

Evidence for Women and Equalities Committee Inquiry into Gender Recognition Act

Introduction

Nottingham Women's Centre (NWC) was established in 1971, making us one of the oldest and largest women's centres in the country. Today we are a charity and community space that empowers women by providing financial and employment support, counselling, training, social activities and activism in a women's building in central Nottingham. Before lockdown measures were imposed, around 600 women came to the Women's Centre every week¹. We are now supporting similar numbers over the phone and online.

We are proud to be a trans-inclusive women's organisation. Our Board of Trustees ratified our trans-inclusion policy on 1st June 1998, although trans women were accessing the women's centre for many years before that date. Our decision to adopt a trans-inclusion policy was taken in line with our commitment to anti-oppressive and anti-discriminatory practice.

We have drafted this evidence based on feedback from some of our transgender services users and our staff's experience of running a trans-inclusive women's organisation. We have also consulted with three local partners; Notts Trans Hub, TRANS4ME and Nottingham Chameleons. These partners offer support, campaigns and advice to Nottingham's trans community.

Summary

This submission presents information about our trans-inclusion policy and day-to-day realities of being a trans-inclusive women's organisation. We have also provided information and case studies about the barriers trans people face when accessing services, including:

- Misgendering and problems updating official records
- Issues with Equality and Inclusion Forms
- Problems with the language used to describe women's services
- Issues with accessing toilets
- Long waiting times to access transition-related healthcare
- Digital exclusion and isolation
- Smear tests for non-binary people and trans men

We also discuss the interaction between the Gender Recognition Act 2004 (GRA) and the Equality Act 2010 and suggest that the Government needs to take a more proactive approach to tackling the misinformation regarding the impact of GRA on the Equality Act.

¹ From April 2019 to March 2020 almost 600 women came through our door each week, 800 women participated in our courses and activities, 125 women accessed our counselling service and 70 volunteers were involved with the Centre.

Concerns about increased barriers for trans people

We would be concerned about any measures that would create more barriers for trans people who want to access single-sex facilities. Increasing any barriers would send a message to trans service users that they're not 'valid' or worthy of our services, which would be untrue and could have a damaging impact on our service users' mental health, wellbeing and job prospects.

We work in a trauma-informed way, which means we have an open door and we do not ask our service users intrusive questions when they first enter our service. It would be extremely complicated to 'police' and check people's genders at the front door, and it would be unreasonable to ask our reception team to undertake that task. The policing of gender norms could also be problematic for cisgender women who do not conform to gender norms, as they could be at risk of being vilified by the public who wish to "protect their space".

"The unfounded fear of allowing trans people into certain spaces, is very much like the ill-founded worry from the 1980s, that gay people should be banned from certain locations. Frankly, it's alarmist nonsense." – Feedback from a trans person in Nottingham

Are the provisions in the Equality Act for the provision of single-sex and separate-sex spaces and facilities in some circumstances clear and useable for service providers and service users? If not, is reform or further guidance needed?

NWC believes that the current statutory guidance on the Equality Act 2010 is already clear and usable. Our services are open to all women, including trans women (who have, or are currently taking steps towards living as women). This is in line with the provisions of the Equality Act. Our staff and volunteers are made aware of the relevant provisions in the Equality Act through our Trans Inclusion Policy² and specialist training on trans issues.

Our experience of being a trans-inclusive women's organisation

We have been operating as an explicitly trans-inclusive women's organisation for 22 years without any issues about our approach to trans-inclusion. Trans women and non-binary people have safely accessed our services and positively contributed to NWC's community through volunteering and peer support groups throughout this time.

We go further than the provisions in the Equality Act as we take a person-centred and case-by-case approach to the inclusion of people with a non-binary gender identity. We recognise that some people who have a non-binary gender may be presumed to be a woman by others, or live as a woman. These individuals may share many of the same experiences as cis-bodied women and face similar forms of discrimination. In these cases, it may therefore be entirely appropriate for those non-binary people to access our service, if they feel that this will benefit them.

² <http://www.nottinghamwomenscentre.com/wp-content/uploads/2016/05/Trans-inclusion-policy-2017.pdf>

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We also work with service users who are trans men when they are in the early stages of transition. We seek to work in a person-centred way with these service users to ascertain the point at which they are no longer comfortable in a women-centred space.

We do not analyse or check people's gender at our front reception. Instead we trust people to access the centre if they feel it's appropriate for them.

Why is trans inclusion important to NWC?

