

EQUAL VOICES

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European Union Agency for Fundamental Rights
Agentur der Europäischen Union für Grundrechte
Agence des droits fondamentaux de l'Union européenne

Equality and discrimination through the 'gender lens'

Addressing the challenges faced by migrant and minority women in the EU

Multiple discrimination: An interview with Louise Arbour

The invisibility of visible ethnic elder women



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The FRA team is pleased to welcome all readers to this issue of *Equal Voices*. *Equal Voices* consists of articles and features with analysis, new research, expert input, surveys, and good practice examples on a topic related to FRA's mandate. The opinions expressed by the authors do not necessarily reflect those of FRA.

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EDITORIAL

The contributions in this edition of Equal Voices serve as a timely reminder of the need to continue to struggle against discrimination and racism. Integrated and holistic approaches are required which recognise the interconnection between discrimination, lack of integration and exclusion. Equal treatment initiatives and education will not create equal opportunities for all if living conditions contradict them.

The articles also demonstrate that particular forms of discrimination which can be concealed or ignored must be named in order to be addressed. The progress towards realising the rights of women would not have happened if our earlier suffragette sisters had not named and targeted the removal of women's oppression. When addressing discrimination one size does not fit all. The gender dimension needs direct targeting as is evident when one considers issues like the insidious trafficking of women which continues to be an issue in the European Union and beyond.

Advances for women were made in the twentieth century, but these advances were not shared equally and full equality between women and men is still a work in progress. The most marginalised women, among them women migrants and women from minority eth-

nic groups gained least from the advances for women made in the last century. Indeed discrimination and racism towards women from some groups, e.g. Roma and Traveller women, is often rationalised and sometimes even justified with the women being blamed for the oppression they experience. It is essential that their issues receive priority if these women are not to be further marginalised in the twenty first century's climate of resistance, sometimes concealed in economic, social cultural or religious overtures, to equality for women overall.

Progress however has been made and further progress is possible with the EU legislation providing a framework in that regard. Much can be learned from sharing experiences and good practices. The 'European Year of Equal Opportunities for All' offered a good platform for such sharing. This needs to be continued and built on during the European Year of Intercultural Dialogue. In the Fundamental Rights Agency we look forward to cooperation with the European Institute for Gender Equality. Meanwhile we remain committed to ensuring that this important element remains visible and is addressed in all areas of our work.

Human rights are indivisible, their realisation humanises



us all. The rights of minority and migrant women are human rights. The twentieth century women's movement demanded that we be involved in all major decisions affecting our lives. This has become the key principle in the struggle against discrimination. It is particularly important that migrant women and those from minority ethnic groups are encouraged and facilitated to participate in initiatives that affect their lives and be involved in attempts to address the discrimination they face.

I thank our contributors for their insights, salute in particular all women and men in various roles and positions who support the struggles against the discrimination experienced by migrant and minority women.

Anastasia Crickley

Addressing the challenges faced by migrant and minority women in the EU¹

By Sigrid Melchior & Clarisse Delorme, European Women's Lobby

Despite the fact that women make up nearly half of the migrant population worldwide, there is “remarkably little reliable information about women as migrants”². Research on immigration has for a long time focused on the male migrant worker, reinforcing a model of migrant woman only expected to assist her husband and children, with no independent status (family reunification). As stated in the European Commission's reflection paper “Migration and public perception”,

“In practice the European Union fails to integrate a woman's perspective into its activities on immigration and integration, although some recent positive developments can be noted.”

this “static model does not correspond to the reality of the majority of migrant families (and) contributes to keeping women migrants out of the official labour market, and to undermining the benefits for the receiving society of the empowerment process entered into by migrant women”³.

The issue of immigration and asylum is a critical area

of concern in Europe today, particularly so for women as policies are being pursued in a framework of security and border control and for most parts lacking a gender perspective. Despite the Treaty requirement that the European Community should “eliminate inequalities and (to) promote the equality of women and men in all its activities” (i. e. gender mainstreaming), in practice the European Union fails to integrate a woman's perspective into its activities on immigration and

integration. Although we can note some recent positive developments (see for example the “Roadmap for equality between women and men”⁴, adopted in March 2006, which recommends a gender perspective on migration and integration), issues related to gender and to ethnic minorities tend to be covered by separate and compartmentalised policies rather than an integrated approach.

1. The status of migrant women

1.1 Family reunification

The status of migrants who are joining their spouse under family reunification - the majority of whom are women - is linked to that of the principal legal status holder, i.e. their partner, depriving them of an independent residence/work permit. This directly affects the situation of migrant women who may lose their provisional residence permit in the event of divorce or the departure of their husband, in the year following their arrival. It can dissuade women who have experienced domestic violence from making an official complaint. It can also result in “brain waste”⁵, with skilled migrant women remaining unemployed or in occupations far below their qualifications.

At the EU level, family reunification is ruled by a 2003 Directive on the right to family reunification. The Directive does not provide for an independent resident/work permit to the spouse once arrived in the host country.

★ How to move forward?

Grant automatically an **independent status and work**

¹ The research and analysis in this article were conducted in the framework of the project “Equal rights, Equal Voices – Migrant women in the EU” (2006-2007) – More information on the EWL website: www.womenlobby.org.

Although the term “migrant” used in this paper refers mainly to non-EU citizens, some of the issues addressed are also valid for persons of third-country origin with an acquired European nationality, as well as women refugees and ethnic minority women.

² Female migration: Bridging the Gaps through the Life Cycle, UNFPA-IOM Expert Group Meeting, May 2006, 3

³ Migration and public perception, Bureau of European Policy Advisers, European Commission, 4.10.06, 33

⁴ Roadmap for equality between women and men, Communication from the European Commission, 1.3.06, COM(2006)92 final

⁵ UNFPA 2006, 34

permit to the spouse of the principal legal status holder at the earliest opportunity in order to fully guarantee and protect their rights and to facilitate their social integration.

1.2 Personal status law

The personal status of migrants in Europe is regulated either by the law of a person's habitual place of residence or by personal status law. In the absence of bilateral agreements, the situation differs from one country to another, with each country using its own private international law, and it is up to the national courts to identify and apply the law pertaining to the situation. This sometimes results in legal conflicts between foreign family codes, international conventions signed by the host country and the fundamental values and rights guaranteed by the host country.

Some women may be required to refer the matter to a court in the host country in order to set aside judgments delivered by a foreign court (e.g. repudiation) that are incompatible with women's fundamental rights guaranteed in the EU. This might be difficult for migrant women who may not know

their rights or the language of the host country well enough or do not have the means to afford legal support.⁶

★ How to move forward?

Develop European guidelines ensuring that any provision in foreign legislation relating to migrant women living in EU Member States which is **contrary to the Charter of Fundamental Rights of the EU, the European Convention on Human Rights and its protocol 7** is identified and not applied; and/or that any sections of bilateral agreements and rules of international private law which violate fundamental human rights, in particular with regard to personal status in the field of marriage, divorce or child custody, are renegotiated, rejected or denounced.

1.3 Undocumented migrant women

Many undocumented migrant women are in situations of severe distress and precariousness and their basic fundamental rights are denied. Yet undocumented migrants do have rights, including the right to health care, to fair labour conditions, to education and training, to shelter, the right

to family life and to moral and physical integrity⁷. These rights are guaranteed by international conventions, including the European Convention on Human Rights and the EU Charter of Fundamental Rights.

The European discourse on undocumented migrants mainly focuses on the issue of returning illegally staying third-country nationals⁸, and do not encompass the "push factors" for migrant women to migrate, such as oppressive gender relations, sexual violence and more generally political and cultural structures and practices that violate women's human rights.

★ How to move forward?

- ★ Before taking a return decision, the EU Member State concerned, in cooperation with the country of origin, should undertake a **risk and security assessment procedure** in order to ensure that women are not placed in situations of gender inequalities, violence and other gender-based human rights violations that they have been trying to escape by leaving their country of origin.
- ★ Inform undocumented migrants of their **basic fundamental rights**, as

⁶ Marina Da Silva, *Ces Françaises, victimes d'un droit personnel étranger*, Le Monde Diplomatique, November 2005

⁷ PICUM "Ten ways to protect undocumented Migrant Workers", October 2005

⁸ See for example the Commission proposal of a Directive on common standards and procedures in Member States for returning illegally staying third-country nationals, 09/2005

guaranteed by national legislations as well as European and international human rights instruments.

2. Violence against women

2.1 Domestic violence

The phenomenon of domestic violence is underestimated by the EU and the European governments and not being considered a political priority. Even if there are important differences among the Member States, the overall trend is a lack of appropriate legislation and protection against gender based violence and of services for the support of victims.

