

**Gender Equality Forum**  
**11.00-12.30, 31 January 2023**  
**Teams meeting (virtual)**

Attendees

Head of Disability & Gender Policy, Welsh Government (Chair)  
Cardiff University  
Chwarae Teg  
Equality and Human Rights Commission Wales  
Fair Treatment for the Women of Wales  
Oxfam Cymru  
Plan International UK  
Welsh Women's Aid  
Women Connect First  
Women's Equality Network Wales

Welsh Government officials

Equality, Race & Disability Evidence Units  
Gender Policy

**1. Introduction and welcome**

In the previous meeting, attendees had asked for more time to consider the actions under the three key priority areas identified by Forum members:

- women's health
- unpaid care falling disproportionately to women
- Intersectionality and alignment between the equality plans

The Chair explained that any actions which are ongoing or incomplete within the current plan will be taken forward.

The aim of this workshop session was to set out specific objectives within each of the three priority areas to help take forward the next phase of implementation of the Advancing Gender Equality in Wales plan.

**2. Women's Health**

The following points were raised:

- Concerns that, due to staff moves, there is now only one person in the team taking forward the Women's Health Plan. Lack of capacity will impact what is produced. Two focus groups have been held with older women and Black, Asian and Ethnic Minority Women but there are many other women who need to be heard and involved.
- The Women's Health Plan is essentially an NHS plan which is vital to improving outcomes but is limited in its scope – it could be more holistic and tackle underlying inequalities.

- Has the plan made commitments in relation to milestones, timescales, co-production and intersectionality?
- Concerns that silo working and a lack of co-production will just reproduce what has gone before.
- The development of the women's health plan needs to take an intersectional approach and link with WG equality forums.
- The need to listen to women accessing health services was a strong theme in the consultation for the Women's Health Strategy for England. Section 3 entitled 'Women's Voices': [Women's Health Strategy for England - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/consultations/womens-health-strategy-for-england)
- NHS Wales' Discovery Report on Women's Health contains a lot of omissions and gaps which will impact what is produced in the new plan: <https://collaborative.nhs.wales/implementation-groups/womens-health/>
- Equality and Human Rights Commission 'Is Wales' Fairer' report will be published late this year which will provide good evidence. The focus will be on the menopause – impact in the workplace, access to support, mental health services for women and an intersectional approach.
- Research is showing that health and menopause is strongly impacting women over 50 and affecting them in the economy.
- Identifying interdependency of this work is very important e.g. mental health issues links to women suffering abuse.
- Links between care, health and poverty. Research into links between care and health across the UK is currently being finalised – Sarah Rees will share when available.
- Transition from children's health services into adult health services is important – they need to know what's available and how to access services.
- Communication is a crucial component and will impact engagement. Engaging with women is partly about letting women know what's going on. Need more comms around how women present differently to men e.g. heart attacks, autism etc.
- Needs of diverse women need to be considered – diversity means a lot of things.
- The role of the Gender Equality Forum might be to ensure the Women's Health Plan links with other forums, considers intersectionality etc. in its development – use the group as a vehicle to drive forward and co-ordinate in a mainstreaming role.
- Does the Forum have the authority to provide scrutiny across all this work?

The Chair emphasised the need for plans to link and complement each other. It needs to be considered at a strategic level and is not necessarily about committing the health plan to more actions but about ensuring the health plan is reflected effectively across the other plans.

Any actions will need to be agreed with relevant Ministers and officials.

**ACTION:** Policy officials (Health) to be invited to the next Gender Equality Forum meeting to provide an update on the Women's Health Plan.

### **3. Unpaid care falling disproportionately to women**

The group raised the following points:

