

A group of women are seated in a circle, looking at a document titled "Bristol Womanifesto: Our Call for Parity". The document is held by a woman in the foreground, who is wearing a blue ribbed sweater and a yellow scarf. The document has a purple and blue design and the number "2" is visible. The background shows other women, some wearing denim jackets, and a woman with a red ponytail. The overall scene is a community meeting or workshop.

BRISTOL WO-MANIFESTO OUR CALL FOR PARITY

BRISTOL WOMEN'S VOICE
MAY 2016

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AGENDA FOR A BETTER BRISTOL



Bristol has made a commitment to bring about equality of women and men in local life as outlined in the

European Charter signed by the elected mayor, George Ferguson on International Women's Day 2013.

Since then some progress has been made but much more needs to be done. Our wo-manifesto underpins this commitment.

Evidence tells us that women in general experience disadvantage, and that some women are more disadvantaged than others. This wo-manifesto identifies six key priorities for change and makes a call to action to all who have a stake in the future of our city.

These priorities are underpinned by evidence, research and real-life

experiences of women living in the city. Action to address them would significantly improve the lives of all Bristol residents, both women and men.

Failure to tackle them would jeopardise social cohesion and seriously limit our cultural and economic potential.

Bristol Women's Voice calls on the agencies identified in this wo-manifesto to play their part in achieving women's equality. We will play our part by working with our members, raising women's issues and concerns, influencing decision makers and providers of services and holding key agencies to account.

A handwritten signature in black ink that reads "Penny Gane".

Penny Gane
Chair

POWER

To bring about change in public, private and political institutions in the city, to ensure gender balanced leadership. To ensure that the city’s key organisations hear, understand and respond to the needs of all women.

Finn Mackay writes in *The Guardian*, ‘Westminster politics, for example, is nearly 80% male, and overwhelming white; we are still waiting for a government that looks like the people it dares to govern.’¹

It is less than a century since women in the UK were given any right to vote or to stand for political office, to take up civil professions or to take up public office. While the laws that prevented women from being visible and active in public life have been dismantled, the legacy of a by-gone age still influences today’s models of ‘leadership’, policy-making and the setting of priority policy areas. These hierarchical models are known to cause poor performance when it comes to capturing (or even recognising) the knowledge and experience of people who are traditionally excluded from the corridors of power.

Public Representation

Women in Bristol make up 51% of the population. However, in terms of political leadership, prior to the 2016 elections only 36% of councillors were women. Despite 100% of Bristol MPs being women, during the 2016 mayoral elections, only two out of 13 (15%) candidates were women, against a national average of 25% female elected mayors. It was also evident that the city



saw the mayoral role as a male one with headlines such as, ‘the right man for the job’ or ‘Leadership is about ... having the balls to do it.’ Following a strong 50:50 Campaign in Bristol, the 2016 elections saw progress with 30 women elected out of 70 councillors, taking women’s representation up to 43%, with some political parties achieving 50% or more.

	Women	Men	Percentage
Labour	18	19	49:51
Conservatives	3	11	21:79
Liberal Democrats	3	5	38:62
Green	6	5	55:45
Total	30	40	43:57

The evidence suggests that when women stand as candidates they are elected at nearly the same rate as men – 44.9% for

¹ <http://www.theguardian.com/commentisfree/2015/mar/23/threat-feminism-patriarchy-male-supremacy-dating-makeup>

women and 47.5% for men.² Yet there is not one single reason that prevents women entering political life but often a variety of different reasons. Some of these include a lack of diverse role models, lack of confidence, lack of mentoring and support, perceived discrimination, perceived lack of experience, or apprehension about opening yourself up to public and media scrutiny.

At a recent BWV event to encourage more women into politics, the invisibility of diverse role models and lack of confidence were the main two reasons cited as barriers for women to enter political life.

Some of these can be tackled through education, positive local media stories and strong women politicians as role models. It is also about changing attitudes so that our community values the voices of a diverse and representative council.

An ongoing challenge is to not only increase the proportion of women on the council but to increase the proportion of Black, Minority and Ethnic women in politics. A more diverse council would make better decisions and solve problems more effectively because it would be able

to draw upon a wider range of experiences and insights.

Representation of Public and Private Boards

Women continue to be under-represented in both public and private boards. Only two out of 13 board members of the Local Enterprise Partnership (West of England) are women, and one in three voting members of NHS boards are women. Some 13 out of 15 Public Sector Boards in Bristol are led by men. The Equality and Human Rights Commission has just released its new report on board appointment practices in the UK's largest 350 listed firms. More than 60% of these firms have not met a voluntary target of 25% female board members.³

According to a new global index from Catalyst, (the non-profit organisation for women in business), introducing quotas to boost the number of women in corporate boardrooms is working.⁴ Further, Catalyst cited research looking at corporate performance and women's representation which showed that a gender diverse board leads to better fiscal performance.⁵ Diverse boards have also been shown to strengthen a company's talent pipeline and increase innovation, leading to a stronger group performance.⁶

² Women in local Politics in Europe Figures from 34 European countries of CEMR membership (DRAFT) CEMR 2008

³ <https://www.womenonboards.net/en-GB/Impact-Media/News/Women-Returners-Back-to-Your-Future>

⁴ <http://www.telegraph.co.uk/finance/financetopics/davos/10597233/Quotas-needed-for-women-in-executive-roles.html>

⁵ [http://www.catalyst.org/system/files/the_bottom_line_corporate_performance_and_women's_representation_on_boards_\(2004-2008\).pdf](http://www.catalyst.org/system/files/the_bottom_line_corporate_performance_and_women's_representation_on_boards_(2004-2008).pdf)

⁶ <http://www.catalyst.org/knowledge/why-diversity-matters>
<http://www.catalyst.org/knowledge/advancing-women-leaders-connection-between-women-board-directors-and-women-corporate>

Power Calls to Action

Who?	Call to Action
UK government, Bristol City Council, West of England Local Enterprise Partnership	To implement United Nations Development Goal 5.5 to ensure women’s full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life
UK political parties, local political parties	To put forward a minimum of 50% women candidates in council elections especially in winnable seats
All major companies in Bristol	To ensure a minimum of 50% board members are women
Public agencies in Bristol	To allocate points in procurement processes to those companies with 50% or more women on boards of companies tendering for contracts
Bristol City Council	To ensure a culture whereby female councillors are able to fulfil their obligations and their full potential
All employers in Bristol	To develop strategies to promote and retain women at senior level



HEALTH AND SOCIAL CARE

To improve the health and wellbeing of Bristol women of all ages through action and influence underpinned by research. To raise the profile of women's health and the importance of taking a gendered approach in all aspects of health promotion and service planning and delivery to secure equal opportunities for women to enjoy good health.

