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Northern Ireland Assembly

Tuesday 12 October 2021

The Assembly met at 10.30 am (Mr Speaker in the Chair).

Members observed two minutes' silence.

Assembly Business

Public Petition: Electric Vehicle Charging Network

Mr Speaker: Mr Andrew Muir has sought leave to present a public petition in accordance with Standing Order 22. The Member has up to three minutes in which to speak.

Mr Muir: I present this petition, with over 1,000 signatures, calling on the Minister for Infrastructure to bring forward a comprehensive, detailed strategy to rapidly expand the public electric vehicle charging network in Northern Ireland.

In 2010, Northern Ireland's electric vehicle charging network was world leading, but, as more people turn to sustainable modes of transport, Northern Ireland has let its electric vehicle charging network fall to being the worst network of any region in the UK and Ireland.

A useful example of the atrocious state of our electric vehicle charging network and of why so many people have signed the petition can perhaps be found in the case of a driver who travelled to Omagh from Belfast, a three-hour round trip that would require him to charge his electric vehicle before returning home. As there are at least six different charging points in the town, that would not be an issue — or so he thought.

Before returning home, the driver went to the local leisure centre to charge up. He found one side of the charger already in use and the other taken up by a non-electric car that was parked in the space. The driver of that car moved to another space, but, in getting ready to charge, it became apparent that the charger on that side was broken. The driver then drove to the park-and-ride, located on the other side of the town. The charger there also appeared not to be working. A quick call to the Electricity Supply Board (ESB) confirmed that neither side was working, so he moved to another car park with a double charger. One side of the EV charger

had been in use for over an hour and a half, and the free side was, again, not working. This takes our driver back to the leisure centre, where the other car was still charging and the free EV charge point was out of use. Staff at the centre directed him to another charger, but, with the sign on the gates of the car park saying that it could be locked any time after 5.30 pm, he decided that it was not worth the risk of getting locked in overnight. Once again, he went back to the leisure centre and waited for the charger there to become free. Finally, he made it home, four hours later than intended.

The improvement of chargers, having more chargers across Northern Ireland and standardised payment options need to be considered urgently. The lack of on-street or at-work charge points and the need for interest-free loans to encourage people to go electric must also be considered. I call on the Infrastructure Minister to listen to the hundreds of individuals who have signed the petition and take the crucial next steps to move Northern Ireland's electric vehicle charging network forward.

Mr Speaker: Normally, I would invite the Member to bring his petition to the Table and present it. However, in light of social distancing, I ask the Member to remain in his place and to make arrangements to submit the petition to my office electronically. I thank the Member for bringing the petition to the attention of the Assembly. Once received, I will forward the petition to the Minister for Infrastructure and send a copy to the Committee.

Private Members' Business

Abortion Services (Safe Access Zones) Bill: Second Stage

Ms Bailey: I beg to move

That the Second Stage of the Abortion Services (Safe Access Zones) Bill [NIA 35/17-22] be agreed.

Mr Speaker: In accordance with convention, the Business Committee has not allocated any time limits to the debate. I call on Ms Bailey to open the debate.

Ms Bailey: Thank you. First, if possible, I reassure Members that the Bill is by no means a rushed response to the escalation of protests that we are seeing at hospitals, clinics and family-planning centres across Northern Ireland. It is a response to what I witnessed and experienced during my time as a volunteer at the Marie Stopes clinic in Belfast city centre. What I learned during that time was that the gatherings are not protests, at least, they are not protests as I understand them. What is happening on our streets is a very deliberate campaign of harassment and intimidation against women. During my time there, I was spat at and assaulted, I had holy water splashed on me and I was verbally abused. I saw one young woman who was so distressed that she ran into four lanes of oncoming traffic to try to escape the protesters. Another young woman, who was alone in the city, was filmed and threatened that the footage would be uploaded and broadcast on social media. They also threatened to report the scenes to the police.

The protests cause such distress to people and have unintended consequences on other building and premises users: staff, clients and anybody else who is trying to gain access. Every woman of childbearing age is targeted. Staff do not feel that they can carry out their duties safely; they are also recorded, threatened and intimidated. We are hearing now from health and social care trust staff that they have had to employ extra security personnel, put reinforced windows in premises, use blackouts on glass and install CCTV cameras. I have been working to produce the Bill since I was first elected back in 2016, and I am glad to have it debated today in the House.

I am also very well aware that there are many different views in the House on reproductive rights generally and abortion specifically, but I

ask that Members do not distract themselves with their views on those issues and instead focus on what the Bill seeks to achieve, which is simply safe access to healthcare provision for all people and all staff. The Bill does not seek to remove anyone's right to protest, nor would I ever support such attempts under any circumstances. The Bill has been drafted with a very heavy focus on achieving a balance between competing rights and freedoms under the Human Rights Act 1998: the freedom of thought, conscience and religion under article 9 and the freedom of assembly and association under article 11. Both those rights are provided with limitations. Those limitations are stipulated as:

"No restrictions shall be placed on the exercise of these rights other than such as are prescribed by law and are necessary in a democratic society in the interests of national security or public safety, for the prevention of disorder or crime, for the protection of health or morals or for the protection of the rights and freedoms of others."

The Bill achieves that balance.

I will give a brief overview of the Bill's clauses. I hope that Members have had time to read them. Clause 1 simply sets out the overview. The clause:

"requires the Department of Health to establish safe access zones".

It criminalises acts within the zones that prevent or impede access, or which influence, harass, alarm or distress those accessing the premises. Clause 2 stipulates the premises where abortions are carried out and sets the definition of protected premises as any premises where terminations are, or are proposed to be, legally carried out. Clause 3 is about:

"Premises where information, advice or counselling ... are provided".

That includes such premises within the definition of protected premises under the condition that the premises is a hospital or health and social care trust clinic that is used to provide medical services under the Health and Personal Social Services (NI) Order 1972 or is approved by the Department of Health for the purposes of the clause. Premises that provide information, advice or counselling on abortion are also deemed to be protected premises, as are premises whose operator requests them to be and which the Department of Health

determines them to be. The Department of Health can make that determination only if it is reasonable to do so.

Clause 4 looks at protected persons. It stipulates that a "protected person" is anyone:

"attending protected premises for the purposes of—

(a) accessing the treatment, information, advice or counselling ...

(b) accompanying a person ... or

(c) working in, or providing services to, the ... premises."

Clause 5 looks at the safe access zone. That extends to the premises, including all entrances and exits, and the public area outside and in the immediate vicinity, as designated by the Department of Health. That is designed to allow protected people to carry out their duties or access services safely without fear or intimidation and with the assurance of confidentiality.

Clause 6 goes into the offences. It makes it an offence in the safe access zone to influence a protected person or prevent or impede their access, or cause them harassment, alarm or distress. It stipulates that recording a protected person without their consent for the same purpose is also an offence. In addition, it creates a defence if a person:

"did not know, and had no reasonable way of knowing, that the protected person was in a safe access zone."

Mr Allister: Will the Member give way?

Ms Bailey: Certainly.

Mr Allister: Will the Member explain why clause 6 is at all necessary? Under legislation that presently exists, most notably the Protection from Harassment Order 1997, harassment is already a criminal offence, and under the Public Order Order 1987, disorderliness and all that goes with it is already a criminal offence. Where is the necessity to duplicate in the Bill?

Ms Bailey: I thank the Member for the intervention. In my experience, the current harassment laws simply do not suffice.

Under current harassment laws, we have to have the one person targeting the same person

on two or more occasions, and that person then reporting it to the police. In my experience, anybody who is accessing particular services will not report harassment to the police because they want to maintain their confidentiality, and the police struggle to enforce current harassment laws. We had another circumstance in which a member of staff from Informing Choices, formerly the Family Planning Association, was assaulted. The conviction was upheld, yet the person who assaulted the staff member is still allowed to protest at the doors, and the police feel that they cannot take action.

10.45 am

Mr Allister: Will the Member give way?

Ms Bailey: Yes.

Mr Allister: Surely, under the harassment Order, there is the capacity upon conviction — indeed, it does not even require a conviction — to have a restraining order. Therefore, that area is covered in respect of future activity. I struggle to understand why the Member is bringing a Bill to duplicate the law that already exists.

Ms Bailey: I thank the Member, again, for his intervention. I go back to the fact that I do not believe that current law is able to tackle what is happening. On one occasion when I was assaulted, the assault was reported to the police. The person was arrested and investigated and, after six weeks of a restraining order and having a zone put on them, it was deemed that no further action could be taken because sufficient CCTV evidence could not be collected. Therefore that person was allowed to continue with the behaviour. Having listened to the police in my discussions with them over the years, I feel that the current harassment Order is not enough to allow people confidentiality and safe access to premises.

Mr Buckley: I thank the Member for giving way. Further to Mr Allister's intervention, will the Member explain why she is not taking the approach of strengthening the current harassment Order, which she has claimed is below the required standard, rather than tabling a private Member's Bill?

Ms Bailey: I thank the Member for that. From my experience, I feel that this is needed for specific reasons, which, I hope, I have set out. We are seeing the escalation of targeted campaigns against women on the streets of

Northern Ireland. That is why I have brought the Bill.

Ms Dillon: I thank the Member for taking an intervention. Having sat previously on the Justice Committee and currently on the Policing Board, I can state categorically that the current harassment laws do not suffice. Does the Member agree? It is well and good to talk about restraining orders, but if you speak to people about why we needed the Domestic Abuse and Civil Proceedings Bill, you will hear that restraining orders were part of the reason. They did not protect women and families from domestic abuse of any description. If someone is successful in getting a restraining order, they will find, very quickly, that the person can have them back in court, and there is a cost to that. It is important that we have laws that protect people, and not just what looks good on paper.

Ms Bailey: I thank the Member for her intervention. She is absolutely right. Using the harassment Order and reporting to the police take time, and, when people are trying to access healthcare, counselling or advice in emergency circumstances, it is not plausible to go down that avenue.

Mr Allister: Will the Member take one more intervention?

Ms Bailey: Certainly.

Mr Allister: I am much obliged. I do not understand the distinction that the Member is making. Proof of any criminal offence takes time. There has to be a complaint, an investigation and a prosecution, and that prosecution will not be any quicker regardless of whether it arises under the Member's clause 6 or the harassment Order. There is nothing in the point that the Member is making about the need to get more instant remedy. The law is still the law; it still has to take its course. You cannot short-circuit it.

Ms Bailey: I thank the Member for that. Again, I go back to the situation of someone who is trying to access healthcare and is fearful about doing so, or prevented or intimidated from doing so. They are not reporting to the police. They are leaving the area and not accessing the healthcare. The Bill is about creating safe zones for people to access healthcare so that they do not necessarily have to make a report to the police and go through that whole process. It is about accessing healthcare services that are provided in a number of places throughout Northern Ireland. It is nobody else's business what healthcare people need

access to, so the view that women who should be able to access that healthcare confidentially should be expected to report incidents to the police and go through that process is completely untenable.

I turn to clause 7, which deals with the enforcement provisions. Those allow the PSNI to direct a person to leave or to remove a person from a safe access zone if it believes or thinks that the person is about to create an offence under clause 6(2) of the Bill. The police can direct people to cease recording under clause 6(3) and may use reasonable force to remove them, if necessary. Clause 7 also makes it an offence not to comply with removal or to resist it. That is punishable, on summary conviction, by a fine not exceeding level 4 on the standard scale.

Clause 8 sets out the procedure for designating a safe access zone. It stipulates that operators of premises notify the Department of Health that they wish to have a safe access zone. The Department of Health will then have eight weeks in which to create one. The Department must consult with operators, surrounding landowners and occupiers, the PSNI and other appropriate people to determine the extent of the safe zone. The Department can vary a safe zone after consultation or remove it if the operator no longer wishes for it to be there. It must also publish the extent of the safe access zone and any variations or revocations that it thinks appropriate.

Clause 9 deals with the exercise of functions. The Department must have regard to the safety and dignity of protected persons, their right to a private and family life under article 8 of the European Convention on Human Rights and their right to manifest religious belief, their right to freedom of assembly, their right to freedom of expression and their right to protest, as I mentioned, under articles 9 to 11.

Clause 10 deals with monitoring. It requires the Department to publish annual reports on the effectiveness of safe access zones for protecting the safety and dignity of protected persons.

Clause 11 provides a brief interpretation, while clause 12 deals with commencement and provides that clauses 6 and 7 will come into effect three months after Royal Assent, if the Bill is enacted. Everything else would come into effect on the day after Royal Assent. Clause 13 is simply the Bill's short title.

Members, as I said, I feel that the Bill achieves a balance. If I could add anything else, it would

be to reiterate the point that all people — every single citizen — have the right to access healthcare in confidence, without fear and without being intimidated. Staff also have the right to do their job without being abused or harassed. We would not accept that in any other circumstance. We would not accept it outside blood donation centres, so it should not be acceptable in this context.

The 2018 'Report of the inquiry concerning the United Kingdom of Great Britain and Northern Ireland under article 8 of the Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women' concluded that there had been:

"grave and systematic violations of rights under the Convention due to restrictive access to abortion for women and girls in Northern Ireland".

Among the specific articles of the convention that were found to have been violated were articles 10 and 12, as there had been a failure to protect from harassment by anti-abortion protesters women who were seeking sexual and reproductive healthcare services and information.

The inquiry report referred to the:

"impunity of anti-abortion protestors for assaults perpetrated against women seeking abortion."

I consulted widely and met many bodies during the drafting of the Bill, and, to date, no human rights or equality impacts have been raised; in fact, the Equality Commission has welcomed the Bill as providing further clarity and sees the opportunity for the Bill to have a positive equality impact, which is worth noting.

The Northern Ireland Office (NIO) did not move to introduce safe access zones or any other measures when it changed the abortion laws via Westminster back in October 2019. It said that it would keep an eye on the ongoing situation. I have met the Secretary of State on the issue, and he welcomes the move to follow through and finish what was not done back then. I urge the House to please step up and support the Bill.

Mr Gildernew (The Chairperson of the Committee for Health): I welcome the opportunity to make some initial remarks on behalf of the Health Committee outlining the Committee's consideration of the Bill before speaking as my party's health spokesperson.

As the Member outlined, this relatively short Bill of 13 clauses requires the Department to establish safe access zones around abortion clinics to protect the women who use the clinics and the staff who work in them and, indeed, in other healthcare services that are delivered in that area. The Bill makes it a criminal offence to harass people in a safe access zone around the clinics. During the Committee's consideration of the Severe Fetal Impairment Abortion (Amendment) Bill — the SFIA Bill — it took evidence from the trusts. The trusts' chief executives raised the issue of protests and highlighted their concerns for service users and staff. I will return to that a bit later.

The Bill has a number of policy objectives, including ensuring that women and others visiting or working in premises are not approached in an unsolicited manner, and prevents activities designed to cause distress or to deter a person from approaching the building. The Bill places obligations on the Department of Health to create safe access zones, to designate the extent of the zone, to consult on the zone and to publish an annual report highlighting the effectiveness of the safe access zones. It also creates a series of obligations on constables in relation to the monitoring and enforcing of safe access zones.

As I mentioned, during the Committee's consideration of the SFIA Bill, the issue came up in evidence a number of times. A number of those who submitted evidence highlighted the difficulties for women in accessing healthcare services. At our meeting on 8 July, we discussed the issue with the chief executives of the trusts. The Committee was concerned by the evidence that it heard from the chief executives on the number of reports that had been made to the PSNI and on the use of trust resources to improve security at trust premises.

Following the briefing, the Committee wrote to the Department of Health, the Department of Justice, the PSNI and the trusts to ask what measures were being taken to address the issue. In its correspondence, the Committee recognised the right to lawful and peaceful protest but highlighted concerns that patients and staff may feel intimidated or harassed. In responding to that letter, the Minister of Health indicated his willingness to work with the Minister of Justice on that cross-cutting issue. The Minister also indicated that the development of a service specification model for the commissioning of abortion services was under way and that that work would take account of the need to provide those services in a way that protected patients and staff from obstruction or intimidation. The Minister of

Justice indicated her willingness to bring forward legislative proposals to provide for exclusion zones but advised that legislation was not likely to be progressed in this mandate. The trusts provided information on protests and the action that each trust was taking to mitigate the impact on staff and patients at premises in which non-commissioned early medical abortion services were being provided.

The PSNI reported on engagement with trust staff and people who were engaged in protests. The Committee will publish all its correspondence on the issue alongside its report on the Severe Fetal Impairment Abortion (Amendment) Bill.

11.00 am

The Bill sponsor briefed the Committee on the principles of the Bill at its meeting last Thursday. She provided the Committee with an overview of the need for the Bill and the consultation that had been undertaken. She also provided her personal experiences of being a client escort with the Marie Stopes centre.

Members asked a number of questions during the briefing, including some on the definition of harassment and the need for further training for police to deal with those situations. There was a discussion about possible challenges to the legislation, the likelihood of a number of challenges being brought forward on safe access zones and the possible differences in interpretation by all those involved. The Member outlined that a legal challenge had been taken forward in England on safe access zones. Ms Bailey advised the Committee that the case was unsuccessful and that an appeal was lodged in the Supreme Court. Its decision was not to allow that challenge and to uphold the original decision.

Ms Bailey also outlined that there could be some costs following implementation of the Bill. She outlined that the comparable costs in Britain were approximately £250,000 a year and were largely legal costs to contest challenges. Members raised other issues during the briefing. Provided the Bill passes its Second Stage, the Committee looks forward to engaging with stakeholders and scrutinising the Bill in further detail.

I will now make a few remarks as Sinn Féin's health spokesperson. I thank Clare and acknowledge her first-hand experience with regard to this difficult issue, which we have all seen play out in front of our own eyes. We must

recognise that there is an issue here and that we have a responsibility to engage to see how it might be moved forward.

The right to protest and the right of free speech are rights and values that I endorse. I also endorse the human right to access healthcare. I support that right for every patient in every circumstance. I endorse the right to go to work safely without fear of intimidation. It is the entitlement of every worker. I hope that Members agree with that.

The protests that we have seen at clinics in recent months infringe on the rights of others: those of patients who seek healthcare and those of workers who are trying to provide that care in a compassionate way. The protests are not always what anyone would describe as respectful. They are sometimes frightening and intimidatory, and they target vulnerable patients who are simply exercising their human right to access the healthcare that they need and to which they are entitled.

Ms Dillon: I thank the Member for taking an intervention. Does he agree that, first and foremost, what needs to be recognised by the House — this is where leadership comes from — is that it is a healthcare issue? If we talk in language that does not recognise that, we allow for that behaviour and for people to say that it is not a healthcare issue. We need to give leadership in the House.

Mr Gildernew: I thank the Member for her intervention. I agree that it is certainly a healthcare issue. We must ensure that healthcare can be accessed and provided in a way that is free from intimidation.

We have heard that the protests are impacting on people who are dealing with really tough situations that at times involve the loss of a much-wanted baby. These are difficult decisions in difficult circumstances, and, indeed, even at times involve those who are struggling to carry a difficult pregnancy to term despite knowing that the result may be the loss of their child at or soon after birth.

The protests are also causing stress across trusts, with services having to be secured and sometimes moved from one site to another, causing additional expense and burden on trust staff, who are already hard-pressed. It is regrettable that we have to find a way to secure a patient's access to a healthcare procedure that they might need. It is also regrettable that workers are being harassed or intimidated when going to their place of work, in the course of which they provide healthcare to all. In often

delicate and sensitive times in the lives of some women, they are being confronted by protests that use inflammatory and offensive imagery to traumatise and often re-traumatise and trigger patients.

