



ENGENDER CALL FOR EVIDENCE ON CEDAW

The UK's response to its obligations under the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) is currently being examined.

In the lead up to the UN review of the status of women's rights in the UK, and in particular the implementation of CEDAW across the UK, Engender is seeking evidence from women and equalities organisations across Scotland to inform our shadow report. Shadow reporting is an essential tool for non-governmental organisations supporting women's rights. By submitting a shadow report to the UN CEDAW Committee, Engender – and women's organisation in the remaining three nations – can share civil society's perspective of women's rights across the UK.

The evidence that Engender receives from its call for evidence will be analysed and incorporated into the shadow report, which is expected to be submitted to the UN CEDAW Committee in summer 2018.

In its last concluding observations, the UN CEDAW Committee noted the following areas of concern:

- Violence against women including FGM and trafficking
- Access to legal aid and justice
- Women in prison
- Participation in public and political life
- Women's underrepresentation in decision-making positions
- Education
- Employment and economic development
- Gender stereotyping
- National machinery for the advancement of women
- Legal status and implementation of CEDAW

Engender is seeking views on the following:

- What is the current status of the concerns identified by the UN CEDAW Committee in its last report on the UK? In other words, what are your outstanding concerns with women's rights in these areas in Scotland?
- Thinking about the policy development process (i.e., from generating an idea to the coming into force of a Bill, strategy or programme) where has this not been aligned with the ambitions of CEDAW (e.g., not taken account of CEDAW)?

- In the last five years, are you aware of any legislative initiatives and/or policy reforms put in place to promote women’s rights and gender equality in Scotland?
- Is there anything else you would like to share with the UN CEDAW Committee in respect of women’s rights in Scotland?

You can answer as many questions as you like. You can also contribute to this review for evidence by sending us reports, comments, or bullet points about women’s rights and/or CEDAW itself by email to jill.wood@engender.org.uk.

We are hoping to share as many responses as possible with the Equality and Human Rights Commission and Scottish Human Rights Commission and/or to put those we can share on our website in a special section on CEDAW. **Please indicate below if you are content for us to share your response in this way.**

QUESTIONS

What is your name?

Lynzy Hanvidge and Lucy Hughes

If you are replying on behalf of an organisation, please tell us its name.

Who Cares? Scotland.

Who Cares? Scotland (WC?S) is an independent advocacy, membership and influencing organisation working with care experienced people. We provide direct advocacy to care experienced young people, as well as opportunities for national and local participation. WC?S aims to provide looked-after children and young people in Scotland with knowledge of their rights. We strive to empower them to positively participate in the formal structures they are often subject to solely because of their care experience. At WC?S we utilise the voice of the care experienced population of Scotland to inform everything we do as an organisation.

We are celebrating our 40th anniversary in 2018 and our vision, which was created with care experienced people, is to secure a lifetime of equality, respect and love for care experienced people in Scotland.

To find out more about how we will do this, please:

- Find information about our strategic plan for 2018 – 2022 by visiting this link - <https://www.whocaresscotland.org/what-we-do/strategic-plan-2018-2022/>
- Read more about our 40 years of representing the care experienced community by visiting this link - <https://www.whocaresscotland.org/40th-birthday-year-2018/>

To understand why this vision matters to care experienced people, please:

- Read the blogs they have created, which are available via this link - <https://www.whocaresscotland.org/who-we-are/blog/>

- Take 5 minutes to watch this video which was created with our members - <https://vimeo.com/239422128>

Question 1: What is the current status of the concerns identified by the UN CEDAW Committee in its last report on the UK? In other words, what are your outstanding concerns with women's rights in these areas (or any other areas) in Scotland?