Health

Women and girls, both nationally and locally face significant barriers to good mental and physical health and wellbeing. Women have specific health needs but social factors also have an impact on women's health. Women have longer life expectancy than men but they spend more years in poor health, often with a disability.⁷

In 2012, for the first time in two decades, life expectancy for women aged 65, 75, 85 and 95 fell compared with a year earlier.⁸ In Bristol there is a gap for women between national

Healthy Life expectancy levels (63.9 years) and Bristol Healthy Life Expectancy (62.6 years).⁹

For many years, symptoms of diseases and conditions which affect both men and women have been assumed to be the same. It is known now that this is often not the case and this has led to disparity in diagnosis of conditions as varied as Coronary heart disease, brain tumours and autism. One in three women dies from cardiovascular disease, about the same rate as for men but the symptoms of heart

⁷ ONS 2010

⁸ Public Health England 2016

⁹ JSNA 2015

attacks in women are not widely publicised and they are less likely to seek help.¹⁰

Women are more at risk of stroke than men and tend to be more seriously affected, needing long term care.¹¹ Women are much more likely to suffer from arthritis and rheumatism, the most common types of chronic diseases in the UK.¹²

Alcohol abuse in women between the ages of 40-65 years is a cause of concern, typically stemming from different roots than that of men, e.g. abuse, low self worth and lack of confidence.¹³ In the last 20 years, rates of smoking and lung cancer fell sharply for men while rates have increased and stabilised for women, particularly young women aged 16-19.

Women are more likely to live with a long term mental health problem and to be experiencing specific mental

health issues.¹⁴ Twice as many women as men suffer from dementia; women are twice as likely to experience depression and anxiety disorders; and women are disproportionately affected by post-traumatic stress disorder,¹⁵ self harm and eating disorders. Nationally, 18,500 13-19 year old girls and young women were admitted to emergency departments

with self poisoning between 2014- 2015 compared with 14,000 in 2009-2010.¹⁶

In 2012/13, women aged over 60 were the most likely group to be admitted to hospital for anxiety, while girls of 15-19 were most likely to be admitted for stress related conditions.

Around one in ten mothers suffer from

post natal depression. Teenage mothers are particularly at risk. One in five women in the Maternity Services

Delegates from our Women & Alcohol Conference highlighted the disproportionate impact of cuts to women's services, and the lack of advocacy to support women accessing the services they need.

In light of the barriers women face to substance misuse services, ensuring services are suitable for women is a key priority for Bristol. Most women entering drug treatment have children so addressing the needs of mothers needs to be a significant part of this.

¹⁰ British Heart Foundation 2010

¹¹ British Heart Foundation 2010

¹² ONS 2008

¹³ Women and alcohol: social perspectives. Dr.Patsy Staddon Bristol :Policy Press 2015

¹⁴ Dept of Health (2013) No Health Without Mental Health, Mental Health Dashboard

¹⁵ <http://www.mentalhealth.org.uk>

¹⁶ Health and Social Care Information Centre

Survey¹⁷ felt their concerns in labour were not taken seriously. Some 50,000 women a year are forced out of work for being pregnant or taking maternity leave.¹⁸

Women face greater likelihood of poverty whether through unemployment or insecure, irregular or poorly paid work. Violence against women and girls remains a pervasive feature of our society, which has major implications for women's health and mental health.¹⁹ The World Health Organisation estimated that 60% of women using mental health services in the UK have experienced some form of sexual abuse.²⁰ An estimated 3,500 women and girls in Bristol are either living with the consequences of, or face the threat of female genital mutilation (FGM).²¹

There are higher rates of cervical cancer diagnoses in Bristol compared with the national average. The HPV vaccination will hopefully reduce this rate but safe sexual practice should still be encouraged. There have been concerns that there are misconceptions that receiving the HPV vaccination means you do not need cervical cancer screening.

L Wilson, *Young Women's Health: A Report for Bristol Women's Commission Health Task Group*. 2015

Women living in the most deprived areas have cervical cancer rates more than three times as high as those in the least deprived areas as well as lower survival rates for breast cancer.

Women are more likely to become socially isolated than men, partly because of longer life expectancy and partly because of life experiences.

Many women and girls in Bristol fall well below the government's recommended levels of physical activity. In one study it was revealed that 0% of school age girls in Bristol were meeting the government's recommended activity guidelines.

The specific healthcare needs of Black Minority and Ethnic women, lesbian, bisexual, disabled, older, younger and socially excluded women such as refugee women are not adequately understood or addressed, and in some cases women with specific needs face discriminatory practices.

Social Care

In her report 'Health of the 51%: Women' the Chief Medical Officer, Dame Sally Davies refers to 'cruel and degrading treatment in care homes'.²² Some older women in residential care settings do not always have the capacity to clearly say that they do not

¹⁷ Maternity Services Survey 2013

¹⁸ Maternity Action, 2013

¹⁹ See section Women's Safety for further information

²⁰ Caro, Dianne Whitfield, Piggott (2013) Supporting Victims of Sexual Violence: Whose Responsibility?

²¹ Female Genital Mutilation in England and Wales; Macfarlane, Dorkenoo, City University London, Equality Now 2014

²² Health of the 51%: Women, A Human Rights approach to women's health, ch 12A Leigh.B, Mullins.E, Regan.L: CMO Dame Sally Davies 2015



want intimate care carried out by male carers although their reactions often suggest there is a lot of potential for a lack of dignity despite the Skills for Care common core principles.

Dignity is a core human rights principle, and lack of dignity is often at the heart of instances of human rights abuses in health and social care – for example, a lack of dignity is a common theme in examples of abuse and neglect. Closely linked to dignity is privacy. While the two concepts are distinct, privacy can be viewed as an essential aspect of dignity.²³

Some vulnerable isolated adults, often women, are at risk of being targeted for money and medication by individuals accessing 'personalised' sums. Looked after younger women have a lack of privacy about intimate details of their lives.

There is insufficient training of non specialist staff who are sometimes drafted in to teach Health & Social

Care if there are shortages of specialist staff.