I support the Bill and what it aims to do. It proposes to provide safe passage to workers and patients while recognising the rights of others to free speech and to assemble and protest.

Mr Buckley: Whilst the House is deeply divided on the issue of abortion, we can all stand four-square behind the need to tackle abuse against those entering health and social care premises. I want to make that very clear from the outset. Neither I nor my party support abuse or harassment. Therefore, the question facing us today is not whether we choose to address this form of wrongdoing but how we choose to address it.

That said, I am concerned that the Bill may represent a missed opportunity to crack down on specific and prevalent forms of threatening and abusive behaviour at these sites. Either by design or neglect, the criminal offences outlined in clause 6, as Mr Allister alluded to in an intervention, are vague and open-ended. The general offence would extend to any action deemed likely to directly or indirectly influence someone's decisions. Under the Bill, anything from a conversation to a leaflet would be deemed criminal. Notwithstanding whether such a definition would be enforceable in practice, that is an incredibly broad scope. Some Members will deem those who hold a pro-life stance as offensive, and others, like me, can consider a pro-abortion stance as equally offensive.

In 2018, the then United Kingdom Home Secretary, Sajid Javid, conducted an in-depth review into protest activities outside abortion clinics. The outcome was clear. He acknowledged that:

"introducing national buffer zones would not be a proportionate response".

Further in the report, the Home Secretary went on to describe the overwhelming type of activity that took place at such protests:

"The main activities reported to us that take place during protests include praying, displaying banners and handing out leaflets. There were relatively few reports of the more aggressive activities".

I, again, make it clear that neither I nor my party, nor the vast majority of pro-life advocates, have any common cause with those who engage in either aggressive —

Mr Gildernew: Will the Member give way?

Mr Buckley: I will in a moment.

— or violent activities, and they should be pursued with the full rigour of the law. On that point, I will give way to the Chair.

Mr Gildernew: I thank the Member for giving way. The Member references that very few protests cause concern, but will he acknowledge that the impact on each individual who is caught up in those very few cases is substantial and, perhaps, life-changing?

Mr Buckley: I thank the Member for his intervention. I absolutely understand and appreciate that, if somebody is confronted, whether on an issue that is personal to them or personal to somebody else, that can be a distressing circumstance. That is why I fundamentally believe that, if we are to address such harassment and such intimidating actions, we must use the proper legislative means and vehicle to ensure that we can weed out those instances, which the report highlights are very few, albeit, at the same time, concerning.

Mr Allister: Will the Member give way?

Mr Buckley: I will indeed, Mr Allister.

Mr Allister: Does the Bill not, in fact, do the very opposite? Instead of weeding out the sinister and that which needs to be dealt with, it equates the very basic issue of lobbying and influencing with the more sinister acts. Clause 6(2) lists "influencing" as something that is now to be a criminal offence. We are going to criminalise the attempt to influence people, no matter how mildly, meekly, lawfully and orderly that is done. Is that not the real pernicious inroad of that clause?

Mr Buckley: I thank Mr Allister for his intervention. Those are the precise reasons, as well as the Bill's open-ended and vague nature and where it could go, that cause me and, indeed, my party concern. I will touch on those points further on in my contribution.

There are more appropriate avenues than the pursuit of a private Member's Bill of this nature to deal with such matters, including strengthening harassment laws or other

legislation on harassment. There is a real risk that the clauses that constitute the main fabric of the Bill would unfairly restrict freedom of assembly, expression and religious belief as set out in articles 9, 10 and 11 of the European Convention on Human Rights (ECHR). It also risks setting a precedent for banning protected speech in other public settings. The Bill will have consequences, be they intended or unintended.

Mr Carroll: Will the Member give way?

Mr Buckley: I will in a moment. I want to proceed at this stage, please.

Everyone has a right to free speech under the law. That right should never be taken for granted and must always be protected. Many Members, some of whom I have allowed to intervene today, say things I do not agree with, and I am sure they could say the same about me. We will have differences of opinion, but we must always protect the legitimate right to express that opinion.

At this point, I will give way to Mr Carroll.

Mr Carroll: I thank the Member for giving way. Does he accept that there is no ultimate freedom of speech and that every element of freedom of speech comes with rights and responsibilities? You cannot just go out and offend certain organisations and minority groups. Does he recognise that the Bill only limits the right to give out certain material in a certain area? The images used by some anti-choice organisations, which I and many other people find offensive, will still be allowed to be displayed in towns and cities across the North. Does he accept that that will be the case even if the Bill proceeds?

Mr Buckley: I thank the Member for his intervention. It is almost as though he had prior sight of my speech, because I am coming on to that point about responsibilities.

On the offensive nature, as he deems it, of the pro-life position and what those people argue for, the Member has to equally realise that many people from a pro-life perspective are deeply offended at the termination of the unborn. They feel so passionately about the issue that they believe it is their duty to stand up for the unborn, be it in democratic settings like this and in the community.

On the Member's point about rights and responsibilities, of course free speech is not an absolute. There are limitations prohibiting

speech that incites violence, constitutes harassment or is defamatory, but there are laws to deal with that. Those should be any Member's first port of call, rather than a Bill of this nature, which, to my mind, would have dangerous and far-reaching consequences.

On a practical level, there is a risk that establishing buffer zones may only have the effect of displacing public order concerns away from the immediate vicinity of public or private premises to other access points at key junctions. What then?

Furthermore, the Bill is unlikely to ease operational pressures facing the PSNI as a result of any protest activity. Instead, in all likelihood, it would create further training requirements that are associated with new offences. Experiences from other jurisdictions indicate that the Bill's —

Ms Dillon: Will the Member give way?

Mr Buckley: I will in a moment.

Experiences from other jurisdictions indicate that the Bill's arrangements are likely to be wrapped up in litigation from free speech activists for many years. That would place an extra strain on the public purse and would be a key consideration as the Department of Health aims to chart a course towards recovery and reform.

I will give way.

Ms Dillon: I thank the Member for taking an intervention. I am not aware of the PSNI raising any concerns about any training that it would have to undertake as result of the legislation, but if I am wrong on that, I am sure the sponsor of the Bill will correct me.

11.15 am

I am also a wee bit confused. Are you seriously suggesting that in any other circumstance where individuals need to access healthcare, whether it is cancer services, IVF services or whatever, we would be having this same conversation? I do not believe for one second that we would.

Mr Buckley: I thank the Member for her intervention. The Bill sponsor may come on to that point, but I am not aware of any PSNI representations in relation to the Bill. In fact, the original consultation on the Bill goes back to 2016; I am not aware of anything more recent

than that, but the Bill sponsor can come on to that.

On the Member's second point, I will say this: please do not misrepresent what I am saying here today. We have to realise that the Bill, in itself, has potential far-reaching consequences for fundamental freedoms and values. It is not about pitting one section against another, whether that is to do with cancer services or other such hospital services, or, indeed, in other settings. In times past, we have seen some very dangerous protests outside PSNI recruitment centres, where dissident republicans have made death threats against potential PSNI recruits. We have to get back to the potential far-reaching consequences of the Bill rather than trying to pit one section against another.

Miss Woods: Will the Member give way?

Mr Buckley: I will not at this stage. I have given way quite generously.

The content of the Bill is what I am interested in, and I see that content as fundamentally flawed. We have to ask ourselves whether the objective of affording patients and staff appropriate protection would be best served, not by writing a blank cheque or by introducing what is, in my view, a regressive Bill that limits and restricts hard-fought basic freedoms and values that are as old as time, but by enhancing existing tools, including the law on harassment. Such an approach would have an established foundation and would not require either the extensive lead-in time or the costs that the Bill's arrangements would incur, nor, indeed, as was highlighted by Mr Allister, would they run the risk of duplication.

In a statement to BBC NI prior to this debate, Minister Swann said:

"It is for the Northern Ireland Assembly to determine whether the proposals set out in this bill will provide an effective means for protecting those rights, alongside the rights to freedom of assembly and expression."

The Health Minister is, of course, right in that regard. As for me and my party, we respectfully say that we do not feel that the proposals set out in the Bill are the most effective means to deal with harassment. For that reason, we will vote against it.

Ms Hunter: I welcome the opportunity to speak on the Bill as our party's health spokesperson and as the SDLP MLA for East Derry. I would

like to thank Ms Bailey for bringing forward this important Bill. Recently, we have seen an increase in much-needed discussion of the harm and intimidation of and violence against women in our society. I feel that the Bill addresses a real part of that issue here in Northern Ireland: the worrying normalisation of harassment towards women who are seeking medical treatment. Let us be clear: no form of intimidation, harassment or violence has ever been, or ever will be, acceptable.

Many of these protests happen at places that offer family planning, counselling for those who have suffered miscarriages and a host of other services as well as terminations. This behaviour can be divided into two groups. The first includes protesters displaying banners and handing out leaflets; the second includes protesters handing out model fetuses displaying graphic images, following people, blocking their path and, as Ms Bailey mentioned, even assaulting them. One cannot begin to imagine the damaging and detrimental impact that this behaviour has had on patients and staff. Women who have just had a miscarriage are being forced to look at those images. This behaviour can leave patients distressed and has caused some to rebook their appointments, resulting in further delay, or to not follow medical advice in order to avoid the protesters.

I fully recognise that all anti-abortion activities outside those clinics can cause great distress, and I extend my sympathies to all those who are either going through or who have previously gone through that extremely difficult and personal process. I hope that Members agree with me that women have a fundamental right to privacy and dignity, especially when they are visiting a hospital at a very sensitive time when they are profoundly vulnerable. Let us be clear that that is not always women who are having a termination; it is often any women of childbearing age entering clinics.

I am aware that some see the argument as being complex or reject the Bill due to the nature of competing constitutional rights, but let us be clear: we respect the right to religious belief and the right to assembly. We do respect that, and we accept the right to protest.

Ms Sheerin: I thank the Member for giving way. Does the Member agree that there is nothing Christian or religious about shouting abuse at women or calling them murderers when you do not know their circumstances or what they have been through?

Ms Hunter: I thank the Member for her intervention. I wholeheartedly agree. Look back

at the AIDS pandemic of the 1980s, for example. Many people protested outside AIDS clinics, saying that it was a "gay disease". That shows the level of disgust that I have towards the attitude shown outside those clinics. These are vulnerable individuals attending the clinics to seek healthcare and support. They deserve dignity and privacy when doing so. I thank the Member for her important intervention.

This is not about criminalising prayer. It is about preventing harm and promoting the safety and well-being of women who are trying to access healthcare. The SDLP supports the Bill.

Mr Chambers: It is important to separate the proposed legislation, and this debate on that legislation, from our personal positions on abortion, whether pro-life or pro-choice. No connection should be made, either spoken or implied.

Protests outside trusts or charitable premises have been going on for some considerable time. Over recent weekends, we have seen that type of protest copied outside COVID vaccination hubs in a part of west Belfast. No matter what the protest is about, such behaviour cannot be condoned.

In considering this legislation, we must balance competing rights. People have the right to hold a view strongly enough that they will stand on a picket line, carry placards or write irate letters to public representatives or to the media. Equally, however, people who are seeking medical advice or guidance are entitled to do so in an atmosphere that is not frightening or intimidating, especially when those people may be at the lowest and most vulnerable point in their lives.

The Bill requires the Department of Health to establish safe access zones around abortion clinics to protect the women using the clinics. It would become a criminal offence to harass people in a safe access area around those clinics. I am pleased that the Bill has not been definitive about the scope of these safe access areas, because different locations will obviously have different requirements. It is good that the Department will be able to call on the advice of people in those locations who will be best able to judge the extent of those safe access areas when they are created. No one should be obstructed or intimidated when accessing lawful healthcare services, for whatever reason. That includes staff working at such facilities.

Another behaviour that the Bill will prohibit is filming and recording people. Again, my party supports that.

We also cannot lose sight of the fact that some of the buildings where the clinics are conducted also house other businesses, offices or industries. Staff in those offices who may have suffered the loss of a baby through stillbirth, for instance, have to run the gauntlet of the placards, the pamphlets, the protest, the shouting and whatever. We cannot forget that. In all conscience, that cannot be right, and we cannot allow it.

In addition, although the right to assemble and express an opinion is an important freedom, it needs to be balanced against causing undue distress and disruption to any user of any service. The Bill is not about stopping freedom of speech but about stopping the practice, albeit in limited situations, of women being impeded or openly confronted when accessing such facilities.

The legislation will not stop people protesting. It will simply determine where they can carry out those protests. If groups or individuals feel moved to conduct a protest, in Belfast city centre or in the centre of any of our towns in Northern Ireland, they will be perfectly entitled to do so, as long as their protests are lawful and peaceful.

The police have a difficulty in dealing with such protests. We have seen that, and we have said that, at the moment, the laws are difficult for the police to interpret and act on. Safe access areas will provide police with absolute clarity on when they can intervene. We therefore especially welcome the proposal in the private Member's Bill to allow PSNI officers to direct a person to leave a place, or to remove a person from it, rather than prosecute.

The Ulster Unionist Party reserves the right to amend the Bill as it progresses, but we support its general thrust.

Ms Bradshaw: I support the principles of the Bill. I thank its sponsor, Ms Bailey, not only for introducing it but for her resilience in pursuing this legislative change over many years.

Safe access zones exist, in the words of the Queensland Law Reform Commission:

"to protect the safety and well-being, and respect the privacy and dignity, of people accessing"

health services, whatever those services may be.

One of the arguments made against the Bill is that safe access zones have generally not been

put in place elsewhere, at least not as a result of legislation. In common law jurisdictions, however, they are not unknown. They exist in large parts of Australia and Canada and in some parts of the United States. Although the Irish Government appear to have reversed their initial plans to prioritise them in forthcoming legislation, and although they have not yet been pursued in other parts of the UK, there is legislation enabling them in the Isle of Man.

(Mr Deputy Speaker [Mr Beggs] in the Chair)

The fact that Northern Ireland would be the first jurisdiction in the UK to legislate in this way speaks in favour of the Bill. Being in the vanguard of legislation that is about safety, well-being, privacy and dignity is exactly what the Assembly should be about. Nevertheless, going first in the UK also speaks to the complexity of the issue, and it is on the prioritisation of human dignity and the balance of human rights that I wish to focus my remarks.

First, to be clear, my reading of the Bill is that it would be an offence to harass people within a safe access zone. That means there will be protection for all and any involved, not just those seeking to access health services directly, although they are currently the obvious victims of harassment, but those who work in them and, for that matter, those who accompany anyone accessing the services. As has already been highlighted, we on the Health Committee have heard from the chief executives of the trusts about how damaging that harassment is to the morale of the staff working in those settings. The Department of Health is already obliged to consider protecting the people attending healthcare sites, and I will come back to that. The Justice Minister stands ready to support the Health Minister on that.

Secondly, the issue is fundamentally about an unsolicited approach, and particularly about activity that is designed to cause distress to people accessing sexual and reproductive health services, and thus it is about the assurance of their safety, well-being, privacy and dignity. Again, to be clear, we are talking about access to any sexual and reproductive health services, including counselling.

11.30 am

The description of the zones is self-explanatory. Notably, the ability for the Department to set up zones is similar to the law adopted in the Isle of Man in 2019, and I wish to emphasise why it is so important to protect the dignity of those accessing health services.

Although the Bill sponsor does not identify any equality impact — I think that, in fact, a positive equality impact is inherent in the Bill — the huge majority of people protected by the legislation will be women. Specifically, proportionately, they will often be women in crisis at a time of vulnerability. In other words, for me, the Bill serves to try to correct an existing inequality.

Dignity is part of this. It is a word that has come to be used in recognition that we all have a fundamental right to dignity. Let us not understate how far protesters go in some instances to act in defiance of that right. The verbal abuse alone is vicious and thoroughly undignified. Calling women "hoors" or "fallen women", particularly at such an evidently vulnerable time, is already beyond what any reasonable person would see as a dignified protest. Shouting that is targeted directly at women in particular, often through loudspeakers, is already beyond what any reasonable person would see as dignified protest. Physically blocking a footpath so as to deny women their right to pass is already beyond what any reasonable person would see as dignified protest. Such protests are designed to make women feel unsafe, to have no regard for their well-being, to deny their privacy and to do anything but maintain dignity.

Mr Allister: Will the Member give way?

Ms Bradshaw: Yes, certainly.

Mr Allister: Has the Member read article 9 of the Public Order (Northern Ireland) Order 1987? It states:

"A person who uses threatening, abusive or insulting words or behaviour, or displays any written material which is threatening, abusive or insulting, is guilty of an offence".

The law is already there.

Ms Bradshaw: In this case, we are strengthening the law and giving it particular relevance to this circumstance.

Far from the protests being dignified, women report feeling angry, uncomfortable, traumatised, scared, intimidated, upset, inadequate, unsettled and a raft of other emotions that are not just experienced at the time but can have a lasting impact on their mental well-being. We have spoken in the Chamber many times about the need to protect our citizens' well-being. Such protests, in other words, are specifically designed not to make a

point but to cause harm. When people access healthcare, they should not have to run a gauntlet of hate and harm, for that is what is happening. I hope that it is clear to everyone in the Chamber, regardless of their opinion on abortion, that there can be no moral defence for a gauntlet of hate and harm. There is no justification for enabling it, no justification for participating in it and no justification for us in the Chamber to allow it to continue to happen.

Mr Buckley: I thank the Member for giving way. Will she accept that those who, in principle, disagree with the Bill are suggesting not that the crimes that she has outlined are not wrong but that there are alternative means by which the law can be applied, a point highlighted and, indeed, strengthened by Mr Allister?

Ms Bradshaw: Thank you. You mentioned Mr Allister, and I have responded to him. This is about the zones, not about denying people the right to protest. We are trying to protect the space through which women and those accompanying them have to travel.

Reasonable protest is not about intentionally trying to steal someone's dignity. The torrent of verbal abuse and the physical blockage of access is one thing, but another factor frequently reported as causing distress not just to those accessing healthcare but often to those who are just passers-by is the display of graphic imagery. As with the abuse and the blockage, it is designed specifically to cause harm and to steal dignity. It does not constitute a protest; it constitutes a direct attack on the dignity, privacy and well-being of the individual. In fact, it is harmful even beyond that. It is harmful to the general public. This is Baby Loss Awareness Week, and we know that a lot of women are very much focusing on their experience of miscarriage and that such imagery causes them great distress and offence. Although the Bill deals with photography as part of the offence, it does not deal with the graphic imagery that is central to the distress and harm caused. We will have to look at that, and the Bill sponsor is happy for the Health Committee to look at it.

Having established the importance of dignity and the need for change to ensure that women accessing healthcare can maintain dignity at all times, I turn to rights. Again, some of the unease about safe access zones in other jurisdictions comes down to the balance of rights. I understand that that balance is never easy, and that is why I urge Members to back the principles of the Bill today, so that the Committee can look at that issue in further detail. To be clear, however, setting up a

gauntlet of hate and harm is not a right. The right to protest, like any other right, is not absolute; it comes with responsibility. Essentially, that responsibility is to behave reasonably. No one can argue that intentionally targeting women with abuse is behaving reasonably. The right to protest has to be considered and balanced in that context. There is, of course, a fundamental right to live free from abuse, intimidation and to have human dignity. That should never be balanced against the right to protest when such means are used.