“The phenomenon of domestic violence is underestimated by the EU and the European governments, and appropriate legislation is lacking.”

Domestic violence penetrates every society, group and income level. Migrant women can however be extra exposed in that “the strains of moving to a new environment, unem-

ployment, inadequate wages and racism can lead to frustration that finds its outlet in the abuse of female partners”⁹, the United Nations Population Fund report 2006 notes.

★ How to move forward?

Develop services and shelters for women victims of domestic violence and guarantee access for all migrant women regardless of their legal status.

2.2 Harmful traditional practices

Cultural and religious practices that systematically violate women’s human rights and discriminate against women and girls are still present in the EU today.

In its report on women’s immigration adopted in October 2006, the European Parliament affirms that “Human rights violations against immigrant women and girls in the form of so-called honour crimes, forced marriages, genital mutilation, or other violations cannot be justified on any cultural or religious grounds and should in no circumstances be tolerated”¹⁰.

★ How to move forward?

★ Recognise that **all forms of gender violence are crimes** and that particular

forms of violence are faced by migrant women, such as honour based violence.

★ Ensure that services to support victims of violence are equally accessible for all migrant women.

2.3 Sex trafficking

Human trafficking is the third most lucrative illicit business after arms and drug trafficking. Increasingly, restrictive immigration policies in the EU limit the possibility of entry of migrant women, which drives would-be migrants to unwittingly entrust themselves to traffickers¹¹. The 2004 Council Directive¹² grants temporary residence permits to victims of trafficking in human beings if they assist the competent authorities and give evidence against the traffickers. This conditional element undermines the support to the victims of trafficking. Overall, the European legal framework on trafficking fails to address the main causes of trafficking, which is the demand for commercial sex and women’s unequal status and access to resources in their countries of origin.

★ How to move forward?

★ Develop programmes of **social inclusion and rehabilitation** for women and

⁹ UNFPA 2006, 36

¹⁰ Report on women’s immigration: the role and place of immigrant women in the European Union (2006/2010(INI)), European Parliament, 24.10.06

¹¹ UNFPA 2006, 44

¹² Council Directive 2004/81/CE of 29 April 2004 on the residence permit issues to third-country nationals who are victims of trafficking in human beings or who have been the subject of an action to facilitate illegal immigration, who cooperate with the competent authorities.



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Participants at the Women's Lobby Seminar "Migrant women in Europe speak out"

children who have been the victims of trafficking. Introduce measures enabling special residence authorisation to be granted in special cases in order to enable foreign victims who are in an irregular situation to escape from violence.

- ★ Address at national and European level in a coherent and sustainable way the demand for commercial sex as one of the main causes of sex trafficking.

3. Women's sexual and reproductive rights

Women's sexual rights include the right to control their sexuality and the provision of sexual and reproductive health-related services. These rights concern not only women's health, but also their dignity and freedom. Migrant women tend to be vulnerable due to their insecure economic and social situation. Studies have found that migrant women in the EU receive

inadequate or no antenatal care, and show higher rates of stillbirth and infant mortality¹³. Migrant women also have a higher incidence of unplanned pregnancies owing to poor access to family planning and a lack of information regarding contraceptives and how to obtain them.

★ How to move forward?

Migrant women, irrespective of their legal status, should have access to public funds to ensure **safe, equal, culturally sensitive health services and rights**, in particular sexual and reproductive health and rights.

4. Health

In all EU countries the feminisation of poverty, the high unemployment rate among women and the large presence of women in jobs with bad or no social protection, accompanied by an increase of women as heads of single-par-

ent families, are obstacles for the improvement of the level of health for women.

For migrant women, the absence of knowledge of the host-country language and of the health/social security system or the low-paying and exploitative labour conditions constitutes additional obstacles to access to health care. Mental health is also an issue for migrant women: "women migrants are a main source of physical and emotional support for older and younger family members. As such, women have additional responsibilities, whether they migrate with their families or leave them behind, and additional stress that can strain the fabric of their lives. The cost to their families and communities may not be completely quantifiable, but it is none the less real"¹⁴.

★ How to move forward?

Guarantee free access to **information, counselling**

¹³ UNFPA 2006, 36

¹⁴ Female migration: Bridging the Gaps through the Life Cycle, UNFAP-IOM Expert Group Meeting, May 2006, 3

as well as appropriate, affordable and quality health care for all women, including women who do not have a valid residence permit.

5. Education and employment

Education is important, not only to acquire knowledge, but also as formal and informal information on norms and values in society. 50% of migrant girls in Europe do not go beyond compulsory education, while only approximately 17% go through tertiary education¹⁵.

Economic empowerment of migrant women is crucial to improve their situation. Barriers preventing migrant women from accessing the formal labour market are often linked to social isolation, lack of access to information, language

barriers, racist attitudes and the absence of an independent legal status under family reunification¹⁶.

A significant proportion of migrant women work in the **domestic sector**, caring for children of others and/or cleaning in private homes. The fact that many domestic workers are undocumented increases their vulnerability. Many work in intolerable conditions, are exploited, held in virtual captivity and are physically and psychologically abused¹⁷.

How to move forward?

- ★ All migrant women, whatever their status, should benefit from **special training courses** allowing access to the labour market.
- ★ Facilitating access to employment for migrant women (who often do not

benefit from the support of extended family in the host country) requires the availability, accessibility and affordability of **care services for dependants and people with additional support needs** (children, older people, disabled persons...).

Conclusion

In conclusion, the European Women's Lobby stresses the urgent need to make migrant women more visible and to develop a gender-specific approach to EU policies and legislations in the fields of immigration and integration. EWL recalls that all women, including migrant and minority women, must have equal access to their fundamental rights, without any differentiation based on their status or origin.



The European Women's Lobby

Founded in 1990, the European Women's Lobby (EWL) is the largest alliance of women's non-governmental organisations in the European Union with more than 4000 member organisations. The mission of the EWL is to work to achieve equality between women and men, to promote women's empowerment in all spheres of public and private life and to eliminate all forms of violence against women. EWL provides regular input on all areas of EU policy development and implementation that have an impact on women's lives. It ensures that women's NGOs across Europe are informed of European issues and it supports their involvement in advocacy, lobbying and campaigning. EWL works within democratic, open and transparent procedures of communication, decision-making and accountability, including financial accountability. <http://www.womenlobby.org>

¹⁵ Eurostat, Statistics in Focus, 3-2/2003, p. 1

¹⁶ 'L'Union européenne et les femmes immigrées et le marché du travail' I. Carles, Rabat, mars 2006

¹⁷ UNFPA 2006, 51

A gender perspective on discrimination

*Equal Voices Interview with Louise Arbour,
United Nations High Commissioner for Human Rights*

Is there a feminisation of racism and discrimination - similarly as some people speak of the feminisation of poverty – and if so, what should governments do about it? *Equal Voices* (EV) talked to Louise Arbour.

EV: Are migrant and minority women particularly vulnerable to discrimination in the EU?

I think it is important to underline that racism and discrimination can have a disproportionate impact on women and girls in every field of life – in education, employment, housing, and in both the public and private spheres. Women's experiences of racism and discrimination often differ from those of men because women and girls may suffer multiple forms of discrimination, both on the grounds of gender and on the basis of ethnic or religious identity. Such multilayered discrimination affects, for example, Roma women, as well as other minority and migrant groups in EU countries. Applying a “gender lens” is vital to understanding the full picture of complex and intersecting forms and experiences of discrimination.

The multiple discrimination faced by migrant and minority women makes it necessary to develop innovative ways to raise awareness about women's rights, to empower women and to inspire them to take on leadership roles in their communities to promote human rights.

EV: What should governments do to protect migrant and minority women from discrimination? Do we need gender-specific protection mechanisms, and if so, which?

As a first step governments must identify and acknowledge trends of discrimination against migrant and minority women, which often remain hidden. To this end, it would be necessary to collect disaggregated data accounting for gender, as well as racial, ethnic or religious identity.

Another equally important step is putting in place and enforcing strong and comprehensive anti-racism and anti-discrimination legislation encompassing appropriate penalties for violations. Governments take different approaches to legislation, one of which is to adopt gender-specific legislation and protection mechanisms. Another is to incorporate strong gender provisions within specific pieces of legislation, such as education or labour law. We do need to see more countries adopting stronger anti-discrimination legislation generally. However, importantly, we need to ensure that legislation



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**Louise Arbour,
UN High Commissioner for Human Rights**

is better implemented and enforced in practice if it is to serve its purpose.

