women thinking Disability

Disabled people are often invisible in our society. Our economic system and our values mirror one another so people who are assumed 'unproductive' are discriminated against by being devalued in monetary terms, both in their ability to earn money and in their access to services that are paid for from tax revenues because they are seen as a 'cost' or a 'burden' to the system. The devaluation is also applied to carers for the disabled who are predominantly women.

Case Study - Budget Cuts to Oaklands

Without the parent's efforts to create awareness of the disproportionate impact that such cuts would have on the children attending Oaklands and requests to see the Equality Impact Assessment, the children and their carers, mainly women, could have been severely affected.

Policy Implications

- **Contradictions in procurement policy and equality policy are problematic.**
 - The equality duty applies to public functions, which are carried out through procurement as well as those carried out directly by the public authority. One of the aims of the equalities legislation is to recognize that policies, (budgets included) do not affect people in the same way.

Women Thinking Inclusive Communication

Women and men, including those with diverse communication support needs, have an equal right to have their voices heard by policy/decision makers. It is vitally important that service providers understand how to support people to participate and put resources in place so they are on an equal footing in society.

Case Study - Transport budget cuts

Concerns were expressed about budget cuts impacting on access to transport, for example the loss of taxi cards and concessionary bus passes. Such decisions have limited this community's ability to participate in social activities which is a right guaranteed to them under Article 27 of the Universal Declaration of Human Rights.

Policy Implications

- **Budgets need to be Equality Proofed**
 - If an Equality Impact Assessment had been completed it undoubtedly would have found that many of the budget cuts and policies discussed in the case studies were discriminatory to those who arguably will need the service most and therefore will be making more out of pocket payments than any other group.

Concluding Points

Equality Impact Assessments are not being interpreted by some local authorities as an integral part of the policy making process. It must be stressed that EQIAs are an invaluable tool when making financial or service provision decisions.

There is a legal obligation on public authorities to meet the requirements of the Equality Act. In order to further promote its importance, consultation of relevant groups should be given priority. Gathering evidence from stakeholders and affected groups is a key part of the impact assessment process and the policy initiation process.

Local authorities should understand that EQIAs will not prevent them from making the decisions that need to be made but rather enable them negate the negative impact that could be caused to protected groups whenever possible.

The requirements of the Equality Act and the relevance of EQIAs are not new. The case studies and the policy implications reiterate the need to **involve** communities of interest and make public bodies **accountable** to the people.