



## **Consortium for the Regional Support for Women in Disadvantaged and Rural Areas**

**Response to: Consultation on the "Re-introduction of Hospital Parking Charges" as a measure to support budget sustainability by raising additional revenue**

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Foyle Women's  
Information  
Network



# **Women's Regional Consortium: Working to Support Women in Rural Communities and Disadvantaged Urban Areas**

## **1. Introduction**

**1.1** This response has been undertaken collaboratively by the members of the Consortium for the Regional Support for Women in Disadvantaged and Rural Areas (hereafter, either the Women's Regional Consortium or simply the Consortium), which is funded by the Department for Communities and the Department of Agriculture, Environment and Rural Affairs.

**1.2** The Women's Regional Consortium consists of seven established women's sector organisations that are committed to working in partnership with each other, government, statutory organisations and women's organisations, centres and groups in disadvantaged and rural areas, to ensure that organisations working for women are given the best possible support in the work they do in tackling disadvantage and social exclusion.<sup>1</sup> The seven groups are as follows:

- ♀ Training for Women Network (TWN) – Project lead
- ♀ Women's Resource and Development Agency (WRDA)
- ♀ Women's Support Network (WSN)
- ♀ Northern Ireland's Rural Women's Network (NIRWN)
- ♀ Women's TEC
- ♀ Women's Centre Derry
- ♀ Foyle Women's Information Network (FWIN)

**1.3** The Consortium is the established link and strategic partner between government and statutory agencies and women in disadvantaged and rural areas, including all groups, centres and organisations delivering essential frontline services, advice and support. The Consortium ensures that there is a continuous two-way flow of

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<sup>1</sup> Sections 1.2-1.3 represent the official description of the Consortium's work, as agreed and authored by its seven partner organisation

information between government and the sector. It also ensures that organisations/centres and groups are made aware of consultations, government planning and policy implementation. In turn, the Consortium ascertains the views, needs and aspirations of women in disadvantaged and rural areas and takes these views forward to influence policy development and future government planning, which ultimately results in the empowerment of local women in disadvantaged and rurally isolated communities.

**1.4** The Women's Regional Consortium appreciates the opportunity to respond to the Department of Health's Consultation on the "Re-introduction of Hospital Parking Charges" as a measure to support budget sustainability by raising additional revenue. The Women's Regional Consortium fundamentally disagrees with the framing of the revenue raising consultations. The need for reform has been conflated with the need for cuts and charges for services. This has resulted in consultations which ask how to cut/charge for services rather than should we charge at all. We firmly believe that there is an urgent need for investment in our public services rather than cuts, in order to save money in the longer term.

**1.5** We wish to endorse the response made by the Women's Policy Group (WPG) of which the Women's Regional Consortium is a member.

**1.6 The Women's Regional Consortium also endorses the following statement prepared by the NI Womens Budget Group and Ulster University:**

Gender Budgeting requires government departments to analyse the different impact of a budget on people of different genders, starting as early in the budget cycle as possible. The aim of gender budgeting is to ensure that the distribution of resources creates more gender equal outcomes. Over time, gender analysis should become embedded at all stages of the budget process. Women's intersecting identities are also included in this analysis and policy-makers are expected to promote these areas of equality as well.

There is widespread political support for gender budgeting in Northern Ireland and a growing evidence base that it can help create a more equal society. In the current budget crisis women will experience particular disadvantages due to the pre-existing socio-economic conditions. For example, there is strong evidence that women have suffered disproportionately from over a decade of Westminster austerity measures, the pandemic, and the cost-of-living crisis<sup>2</sup>. We cannot afford to continue making decisions at the expense of women and risk further degradations to gender equality and additional intersecting equalities as well.

Not only is there an immediate need for gender budgeting in our current crisis, but the benefits would help to improve the budgetary process. Gender budgeting is good budgeting; it encourages greater transparency of government processes, more in-depth assessments of how policies and budgets affect constituents and closer cooperation between governmental and non-governmental stakeholders. It encourages a more targeted approach to the spending of public money, which will improve policy outcomes. Implementing gender budgeting mechanisms would provide decision-makers with the tools to recognise and mitigate gendered economic impacts and promote gender equality. Whilst political crises that affect budget processes are outside the control of departmental officials, strategically embedding gender budgeting measures will create a firewall to prevent such disproportionate disadvantages in future.

We recognise that the current equality screening and impact assessment duties under Section 75 provide policy infrastructure that could be used to progress gender budgeting. The EQIA process allows space to identify budget impacts on women and opportunities to promote more gender equal outcomes. However, too often the analysis included in these documents focuses only on equal treatment or stops at the point of acknowledging pre-existing inequalities. For gender budgeting to be fully implemented, the next stage must be to reformulate budgets and budgetary policy

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<sup>2</sup> MacDonald, E.M. (2018) The gendered impact of austerity: Cuts are widening the poverty gap between women and men. British Politics and Policy at

LSE. <https://blogs.lse.ac.uk/politicsandpolicy/gendered-impacts-of-austerity-cuts/>

Charlton, E. (2023) This is Why Women are Bearing the Brunt of the Cost of Living Crisis According to Research. World Economic Forum. <https://www.weforum.org/agenda/2023/01/cost-of-living-crisis-women-gender-gap/>

with targeted measures to improve outcomes for women and girls. Additionally, Section 75 screening and impact assessment typically takes place at the very end of the budget planning process or after the budget has been finalised. The OECD<sup>3</sup> highlights that best practice for gender budgeting is to embed it at all levels of policy- and budget-making: planning, formulation, approval, implementation, monitoring and reformulation. It is crucial that gender equality obligations are not a ‘tick-box exercise,’ but rather that gender equality is mainstreamed in every area of the budgetary process through gender analysis of data supported by experts from civil society.

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<sup>3</sup> OECD (2023), OECD Best Practices for Gender Budgeting, *OECD Journal on Budgeting*, vol. 23/1, <https://doi.org/10.1787/9574ed6f-en>.

## 2.0 General Comments

- 2.1 The Women's Regional Consortium believes that there is a clear need for the reform of public services in Northern Ireland but fundamentally disagrees with the view that this should be done through cuts to services or charging for services.
- 2.2 We are part of and support the Where's Our Democracy? Campaign which recently published its Common Sense Budget for Northern Ireland.<sup>4</sup> It highlights how the 2023 budget cuts have had a devastating impact on people, communities and organisations in Northern Ireland, worsening their quality of life and health outcomes. The Common Sense budget advocates 'Invest to Save' – that Government needs to make common sense decisions and invest in Northern Ireland now in order to save the economy money in the long run.
- 2.3 We also support the calls made by our colleagues in the Irish Congress of Trade Unions, Northern Ireland Committee (NIC-ICTU) in their Smart Money policy paper.<sup>5</sup> This policy paper states that *"In order to save money, it is necessary to spend it first."* It states that Northern Ireland's public services are not sustainable under the spending plans outlined by the most recent Northern Ireland budget and that the only path to sustainable public finances is for *"immediate and unnecessary obstacles to be removed and a realistic programme of investment that would allow the space for reforms."*
- 2.4 The Secretary of State for Northern Ireland has written to the Northern Ireland Permanent Secretaries asking them to set out options for raising more public revenue. In this letter he said that he was *"keen to explore super parity measures including water charges, prescription charges and tuition fees"*. Lisa Wilson, Senior Economist at the Nevin Economic Research Institute (NERI) has