- Need to consider what we mean by 'unpaid care'.
- Need to include childcare as this will impact upon other issues such as poverty and employment.
- Concern that the impact of the expansion of the Flying Start programme to two-year-olds will be limited – how will it work in practice and what lessons can be learned.
- There is a need to accelerate the expansion of free childcare in light of the cost-of-living crisis but there doesn't appear to be a shift towards universal provision.
- Communication again plays an important role – women need to be aware of the new eligibility.
- There is a lot of work going on in respect of expanding free childcare, addressing issues in the sector in England and Scotland – need to build on these insights.
- Women are relying on the Discretionary Assistance Fund (DAF).
- Legislation to reduce pay gaps but it is a complex area – closing the pay gaps is not about legislation but more about childcare provision and other factors which affect women in the economy.
- Pay gaps were identified as a key evidence priority from the Anti-Racist Wales Action Plan work – Welsh Government Evidence Units have a specific action around obtaining data to enable us to break down pay gaps by ethnicity and for disabled people.
- A lot of expectation on women to care without support – children, those with chronic health conditions, elderly, or ill partners/family members.
- Domestic abuse is a huge risk during pregnancy.
- Need to focus on other forms of care as well as childcare – all take women out of workplace, can cause poverty etc.
- Support that is available is difficult to find and/or navigate which is part of the problem.
- In an ageing population, there is often one person needing care while their partner is trying to care and work.
- Unpaid care is not valued but it is a job.
- Have to be mindful of language e.g. calling caring roles a burden.
- Census data showed a decrease in unpaid carers but a substantial increase in the numbers doing over 50 hours of unpaid care per week.
- Is placing children in childcare for 10 hours per day while women work in minimum wage jobs part of a successful economy? We shouldn't value women more highly for working a minimum wage paid job rather than caring for their child.
- Balancing act between childcare and work – the economic argument is that if you want to fill vacancies, childcare needs to be provided.
- Carers struggling to find/employ people to get a break from unpaid care.
- Need adequate public services in place providing care (child and social) to enable people to make the choices best for them. The pay and conditions for those working in those sectors should be decent and the gender division in

providing unpaid care is more equal. Government action needs to be moving us towards this as quickly as possible.

- Paid carers more likely to be Black, Asian and Minority Ethnic women, no contracts, precarious employment.
- Is the legislation regarding unpaid carers being used and effective?
- Need better opportunities to enable carers to maintain employment e.g. flexible working.
- The pandemic accelerated the shift towards homeworking which has been positive and negative. Remote working sometimes seen as flexible working but there is a difference and there can be negatives such as monitoring and the need to be online all the time.
- Some meetings starting to be held in person again – can be difficult for some groups such as disabled people.
- Need to look at the differences between unpaid care and being a carer.
- Need a review of the UK welfare system.

The following documents/articles were shared by attendees in respect of caring:

- [https://www.open.ac.uk/ikd/sites/www.open.ac.uk.ikd/files/files/working-papers/DeHenau\\_costingchildcareUK.pdf](https://www.open.ac.uk/ikd/sites/www.open.ac.uk.ikd/files/files/working-papers/DeHenau_costingchildcareUK.pdf)
- <https://www.bbc.co.uk/news/disability-64347984>
- <https://business.senedd.wales/documents/s118933/Research%20Brief.pdf>
- <https://www.gov.wales/new-fund-launched-support-unpaid-carers-wales-during-cost-living-crisis>
- <https://www.bbc.co.uk/sounds/play/p0dxlzf?partner=uk.co.bbc&origin=share-mobile>

**ACTION:** Welsh Government officials (Equality, Race & Disability Evidence Unit) to determine whether any gendered analysis has been made of the DAF and, if so, share findings.

**ACTION:** Welsh Government's definition of unpaid care to be shared with Forum members for review.

**ACTION:** The Deputy Minister for Social Services be invited to attend a future meeting to discuss childcare and unpaid care.

#### **4. Intersectionality and alignment between the equality plans**

The following points were raised:

- Need to link the equality plans with wider Welsh Government plans e.g. the Violence Against Women, Domestic Abuse and Sexual Violence (VAWDASV) plan is not considered an equality plan.
- Long-standing issues around the collection of data in areas such as disability. Disabled people may have an invisible illness and don't define themselves as disabled. Lack of awareness of the social model of disability means that the medical model is often still used.

- Intersectionality is complex – it links to mainstreaming and changing the way of working.
- An intersectional approach doesn't fit into a neat, simple process. It will mean dealing with complex evidence. But at its heart it should be about hearing from people, and that is where co-production and engagement is key. It must be as accessible for as many different groups as possible.
- The shift to embed intersectionality in ways of working needs to form part of the next phase and the wider plans (such as the Employability Plan) need to play a part.
- Lack of join up across the plans can affect how the whole system impacts can be measured.
- Some of the language used in plans is over-complicated – it is important that it means something to the people it is designed for.
- Some plans can be difficult and detached – co-production would help make them clear and simple.
- Action plans are a recent win for equality. The group could look at integration and identify common strands to form a cohesive approach.
- Possible to integrate by policy areas, not by strands.
- Intersectionality – qualitative data – need to know how and when to use it.
- Evidence should lead the policy response rather than starting with one strand and bolting on others.
- The Welsh Government Equality Evidence Units are considering the mainstreaming approach - officials will be considering how we can effectively engage across the organisation on equality evidence.
- Need a mechanism to integrate plans with others and link with Strategic Equality Plan.
- Mainstreaming collaborative approach which would include policy makers, academics and stakeholders.