It is estimated that in England almost a quarter of jobs in the adult social care sector (23%) are operating on a zero hour contract.²⁴ The majority of care staff are female (82%); very few males occupy care roles but they are predominately seen in senior management roles.²⁵ Some private sector care services do not pay staff on sick leave so staff feel obliged to come to work when ill which exposes vulnerable services users who might already have a serious health condition to further illness.

In some care services, there is a high turnover of staff due to irregular work patterns and long days. There is anecdotal evidence of some private care organisations urging staff to opt out of the working time directive. This puts both staff and service users at risk.

²³ Older people and human rights, Age UK 2011

²⁴ The State of the Adult Social Care Sector and Workforce in England; Skills for Care 2015


²⁵ The State of the Adult Social Care Sector and Workforce in England; Skills for Care 2015

Health & Social Care Calls to Action

Who?	Call to Action
<p>Department of Health, Public Health England, General Medical Council, Health Education England, Department for Education, NHS England, Health Education England, UK Clinical Research Collaboration, Health and Social Care Information Centre, Faculty of Occupational Medicine, Healthcare Quality Improvement Partnership, Royal College of Obstetricians</p>	<p>To implement in full the recommendations of Prof Dame Sally Davies in the Annual Report of the Chief Medical Officer, 2014 'The Health of the 51%: Women'</p>
<p>Bristol Clinical Commissioning Group, Bristol City Council, University Hospitals Bristol, North Bristol Trust, Avon and Wiltshire Partnership, Public Health, GP practices</p>	<p>To develop a Women's Health Strategy for Bristol in response to Prof Dame Sally Davies in the Annual Report of the Chief Medical Officer, 2014 'The Health of the 51%: Women' and all evidence based research into women's health in partnership with women's organisations, health organisations and women across the city</p>
<p>Bristol Clinical Commissioning Group, Bristol Public Health and Health and Wellbeing Board</p>	<p>To ensure a consistent approach to gender analysis within the Joint Strategic Needs Analysis and Health and Wellbeing Strategy, to highlight health gaps for women where special action is required or where there are specific health needs of women. Social and economic factors must be included in such an analysis</p>
<p>Bristol Public Health, Clinical Commissioning Group</p>	<p>To ensure gender disaggregated data is collected, utilised and published</p>
<p>Bristol Public Health</p>	<p>To produce a Compendium of Women's Health and Wellbeing in Bristol and update annually</p>
<p>Bristol Public Health and partners</p>	<p>To commission high quality accessible information on Women's Health Services in Bristol</p>

Health & Social Care Calls to Action continued

Who?	Call to Action
Bristol Clinical Commissioning Group	To ensure GP training is offered and undertaken in tackling the under diagnosis of women with conditions such as coronary heart disease, brain tumours and autism and other areas of gender disparity
Health and Wellbeing Board Safer Bristol Partnership	To acknowledge different causes of alcohol misuse by women and men and to develop strategies to tackle this. To fund separate women-only services for women who misuse alcohol, including different kinds of therapy which respond to women's needs, exploring reasons and building self esteem. These services should be separate from drug abuse services
Minister of State for Care and Support, parliamentary Under-secretary of State for Public Health	To work with women's voluntary organisations to improve mental health provision for women and girls and ensure the effective implementation of the government's mental health strategy
Health and Wellbeing Board	To work with women's voluntary organisations in planning and mapping women's mental health services as part of their asset mapping process
Primary care service providers, Clinical Commissioning Group	To implement in full the recommendations in Women's Voices on Health by Women's Health and Equality Consortium and Maternity Action 2014
Local Authorities, Care Commissioner	To ensure the dignity of older women receiving intimate care, and girls in care settings is respected by all provider
Local Authorities, Care Commissioners, social care providers	To provide support and training for women who are vulnerable adults and need more support and training in keeping themselves safe from abuse and neglect
Local Authorities, Care Commissioners, social care providers	To improve terms and conditions for women working in the social care sector, as most are low paid with irregular work patterns and minimal training opportunities



The Bristol economy loses £1,125,336.96 per annum through domestic abuse related absence for female workers.

SAFETY

To make Bristol a city free from any form of gender-based violence by becoming a Zero Tolerance City with:

- a greater understanding of gender-based violence
- enhanced specialised and appropriate support services that adequately meet the needs of all women
- high quality work on prevention, education and understanding of gender-based violence, gender stereotyping and discrimination.

Domestic Abuse

The Home Office estimates that 14,273 women and girls aged 16-59 in Bristol have been a victim of domestic abuse in the past year.²⁶ A further 2,905 older women could have been victims of domestic violence and abuse in the last year. In 2012/13, 23 of the people who reported domestic violence and abuse to the Police in Bristol were aged 16 or under.

Harmful sexual behaviour among young people is increasing locally and nationally. Widespread use of social media and mobile internet enabled devices among young people in particular has resulted in greater prevalence of 'sexting', access to on-line illicit material and instances of 'revenge porn'.²⁷

²⁶ Safer Bristol Partnership, Bristol Domestic and Sexual Abuse Needs Assessment 2014 https://bristol.citizenspace.com/neighbourhoods/domestic-abuse-and-sexual-violence-services/supporting_documents/Bristol%20Domestic%20%20Sexual%20Abuse%20Needs%20Assessment%202014.pdf

²⁷ Avon and Somerset Police, Police and Crime Needs Assessment 2015



The number of Lesbian Bisexual and Transgender people impacted by abuse across Bristol is unknown and reporting is low, therefore it is difficult to know the needs of this population.

It is estimated that domestic violence and abuse costs Bristol £41,309,806 each year.²⁸ This includes costs for physical and mental healthcare, criminal justice system, social services, and other costs such as housing. It does not, however, include human and emotional costs.