What we are looking for:

- Examples of areas where women's rights are not being realised and inequality persists
- Gender-disaggregated data that shows a difference between men's and women's experiences, especially where this relates to women from different protected groups
- Areas where inequality or breaches of rights have worsened over the past five years

We would like to highlight the discrimination, stigma and inequality faced by girls and women who are care experienced. Those who have experience of the care system, are a marginalised group in Scotland's society and we believe this identity, when intersecting with gender identity, creates specific issues of concern. Care experienced people we work often have unstable relationships in their lives and can move placements many times whilst in care. They also experience poorer life outcomes, such as leaving education earlier with less qualifications, higher rates of criminalisation and the potential of becoming homeless once leaving care. It is therefore extremely important that we acknowledge that care experience creates another set of barriers which shapes the way rights and inequalities are experienced by women and girls.

We recently held an event to celebrate International Women's Day 2018. Thirteen care experienced women and girls came together to discuss the discrimination they have faced both as women but also as care experienced people. We are submitting the comments and discussions from this session, as evidence that care experienced women and girls are currently not afforded equal rights in Scotland. We have also linked these comments directly to sections of CEDAW and with previous research carried out with our care experienced membership.

Education

Care experienced young women told us that they feel they face discrimination in school and in the subjects they choose to study. There is still a strong perception that certain subjects are for certain genders and one young woman was told: *"girls do hospitality (to clean, cook), boys do graphics/woodwork."*

Another woman spoke about how she was mocked for her interest in STEM subjects and has received some of the following comments from peers at school:

"Are you on the spectrum? Are you some kind of female Hawking? Are you a lesbian? Did your dad want a son?"

A story was also shared in which one of the girls was bullied by peers and teachers for choosing to study electrical engineering.

The group also discussed that often teachers can fail to believe they are capable, questioning their subject choices and having unfair expectations about their lack of ability to attend university. The inequality these young women face in their education can be exacerbated by also facing stigma and discrimination for being care experienced. One young woman stated that she is *“judged because I’m care experienced”* and told *“you will never amount to anything.”* This is something we often hear about from the young people we work with and is linked to the fact that many care experienced people face a lack of expectation in their abilities in their education and beyond.

- *“You know that’s a difficult subject, don’t you?”*
- *“You’re too stupid to do that.”*
- *“Are you sure you want to do that? There’s other stuff you can do.”*

There is sometimes a public perception that being care experienced determines a person to a poorer quality of life and worse outcomes, including in education. While this can be true for many young people, others feel that their aspirations are curtailed by others because of this stigma. The poor outcomes care experienced people face in education ends up being reinforced by the low aspirations set for them. Many young women in the session talked about the low expectations others had of them, that they were made to feel like they were *“set up to fail”* and *“labelled”*.

They also mentioned that sports and physical exercise was still perceived as gendered, one young woman said she was told: *“You can’t play rugby, rugby is for boys.”*

The discussions demonstrated the lack of equality care experienced young women felt they had in the choices available for their education and future occupation. They also spoke about how being a woman and being care experienced meant that there could be certain *“barriers to get to university and education.”*

These experiences of inequality in their education, show how CEDAW is failing to be upheld in Scotland - both Article 5’s statement to ‘modify patterns of conduct... on stereotyped roles for men and women’ and Article 10’s statements on equality ‘in the field of education’. Article 10’s statement that all women have ‘the same conditions for career and vocational guidance, for access to studies and for the achievement of diplomas in educational establishments of all categories...’ must be progressed further in Scotland.

Sisters and Family Life

As an organisation, Who Cares? Scotland has long emphasised the importance of love and relationships within the care system. Naturally, we therefore view relationships between siblings as a crucial part of a young person’s life.¹

At the IWD event, young women in the group naturally focused on their relationships with their sisters when discussing family life and sibling relationships. This was shaped by the

¹ For research on the important of sibling relationships, please see Clan Childlaw’s website: <https://www.clanchildlaw.org/sibling-contact> and the Who Cares? Scotland’s Young Radical’s Report: <http://www.corporateparenting.org.uk/learning-hub/guidance-materials/sibling-separation-and-contact-report/>

context of discussing women's rights and many spoke about their relationships with their sisters, and other siblings, which have been impacted negatively by their time in care.