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<sup>4</sup> Common Sense Budget for Northern Ireland, Where's Our Democracy? Campaign, December 2023 <https://wrda.net/wp-content/uploads/2023/11/Common-Sense-Budget.pdf>

<sup>5</sup> Smart Money: Better options for Northern Ireland's public finances, NIC ICTU Policy Paper, September 2023

[Smart Money: Better options for Northern Ireland's public finances | ICTU NIC](#)

said that issues of super-parity are being “*misrepresented*” and stated: “*Although it is the case that the Executive has made policy decisions to forego certain streams of revenue, or rather, spend differently compared to other parts of the UK on these areas of super-parity, Northern Ireland does not receive additional monies to fund these. They are funded from within our existing funding allocation. We are not partying with super-parity.*”<sup>6</sup>

2.5 As raised by the Where is Our Democracy? Campaign issues of sub-parity are rarely, if ever, mentioned in these discussions. Sub-parity refers to those areas where Northern Ireland receives comparatively less spending than in GB, including childcare, mental health spending and public sector pay. Along with our colleagues in the Where is Our Democracy? Campaign we note that the areas of sub-parity are areas that impact on the most vulnerable and particularly on women who are more likely to be caring for children, more likely to suffer from mental health issues and more likely to work in the public sector. As Lisa Wilson notes “*England offers 30 hours per week of free childcare, for 38 weeks of the year to all three- and four-year-olds to all eligible working parents’ children. By September 2025, the provision will be extended and will cover all children above the age of nine months. The same provision is not available in Northern Ireland.*”<sup>7</sup>

2.6 We believe that there are many areas where Northern Ireland is unique and where there are additional needs that need to be taken into consideration in relation to budgets not least being the legacy of the conflict here. We are in agreement with our colleagues in the Where is Our Democracy? Campaign and in NIC-ICTU about the need for the introduction of a needs-based funding floor to replace the Barnett Formula.

2.7 The Holtham Commission<sup>8</sup> report called for a reassessment of the Barnett Formula and advocated for a needs-based assessment. “*A needs-based*

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<sup>6</sup> [We are not partying with super-parity | NERI \(neriinstitute.net\)](https://neri.institute.net)

<sup>7</sup> [We are not partying with super-parity | NERI \(neriinstitute.net\)](https://neri.institute.net)

<sup>8</sup> Fairness and Accountability: A New Funding Settlement for Wales, Independent Commission on Funding and Finance for Wales, July 2010  
[fairness-and-accountability.pdf \(gov.wales\)](https://www.gov.wales/government/commitments/fairness-and-accountability)

*approach to public finances refers to the principle of allocating government resources based on the specific needs of different regions within the UK. This approach seeks to satisfy the principle of parity by recognising that different areas or population segments may require varying levels of support and investment to address their unique challenges and promote equitable outcomes. Introducing a needs-based system or a system of fiscal equalisation to replace the Barnett formula would ensure that spending power for public services actually is equalised on a per capita basis among the regions.”<sup>9</sup>*

2.8 Revenue raising measures, including the reintroduction of hospital parking charges proposed in this consultation, will not raise the required funds to plug the hole in our finances and allow for much needed investment in public services. We would ask the question that if this is the case why are we considering these measures? The revenue raised from the proposed measures being consulted on will take a considerable amount of time to be realised but will impact on the most vulnerable and those struggling financially straight away. We also argue that many of these decisions will not raise the sums being publically touted given administration costs and the need to introduce mitigation measures.

2.9 As Lisa Wilson from NERI highlights in relation to the introduction of water charges *“it is important to recognise that the amount estimated as foregone or spent does not necessarily equate to the amount that could be raised or saved. So, if water charges were implemented, it does not necessarily follow that we would raise £345 million. The amount that would be raised would ultimately depend on the final charging model that would be applied and would have to take into consideration the fact that many households in Northern Ireland would severely struggle or be unable to pay anything at all. Such are the dire straits under which many live.”<sup>10</sup>*

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<sup>9</sup> Smart Money: Better options for Northern Ireland’s public finances, NIC ICTU Policy Paper, September 2023

[Smart Money: Better options for Northern Ireland’s public finances | ICTU NIC](#)

<sup>10</sup> [We are not partying with super-parity | NERI \(nerinstitute.net\)](#)



2.10 We therefore argue what is needed is long-term investment in the human capital of our population, not cuts and charges, and this will only be helped by having a stable and functioning Northern Ireland Assembly. *“For 40% of the time since devolution, there has been no functioning government in Northern Ireland. There has been a lot of time lost and, as a result, a failure to make progress on resolving Northern Ireland’s long-term challenges.”*<sup>11</sup> The lack of a functioning Northern Ireland Assembly has meant that a range of important Strategies and Reviews have failed to be implemented including the full range of Social Inclusion Strategies (Gender, Anti-Poverty, LGBTQI+ and Disability) as well as a Childcare Strategy, Welfare Mitigations Review and Discretionary Support Review, to name a few. These are all dependent on funding but without functioning local Government have not been progressed. How are we to support an economically prosperous economy and increase revenue when many of our people are living in poverty and unable to access their rights?

#### *Ability to Pay for Proposed Charges*

2.11 Proposals for the introduction of charges fail to take account of the environment in which we are living and the impact that this will have had particularly on certain groups of people, often the most vulnerable. We have come through a decade of welfare reform and austerity changes closely followed by a global pandemic and now an ongoing Cost of Living Crisis. These have all had greater impacts on those on the lowest incomes and it is hard to see how many people, particularly those on the lowest incomes, will be able to afford to pay for any additional expense given the pressures on their incomes.

2.12 Analysis by the Consumer Council for Northern Ireland on Discretionary Income<sup>12</sup> shows that 50% of Northern Ireland’s households have less than £80 per week left over after all spending on essentials (see image below). Those in the lowest earning households at the bottom 25% of the income distribution (Quartile 1) have discretionary income of just £26.81 per week after spending

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<sup>11</sup> <https://www.instituteforgovernment.org.uk/sites/default/files/2023-05/ifg-bennett-belfast-roundtable.pdf>

<sup>12</sup> Q2 2023 Northern Ireland Household Expenditure Tracker, Consumer Council for Northern Ireland, November 2023  
[Q2 2023 Northern Ireland Household Expenditure Tracker | Consumer Council](#)

on the basics. The Consumer Council's analysis also shows that Northern Ireland's lowest earning households gross household income per week is 9% lower than the UK at £258.34 per week and that income from social security benefits is at 71% in Northern Ireland compared to 60% in the UK. These figures illustrate the significant pressures faced by those on the lowest incomes who will clearly struggle to find any money to meet new charges for services.