Sexual Violence

- 43,340 women in Bristol are likely to have been raped or sexually abused at some point in their lifetime²⁹
- The Avon and Somerset Constabulary recorded crime rate for rape is 22.9 per 100,000. This number is in line with the average across England and Wales³⁰
- 4,758 women and girls aged 16-59 in Bristol were a victim of sexual assault in 2014³¹
- Only 15% of victims said they had reported offences to the police³²

²⁸ Järvinen, J, Kail, A and Miller, I (2008) Hard Knock Life: Violence Against Women. A Guide for Donors and Funders. New Philanthropy Capital <http://www.thinknpc.org/publications/hard-knock-life/>

²⁹ British Crime Survey shows lifetime rate of sexual abuse or rape of 19.7% based on female population of 220,000: Home Office (2010) Crime in England and Wales 2009/10 findings from the British crime survey and police recorded crime (Third Edition) <http://www.homeoffice.gov.uk/publications/science-research-statistics/research-statistics/crime-research/hosb1210/hosb1210?view=Binary>

³⁰ England and Wales average is 22 per 100,000 population, number includes all adult rapes including men: Her Majesty's Inspectorate of Constabulary, Rape Monitoring Group, Adult and child rape data for 2012/13 <http://www.hmic.gov.uk/wp-content/uploads/2014/01/avon-and-somerset-rmg-adult-and-child-rape-data-2012-13.pdf>

³¹ Based on a population of 432,500 (ONS 2012 Mid-Year Population Estimate). This model does not account for the victims who are male and/or aged over 59 years old. Safer Bristol Partnership, Bristol Domestic and Sexual Abuse Needs Assessment 2014 https://bristol.citizenspace.com/neighbourhoods/domestic-abuse-and-sexual-violence-services/supporting_documents/Bristol%20Domestic%20Sexual%20Abuse%20Needs%20Assessment%202014.pdf

³² England and Wales average is 22 per 100,000 population. Number includes all adult rapes including men: Her Majesty's Inspectorate of Constabulary, Rape Monitoring Group, Adult and child rape data for 2012/13 <http://www.hmic.gov.uk/wp-content/uploads/2014/01/avon-and-somerset-rmg-adult-and-child-rape-data-2012-13.pdf>



Harassment

- People who are stalked do not tend to report to the police until the 100th incident³³
- The majority of stalking victims (80.4%) are female while the majority of perpetrators (70.5%) are male³⁴
- The Metropolitan Police Service found that 40% of the victims of domestic homicides had also been stalked.³⁵
- In Avon and Somerset, women account for the vast majority of recorded victims of stalking (91%) and section 2 harassment offences (76%).³⁶

Forced Marriage and ‘Honour’ based violence

Forced marriage is within the Bristol definition of domestic violence and abuse and is now part of the Safer Bristol Violence and Abuse Strategy.³⁷ The scale and extent of forced marriage in Avon and Somerset remains unknown with less than 10 identified each year.³⁸

Research has found that there are nearly 3,000 cases of ‘honour’ based violence³⁹ and 12 reported ‘honour’ killings⁴⁰ in the UK every year. Despite improvements in reporting and recording practices over 2014-15, identified cases involving so called ‘honour’ based violence remain low

³³ Sheridan (2005) Key Findings from Stalking Survey <http://www.le.ac.uk/press/stalkingsurvey.htm>

³⁴ National Stalking Helpline 2011

³⁵ ACPO Homicide Working Group 2003

³⁶ Avon and Somerset Police, Police and Crime Needs Assessment 2015

³⁷ Safer Bristol, Violence and Abuse: A strategy against violence and abuse against women and girls and domestic and sexual violence against men 2012-2015 <https://www.bristol.gov.uk/documents/20182/32635/Bristol%20VAWG%20Strategy%202012-15-accessible.pdf/e5c333-5c43-47f6-bfb0-1c1c305e535f>

³⁸ Avon and Somerset Police, Police and Crime Needs Assessment 2015

³⁹ Iranian and Kurdish Women’s Rights Organisation (2011) Nearly 3000 cases of ‘honour’ violence every year in the UK <http://ikwro.org.uk/2011/12/nearly-3000-cases-of-honour-violence-every-year-in-the-uk/>

⁴⁰ Halo Project <http://www.haloproject.org.uk/honour-based-violence-W21page-3->

and under-reported in Avon and Somerset at around 60 reports per year.⁴¹

Female Genital Mutilation

There have been no FGM-related prosecutions within Avon and Somerset to date, however the number of incidents coming to the attention of police has more than doubled in 2014/15 to over 40. The majority of reported cases are identified as a result of medical complications, indicating that the true extent of FGM is likely to be significantly higher.⁴²

Trafficking

There is no current Bristol strategy against human trafficking although the Violence and Abuse Strategy Group are working with the Bristol Coalition Against Trafficking to support their work. Operation Breakthrough also visits establishments advertising the sale of sex in Bristol to check for indicators of trafficking in conjunction with a local organisation which supports trafficked victims.⁴³ In April 2011-12, 27 out of 83 visits had indicators for trafficking.

The number of suspected victims of modern slavery encountered by Avon and Somerset Police increased from 25 to 35 over 2014/15.

Sex Work

Figures from NHS Bristol suggest that there may be between 230-360 street sex workers with an injecting history. The total number of women will be higher as there will be sex workers who are not injecting drug users and do not work on the streets.⁴⁴ There are also an estimated 126 women working in 25 parlours in Bristol.⁴⁵

One study found that more than half the women involved in sex work have been raped or seriously assaulted, and at least 75% have been physically assaulted by a pimp or punter.⁴⁶ However, the stigma of drug use and prostitution means that this is a largely hidden group of women. Victims of either domestic or sexual violence and abuse, who are sex workers, are unlikely to report to the Police, although the national Ugly Mugs scheme is being rolled out successfully in Bristol.⁴⁷

⁴¹ Avon and Somerset Police, Police and Crime Needs Assessment 2015

⁴² Avon and Somerset Police, Police and Crime Needs Assessment 2015

⁴³ Unseen <http://www.unseenuk.org/>

⁴⁴ Bristol Sex Worker Strategy 2010-2013

⁴⁵ Safer Bristol, Violence and Abuse: A strategy against violence and abuse against women and girls and domestic and sexual violence against men 2012-2015

⁴⁶ Home Office (2004) Solutions and Strategies: Drug Problems and Street Sex Markets

⁴⁷ See <https://uknswp.org/um/>



Sexual Entertainment Venues

Sexual Entertainment Venues (SEVs) contribute to a popular culture whereby women's bodies are objectified as commodities to be bought and sold. This culture perpetuates the notion of 'the superiority of one sex over the other' an issue identified in the European Charter of equality of women and men in local life as needing to be tackled because Bristol is a signatory to the charter, the city has a duty to tackle this.

The continued licensing of SEVs by Bristol City Council disregards the safety of women and girls, undermines the dignity of women and girls, and diminishes the status of Bristol as a modern European City where both women and men can lead fulfilled lives in a safe and fair society. Research published in 2014 demonstrates how sexual objectification has a key mediating role in the link between men's alcohol use and sexual violence perpetration.⁴⁸

Research shows that women who work in SEVs are subject to high levels of abusive behaviour by customers - in a UK study published in 2011 almost half reported frequent verbal harassment and unwanted touching from customers (sexual assault).⁴⁹

Child Abuse and Exploitation

Children and young adult victims of child sexual exploitation (CSE) recorded by police in Avon and Somerset increased by a further 53% in 2014/15, with over 180 offences recorded annually.