We want to share these personal stories, as evidence of how care experienced women's human rights are not being fully upheld in Scotland:

- *"I went into kinship care, my sister was born after I went into care and she was taken into foster care, so we have never met. Next week, we're meeting for the first time – she's 14 and I'm 22."*
- *"I have an older sister and younger I've never met, it hurts to know they're out there. My 8 year old sister, I do have a relationship with, it hurt even more when they stopped me seeing her."*
- *"My baby sister could be adopted and I struggled to build relationships with my older sisters – I don't want her to be adopted."*
- *"Relationships break down, social work don't help."*
- *"It's like your world comes crashing down when you're separated."*
- *"Foster sisters, step sisters, when things breakdown at home, in placement – what happens next? How do you maintain these relationships? It's a mess."*
- *"In my experience – boys are kept together more."*

Some young women spoke about 'contact' with family members. 'Contact' as a term, can often be used to refer to time spent with family members while you are in care – both arranged formally through social work, or informally. For many, formal contact arrangements can feel unnatural and forced. They described how this current process does not help them to build long-lasting and strong relationships with their families:

- *"If sisters and I stayed with mum we wouldn't be sitting in an office – it's like walking on eggshells."*
- *"Contact can feel like spending time with strangers, not the same as sharing childhood experiences."*
- *"Feels like losing them all over again at the end of every contact - don't want to relive it."*

Case Studies:

Young women also shared more detailed accounts of their experiences of being separated from their sisters, because of going into care and the lifelong effects this had on them.

Case Study 1

"Me and my sister were accommodated at the same time, we were told we would stay together. We were lied to; my sister was taken into foster care and I was put in a residential home. Our contact was reduced until it was only twice a year, this has caused us to no longer have a relationship. I was her main carer when we lived at home."

Case study 2

Three sisters were separated completely. Two of the siblings were taken to a placement thinking they would be kept together there, then they were told after an hour it was time for

the older sibling to leave to go to her own placement. Contact was reduced after they moved schools. Due to the trauma cause by this separation it led to there being a lot of anger and rivalry between the sisters. Then one of the sister was moved to secure and lost contact with her sisters for over a year. There was lack of communication between units and placements for over 9 years which affected the girls.

As an organisation, Who Cares? Scotland believe the law needs to be changed to place a duty on local authorities to promote contact between care experienced people and their separated siblings. Such a law does exist when it comes to parental contact; section 17(1)(c) of the Children (Scotland) Act 1995 directs the local authority to ‘take such steps to promote, on a regular basis, personal relations and direct contact between the child and any person with parental responsibilities...’

Extending that duty to apply to contact with siblings or introducing a new analogous duty in respect of sibling contact, should be relatively straightforward. Given the importance of these relationships, the adverse effect loss of those relationships can have on young people’s health and wellbeing, and the clear human rights argument for maintaining sibling relationships, we believe this change should be treated as an urgent priority.²

As a children’s rights organisation, we take a rights-based approach to the issue of sibling separation and contact.

Article 16 of the United Nations Convention on the Rights of the Child states,

‘No child shall be subjected to arbitrary or unlawful interference with his or her privacy, family, or correspondence.’

Article 8 of the European Convention on Human Rights (as protected under Scots law by the Human Rights Act 1998 and the Scotland Act 1998) states,

‘Everyone has the right to respect for his private and family life, his home and his correspondence.’

The separation of young women and girls from their families, which violates these rights, shows how Article 3 of CEDAW is failing to be upheld for care experienced women in Scotland, as they are unable to fully exercise and enjoy ‘human rights and fundamental freedoms’.

Women in Prison

Care experienced women also spoke about their knowledge of women in prison. However, we want to highlight that discussions were not about first-hand experiences of prison and instead they discussed the stigma that is attached to women who have been to prison and how it can affect how you are perceived as a woman. One young woman states that: *“you lose your femininity when you become a prisoner.”*

The group also felt strongly that women in prison should be offered more emotional support, especially mothers who enter the justice system. Prisons were also commented on as heavily staffed by men, so that when women prisoners ask for essential items such as sanitary

² For more information on our work on this area, please see the website ‘Stand Up for Siblings’: <http://www.standupforsiblings.co.uk/>

products, their dignity is affected. This perception could stem from young people in children's homes having to ask male staff for sanitary products, an example of this was spoken about during the session:

"I remember being in the residential school and having to ask my key worker, Jon, for sanitary products. It was embarrassing because he was a man, I would have felt more comfortable asking a female member of staff but sometimes that was impossible."

