



Bristol Women's Commission
Committed to achieving real equality for women in Bristol



Bristol Women's Commission

MINUTES

Meeting	Date	Time	Location
Bristol Women's Commission	27.01.22	09.30	Zoom
Attendees			
<p>Penny Gane (PG), Chair Bristol Women's Commission Cherene Whitfield (ChW), Equalities Team Alice Clermont (AC), Health Task Group Member Anna Smith (AS), Vice Chair BWC Claire Bloor (CB), Chair of Women's Safety Task Force Cllr Ani Stafford-Townsend (Cllr. A S-T), Green Party Cllr Helen Holland (Cllr. HH), Cabinet Manager for Adult Social Care, Women and Women – Safe City, Labour Party Cllr Lesley Alexander (Cllr. LA), Conservative Party Cllr Sarah Classick (Cllr. SC), Liberal Democrats Party Diane Bunyan (DB), Economy Task Group co-chair Helen Mott (HM), Independent Consultant Joanne Kaye (JK), Trade Union Congress Joanne Ward (JW), Chief of Staff and Clerk at City of Bristol College Julie Bird (JB), Health Watch Bristol Karin Smyth (KS), Labour MP Laura Williams (LW), Comms BWC Lorna Dallimore (LD), Avon and Somerset Police Monira Chowdhury (MC), North Bristol NHS Trust and Co-Chair of the BWC Health Task Group Sarah O'Leary (SO'L), Co-Chair Health Task Group Sue Cohen (SC), Co-Chair Economy Task Group MP Kirsty Alexander (KA), GP, member of health task group Prof. Candy McCabe (CM), School of Health and Applied Sciences, UWE Dahlia Von Carolath, Bristol Women's Voice Raquel Aguirre, Bristol One City Nikki Cotterill, Health Task Group member Rebecca Baldwin Cantello, RB-C), Head of Equalities and Inclusion BCC Isobel Laing, Case Worker for Karin Smyth MP</p>			
Apologies		Minutes	
<p>Andrea Dell (AD), BCC One City Kalpna Woolf (KW), CEO BeOnBoard, Laura Beynon, Co-Chair Education Task Group Sandra Meadows, CEO Voscur Sue Durbin, UWE Bristol Dr Zara Nanu, Chairwomen in Business Task Group Katy Taylor, Director Bristol Women's Voice Cllr Kerry Bailes, Labour Party</p>		<p>Winnie Kulkarni-Bhatia (WK-B), ABS Business Support Officer (Minutes) Phoebe Burton (PB), ABS Senior Business Support Officer (Editor)</p>	

Actions from November 2021

Actions	Detail	Who	Status/Notes
34	PB to circulate the link to the DFE module as discussed by SC.	Phoebe Burton	Complete
35	SC to check with Lizzie whether she has been in contact with Susan Carrie regarding the Joint Forum.	Su Coombes	PG contacted key Education Task Force and council officers to progress joint forum
36			
37	PG to send over the contact details of University Reps who want to join the Education Task Group to LB.	Penny Gane & Laura Beynon	Complete
38	RB to get into contact with Su Coombes regarding Cajigo.	Rav Bumbra	Complete
39	AD to organise a follow up conversation with Dr.LB, RB and the new Cabinet member for Education.	Andrea Dell	Delayed due to sickness
40	Survey Task Group to convene a meeting to discuss recommendations for the Councillor Survey Report.	Survey Task Group	Meeting set up
41	PB to circulate LW's Toolkit with the meeting attendees.	Phoebe Burton	Complete.
42	DB to send PB the link for the CERM Workshops which will be circulated to the meeting attendees.	Diane Bunyan & Phoebe Burton	complete
43	PG to write a letter to the Weston Harbour Committee to highlight the gender imbalance of the Committee.	Penny Gane	Raised with HH and AD
44	Economy Task Group to discuss the potential Universal Credit Uplift and the impact on the women we work with.	Economy Task Group	Economy Group have discussed adverse impact on women, particularly Black, Asian and other ethnic minority women, single parents and disabled women. Also the impact of cuts on local community-particularly businesses in poorest communities, leaving more areas without access to fresh food. Lobbied with Women's Budget Group, taken part in conferences. Looked at impact of not uprating legacy and other benefits in line with inflation. Lobbied local MPs. Complete
45	PB to circulate NW's slides.	Phoebe Burton	Complete
46	Cllr. KB to contact LD about providing support to the young people in her ward about the message she wants to get across.	Cllr Kerry Bailes	KB has responded to LDs contact during the meeting. LD to set up meeting.
47	HM to send Cllr. HH the link on the Network of Safe Cities and to then have a follow-up conversation.	Helen Mott	Materials sent but follow up meeting has not yet taken place