Women's equal rights are covered by all existing international human rights treaties. However, implementation and enforcement of these standards still lag behind. Thus, specific protection mechanisms to ensure women's rights, alongside strong domestic legislation, can certainly be beneficial to cover

implementation and enforcement gaps. It has become clear that the lack of effective enjoyment of economic and social rights by women also hampers their effective access to justice. Discriminatory practices limiting women's access to housing for migrants and minorities may contribute to discourage them from reporting abusive relationships and domestic violence. In such contexts special protective measures clearly need to be adopted.

While United Nations entities and non-government organisations alike for decades have spoken up for women's rights, the main challenge remains: empower women to stand up for their own rights and promote their realisation. Without

EV: There are sometimes concerns that gender equality is an issue of particular sensitivity for some migrant or minority communities. How far does the right of governments go to protect women from culturally motivated discrimination, even leading to violence, by their own community - particularly where this could be seen to be in conflict with the respect of different cultures or freedom of religion?

There is a tendency to believe that gender inequality and violence against women are prevalent only within certain societies and certain communities. In reality, gender-motivated discrimination and attacks exist and happen everywhere. They are matters of concern for all. All States have the

tural and religious differences, while not turning a blind eye to cultural, religious or traditional practices which violate the human rights of women or any other individuals.

Equality and non-discrimination are fundamental principles of human rights law. Governments have the primary responsibility for protecting and promoting the rights of all. I believe that this responsibility extends to the requirement for governments to engage more deeply with minorities and other communities collaboratively and constructively to attain non-discrimination. Through dialogue and consultation, and through a variety of legal, but also social, educational and economic means, we can collectively encourage and ensure the advancement of the rights of women in ways that are not incompatible with cultural or religious beliefs. In any situation where discrimination leads to violence, governments have a clear responsibility to act and to protect the individual from harm, irrespective of whether this violence is motivated by culture or religion. Condoning discriminatory practices and related violence, including for example honour crimes, represents a government's abdication of responsibility and a denial of justice to victims.

“Applying a ‘gender lens’ is vital to understanding the full picture of complex and intersecting forms and experiences of discrimination.”

such empowerment at local, regional and national levels, whatever measures taken by governments will invariably only have a limited impact or, at best, are not sustainable. At the very core of empowerment lies education and access to justice and the elimination of discrimination against women in political and public life.

obligation under international human rights law of creating favourable conditions to enable persons belonging to minorities to develop their culture, language, religion, traditions and customs. Specific practices, however, must not violate national law and international standards. This means that governments must respect cul-

UN human rights system and the protection of women, migrants and minorities

Women from migrant and minority communities may face multiple forms of discrimination; both because they belong to certain migrant or minority communities, and also because they are women. The following international instruments address and contribute towards their protection:

- ★ **The Universal Declaration of Human Rights** (1948) states that all human beings are born free and equal in dignity and rights. This declaration, and the seven core international human rights treaties, establishes the principles of non-discrimination and equality before the law, which may require states to take positive measures in order to ensure the effective enjoyment of these rights.
- ★ **The International Convention on the Elimination of All Forms of Racial Discrimination** (1965) defines racial discrimination as “any distinction, exclusion, restriction or preference based on race, colour, descent, or national or ethnic origin” (Article 1). This instrument contributes significantly to the protection against discrimination of groups and their individual members. The General Comment number 30 by the Human Rights Committee requests states to protect non-citizens “regardless of their immigration status”.
- ★ **The International Covenant on Civil and Political Rights** (1966) establishes that “in those States in which ethnic, religious or linguistic minorities exist, persons belonging to such minorities shall not be denied the right, in community with the other members of their group, to enjoy their own culture, to profess and practice their own religion or to use their own language” (Article 27). The Committee identifies in its General Comment number 23 that “migrant workers or even visitors in a state party constituting such minorities are entitled not to be denied the exercise of those rights”, and “the individuals designed to be protected need not be citizens of the State party”.
- ★ **The United Nations Convention on the Elimination of all Forms of Discrimination against Women** (1979) defines what constitutes discrimination against women and provides a basis for realizing equality between women and men through ensuring women’s equal access to, and equal opportunities in, political and public life, as well as education, health and employment.
- ★ **The International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families** (1990) gives a definition of the term migrant worker and seeks to prevent and eliminate the exploitation of all migrant workers and their families throughout the migration process. This convention is complementary to labour standards developed by the International Labour Organization (ILO), especially through the conventions 97 and 143.
- ★ **The Declaration on the Rights of Persons Belonging to National or Ethnic, Religious and Linguistic Minorities** (1992) specifically addresses persons belonging to minorities and the obligation of states to create favourable conditions to enable persons belonging to minorities to develop their culture, language, religion, traditions and customs - except where specific practices are in violation of national law and international standards. This declaration recognises the right to existence, the protection of their identity, the right to participate effectively in cultural, economic, public, religious and social life and in decisions concerning them, as well as the right to use their own language.

For more information, see <http://www.ohchr.org/english/bodies> and <http://www.ohchr.org/english/issues/index.htm>.

Migrant Women in the EU – a view by the Committee of the Regions



The Committee of the Regions discusses migrant women issues.

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legal migration, both in order to promote the integration of immigrants who comply with the laws of the host countries and to strengthen the fight against illegal immigration and irregularities. Optimum integration of immigrant women and men is crucial to ensure full integration of the second and third generations of persons of foreign origin, given the role played by women in the development of society.

The rapporteur drew attention to the special situation of migrant women of all ages, but particularly young girls of foreign origin, who are sometimes torn between the cultural identity passed on by their families and their attraction to the new identity promoted by the society they have grown up in. These girls need specific attention, to enable them to become one of the real strengths underpinning the new Europe.

Local and regional authorities have acquired considerable experience in policies relating to reception, mediation, labour market access, welfare for migrant women, and combating different forms of exploitation and violence, which may be useful in drawing up new European strategies and programmes. On 10 October 2007, the Committee of the Regions (CoR) adopted the outlook opinion on „The Situation of Migrant Women in the European Union“. The rapporteur for this opinion, Ms Sonia Masini, is president of the regional province of Reggio Emilia, Italy.

The CoR reiterated the need for a comprehensive European migration policy that provides for coordinated approaches between the Member States and local and regional communities, and coherent measures on

“Optimum integration of women is crucial to ensure full integration of the second and third generations.”

The members of the CoR noted that, especially in the case of migrant women, conflicts may arise between different categories of individual rights and the right to cultural and religious identity. They believe that the latter should be safeguarded, provided that the practices deemed to express this identity do not violate fundamental inalienable rights and are consciously chosen by women rather than imposed by the family network or community to which they belong and/or the community of origin.

When framing youth policies, the measures developed must include the cultural and gender diversity of young people of foreign origin, using their potential as a resource for intercultural mediation, and encouraging the establishment of dedicated forums for cross-cultural encounters and the development of a culture of women’s associations.

The CoR confirmed its support for the European Commission’s aim to draft a general framework directive on the rights of third country citizens legally employed in a Member State and to address the problem of the recognition of professional diplomas and qualifications gained in the countries of origin.
http://coropinions.cor.europa.eu/CORopinionDocument.aspx?identifier=cdr\ecos-iv\dossiers\ecos-iv-013\cdr396-2006_fin_ac.doc&language=EN

The invisibility of visible ethnic elder women across Europe

By Prof. Naina Patel



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Ability, activity in old age, not passivity.

Shades of visibility

The experience of discrimination faced by Europe's women, minorities¹, and older people, among other disadvantaged groups, is well recognised. Increasingly, women and minorities are being linked by various organisations through cross-cutting gender and 'race'/ethnicity research and policy initiatives across the EU27. However, what is less well recognised is the significant intersection of age, ethnicity and gender dimensions and the combined impact of ageism, sexism and racism. Once this is recognised, it is important to consider the appropriate responses in terms of research, policy and practice.

Discrimination and poverty are connected and explain much more about the position of today's Europe's minorities, rather than vague notions of the influence of culture, language and religion. We know, for example, that poverty has an age and gender face: poverty among elder women is higher than their male counterparts in 25 EU Member States; and women aged 75 or more have to confront the highest risk of poverty, according to Zaidi². This significant research publication, using Eurostat's CRONOS database, provides a valuable European comparison of old age poverty and represents an important advance in our knowledge. However the data cannot say anything about poverty

among women of minority or 'migrant' backgrounds ageing today in Europe. Does it matter that this is not possible? For instance, one could argue that 'poverty is poverty' and that the benefits of any policy changes arising from such research and consequent policy initiatives will trickle down to both 'majority' and 'minority' elder women by virtue of them being just that - simultaneously women and old. While this is partly true, there is a need to consider possible differential consequences of policy action for two reasons:

First, research in some European countries shows that apart from a strong gender dimension among elder women, poverty is also significantly

¹ The terms 'minorities' 'minority ethnic' 'migrant' are used interchangeably below to reflect the diversity of ethnic populations across the EU27.
² Zaidi, A. et al (2006), Poverty of Elderly People in EU25, European Centre for Social Welfare Policy and Research, Vienna First Report „Poverty of Elderly People in EU25“, http://www.euro.centre.org/data/1159256302_97834.pdf

influenced by ethnicity. Minority elder women³ are likely to be poorer than their majority elder women peer.⁴ In this sense being an older woman is disadvantageous and being additionally a minority, even more so.