(Source: Consumer Council for Northern Ireland)

2.13 An ARK Research update<sup>13</sup> has also highlighted some issues from the Northern Ireland Life and Times Survey which point to likely problems meeting any additional expenditure from low income levels. Survey respondents were asked how their household income has changed since the first lockdown in March 2020. While the majority (53.3%) of households reported their household income had remained the same, 26% reported a decline. Respondents reporting financial hardship were asked to identify how they have been coping - 44.6% reported borrowing from friends and family and 26.6% reported increasing credit card debt.

<sup>13</sup> The Other Division in Northern Ireland: public attitudes to poverty, economic hardship and social security, ARK Research Update Number 146, May 2022  
<https://www.ark.ac.uk/ARK/sites/default/files/2022-05/update146.pdf>

2.14 The ARK research paper also looked at how increases in the Cost of Living might impact on households. It found that around 25% of households could not afford to pay an unexpected £500 bill. The research paper suggests that this should not be a surprise given that the Family Resources Survey 2019-20 found that 36% of households have no savings. Responses to the question “*Did your household turn heating down or off because you could not afford the costs last winter, even though it was too cold in the house/flat?*” reveal a concerning situation for low income households. Even in Winter 2020, before the soaring costs of energy and while Universal Credit claimants received a £20 a week uplift, over half of respondents (52.1%) who described themselves as low income had turned the heating down or off because they could not afford it.

### *Women’s Ability to Pay for Proposed Charges*

2.15 Women are more likely to be in receipt of social security benefits, more likely to be in low-paid, part-time and insecure work, more likely to be providing care either for children or other family members which limits their ability to carry out paid work and more likely to have to make up for cuts to public services through unpaid work. All these factors contribute to keeping women’s incomes generally lower over their lifetimes and therefore puts them at greater risk of living on a low-income and in poverty.

2.16 These existing gender inequalities have been worsened by the Covid19 pandemic<sup>14</sup>, a decade of welfare reform and austerity policies that have hit women harder<sup>15</sup> and now the Cost-of-Living Crisis is compounding the worsening situation for women. The impact of all these issues coming together has helped to create a perfect storm where women on the lowest incomes are struggling to meet their most basic needs, having to access foodbanks and expensive credit to afford essential items. This raises grave

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<sup>14</sup> NI Covid-19 Feminist Recovery Plan: Relaunch One Year On, Women’s Policy Group NI, July 2021 <https://wrda.net/wp-content/uploads/2021/07/WPG-COVID-19-Feminist-Recovery-Plan-Relaunch-One-Year-On.pdf>

<sup>15</sup> Estimating the gender impact of tax and benefit changes, Richard Cracknell, Richard Keen, Commons Briefing Papers SN06758, December 2017 <http://researchbriefings.files.parliament.uk/documents/SN06758/SN06758.pdf>

concerns for future generations and the costs and impacts to individuals, communities, the economy, education and health.

2.17 Women often bear the brunt of poverty in the home managing household budgets to shield their children from its worst effects. This means that women end up acting as the ‘shock absorbers’ of poverty going without food, heat or clothes in order to meet the needs of children and/or other family members when money is tight.<sup>16</sup> These actions taken by women are often unseen within the home and given little attention or focus in terms of policy. Indeed, this has not been acknowledged in this consultation even though many women are likely to be considerably impacted by any revenue raising measures including the reintroduction of hospital parking charges.

2.18 The following paragraphs highlight how women have been impacted by welfare reform and austerity policies, a constrained budget for Northern Ireland, the impact of debt and the Cost-of-Living Crisis. The points made in the following paragraphs should be considered in identifying the gendered impacts across the full range of revenue raising proposals including the reintroduction of hospital parking charges.

#### *Welfare Reform/Austerity Policies and Women*

2.19 The safety net provided by the social security system has been weakened by a decade of welfare reform changes meaning that many people are unable to meet the costs of essential items such as food, heat and clothing and are unable to cope with unexpected life events such as a washing machine breaking down. Welfare reform and austerity policies have disproportionately impacted on women. Research by the House of Commons Library shows that 86% of the savings to the Treasury through tax and benefit changes since 2010 will have come from women.<sup>17</sup>

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<sup>16</sup> A Female Face, Fabian Society Blog by Mary-Ann Stephenson, Women’s Budget Group, February 2019

<https://fabians.org.uk/a-female-face/>

<sup>17</sup> Estimating the gender impact of tax and benefit changes, Richard Cracknell, Richard Keen, Commons Briefing Papers SN06758, December 2017

<http://researchbriefings.files.parliament.uk/documents/SN06758/SN06758.pdf>

2.20 In Northern Ireland an analysis of the impact of the reforms by the Northern Ireland Human Rights Commission (NIHRC)<sup>18</sup> showed that across most income levels the overall cash impact of the reforms is more negative for women than for men. Their most striking finding was that households with children experience much larger losses as a result of the reforms than those without children. This is particularly the case for lone parents (who are mostly women) who lose £2,250 on average, equivalent to almost 10% of their net income.

#### *Universal Credit and Women*

2.21 There is substantial evidence that Universal Credit, and in particular problems with the five-week wait at the start of a Universal Credit claim, are causing widespread financial hardship, debt and increased reliance on food banks. Women's Regional Consortium research on the Impact of Universal Credit on Women<sup>19</sup> painted an overwhelmingly negative picture of life for women living on Universal Credit fraught with financial insecurity, worry, debt and in some cases cold and hunger.

2.22 The research found that almost all of the women reported negative impacts due to the five-week wait for Universal Credit. Many had needed to borrow money from family members/friends (61%) or lenders (25%) to survive. Some had been forced to cut back on food/essentials to make ends meet (53%) and others had resorted to selling their possessions (18%) or using a foodbank (21%). Others had reported getting behind with their bills (42%) and sadly some of the women reported that the five-week wait had impacted negatively on their children (39%) or that they had felt cold/hungry (30%) due to a lack of money.

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<sup>18</sup> Cumulative impact assessment of tax and social security reforms in Northern Ireland, NIHRC, November 2019

[https://www.nihrc.org/uploads/publications/Final\\_CIA\\_report\\_Oct\\_2019.pdf](https://www.nihrc.org/uploads/publications/Final_CIA_report_Oct_2019.pdf)

<sup>19</sup> The Impact of Universal Credit on Women, Women's Regional Consortium, September 2020  
<https://womensregionalconsortiumni.org.uk/wp-content/uploads/2021/04/September-2020-The-Impact-of-Universal-Credit-on-Women.pdf>

### *Discretionary Support and Women*

- 2.23 Changes to the Social Fund as a result of welfare reform have meant that there is less help available through the social security system for those with extreme, exceptional or crisis situations. Since the Social Fund has been replaced by Discretionary Support (DS) there has been a weakening of this safety net for the most vulnerable borrowers meaning that it no longer provides the support it once did.
- 2.24 Funding cuts across Departments as a result of a constrained Budget imposed by the Secretary of State for Northern Ireland has seen further cuts to Discretionary Support with a reduction in the funding available for Discretionary Support grants to £20m in 2023-24 from £40.3m in 2022-23.<sup>20</sup> The Department for Communities emphasises that this cut will reduce the number of times and/or circumstances where help can be made available for those suffering financial hardship.
- 2.25 Statistics show that 67% of those in receipt of Discretionary Support Grants are women. Reducing access to this important source of crisis help will therefore be particularly detrimental for women who are already suffering great financial pain as a result of welfare reform and the impact of the Cost-of-Living Crisis. It could also mean that those on the lowest incomes and some of the most vulnerable households in Northern Ireland will be driven to expensive and sometimes dangerous forms of lending.