This issue is particularly linked to care experienced women, as there is recognition that often young people in care are criminalised.³ One young woman commented that it was perceived as *"just a matter of time"* until a person with care experience offends. Statistics reveal that although care experienced people make up less than 0.5% of the general population, they make up 33% of Scotland's youth offender population and 31% Scottish adult prisons.⁴

There are many reasons why care experienced people face higher rates of criminal convictions, which are rooted in the lived experiences of being in care. These include over-involvement with, and stigmatisation by, the Police; increased scrutiny in care placements; and participation in difficult formal processes.

We would also like to draw attention to the research carried out by the Centre for Youth and Criminal Justice, who work with young women in prison and have excellent work published on this area of women's experiences.⁵

Police Discrimination

Linked to women's experiences of prison, is the way police interact with young care experienced women.

To illustrate this, one young woman wanted to share her personal experiences with police:

"I was told I was not a credible witness in ongoing abuse case because I was female 'I must have been asking for it'. Police kept asking if I'm sure I'm telling the truth."

"Police changed their opinion of me (drastically) as soon as they found out I was in care, they were shouting in my face once they realised my foster mum wasn't my biological parent. They knew my birth parents and judged me, they just assumed my behaviour would be the same as my parents."

This provides further evidence of how being care experienced and being a woman, intersect to create specific forms of inequality and discrimination in Scotland.

³ For research on the criminalisation of care experience, please see: WC?S Corporate Parenting website: <http://www.corporateparenting.org.uk/learning-hub/guidance-materials/dionne-policing-2/>; the following research by CYCJ: <http://www.cycj.org.uk/wp-content/uploads/2017/10/Young-People-in-Custody-October-2017.pdf> and <http://www.cycj.org.uk/wp-content/uploads/2016/10/Responses-to-Offending-in-Residential-Childcare.pdf>; WC?S, *Response to the Consultation on the Minimum Age of Criminal Responsibility*, 10th June 2016.

⁴ Scottish Prison Service (2016), *Prisoner's Survey 2015 – Young People in Custody*. [We would like to highlight the unreliability of this statistic because it relies on the self-identification of the prison population as care experienced.]

⁵ <http://www.cycj.org.uk/wp-content/uploads/2015/10/Info-sheet-42>; Find more on CYCJ's website: <http://www.cycj.org.uk/news/improving-practice-for-girls/>

Care Experience and Motherhood

One of the most passionately discussed issues was how care experienced women face discrimination and stigma when pregnant and becoming mothers. Many young women who are care experienced do want support from social services, to make sure their child has the best possible start in life. However, in practice, young women have told us this can translate to a negative assumption being made by professionals about their abilities to be mothers. This can lead to an assessment being made that there must be social work support involved in their child's life, rather than assessing their needs and providing support to help them care for their children.

Young women at the session shared stories about how they felt judged before they had even had the chance to have their children and that their ability was continually questioned by professionals around them:

- *"I was always judged by my old social worker, who told me because I'm care experienced my baby is more likely to be care experienced."*
- *"Automatically judged for being care experienced, being assessed to see if you'll be a good mum."*
- *"My friends from care had babies very young – some stayed with dad some didn't. Some were taken into care."*
- *"There is an expectation of not being able to be a good mum because of my care experience."*
- *"You're judged if you're a single parent – when you don't have childcare."*
- *"Care leavers can't be a good mum." (Comment on public perception).*
- *"We haven't been taught how to be mums – but our experiences mean that I know what NOT to do."*

These cases show that being a care experienced woman in Scotland can lead to a lack of control over decisions relating to motherhood. This is impacted by the lack of support available and the stigma related to being care experienced.

This shows a failure for Scotland to uphold Article 16 in CEDAW, sections (e) and (f) on the rights to 'decide freely and responsibly on the number and spacing of their children...' and 'the same rights and responsibilities with regard to guardianship, wardship, trusteeship and adaptation of children...'