Second, minority ethnic elder women – as with minority ethnic elder men - do not experience the benefits of policy shifts equally. This is partly because organisations that represent women or older people’s interests are in the main focussed on their primary groups. Therefore the specific issues affecting minority elder women may not make it onto policymakers agendas; or, if they do, the solutions implemented are not appropriately crafted. The absence of data, both official and unofficial, means that the organisational and institutional infrastructures that facilitate policy creation and influence change are even less likely to be geared to minority ethnic elder issues. Furthermore, although the proportion of minority ethnic elders is rising rapidly, it is still a relatively small segment of the relevant population compared to the majority population. Numbers rather than needs reinforce the invisibility of such groups.

Understanding multiple discrimination in income and health

Given the above situation, should minority elder women just passively accept the inevitable, with no likelihood for a tailored policy response? The answer is clearly not. First, our understanding of multiple discrimination concerning minority elder women is increasingly enhanced by individual and organisational research efforts designed to circumvent the absence of official data or the narrow focus of mainstream organisations. Second, there are countless examples

“In this sense being an older woman is disadvantageous and being additionally a minority, even more so.”

of self-help initiatives by elder women from minorities, who have created organisations to support elders or have a broader focus. Many aim to combat exclusion and work to counter discrimination in goods and the provision of services. This type of social

capital and resistance to ‘invisibility’ is captured by some of the research and developments cited below.

Income and multiple discrimination

NPOE - Netherlands Platform Older People and Europe with its partner organisations⁵ established a programme called AGE+ Project to increase research and promote knowledge of minority women’s income as they age. Using secondary sources of data, MERI Consortium as a member of AGE+ Project found that in spite of the absence of data or differences in definitions or concepts, minority women at 40+ in Austria, Germany, Netherlands and Italy had lower educational levels than minority men and majority women of their age; and there was concentrated employment in low wage sectors, including domestic work in private households. Poverty is a likely consequence in these circumstances. MERI therefore argued for integration measures on age related issues (increased access to education and training for older workers), gender related issues (a reduction in the gender pay gap and improvements in the family and employment

³ The age of 50+ is used as the marker for ‘minority ethnic elder’ rather than chronological age of 65 years associated with retirement. This is to recognise known ‘early ageing’ among minorities – albeit these circumstances will change over time. It should be noted that in daily life minority ethnic elder women do not define themselves as such, and the same applies to ‘majority ethnic elder women’.

⁴ Migrants and minorities are also likely to experience a lower pensionable income because they are in low paid jobs or experience long bouts of poverty. Further, in old age they may suffer from a lack of knowledge of benefits, which could potentially cushion them from lower pensions and poverty.

⁵ The AGE +Project (2005) was coordinated by NPOE with partners including PRIAE, EURAG, MERI, OWN Europe, E-Quality and COSPE. It was supported by the European Commission as part of European Action Program to combat poverty and social exclusion.

balance), and ethnicity related issues (through recognition of overseas qualifications and the removal of legal barriers to employment). These were intended to positively affect minority elder women. For example, in the NPOE AGE+ guide we find common expressions as Esme from Austria says ‘when I’m 60, I hope I’ll get a pension’ or Rohangiz ‘I hope my daughter will be able to support me in old age’. These are not exceptions and show real fears of economic insecurity in old age, over and above health, family and personal issues of loss and ageing in a ‘home’ different from the one originally envisaged by many during migration.

PRIAE (2005) research as part of the AGE+ Project revealed that in the UK there are earning gaps reflecting the combination of age, gender and ethnicity: the income of white younger women (age 25 or less) exceeds that of ethnic minority men in the same age group; thereafter ethnic minority men achieve higher incomes than white women. But minority ethnic women experience lower income than both groups at all ages, declining further relatively after 50+ years. There are differences among minor-

ity ethnic women in terms of employment participation rates (e.g. Chinese and Indian women show higher participation compared to African Caribbean women) and the average earnings also show a variance with age and parental status. Sources of reliance are also important: white widows and widowers rely proportionally more on occupational pension schemes in old age than minorities for their income.

Women from majority and minority groups have different experiences concerning access to pensions and employment. These differences require specific pension measures which are ethnically-age and gender responsive, as proposed by PRIAE to the UK Pensions Commission. But raising issues with policymakers is not sufficient, as elders in the UK, for example, have previously commented, ‘We have had too much discussion, not enough action’. The work of ME²PN⁶ shows that some minority ethnic elder women and men are very capable of expressing their experience of incomes in a way that can be useful to policymakers and planners. The project aims to increase confidence and build capacity in policy among many minority ethnic elders so

that they can participate effectively as users and/or citizens in policy matters and, in turn monitor and influence progress. What is required to achieve this is good information, clear mechanisms applied strategically and, above all, creation of opportunities and access – with sustainable funding.

Health and multiple discrimination

The Minority Elderly Care (MEC)⁷ project is the largest initiative to date across Europe in the area of minorities, ageing and health. MEC involved primary quantitative research which generated data and information on over 3,000 minority ethnic elders covering some 25 ethnic groups; over a thousand health and social care professionals including doctors and 312 non-profit voluntary organisations in 10 European countries. MEC research shows that minority elder women experience a range of conditions, service and professional barriers and remain largely invisible in care policy and practice agendas. Family patterns are changing everywhere and the common view that ‘minorities look after themselves’ (thus there is no need to consider minorities’

6 ME²PN (Minority Ethnic Elders Policy Network) is a policy-specific initiative – further details from ian.smith@priae.org

7 MEC research by PRIAE was supported under the DG Research 5th Framework Funding Programme under Quality and Ageing, 2001-2004

ageing) is incorrect. Apart from these changes in family patterns, ethnic elder women are also facing acute ill health problems related to cardio-vascular disease, diabetes, musculoskeletal disorders and mental health. This clearly should necessitate a greater demand and use of health and social care services.

However, the MEC data across all the 10 countries reveal an under-utilisation of services due to a range of factors, including lack of knowledge, language difficulties, income, inappropriateness of services (lack of cultural mix), discriminatory assumptions and complexities of health systems. Health and social care professionals cite racism and discrimination that they have observed among other service users and professionals. The presence of antithetical attitudes in an environment of care may further reduce the take-up of services that minority ethnic elder women desperately need to improve their lot in the ageing process. In spite of this, when health and social care services are accessed and used, minority ethnic elders show clarity in their expectations: services must be quality-based and not just culturally appropriate. This is an impor-

tant finding, since for too long the issue of ageing among minorities has been limited to a focus on cultural and linguistic adjustments (something which authorities are also challenged by and often do not meet). Increasing knowledge to effect change through fundamental research, as with the MEC research initiative, is an important basis for advancement by Europe's minority ethnic elder women and men.

Visibility in action and progress

Research in areas such as minorities and discrimination is insufficient if it does not change the world for the better. Research must create conditions where minority elder women can derive hope and aspire to better quality of life as they age. In this respect the Ageing Actively in Minorities (AIM) Programme, Mental Health⁸, Palliative Care and Hospital Care work show the central importance of overcoming discrimination in access and care services, while increasing awareness of health through clear, tailor-made information and its use. Support for professionals working in these areas and the participation of minority ethnic elder women and men

through community investment and engagement are also essential. Such involvement is crucial in the development of tangible tools and resources for this target group – e.g. a patient diary created by an 87 year old minority ethnic woman to overcome 'language barrier and self-manage hospital entry and process directly with staff'. Such involvement further reinforces minority ethnic elders' capacity to advocate for themselves and/or the creation of mentors among different minority ethnic elder women and men groups. In the process, such work is also generating employment and preparing the next generation of workers who could work effectively with minority and majority ethnic elder women and men, as well as be informed by them, since learning is a two-sided process. The significance of a diverse ethnic workforce, as well as the entrepreneurs among them, has been highlighted by the CEMESME (Contribution of Ethnic Minority Employees to Small and Medium Sized Enterprises)⁹ initiative. Since health care is labour intensive, and population ageing increases the demand for health care preparation for an effective diverse ethnic workforce can benefit both majority and

⁸ These health specific developments are all 'first of its kind' in covering policy, research and service innovations with community investment methods. Further details on AIM from yolande.watson@priae.org; on Hospital Care carrie.ho@priae.org and Palliative Care yasmin.gunaratnam@priae.org

⁹ CEMESME has established a large dataset into the characteristics of employment and diversity, organisation and performance, further details from ahsan.malik@priae.org

minority women and men for now and in the future.