There is also the right to access healthcare; indeed, the first legislation on the matter that we are considering today was passed in British Columbia on that exact premise. The law in New South Wales is also centred around that point. As I indicated, the Committee will have to consider some human rights aspects, perhaps most obviously around clause 4 and who exactly is protected. However, the principles are sound: the right to live free from intimidation; the fundamental right to dignity; the right to protest provided it is done reasonably and without breaching the rights of others; and the right to access healthcare. I strongly urge the Chamber to support that today.

I thank Ms Bailey, Informing Choices NI, Alliance for Choice and others who have campaigned over many years for the Bill. It has my full support.

Ms Sheerin: I support the Bill. I congratulate Clare Bailey for bringing it before the Assembly and acknowledge the work of Alliance for Choice, Informing Choices and others who have campaigned on the issue. I acknowledge my party colleague Senator Paul Gavan, who has worked with other parties on the Together for Safety campaign in the Twenty-six Counties. He is in the process of introducing a similar Bill in that jurisdiction.

The Bill is simple. It is about compassion and empathy. It is about supporting women, protecting their right to access health and shielding people from abuse. Just last Tuesday, we had the recommendations from the truth recovery design panel, emanating from the report on mother-and-baby institutions in the North. It is a phenomenon that will for ever remain one of the darkest stains on Irish history and a stark reminder of how not to treat women, girls and children. The abuse to which people are subjected outside clinics while accessing the healthcare to which they are entitled is another element of the same misogyny and judgement that brought us those so-called homes. It is the same ignorance and stigma

that sent women to England for decades and that still sends women to England.

What is it about other people's pregnancies that offers such fascination to so many? What is it that compels people to stand outside a health clinic and intimidate women whose stories they will never know or understand? Sinn Féin is a party of protest. We support the fundamental right to protest and recognise that people should be free to take to the streets and have their point heard. However, to dismiss or trivialise the harm caused by those groups or justify their actions by describing them as "protest" is a huge disservice. Their campaigns amount to the intimidation and bullying of people in vulnerable positions without any concern for their well-being.

This is Baby Loss Awareness Week, which is an opportunity for many to share stories that, perhaps, they have not spoken about before. Some may take comfort from the knowledge that they are not alone in their experience of miscarriage, ectopic pregnancy or stillbirth, losses that impact on everyone differently. It is said that one in four women will experience miscarriage, but it is still taboo and is still not spoken about openly. Many of those women will live their life without telling anyone or will tell someone and have their experience dismissed by a heartless comparison or a minimising of their loss. They will get a letter notifying them of their next scan appointment and have to ring a receptionist to explain that they do not need it any more. At family gatherings, they have to dodge questions from well-meaning but ignorant relatives about when they plan to start a family. They will get up and get on with it, acting as if everything is fine, feeling silly for feeling sad and choking back tears at advertisements for nappies. To go through that and then be exposed to a giant poster of a fetus in the womb, accompanied by a throng of people chanting slurs, is cruelty. That is for women who are safe in the knowledge that they would not or could not be criminalised and that there are no repercussions for them if seen accessing healthcare.

The so-called protesters have no regard for people's personal circumstances or the struggles that they have faced on their reproductive journeys. They openly target and attempt to shame women who need abortions, which is reprehensible, and their lack of compassion is further demonstrated by the fact that they do not care who else is caught in the crossfire. You cannot claim to care for the unborn while harassing expectant mothers. Imagine the heartbreak those placards and loudspeakers cause to the women who have

been told that they will never conceive, who have suffered ectopic pregnancies, who have been there before but are pregnant again and are just waiting for the telltale cramp, terrified that they will lose another life. Imagine the prospective fathers who never got to live out their dreams of bedtime stories or walks in the park, worrying about their partners and the impact that a fertility battle is having. What must it be like for children walking to school or the shops or going into a clinic for a totally unrelated procedure; for teenagers accessing contraception for the first time, trying to be responsible but afraid of the consequences and unsure of themselves; and perhaps, most of all, for all the women out there, our friends, sisters, cousins and aunts who need or have needed a termination? The abuse is directed at them. It seeks to vilify and demonise them, and it is wrong. I commend the Bill to the House.

Ms P Bradley: As someone who believes that every life should be valued and respected, I say unequivocally that there is no place in our society for harassment or threatening or abusive behaviour against any individual accessing any health intervention or service; in particular, there is a need to ensure that those who are vulnerable, are in crisis or have suffered loss receive adequate protection under the law. Therefore, we have to consider the appropriate means to that end. On balance, I do not believe that the Bill is the right vehicle to secure the most robust protections from harassment or, in some cases, criminal behaviour.

I formed that position for a number of reasons. First, it is our view that the aim of punishing and deterring such behaviour on health and social care premises could be realised via existing mechanisms in a way that better defends the fundamental freedoms of assembly and expression. There should be an acknowledgement that a majority of local pro-life campaigners act within the law. Therefore, there needs to be a targeted and narrow focus on rooting out offending among the small number of individuals who engage in such vile, threatening or violent behaviour. That could include tightening the current law on harassment.

11.45 am

The case for a catch-all ban on protest activity at assigned premises is further weakened by the ambiguity in the Bill. Clause 6 would establish a general offence against anyone intent on:

"(a) influencing a protected person, whether directly or indirectly,

(b) preventing or impeding access by a protected person, or

(c) causing harassment, alarm or distress to a protected person".

There is no clarity about what is deemed to constitute direct or indirect influence and no definition of "alarm or distress". The clause also includes no requirement for offending to be threatening, abusive or violent. That threshold is stipulated in other important legislation, including that on domestic abuse and coercive control. Does that set the bar too low for prosecution? Moreover, if somebody is prosecuted, are the conditions in clause 6 clear enough to make the offence operable by the courts?

There is also the threat that the model would set a precedent for an unfair restriction of fundamental freedoms in other situations. For instance, if influencing a person via a pamphlet outside premises where pregnancy advice is provided is deemed a criminal offence, is the next step to ban the distribution of literature on any topic in any public place or private space on the basis that it may cause alarm?

The Bill sponsor suggests that the legislation responds to a narrow problem, but that is not simple. It is not black and white, and there is a real risk of unintended consequences. Therefore, while I absolutely agree that there should be greater flexibility in the current criminal framework to crack down on threatening and abusive behaviour against anyone entering our Health and Social Care premises or, indeed, independent premises, we cannot take the issues in isolation. There should be an awareness that there are separate examples of unacceptable behaviour that need to be tackled. Upgrading the law on harassment would provide an opportunity to tackle all abuses in the round. It is for those reasons that, unfortunately, I cannot support the Bill at this stage.

Ms Flynn: I am pleased to support the Abortion Services (Safe Access Zones) Bill, as it promises to protect the rights of patients who are accessing vital healthcare, often in the most traumatic circumstances. In recent months, it has been distressing to hear from patients who are being obstructed and harassed as they exercise their human right to access healthcare. Offensive images that are meant to cause hurt and distress do just that. They amount to the psychological and emotional abuse of patients.

That is no way to exercise your right to protest or to free speech, nor does it show much respect for the rights of others, especially at such a vulnerable time in their life. While I support the right to free speech and the right to protest, I also support the notion that those rights should be exercised with respect and care. That has been said across the House today, but, unfortunately, in some circumstances, it is not always the case. While those freedoms and rights on free speech are important, they neither supersede patients' rights to get the healthcare that they need nor workers' rights to go to work safely and without distress.

In recent Health Committee briefings — the Committee Chair touched on this — we have learned that some services provided by clinics have now had to be moved because of the intimidatory nature of certain protests. Extra resources have also had to be spent on relocating some of those healthcare facilities. Obviously, that is an expense that the healthcare system can ill afford, because it is already under immense pressure. However, it is also important that patients and healthcare workers, regardless of funds or resources, can go about their treatment and their business safely. The Health Committee has heard evidence of trusts having to secure buildings, and, again, that is an additional cost. From health trusts, we have heard about patients and workers being confronted by offensive and traumatising images and slurs. We have also heard of protesters who have recorded and taken pictures of patients and workers as they enter and exit the clinics. Those behaviours are nothing to do with rights or freedoms; they are basically the intimidation and harassment of vulnerable people in many circumstances. The right to protest in a way that does not constitute harassment should absolutely be protected and provided for. However, the harassment of women outside medical facilities in an effort to physically, mentally or emotionally obstruct and restrain them from accessing services is not a legitimate form of protest.

Some Members mentioned in their interventions the fact that the protections in clause 6 already exist in law, but, as the Bill sponsor said a few times, clearly something is not working. Whatever the circumstances, if women and staff do not go down the route of reporting offending behaviour to the police, what more can the Assembly do to help prevent some of it and support those people? The system is not working. Paula touched on whether it is a case of enhancing those protections.

It is regrettable that we have to have this discussion and that safe zones are even necessary, but they have become necessary as a result of the pickets and protests that we have seen intimidating patients and staff. The situation that we are in needs to stop. People can protest in an appropriate place, not where services are being provided. Safe zone legislation has been introduced successfully in other countries. Passing the Bill would send a really important message that there is support for such legal provisions and protections here.

There has been a long history of shame and hypocrisy — Emma touched on it too — about not just the issue of abortion and whether you are pro-life or pro-choice but women's health issues overall. It is right that we all look towards a system that will protect and respect women and, in this case, pregnant people in the choices that they will make, by not only providing safe and accessible services for them but safeguarding their privacy, which is really important. It is not acceptable that anyone should be made to feel unsafe or unsupported when accessing healthcare, no matter what that healthcare is. I am happy to support the Bill.

Ms McLaughlin: I support the Bill. I, too, commend Ms Bailey for bringing it to the House.

Let me be clear: this is a debate not about our personal views on abortion — I have pretty strong ones — but about affording people the right to access healthcare free from harassment and abuse. Safe access zones for those seeking information and services in relation to abortion are long overdue. Everyone has a right to protest, but to hinder access to healthcare is unconscionable. When anti-vax protesters distribute inaccurate information and block access to healthcare, there is widespread condemnation, including from the Health Minister, yet, when anti-choice protesters distribute misleading information and block access to healthcare, there is widespread silence. Both are unacceptable; both cause untold damage to our communities.

In my constituency of Foyle, there is a weekly show of intimidation at the health centre just up the street from my office. I have repeatedly raised the issue with the PSNI, and its response is always the same: it acknowledges the hurt that the behaviour causes to members of our community, but it does not have the legal powers to act on it. That is why the Bill is so vital: it lays down provisions that will help to protect people from these extremists — and they are extremists. I know that many Members

who identify as "pro-life" would certainly distance themselves from their behaviour.

Alliance for Choice has gathered testimonies from people who have encountered the protesters. Let me paint a picture of what many women face as they try to access healthcare: signs of dismembered babies; shouts of "baby killer", "hoors" and "fallen women"; active blocking of the entrance to clinics and the whole pavement; non-stop shouting over a speaker; and being called "Antichrist". Now, let me share how that made people feel. One person said:

"I was so afraid of them that I got a taxi from the airport straight to the door of the clinic and got picked up to leave the same way".

Another said:

"I am a man, but I immediately thought of my daughter and other young women like her ... I am outraged and disgusted that these people are allowed to intimidate and bully pregnant women."

"Uncomfortable and trapped", said another:

"Frustrated that the police weren't moving them along ... Extremely intimidated, i have ptsd from a complicated birth after i suffered a miscarriage and these images are so traumatising".

The shouting of slogans and the use of graphic imagery that distorts reality cause real psychological damage. It needs to stop. None of us knows the circumstances of those entering the clinics. It could be a woman who has suffered a miscarriage. It could be someone who is undergoing chemotherapy and is, sadly, infertile. It could be a woman whose baby was stolen in one of the mother-and-baby homes. Those are all traumatic experiences that could be painfully raked up by the actions of the people protesting outside our healthcare centres. The sad irony is that, even though the Western Trust's early medical abortion service has been suspended for six months now, the anti-abortion protests have continued to take place every Thursday afternoon in my constituency.

On the issue of suspension of the early abortion service in the Western Trust and the failure of the Minister to commission services, inaction from his Department has forced more than 100 women from the Western Trust area to travel to England or access pills online because they were not able to receive local abortion care. The fact that Informing Choices has recently

withdrawn its central access point is a reminder of how precarious access is. Yes, the British Pregnancy Advisory Service (BPAS) has filled the gap, but for how long? Why is our Health Department not taking responsibility for this? I cannot answer the former, but I can answer the latter: it is because the Minister of Health has refused to commission health services for women. He is the Health Minister, and he has a duty of care to the people of Northern Ireland. He cannot simply abdicate his responsibility and ignore the issue.

In truth, depressingly, I should not be surprised. We see that hands-off approach to a wide range of women's health issues. We see it with endometriosis treatment across Northern Ireland. We see lives needlessly being curtailed because of the failure to deliver appropriate, modern treatment for women. We see it with the lack of progress in transitioning to the far more sensitive and effective HPV primary screening that has been rolled out in the rest of the UK. Is anyone else getting a sense of déjà vu? Once again, we are receiving an inequitable level of healthcare in comparison with our sisters across the water. We see it with the abysmal access to contraceptive services through the Western Trust family planning service. In Derry, there is a nine-week waiting time, and nearly 600 patients are waiting to be seen. Yet again, there is no sense of urgency. Yet again, reproductive healthcare is being utterly neglected. Yet again, our citizens are being failed.

It was World Mental Health Day on Sunday, and MLAs from across the House were united in sharing messages on the importance of mental health support. The Bill is a chance to put those words into action. Safe access zones are a mental health issue. Patients and healthcare workers are routinely targeted with abuse and traumatised by anti-abortion protesters. Let us work together to put in place the necessary protections for patients and healthcare workers and protect their mental well-being. Let us support the Bill.

Mr Sheehan: Cuirim fáilte roimh an deis labhairt ar an Bhille seo. Ba mhaith liom Clare Bailey a mholadh as an Bhille a thabhairt faoi bhráid an Tionóil. I welcome the opportunity to speak on the Bill. I commend Clare Bailey for bringing it before the Assembly.

I do not think that anyone would disagree with the statement that it is absolutely disgraceful and unacceptable that women trying to access sexual or reproductive health services are being intimidated and abused, approached and solicited, without wanting to accept any of that.

In no way do women, particularly those who might be vulnerable in the circumstances, need to have such things as "Murderer" screamed in their face.

There is no way that graphic material should be shoved in their face. That is totally unacceptable. I have heard Members say here today that law already exists to deal with that type of behaviour. Well, the law is not working. We should not be trying to strengthen any law for the sake of it, but, because it is not working, the law needs to be strengthened. That is what the Bill does. It creates safe access zones for women who want to access sexual and reproductive health services, and that is how it should be.

12.00 noon

We have also heard about the right to free speech and the right to protest. Neither of those are absolute rights. No one has the right to shout "Fire" in a crowded cinema — absolutely not — and no one is allowed to protest right outside the front door of 10 Downing Street. There are reasons that rights such as the right to free speech and the right to protest are not absolute. It is therefore right that women who are trying to access healthcare should not have to run the gauntlet of intimidation and verbal abuse, of being filmed and photographed and of having their privacy undermined.

I heard Mr Allister make a point about the Public Order Act. It is not working. Is there anyone who can intervene now and explain to me how that law is working outside clinics that offer counselling, healthcare for women who are having miscarriages, and sexual and reproductive health services? Explain to me where the law is working.

I have some personal experience —.

Mr Allister: Will the Member give way?

Mr Sheehan: No. I have some personal experience —.

Mr Allister: So much for wanting an explanation.

Mr Sheehan: Excuse me? Sorry?

Mr Allister: Is the Member giving way?

Mr Sheehan: I have already answered the Member.

I have some personal experience from walking past the Marie Stopes clinic in Great Victoria Street one day. The Speaker and I were accosted by a number of protesters outside that building who asked us to stand with them in their protest. When we refused, we received verbal abuse that I could not repeat in the House. It was disgraceful and unacceptable. At the time, I could only but imagine the thoughts of vulnerable women who were going into that clinic and having to face that type of intimidation and abuse. It is totally and utterly unacceptable. The law is not working, and I thank Clare Bailey for introducing legislation so that safe access zones can be created for women who want to access health services without having to put up with the level of abuse that they currently have to put up with. I support the Bill.

Ms Kimmins: I, too, welcome the opportunity to speak in support of the Bill, which is a very important piece of legislation. If passed, the Bill will go a long way to helping deal with issues that I have been dealing with in my constituency for almost a year now as a result of the huge impact of the protests outside healthcare facilities on the many people who have been in touch with me. The experiences that other Members have detailed in the debate, which have been very disturbing to listen to, are very similar to those that I been listening to from people across my constituency. What women have been subjected to is totally wrong, and it is a really sad state of affairs that, in 2021, we are having to put in place legislation to protect women who are trying to access safe and legal healthcare to ensure that they do not have to run the gauntlet of protesters during what is often a very traumatic time in their life. We would be having a very different conversation if we were talking about men—I know that that will not go down well. Not only do those protests have an impact on women accessing abortion, who have, for whatever reason, had to make that very difficult decision and are feeling very vulnerable but, in my experience, they have also had a profound impact on the wider public who are accessing healthcare facilities for a variety of reasons. We need to take urgent, appropriate action to address that issue.

As I mentioned, since the start of this year, we have witnessed protesters gathering at John Mitchel Place Health Centre in Newry and outside Daisy Hill Hospital. They carry placards depicting distressing images and slogans, and they harass staff and patients as they attempt to access those sites. Although those individuals claim to be trying to help people, that is certainly not the experience of those who have come into contact with the protests. I am yet to see, as my colleague mentioned, any

evidence of the positive impacts of their behaviour or the protests at any healthcare facilities across the board.

I fully support the right to assemble and free speech, and I disagree with the notion that the Bill prevents any of that. Nor do I agree with DUP comments that the Bill may lead to the banning of the distribution of leaflets or other information. There are plenty of examples of where exclusion zones apply to lobbying and protesting outside facilities.

Both healthcare sites that I referenced offer a wide range of services, including services for children, young people, adults, older people, people with disabilities and people with mental health conditions. All have been subjected to images, slogans, harassment and abuse, which has caused them stress and anxiety as they tried to access the healthcare that they need. I say that with authority because I have spoken to a wide range of people. I will put that in context by sharing some of the real-life experiences of staff, patients, parents and other members of the public who have contacted me to highlight how they have been made to feel as a result of the distressing scenes that they have been faced with. In particular, I have received numerous messages from staff working across both sites, all of whom have personal stories. Some described how they were recorded going to and from work and had to ask protesters to allow them to make their way into the facilities. Others reported being subjected to verbal abuse and harassment by some of those individuals while trying to provide a vital service to the public.

It is important to remind Members across the House of how we, over the past 18 months in particular, have lauded the excellent work of health and social care staff and the sacrifices that each and every one of them has made to keep us safe. I truly hope that we will be consistent in our approach and stand up for their right to access their work, free from harassment and distress.

One staff member described to me how she had experienced a horrific miscarriage last year and was now heavily pregnant again, which, obviously, is a very anxious time for any woman. She was becoming increasingly anxious, and being faced with those images and scenes was extremely triggering for her. She stated how she found herself being reduced to tears almost every single day in her work when she encountered those protesters. No one should be made to feel like that, not least in their place of work.