Trans inclusion is important to our organisation because we are a feminist charity that has strongly held values around inclusion, anti-discrimination and anti-oppression. We are a diverse community of women from all backgrounds who work hard to support women without judgement. Excluding trans women from our service would be at odds with our ethos and values.

The only negative impact of our trans-inclusion policy has been for our staff who manage our social media channels, as we have been regularly targeted online by anti-trans activists. We do not believe these are local women or potential service users. The vast majority of these individuals whose location is listed on their public social media profiles have not been from Nottingham.

Anonymised case study about a trans woman safely accessing NWC

"Jenny was referred to NWC by a partner agency. She was a trans woman and felt extremely anxious about attending a women's organisation as she didn't know that she would be welcome. She was met by her caseworker who reassured her about the inclusive nature of the organisation. Jenny was very isolated, had been rejected by most of her family and didn't really have any friends. She was worried about using public transport as she was concerned about being targeted due to her gender identity.

Jenny's caseworker had a few 1-2-1 sessions with her before she started group work in order to build trust and reassure Jenny that she would be safe at NWC. We arranged appointment times so that she could travel at quiet times. During these 1-2-1 sessions Jenny opened up about her experiences with the gender identity clinic and her feelings of loneliness and feeling like she didn't know anyone like her. Her caseworker gave her information about a local trans support group who offer support meetings and social events. She also asked for support to complete paperwork to legally change her name.

Jenny was very anxious about starting group work so she was put into a very small group to start with in order to ease her in gently. She settled into the group sessions very easily and got on well with the other women. She did well in the group sessions and became visibly more confident as time passed."

What issues do trans people have in accessing support services, including health and social care services, domestic violence and sexual violence services?

The answers to this part of the evidence contains quotes from trans women who volunteer at NWC and trans people who coordinate Trans Hub Notts and TRANS4ME.

1. Misgendering and problems with updating official records

“People aren’t trained in pronouns - I’ve accessed services before when I’ve told them my pronouns are they/them and they instantly forget.”

Trans people, particularly non-binary people, have reported experiencing misgendering from reception staff and frontline staff who do not respect their correct pronouns. This can have a detrimental impact on trans people’s mental health and sense of safety when accessing support services, as well as compromise service users’ privacy.

There are also many reports of support services taking a long amount of time or making it difficult to update official records to reflect a trans person’s gender identity. Young trans people have to put their ‘deadname’ (the name they were given at birth, that they no longer use) on their exam papers. This causes extra stress and anxiety during exams.

Case studies from trans partner organisations

“I know of a number of examples at the local university of students being deadnamed and misgendered because the systems do not have the ability to accommodate name changes. It is then down to individual members of staff to ensure that students’ correct names and pronouns are used and respected. Some staff are hostile to trans students (and colleagues) and many are uninformed.”

“My daughter had massive issues with our GP surgery. Notable incidents were them insisting that they couldn’t change her name and gender on their records without a Gender Recognition Certificate. Also she called to check an appointment and the receptionist refused to speak to her because she ‘sounds like a man’.”

“I hear constant stories of people being misgendered within mental healthcare settings at a time when they are at their most vulnerable and when misgendering can have a huge emotional impact. I can’t give details due to confidentiality but it’s incredibly common particularly in that setting - mental healthcare workers quite deliberately and wilfully refuse to correctly gender trans patients and clearly wrongly believe that to do so would be humouring a delusion. They don’t even manage to afford trans patients basic dignity.”

2. Outdated Equality and Inclusion Forms

“Equality and inclusion forms are really outdated, and don’t give the option of non-binary” – the experience of a trans person in Nottingham.

Equality and Diversity forms do not offer a full range of genders, which is resulting data being lost because it's not being collected. For example, non-binary people are forced to select 'Would rather not say' or 'Other'. This leaves non-binary people feeling invisible and being erased from Equality and Diversity data and research. One of our non-binary person partners remarked; *"One day I hope I have the absolute joy of being identified as myself....I'd love to be identified as X"*

3. Language to describe women's services

"'Female only space' rings alarm bells because I expect anti-trans activists" – the experience of a trans person from Nottingham.

Some of the language used by women's organisations, domestic violence services and sexual violence services can be a barrier for trans people. Language such as 'women's centre' and 'female only space' can be alienating for some trans people because they do not identify as female or feel like they will be welcomed as service users.

Trans people have reported feeling anxious about accessing services that have 'woman' in the title as they are concerned about potential hostility from anti-trans activists, even if they have a legal right to access those services.