Prevalence estimates based on national research and a range of known risk factors indicate that at least 550 children are likely to be at high risk of CSE across Avon and Somerset, with over 220 children experiencing or having recently experienced CSE at any one time. The use of technology is often a factor in these cases with social media often providing a gateway into offending.⁵⁰

⁴⁸ Gervais et al (2014) Understanding the Link Between Men's Alcohol Use and Sexual Violence Perpetration: The Mediating Role of Sexual Objectification. Psychology of Violence.

⁴⁹ University of Leeds Faculty of Education, Social Sciences and Law, The Regulatory Dance <http://www.sociology.leeds.ac.uk/research/projects/regulatory-dance>

⁵⁰ Avon and Somerset Police, Police and Crime Needs Assessment 2015

Safety Calls to Action

Who?	Call to Action
All local employers	To sign our Zero Tolerance pledge
Avon and Somerset Police, local transport providers, Bristol Courts of Justice, CPS, The Law Society	To ensure greater consistency in training of police officers, judges, lawyers and local transport systems
Avon and Somerset Police, Bristol City Council	To tackle street harassment
Bristol City Council	To agree nil-cap on sexual entertainment venues
National and local government, NHS	To improve access to specialised support, including mental health services
National and local government	To ensure future of specialised services
Bristol City Council	To create a Gender-Based Violence Prevention Commissioner and funding for post of Crime Reduction Project Officer, Prevention of Violence and Abuse Against Women and Children
Advertising Standards Authority, national government	To regulate harmful images in the media and age restrictions accessing pornography
Bristol City Council	To regulate a city-wide advertising and licensing policy that tackles cultural misconceptions
National and local government	To provide appropriate access to justice and support for victims
Local media organisations	To tackle cultural misconceptions
<i>See Education</i>	<i>Compulsory adequate Sex and Relationships Education, all schools to sign up to Bristol Ideal, embedding of Intervention Initiative</i>



EDUCATION

To ensure that education fully utilises the potential of girls and women, and that the education of all young people (both girls and boys) builds values and behaviours that lead to a more equitable society.

Traditionally, the focus of work on gender and education was focussed mainly on righting the historical wrongs against women and girls in terms of their access to opportunities. More recently, however, the emphasis for many researchers and policy makers has been on boy's underachievement (particularly in English), and a focus on the gender gap in educational outcomes. It is clear that, on average, girls do now perform better than boys at every Key Stage at school and in Higher Education. In 2015:

- 58% of Bristol girls compared to 49.8 % of boys in the City of Bristol gained the benchmark 5A* to C

including Maths and English (58.9% and 52.7% nationally).

- At the end of primary school, the Bristol gender gap in reading was 5ppts (nationally 4ppts), in writing was 10ppts (nationally 8ppts) and maths, 2ppts.
- In contrast, in Bristol last year at KS5, 87.2% males and only 86.9% females achieved the benchmark of at least 2 substantial Level 3 qualifications.⁵¹
- Nationally, 25,000 more females than males entered at least one A Level.
- Participation and achievement in HE overall is higher for females with 30% more female qualifiers in 2014

⁵¹ Bristol Educational Performance (2014/15)

in graduate and post-graduate courses than males.⁵²

Overall outcomes, however, do not tell the whole story. The increasing focus on boy's underachievement in English, and the low achievement of other key groups such as pupils of Free School Meals and Children in Care, often detract from the examination of lower outcomes for girls in certain subjects, and in certain schools. Also, the gender differences for particular minority ethnic groups are significant but often ignored.

Schools are required to publish information about their results, and good practice would dictate that this includes the gender gap and gender participation rates for all subjects, so that strategies can be put in place to address any concerns. They are also required to produce Equality Objectives, which should include gender issues so they can be held accountable.

Academic research suggests that schools and colleges should also be focusing on eliminating sex-stereotyping through revision of school texts, close examination of gender bias in curriculum content, reading and display materials, examination questions. Other areas to be considered include increasing focus on considering the extent of teacher-

led work, switching to mixed-sex pairing or single-sex grouping where appropriate, or offering greater learning support.⁵³ This clearly requires an increased emphasis on gender issues in initial teacher training and on-going Inset days.

Over the last few years, there has been a shift of responsibility to individual schools for the provision of careers' support, and a drastic cut to funding agencies providing Careers Education Information, Advice and Guidance (CEIAG). This has led to many schools and colleges without specialist support. As Ofsted commented, 'Very few of the schools visited knew how to provide a service effectively or had the skills and expertise needed to provide a comprehensive service. Few schools had purchased an adequate service from external sources.'⁵⁴

Gender stereotyping in subject choices is still as prevalent as 20 years ago. In A Level choices last year,

- 20.9% females and 79.1% males took Physics,
- 40.6% females and 59.4% males took Maths,
- 29.9% females and 70.1% males took English,
- 98.8% of those taking Health and Social Care were female.⁵⁵

Just 3% of apprentices last year taking Engineering were female, compared to

⁵² Opportunities and Outcomes in Education and Work (UK Commission on Employment and Skills 2015)

⁵³ Gender Difference in Educational Outcomes (Educational, Audiovisual and Cultural Executive Agency 2010)

⁵⁴ Going in the Right Direct (Ofsted 2012)

⁵⁵ DFE (2010)

80% of those taking Health and Social Care and 92% hairdressing. Although there was an overall increase in the percentage of female apprenticeships to 53% in 2014/15, many of these have been for older women and the major growth areas are Business and Administration, and Health and Social Care. Many schools and universities - including Bristol schools - are developing STEM (Science Technology, Engineering and Maths) initiatives to encourage more participation in all of these areas, with a particular emphasis on improving gender participation in those careers that tend to be well paid.

'I was just gonna say about how mental health is actually like more of a priority to me than trying to be physically healthy, especially around sixth form and stuff like that and I feel like there's not enough, especially for teenagers, to help them through those things like that, if like, when I was going through these things - I had nowhere to go to in school for instance and I didn't know apart from maybe going to my GP, anything like that, and then a GP gives you a long waiting time... I just don't feel that there's enough support and I feel like that's something that should be of massive focus for teenagers - their mental health as well as their physical health.'