It is also important, as we talk in the context of COVID, to remember how many women, in particular, attended appointments alone due to the restrictions that were in place. Whether they were accessing abortion services, maternity services, counselling following a stillbirth or miscarriage, or any other healthcare service, doing so alone meant that the anxiety of all those people was heightened. In my area, they had the added stress of coming into contact with protesters who threw holy water at them; prayed for their sins, as they see them, over a loudspeaker; displayed disturbing images; and obstructed their path. That is traumatic, and it is totally unacceptable. I vividly recall a mother who contacted me in desperation — that is the only way in which I can describe it — because she wanted to have protesters removed from the gates of Daisy Hill Hospital in Newry. She highlighted just how difficult it was for her adult son, who suffers from severe mental health problems. He was traumatised each time that he attended his mental health appointments. She explicitly described the fear that she felt as a mother who had already lost one son to suicide due to the mental health issues that he faced. She stressed that she needed her remaining son to be able to access the help that he required free from distress so that she would not have to bury another child. Accessing healthcare should be a private matter, and no one — absolutely no one — has the right to interfere in someone else's life like this, regardless of their opinion or view.

Before I finish, I pay tribute to a small group of women in Newry who came together in light of the widespread public outrage on how women were and still are being treated at these sites and formed Supporting Women Newry. Week in, week out, whatever the weather, they stand in solidarity with women and families in Newry to try to make their experiences less traumatic as they access healthcare.

I thank Ms Bailey for bringing this important Bill to the House. I ask Members to put aside their personal views, take a humanitarian approach when considering what we are debating, and support the Bill for safe access zones for women.

Miss Woods: I support the Bill at Second Stage. I thank my colleague for bringing it forward and for all the work that she has put into it over the past number of years. I will start by declaring what the Bill is not: it is not a Bill that removes the right to protest, congregation, religious expression or belief, or freedom of speech, and nor does it deal with reproductive healthcare itself. The Bill is about safety and preventing harassment and intimidation. It is

also about access to a balance of competing rights. People are congregating outside a number of healthcare facilities here. As we heard, that can be threatening and intimidating to those entering the building, including the staff who have to run the gauntlet to access their place of work. Those people are not conducting a peaceful protest that is directed at people in elected office. If they were protesting against the law, as they see it, they could stand outside the seats of government, but they are not doing that every day. The sole purpose of their actions is to harass women who are accessing sexual and reproductive healthcare, and they have no regard to the reasons or motivation of the women for doing so.

These people target only women of what they perceive to be childbearing age, or those whom they deem to be involved. It does not matter if they are going into the building for work purposes or to access legal healthcare, contraception, other family planning matters or advice. They are all deemed to be legitimate targets by the people who congregate outside. They have been known to follow women and their families along the street, and they take photographs of individuals who have entered or exited the building without the person's permission or consent, and they then threaten to publish those photographs. As we know, intimidation reached such a level at one location that volunteers came forward to offer people the opportunity to be escorted into the building if they felt that they needed it. Ms Bailey was one of those volunteers. I thank her for that and for outlining her experiences.

I, too, was subjected to the behaviour that has been outlined. On one occasion when I went to the clinic for a meeting with staff members, I was grabbed by a woman holding a plastic doll as I approached the building. She confronted me, touched and pushed my arm, asked me whether I knew what my baby looked like and said that I would regret what I was going to do. Why is anyone harassed like that for entering a building for a meeting? On leaving the building, I was met by more people outside. One had a poster of a graphic image that would not be shown on TV before the watershed. I was followed down the street by a different lady who asked me if I was at a crisis point in my life and whether I needed her advice. The last thing that anybody at crisis point needs is the unsolicited harassment of a stranger and to be shouted at on the street. The last thing that anyone needs when entering their workplace is to be called a murderer. No one should have to endure such behaviour in accessing healthcare or their workplace. That level of discomfort should not be experienced by anyone.

It is a disgrace that that kind of behaviour goes on. We need to send a strong message that condemns that type of behaviour and that states that such behaviour will not be tolerated. Unsolicited approaches must not be made to anyone who is entering a registered pregnancy advisory bureau or clinic. Likewise, other activities that are designed to cause distress, such as filming, recording, so-called counselling and pamphlet distribution, must not happen.

Mr Chambers: I thank the Member for giving way. It is distressing to hear what the Member experienced when she was conducting her legitimate business at a clinic.

She explained very vividly how she felt coming away from the clinic. Would she agree with me that we cannot start to imagine how a vulnerable person, at a very low or crisis point in their life, would feel getting the treatment that she received when she left that clinic?

12.15 pm

Miss Woods: I thank the Member for his intervention. I completely agree: it is not for unsolicited strangers to offer so-called counselling services to anybody who is at a crisis point. That goes for anything, be it a healthcare matter or any matter or at all. There are plenty of support services out there, although there needs to be a lot more crisis support for people, should they need it.

Protest is not against the law. As we heard, everyone has a right to protest, and it is deeply embedded in our recent history as a method for change. Protest is a necessary and crucial part of our society, but the actions and images used by those groups and individuals and the words that they express to anyone entering or leaving those buildings are not acceptable. Protest should not mean intimidation or harassing behaviour, and those involved in those cases do not have the right to impede access to healthcare. I do not see that type of protest occurring outside GP surgeries or, indeed, in chemists or counselling offices. If it was, it would not be accepted and action would be taken. The behaviour amounts to harassment and intimidation, and a number of the people involved have even been charged with assault.

As Mr Allister and other Members will know, the harassment laws in Northern Ireland only cover actions that occur on two or more occasions. Mr Allister asked earlier about clause 6, and he will know only too well the inadequacy of the harassment laws. So will members of the Justice Committee, given that we are currently

looking to strengthen harassment laws in the Protection from Stalking Bill, which is nearing the end of its Committee Stage. There must be a course of conduct involved, and clause 6 criminalises behaviour in a geographic location rather than dealing with perpetrators or potential victims. That is why it is needed and that is what makes it different from the harassment and stalking legislation in Northern Ireland.

Restraining orders were also mentioned. As we know, those are not sufficient, they are not open to everybody and they do not protect people from abuse or harassment in the way that would be needed in these cases. They also have to go through the courts system, and all Members will know the issues with that and the significant barriers that are in place. I understand that there has been only one successful conviction that was not overturned for an assault on an employee of a sexual and reproductive healthcare charity. However, that offender is still allowed to stand outside and continue their actions.

Perhaps that answers some of the questions that Members posed about the adequacies and inadequacies of the current law and why the Bill is needed. First, those entering a building for an appointment or consultation might not return, so the behaviour does not come under the protection of current harassment laws because it is not a course of conduct. The Justice Committee and the Assembly looked at that when they dealt with the Domestic Abuse and Civil Proceedings Act (Northern Ireland) 2021, and we ensured that a requirement for the activity to occur on one or more occasions was included in the Act for that reason. Secondly, the police do not come out to every incident that is reported to them. As we are aware, the Police Service is stretched and under extreme pressure to deal with other issues. Thirdly, without the Bill, the actions that can be taken are reactive and do not protect women from the present situation. Even if the harassment laws were strengthened, there would still need to be a course of conduct to meet the definition of harassment.

A proactive and preventive method is needed. The Bill, and showing support for it, would be an important step in realising that the harassment of anyone who is using any form of healthcare facility throughout Northern Ireland will not be tolerated. No matter what our opinions may be about certain aspects of sexual and reproductive healthcare services provision in the country, it is of the utmost importance that rights are protected and upheld. No matter what type of healthcare

services people require, everyone should be free to access advice and services free from harassment and verbal and physical abuse.

The creation of safe access zones is a step forward that has been discussed and debated in the Commons and in council chambers across Northern Ireland. A recent motion passed unanimously in Belfast City Council following on from same in 2017. A similar motion passed in Derry City and Strabane District Council. Also in that year, Ards and North Down Borough Council voted on a motion from us to condemn all harassment and intimidation taking place outside facilities in Northern Ireland that offer reproductive healthcare. That included attempts to physically block access to facilities and filming and recording staff and clients entering and leaving the building. That passed unanimously at committee. I note that some Members of certain parties that sit on those councils are commenting on the Bill today, totally against what their members have done at council level.

We will not tolerate groups of people standing outside GP surgeries and chemists that provide prescriptions and healthcare advice and administer vaccination programmes, for example, so why do we not condemn the behaviour outside other clinics, which obviously affects women much more than men?

I thank my colleague for all her work on the Bill. It has taken years to get to this point, as she outlined, and I urge all Members to support the Bill progressing at Second Stage.

Mr Allister: I wish to begin by refuting the suggestion that to oppose the Bill is to endorse harassment, abuse or violence. It is none of those things, and I absolutely throw back that slur, which has been cast at those of us who would dare to question the need for and the content of the Bill.

In that same vein, we have had many diversionary emotive presentations in support of the Bill, even to the point of calling, in aid, a distortion of Baby Loss Awareness Week. We are talking about abortion. We are talking about the ending of babies' lives, yet there are those in the Chamber who have sought to call, in aid, Baby Loss Awareness Week, which is about those who lost babies not through choice.

Ms Sugden: I appreciate the Member giving way. Will he acknowledge that some images that are often shared at those protests might compound that trauma in Baby Loss Awareness Week? I have been contacted by constituents who have suffered miscarriages and are not

happy about those images. Will the Member acknowledge that?

Mr Deputy Speaker (Mr Beggs): I remind Members to make sure that their microphone is in front of them and to speak into it so that everything can be recorded by Hansard.

Mr Allister: Those persons would not be protected by the Bill. The Bill's definition of "protected person" are those going into the facilities or accompanying those going into the facilities, so the point that the Member raises is a non-point in the context of the Bill.

Ms Sheerin: Will the Member give way?

Mr O'Toole: Will the Member give way?

Mr Allister: I am being surrounded by requests. I will certainly. I will start with the lady, if that is not offensive.

Ms Sheerin: I thank the Member for giving way. I ask the Member to consider what he has just said and to think about whether he understands for one second the circumstances of any woman who finds herself in the position of needing a termination. I also ask him to consider whether it is appropriate to comment as he has just done.

Mr Allister: I consider all those things, and I consider that it is.

Mr O'Toole: I thank the Member for giving way. Will he not consider for one moment that, in some cases, women going into those premises seeking a termination or advice on a termination have suffered miscarriage before and that part of the reason that they may be going in to seek that advice is because there are medical complications or personal reasons? Those are not different categories necessarily, and it is deeply and profoundly offensive to many women and families who suffer baby loss and sometimes have to make those very difficult choices later on.

Mr Allister: If a lady is going in to seek advice about complications in her pregnancy, she would be going to her GP or a hospital. I do not think she would be going to an abortion clinic.

Ms Kimmins: Will the Member give way?

Mr Allister: No, I need to make some progress. I am generally generous with allowing interventions, but I want to start. I have not

even started my comments to any extent on the Bill.

I am not distracted from the fact that the Bill, like any Bill, requires rigorous scrutiny as to what it really seeks to do. One does not have to read very far into the Bill to detect the direction of travel. Clause 1(2) states:

"Acts within a safe access zone which may have the effect of preventing or impeding access to the premises, or influencing, harassing, alarming or distressing persons accessing the premises, are criminalised."

Let me read that again, focusing on one word:

"Acts within a safe access zone which may have the effect of ... influencing ... persons accessing the premises, are criminalised."

Think about that: the House is being invited to legislate that something that may — it does not have to, but it may — influence another person should be criminalised. Think of the distressed mother whose 14-year-old daughter finds herself pregnant and goes to a clinic to get an abortion. The distressed mother begs her not to go through with the abortion. This draft law says that the mother is the criminal. That is not where the state should go with regard to this matter.

If there is any doubt about that, turn to clause 6. Clause 6(2) states:

"It is an offence for D" —

that is the person who is not a protected person, the defendant; "D" the defendant —

"to do an act in a safe access zone with the intent of, or reckless as to whether it has the effect of —

(a) influencing

in connection with the protected person attending protected premises".

Yes, the distressed mother of the 14-year-old who is pregnant and goes for the abortion is criminalised because she has the intent to want to influence her daughter not to do it. How can that be right? Yet, that is what the draft law would do. Let us not forget that the protected person can, of course, be a minor or an adult. The draft law is directed at that 14-year-old girl as much as it is at the 24-year-old woman, yet we are picking on mothers who may be distressed by that situation and want to bring

motherly influence to their daughters. If they follow them down to the clinic, pleading with them not to have the abortion, they become the criminal. There is nothing upright, proper or legitimate about that approach.

Ms Sheerin: I thank the Member for giving way. I refer to his earlier comments. He has just outlined a particular situation or circumstance. He took umbrage with Members referring to the fact that it is Baby Loss Awareness Week. I ask him this again: can he say categorically that he understands the circumstances of every woman in the North of Ireland who seeks a termination? I do not think that he can. Therefore, how dare he criticise those women or suggest that some of them have not experienced loss?

Mr Allister: Had the Member been listening, she would have heard me criticise those Members of the Northern Ireland legislative Assembly who abuse the very principle and ethos of Baby Loss Awareness Week in aid of the destruction of babies. That is what I criticised.

Think of another situation with regard to what the Bill actually means.

The direction of travel of the Bill is that it will soon be criminalised to have any view contrary to abortion, but let us take the example of someone who has a religious conscientious conviction about abortion. They decide that an abortion clinic is somewhere that they will go not to shout, not to lobby, not to block people but to hold up a poster. That poster might simply have the immortal words of the sixth commandment: "Thou shalt not kill". Under the Bill, because that is capable of influencing someone and causing them, as the protester intends, to stop and think, "Do I want to kill the baby in my womb?", and because it has the capacity to cause them to be influenced by that, the protester, doing nothing but holding up those few words, is a criminal. That is a preposterous proposal, yet it gives us an insight into the Bill.

The Bill is vindictive against freedom of expression. Freedom of expression is not just the right to express the palatable; equally, it is the right to express the unpalatable. Yet, the person who reminds the users of the facilities of what, in their view, is the cardinal and sacred position that "Thou shalt not kill" is the person who, in this case, is criminalised.

12.30 pm

Ms Kimmins: I thank the Member for giving way. The Member's lack of self-awareness exasperates me when I listen to his contribution. Does the Member agree that harassment can be interpreted in many ways and that, for someone who has made that very difficult decision — one that they have probably deliberated on for days and nights for weeks and have not slept — that poster that he talks about may be interpreted as harassment, because it infringes their right to make a decision about their own body and to come to a conclusion that is not easy for any woman, something that he probably cannot have an understanding of? Does the Member agree?

Mr Allister: No, I do not. If the content of Holy Scripture is harassment, maybe it bears out the point that Holy Scripture should be a conscience-pricker in many avenues of life.

Ms Sugden: I thank Mr Allister for giving way. I just want to extend Ms Kimmins's point about harassment. The Member will be aware that current harassment law very much focuses on the person who is being harassed rather than the person who maybe thinks or does not think that they are doing the harassment. What does the Member say about that? Should people who are protesting have self-awareness around the potential that they are harassing, particularly if it is a repeated offence?

Mr Allister: Let us deal with harassment. You draw me to a point that intrigues me about the Bill. Clause 1(2) talks about "influencing, harassing, alarming or distressing", and, again, clause 6(2) talks about "causing harassment, alarm or distress". Harassment is defined, but not in this Bill. Harassment is defined in the Protection from Harassment (Northern Ireland) Order 1997. What is harassment? Causing alarm or distress. So what does the Bill mean when it says "harassment, alarm or distress"? Is it just being tautologous? What does it mean when it says "harassment", since the very word "harassment" in our criminal law is already defined as "alarm or distress"? Yet, additionally, we have some ill-defined, undefined harassment in the Bill. When you go to the interpretation section, you see that "harassment" is not defined. No doubt, when the Bill sponsor is winding, she will tell us what harassment is, if it is not causing alarm or distress, which is the only definition of harassment in our law. If we are bringing in a new definition, what is it? It needs to be spelled out. The House is entitled to ask and to know the answer to that question.

Ms Sugden: I appreciate the Member giving way again. Does he acknowledge that, under the current definition of harassment, the focus is on what the victim feels as a result of the harassment? His point is about the protester. However, if we put this into the context of a potential harassment offence, does the Member recognise that that harassment is about the victim? The Member talked about distress: does he acknowledge the distress caused to the victim? This is not necessarily about what is defined in the Bill; it is about what is currently defined in law. The Member is trying to make a point about what the protester might do, but does he recognise that their actions may be an offence?

Mr Allister: I have no issue with that. It is clear to me what the law means when it says cause "alarm or distress": it means "cause alarm or distress to a third party". Of course it does. That is not the issue here. The issue on that particular is that we now have this undefined perception of harassment that clearly does not mean "alarm or distress". If it did, the Bill would not have been drafted in that tautologous way. If it simply means "alarm or distress", you do not need the word "harassment". Clearly, it means more than "alarm or distress", hence the use of the word "harassment". What is that meaning? I do not know, because we are not told in the Bill.

I want to draw attention to one or two other things in the Bill. Clause 9 relates to the exercise of functions. This relates to the Department of Health:

"the Department must have regard to, amongst other things—

(a) the safety and dignity of protected persons,

(b) the right to respect for private and family life

(c) the right to manifest religious belief, and the rights to freedom of assembly and expression, set out in Articles 9, 10 and 11 of the Convention, and in particular the right to protest."

We are told in clause 9 that the Department, in making its censorship zones etc, must have regard to "the right to protest". However, clause 8(2) states:

"Within eight weeks of receiving this notification, the Department must designate an area as a safe access zone."

There is no scope to be influenced by the right to protest about the manifestation of religious belief. That is expunged by clause 8(2). It is only in clause 9 for presentational purposes. If ever there was any doubt about that, paragraph 5 of the explanatory and financial memorandum could not be clearer:

"The Bill does not include provision for protestors."

There it is in black and white. The Bill is about expunging and oppressing protest. The Bill, for all the fancy words of clause 9 about having regard to the right to protest, is in the business of the very opposite.

Mr Buckley: I thank the Member for giving way. On that point, does he agree with me about the vague and open-ended nature of the Bill? He has articulately pointed out the Bill's contradictory nature, given that clause 9(c) refers to:

"the right to manifest religious belief, and the rights to freedom of assembly and expression, set out in Articles 9, 10 and 11 of the Convention".

Does he agree that that seems merely to be an afterthought, given the functions and provisions provided for in clause 6?

Mr Allister: It is clear that that is there to try to paper over the fact that the Bill is an all-out assault on freedom of expression and an all-out assault on the right to protest. The proof is in clause 8(2), where it says that the Department "must" make the order. Never mind what it has to have regard to notionally; it "must" make the order. The Bill is fraudulent in that respect in pretending that, in fact, the functions are exercised subject to clause 9. They are overridden by the compulsion of clause 8(2). That is the reality.

On that point, are we in a situation where we have no law to deal with this? We are not. I have already made that point in interventions. On the question of harassment, points can be made that there has to be a course of conduct, which is defined in the 1997 Order as more than one occasion. A simple answer to that is to remove the course of conduct requirement in the Harassment Order. If that is the problem, that is the solution, not a Bill that carries us way into the realms of making it unlawful to try to influence someone. That is the real nub of the objection to the Bill.

We have harassment laws. You can get a harassment injunction. You can have a restraining order under the Harassment Order, which is for future attention, to curb how someone can act in future. Those things, among many more, already exist.