The examination of income and health above shows that the impact of discrimination is not always direct, but rather indirect in access, services and delivery through a lack of recognition of minorities' ageing *per se*; and that ageing issues differ across women and ethnic groups. Notwithstanding discrimination and disadvantage,

much research work shows the importance of independence, dignity, a close relationship with services, and culturally and linguistically appropriate management of care for minority ethnic elder women and men. Such investments in the area of health and social care can also be useful for majority groups.

What is clear in practice is that gains are often made by minority ethnic elder women and men by establishing local organisations which provide direct services and/or information, policy and service innovations. In this sense, indeed, 'they are looking after

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MEPs Claude Moraes and Stephen Hughes support research on European Minority Elders' Care at the European Parliament; Prof. Naina Patel (Third from the right)

themselves.' This raises further issues regarding equality of treatment and rights since most of these organisations are self-financing and do not have the infrastructural support of mainstream large civil society organisations. Without the minority ethnic age organisations or specialist organisations that cater for such groups directly, minority elder women would remain invisible – and worse, still not be supported. The challenge for mainstream equality organisations within and across Europe, is whether they are prepared to engage with and invest in minority initiatives and organisations.

In doing so they will recognise that they can learn much about the causes and consequences of multiple discrimination. This process will allow them to understand and address the issues facing 'invisible' groups such as minority elder women – and as they become 'visible' this will lay the foundation for progress for all.

Naina Patel is founder and executive Director of the PRIAE Policy Research Institute on ageing and ethnicity as well as professor in ageing and ethnicity at the Centre for Ethnicity & Health, University of Central Lancashire.

Employment obstacles for black and immigrant women - A case study from the Netherlands

By Drs. Hellen Felter

Statistical data⁵ show that a large gap between the employment situation of ethnic minorities and that of the dominant Dutch population continues to exist. In general, the white Dutch population scores with an unemployment rate of 4% better than people who belong to non-dominant groups of society. However, figures vary among the different immigrant groupings: while 19% of Moroccans, 19% of Antilleans and 18% of Turkish people are unemployed, immigrants with a Surinamese background are comparatively better off. 12% of Surinamese are without work.

Figures from the Annual Integration Report 2007⁶ show that among white Dutch women, 58% are active on the labour market, while labour participation among women of Surinamese descent has increased (to 61%) above the level of the white Dutch women: however, there are striking differences among ethnic immigrant groups concerning labour participation. In particular, participation among Turkish and Moroccan women turns out to be low: only 31% of both female groups are employed.

Research in the Netherlands also shows that non-dominant

female groups are confined to specific sectors in the labour market. For instance, half of the Turkish and Moroccan women work in the sector in which white women do not (want to) work. Not only do immigrant and refugee women have to accept the less wanted jobs; they often also have to perform work far beneath their educational level.

In general, non-dominant groups are over-represented in elementary and lower profes-

sions. Data⁷ also indicates their over-representation in agriculture and industry, i.e. sectors involving hard and unskilled labour. One in four Turks and Moroccans and one in five non-western immigrants work in such sectors. In contrast to that, 16% of the Antillean minority, 12% of the Surinamese and only 6% of white Dutch are employed in this field. Representation in the other economic sectors is almost the same among the white Dutch, Antilleans and Surinamese people⁸.

Facts and figures:

- ★ The Netherlands have a population of 16.4 million of whom 3.2 million are persons with a foreign background. Around 1.7 million belong to the non-dominant groups (blacks or immigrants) or to groups targeted by Dutch integration policy¹.
- ★ The unemployment of non-dominant people is much higher than the average of 4% among the only-white Dutch population. Unemployment among Moroccan people is, for instance, 19%, among Antilleans 19%, among Turkish people 18% and among people with a Surinamese background 12%.²
- ★ According to CBS data, 22% of young black and immigrant people were unemployed in 2006. In comparison, among their white age group the unemployment rate was only 9%.³
- ★ In 1996 and 1997 unemployment amongst black and immigrant people was 3.5 times higher than among white Dutch. In 2006 the situation still remains the same.⁴

1 SCP Jaarrapport Integratie 2007

2 SCP Jaarrapport Integratie 2007, Annex B6.5a

3 SCP Jaarrapport Integratie 2007, p.141

4 SCP Jaarrapport Integratie 2007, p.139

5 SCP Jaarrapport Integratie 2007, Annex B6.5a

6 SCP Jaarrapport Integratie 2007 Annex B6.1a

7 SCP Jaarrapport Integratie 2007, Annex B6.8

8 SCP Jaarrapport Integratie 2007, Annex B6.8

Specific areas of concern are the high unemployment among young people, the increasing numbers of long-term unemployed Turks, Surinamese and Antilleans/ Arubans and the poor employment position for people with a refugee background. Although some groups, especially the young males and females from non-dominant groups, are highly educated they often start their career working below their qualification levels and upward mobility is regularly slow.

Furthermore, the situation for members of ethnic minority groups with a handicap or a long-term illness needs attention. These people often face multiple discrimination, thus rendering their labour reintegration into a long and difficult process. Projects for reintegration do not reach many handicapped members of ethnic minority groups because official institutes are inept or insufficiently equipped to address the specific problems faced by these groups⁹.

Black and immigrant women, who have lower employment rates and wages than their white peers, also have a fractured pension building thus making them vulnerable

to poverty in old age. Also their employment conditions are poorer because they are concentrated in particular low-paid and unregulated working sectors of the economy. Thus there is not only inequality in payment - despite the directive 'equal pay for equal work' - between women and men in general, but also a pay gap between black/ immigrant women and white women.

“There are striking differences among ethnic immigrant groups concerning labour participation.”

Interestingly, it is often stated that such a situation arises because these women are poorly integrated into society and therefore incapable of entering the labour market or even climbing up the career ladder. But this argument prompts a question concerning the second or third generation of women among non-dominant groups. These descendants were born, raised and finished their education in the 'host' country. They speak the language and often have

an impressive track record of appropriate voluntary work. Still they are not accepted, and continue to be treated as if they were invisible. Thus it can be concluded that this is due to racism, xenophobia and other forms of discrimination.

Two crucial factors need to be taken into account when examining the persistent lack of social economic mobility among non-dominant groups, namely: power and education.

First, the status of immigrant groups in the Dutch society is defined by the source of power they can effectively wield: positional or role power, power of possession of goods and services or the power of skills, competences and abilities to provide services that others desire¹⁰. When scrutinizing the social stratification of black, immigrant and refugee communities and/or their second or third generation of descendants in the Netherlands the picture is clear: there is as yet no fundamental base of equality to wield any appropriate measure of power structurally and at a groundbreaking level.

Secondly, education which should facilitate social mobility could also constitute an

⁹ Dick Houtzager, 2000, Dutch Monitor Centre on Racism and Xenophobia, Analytical report on the employment sector

¹⁰ Tumin M.M., 1992, Social Stratification. The forms and functions of inequality



Participants at the TIYE seminar “Towards a Workforce without Discrimination”

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necessary cultural change will indeed take place. This should not only be instigated by governments at a European level, but also by social partners and through local initiatives.

TIYE International recommendations to improve the situation of black and other ethnic minorities in the Netherlands and Europe:

- 1) Enlarge the visibility of all discriminated groups (on grounds of race, ethnic origin, handicap age and gender) by research and publicizing specific data regarding these population groups;
- 2) Increase the participation of non-dominant groups (men and women) in decision making in all aspects of civil, political, legal, economic, social and cultural life;
- 3) Stimulate the media to pay more positive attention to issues regarding people of non-dominant groups and their positive contribution to society;
- 4) Reveal the impact that discrimination has on the lives of those who are confronted with racism, ageism, sexism or other forms of discrimination;

obstacle when continuously implemented on unequal terms. Whether the accessibility to education is affordable or selective - due to high fees, certain grades, quotas or specific networks - the most defining factor is the quality of the education. It has to be maintained and upheld for everyone in any type of school. Therefore, if teaching units are incompetent, unmotivated, prejudged by unfounded conceptions towards black and migrant communities and as professionals unable to deliver high standard education to all pupils regardless of their background, they should be held accountable and penalised for not reaching the normal standards of outputs.

Education in its formal and informal approach should be a life long learning process, a catalyst for social mobility. That is why the recognition of competences, diplomas and occupational levels gained outside of Western Europe should be addressed more sufficiently.