49	LW to share the SEVs Video on the Bristol Women's Commission Twitter.	Laura Williams	Complete
50	All Attendees to record a one-minute video for Bristol Women's Voice on their support for the Nil Cap.	ALL	Completed by those that wish to
51	ChW to send across the faith groups' contacts to KT.	Cherene Whitfield to Katy Taylor	Complete

Agenda Item	<i>Discussion Points/ Outcomes & Actions</i>
1.	<p>Welcome, Introductions, Apologies The Chair welcomed and thanked everyone for coming to the meeting. Introductions were given and apologies were presented.</p>
2.	<p>Professor Candy McCabe, School of Health and Applied Sciences, UWE – Chronic Pain and Hidden Long-Term Illnesses in Women</p> <p>See attached presentation</p> <ul style="list-style-type: none"> • No cure for chronic pain yet, but hopeful for that to change. Early diagnosis helps. • Reduce both, physical and mental disabilities that come from chronic pain. • Bath and Bristol have access to specialists in Chronic Pain. • Bristol Health Partners; Chronic Pain HIT (Health Integration Team) • University of Bath have received a £3.8m grant to work on this. • Working at clinical level to create integrated regional delivery of pain pathway. • Improving communication between GP and patient, best practice videos will be put on the website to help guide GPs and patients to deliver and receive this information. • Looking for help from BWC and the Health Task Group to identify people across different ethnic groups and social streams to get a good overall picture of women living with pain in the region.
3.	<p>Q&A</p> <ul style="list-style-type: none"> • Monira: <ul style="list-style-type: none"> ♦ GPs always don't have a solution or know what to say for chronic pain and more often the emphasis is on an underlying health condition rather than pain itself. This can make access to services very limited and hard. ♦ There is a stigma around women talking about health conditions. ♦ Due to lack of solutions, it can sometimes be frustrating for women, and they continue to live with pain physically and mentally leading to chronic fatigue, which can affect a woman's confidence. ♦ MH is affected when you have chronic pain. Chronic pain and menopause is often not discussed. • Kirsty: <ul style="list-style-type: none"> ♦ GPs sometimes feel inadequate they don't have solutions to combat pain and usually pain medications have side effects, so the focus shifts to managing side effects. ♦ The psychological element is crucial in pain management and some people have an ability to almost disconnect from it, however, this is not a solution and is not applicable to everyone. ♦ It is important that we understand more about how the brain perceives pain and that could potentially find a way of dealing with pain. ♦ Culturally most Asian patients describe depression when they talk about chronic pain. • Clr Ani:

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	<ul style="list-style-type: none"> ◆ Suffers from long covid and curious to know the work has been done in this area as it seems to affect more women than men. ● Prof. CM: <ul style="list-style-type: none"> ◆ There is a lot of interest in long covid, and fatigue is a huge part of it. There is a health group already active in long covid in Bristol area, so it doesn't sit as a top priority, as they have it covered. However, support will be provided in case the group requires assistance. ◆ People are attending clinics with complaints of fatigues; there are specialist clinics for managing and supporting fatigue, so focus is on chronic pain for CM. ◆ People who don't get any pain, usually tend to die earlier than those who do, as pain is an indication that something might not be right. We are not set up to manage chronic pain. Acute pain works well with rest but chronic needs a different approach. ● Penny: <ul style="list-style-type: none"> ◆ National Women's Health strategy will be launched in Spring '22 and BWC submitted a robust response to this. ◆ Ros Ball in the Government's Equalities Office was delighted with our response to the consultation, some of which has been included in the vision for women's health leading to a national strategy ◆ BWC was able to influence national policy in a clear and a positive way. Making such connections and being able to give women's voices a platform is great news. ● Close discussion
4.	<p>Karin Smyth MP – Overview of Women's Health in South Bristol</p> <ul style="list-style-type: none"> ● Bristol has a shiny image; however, deprivation in parts of south Bristol is among some of the highest (10%) in the country. ● South Bristol faces specific health issues such as mental health mainly self-harm, rising eating disorders in young women, breast cancer, asthma, chronic kidney disease, and historic problems associated with smoking, DV, long term fatigue, menopause, life expectancy being lower and women living longer in poor health. However, Bristol (South) has done well in controlling teenage pregnancies. ● Challenges faced in post pandemic setting. Overall focus is on mind and general mental well-being of community, which is important too. ● Current referral services are highly overstretched and pressure on primary care is massive. ● Growing importance of local centres like Knowle West health park can help ease this mounting pressure. With the new structure in health and care inclusive of an integrated health board can lead to better focus and improvement on place and locality as every locality faces its unique issues/ problems. ● Local partnerships can strengthen and work together on such targeted issues along with support from local authority and evolving health service. ● There has been a renewed focus to get social care higher on the agenda. Women having to often give up work to look after families and the situation only worsened in the pandemic, some people died prematurely at home due to lack of access to services. It is crucial to give women their voice and bring women's health higher up on the national agenda.
5.	<p>Q&A</p> <ul style="list-style-type: none"> ● Kirsty: <ul style="list-style-type: none"> ◆ Currently co-chairs north and west integrated care partnerships. How to work collaboratively and raise agendas through partnership work to make it more visible? ● Anna: <ul style="list-style-type: none"> ◆ At one-point, domestic abuse was in second highest in the UK, this has an impact on