Miss Woods: I thank the Member for giving way. He has been generous with his time. Does his exact point about harassment law recognising that this needs to be a course of behaviour, as in more than one occasion, and his outlining of the restraining order requirements not point to the need for the Bill? You cannot have a restraining order on the basis of one instance of harassing behaviour; it is for future behaviour. In the instances that we are talking about, generally speaking, the women will not go back to the clinic.

Mr Allister: We have had justice amendment Bills before the House. Why did none of the Members, if they are exercised about this issue, table an amendment to the Harassment Order to remove the course of conduct requirement? That was the simple answer, and it would have had universal application, not just in respect of these protected premises. That was a far easier route to follow and one that was far less objectionable.

Of course, I also remind you that there are powers under article 5 of the Public Order (Northern Ireland) Order 1987 whereby the police, in the proper circumstances, can forbid public gatherings at locations. Why are we reinventing the wheel? It is already a breach of the law to engage in offensive or malicious communications under the Communications Act 2003, never mind the public order definitions that also cover those manifestations.

We have the 1997 Protection from Harassment Order and the disorderly behaviour and public order offences in the Public Order (Northern Ireland) Order 1987 and all of that. Article 9 of the 1987 Order makes it an offence to use:

"written material which is threatening, abusive or insulting".

It is already there in article 9. In fact, for that, you can get a heavier sentence than what this Bill proposes: you can get six months in jail. Why does the Bill reinvent the wheel on those issues?

I remind the House that other responsible legislatures and Governments who have looked at the issue have come to a different conclusion from this private Member's Bill. The Home

Office, having examined the issue in great detail, decided in, I think, 2018, that this was not the way to go. Scotland, which is often held up by some in the House as a great example of how to do devolution, decided not to have protection zones. We set a dangerous precedent in trying to impinge on other people's opinions.

The Bill really wants to establish censorship zones within which only the sponsor's approved set of values can be articulated. We do not need the sort of society where we are so oppressive of others' opinions that you created zones within which only the approved set of values can be expressed.

12.45 pm

Mr Buckley: I thank the Member for giving way on that point. Would he care to make reference to and elaborate on the fact that, while many in the House have articulated that this would apply only in a health trust setting, the wording of the Bill makes it much more vague and that its open and vague nature means that this could, in effect, spill out into other areas across towns and villages in Northern Ireland.

Mr Allister: One of the reasons for that is that there is no limitation on the potential extent of the censorship zone. There is none whatsoever. It could embrace a whole town, if that were relevant.

This Bill is an open invitation to the House to create censorship zones, because the people who would be within those zones want to express values and views that offend the Bill sponsor. Through the Bill, they wish to decree that views that are disagreeable to those such as the sponsor are so wrong that they must be forcibly driven from the public square. The essence of the censorship or exclusion zones is that those views are so disagreeable that they cannot be heard or even be displayed on a poster lest they have the effect of influencing someone. That is a flagrant attack on liberty and freedom of expression.

As I said, freedom of expression has to embrace the expression of the unpalatable and the palatable equally, otherwise it is meaningless. The logic and purport of the Bill is to suppress freedom of expression and to drive it from the public forum on the basis that it is disagreeable to the views of others. That is totalitarianism. That is not the liberty that many in the House proclaim a belief in from time to time.

I cannot support the Bill. It goes far too far and is far too oppressive of the rights of freedom of expression and protest, all in the interests of excluding anything but the pro-abortion view.

Mr Carroll: I support the Bill and offer my solidarity to those women who have been intimidated while trying to access reproductive healthcare. It is never acceptable to impede someone's access to healthcare, and it is even more condemnable when the kind of healthcare that they are accessing is already a source of great stigma and when it is likely that they have already overcome many barriers to get to that point.

I also want to thank and to quote Alliance for Choice, whose representatives have been unequivocally clear on this matter. It states that whatever your party or personal stance:

"It is completely unacceptable that women and pregnant people, their friends and families, and healthcare workers should be forced to run the gauntlet of abuse and harassment. This would not be tolerated for vasectomy or any other healthcare, reproductive and otherwise."

Some Members would do well to listen to that advice.

There have been claims from anti-choice organisations that the Bill is oppressive and that it attacks their right to assembly. It is clearly hypocritical that some organisations, with members who have been convicted of harassment outside some of those clinics and who brag about people not having seen harassment yet, to speak about oppressive measures. Those organisations have been deemed by judges to have been forcing any women of childbearing age to identify their reasons for entering a Marie Stopes clinic. As we heard already, they have thrown holy water at pro-choice activists. They gather in Newry on a weekly basis and they claim that women and their healthcare providers are guilty of murder. They hold giant, graphic images, which can be entirely traumatising for women who have had a crisis pregnancy or, indeed, a miscarriage. That behaviour is oppressive, and it is exactly those kinds of tactics that make the Bill necessary.

I will pick up on the point about the rights to assembly and protest. In my opinion, the Bill is not an attack on the right to protest. It is deeply unfortunate that safe access zones are necessary at all. However, they are necessary because of sustained campaigns of hatred and harassment that do not have some inalienable

right to continue, even under the guise of protest.

I am an ardent defender of the right to protest, as many in the Chamber know. I defended Black Lives Matter protesters who were shamefully targeted by the PSNI. I have protested, over the years, for reproductive choice and will continue to do so. Those who stand on the other side of the debate, on the other side of the Chamber, are still free to protest and have their voices heard, but they should not be free to frighten, shame or chase anyone away from the door of a healthcare clinic. I ask this: where was the DUP last summer, when there were curbs on the right to protest for Black Lives Matter protesters? There was absolute silence. I hope that those in the House whose views on the issue of abortion oppose mine will have the same vigour when they challenge anti-vax protesters outside hospitals, but, somehow, I doubt it.

I want to return to the matter of people who have been targeted by those harassing campaigners. As has been said, not all of them are seeking an abortion. Some of them are family, friends or partners, and none of them should be subjected to such harassment and treatment. As is the case with many of the consequences of the lack of abortion access here, they have had to speak up and tell their stories, which can be incredibly difficult. I thank them for speaking out against those groups.

I turn my attention to the Minister of Health and all the members of the Executive in the Chamber. The fact that there is still such stigma around abortion is a direct consequence of the failure to deliver free, safe, legal and local access to abortion. It is one of the worst indictments of the kind of politics that dominate this place. Women and pregnant people are failed every day for the lack of services, basic information and support. It is an international shame, disgrace and embarrassment. I hope that the words of people who have suffered for crossing the thresholds of clinics in the North will give the Assembly some impetus to put those services in place.

I leave the last word to Informing Choices. They stated in their briefing:

"We are aware of clients who have been attending counselling, and sessions were proving beneficial, but the activities of individuals outside the building adversely affected them, and, as a result, they decided not to continue with counselling."

So, for all the nice words about mental health awareness, services and support, I remind Members of that comment. I will bear it in mind when I vote.

I thank Informing Choices, Alliance for Choice, and Clare Bailey for bringing this Bill. I support it, and urge other Members to do so as well.

Mr O'Toole: I strongly support the Bill. I commend my colleague from South Belfast Clare Bailey for introducing it. She has been a stalwart on reproductive rights and associated issues in the Assembly and outside it. She deserves real credit for that.

Since I am one of the last to speak, though I am sure that the Bill's sponsor will probably want to talk about it, too, I will touch on the somewhat bizarre and occasionally hair-raising and offensive things that I have heard while waiting to speak.

One of the Members who spoke previously, Mr Allister, talked about the potential for the offence of malicious communication to be used in relation to protests. To be honest, I wonder whether his speech should be referred as a malicious communication because it contained many objectionable statements that will be deeply offensive, not just to people who are seeking terminations for whatever reason but, I am afraid, to women in general. I am conscious of my position as a man who stands up to talk about these things, knowing that I will never be in the position of a woman seeking to access these services and being harassed.

Mr Allister: Will the Member give way?

Mr O'Toole: I will give way in one second. It is very important that, when we are speaking about these very sensitive matters, we do so with respect, understanding and decency. I give way briefly.

Mr Allister: To add to the Member's opposition to freedom of expression, is he now proclaiming opposition to the privileges of the House?

Mr O'Toole: No, I am not. I was merely commenting on his speech. Given his record of robust commentary and debate in the House, he would not want it any other way.

The point about protest can be dismissed relatively comprehensively. The Member who spoke previously, Mr Carroll, who does have a strong record of protest, registered his view that the Bill does not involve a significant infringement of the right to protest, and I agree

with that for one very big reason. The Bill does not stop anyone protesting any issue. It does not stop anyone who objects to abortion provision in Northern Ireland or anywhere else protesting, but it stops them harassing women outside premises where either abortion services or advice on whether to seek an abortion are available. Let us bear in mind that this is not just about women who are going to access a termination itself but is about women, who are often very vulnerable, often young and often in very vulnerable positions, seeking advice and information. It is about preventing that harassment. Let us be absolutely clear that it does not infringe on anyone's right to protest anywhere else. If the issue is about the legal provision for abortion, I am strongly pro-choice and believe that, long before now, we should have provided in law for women's ability to seek full reproductive healthcare. However, if people want to protest that outside Parliament Buildings any day of the week, they are entitled to do it. That is the place to do it, because we are people who make laws. That is totally different from putting distressing, lurid images in front of people who are seeking services.

Mr Carroll: I thank the Member for giving way. Will he agree that the Bill is quite limited on where those posters, images, placards and whatever can be displayed? My understanding of the Bill is that the very offensive, damaging and traumatising images that adorn Belfast city centre and other places will still be allowed to exist, as much as I have deep opposition to their traumatic and offensive images.

Mr O'Toole: Exactly. He is right, and, of course, that is why the Bill calls them "safe access zones". It is not about preventing the right to protest on that issue at all.

Ms Bunting: Will the Member give way?

Mr O'Toole: I will give way in one second.

I also want to address one other point that Mr Allister made, which is about the chilling effect on what he called the provision of "motherly" advice or close family members advising young women or trying to persuade young women not to go through with the procedures. Women in those positions are very vulnerable, but the idea that the Bill prevents any family member or friend having conversations or even, as he says, yes, suggesting that they do not proceed with the termination is completely false. There is nothing whatsoever in the Bill that prevents any family member talking to their family member. I will happily give way if Mr Allister can

tell me where it outlaws people having conversations with family members.

Mr Allister: Clause 6(2) refers to anyone who seeks to influence someone who is in one of these zones. That could well be the mother of a child. If it happens in the zone, you are not allowed to influence, no matter how motherly that influence might be.

Mr O'Toole: I am glad that I let the Member make that intervention where he referred to the act happening inside one of the zones. Presumably, if the person is their mother, they either share the same house or can meet in a different premises that is not outside a clinic.

Miss Woods: I thank the Member for giving way. I point out to other Members that in clause 4(b), which deals with protected persons, that is covered by:

"accompanying a person described in paragraph (a), at the invitation of that person".

Mr O'Toole: I thank the Member for that welcome intervention. It is absolutely critical to nail this point. There is nothing at all in the Bill that prevents family members having conversations with people who are seeking terminations. It simply creates safe access zones, which prevent women being harassed. Let us be clear about this: lots of the actions go beyond harassment at times. They are deeply unsettling and deeply threatening. Some of the most lurid and, at times, pretty exploitative and unpleasant images are used to intimidate and harass women.

I will not go through all the clauses in detail because others have done, but, as I said, I have gone through the Bill and am comfortable that it properly balances the right of women to seek reproductive healthcare —.

Ms Bunting: Will the Member give way?

Mr O'Toole: I will give way in a second, because I promised to, Ms Bunting.

The Bill properly balances the right of women to seek reproductive healthcare and the right to freedom of expression and protest. Those are both rights that need to be upheld.

1.00 pm

It is also worth saying that the right of women to seek reproductive healthcare has been denied

in this society for decades. It ill behoves those who now complain about the right to freedom of assembly, free speech and protest to talk about rights, given the systematic denial of women's rights to seek the basic reproductive healthcare that existed in other parts of, yes, the United Kingdom. Some of those same people are very good at reminding us about the rights attached to citizenship of the United Kingdom, but they did not want rights for women in this place for a long time. Women now have those rights, and they should be able to access them without harassment and threat.

I will give way to Ms Bunting.

Mr Deputy Speaker (Mr Beggs): Order. The Business Committee has arranged to meet at 1.00 pm. I, therefore, propose, by leave of the Assembly, to suspend the sitting until 2.00 pm. The first item of business when we return will be Question Time. There will then be a question for urgent oral answer. After that, we will return to the debate, and I will invite Mr O'Toole to continue his contribution.

The debate stood suspended.

The sitting was suspended at 1.01 pm.

2.00 pm

(Mr Principal Deputy Speaker [Mr Stalford] in the Chair)

Oral Answers to Questions

Economy

Mr Principal Deputy Speaker: Questions 4 and 13 have been grouped.

Employment Rights: NDNA Commitments

1. **Miss Woods** asked the Minister for the Economy for an update on his Department's work to implement the Executive commitments in New Decade, New Approach (NDNA) that relate to employment rights. (AQO 2565/17-22)

Mr Lyons (The Minister for the Economy): My Department's economic recovery action plan continues to help us to protect jobs and keep people in employment. As we continue to reopen our economy, protecting jobs is my immediate priority. Members will agree that that is an important employment protection in its own right.

In terms of employment law, my Department has, of necessity, prioritised those actions that protect those most immediately affected by the pandemic. To date, those have included making legislation to ensure that family-related leave, redundancy and other statutory payments for employees were based on normal pay, rather than furlough pay. My Department also legislated to extend to all workers vital health and safety protections that previously applied only to employees. Looking ahead, my focus is on progressing the Parental Bereavement (Leave and Pay) Bill. That will be an important new employment right for parents who sadly suffer the loss of a child or stillbirth.

I am aware of commitments made in New Decade, New Approach that relate to employment rights. The unprecedented impact of the COVID crisis has meant it has simply not been possible to progress all of those. While Northern Ireland already has a robust framework of employment rights, my Department will consider those issues as part of a wider review of employment rights issues in the next mandate.

Miss Woods: I thank the Minister for his answer, but the New Decade, New Approach agreement stated that:

"the Executive should commit to becoming a Living Wage employer",

ban zero-hours contracts and introduce an:

"Age, Goods and Facilities and Services Bill"

to ensure that no worker is discriminated against because of their age. Does the Minister agree with me that a 17-year-old doing the same job as a 24-year-old should be paid the same wage? When can Members expect to scrutinise the age, goods and facilities and services Bill that will ensure that no worker is discriminated against because of their age?

Mr Lyons: I certainly understand the points that the Member has made, and I hope that she can understand the difficulties that we have had in progressing some of this legislation during this mandate as a result of the huge amount of time that was taken up dealing with the crisis and the immediate issues that we faced.

In particular, I am aware of the commitments that were made in relation to zero-hours contracts. The huge upset caused by the pandemic slowed those down. Although flexibility in the labour market can have a positive benefit for many workers and businesses, there are clearly instances where the misuse of contracts like those can be deeply unfair to workers. I will want to give detailed consideration to this matter. At this stage, any actions to regulate the use of zero-hours contracts could only be taken forward following a public consultation and the approval of any new legislation by the Assembly.

Mr Carroll: It is very disappointing to see a lack of legislation coming through from the Minister with regard to workers' rights. Minister, as I understand it, your party colleagues and previous Ministers refused to engage directly with or meet NICICTU, which represents 250,000 workers here. Will you commit, if you have not already, to meeting NICICTU to hear what improvements in employment legislation can be brought forward in this and the next mandate?

Mr Lyons: I hope that the Member will recognise that we have not been able to make the progression on some of the employment issues in this mandate that we had hoped to, again, because of the COVID crisis. I am

always happy for either myself or my officials to meet those who want to discuss potential legislative changes. If invitations are received, I or my officials will be happy to attend.

Ms Dolan: Minister, you spoke about workers on zero-hours contracts. There are around 11,000 people on zero-hours contracts in the North with no certainty about their income or hours. You said that there is a commitment to addressing that in the New Decade, New Approach agreement and that a public consultation will need to be done in order for legislation to be changed. I intend to introduce a private Member's Bill (PMB) on the issue. I have done the public consultation. Will you give a commitment to supporting my private Member's Bill when it comes to the House?

Mr Lyons: As I said, not only do we need to do our public consultation but other work needs to be carried out. It is a New Decade, New Approach commitment, but I am of the view that the time taken up dealing with the COVID pandemic made it difficult for us to progress it. I am sure that it will be at the top of the agenda in the next mandate, however.

Ms P Bradley: Minister, you touched on the effects that the pandemic is having on workers. When will we see a change to the "Work from home" message? Never mind the economic effects in our town and city centres, working from home is having an effect on many workers' mental health.

Mr Lyons: Absolutely. I have continued to raise the issue with Executive colleagues. It is important that the guidance reflect where our businesses are at the moment. A lot of them want to begin a phased return to the workplace. I certainly do not believe it to be the case that 100% of businesses want to send office staff back for 100% of the time. When it comes to office working, we will continue to see hybrid working in place for some time. Although productivity has remained high among those who are working from home, creativity is damaged through not being able to interact with other people in the workplace. It can be particularly difficult for those who are starting a new job and have to do so by working from home. It is a different matter for those already working for a company.

Numerous companies that I met have impressed on me that they want to see a change to that guidance. I am pleased that, on Thursday, the Executive agreed that, with appropriate mitigations, a gradual increase in blended working would be reasonable. That is

the point at which most businesses that are looking for the guidance to be changed are. As I said, they do not want everybody to go back at once, but they do want the opportunity to begin the process of bringing people back to the workplace, and I certainly support that.

Mr Dickson: Minister, what action are you and your Department taking to introduce a low pay commission for Northern Ireland?

Mr Lyons: The Member will be aware of the commitments in New Decade, New Approach on national minimum wage powers and the potential devolution of those powers. Minimum wage issues are currently a reserved matter, and that is an issue for the Secretary of State for Business, Energy and Industrial Strategy. The national minimum wage is currently set on a UK-wide basis, but it is regularly reviewed.

The UK Government have said that their intention is for national minimum wage rates to achieve the target of 60% of median earnings by 2024. We have not yet been able to conduct an assessment of the implications of devolving those powers. It is an issue that we will want to look at, however. I am encouraged by wage growth in Northern Ireland and by the skills and talents of our people that contribute to better jobs coming to Northern Ireland, but we need to focus on making sure that everybody gets the pay that they deserve.

HGV Driver Shortage

2. **Ms Hunter** asked the Minister for the Economy to outline the preparations that his Department made to address the shortage of HGV drivers as a result of Brexit. (AQO 2566/17-22)

Mr Lyons: If you pick up any newspaper, you will see that there is a shortage of HGV drivers in, for example, Germany, Poland, the Republic of Ireland and even the United States of America. Some of the countries affected are still in the European Union, while some have never been in the European Union. I therefore ask the Member why she attributes the shortage to Brexit, when it is happening in countries right across Europe and, indeed, the world.

Ms Hunter: I thank the Minister for questioning me at Question Time. When I spoke to HGV and LGV representatives on the ground, they raised their concerns with me, and that is why I ask the question on their behalf.