### *Women and Debt*

- 2.26 Borrowing and debt is far from gender neutral. As women's incomes are generally lower over their lifetimes this leaves them more vulnerable to short-term financial problems or income shocks making them more likely to have to rely on borrowing and debt to make ends meet.

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<sup>20</sup> Changes to the Discretionary Support Scheme, Draft Equality Impact Assessment, Department for Communities, July 2023  
<https://www.communities-ni.gov.uk/sites/default/files/consultations/communities/dfc-changes-to-the-discretionary-support-scheme-eqia.pdf>

- 2.27 Research by the Women's Regional Consortium<sup>21</sup> on Women Living with Debt in Northern Ireland showed a significant amount of women reported having difficulty meeting their debt repayments and/or missing repayments (60%). The majority of the women's borrowing had been to fund essential items or to make ends meet. It also found that many (51%) had resorted to high-cost lending. The impact of the Cost-of-Living Crisis on women's debts was evident with 60% of the women reporting their debts had been impacted by rising energy prices and 60% also reporting their debts had been impacted by rising food prices.
- 2.28 Single parents are more likely to be impacted by financial hardship and debt. In Northern Ireland Census results show that the majority of single parent households are headed by a woman (93%). Research by the Joseph Rowntree Foundation<sup>22</sup> has found that single parents are by far the most likely of any family type to be struggling with poverty. Further research by the Joseph Rowntree Foundation<sup>23</sup> shows that the risk of living in very deep poverty has increased by a third for people in lone-parent families, to reach 19% or 900,000 people.
- 2.29 Low-income households are more likely to have to rely on high-cost credit as they are often unable to access cheaper forms of borrowing due to their low-income and/or other debts. Many of these borrowers are forced to use expensive forms of lending to buy essential goods and larger purchases they otherwise could not afford. This leaves these households vulnerable to exploitation through high interest charges, illegal lending and the likelihood of problem debt.
- 2.30 Some of the most vulnerable borrowers are forced into using illegal lending or 'loan sharking' because of a more urgent need for money. In Northern Ireland

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<sup>21</sup> Women Living with Debt, Women's Regional Consortium, September 2022

<https://www.womensregionalconsortiumni.org.uk/wp-content/uploads/2022/09/Women-Living-with-Debt-1.pdf>

<sup>22</sup> UK Poverty 2022, Joseph Rowntree Foundation, January 2022

<https://www.jrf.org.uk/report/uk-poverty-2022>

<sup>23</sup> Going without: deepening poverty in the UK, Joseph Rowntree Foundation, July 2022  
[Going without: deepening poverty in the UK | JRF](#)

illegal lending is often linked with perceived paramilitary activity.<sup>24</sup> Research conducted by Advice NI on behalf of the Consumer Council<sup>25</sup> in Northern Ireland has highlighted that one of the themes around illegal lending is low income and lack of access to mainstream credit. Two pieces of research by the Women's Regional Consortium<sup>26</sup> with women in Northern Ireland found examples of borrowing through loan sharks including paramilitaries.

2.31 Research by the University of Ulster found that Universal Credit was repeatedly described as a driver for illegal lending<sup>27</sup> particularly around the harm caused by the five-week wait and issues with short-term benefits loans that were repaid from future benefits. This ensured that benefit claimants were often short of the funds they needed to support their household leading them to look to other means of getting the money they needed.

2.32 An independent Review into Discretionary Support<sup>28</sup> has found that it provides an important source of borrowing for those on the lowest incomes and can help to divert people from illegal lending such as paramilitaries. The Review found that 11% of their survey respondents (19 out of 172) said they managed the impact of not getting a Discretionary Support award by borrowing from a local money lender.

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<sup>24</sup> Expensive Lending in Northern Ireland, Centre for Economic Empowerment, NICVA, May 2013  
[https://www.nicva.org/sites/default/files/d7content/attachments-resources/cee\\_expensive\\_lending\\_in\\_northern\\_ireland\\_2013.pdf](https://www.nicva.org/sites/default/files/d7content/attachments-resources/cee_expensive_lending_in_northern_ireland_2013.pdf)

<sup>25</sup> Illegal Lending – The Human Story, Advice NI, September 2019  
<https://www.adviceni.net/policy/publications/illegal-lending-human-story>

<sup>26</sup> Making Ends Meet: Women's Perspectives on Access to Lending, Women's Regional Consortium, February 2020

[Making-Ends-Meet-Womens-Perspectives-on-Access-to-Lending.pdf](https://www.womensregionalconsortiumni.org.uk/wp-content/uploads/2022/09/Women-Living-with-Debt-1.pdf)  
([womensregionalconsortiumni.org.uk](https://www.womensregionalconsortiumni.org.uk))

Women Living with Debt, Women's Regional Consortium, September 2022

<https://www.womensregionalconsortiumni.org.uk/wp-content/uploads/2022/09/Women-Living-with-Debt-1.pdf>

<sup>27</sup> Illegal Money Lending and Debt Project, Research Report of Findings, Ulster University and the Consumer Council, March 2020

[Illegal Money Lending Report.PDF](https://www.consumer-council.org.uk/wp-content/uploads/2020/03/Illegal-Money-Lending-Report.pdf) ([consumer-council.org.uk](https://www.consumer-council.org.uk))

<sup>28</sup> Independent Review of Discretionary Support, Department for Communities, February 2022  
<https://www.communities-ni.gov.uk/sites/default/files/publications/communities/dfc-independent-review-of-discretionary-support-22.pdf>



### *The Impact of the Cost-of-Living Crisis on Women*

- 2.33 Economic crises tend to hit women harder and the Cost-of-Living Crisis is no different. In February and March of 2023 the Women's Regional Consortium and Ulster University carried out research with 250 women in Northern Ireland on the impact of the Cost-of-Living Crisis on their lives.<sup>29</sup>
- 2.34 The findings from this research paint a stark picture of women's lives which are increasingly occupied with hunger, cold, debt, anxiety and concerns about the outlook for themselves and their children:
- 96% of the women felt their financial situation was worse than it was in the previous year.
  - 91% of the women reported difficulty paying their bills as a result of cost of living increases.
  - The price increases reported as having the biggest impact on women's household budgets were increases in energy bills (90%) and increases in food bills (89%).
  - Just over half of the women reported being in debt (56%) and of these 82% reported they had to borrow as a result of cost of living increases.
  - 62% of the women reported they had been unable to save recently and 31% reported their savings had decreased. None of the women reported they had been able to increase their savings.
  - The actions taken by the women to cope with cost of living increases were:
    - 86% buying cheaper items;
    - 81% cutting energy use;
    - 55% using charity shops/second hand websites;
    - 49% reduced the use of their car/public transport;
    - 47% relying on friends/family for help;
    - 43% skipped meals.
  - 78% of the women had felt cold or hungry or both as a result of cost of living increases.