This is clearly concerning as trans women are at heightened risk of domestic and sexual violence. For example, Stonewall and YouGov's research³ found that 16% of trans women had experienced domestic violence in the last 12 months, whereas 7.5% of cis-bodied women had experienced domestic violence in the same period⁴. There is a significant lack of LGBT+ specific domestic violence and sexual violence service provision (six providers in England & Wales in June 2019).

4. Long waiting times to access transition-related healthcare

Trans people experience significant barriers to accessing transition-related healthcare, with an average wait of 18 months for first appointment at a Gender Identity Clinic. NWC believes it is vital that the UK Government acts to bring down waiting times for appointments at Gender Identity Clinics so that trans people can receive timely and appropriate transition-related health care.

5. Issues with safely accessing toilets

Our trans partners reported multiple issues with accessing public toilets. Most of these issues stemmed from the lack of gender neutral toilets, which led trans people being confronted or challenged in the toilet and accused of being in the 'wrong gender' toilet.

Examples from our trans partners:

³ https://www.stonewall.org.uk/sites/default/files/lgbt_in_britain_home_and_communities.pdf

⁴

<https://www.ons.gov.uk/peoplepopulationandcommunity/crimeandjustice/articles/domesticabusefindingsfromthecrimesurveyforenglandandwales/yearendingmarch2017>

“The local university has made a commitment to provide gender neutral toilets in new buildings, that commitment was not honoured in the building of the new sports centre.”

“I carry my passport (that says I’m female) around to protect myself against attacks in toilets, even though I’m not female, I’m actually non-binary”

“My daughter had an issue in the council-run toilet where the attendant challenged her in the public loos. Also her college made her use the disabled toilets.”

6. Smear tests for non-binary people and trans men

Trans people reported anxiety, stress and mental health issues in relation to smear tests; *“having a smear test is nightmare as a trans person, because it causes a lot of dysphoria. There are trans people who don’t go for smear tests because it’s a very gendering experience”* - the experience of a trans person in Nottingham.

7. Digital exclusion and isolation

A lot of the people talking about trans issues are tech competent, young, middle class people with resources that allow them to access support for being trans. Those who are working class and don’t have access to tech may struggle to access resources, services and experience increased risk of isolation.

Anonymised case study about digital exclusion

After Lily’s wife asked her to leave because she didn’t want to stop wearing women’s clothes, she found a counsellor and soon became more able to describe her desire to be acknowledged as a woman. After several months she decided to retire (63 years old) and started to live as a woman in private. Lily wasn’t able to access safe spaces or digital support because she wasn’t able to use a laptop proficiently to research or connect to the trans community. Because of this, Lily’s life became very isolated and she reported suicidal thoughts. The counsellor found a supportive trans community by searching online on Lily’s behalf. After connecting with the support group, Lily was able to eventually come out in public. And after several more years, they went on to be one of the first trans women volunteers for a mental health charity.

Are there challenges in the way the Gender Recognition Act 2004 and the Equality Act 2010 interact? For example, in terms of the different language and terminology used across both pieces of legislation.

“I’ve always looked like this, so I’m not protected” - the experience of a trans person in Nottingham.

“The only people who are protected under the GRA are those who either intend to medically transition or have already medically transitioned. Why do you have surgery to prove that you’re trans? What if you live in a religious community? It should be about your own personal life experience” - the experience of a trans person in Nottingham.

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The Equality Act (2010) states that individuals have the protected characteristic of ‘gender reassignment’ if they want to reassign their sex and are doing this by changing physical or other characteristics. However medical transition isn’t possible for everyone, and not all trans people want to medically transition either. Every individual’s experience of their gender is different, and using an intent to medically transition as a barrier to being classified as transgender alienates many trans people and denies them the protection they need. The majority of people with non-binary identities do not undertake medical procedures, so the wording is especially exclusionary for them.

We include the following phrase in every job advert for NWC: “due to the nature of the work it is an occupational requirement under the Equality Act 2010, Part 1, Schedule 9 for the post holder to be female”. This clashes with the language we use internally and for our marketing material; “we welcome all self-identifying women”. It would be useful if the terminology was aligned as they different use of sex-based terminology and gender-based terminology can cause confusion.

As the Committee will be aware, the Gender Recognition Act (GRA) reform does not impact the Equality Act or affect who can access single-sex services. But we urge the Government to do more to clarify this and tackle the significant amount of misinformation that’s circulating online regarding the ‘threat’ of the GRA for the Equality Act.

END

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