Mr Lyons: I did not get a question there, but I am certainly happy to outline the situation across Europe. There are estimated shortages of 124,000 drivers in Poland, between 45,000 and 60,000 drivers in Germany and around 43,000 in France. It is not a Brexit issue. In fact, the one way in which Brexit affects the situation here in Northern Ireland — we have had representations from people saying so — is through the additional paperwork and hassle caused by the protocol. Those additional burdens are causing a lot of people not to want to have to make the journey across the Irish Sea. If we want to address that issue, addressing the protocol would be helpful.

We have to focus on the fundamental issues as well, which are largely the pay and working conditions of those who operate in that sector. If we want to tackle the problem, we have to understand it in the first place. That means focusing on the issues that actually matter.

Mr McGuigan: Minister, in a letter of 27 September to the AERA Committee, you wrote:

"the Home Office has to date shown no appetite for any relaxation of visa rules".

That is the problem emanating from Brexit. In light of your words, do you agree that the British Government have no plans to fix the crisis, which not only affects HGV drivers but is a problem for a number of industries, particularly the agri-food industry here in the North? It results from a hard Brexit immigration policy. Do you agree that the British Government care more about that than the economy in the North of Ireland?

Mr Principal Deputy Speaker: Before I call the Minister, I remind Members that half an hour is available for questions. Please, can we have questions, not speeches?

Mr Lyons: The Member fails to understand what I said to Ms Hunter, which was that a combination of issues is causing the problems that we see. All those issues, in all the ways in which they have been manifested, need to be addressed. From speaking to the industry, first and foremost, we want working conditions to improve so that it becomes an attractive industry for people to come into in the first place.

To address wider labour market issues, yes, flexibility is needed in the system. I want to see that, and the AERA Minister and I have engaged in correspondence with the Home Secretary about it. We need to understand,

however, that a combination of issues is causing the problems in the wider labour market. For HGV drivers in particular, working conditions are the problem, and those are what we need to address.

Mr Dunne: Given that it is, indeed, a global problem, does the Minister agree that one practical, local solution to help to address the backlog of HGV driver tests would be to amend the trailer test requirements in line with those in Great Britain? That would help to free up more examiners to carry out the main tests rather than the small trailer tests. Unfortunately, the Infrastructure Minister swiftly dismissed that idea last week.

Mr Lyons: Yes, we could take that action, and it would be one remedy to some of the problems that we face. In the year before the pandemic, 2019, around 3,000 HGV tests took place. In 2020, obviously because of the pandemic, the number was, I think, under 300. That was a massive reduction in an industry in which there was already a decrease in the number of drivers coming forward. Testing is one part of it. Testing has increased over the past few months, but we are dealing with such a big backlog of people whom we are trying to bring forward that we need to consider all options. I agree with the Member's point, however.

Mr Beggs: At last week's Infrastructure Committee meeting, a major local haulier indicated that east-west payloads on trailers were at only 50% to 60% of the trailer capacity and that, frequently, journeys required an extra overnight stop because of the bureaucracy associated with the protocol. What assessment has been made of the additional cost to business in Northern Ireland of moving goods from GB? Furthermore, how many additional HGV drivers are required to meet the demands of the transport industry?

2.15 pm

Mr Lyons: Any fettering of trade, any additional paperwork and any additional bureaucracy leads to trade between Great Britain and Northern Ireland being slowed down, so of course it will add cost. I have spoken to business owners who have had to take on extra employees to deal with the mountains of paperwork that they have to fill out that they did not have to fill out prior to the protocol. Of course costs will increase as a result of the protocol arrangements, and of course they make it more difficult for those in the haulage industry. It is wrong for others to dismiss the

protocol as not being a factor in the haulage industry's problem because it is contributing to it. It is completely understandable that some people in the industry will say that they do not want to have to deal with the potential extra overnight stays, which the Member mentioned. That is why the issue needs to be addressed.

Mr Allister: Perhaps the Minister could urge Mr McGuigan to keep up, because on 25 September Her Majesty's Government announced an extra 500 visas for HGV drivers. Is there any allocation to Northern Ireland? How will we see a ripple effect from that?

Mr Lyons: My understanding is that it is done on a UK-wide basis and that there is not a particular allocation for Northern Ireland.

Apprentices: Wages

3. **Mr Harvey** asked the Minister for the Economy whether his Department will consider increasing the wage of apprentices due to the increased cost of living. (AQO 2567/17-22)

Mr Lyons: The national minimum wage, including that for apprenticeships, is a reserved matter, with policy responsibility resting with the Department for Business, Energy and Industrial Strategy. The national minimum wage apprenticeship rate does not apply to higher level apprentices. My focus, however, is on growing high-quality apprenticeships, including higher level apprenticeships that lead to high-quality, well-paid and resilient careers.

Mr Harvey: Minister, what steps is your Department taking to encourage more people into trade apprenticeships?

Mr Lyons: I thank the Member for his question. My Department has put in place a package of financial support to encourage employers to return apprentices from furlough through to successful completion of their framework and recruit new apprentices. Information on the apprenticeship return, retain and result scheme and new apprentice recruitment schemes can be found on nibusinessinfo.co.uk.

Employer-led sectoral partnerships operate across various sectors of the economy and are central to the development of the apprenticeship frameworks, from level 2 to level 8, to ensure that they meet the current and future needs of industry in Northern Ireland. For example, the level 3 apprenticeship in IT was recently expanded to include pathways in cybersecurity and digital forensics to reflect the

growing demand for skilled workers in those fields. In addition to that, my officials continue to work on extending all age criteria to non-economic priority sectors and the development of public-sector apprenticeships.

Dr Archibald: The Minister will be aware that one of the things impacting on the cost of living is the big increase in energy costs, which are associated mostly, although not solely, with the increase in gas prices. Further price increases are predicted in the near future. Does the Minister agree that we need to see a greater intervention from the British Government through funding that is commensurate with the increases to mitigate the rise in the cost of living for workers, families and businesses?

Mr Lyons: Absolutely. I recognise the impact that those world market increases are having not only on businesses in Northern Ireland but on consumers. I am concerned about the impact that that will have, especially as time goes on. We are certainly in a very uncertain time. Later this week, I will meet my counterpart, the Secretary of State for Business, Energy and Industrial Strategy.

We can also do things here to help. The Department for Communities takes the lead on fuel poverty issues, and, in my Department, we focus on energy efficiency, which is really important. We should all be aware of that because using less energy will contribute to lower energy costs.

Mr Stewart: I support any call for additional apprenticeships and for them to pay a fair living wage.

There appears, from speaking to businesses and apprentices currently in the system, to be a backlog because those who have completed the paper-based educational side of the apprenticeship are unable to finish the vocational one due to the impacts of COVID. Are you aware of the issue, Minister? What is being done to alleviate the backlog?

Mr Lyons: We are aware of the issue. We want to encourage people to take on apprentices and make sure that they are able to complete their training. The apprenticeship return, retain and result scheme was developed to reduce the risk of apprentices being made redundant. In total, £3,700 per apprentice is available to employers over three incentive payments. The first one is the return element of £500 per furloughed apprentice. The retain element is a maximum of £2,000 over the course of four months, and the result element is £1,200 for successful full

framework achievement of a returned apprentice.

Mr Principal Deputy Speaker: As I said at the start, questions 4 and 13 have been grouped.

Economic Recovery Action Plan

4. **Mrs Cameron** asked the Minister for the Economy for an update on the holiday at home voucher scheme. (AQO 2568/17-22)

13. **Mr Storey** asked the Minister for the Economy for an update on the delivery of the economic recovery action plan. (AQO 2577/17-22)

Mr Lyons: With your permission, Mr Principal Deputy Speaker, I wish to group questions 4 and 13 together for answer and avail myself of the extra minute to answer.

It has been eight months since the launch of the economic recovery action plan and six months since the Executive agreed to provide an additional £287 million to help to deliver the actions that are set out in the plan. During that time, we have continued to listen to feedback and work collaboratively with our delivery partners. Thanks to that strong collaborative effort, 40 of the 58 actions that we had planned to do at the time of the launch are now in progress or have been completed.

The holiday at home voucher scheme is one of the remaining 18 actions that are yet to be implemented. The proposal was focused on stimulating demand from residents to holiday at home in support of the local tourism industry. The economic recovery action plan recognised at the outset the need to adapt to changing economic conditions. The suitability of the intervention is being considered in the context of the levels of consumer demand that were experienced over the summer and the impact of the high street scheme.

The high street scheme is another key, Spend Local component of the plan. It is aimed at reorientating people towards our local retailers and hospitality and leisure sectors. The scheme opened to applicants on 27 September. I am delighted with the unprecedented number of people who have already applied. I am also delighted that the first cards have issued in the past week. That is great news for all our local businesses that will benefit from the roll-out of the scheme.

I hope that Members will agree that significant progress has been made against the actions

that were set out in the economic recovery action plan. It also important that the plan continues to evolve. We have been able to scale up our offering of support where the demand and benefit has been high. We have also been able to add new actions to aid the economic recovery journey.

Mrs Cameron: I thank the Minister for his answer. The tourism sector has been one of the sectors hardest hit by the pandemic. What steps is the Minister taking to help the sector to move forward?

Mr Lyons: The proposed holiday at home voucher is just one of a number of steps that we have taken to support the tourism sector and help it to recover from the effects of the pandemic. Those steps were set out in the tourism recovery action plan, which was launched by my predecessor, Diane Dodds. Additional funding has been provided to support Tourism NI and Tourism Ireland for heavyweight marketing campaigns throughout the United Kingdom and Ireland to stimulate demand for short breaks and areas of high-value tourism, such as business events, golf and cruises.

I have also supported significant funding programmes for a number of sectors across the industry, and for product and industry development. In addition, we are supporting the tourism and hospitality sector through a range of skills programmes and interventions, including masterclasses, leadership and management training, skills-focused offerings for managers in those important sectors, and a new skills intervention programme. All those training and development actions have been designed in partnership with local hospitality and tourism representatives and business leaders.

Mr Storey: I thank the Minister for his answers thus far and for the work that he has done to ensure that the issues of concern to us all in our constituencies, particularly in terms of economic recovery, are addressed.

In an earlier comment, he mentioned the changing environment. Obviously, we are subject to the current crisis in fuel prices and so on, as we have heard about. What flexibility is there in the schemes to ensure that the Department can respond in a way that is meaningful to the economy?

Mr Lyons: The first thing to highlight is that we worked on the economic recovery action plan with those in the industry in order to make sure

that we were responsive to their needs. I have just noticed that my predecessor is behind me. She will know about the work that went into the plan. The furlough scheme was hugely important in keeping people in employment, but we know that it has now passed. We are continuing to work to make sure that people are supported as much as possible. A number of things have been put into action to support jobs and improve skills so that people can be not only reskilled but upskilled. The skills focus programme, for example, is offering fully funded upskilling for employees, including those who were furloughed. We also provide opportunities to help people reskill, change careers and move into new and better job opportunities. That is why the plan is so important and why we are working in collaboration with industry and business leaders and representatives to make sure that it is agile and responsive to their needs.

Ms Brogan: In your answers, Minister, you discussed the holiday at home voucher scheme, and you said that you would consider it again. When it was first announced, concerns were raised about its delivery on a first come, first served basis, as that may discriminate against low-income families and those with poor internet connectivity. Have you addressed those concerns?

Mr Lyons: It is certainly the case that we will not be able to give or offer the holiday at home voucher to everybody in Northern Ireland as we have done with the Spend Local card. It is difficult to find a way to give out these vouchers other than on a first come, first served basis. I do not think that — I certainly hope that this is not the case — someone's background or whether they are in an area of advantage or disadvantage would prohibit them being able to apply.

Mr Nesbitt: When does the scheme go live? What are the exact qualifying criteria?

Mr Lyons: We are still working with industry to try to find the optimal time for its release. We have the Spend Local card in place, and we do not think that it would be appropriate to bring this one in at the same time. We will be working with industry to work out when the scheme can come in to bring the maximum benefit. Where eligibility is concerned, we are proposing that the vouchers will be able to be used at accommodation, attractions and experiences that are registered with the We're Good to Go scheme.

Mr Muir: One of the business sectors that have often been in contact with me is travel agents. They have been badly affected by the pandemic. What does the Minister's Department propose to do to assist them in the months ahead?

Mr Lyons: A number of representatives of that industry have been in contact with me. The Executive put through a really useful scheme for that industry that was administered earlier this year. It would be appropriate to extend that scheme. The First Minister and deputy First Minister have the details of the scheme, having previously administered it, and I would certainly be supportive of any proposal that would help the sector at this time. Tourism was among the first sectors to be impacted and the last to be able to recover. That is even more the case for travel agents here in Northern Ireland. It is, therefore, appropriate that we consider how that extra support can be given to them.

Supply Chain and Logistics: Higher-level Apprenticeship

5. **Ms P Bradley** asked the Minister for the Economy whether his Department has considered increasing the number of places on the higher-level apprentices supply chain and logistics programme. (AQO 2569/17-22)

Mr Lyons: My Department's apprenticeship provision, including higher-level apprenticeships, is demand-led. Cohort numbers are based on forecasts submitted by training providers. Where demand exceeds the approved numbers, training providers can contact my Department to request additional places. To date, any such request has been approved.

My Department has been working hard to grow apprenticeship provision that is in line with the needs of our economy. The introduction of the new higher-level apprenticeship in supply chain and logistics, which is delivered by Northern Regional College, is testament to that. Another new higher-level apprenticeship in transport and supply chain management has been approved for delivery by South West College, which will support employers in that locality. The new higher-level apprenticeships will deliver the relevant skills and provide high-quality career opportunities in an important and growing sector.

2.30 pm

Mr Principal Deputy Speaker: I will allow a five-second supplementary question and a 10-second response.

Ms P Bradley: Will it be open to those who want to change careers?

Mr Lyons: We hope that we can progress that.

Mr Principal Deputy Speaker: Well done. Excellent. That is more like it. Chop-chop. We now move on to topical questions.

Project Stratum: Fermanagh

T1. **Ms Á Murphy** asked the Minister for the Economy to outline how many premises in Fermanagh have been provided with a full broadband connection through Project Stratum, given that the Fermanagh area continues to suffer from the digital divide, and a lack of decent broadband is disruptive to workers, businesses and students. (AQT 1671/17-22)

Mr Lyons: Unfortunately, I do not have those figures here. I am delighted that we were able to allocate £165 million to Project Stratum as a result of the Democratic Unionist Party and Conservative Party confidence-and-supply agreement. I will be happy to write to the Member with the details of the number of properties.

Ms Á Murphy: I thank the Minister for his answer. I have received calls from deeply frustrated constituents whose premises will, unfortunately, miss out on the Project Stratum roll-out. In total, 572 eligible premises in Fermanagh and South Tyrone will miss out. That is the highest figure across all constituencies. When will the premises that have been left behind by the project have their broadband connection improved?

Mr Lyons: I hope that the Member will understand that I do not have dates that I can give to her today. I understand how important the issue is to many people living in rural areas, and I understand how it contributes to disadvantage. If we want to make sure that people are prepared for the jobs of the future, it is absolutely essential that we have a digital spine in Northern Ireland and that people have digital capability. That is why I have been working with the Minister of Education to see how we can make ICT compulsory at GCSE level. It is essential that our young people have those skills. I recognise, however, that it is very difficult for a young person to build those up if they do not have the broadband access at

home. My Department is doing everything that it can to make sure that we achieve that.

Energy Costs

T2. **Ms Ferguson** asked the Minister for the Economy for his assessment of the rising cost of energy, particularly the increase in wholesale gas prices. (AQT 1672/17-22)

Mr Lyons: As I have already said, I am very concerned about the increases that we have seen in the cost of energy. That has a direct implication for not only consumers and individuals in Northern Ireland but businesses. It affects the cost of doing business, and that is passed on to the consumer. I share the sentiments that have been expressed across the House about the impact that that will have on families and businesses right across Northern Ireland.

Ms Ferguson: I thank the Minister for his response. How do the Minister and his Department intend to respond to the rising costs of fossil fuels, including oil, which many people here rely on to heat their homes, and the impact of the costs, which are passed on to people in their homes and/or businesses?

Mr Lyons: The Executive can respond in a number of ways. As I said to other Members, the Department for the Economy has responsibility for energy efficiency, and I want to make sure that we do all that we can for the population and for businesses to conserve our energy and be as efficient as possible. However, the responsibility for fuel poverty rests with the Department for Communities. When I was made aware of the increases in the costs of gas and electricity that were coming, I raised those issues directly at the Executive with the Minister for Communities, Deirdre Hargey. I look forward to seeing what proposals she can bring forward to help to alleviate the problem.

Jobs: Derry

T3. **Ms McLaughlin** asked the Minister for the Economy how many jobs he has announced in Derry this year, given that today's employment stats show that 5.9% of working-age adults, including 7.6% of working-age men, in Derry are on a claimant count register. (AQT 1673/17-22)

Mr Lyons: The Member will be aware of the work that Invest NI does in her constituency. She will be aware that there is a regional office

there that is working hard to attract investment — with considerable success, I have to say. In the past five years, the —.

Ms McLaughlin: Sorry, Minister. The issue is that —.

Mr Principal Deputy Speaker: No, no. The Member has asked her question, and the Minister's answer will be heard. The Member has the opportunity to come back to the Minister with a supplementary question, and I have no doubt that she will.

Mr Lyons: I did not hear what she said anyway, but I will continue.

In the past five years, the assistance per head of population in the Member's council area has been £427. That is £427 per head of population. For context, that is above Antrim and Newtownabbey Borough Council; Ards and North Down Borough Council; Armagh City, Banbridge and Craigavon Borough Council; Causeway Coast and Glens Borough Council; Fermanagh and Omagh District Council; Lisburn and Castlereagh City Council; Mid and East Antrim Borough Council; Mid Ulster District Council; and Newry, Mourne and Down District Council. In fact, only one place has attracted more assistance per head, and that is Belfast. In fact, one of the lowest amounts has gone to Mid and East Antrim, so, if anybody should be complaining, it is me.

I look forward to the Member's supplementary question.

Ms McLaughlin: Minister, you still did not answer my question: I asked how many job announcements you had made this year. You did not answer that. However, you have announced 1,600 jobs in Belfast this year. Why have the DUP Minister and his predecessors constantly neglected Foyle for jobs and university provision? What are you going to do about the unemployment crisis in my constituency? What is your response? How many jobs have you announced? You are not answering the questions; you are making snide remarks —

Mr Principal Deputy Speaker: The Member will resume her seat.

Ms McLaughlin: — and being arrogant towards the people of Foyle —

Mr Principal Deputy Speaker: Order.

Ms McLaughlin: — who do not deserve it.

Mr Principal Deputy Speaker: Order. That is completely unacceptable behaviour. The Member has asked no fewer than five or six questions. When a Member is asked to resume their seat, they resume their seat. The Minister can answer whichever questions he chooses from the vast catalogue that was provided.

Mr Lyons: I take exception to the claim that I made any snide remark. I have simply set out the situation, which is that there has been an incredible amount of investment in the Member's constituency. It is second only to Belfast in terms of council areas. By the way, it is not the DUP or any DUP Minister who decides where jobs go; investors do that. As the Member can see, we have provided assistance there. I suggest to the Member that perhaps her approach is not helping very much and that she might want to work with others to address the issue.

Coach and Private Tour Industry: Support Scheme

T4. **Mr Durkan** asked the Minister for the Economy for an update on his Department's consideration of the business case for a support scheme for the coach and private tour industry, as set out in its tourism recovery action plan. (AQT 1674/17-22)

Mr Lyons: Of course, when it comes to the coach industry, the question would be best addressed to the Minister for Infrastructure as the Minister responsible.