A Level Student

Other important aspects of tackling gender equality in education include addressing aspects of the hidden curriculum, e.g. the culture of the schools, combating gender-based violence and harassment, enhancing Personal, Health and Social Education (PSHE) to address issues that relate to gender equality, and improving the representation of women in decision-making positions.⁵⁶

Figures show that almost one in three girls have experienced unwanted sexual touching at school. Nearly three quarters of the children polled reported hearing sexual name-calling towards girls on an almost daily basis.⁵⁷ The recording of sexist bullying

in schools is patchy, is addressed to differing extents in the curriculum and it is not considered as part of the inspection process.

There are increasing calls locally and nationally to ensure that the curriculum addresses mental health issues and promotes well-being, is designed to build resilience and focusses on developing healthy relationships and challenging exploitation and

harassment.

Examples of good practice exist in certain schools (e.g. adopting the Bristol Ideal), but this is patchy. In a recent national survey, 58% of 13-21 years old girls worried about mental health and 37% about cyber bullying.⁵⁸ Almost 50% had sought help for mental health issues, yet waiting lists for counselling and Child and

⁵⁶ Gender Difference in Educational Outcomes (Educational, Audiovisual and Cultural Executive Agency 2010)

⁵⁷ End Violence Against Women (YouGov poll 2010)

⁵⁸ Girl Guiding Attitude Survey (2015)

Adolescent Mental Health Services (CAMHS) are increasing and many schools and colleges have no dedicated mental health support. There is no requirement on academies, Free Schools and independent schools to provide Sex and Relationships Education (SRE). SRE is best taught as part of a broader PSHE curriculum, which includes related topics such as risk, safety, equality, stereotyping, prejudice, media literacy and abusive behaviour and attitudes. This helps pupils to develop the skills, knowledge and personal attributes they need to manage their lives.

Nationally, 62% of qualified teachers in secondary schools are female and yet only 36% of headteachers. However, Bristol is bucking this trend with nearly two thirds being female. Female heads who are mothers are 50% more likely to start off in the bottom third of the advertised pay range than male heads who are fathers, according to a Future Leaders Survey.⁵⁹ The average teachers' salary for women is £2,900 lower than for men,⁶⁰ male senior leaders in schools earn 8% more than females and in primary academies the average pay for senior men is £55k and women 49K. Some 25% of women teachers/lecturers joining Further Education start on less than £20k per year compared with only 11% of men.

Reduced budgets have led to cuts in family learning classes, which in the past mainly benefitted mothers and helped them support their children's education as well as to re-enter the education environment and restart their careers. National policy and cuts to Local Authority and Further Education funding have also led to the closure of much of the adult and community education in the city. It is increasingly hard for women to return to education later in life with the introduction of level 3 loans and the reduction in Access courses. Funding for ESOL (English for Speakers of Other Languages) classes for adults and young people attending colleges has been drastically cut and there are increasing waiting lists in Bristol for this support, without which newly arrived women are unable to gain the skills they need to move into employment or training.

The importance of Children's Centres in preparing all children for education, but also in addressing inequality, is well documented. A survey nationally, however, found that 57% of centres expected their budget to reduce over the coming year while 3% expected to close. Some 400 children's centres closed between April 2010 and 2015.⁶¹ All of these issues need to be addressed if we are to move towards gender equality in education and the calls to action can be the first steps to making this a reality in Bristol.

⁵⁹ <http://www.theguardian.com/education/2015/jun/02/female-headteachers-bristol-gender-secondary-school-women>

⁶⁰ ATL (2015)

⁶¹ The Annual Census of Sure Start centres (2014)



Education Calls to Action

Who?	Call to Action
Schools, colleges and academies	To make available examination results and other outcomes (attendance, exclusions, employment data and pay levels etc) by gender for scrutiny
Schools, colleges and academies	To identify evidence based gender equality objectives and publish actions as part of equality objectives required by the Equality Act
Schools, colleges and academies	To report and tackle sexist bullying and harassment and develop curriculum materials to prevent this taking place
Local Authority, Local Enterprise Partnership	To produce a strategy to fund and provide ESOL (English for Speakers of Other Languages) classes with creche facilities for newly arrived girls and women
Local authority, schools, colleges and academies	To train education staff and pupils to address gender stereotyping in subject choices and careers guidance to increase take up of STEAM (Science, Technology, Engineering Arts and Maths) subjects by girls
Local authority, schools, colleges and academies	To ensure positive mental health, well-being and healthy relationships form a key part of the PSHE curriculum for all pupils
Local Authority	To protect Early Years Centres to provide tailored support to mothers and children most in need of support



HOUSING

To ensure that the needs of women in relation to housing and in particular women who are homeless or at risk of homelessness are understood and addressed. Bristol faces a housing crisis, having a particular impact on women, forcing them into homelessness. Rising rents, insecure tenancies and lack of affordable housing are forcing families to leave the area where they have childcare and family support networks. The housing needs of women fleeing domestic violence must be prioritised.

Bristol has a housing crisis as housing is becoming increasingly expensive in the city and is in increasingly short supply as the population is growing and changing rapidly. It is now widely acknowledged that the city is suffering from a lack of affordable housing, with homes less affordable in Bristol than in any other core city and an affordability ratio that has doubled in the last 15 years. Local assessments have identified that at least 1,500 new affordable homes are needed each year to house existing and newly

forming households who cannot afford to buy or rent in the market.⁶²

It's part of a national problem, but exacerbated in Bristol because of its prosperous economy and proximity to London. This crisis manifests itself in many different ways. Bristol's recently agreed Housing Strategy – *More than a Roof* – sets out an approach to housing for the next 4 years (2016-2020) which prioritises the delivery of new housing, especially affordable housing. The strategy is based on the premise that housing is

⁶² Wider Bristol HMA Strategic Housing Market Assessment: Volume 1 – Opinion Research Services, 2015.

far more than 'a roof over our heads' but it is a fundamental part of life, which affects our health, wellbeing and educational attainment.

In recent years Bristol has seen significant increases in homelessness, with many more rough sleepers each night. The top four reasons reported for loss of a settled home⁶³ where a duty of homelessness was agreed (July and September 2015) were as follows:

- Termination of assured short-hold tenancy - 120 (16% increase on Q1 15-16)
- Parents not willing or able to accommodate - 58 (7% increase on Q1 15-16)
- Other relatives/friends not willing to accommodate - 30 (36% decrease on Q1 15-16).
- Violent breakdown of relationship involving partner - 16 (33% decrease Q1 15-16).