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<sup>29</sup> Women's Experiences of the Cost-of-Living Crisis in Northern Ireland, Women's Regional Consortium & Ulster University, June 2023

<https://www.womensregionalconsortiumni.org.uk/wp-content/uploads/2023/06/Womens-Experiences-of-the-Cost-of-Living-Crisis-in-NI-2.pdf>

- 41% of the women had needed to use a foodbank/other charitable support due to increases in the cost of living.
- Many of the women were skipping meals, living in cold homes and going without other necessities such as clothing to protect their children and families from financial hardship and poverty.
- Lack of awareness around existing help through the benefits system meant that some women missed out on financial support that could have significantly helped their household budgets and emotional wellbeing.
- Rural women faced additional issues particularly around transport costs, lack of public transport, reliance on unregulated home heating oil, rising prices/availability of broadband, increased isolation due to cost of living pressures and less choice in terms of price/products when shopping in smaller, local shops.
- Women who were asylum seekers with No Recourse to Public Funds (NRPF) found it really difficult to cope with the rising cost of food (particularly healthy food), transport costs and children's costs. This meant that they often had to rely on charity or borrowing from friends/family to make ends meet.

### *Unpaid Care and Women*

- 2.35 Caring remains a gendered issue and it is still very much seen to be seen to be “*women’s work*”. According to the 2021 Census, there are over 220,000 people providing unpaid care in Northern Ireland. The Family Resources Survey shows that 57% of unpaid carers are women and 43% are men in Northern Ireland. A recent consultation by the Department of Health<sup>30</sup> has proposed cuts to domiciliary care packages which will mean that more people, many of them women, may end up acting as unpaid carers for elderly or disabled family members.
- 2.36 Research from Carers NI in 2022 found that a significant number of unpaid carers were experiencing financial pressure and 1 in 6 said they were struggling with the cost of food.<sup>31</sup> Trussell Trust research shows that one in four people

<sup>30</sup> <https://www.health-ni.gov.uk/sites/default/files/consultations/health/doh-budget-eqia-cons.pdf>

<sup>31</sup> [State of Caring in Northern Ireland 2022, Carers NI, November 2022](https://www.carersuk.org/reports/state-of-caring-in-northern-ireland-2022/)  
<https://www.carersuk.org/reports/state-of-caring-in-northern-ireland-2022/>

(27%) providing unpaid care for sick or disabled loved ones in Northern Ireland are experiencing food insecurity – more than twice the rate of non-carers (12%).<sup>32</sup>

- 2.37 A report by the Carer Poverty Commission in Northern Ireland also showed that one in four unpaid carers in Northern Ireland are living in poverty which is significantly higher than the non-carer population (16%) and higher than the carer poverty rate in the rest of the UK (23%).<sup>33</sup> It showed that carers are being driven to poverty by a combination of the high extra costs of caring for a sick or disabled person, barriers to employment and inadequate support from the social security system. This severe financial pressure is leaving carers struggling to afford the price of food, borrowing money from loan sharks, living in cold homes and relying on charity shops to get by.
- 2.38 Research carried out by the Women’s Regional Consortium & Ulster University on the impact of the Cost-of-Living Crisis on women<sup>34</sup> highlighted the issues for those providing unpaid care. Around 28% of the women who took part in the research were providing unpaid care and it was clear that increases in the cost of living had put a strain on them causing them to struggle to make ends meet, to heat their homes adequately, to afford travel costs for medical appointments, impacting on what activities they can do with the person they care for and causing significant anxiety and stress.

*“I care for my mother who is 84 and immobile. Her heating has had to be on more and it is taking way more money for gas than it used to try to keep her warm enough. She has a hospital bed (she needs it because it’s adjustable), a hoist, an electric cushion to stop her getting bedsores. All these extra electric things are running as well all day every day. Her electricity has really soared as well not just in terms of how much it is used but in the cost of it as well which is crazy. I’m trying to*

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<sup>32</sup> [Hunger in Northern Ireland, Trussell Trust, June 2023](#)  
[2023-Hunger-in-Northern-Ireland-report-web-updated-10Aug2023.pdf \(trusselltrust.org\)](#)

<sup>33</sup> [The experiences of poverty among unpaid carers in Northern Ireland, the Carer Poverty Commission in NI, August 2023](#)  
<https://www.carersuk.org/media/jb0ah2xh/the-experiences-of-poverty-among-unpaid-carers-in-northern-ireland.pdf>

<sup>34</sup> Women’s Experiences of the Cost-of-Living Crisis in Northern Ireland, Women’s Regional Consortium & Ulster University, June 2023  
<https://www.womensregionalconsortiumni.org.uk/wp-content/uploads/2023/06/Womens-Experiences-of-the-Cost-of-Living-Crisis-in-NI-2.pdf>

*take her out an odd time for a wee break and change of scene but the money's just not there for it anymore."*

*"My son has a serious brain condition, he's in a wheelchair and has spinal, brain and kidney problems. We're filling our car up two or three times a week to travel to his hospital and care appointments. That broke things for us, the first time we have ever been in debt. It destroyed us. Nobody recognises this and we don't get any help for any of it. We have him every other weekend and the heat in the house has to be on 24/7 it's not easy. As far as food we only eat off the bargain shelves that's it."*

(Quotes from Focus Group participants in Women's Regional Consortium Research on the Impact of the Cost-of-Living Crisis on Women)

### *Lived Experiences of Women*

- 2.39 The voices of those in poverty are often missed in these discussions around revenue raising. We have raised in the preceding paragraphs how women's financial wellbeing has been impacted by a range of factors over the last number of years leaving those women on the lowest incomes struggling to afford the essentials and to be able to live dignified, healthy lives. It is abundantly clear from the wealth of evidence and research that many women and families are not in a position to be able to pay additional charges of any kind. Many of these women are already going without the essentials of life, including food and heat, to try and provide for their children and families. Asking these women to contribute to revenue raising is simply unconscionable.
- 2.40 The Women's Regional Consortium has a wealth of lived experience from women who have taken part in our research. This is extremely valuable in illustrating the precarious financial situation of many women and families at the present time. We include a selection of quotes from the women who took part in Women's Regional Consortium research on the impact of the Cost-of-Living Crisis to help Government understand the financial pressures women are facing and to ensure that their voices are front and centre of considerations around revenue raising. We also refer the Department to the addendum to the research paper: [Quotes from Women's Regional Consortium Focus Group Research on Women's Experiences of the Cost-of-Living Crisis](#). We urge the