Mr Durkan: The industry is referred to specifically in the Department for the Economy's tourism recovery action plan, hence I have asked the Minister the question. Previously, the Infrastructure Minister has had to step in to support the industry. It is my understanding that the Infrastructure Minister awaits a response from the Economy Minister on what his Department's plans are now. Does the Minister intend to respond to the Infrastructure Minister? Will he do so quickly, so that the industry can get the clarity and the support that it requires?

Mr Lyons: As the Member said, the Minister for Infrastructure provided that support in the past, and, as a result, I think that she will be best placed to do so again. She has the details and the data and is best placed to deliver. I hope that that answer is helpful to the Member. I appreciate his tone and approach, which is a lot more conducive to business than that of his constituency colleague who came before.

Tourism Recovery

T5. **Mr Harvey** asked the Minister for the Economy to outline his plans for tourism recovery. (AQT 1675/17-22)

Mr Lyons: The tourism action plan has been well received by the industry, but, first and foremost, we need to continue to see an easing of the restrictions that are still in place, because they create a drag. I spent yesterday with Tourism Ireland. It was good of that body to set up a meeting with tour operators, as I was able to hear at first hand about the impact that the restrictions continue to have, particularly on tourist confidence, not just in the UK but further afield. The first thing to do is to make sure that we do as much as we can to restore that confidence in Northern Ireland.

Mr Harvey: Minister, I am sure that you have lots of plans for future engagement with the tourism sector.

Mr Lyons: Absolutely. The key to the Department's successes over the past number of months has been collaboration with the sector. We had fantastic collaboration with industry on 10X Economy, and that created a really successful strategy document. It is the same with the energy strategy and the tourism recovery action plan. I take that collaboration very seriously, and I want to listen to what people say. One of the benefits of Northern Ireland being a smaller place is that it gives us the ability to be agile in responding to the needs of the sector. It is really important that we are responsive in that way and that we listen to the sector's concerns. In particular, it was useful for me to hear yesterday about the emerging markets that are coming to Northern Ireland, especially from the Middle East. We can see the emerging trends, so it is about working with those partners so that we, as a Government, can best respond to them.

Spend Local Prepaid Card

T6. **Mr McGlone** asked the Minister for the Economy whether, in relation to the Spend Local prepaid card, he is aware of any technical difficulties with the software that is used at payment terminals. (AQT 1676/17-22)

Mr Lyons: There have been isolated instances of people not being able to use their card in certain businesses, largely the larger multinationals that are registered in GB, because of a coding issue with the card. That

number has been very small, however, and we have found a fix.

I am absolutely delighted with the success of the scheme so far. I can confirm that, as of yesterday, 161,000 cards had been delivered and another 50,000 were ready to be shipped. I can also confirm to the House that, although I have no special privileges, I have been able to get my Spend Local card. It is a little smaller than the one that I was going around with in the summer, but it is great that we will have the cards delivered across Northern Ireland to be spent in local independent retailers, on hospitality, on entertainment, on leisure and on other services. Over 1.2 million people have now applied, and over one million of them have been verified. That is good news for the businesses across Northern Ireland that suffered so much during the lockdown.

Mr McGlone: I thank the Minister for that. I go back to the question of making sure that the software on the terminals is being updated. Can he advise what facility there is in the Department if businesses require additional information in order to access the required updates?

Mr Lyons: The changes will be made automatically. It is an issue not with the card terminals but with the coding. As always, however, if people have issues or concerns about anything to do with the high street stimulus scheme, there is a helpline and an email address that they can contact, and their concerns will be addressed.

2.45 pm

'Game of Thrones' Studio Tour: Banbridge

T7. **Mrs Dodds** asked the Minister for the Economy, who will be well aware that 'Game of Thrones' is to open a new exhibition centre outside Banbridge, whether he will commit to Tourism NI working with the council and local representatives to ensure that the wider Upper Bann area, in particular, Banbridge, benefits from that attraction. (AQT 1677/17-22)

Mr Lyons: Absolutely. Through my engagement with Tourism Ireland yesterday, I saw the real enthusiasm that tour operators and visitors have for experiencing the 'Game of Thrones' exhibition. It will be a fantastic attraction for Northern Ireland and will, I am sure, bring many extra people who would not come here otherwise. I am sure that, after they

see the 'Game of Thrones' exhibition, they will want to see all that Banbridge has to offer. The Minister kindly took me around Banbridge during the summer. I am more than happy to make sure that we support Banbridge and all of Upper Bann as much as we can.

Mr Principal Deputy Speaker: That concludes questions to the Economy Minister. I ask Members to take their ease for a few moments while there is a change at the top Table.

(Mr Speaker in the Chair)

Question for Urgent Oral Answer

The Executive Office

North/South Ministerial Council Meetings: High Court Ruling

Mr Speaker: Mr Stewart Dickson has given notice of a question for urgent oral answer to the First Minister and deputy First Minister. I remind Members that, if they wish to ask a supplementary question, they should rise continually in their place. The Member who tabled the question will be called automatically to ask a supplementary question.

Mr Dickson asked the First Minister and deputy First Minister whether North/South Ministerial Council (NSMC) meetings will resume immediately following the declaration by the High Court.

Mr Givan (The First Minister): The judgement in the matter of an application by Sean Napier for judicial review was received by the Department this morning. It is being considered.

Mr Dickson: What action does the First Minister, having had his party placed in the dock yesterday, propose to take to ensure that he, the deputy First Minister and, indeed, all Ministers adhere to yesterday's court ruling? Can he assure the House that the €1 billion of PEACE PLUS funding that has been pledged by the EU and others will not be placed in jeopardy by any further political antics?

Mr Givan: I have been clear in saying to Members that the way to address the issues that have led us to this place is through a political resolution. I look forward to seeing what the European Union publishes tomorrow and the engagement with the United Kingdom

Government. The protocol, the rigorous implementation of which was demanded by the Member's party and others in this place, has created the tensions that now exist in these institutions. When you trash east-west relationships, you undermine the basis on which the Belfast Agreement was founded. That has knock-on effects when it comes to North/South relations. I want to get a political resolution that upholds all aspects of the Belfast Agreement and the relevant strands that flow from it.

Mr Sheehan: The days of the DUP playing politics with the institutions of the Good Friday Agreement must end today. Justice Scofield was clear and unequivocal yesterday that the actions of DUP Ministers are unlawful. Will the First Minister explain here today what other blockages exist to stop DUP Ministers from attending North/South ministerial meetings?

Mr Givan: The North/South bodies did not meet for three years because Sinn Féin pulled down these institutions. We will not take any lectures from the party on the opposite Benches when it comes to how these institutions should be operated in a manner that is faithful.
[*Interruption.*]

Mr Speaker: Order in the Chamber, please.

Mr Givan: The way to get a resolution to these issues is for the party on the opposite Benches and those other parties that campaigned for the protocol and advocated for its rigorous implementation to recognise the harm that it causes and the damage that it has inflicted on our east-west relationships and to get a political resolution. In that political resolution, the institutions of the Belfast Agreement will be able to operate in a way that allows them to be upheld and acted on faithfully.

Mr Frew: The last time that the Executive Office was involved in a court case, the judge stated of Sinn Féin:

"It demonstrates either wilful disregard for the rule of law, or abject ignorance of what the rule of law means in a democratic society."

That was to do with victims' payments, and we all recall that. Will the First Minister give a commitment to the House that he will fight for Northern Ireland, its people and its businesses with regard to the protocol?

Mr Givan: I thank the Member for his question. He is right to highlight the fact that there have

been times in the past when Ministers have been taken to court where they have breached the ministerial code, and that has been found against them. The Member mentioned one instance, but there have been other instances when that did indeed occur.

The Member is right. I am committed to ensuring that New Decade, New Approach and the commitment that was made by the United Kingdom Government that Northern Ireland would have its place fully respected within the UK's internal market are upheld. They made the pledge and they need to deliver on it. My party is determined that we see a successful outcome.

Mr McGrath: North/South cooperation works for people on this island. It delivers for the people of Northern Ireland and for the First Minister's constituents. By not attending those bodies, we prevent delivery on this island. Is that not a monumental example of cutting off your nose to spite your face?

Mr Givan: Again, the Member fails to recognise the absolutely critical importance of the east-west relationship. When the protocol was imposed on the people of Northern Ireland, it did not have the consent of a single unionist representative. The Belfast Agreement was based on a delicate balance that respected unionists and nationalists, but, fundamentally, it also said that any constitutional change would require the consent of the people of Northern Ireland. There was no consent to the change that derives from the Northern Ireland protocol. The issue around North/South is important, but it is a symptom of a much deeper problem that has infected our political system through the protocol, the rigorous implementation of which his party and others campaigned for and demanded.

Mr Stewart: In light of this case and the growing political instability on the back of and associated with it, will the First Minister support calls for the Secretary of State to expedite legislation at Westminster to keep Ministers in place and protect these institutions should they fall, given the massive and grave issues that this country is facing?

Mr Givan: I am always the optimist. I always seek political resolution. The European Union will publish its proposals tomorrow, and we are waiting to see the details of that. In its Command Paper, the United Kingdom published all the issues that have flowed as a result of the protocol. It has indicated its timeline for a period of intense negotiations,

and I very much want to see a successful outcome to that. I am pleased that there is now recognition on the part of the European Union and the United Kingdom Government that there are severe problems now as a result of the protocol. That was not the case until this party took action and made it clear to those in the Assembly, the United Kingdom Government and the European Union that change needs to be delivered. I hope that we get a successful outcome that does not necessitate expediting that legislation at Westminster to protect these institutions. That said, however, that is part of New Decade, New Approach, and it is working its way through. I think that it is currently in the House of Lords. It will come back into the Commons and should become law at some point later this year.

Mr Muir: I ask this question to you, First Minister, conscious that you hold a joint office with the deputy First Minister.

In yesterday's judgement, Justice Scofield stated:

"It is difficult for the court to reach any other conclusion than that the"

DUP has:

"consciously determined to act in contravention of the pledge of office and the ministerial code".

What message does that send to the people of Northern Ireland in the context of the need for everyone in this House and for Ministers to uphold the rule of law?

Mr Givan: In its judgement, part of which I have also been able to read, the High Court said that it would also be:

"astute to any potential misuse of its process for the purposes of seeking political advantage".

Since the judgement was made yesterday, all I have heard from the other parties in this place is them seeking to take political advantage as a result of that judgement.

I want to see a political resolution to the issues that currently face us. The protocol has inflicted the harm. The criteria by which article 16 should be triggered have been met, and the UK Government have said that on numerous occasions. We therefore need to see action behind the words of the UK Government and

the European Union, by way of the proposals that it intends to publish tomorrow.

Mr Allister: Is there a point of principle here for the First Minister that is more important than holding office?

Mr Givan: I am sure that the Member for North Antrim welcomes the action that the Democratic Unionist Party took to bring these things to a head. He is right to seek a resolution. This party is focused on outcomes that resolve the issues. I think that that is what everyone in this place wants. We want these institutions to operate in good faith. That is what I am about. I am about getting an outcome that satisfactorily resolves the issues that this party has laid out as being problems.

Ms Sugden: Does the First Minister recognise that the institutions are mutually exclusive, as per the principles of the Good Friday Agreement, and that, therefore, continuing to sit on the Executive and the Northern Ireland Assembly somewhat undermines what his party is doing at the North/South Ministerial Council?

Mr Givan: We want to give the United Kingdom Government and the European Union an opportunity to put right the wrongs that flowed from the withdrawal agreement and the protocol that the UK Government signed up to. They have an opportunity to do that. If they seize that opportunity, they will be able to protect these institutions.

Mr Buckley: There is hypocrisy in this question for urgent oral answer. Where was the question for urgent oral answer from the Alliance Party regarding previous High Court rulings about numerous parties? There is hypocrisy in the words of the Members opposite who are from a political party with convictions that would make Al Capone blush.

Does the First Minister agree that there is a way that this can be resolved, which is by the European Union engaging constructively to ensure that it removes the east-west barriers that it helped to create, which are damaging to the Northern Ireland economy and its people?

Mr Givan: The Member is absolutely right. I met Maroš Šefčovič and was able to speak to him directly. I reassured him that we very much respect the integrity of the European single market for goods. I also made it abundantly clear that the European Union has to respect Northern Ireland's place in the internal United Kingdom market and the free flow of goods on an east-west basis. Let us see what the

European Union proposes. I have detected a change in tone. We need to assess that by way of its proposals. There will then be a period of negotiations with the UK Government. I hope that that is successful.

Mr O'Toole: The First Minister talks repeatedly about the damage to east-west links. Many people have noticed that North/South links have also been damaged with the end of the cross-border healthcare directive, threats to data moving between the two jurisdictions and the requirement for healthcare workers who are helping sick children to get to hospital in Dublin to have joint registration on both sides of the border. There are countless disruptions to North/South links. First Minister, given all those disruptions to North/South arrangements, will you also be boycotting meetings with British Ministers?

3.00 pm

Mr Givan: No. I will absolutely not be boycotting meetings with an east-west dimension. The Member failed to mention particular issues in all the points he made. I would love to see what the Member said being backed up with evidence. I have evidence of the notice of discontinuation from the pharmaceutical companies in Great Britain, from which we receive over 90% of our medical supplies. They are not able to provide medication to the people of Northern Ireland. If the Member opposite is content not to have medication for all the illnesses that all our people share, shame on him. *[Interruption.]*

Mr Speaker: Members. *[Interruption.]* Members, behave yourselves.

Please be seated. Resume your seat. I want the question to continue to be dealt with in a manner that respects the subject matter, the right of Members to ask questions, their obligation to listen to answers and the need for responsible answers from the Minister. I want to try it again without any further interruptions. We have had enough interruptions so far, so I will leave it up to the Minister when he is on his feet.

Mr Nesbitt: The First Minister referred to commitments that were made in New Decade, New Approach. On that basis, does he think that the court ruling makes a bill of rights more or less desirable?

Mr Givan: An Ad Hoc Committee was established to look at a bill of rights. I look

forward to reading its deliberations in due course.

Mrs Dodds: The EU and the Dublin Government have been somewhat tin-eared so far in their response to unionist concerns about the protocol. Do you believe, Minister, that there is a will to rectify the harms of the protocol? Do you acknowledge that it is not just a matter of trade but of our constitution and rights under the Act of Union 1801?

Mr Givan: The Member very ably pointed to the two issues. The first is the movement of goods, and the other is respecting the constitutional arrangements of the United Kingdom. We require a resolution to those matters.

The Member is right about our concerns when it comes to the extent to which the Southern Government are or are not listening. They did not listen at the time. Indeed, the then Government went on a parade around Europe with pictures of bombed border posts from the 1970s in order to extract leverage on protecting the peace process, and they used the very much implied threat of violence to back up their political campaign to deliver the protocol. Then, recently, the Foreign Affairs Minister indicated that the European Court of Justice and its jurisdiction is a new issue. That really leaves us asking whether he cannot see what is happening or cannot listen to what we said. Can he not see what was in the United Kingdom's Command Paper or hear what the leader of this party said in his speech when he outlined the issues that need to be addressed?

I hope they start to listen, because I want to have good relations not just on this island but across these islands. However, that requires everybody to take on board the issues that are being brought to the table. The Southern Government need to pay attention to that.

Mr Stalford: Those who argued for and passed a motion that called for the rigorous implementation of the protocol have now been exposed as foolish. Even their masters in Brussels have indicated a preparedness to consider alterations and changes. Time will tell whether those changes go far enough. Does my colleague the First Minister agree that those who passed that motion demanding rigorous implementation were stupid so to do?

Mr Givan: Not only was that motion passed but numerous motions were brought to the Assembly about the implementation of the protocol. Indeed, at a time of a global pandemic and the restrictions that were in place, a

delegation went on a parade to Dublin to make the case for that.

Parties in the Chamber have to bear responsibility for the actions that they have taken over the past period. When they take that responsibility, let them recognise that we very much want a resolution. In seeking a resolution, you first have to accept when you got it wrong. The parties in the Chamber that called for the rigorous implementation of the protocol not only got it wrong but got it badly wrong.

Mr McNulty: The only party in the Chamber that campaigned for Brexit is the DUP. Can —

Mr Allister: Ahem. *[Laughter.]*

Mr McNulty: Sorry, Jim. *[Interruption.]*

[Laughter.]

Mr Speaker: At least the Member brought a bit of levity to the debate. I will let you off on that one. Go ahead, Justin.

Mr McNulty: At this time of uncertainty, strife and struggle for so many people, will the First Minister outline what he hopes to achieve by non-attendance at North/South Ministerial Council meetings? Does he recognise that the politics of "No" and "Never" have not served his party well in the past, and will not do so now?

Mr Givan: We go back to the Brexit debate. I remind the Member that it was not the Democratic Unionist Party that delivered Brexit; it was the people of the United Kingdom, whose vote was exactly the same as mine. Each of us had only one vote, so no party delivered Brexit. It was a decision of the people of the United Kingdom. Then, in the implementation of Brexit, the United Kingdom Government, wrongly, did not treat us all equally. I hope that they will put that right in the time ahead. Let us all get to the place where this institution can deliver for all our people, so that we can work together, act in good faith and continue to provide what our community demands, which is a stable, functioning Government that deliver for all their people.

Dr Aiken: First Minister, will you outline what sanctions have ever been taken against any Minister for a breach of the ministerial code? Have any penalties been applied, at any stage, to any Minister for a breach of the ministerial code?

Mr Givan: We never want to get to the point where sanctions need to be applied. We want to get to a place where the politics work and we avoid that type of action. There have been times when Ministers have been taken to court and found to be in breach of the ministerial code. I can think of a number of issues. Go back to the summer, even, when two Ministers judicially reviewed an operational decision of the Police Service of Northern Ireland. Despite its being raised by Executive colleagues, subject to the ministerial code, that that decision should have been taken by the Executive, those Ministers decided to proceed with their judicial review actions. I will leave it at that because a case is ongoing in respect of that decision.

Mr Clarke: On Executive business, some in the Chamber are, "Do as we say, not as we do". In the media, we hear reports of a scheduled meeting of the North/South Ministerial Council. What actually constitutes such a meeting?

Mr Givan: I thank the Member for that question, because it is important. Some Ministers have spoken about scheduled meetings to take place this week. There are no such scheduled meetings. There is only a scheduled meeting at the point when its attendance and agenda are agreed by the Executive Office. When a meeting has had its agenda and attendance agreed, the Executive Office notifies Executive colleagues that the meeting will take place. We also notify you, Mr Speaker, of such a meeting taking place. Far from me to draw the Speaker into the debate, but he can confirm or otherwise whether he has received notification of a scheduled meeting. No scheduled meetings have been sanctioned, by way of the agenda or attendance, to take place this week.

In response to that, in line with the statement that was made by the leader of the Democratic Unionist Party, Sir Jeffrey Donaldson, I have signed off that meetings on health issues should continue. I have cleared that meeting to take place this week. Given that the PEACE PLUS programme has a particular theme that relates to health and associated funding, I have signed off that that meeting should also take place, subject to the deputy First Minister approving that through the urgent procedure. That meeting should approve the PEACE PLUS funding that the Finance Minister has requested.