Housing as a policy issue is often considered to be gender neutral but is actually gendered in multiple and complex ways.⁶⁴ Housing systems are embedded in traditional institutional structures that in themselves are gendered. Many women's lives are still deeply affected by unequal power relationships between men and women, and by conventional expectations about domesticity and their responsibilities for the care of children and the home in which they live. The violent breakdown of a

relationship is one of the top four reasons for homelessness. If a woman has to leave home because of violence, lack of access to financial resources can further restrict access to permanent accommodation. Further, there is a lack of support to women who want to stay in their own home and for their violent partner to be the one excluded or prevented from accessing. Social Housing Officers therefore have a key role in providing support, signposting, referring and ensuring there is a victim oriented approach.

In addition to the violence they have experienced, the loss of home is in itself an element in the complex nature of the trauma that women in a violent relationship suffer.⁶⁵ This is compounded further for themselves and their children by the uncertain period they spend waiting for the possibility of rehousing if they leave.

⁶³ Bristol City Council Preventing Homelessness Strategy 2013-2018

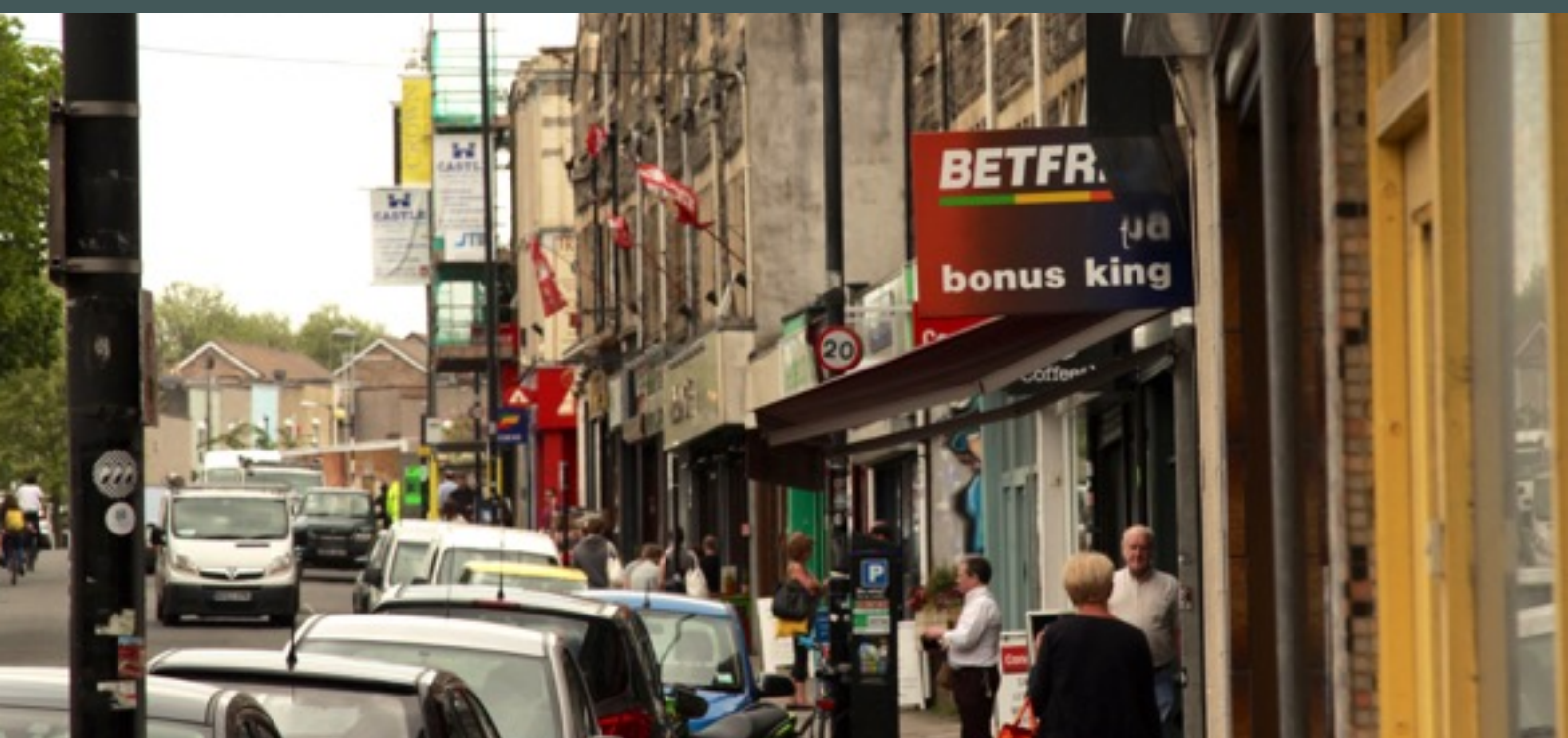
⁶⁴ Kennett, P. & Wah, C. (eds) (2011) *Women and housing: an international analysis*. Abingdon: Routledge.

⁶⁵ Kennett, P. & Wah, C. (eds) (2011) *Women and housing: an international analysis*. Abingdon: Routledge.



Housing Calls to Action

Who?	Call to Action
Bristol City Council	To ensure women victims of domestic abuse are placed in the highest priority banding for social housing
Bristol City Council, charities providing hostels etc	To ensure sufficient women-only provision for women experiencing homelessness including safe Bed and Breakfast and Hostel accommodation
Bristol City Council, Social Landlords and organisations working with homeless women, or those under threat of homelessness	To respond to the particular needs and issues of women and to ensure staff are trained to address these
Bristol City Council, Housing department, Social Landlords	To review Domestic Abuse procedures undertaken by housing officers
Bristol City Council	To make support available to women escaping abuse on day one
Social Landlords and Bristol City Council Housing Officers	To take a victim oriented approach and provide appropriate support and advice to all victims of domestic abuse being aware of their wishes and preferences



ECONOMY

To enlist the skills, creativity and experience of women to deliver Bristol's potential to be a leading European city and to tackle the economic and social exclusion of women on low income in Bristol.