In this ‘European Year of Equal Opportunities for All’ and in the upcoming ‘Year of Intercultural Dialogue’ the enhancement of participation from non-dominant groups must not only concern the workforce, but also decision-making on all aspects of civil, political, legal, economic, social and cultural life. Only under such conditions, it can be ensured that

- 5) Raise awareness to implement anti-racist and anti-discriminatory education at all levels of the education system;
- 6) Organise for junior black and immigrant managers informal meetings with senior managers to enhance their networks vertically;
- 7) Develop a comprehensive approach for anti-discrimination policies and the fight against discrimination on different grounds (on national and European level);

- 8) Identify the existing 'gap' in all European countries between legislation and the actual level of anti-discrimination policies;
- 9) Ensure mainstreaming of measurements to prevent violence and harassment against representatives of non-dominant groups.

TIYE International - established in 1994 - is the umbrella organisation of Dutch, national associations of black, migrant and refugee women. *TIYE* has special consultative

status with the ECOSOC of the United Nations. Besides activities to influence policies in favour of the social-economic position of black, immigrant and refugee women, TIYE International also develops awareness-raising campaigns regarding gender, race, ethnicity and equality.

Drs. Hellen Felter is an Executive board member of Tiye International.

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The dilemma of black women

Equal Voices Interview with Beatrice Achaleke, AFRA, Austria

EV: What are in your view the main challenges that minority women face in the EU?

Challenges faced by minority women in Europe are very diverse, depending on the individual specificity of the EU Member State in which they live, the history of migration in that country, existing legislation and laws governing migration, the ability and willingness of those countries to recognise and respect the presence of immigrants, and the openness of the society and its population.

Minority women in the EU also encounter different challenges depending on their origin, physical appearance, religious belief, sexual orientation, age, and the size and history of the communities in which they live. Many are constantly confronted with, and have to fight against, institutionalised racism, and different mechanisms of institutional and social exclusion. This includes limited or no access to the labour market, social and health facilities, education and political structures. Extremely exclusive legislative policies, coupled with the constant fight for recognition and respect, make life very difficult for some minority.

Furthermore, some communities especially black communi-

“Black women continually have to justify their true value to society, and have to struggle for the recognition and respect they deserve.”

ties, Roma and Sinti, and Muslims are generally stigmatised as criminals (thieves, drug dealers, prostitutes, false asylum seekers, abusers of the social system, terrorists etc.).

EV: Are there any particular issues affecting black women?

Black women belong to that visible minority in the European Union who are constantly confronted with different forms of multiple discrimination, due to their skin colour, their origin, their sex and their religion. In addition to classical forms of discrimination and social exclusion faced by immigrant women, black women



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**Beatrice Achaleke,
a promoter of black women’s empowerment**

are exposed daily to racism and sexism at the same time. They are generally considered to be incompetent, lazy, uneducated, poor, submissive, and always in need of help.

Their knowledge, skills, competences and professionalism are often not recognised, and they are reduced to being seen as inferior not only by the majority white society but also by some black men.

Thus black women continually have to justify their true value to society, and have to struggle for the recognition and respect they deserve. This struggle constitutes a constant source of stress in everyday life and is worsened by the lack of black women as role models. There are few black women in key positions - be it in the public sector, in politics, or in the private sector, and this constitutes a big handicap for those aspiring to such positions.

EV: Are black women worse off than black males?

Black women are affected in a different way than from black men. While black men are often considered to be criminals (drug dealers etc), black women are seen as prostitutes, poor victims etc. Both are seen to be abusers of asylum laws and exploiters of the social and welfare system.

EV: What has been your personal motivation to become politically active?

My personal motivation stems from a combination of the desire to have a better world for my children and the conviction that I can make a difference if I try. I wanted to escape from being labelled as a victim (as society sees us and where it wants to keep us), and instead to take an active part in building and shaping the society in which I and my children are living. I also had a strong desire to make my voice heard, to protest against injustice, to become self-determined and to fight for justice and equal opportunities for discriminated groups especially black women.

I felt the need and had the passion to encourage black women through empowering myself and others: to create networks; to build new alliances; and, above all, to challenge the social, political and economic mechanisms which support and allow the exclusion of immigrants especially black women in Europe in general and in Austria in particular. This empowerment is necessary to achieve a better place for my children in the future.

EV: What resistance are you facing and how do you overcome it?

Despite my strong personal motivation, I still often face

barriers like having to convince both black women and funders of the importance and impact of my work. I still have difficulties in gaining access to some important networks, and being influential. Having not enough access to mainstream media, lack of sufficient funding, and the difficulty of motivating others and convincing policy makers also impedes my work. Nevertheless, I am very thankful for those who have so far recognised our work and who have been supporting our activities both financially and morally. However, the biggest challenge still remains, finding the right strategy to formulate and table the needs of black women in a European context. The first Black European Women's Congress 2007 was a first big step in that direction.

EV: What would be your personal message to migrant and minority women in Europe?

Never give up, no matter how tough the going gets. It is very important to have a voice, to participate, to take an active part in designing the communities and societies you are living in. Privileges are never given freely. If you wait to be given a chance, you risk never getting any. You have to fight, not just to have your rights recognised, but most of all to keep them and have them respected by others, especially

the majority. When you are unable to make a change alone, organise yourselves - self-organisation is not a privilege but a right which you can make use of at anytime. Organising oneself for action is a political instrument we (visible) minorities in Europe like anywhere else, cannot afford to ignore. If you do not stand up for your rights nobody will do it for you. We know best what our challenges are, and we have better solutions for them than anyone else. Let's make use of our know-how to fight for our place in Europe, 'our home'.

EV: How can black women be empowered to take on a stronger and more visible role in society?

The key is that black women organise themselves, identify

their needs and fight to make them visible. They must stop playing the role of victims, a role they are most often forced to play, and become active players. It is not an easy task but it is possible and worth pursuing. They must inform themselves about the communities/society they are living in and find out about their rights and make use of them. They should learn the language to be able to articulate their needs, create strategic alliances, even with so-called established organisations, if this will help them to become more visible or facilitate access to the resources needed for visibility. They should join existing networks, make strategic contacts and participate in public meetings and events. Finally, they need to be ever present and

be proactive instead of only reacting.

Many things seem to be very difficult, not because they actually are, but because we never try to change them.

Beatrice Achaleke is the Director of AFRA, the International Center for Black Women's Perspectives in Vienna. She has also currently launched the Black European Women's Network BEWNET. The First Black European Women's Congress was organized on 27-29 September 2007 in Vienna to prepare the launch of BEWNET. BEWNET can be visited online under www.bewnet.eu

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Access denied – Roma’s struggle for public health care

Equal Voices Interview with Soraya Post, International Roma Women’s Network

In 2003 the Council of Europe, FRA (EUMC) and the OSCE published the report „Breaking the Barriers - Romani women and Access to Public Health Care“. Four years later, what has been achieved in EU Member States in the area of addressing discrimination of Roma in access to public health care? *Equal Voices* (EV) spoke to Soraya Post.

EV: Can you point out concrete initiatives that made a change and improved access to public health care for Roma?

Unfortunately, I am not able to provide a very positive assessment of the situation. The problems which were highlighted four years ago still remain to the same extent today. In many cases, the situation has even deteriorated as the general situation of Roma has worsened dramatically. In recent years we have, for instance, seen an increasing number of evictions of Roma who ended up in slum settlements, under bridges and in even worse situations. This has had a tremendously negative impact on health and health care.

Anti-gypsyism is as rampant as ever. It is today evident that the permanent exposure to persecution and fears has a direct negative impact on physical and mental health. Our people have still not recovered from the trauma of the Holocaust, and even today discrimination, humiliation and maltreatment of our people continue in Europe.

If we take this overall negative trend into account, it is very hard to point out any particular initiative which has made a change. Initiatives such as the introduction of Roma health mediators remain of limited impact and in some cases may even serve as a justification not to address the root-causes for the Roma’s poor access to health: discrimination and social exclusion.

EV: Beyond implementing the EU’s anti-discrimination legislation, what else should Member States do in order to address the situation of Romani women?

Introducing and implementing anti-discrimination legislation in line with the EU directive is certainly important but this is not enough. Many Roma are not even aware of their rights, or that these are infringed, and even if they are they do not know where to go to get remedy. Information campaigns and free legal aid are therefore also necessary.

But there is something else which needs to be taken into account, the fact that many Roma, and in some countries



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Fighting for Roma women’s rights: Soraya Post

this may well be the majority, simply drop out of the social system. In Romania and Bulgaria, for instance, in order to be able to benefit from free medical treatment you need to have access to social assistance which many Roma do not have.

Finally, also due to evictions, we have an increasing number of Roma who are living in remote, ethnically segregated neighbourhoods where healthcare facilities do not exist. People are too poor to travel to the next doctor or medical centre. Ambulances systematically refuse to serve

these neighbourhoods, which in some cases has had fatal consequences.