Legal Aid: A Care Experienced Mother's Case Study

One young woman wanted to share her experience with Engender, to show how she was denied help with legal fees as a care experienced mother, to fight for the parental rights to her child:

"When contesting adoption, legal fees had to be paid, was studying and paid £1000's from the money that was to support education with no help from local authority or Legal Aid. Social workers visited me 3 weeks after my baby was born... already doubting me from the beginning because of my childhood experiences."

At the IWD event, we also screened the powerful video created by Just for Kids Law, called 'If I Could Talk to Me' and would recommend that Engender watch this to further understand how care experience impacts motherhood.⁶

Traditional Roles for Women and Care Placements

Young women shared their experiences of being a woman in care and how different placements affected the life skills they developed:

"I had the role of being a carer before going into care, 'playing mum' to siblings from childhood until adulthood. I was told its 'my responsibility' as oldest female in family, which led to me cooking and cleaning for the family. Then when in care my foster carer expected me to cook, clean and do chores all the time, had to be up and ready before 7am to start chores for that day. Had to bleach bathroom every second day. These responsibilities should have not been placed on me, they were never challenged, so now its instinct."

Another young woman spoke about her experiences in residential care:

"Going into a children's home I lost all my life skills. Before I went there I could cook, clean and look after my family. Once I was there I had a cook, a cleaner, and staff who took care of everything. I was never taught how to cook or clean properly. I still don't know how to iron properly as no one took the time to show me how to do this. I was never taught about budgeting or how to pay bills. Or how isolating it would be once I had left, how to manage my stress or have someone to fall back on when times were hard. They didn't teach you the normal things young people would learn at home. I left care at 16, they set me up to fail."

These stories show how traditional gender roles for women, such as taking on tasks such as domestic chores and childcare, can still be an expectation within care settings. However, the case study about residential care experience, also shows how a lack of education on basic skills can have long-term effects for the rest of a care experienced person's life.

Reproductive and Sexual Health

Many care experienced women spoke about their difficulties in finding support and education about their sexual health and particularly when starting their periods whilst in care.

Some women shared their experiences, such as:

- *"My foster carer stopped buying sanitary products for me at 16."*
- *"I wasn't allowed to use tampons in foster and residential care."*
- *"When I started my period – I had a 2 hour lecture from staff (one male and one female). They said, now you are a woman."*
- *"I only learned about sex/periods at school."*
- *"I missed out on education about sex ed."*

This linked to concerns around the provision of sanitary products more generally:

- *"With homelessness – how do woman access sanitary products?"*

⁶ <https://www.youtube.com/watch?v=-6Zx9dlqB8E>

- *“We didn’t ask to be born female – how are tampons a luxury?”*
- *“Schools are charging you for sanitary products.”*
- *“We hate tampon tax!!”*

Many young women also shared stories of how they had felt judged over their sexual behaviour and sexuality, which was linked strongly to the stigma faced due to their care experienced identity:

- *“I was expected to be promiscuous because I was abused in my home for years. I was made to believe this was my fault.”*
- *“Having your sexual identity questioned and de-valued because you are care experienced. Told you are gay because you were abused.”*
- *“Care experienced women are more likely to go into abusive relationships, that they don’t know what healthy relationships look like.”* (Comment about the public’s perception).

They also felt they have not been supported with proper access to and choice over types of contraception during their care placements:

- *“Professionals make you second guess your decisions about your body.”*
- *“I have a lack of control of my own body and was made to have contraception.”*
- *“I was forced into having contraception.”*

They had also been experienced being stigmatised for having periods and this had led to some of their health concerns being ignored. They felt that women are perceived as *“too emotional”* and therefore not always taken seriously. One young women shared that her mental health problems were not taken seriously because of this.