Department to consider this lived experience carefully in making any decisions around revenue raising:

*“We’re not living, we’re just existing.”*

*“I don’t understand them saying inflation is 10% sure the prices have doubled! Everything is going up more than that. Gas is the same it has at least doubled for me, I just can’t get out of the emergency.”*

*“I spent £30 on one bag of shopping which had about 6 items in it. It’s shocking. We’re all eating chicken strips and chips, that’s all we eat for 4 days is chicken strips because I can’t afford anything else.”*

*“I’ve had to sit in a cold apartment which is causing damp. I’ve had to wash in cold water and go without food.”*

*“I’ve had to skip meals to make sure my children eat or I just eat toast.”*

*“I’m having to borrow for the way I normally live. I used to have a certain amount of money to cover my ordinary bills but that’s not there anymore. I’ll have another week until I get paid so I’ll use my credit card to get whatever I need. It’s all essential stuff, it’s just for living.”*

*“I had £400 saved and I had to go into it, it’s gone. I put it away as a fund for my oldest. It’s horrible going into your kid’s money, I feel so guilty about it but we had to eat.”*

*“The extras are all gone now, going out is a luxury, we were hardly able to do it in the first place. Even the special occasion treats are gone now like for birthdays, etc. There’s no spare income for it now.”*

*“I live off cereal or toast. My son is 17 months old and I’m starting to potty train him early to save money on nappies. You’re having to start to do things earlier because of the price of things.”*

*“I’m only heating the room I’m in which with a new baby isn’t ideal. I’m cutting back and going out places so that I’m not having to use my own electric.”*

*“I had to superglue the soles of my boots back together because they started talking to me. I walk a lot especially now as I can’t afford the bus. I’m sewing my coats and missing meals, anything to save money.”*

*“Our Government need to get back up on the hill [Stormont] to do more for people. Their people are struggling, on their knees, starving, cold. Why are they not up there fighting our corner?”*

*“Government need to increase benefits. There needs to be an increase in income whether people are working through a Living Wage and if you can't work on a benefits system that gives you enough of an income that you're able to live and not struggle. At the minute anyone on benefits is existing they're not living.”*

*“I don't think anyone recognises the impact of this Crisis on women especially. We have a high level of responsibility and it's impacting really badly and Government are not taking enough notice. People are suicidal and feel like a failure. I'm lying in bed at night and getting really bad intrusive thoughts to the point where I look at my daughter and think if something happens to me who will look after her? I asked the person in charge in my hostel to ring me in the morning and check if I'm OK. It's really, really impacting on people and Government need to be more aware of the impacts of this Crisis.”*

*“My kids go to Breakfast Club in school and that's a godsend. If I didn't have that I don't know what I'd do. There are times I've went three or four days with very little to eat, maybe I'd grab an apple just so I have something in my stomach and I'm not going to bed with hunger pains and growling in my stomach.”*

*“My pay does not stretch to cover food costs and fuel. We have been buying cheaper brands to make it through the month. I only put £70 in my car per month so going to see family who live 45 miles away is a no go, we can only do it once every few months.”*

## Specific Questions

**1. Do you agree (in principle) that the re-introduction of hospital parking charges is fair and appropriate in the context of the Department's need to generate additional income for the Health Service given the current pressures on budgets?**

Yes

No

**Please provide below any comments for the reasons for your selection:**

The Women's Regional Consortium fundamentally disagrees with the framing of the revenue raising consultations. The need for reform has been conflated with the need for cuts and charges for services. We firmly believe that there is an urgent need for investment in our public services rather than cuts, in order to save money in the longer term. As previously outlined in paragraphs 2.2 and 2.3 we support the need to 'Invest to Save' - to invest in Northern Ireland now in order to save the economy money in the long run.

We have outlined in Section 2.0 the poverty and financial hardship many women and families are facing in Northern Ireland. It is therefore impossible to see how many people, particularly those on the lowest incomes, will be able to afford to pay any additional charges. We particularly want to highlight the following issues:

- We have come through a decade of welfare reform and austerity changes closely followed by a global pandemic and now an ongoing Cost of Living Crisis. This has created a perfect storm for those on the lowest incomes who have been so impacted by these issues (see paragraph 2.11)
- Consumer Council analysis shows that the lowest earning households in Northern Ireland have just £26.81 of discretionary income per week after spending on the basics (see paragraph 2.12)
- ARK Research found that 25% of households could not afford to pay an unexpected £500 bill. It also found that 52.1% of respondents who described themselves as low income had turned their heating down or off because they could not afford it even though it was too cold (see paragraph 2.14)
- Women's incomes are generally lower over their lifetimes which puts them at greater risk of living on a low income and in poverty. These existing gender

inequalities have been worsened by a decade of welfare reform/austerity policies, the Covid-19 pandemic and now the Cost-of-Living Crisis which have all hit them harder (see paragraph 2.16)

- Women often bear the brunt of poverty in the home acting as the 'shock absorbers' of poverty to protect children and other family members. This means women are likely to feel the impacts of the introduction of charges even more (see paragraph 2.17)
- Welfare reform/austerity policies have disproportionately impacted on women weakening the safety net provided by the social security system. This has especially been the case for lone parents who are mostly women (see paragraphs 2.19 and 2.20)
- As women's incomes are generally lower over their lifetimes it leaves them more vulnerable to short-term financial problems or income shocks leaving them more likely to rely on borrowing and debt to make ends meet (see paragraph 2.26)
- Women's Regional Consortium research found that 60% of women reported having difficulty meeting their debt repayments and/or missing repayments (see paragraph 2.27)
- Economic crises tend to hit women harder and the Cost-of-Living Crisis is no different. Women's Regional Consortium research found that 91% of women reported difficulty paying their bills as a result of Cost-of-Living increase and 78% reported feeling cold or hungry (see paragraph 2.33)
- Caring is a gendered issue and proposed cuts to social care will have implications for women who may be expected to provide this care. A report by the Carer Poverty Commission found that 1 in 4 unpaid carers in Northern Ireland are living in poverty which is significantly higher than the non-carer population (see paragraphs 2.35 and 2.37)

We believe that the re-introduction of hospital parking charges will have a significant impact on those living in poverty who can least afford to pay these charges and who are also at greater risk of suffering from ill health and therefore needing to use hospital parking. We also believe that this proposal will have greater impacts on unpaid carers, who are more likely to be women, as they are more likely to visit



hospitals with the person they care for. As previously referenced unpaid carers are more likely to be living in poverty and struggling with the costs of essentials.

**2. On the basis that it may result in increased hospital parking charges, would you support the following concessions which could help reduce the impact charging may have on some patients, visitors and staff?**

The Women's Regional Consortium would ask the Department to reconsider the restrictive concessions proposed here. We repeat the points made in our answer to Question 1 around the ability of many on the lowest incomes to be able to meet these charges and particularly many women who will be even more impacted as they are more likely to provide care and more likely to experience poverty and financial hardship.