EV: What would you like to have achieved three years from now in terms of improving access to public health care and the situation of Romani women? What will you do in order to address shortcomings in policy making? What can governments do in order to tackle deficiencies in policy making?

The right to health is guaranteed by international law. According to the UN Committee on Economic and Social Rights this implies availability, accessibility, acceptability and quality. Discrimination on ethnic grounds or on the basis of gender is prohibited by numerous laws and treaties. Yet, everyday life tells us a different story.

Only a few years ago, we have had to witness the forced sterilisation of Romani women, or sterilisation without informed consent. This has happened in countries such as Slovakia and the Czech Republic, but cases have also been reported from Hungary. Forced sterilisation of Romani women has occurred in many countries including my own, Sweden, and in many cases seemed to respond to a pattern aimed at reducing the number of Roma. We are expecting an unbiased

investigation in all these cases and a proper compensation of the victims. The culprits need to be punished and prohibited from the further exercise of their profession.

Attention needs to be given to the exclusion of Roma from the public health care system. Until today most studies dealing with the health situation of Roma gave disproportionate attention

“I would like to see states attract young Roma to medical professions. Only if Roma are equally represented in any field of society and have effective power will the situation change.”

to issues such as fertility and contagious diseases which are seen as a threat to the majority population. There are no reliable data about the number of Roma who drop out from the public health system which would be the first step in order to find a practical solution.

Instead of wasting money on health mediator schemes I

would like to see states attract young Roma to medical professions. Only if Roma are equally represented in any field of society and have effective power will the situation change.

As a whole we need to change mentalities. I am a member of the Executive Committee of the European Roma and Travellers Forum. We have just set up several directorates and commissions. I am in charge of the Commission for Women Issues which is part of the Human Rights Directorate. There we address these issues such as the exclusion of Roma from public health from a human rights perspective. We issue recommendations to national governments and international institutions and try to put pressure for these recommendations to be implemented, but the responsibility lies with the state institutions, not with us. We have no power.

Governments need to take the discrimination and social exclusion of Roma seriously and find appropriate remedies. One of the first issues to address in many countries, not only in terms of access to health care, but also many other rights, is to provide Roma with proper documentation, including citizenship. Governments need to understand that Roma are their citizens, and that they have a

responsibility towards them. Many women and children suffer, and even die because, as a result of not having proper identification papers, they have no access to healthcare.

I would like to highlight also the situation concerning the poor psychological health among my people. Many young and older women are addicted to painkillers or medicine like valium or citadon. This is the outcome of living for centuries in exclusion, with no ambitions and no vision for the future. This problem is fast growing in the Roma community.

There is today an alarming tendency of states and public authorities to call on the EU or foreign donors every time they need to address the problems of Roma. This needs to stop. States need to be told that they are as responsible for their Roma citizens as they are for any other citizen.

EV: The Empowerment of Romani women has been one of the topics of the international conference in December 2007. What does empowerment mean for you, and what message would you like to convey on this issue?

Empowerment for me means putting people in a position where they have effective possibilities to exercise their rights

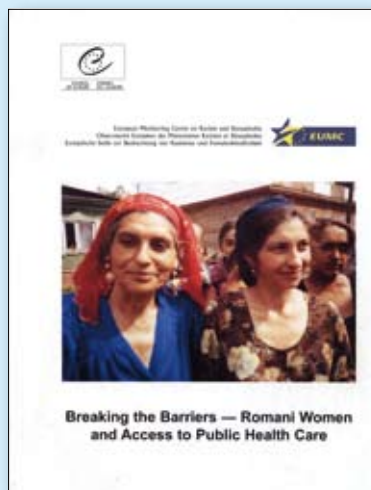
and to improve their situation. Talking about Romani women, this means to break different patterns of discrimination and prejudice.

We are still experiencing the consequences of a centuries old history of discrimination and persecution. We did not have the same possibility to have access to education and employment. There is hardly anyone of us who has an influential post.

The situation of Romani women is by many times worse. Many Romani women are still confined to the small circle

of house and extended family with no possibility of self-realisation. We have to address this, and we do, within our communities but all these efforts will be in vain as long as society does not offer Roma the same chances and opportunities as offered to other people.

Soraya Post is President of IRWN (International Roma Women's Network) and a Board member of ERTF (European Roma and Traveller Forum).



2003 EUMC Report "Breaking the barriers – Romani women and access to public health care".

For further information visit <http://fra.europa.eu/fra/material/pub/ROMA/rapport-en.pdf>

The report resulted from a joint project by the Council of Europe's Migration and Roma/Gypsies Department, EUMC, the OSCE's Office of the High Commissioner on National Minorities, and the Office for Democratic Institutions and Human Rights.

Romani women's access to health – a basic human right

By Nicoleta Bitu

Nicoleta Bitu from Romani CRISS and OSI Joint Romani Women Initiative reassesses the 2003 EUMC Report “Breaking the barriers – Romani women and access to public health care” as well as its impact and the current situation of Roma access to health care.

“It is my aspiration that health will finally be seen not as a blessing to be wished for, but as a human right to be fought for.”

Kofi Annan

When the discussions on having a research report on the access of Roma to health started in late 1999 I was there. Later on, being part of the advisory board of the project “Breaking the barriers – Romani women and access to public health care” - which was jointly undertaken by the Council of Europe, the FRA (former EUMC), the OSCE HCNM and ODIHR Contact Point for Roma and Sinti Issues - I witnessed discussions (even polemics) around some questions such as: do we need “another report” versus ‘action-oriented’ programmes? If there will be a research and reporting project, how do we assure the participation of Roma activists and experts in the documentation activities and the writing of the report itself? What would be the final outcome of the project and what will be the use of the report? Why focus the

documentation and the report on Romani women's access to health care and not on the access of the Roma community as a whole to such services? Reading the report again, after 4-5 years, I recognise the impact the report has had on the work of many of us, as well as concrete outcomes, such as:

- ★ the report has made a major contribution to moving health issues from the “periphery” of Roma related affairs towards the “core” of policy making on such affairs in a “human rights” perspective;
- ★ at the level of policy-making in particular countries, this report has raised the awareness of politicians, of policy makers, and of the Roma activists about Roma-related health issues viewing them as a priority policy area and a major one for promoting change; in a number of cases across political, policy making and community spectrum the report changed the way of thinking about Roma and access to health care;
- ★ at the level of IGOs, some of the recommendations of the report are by now provisions,

recommendations and monitoring criteria incorporated in major documents such as: the Action Plan on Improving the Situations of the Roma and Sinti in the OSCE Area (the subchapter on Health); the relevant recommendations of the Council of Europe's Committee of Ministers and in ECRI reports; and the reports of the EUMC.

At the same time we witnessed a mobilisation process of the Romani women activists which had, among others, an impact on the Roma male activists: they started to learn and eventually to “accept” (not without some resistance, inhibitions or even open hostility) that the Roma female activists and specialists play a legitimate role, on an equal footing, in the policy making process on Roma affairs. One of the concrete outcomes of the project was the creation of the International Romani Women Network, after the consultation with Romani women activists in Vienna in November 2002.

What happened in the four years since the report was launched and what have governments done? I remind

in this context that the report underlines that “government strategies to improve the situation of Roma should recognise and include concrete actions to address the role of discrimination in impending access to health care”¹.

There are some achievements: In recent years I have noticed an increased awareness of policy-makers to include in Roma-related national strategies/plan of actions specific provisions, or eventually whole chapters on “health promotion”, on how to promote non-discriminatory access for Roma, in particular of Romani women to public health facilities and services.

However, we still have governments, “old” or/and “new” EU members, who are behind schedule, sluggish or even reluctant to bring an appropriate policy response to some of the specific issues documented in the report. This includes governments and public health bodies who deny the right of sterilized Romani women to moral and material compensation; lack of enforcement of the existing legislation to condemn and sanction the cases of racist behaviour of doctors when refusing to assist Romani patients; ambulance services refusing to enter Roma neighbourhoods;

reports of unbelievable health situations in Italian camps with Romani refugees and IDPs from Macedonia and Kosovo; no remedies granted to those Romani women who suffered segregation from non-Roma in maternity wards; Roma communities whose access to health care services is impossible or extremely difficult because of a lack of proper infrastructure.

“There is an increased effort to address the diversity of European populations but when it comes to Romani women we find that the gender equality policies assume values and standards applicable for middle class Europeans.”

As a direct and/or indirect effect of such situations, the life expectancy for Romani women in the Czech Republic is still around the age of 60 years, a full 14 years shorter than the age 74 for all Czech women²; studies in

Romania indicate that this gap is about 16 years³. Roma infant mortality rates are almost double the national average⁴.