Case Study

“I have had mental health issues since I was 12, I am now 24. I have been through a lot of traumatic experiences over the years and have seen a lot of different doctors regarding my mental health. It has always been as if my mental health was my own fault or if I was just overreacting, not that this has been said directly to me by a doctor. I always just assumed, because of the way they spoke about my mental health, that I was just being hormonal or exaggerating my feelings. I was told I had depression and given tablets to help deal with my issues, no one ever really suggested anything else could be wrong. I felt trapped inside my head with no one that wanted to listen to me and how I was feeling. It wasn’t until this year I was actually diagnosed with PTSD, I seen a female doctor who actually listened to what I was saying. She made me feel at ease and like it wasn’t my fault that I felt this. She made me believe that with some help I can and will get my mental health under control.”

The cases where there is a lack of reproductive and sexual health support care placements, show a failure for Scotland to uphold Article 12 of CEDAW, to ensure that all women have access to appropriate family planning education. This provides further evidence that CEDAW is failing to be upheld fully for care experienced women in Scotland.

Question 2: Thinking about the policy development process (i.e. from generating an idea to the coming into force of a Bill, strategy or programme) where has this not been aligned with the ambitions of CEDAW (e.g. not taken account of CEDAW)?

What we are looking for:

- A sense of the extent to which CEDAW is considered during the policymaking process, with examples of where this has or hasn't happened
- A sense of the extent to which women's equality and rights are considered during the policymaking process, with examples of where this has or hasn't happened

WC?S understands that the care system is determined by many different pieces of legislation and sits across a variety of policy areas in Scottish Government. However, we don't know enough about how protected characteristics, such as gender, are considered in these policy development processes. We know there is little understanding in relation to gendered experiences that affect care experienced people and would be keen to support Engender on any future work in this area.

We would like to see care experience discussed in relation to different protected characteristics, such as gender, to acknowledge the fact that there is no universal experience of care. We believe this would lead to better policymaking regarding the care system and ensure that women and all genders of people in care, experience a lifetime of love, equality and respect.

We are also currently campaigning for care experience to become its own protected characteristic within the 2010 Equalities Act. If care experience was considered in all areas of policymaking, alongside gender and the full list of protected characteristics, we believe that there will be quicker progress for improving the life experiences and outcomes for women and all genders in care.⁷ However, we would like to seek Engender's guidance on how this may affect policy development processes in practice.

Question 3: In the last five years, are you aware of any legislative initiatives and/or policy programmes or reforms put in place to promote women's rights and gender equality in Scotland?

What we are looking for:

- A list of areas where legislation or policy programmes are being introduced in a way that promotes women's rights and women's equality in Scotland

N/A

⁷ For more information on our vision and #LifetimeOfEquality campaign, please visit our website: <https://www.whocaresscotland.org/who-we-are/our-vision/>; <https://www.whocaresscotland.org/what-we-do/campaigns/lifetime-of-equality/>.

Question 4: Is there anything else you would like to share with the UN CEDAW Committee in respect of women's rights in Scotland?

What we are looking for:

- Any additional thoughts that you may have about women's rights in Scotland

We would like to add that this is an area of research and consultation which Who Cares? Scotland had yet to explore fully with care experienced women. The discussions at the IWD session touched on topics relevant to discussing how care experience and gender identities intersect and shape lived experience, however we acknowledge this needs to be developed further.

We want to ensure that care experienced voices are heard in discussions around gender equality and discrimination. We advocate for care experienced people to talk directly to decision makers at every opportunity possible, to make sure they are able to participate in as many forms of decision-making and influence Scotland's future.

If Engender would like to hold a session directly with care experienced people on these issues or involve WC?S members in further projects and work, please contact us.

It is helpful if we can share the information you provide us with the Equality and Human Rights Commission and Scottish Human Rights Commission, to inform their own work around CEDAW.

Permissions (please delete as appropriate):

- I do agree that this response can be shared with the Equality and Human Rights Commission and Scottish Human Rights Commission.
- I do agree that this response can be shared on a special section of Engender's website.

Please note that Engender may choose not to include all responses on its website.

Thank you for your contribution to the CEDAW examination process. Please return your response and any other materials to Jill Wood, Policy Manager, at jill.wood@engender.org.uk.