The Women's Regional Consortium has concerns about the format of Question 2. It asks a number of questions with 'yes/no' options followed by a space to expand the answer. As WRDA guidance on public consultations<sup>35</sup> states: "*the binary 'agree/disagree' nature of many questions hides the complexity of how people feel about different issues.*" We would urge extreme caution on using statistics on the yes/no responses to these questions as the basis for making conclusions on the proposals.

The answer to these 'yes/no' questions needs careful analysis alongside the accompanying text and must not be considered in isolation or presented in such a way that they paint a misleading picture of responses. We would encourage the Department not to use results from these check box questions solely as the basis for any decision making. If they are to be used, they should not be used in isolation from any information given within the accompanying text which if not addressed could result in a different answer.

We have provided answers to the check boxes but all are answered with caveats which must be fully taken into account in any analysis of our response.

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<sup>35</sup> Women at the Heart of Public Consultation, A guide for Public Authorities and Women's Organisations, WRDA, November 2017  
[https://wrda.net/wpcontent/uploads/2018/10/WRDA\\_WomenAtTheHeartOfPublicConsultation.pdf](https://wrda.net/wpcontent/uploads/2018/10/WRDA_WomenAtTheHeartOfPublicConsultation.pdf)

**Enhancing exceptions for persons with a diagnosis of a terminal illness and relatives of in-patients who are terminally ill and/or receiving end of life care.**

**Yes (with caveats)**

**No**

We are in agreement that people with a terminal illness and their families should not have to face the stress or financial burden of hospital car parking charges. However, the consultation does not describe how this will work in practice as there will need to be a definition/system to capture those in this category. There are a number of questions to be asked around this including who exactly will be included, will it involve a burden on medical professionals to make assessments and who exactly is covered by 'relatives'? It is likely therefore that this will involve some element of administration bringing with it a financial cost which would therefore limit the amount that could be raised from this proposal.

**Enhancing exceptions for patients with mental health disabilities and those accessing addiction services, as parking charges may act as a barrier to access treatment.**

**Yes (with caveats)**

**No**

We are in agreement that patients with mental health disabilities and those accessing addiction services should not have to face the stress or financial burden of hospital car parking charges. However, once again the consultation does not describe how this will work in practice as there will need to be a definition/system to capture those in this category which is likely to involve additional administration and financial costs.

We repeat the points made in our answer to Question 1 around the ability of many on the lowest incomes to be able to meet these charges and particularly many women who will be even more impacted as they are more likely to provide care and more likely to experience poverty and financial hardship.

We acknowledge that patients with mental health difficulties and addictions often live in poverty but they are not the only groups impacted by poverty and who may find the

re-introduction of parking charges a barrier to accessing the treatment they need. We have already outlined that women are more likely to live in poverty, more likely to be in debt, more likely to provide unpaid care, have been more impacted by welfare reform and austerity policies and more impacted by the pandemic and the Cost-of-Living Crisis. By this token should women, those on low incomes, unpaid carers and those with disabilities also be exempt as they may find the re-introduction of parking charges a barrier to accessing their treatment.

**Providing 30 minutes of parking free across all chargeable sites, which will help staff and public set down and collect persons/items.**

**Yes (with caveats)**

**No**

We agree that providing 30 minutes of parking free would help the public and staff set down and collect people/items and may help people with disabilities access treatment. However, we question whether 30 minutes is long enough for people with disabilities particularly mobility issues and given current issues within the health service. Patients on discharge often have to wait a considerable time to collect letters for their GPs or medication from the pharmacy and there are ongoing pressures within Emergency Departments which have led to long waiting times.

Again we have concerns about how this will work in practice as the consultation document does not provide any detail on how this will work. We assume that entry and exit times will have to be recorded to work out who is within the time limit for free parking. This will bring with it additional administration work and resulting financial costs.

**Providing free staff parking to permitted pass holders.**

**Yes (with caveats)**

**No**

The consultation document does not provide enough detail on what permitted pass holders means, therefore we are unclear as to whether this applies to all staff and what type of pass they need to have to be able to qualify for a concession.

The consultation document outlines that NHS England provide free parking provisions for staff working night shifts and we join with our colleagues in the Women's Policy Group in asking why this has not also been considered in Northern Ireland? Given the difficulties with public transport provision particularly in rural areas and at night time we suggest that a concession should also have been made for staff working night shifts in Northern Ireland.

**Please provide below any comments for the reasons for your selections:**

The concessions proposed do not take into account a person's ability to pay. As we have raised repeatedly throughout our response those living on low incomes and in poverty will find it very difficult if not impossible to meet these charges which could deter them from accessing the treatment they need. The concessions proposed in the consultation could potentially mean that someone who is well off could benefit from free parking because of the nature of their visit to the hospital but someone who lives in poverty may face the burden of these charges. This seems very unfair and punishes those on the lowest incomes who are more likely to need to access healthcare services because of the links between poverty and poor health.

If these concessions were put in place, there would need to be an awareness campaign around them to ensure that those who are entitled to free parking can access it. Women's Regional Consortium research continues to highlight examples of where women miss out on their rightful entitlements because they did not know and/or were not told about the existing help available. Our latest research on Women's Experiences of the Cost-of-Living Crisis in Northern Ireland<sup>36</sup> included examples such as the Universal Credit Contingency Fund (a grant to help with the five-week wait), the Adviser Discretion Fund (a grant to help remove barriers to employment including help

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<sup>36</sup> Women's Experiences of the Cost-of-Living Crisis in Northern Ireland, Women's Regional Consortium & Ulster University, June 2023

<https://www.womensregionalconsortiumni.org.uk/wp-content/uploads/2023/06/Womens-Experiences-of-the-Cost-of-Living-Crisis-in-NI-2.pdf>

to pay for upfront childcare costs) and the Healthy Start Scheme (a prepaid card to help buy milk and healthy food). Missing out on these payments had caused financial hardship and distress for the women concerned. It is vital therefore that people who are entitled to concessions are informed about these. This would involve additional costs in raising awareness among the general public about the concessions.

We point to the fact that the consultation document outlines the free parking provisions provided by NHS England which include disabled people, parents with sick children who have to stay overnight and frequent hospital attenders. We agree with our colleagues in the Women's Policy Group who are questioning why the Department is restricting the concessions in Northern Ireland only to some patients who have to attend frequent appointments. This approach will require additional administration and therefore be more costly to operate.

**3. Have you identified any Section 75 equality issues as a result of the current hospital parking charges policy?**

Yes

No

**Please provide below any comments for the reasons for your selection:**

The consultation document states that an Equality Screening Impact statement was produced at the time of the introduction of the cost recovery policy in 2012 and that the screening determined that a full Equality Impact Assessment (EQIA) was not required as there was no evidence that the policy was likely to have a significant impact on the categories screened. The Department have stated that following more than a decade of operation of this policy, they have not been made aware of any equality issues arising with regards to the Section 75 categories. The Women's Regional Consortium is concerned that no significant equality impacts were identified in 2012 or subsequently by the Department.