Keeping in mind the EU context I make reference to the European Parliament Resolution on Roma in the EU adopted in 2005, which notes the sterilization of Romani women as a major issue to be addressed by the EU; and to the European Parliament report on the situation of Romani women adopted in June 2006, which in my view is one of the most advanced policy guiding documents with regard to Romani women, and to Roma policy making affairs in general. Its article 10 gives clear recommendations on health and Romani women.

The European Commission study “Roma in an Enlarged European Union” stressed: while “[...] gender is specified as a priority issue within the [EU Employment] Strategy, [...] race and ethnicity have not received the same level of attention, despite evidence that racial and ethnic discrimination exist within the employment market, particularly in respect of Roma communities”⁵.

There is an increased effort to address the diversity of European populations but when it

1 Council of Europe, *ELIMC: Breaking the barriers – Romani women and access to public health care*, 2003, p. 9.

2 ECOHOST, LSHTM (Report for the World Bank): *Health needs of the Roma population in the Czech and Slovak Republic (literature review)*, 2000, pg 36.

3 Sorin Căce and Cristian Vladescu: *The health status of Roma population and the access to health services in Romania*, 2004.

4 UNDP: *The Roma in Central and Eastern Europe, Avoiding the Dependency Trap*, 2003.

5 European Commission, Directorate on Employment and Social Affairs: *The Situation of Roma in an Enlarged European Union*, 2004, p.2.

comes to Romani women we find that the gender equality policies assume values and standards applicable for middle class Europeans, which are far away from the reality of Romani women and other marginalized and socially excluded women. European policy makers need to integrate the specific situation of disadvantaged minorities and especially Romani women in policies and actions at the level of Member States or the European Union when addressing both gender equality and racial and ethnic discrimination. When reading European policies it is really hard to find any mention of the situation of Romani women and other socially excluded women.⁶ There is an urgent need for policy makers to address the phenomenon of multiple discrimination.

In some Member States a positive practice in addressing the limited access of the Roma communities is to train and employ so called health mediators. This project was initiated, in Romania as well, by my organisation, Romani CRISS, about ten years ago. Currently, this initiative has been evaluated in many reports as a positive practice.

At a later stage (starting with the year 2002) the Ministry of Health in Romania took over

and developed the programme - in close cooperation with our organisation and the ODIHR Contact Point for Roma and Sinti Issues. It had a large impact on both facilitating access of Roma persons (and not only) to the public health services, and empowering of Romani women. Currently there are about 450 persons, almost all females, who are hired and regularly paid by the Ministry of Health.

“Member States still need to promote reforms within the health public services, by introducing regular and systematic education of the medical personnel on anti-discrimination and on gender equality.”

However, there are some side effects to this positive practice such as: the issue of equal access to the public health services has been reduced to the formal registration of Roma persons on the lists of the general medical practitioners. At the same time discrimi-

natory practices and racism of doctors/medical staff, or/and segregation of Romani patients (in particular women) in “special” hospitals’ wards has been ignored or remained at the level of discussion only.

Another aspect to be better planned is that the programme of health mediators should be implemented on a medium term, as a precondition to assure the sustainability of the results and to avoid the creation of a parallel, ‘ghettoized’ system for Roma.

I recall in this context a remark in the report which continues to provide me with a guideline in my current work (in the OSI framework and in Romani CRISS):

”Mediators are not a cure-all for the complex, systemic barriers to accessing health care often facing Roma. At the same time, measures should be taken to ensure that mainstream services respond to mediators’ findings and take steps to transform accordingly. The existence of specialized health workers must be viewed as a way to promote rather than excuse other health care workers for engaging with the community that the mediator aims to help. To do otherwise risks institutionalising a segregated system of assistance.”

⁶ The last two paragraphs are reproduced from the author’s presentation *Romani Women in the European Union: Realities and Challenges*, for the EP Committee on women’s right and gender equality hearing *Situation of Roma women in the European Union*, 23 November 2005.

It is clear that Member States still need to promote reforms within the health public services, by introducing regular and systematic education of the medical personnel on anti-discrimination and on gender equality. Moreover, a series of sanctions for acts of discrimination needs to be introduced and applied if necessary. An EU monitoring report on imple-

mentation of the Race Directive in the area of health services with an accent on gender aspects would also be useful.

Finally, an important message to the international community is that empowerment of Romani women requires that we, all social actors involved in policy making and defending human rights, support Romani

women mobilisation. Personally, I strongly believe that only through Romani women mobilisation, can grass root development and human rights movement be achieved for the Roma.

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**Amare glasura ashunde - Our Voices Heard:
Roma women rights conference, Sweden, 2007**

‘Amare Glasura ashunde’

(Our voices heard)
Romani Women’s Rights Conference, Stockholm

On 3-4 December, the Ministry of Integration and Gender Equality of Sweden, the Council of Europe and the EU Agency for Fundamental Rights held a conference that provided a forum for discussion, information sharing and exchange of good practices between policy makers and Romani Women’s Networks on the challenges facing Romani women today.

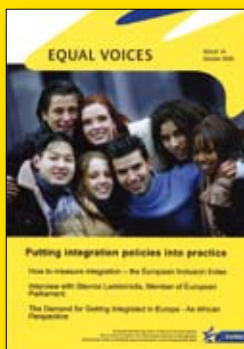
The core element of the conference was the opportunity for Romani women to express their concerns, in particular on the trafficking of human beings, reproductive rights and access of Romani communities to public health care. It also examined how Romani women can positively influence implementation of Roma policies in Europe today.

Conference documentation available at
http://fra.europa.eu/fra/index.php?fuseaction=content.dsp_cat_content&catid=5

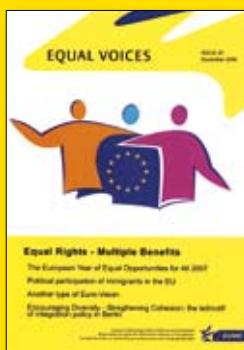
FRA (EUMC) Roundtables with Romani women networks

As an effective follow-up mechanism to launching the “Breaking the barriers” report, FRA (EUMC) has organized meetings of the International Roma Women Network (IRWN), and the Joint Romani Women Initiative (JRWI), supporting discussions on the situation of Roma and Romani women in particular. Four such roundtables were held so far.¹ The Roundtables brought together members of the network, the Council of Europe and the FRA. They facilitated the exchange of information on current and upcoming activities and allowed further reflection on priorities.

¹ EUMC Roundtable with IRWN, Vienna, 31 March–1 April 2005
EUMC Roundtable with IRWN, Vienna, 3-4 April 2006
EUMC Roundtable with Romani Women Initiatives: IRWN and JRWI, Bucharest, 3 May 2006
FRA Roundtable, Stockholm 3-4 December 2007



The October 2006 issue “**Putting integration policies into practice**” deals with some key questions around the ‘integration debate’ at EU level. How is integration defined? Can integration be measured, and, if so, how? What should effective integration policies look like? And how do immigrants look upon the process of integration?



“**Equal rights – multiple benefits**” was published in January 2007 on the occasion of the launch of the 2007 European Year of Equal Opportunities for All. Equal opportunities are enshrined in law across the EU. But to what extent is this right on paper a right in practice? This issue asks how far we have come in breaking the circle of deprivation, prejudice and discrimination. It discusses strategies to promote equal opportunities and participation of disadvantaged groups in society, the media, politics, and at the local level.



The first issue of Equal Voices published by the European Union Agency for Fundamental Rights dealt with the Agency itself. “**EU launches new Agency for Fundamental Rights**” was published in October 2007. It is devoted to the inauguration of the new agency and features speeches by Commission President José Manuel Barroso, Austrian Chancellor Alfred Gusenbauer and many others. It also includes views on the possible impact of the new EU fundamental rights body, by the Council of Europe, civil society, equality bodies and national human rights institutions.

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“Being an older woman is disadvantageous and being additionally a minority, even more so”, says Naina Patel in this Equal Voices. The theme of this edition of FRA’s magazine deals with the fact that women’s experiences of racism and discrimination often differ from those of men because they suffer from multiple discrimination due to their gender as well as on the basis of ethnic origin or race, religion or belief, disability, age, or sexual orientation.

Racism and discrimination can have a disproportionate impact on women and girls - whether in education, employment, health or in political life. This is the message given by international organisations, NGOs and experts who write in this Equal Voices. Discussing a variety of challenges facing migrant and minority women, the authors also indicate what policies are needed to correct such grievances. “Applying a ‘gender lens’ is vital to understanding the full picture of complex and intersecting forms and experiences of discrimination”, postulates UN High Commissioner for Human Rights Louise Arbour in her interview for this Equal Voices.