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	<p>mental health, how to work proactively to support women in crisis?</p> <ul style="list-style-type: none"> • Karin: <ul style="list-style-type: none"> ◆ It would help to localise health and care and do place based work. Organisations in Hartcliffe are bed rocks of communities across south Bristol. They are well led and supported, so it is important to encourage to bring people in and volunteer and be a part of the community. ◆ Also, stress on the importance of well-paid work and career progression along with further education and training. South Bristol has considerable low education outcomes. It is important to offer alternative pathways apprenticeship, however, lack of funding is a concern. ◆ Find and offer right housing solution in South Bristol, especially for young women fleeing from perpetrators. ◆ New young parents, usually want local accommodation to have support from family. ◆ Good relationship with the police and local partnerships. ◆ There are several behaviour issues in communities in young men coming from DV households, so it is important to do early work with perpetrators and for these more funding needs to be allocated to do preventive work. ◆ Support needs to be in place for women to move out and get work. ◆ Current debate about shutting down SEV's, objectification of women is a concern and change in mindset needed. • Sue: <ul style="list-style-type: none"> ◆ What are the 3 main policy measures for social care? • Karin: <ul style="list-style-type: none"> ◆ Urgency on social care to offer pay beyond living wage and career progression opportunities and stability. NHS pay grades are very low. ◆ Stabilise systems to recognise that a care setting can be at home, home first approach. ◆ invest in staff and people to make service convenient and responsive and this is why place and locality focus in important. ◆ Levels of unemployment in people with disability is alarming and for them to feel like a part of community, they need to be in front of the workforce and employment should be encouraged. • Action 01. Questions in chats to be forwarded to KS. • Heath task group to keep in touch with KS.
6.	<p>Progress and Priorities of Health Task Group, Sarah O'Leary</p> <ul style="list-style-type: none"> • Has been a co- chair of HTG since last year. • Update from last year: there have been a variety of projects focusing on impact of covid on women's health, increase in survivors with mental health needs, survival stories of domestic violence victims and this has been fed into response to central government along with women's experiences and case studies with data and evidence pulled from multiple partners with examples around women's menstruation, menopause, bladder, and bowel incontinence. • Attempting to make sure women's health is central to community with subgroups in place for mental health giving a platform to women's voices are listened to and to address specific needs s around mental health. • Intersecting needs between physical, mental and violence against women, and their voices are not always heard. • Responded to parliamentary call regarding menopause and guidance at workplace. • Priorities this year: expand the declining membership, covid had a massive impact so bring more people from health, update Bristol women's health strategy, focus on key areas: menopause, chronic pain, hidden illness, maternity heath of BAME women, and the intersectionality between violence and MH and open up the discussion.

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7.	<p>Update from Cabinet Member for Women – Cllr. Helen Holland</p> <ul style="list-style-type: none"> • Importance of integrated care partnerships (ICPS) around the city. • Drawing together strands of activity across council to make community safety issues coherent and prominent. • A lot of Redcliffe office buildings have security people employed 24/7, these could be used for women safety at nights. This was a great idea and offer put forward by a Visit Bristol Partnership member. • Sarah Cruise summit theme groups are focussing on safety for women at night and on public transport. • Penny: speakers referring to JSNA, concerns that when it moves on, BWC will lose the chapter as women’s health issues are hidden and the focus is on men’s health. Helen Holland: fundamental piece of foundation for health and wellbeing is broad- make sure that it stays on radar as more representation is needed and to be reflected in the new JSNA. • Monira: it is important to look at qualitative and not just quantitative data for women. Women contribute to about 75% of workforce and work links in with health and social care, however, are poorly represented at board level. There are poor pay levels and career progression opportunities are limited. • Helen Holland: Economic subgroups, also important to engage people around learning disability in work. • Kirsty: I have emailed Viv Harrison regarding population health management; we need to pull together strands of data and information to be proactive and intelligent. <p>Cllr Helen Holland advised she is open to contact about any of this.</p>
8.	<p>Minutes and Actions</p> <p>The Chair discussed the previous actions (please see action table attached).</p> <p>Everyone in attendance then agreed to the November minutes and the actions.</p>
9.	<p>Updates and Any Other Business</p> <ul style="list-style-type: none"> • Action 02. for Penny to write to Cllr HH on one city. • Raquel informed about 4 boards (Environment, Economy and skills, Transport, and Children) being refreshed at city office and each board to have 18 members. Expressions of interest are welcome from BWC- deadline is 14th Feb. • Raquel sent link in chat with information and criteria to be shared with networks, quarterly meetings, and working with equalities team to assure 50% women participation. • Sue: Economy board representation hasn’t changed completely but people can reapply. This can allow opportunity to new members; Sue is happy to continue with the role and represent BWC. It is tied in with one city plan, a task group can work in between quarterly meetings, however, they won’t be formally on the board but can be brought in to see how the wider demographic can contribute towards a positive change. • Penny confirmed there was not much representation from BWC on other groups. • Helen Mott: importance of transport representation. • Penny reported that Sue Arrowsmith from First has a new role which does not include stakeholder work. There is currently no woman to take up her place. First Group have now left BWC but Doug Claringbold MD of First very happy to work with us. This means we have no representation on transport board. • Rebecca Baldwin: One city refresh meeting took place last week, thinking about how we can integrate perspectives from commissions in other ways as well. Transport has been raised by the disability commission as well. We are thinking about best way to bring you in. • Action 03. for Phoebe to re-send all information on the Boards and link to web page. <p>Safety of Women at Night (SWAN) fund update: Helen Mott,</p>