It is clear that the introduction of any charges, including hospital parking charges, will have a disproportionate impact on women. As we have repeatedly highlighted throughout this response, women are more likely to live in poverty, are more likely to be providing unpaid care, have been more impacted by welfare reform/austerity

changes and more impacted by the pandemic and Cost-of-Living Crisis. In addition, women are more likely to work in the health service, are more likely to have dependents and make up the majority of older people. All these issues will mean that women will be disproportionately impacted by the re-introduction of hospital parking charges. It will place additional costs on women who can often afford it the least pushing them even further into poverty and in the long-run costing the Government even more.

The re-introduction of hospital parking charges is also likely to have a disproportionate impact on other Section 75 groups including people with disabilities, older people and people with dependents including lone parents where 93% are women according to the latest Census figures.

The Women's Regional Consortium believes there is a need to carry out a full EQIA on these proposals to consider the impact across the full range of Section 75 groups. This would have enabled these impacts to be identified and also encourage the Department to consider intersectionality. Intersectionality recognises that people can experience discrimination on the basis of multiple and intersecting identities. As highlighted by the Gender Equality Strategy Expert Panel<sup>37</sup> report *“Disadvantage and discrimination based on gender is inextricably linked to other identities, factors and experiences such as age, race, disability, sexual identity and poverty. Utilising the concept of intersectionality provides the opportunity to recognise, and address through policy, multiple, intersecting disadvantages.”*

A failure to carry out an EQIA has meant a failure to identify the impacts across the Section 75 groups and also critically to identify mitigations to help address these impacts. The failure to carry out an EQIA ensures that existing inequalities not only continue but are actively worsened.

The Women's Regional Consortium also echoes the concerns of our colleagues in the Women's Policy Group over the accessibility of the language used in this

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<sup>37</sup> Gender Equality Strategy, Expert Advisory Panel Report, December 2020  
[Gender Equality Strategy \(communities-ni.gov.uk\)](https://communities-ni.gov.uk/gender-equality-strategy)

question. Without an understanding of policy or equality work it is possible that many people with lived experience who would have much to contribute around the impacts could be excluded from answering this question because they do not understand what it means. Without using simple, accessible language to ask this question the Department risks alienating those with lived experience from providing their valuable insight into how they are impacted by hospital parking charges policy.

We refer the Department to the guidance on consulting with women produced by Women's Regional Consortium members WRDA.<sup>38</sup> This guidance contains five top tips based on the many years of experience that women's groups have in promoting women's participation in public policy making. These include the need to keep language accessible and relevant.

**4. Taking account of the impact on demand once hospital parking charges are abolished, do you believe that the re-introduction of hospital parking charges could negatively impact people from rural areas?**

**Yes**

**No**

**Please provide below any comments for the reasons for your selection:**

We are disappointed that the Department did not conduct and publish a Rural Needs Assessment particularly when this was not done in 2012. Access to transport is a significant issue in rural areas and the costs of travel are becoming increasingly difficult as a result of the Cost-of-Living Crisis. The re-introduction of hospital parking charges could leave some people from rural areas unable to access the healthcare they need or cause them to struggle to meet these additional charges from limited income. Research by our Consortium partner NIRWN shows that rural women are under increasing pressure from the economic climate leaving them experiencing more poverty and social isolation than ever before.<sup>39</sup>

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<sup>38</sup> Women at the Heart of Public Consultation, A guide for Public Authorities and Women's Organisations, WRDA, November 2017

[https://wrda.net/wpcontent/uploads/2018/10/WRDA\\_WomenAtTheHeartOfPublicConsultation.pdf](https://wrda.net/wpcontent/uploads/2018/10/WRDA_WomenAtTheHeartOfPublicConsultation.pdf)

<sup>39</sup> Rural Women's Manifesto, NIRWN, September 2015

<https://www.nirwn.org/wp-content/uploads/2016/12/NIRWN-Rural-Womens-Manifesto.pdf>

Women's Regional Consortium research<sup>40</sup> showed that 38% of the women who took part in the research reported that they were finding it most difficult to pay travel costs and rural women were particularly exercised about the increasing costs of travel and how this impacted on their lives.

The Women's Regional Consortium also has concerns about the impact of other proposed cuts on people from rural areas including proposed cuts to the Concessionary Fares Scheme consulted on by the Department for Infrastructure and cuts to Community Transport proposed in the Department's 2023-24 Budget EQIA which were identified as having an adverse impact on older people, disabled people and women. If these proposals go ahead this would have considerable impacts for people in rural areas and cause many more to have to use their own transport to attend hospital appointments and face these additional charges if introduced.

People who live in rural areas are particularly impacted by the centralisation of services. Research<sup>41</sup> indicates that costs 'saved' by the NHS in centralising services are, in reality simply transferred to patients. We have seen an increasing number of health services transferred from more local hospitals to larger hospitals or hubs. This means that people who live in more rural areas often have no choice, due to limited public transport options, other than to use their own cars and potentially face these additional charges.

NIRWN's 2018 research<sup>42</sup> uncovered that many rural women felt that they were "*becoming more isolated, with many of our support agencies being located in urban settings.*" Health appointments were consistently raised as an issue, both GP and hospital appointments. These are an extra burden to rural women as they are very often caring for both elderly relatives and young children and as such are tasked with organising the transportation to appointments. Transport was also raised as an issue. Those in rural areas said they found it was necessary to have access to their

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<sup>40</sup> Women's Experiences of the Cost-of-Living Crisis in Northern Ireland, Women's Regional Consortium, June 2023

<https://www.womensregionalconsortiumni.org.uk/wp-content/uploads/2023/06/Womens-Experiences-of-the-Cost-of-Living-Crisis-in-NI-2.pdf>

<sup>41</sup> Trend towards centralisation of hospital services, and its effects on access to care for rural and remote communities in the UK, Rural and Remote Health, Iain J Mungall, April 2005

<sup>42</sup> Rural Voices Report, NIRWN, 2018

<https://www.nirwn.org/wp-content/uploads/2018/03/NIRWN-Rural-Voices-Research-Report-March-2018.pdf>



own transport to attend hospital due to lack of public transport and not knowing how long they may be at the hospital making it impossible to plan their return journey.

It is also important to note that Northern Ireland is bound by the international human rights obligations of the UK including the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). In relation to rural women the Committee is concerned about the obstacles faced by women and girls in rural areas in gaining access to education, employment and healthcare and support services due to, among other things, limited resources and access to transportation and the Internet. The Committee recommends that the State party adopts *“inclusive and accessible measures to facilitate women and girls access to education, employment, healthcare services and support services in rural areas, including by ensuring their access to transportation and Internet...”*<sup>43</sup>

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<sup>43</sup> Concluding observations on the eighth periodic report of the United Kingdom of Great Britain and Northern Ireland, March 2019  
[tbinternet.ohchr.org/\\_layouts/15/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fGBR%2fCO%2f8&Lang=en](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fGBR%2fCO%2f8&Lang=en)