Women have been hit most by the austerity policies since 2010. 81% of tax changes and cuts in social security spending will have come from women by 2020.⁶⁶

The impact on women of changes in income and public spending for example on health, education, transport and social care, is greater than the impact on men. The hardest hit are households headed by women such as lone parents and single female pensioners, both being about 20% worse-off on average in 2020.⁶⁷

An analysis of the cumulative impact of tax and benefit changes for the

period 2010-15 by gender and by income showed that women stood to lose more than men in both cash terms (50% more) and as a percentage of income (twice as much).⁶⁸

To date no detailed assessments have been produced of the impact of government policies and welfare changes despite the legal requirement to assess the impact of policies on different groups.

If the same amount was spent on care as on construction double the number of jobs would be provided. In turn,

⁶⁶ See 2015 AFS response by WBG (<http://bit.ly/1QbC6lr>)

⁶⁷ http://wbg.org.uk/wp-content/uploads/2016/03/De_HenauReed_WBG_GIAtaxben_briefing_2016_03_06.pdf

⁶⁸ http://www.equalityhumanrights.com/sites/default/files/publication_pdf/Cumulative%20Impact%20Assessment%20full%20report%2030-07-14.pdf

Bristol Women's Voice surveyed local women's organisations about their effects of austerity on organisations supporting women in Bristol. Organisations across the board reported unmet needs. One local organisation reported excessive waiting lists, resulting in the need to limit services due to high demand. Another organisation cited that the job cuts in the public sector have particularly impacted disabled people, coupled with a lack of inaccessible housing has resulted in more disabled women living in poverty. Other organisations spoke out about the attack on the benefits system and the rising cost of living which has resulted in women's wages going down in real terms.

more women in work would mean more money going to the government in tax and National Insurance.⁶⁹

Economic information from Bristol City Council on the local situation in March 2016 shows:⁷⁰

- 60.4% of women in Bristol are economically active (in employment or registered seeking employment), this compares with 70.2% of men.
- 11.3% of men are self employed but only 4.8% of women
- 43.3% of women work under 30 hours a week

- 22.2% of all women in Bristol have no formal educational qualification and only 0.8% of women have ever undertaken an apprenticeship, whereas 5.1% of men have done so.

The gender pay gap remains a key issue. An analysis by Dr Jackie Longworth⁷¹ examines the national and local situation and identifies that the extent of the pay gap depends on occupation – what work women do, whether they work full time or part time, what other characteristics they have, e.g. race, age, disability, sexual orientation and where they live.

Women work predominantly in sectors that are low paid and undervalued: care, retail and hospitality and service sectors. They are often unable to get flexible work opportunities to fit in with other commitments such as looking after children. The West of England Local Enterprise Partnership, the body overseeing investment in business in the area, is focused on 'high value jobs' in the aerospace, high tech manufacturing; green technology; professional services and the digital creative sectors, industries which do not employ a high number of women in the better paid jobs.

A recent report⁷² found that 77% of women had a negative experience

⁶⁹ http://wbg.org.uk/wp-content/uploads/2016/03/De_Henau_Perrons_WBG_CareEconomy_ITUC_briefing_final.pdf

⁷⁰ <https://www.bristol.gov.uk/documents/20182/33191/Bristol+Economic+Briefing+March+2016/aad72ecc-3684-447b-8279-4346e0298e4d>

⁷¹ Longworth, 2016, The Gender Pay Gap and How to eliminate it, www.fairplaysouthwest.org

⁷² https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/509500/BIS-16-pregnancy-and-maternity-related-discrimination-and-disadvantage-summary.pdf



when they were pregnant, on maternity leave, and/or when they came back to work. This could mean up to 390,000 women. 11% had been forced to leave their job either because they were dismissed, made compulsorily redundant when no else was, or were treated so badly they felt they had no option but to leave.

Some 68% of mothers asked to work flexibly when they returned to work and three in four of these requests were agreed, but more than 50% of those women who returned on a flexible basis felt this affected their future opportunities negatively.

Black and Minority Ethnic women were more likely to suffer a financial loss, or negative effects on their future opportunities, status and job security.

Childcare is inadequate and expensive. Bristol has some of the most expensive childcare outside of London. The Women's Budget Group⁷³ has shown that 84% of the cost of universal free childcare would be

recouped through taxes and reductions in welfare benefits.

Career and study option advice is inadequate with young women still being directed towards traditional women's employment such as health and social care, or hairdressing and beauty services.

Fewer women than men have access to cars and public transport does not meet the needs of women to get to work, to get children to school and to carry out their other roles. The lack of transport means that women cannot easily access the well paid jobs on the northern fringes of Bristol even if they have the required skills.

Poor recruitment, personal development and promoting practices prevent women from progressing. It is difficult to get compensation for sex discrimination as the introduction of a £1,200 fee for taking discrimination cases to employment tribunal has blocked this route for the vast majority of women.

⁷³ <http://wbg.org.uk/new-wbg-study-finds-that-71-of-cost-of-universal-free-childcare-system-can-be-recouped/>

Economy Calls to Action

Who?	Call to Action
All public bodies and businesses in Bristol commissioning or procuring services	To require bidders to provide jobs which meet the International Labour Organisation (ILO) Decent work standards
Bristol City Council, West of England Local Enterprise Partnership	To provide free, high quality, local and flexible childcare across Bristol
Bristol City Council, West of England Local Enterprise Partnership, Local Authorities in West of England, transport providers	To improve access to well-paid jobs by providing a public transport system that facilitates the needs of working women and their caring arrangements
Schools, academies, colleges and universities, Learning Partnership West	To improve careers guidance to girls and women that is unbiased and avoids stereotyping the roles that men and women perform in the jobs market
Bristol City Council, West of England LEP, Learning Partnership West	To ensure skills and training address and meet the needs of women, particularly those who are most disadvantaged in the labour market
Small and medium sized enterprises (SMEs), Business West	To comply with the law in relation to pregnancy and maternity rights
Bristol City Council, West of England Local Enterprise Partnership, developers and other businesses	To make the Temple Quarter Enterprise Zone a beacon of inclusive gender equality in all aspects of its development and future use

Bristol Women's Voice is a powerful voice for women aiming to make women's equality in Bristol a reality. We make sure that when key decisions are taken in Bristol, women's voices have been listened to and their ideas and concerns acted upon. We bring together women to share ideas, exchange experiences, support campaigns and events and celebrate success so that together we can make Bristol a showcase for women's involvement, empowerment and equality.

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Disclaimer

Bristol Women's Voice produces a series of background documents for use by our members and others. These are produced by the Management Group and members working within key thematic issues, and consulted on by our members. They do not necessarily represent the views of all our members.

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