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	<p>Safety of Women at Night (SWAN) fund update: Helen Mott,</p> <p>In autumn 2021 in response to the outcry and revelations over the deaths of Sarah Everard, Bibaa Henry, Nicole Smallman, Sabina Nessa and others, the Home Office announced a new tranche of its “Safer Streets” funding stream specifically dedicated to the safety of women at night. In November Bristol received the welcome news that we have been awarded £282,000. Less welcome was the fact that the terms of the award are that it must all be spent (and everything it has paid for delivered) by the end of March 2022 so it’s a ‘cash injection’ for projects rather than reflecting a move towards a sustainable way of funding the necessary dedicated work on safety of women at night.</p> <p>Details of the funding are in a press release from BCC here: https://www.bristol.gov.uk/newsroom/funding-boost-to-improve-women-s-safety-in-bristol</p> <p>Various initiatives are underway using the funding as set out in the press release but operational details are not in the public domain and members of the Bristol@Night panel have been instructed not to share details.</p> <p>In other news the VAWG summit led by police that we heard about from ACC Nikki Watson is being planned for May 2022 and will have a number of sub-group themes. Also there has been a meeting of the Police Independent Advisory Group on Women which is attended by HM and Katy Taylor. We discussed among other things the safety of women university students, drink spiking and the investigation into a Bristol taxi driver reported for threatening behaviour and false imprisonment.</p> <p>There continues to be discussion in various forums about the balance between inclusive language and the danger of ‘de-gendering’ VAW in VAW prevention.</p> <p>The Home Office has almost completed its large-scale public ad campaign - thanks to pressure from people like Stylist Magazine with their Fearless Future campaign - it will go live soon.</p> <ul style="list-style-type: none"> • Diane: Majority people at night-time economy are carers and cleaning staff for offices. Discussion around their safety concerns and issues as women working as cleaners are often isolated and their safety doesn’t appear on night-time agenda or on safe transportation. • Helen Mott: Jo Cox-Brown from nighttimeconomy.com is delivering training and there is a new post in place specifically to manage the SWAN fund project – Sarah Carter • Lorna: advised of email address of Sarah Carter for Diane to contact: sarah.carter@bristol.gov.uk • Action 04. for Diane to contact Sarah Carter. • Penny has received a response from Metro Mayor Dan Norris regarding meeting in March. Date he will attend is TBC. <p>Penny ended the meeting by thanking the attendees and contributors for their attendance and contribution today.</p> <p>Penny also confirmed that the next meeting will be taking place on Thursday 24th March where updates from commission members will be discussed.</p>
10.	Close of Meeting.

Actions:

Actions	Detail	Who	Status/Notes
01.	Questions in chat to be forwarded to KS.	Phoebe	
02.	Penny to write to Cllr HH on one city.	Penny	

03.	Phoebe to re-send all information on the Boards and link to web page.	Phoebe	Completed
04.	Diane to contact Sarah Carter	Diane	
05.	Phoebe to add Julie Bird, and Candy to Health TG	Phoebe	Completed
06.	Education TG, joint forum on sexual harassment in education establishments to progress, Cherene to follow this up.	Cherene	In progress
07.	Cherene and Penny to arrange catch up to go through Action Plan	Cherene	Booked in
08.	Cherene to speak with Rebecca about best HoS to attend meetings	Cherene	
09.	In March meeting ask what organisations are doing for women regarding, economy, violence, health, workplace policies etc to gauge our impact	Penny	
10.	Set up leads TG meeting 4;15pm on Thursdays	Phoebe	

Meeting Chat: attached in separate document.