Mr Catney: First Minister, are you not embarrassed by your antics over the whole Brexit issue? Simply, yours is the party that owns it. You tripped in and out of Number 10

with Boris Johnson. Take ownership of it and get on with what you agreed and what you liked at the time.

Mr Givan: When it comes to the issue of Brexit, I repeat what I said earlier. This was a decision that was taken on a UK-wide basis, and the people of Northern Ireland were able to exercise their vote. I should not have to go back to the Member and indicate that London, for example, had a much higher level of opposition to Brexit but, because it is part of the United Kingdom, just like Northern Ireland, it is subject to the outcome of that decision. We all want to see the arrangements working here in Northern Ireland that respect east-west and North/South. I think that they are important, and I respect the Member opposite, who has nationalist ambitions for the reunification of Ireland. That is a perfectly legitimate political aspiration to have, but he must respect my ambition for Northern Ireland to remain an integral part of the United Kingdom unless there is the consent of the people of Northern Ireland to change that. The protocol makes a change to that constitutional arrangement, and it does so without having the consent of a single unionist.

Mr Speaker: No further Members are indicating that they wish to question the Minister, so that concludes this item of business. Members, please take your ease for a moment or two.

(Mr Deputy Speaker [Mr Beggs] in the Chair)

Private Members' Business

Abortion Services (Safe Access Zones) Bill: Second Stage

Debate resumed on motion:

That the Second Stage of the Abortion Services (Safe Access Zones) Bill [NIA 35/17-22] be agreed. — [Ms Bailey.]

Mr Deputy Speaker (Mr Beggs): I call Matthew O'Toole to resume his speech.

Mr O'Toole: I do not have much more progress to make in my remarks. As I said before we broke for lunch, I and my party support this Bill. I am strongly supportive of the intention of the Bill and the detail of it. Having gone through all the clauses of what is a concise and clear Bill, I think that it very reasonably and clearly balances the right to protest and freedom of speech with the right of women and girls to access reproductive healthcare in a way that is safe and where they are not harassed by individuals. Some of the complaints raised and claims made thus far have been, frankly, ridiculous, I am afraid, and I covered those before I finished speaking before lunch.

I think that it is worth saying that, as I mentioned before we broke up, this comes in the context of the fact that women here have been, systematically and for a very long time, denied the equal right to reproductive healthcare services and abortions where necessary, unlike women in other jurisdictions in the UK and, indeed, now in the South of Ireland.

In the absence of properly commissioned services, it is even more important to have safe access zones. I use this opportunity to speak on the Bill to call on the Health Minister to make progress on commissioning abortion services in Northern Ireland. Informing Choices NI has kept what has been a fragile situation going for 18 months by operating an access point for information and to signpost women, who are often in extremely vulnerable situations, to services. Informing Choices NI is no longer in a position to continue that service. The British Pregnancy Advisory Service (BPAS) has taken it up —.

3.15 pm

Mr Deputy Speaker (Mr Beggs): Order. I remind the Member that the Bill is about safe access zones. I have allowed a degree of flexibility, but I must draw the Member back to the subject of the debate.

Mr O'Toole: It is very important, Mr Deputy Speaker, that the debate be placed in the context of access to abortion and the fact that the service is now legal in Northern Ireland, in a way that was long overdue. As legal provision has been made, it is important for women to be able to access that service free from harassment. Before the provision was fully legal in Northern Ireland, however, premises in Belfast had been picketed. Women and girls seeking to access advice, before abortion was lawful and when they could not access a termination in Northern Ireland, were picketed and harassed with unacceptable images at the Marie Stopes clinic and other premises. What I said was in the context of the legal position on abortion provision and commissioning.

In conjunction with approving the Bill, a properly commissioned service will provide the clarity and consistency that is overdue. It will enable the medical professionals providing the service to feel that the weight of the institutions, senior management and Health and Social Care (HSC) is behind them. The service is legally provided for, but it now needs to be properly commissioned.

I will not go through the detail of all the clauses. I covered some of that before we broke for lunch. The Bill is clear and concise. All the complaints about freedom to protest can be easily dealt with. There is a clear problem, which is particularly acute in this jurisdiction, in part because the commissioning of services is vague. Frankly, that grey area allows the protesters, who use often unspeakable images, to feel that they have a bit more wiggle room when they are harassing women and that they might make a bit more progress than they would if there were commissioned services in place. Those services need to come in in conjunction with the Bill.

In conclusion, I am very much in favour of the Bill's passing its Second Reading. I look forward to its proceeding swiftly, with the necessary scrutiny, through Committee Stage and, hopefully, getting Royal Assent before the institutions break up for the election, I hope, next year. The Bill is essential legislation that we should prioritise getting done. It is much more important than engineered crises and histrionics. The Bill is something real that affects real women and girls in our society. Let

us proceed with it and get it done. I commend the Bill sponsor for bringing it to the Assembly.

Ms Sugden: I support the principles of the Bill at Second Stage. A safe access zone around a healthcare clinic: how can we disagree with that? I appreciate that the zones are specific to abortion clinics. Had they not been specific to them, however, would Members and others have an issue, particularly if there were similar behaviour taking place? I cannot change the law on abortion in Northern Ireland. It was a decision that the United Kingdom Government took. Members have talked about democracy, but, like it or not, Northern Ireland remains under the jurisdiction of the UK Parliament, which is supreme. What happens in Westminster therefore is democracy. Northern Ireland elects 18 MPs to the Commons, so, if Members disagree with the law, perhaps have a word with them, particularly those who had the ear of Downing Street at the point at which the law was made.

There are attempts to frustrate the implementation of this law, and perhaps these protests are an example of that. However, no one is breaking the law by accessing these services. If anything, the behaviour of some protesters is extraordinary. It is imperative that we protect those using these clinics as well as those who work in them, because it is the law.

Some Members talked about current laws, particularly harassment laws, and asked why we do not utilise and/or strengthen them. Yes, harassment law is poor and is poorly implemented. In recognition of that, five years ago, I instigated domestic abuse legislation. Harassment law, even if it were to be improved, is reactionary. It is pursued after the offence has allegedly occurred, after the harm has been done.

If the law is robust enough, it may act as a deterrent, but how likely is that, particularly when those creating this form of harm do not recognise it themselves? What I like about Ms Bailey's Bill is that it seeks to prevent harm. It does not wait until after the harm is done. It is proactive rather than reactive. Rather than providing weak comfort after the event, it is protective, and we should seek to stop harm.

In Coleraine, several incidents resulted in physical and mental harm to those protesting as well as those accessing and working in the clinic. That is not good. It has created a hostile atmosphere. It scares people. It traumatises many, not just those accessing and working in the clinic. I have been contacted by people who were simply walking by or going into the clinic

for other services, because the clinic in Coleraine is a community clinic. They described to me the aggression and violence.

Others mentioned the images. I have been contacted by parents expressing distress at being unable to shield their children from seeing them. For women who have suffered miscarriage to have those images foisted upon them is truly awful. This is Baby Loss Awareness Week, when women and families will share their heartbreaking stories of baby loss and the pain that they will inevitably carry with them for the rest of their lives. To then be subjected to this behaviour is really unbelievable, and no one in the House should accept it. What type of freedom of speech is it when it limits others because of the harm that it creates? Being traumatised is not being free. Being harassed is its own prison.

I will share a personal experience. I attended the community clinic in Coleraine for contraception in August. I had a scheduled appointment, and I was terrified going to that clinic to access family planning services, as is my right as a woman. However, I was scared in case someone accosted me, shouted at me or shoved leaflets in my face, and I very nearly cancelled my appointment. I did, however, reassure myself that, if someone did approach me, I would explain to them that I was accessing other healthcare.

This is what we are doing to women: we are putting them in a position in which they have to explain themselves and disclose their healthcare. Ironically, they have to explain themselves to the very people who defended in the House yesterday the right to medical confidentiality when it comes to double vaccination but feel that they can interfere in people's confidentiality when it comes to reproductive healthcare.

I am sure that Members think that I, and any other person, do not have to disclose that information. However, this behaviour, and the environment that is created through these protests and other violent action, does not give women that choice. I will not go into detail as to why I was there. However, let me say this: being female means invasiveness. Until you grow a uterus and experience that, you cannot imagine how difficult healthcare can be for women, even when we are healthy. Let us put distance between those who are accessing healthcare to which they are entitled and the protests and behaviour that harm them.

I worked in pharmacy for a number of years, and I was trained in medical confidentiality. Let

us be clear: confidentiality is not just about what you say or tell someone; it is as much about not acknowledging someone because you have seen them going for a medical consultation that could indirectly indicate their treatment. It is important that we protect people's medical information. Clare's Bill does that by adding general protection for healthcare. Please correct me if I am wrong but this protection is provided to patients at all hospitals. Protesters are not allowed into hospital grounds; they have to protest at a distance.

This week, due to a family matter, I have been in Causeway Hospital quite a lot, and, my goodness, the patients, their families and the staff do not need this — those staff save people's lives and keep their heads above water. I am 100% glad that we protect our hospitals, but why would we not do that in any other healthcare setting experiencing similar pressures?

To come back to my personal story, I was fine, because at that point I had not realised that the services had been moved to Causeway Hospital, thereby creating an organic buffer zone. That example shows that Ms Bailey's proposals can work. Those who wish to exercise their right to protest or to witness can continue to do so, albeit from a safe, appropriate distance that does not diminish healthcare or create further harm for patients and health and social care staff.

Issues about the previous clinic that I mentioned have gone. I understand that there are those who continue to protest, but the atmosphere and hostility are gone. The danger has been moved not just for the patients and the health and social care staff but for the protesters themselves, who, at the previous clinic, found themselves in situations.

I have spoken to those who protest, because I genuinely want to understand their concerns, as I am their elected representative as much as anyone else's. I take time to listen to all sides of the argument. They told me that they describe that type of protest as "witnessing". However, it feels that it has gone beyond that, and I ask protesters to reflect on what their actions do to others, because the victims cannot be removed from what the protests do. Indeed, that is what the Bill focuses on: the people who are affected by these protests; the victims.

The Bill does not hinder free speech; it protects others. Protests can still take place, but at a safe distance. I fully recognise the right to free speech, but I also recognise that speech ceases to be free when it limits the freedoms of

others. The law, too, recognises that through legislation on hate crime, discrimination, incitement to hate etc and, hopefully in the future, through the Bill.

I will conclude by talking about trauma. We often hear pro-life people say that they want to support women to make better choices around abortion. To an extent, I appreciate that, but I put it to those people that witnessing or protesting is not supporting women. It traumatises them, which in itself leads to poor choices with which the protesters will also disagree. They are effectively reinforcing what they describe as "bad choices".

Safe access zones do not occur across the UK, but maybe they need to. We need to focus on protecting people and patients. That must be where we start. I appreciate that other Members pointed to clauses that technically may not work, but that is what Consideration Stage is for. If there are issues, I certainly welcome Members tabling amendments so that we could focus the Bill in the right way. It is an important Bill, and I commend the Member for bringing it to the House.

Ms Bailey: It has been greatly heartening to listen to the majority of Members who have spoken, who have obviously understood and engaged with the impact of the anti-abortion protests on women and who have told their personal stories and acknowledged the widespread nature of what we are starting to see.

I will focus on issues that were raised. As Claire Sugden mentioned, it is a Second Stage debate, and, if passed today, the Bill will have further stages in which amendments can be made. I would more than welcome having conversations around all comments to see whether we can get reasonable amendments to allay any issues that were raised.

I start with Mr Buckley's comments. He was quite critical in pointing out that there had been a lack of consultation since 2016, which was a number of years ago. I started to work on this Bill in 2016. The Member may not be not aware, but it is worth noting that there is a personal cost to Members in going to consultation on a private Member's Bill. That cost is not covered by the Assembly, but it was a cost that I was more than happy to pay. If necessary, I will continue to do it and do it again. If it gives any assurance, I have continued and will continue, for the duration of the process, to engage with all bodies, including the Equality Commission, the Human Rights Commission, the PSNI, the health and social

care trusts and their staff, women, the Secretary of State and Westminster.

3.30 pm

I even went to Australia, believe me, and not just in the virtual world that we now live in. I had meetings with the sponsors of the Bill that was passed there. I spoke to cross-party MPs about their views on how that was achieved, and I listened to the tragic circumstance that led to the Bill's being proposed. A security guard was murdered as he was doing his job, and that led to Australia's implementing safe access zones. I will continue, at every stage, to consult, discuss with and talk to as many people as possible, because I want the Bill to be right — rather than vindictive, as Mr Allister claims.

Other issues were raised. For example, some believe that the Bill might cause undue stress on PSNI resources. I refute that; in fact, I see the Bill doing the complete opposite. I have engaged and worked with the police, and I have had answers to freedom of information (FOI) requests from them. I know how much they have done, how many times they have been called and how much resource they have had to put into these situations. From freedom of information requests, I know that, between October 2014 and October 2017, the police had 83 reported incidents relating to the Marie Stopes clinic alone, 17 of which were passed to the Public Prosecution Service. The list goes on. The police also had a permanent presence at the clinic's doors. That is extensive use of resource for the PSNI. The police still go through such processes today; although they might not have a permanent presence at premises, they still receive calls and deal with complaints. I hope that the Bill, if passed, would lessen the demand for PSNI resources and enable the police to deal with offending behaviour quickly, efficiently and without heavy sanctions on anyone.

Concerns were raised about the Bill's potential to set a precedent by rolling back or restricting other rights and freedoms. The example of giving out leaflets was used. That is an interesting example. Giving out leaflets sounds like a passive, pleasant pastime. For example, we all do it at elections. When you understand, however, that the leaflets are filled with misinformation and non-facts; that they are put forcibly into people's bags, pockets or hands; and that they claim all sorts of nonsense such as that abortion will not "un-rape" you or that abortion will give you breast cancer, I hope that giving out leaflets can be seen as a bit more intimidatory, or even sinister, in some cases. I will come back to those points.

When people compare that behaviour to the concern about setting a precedent, they need to be directed to other countries that have passed similar measures. Some Members mentioned a few of the places in which we have seen them pass, such as some states in the United States, South Africa, France, Canada and Australia — as I have mentioned — and England, which implemented them via council powers. In none of those countries has it led to the roll back of other rights or to other unintended precedents being set.

Mr O'Toole: Will the Member give way?

Ms Bailey: Sure.

Mr O'Toole: Further to the Member's point, I do not know whether she is aware that one of the council powers that she talked about was challenged in Ealing Council in west London. The challenge, I understand, was thrown out by the judge.

Ms Bailey: I thank the Member. It is, of course, anyone's legal right to challenge any legislation, if they want to do so. The Bill does not interfere with that right. I will leave that point; although it is a valid one of which to be cognisant, I have no evidence to show that that will happen.

A few Members also think that clause 6 is too vague. That was brought up a number of times, and it was mainly Mr Buckley, Ms Bradley and Mr Allister who raised concerns. I will continue to listen to those concerns to see whether I can make clause 6 much more effective. If I can, I will be more than happy to have those conversations at any time. If the Bill is passed at this stage, I will continue to work on further scrutiny of the clause. However, all three of those Members have dismissed supporting the Bill at this stage, so I doubt that there is anything that I can say or any clarity that I can provide that may change where they are on that. Maybe I should say "must change", "might change", "should change" or "does change", but, given that this is a debate, it is probably best to test that out with "may change", because words are important. If the Bill passes this stage, I am more than willing to continue engaging.

Mr Allister, in particular, has taken umbrage at clause 6, especially clause 6(2)(a), which deals with influencing a person in a safe zone. He used graphic imagery as one example of potential influencing and gave another example of a mother trying to stop her daughter accessing the premises. On that, I reiterate that the point of the Bill is to prevent undue influence on a protected person in a safe zone;

it is not to mute any anti-choice point of view or campaign. If that was my intent, the Bill would go much further than a potential 5-metre radius from a clinic or premises door.

Mr Allister: Will the Member give way?

Ms Bailey: Yes.

Mr Allister: I do not think that the Member can say that the point is to avoid undue influence when that is not the terminology of the Bill. The Bill uses the simple word "influence", which is much more than undue influence.

Ms Bailey: I thank the Member for that. I do not think I said "undue"; I think I said "influencing", influencing either way. If a person wants to access services or enter premises, whether it be for accessing a service that is provided in the building, for work or for any other reason, they should be able to do so. That is where I stand on that point, and that is the essence of the Bill.

Ms Sugden: Will the Member give way?

Ms Bailey: Yes.

Ms Sugden: Would there be an opportunity at Consideration Stage to strengthen the Bill on the concern that Mr Allister has, given that that influence could be a positive one rather than a negative one, as has been suggested?

Ms Bailey: I thank the Member for that intervention. I hope that I have made it clear that, if the Bill progresses, I am willing to engage at any stage and to bring clarity to areas where, people feel, there is vagueness. Any language used in the Bill can be changed at any time at Consideration Stage and Further Consideration Stage. I have genuinely yet to hear of an example where a mother has been within sight of a clinic door still attempting to dissuade her daughter from going inside for professional help, information, advice or service. If such an example arose, as Miss Woods pointed out, the mother is also a protected person if she is attending as the partner of her daughter.

Mr Allister: Will the Member give way?

Ms Bailey: Yes.

Mr Allister: The protection in that regard is conditional on whether the person is there at the invitation of a protected person. If the daughter invites the mother to go with her, she

is a protected person, but, if the mother goes in pursuit of the daughter to influence her to not have the abortion, she is not a protected person.

Ms Bailey: Thank you for that. That is exactly what I was saying. If the mother attends as the partner of her daughter, she is a protected person, but, if she is not attending with the consent of her daughter, she will be subject to the same restrictions as everyone else in the zone.

We should also be aware of the impact of comments about baby loss. I found them quite distressing. I remind Members that many women who have suffered baby loss for any reason attend family planning clinics and other healthcare settings. They often report how distressing it is to be confronted with those campaigns at the door. Please be mindful of that, Members. It is a very real fact.

Of course, to cover any unintentional criminalisation of any person who is unaware of their behaviour or of the existence of a safe zone, there is clause 6(4) — the defence clause — which states:

"It is a defence for D to show that D did not know, and had no reasonable way of knowing, that the protected person was in a safe access zone."

That clause was inserted deliberately.

I come back to you, Mr Allister. You are well versed in courtroom settings. You are a practitioner and, I think, a trained QC, so you understand well how the law works. I suspect that you are using the debate to highlight your personal view on abortion and distract from the intent of the Bill. The Bill is about balancing the competing rights of all involved. It is not about discriminating or favouring one or the other; it is about trying to accommodate safe access while allowing the right to protest and assembly.

Mr Allister: Will the Member give way?

Ms Bailey: Yes.

Mr Allister: I do not think that the Member can say that it is about providing for all. The very purpose of the Bill is to expunge protest and influence in the zones, which provides only for the Member's world view and expunges any other view that anyone could express in those zones. There is no balance in it.

Ms Bailey: I thank the Member. You will be aware that freedom of assembly is caveated and that the Bill is within the caveats that are set out. It is not an unrestricted right and freedom; there are limitations. The Bill is designed and drafted within those limitations. I think that you know that fine well.

There are the competing rights of those seeking access and people's freedom of assembly, but let us not forget that a duty is also placed on the health and social care trusts to protect their staff. That is a huge consideration. Right now, many staff do not feel protected. Health trusts and chief executives are struggling to find a way to do that. The expense of putting extra measures in place is not one that anybody would want to burden an already overstretched health system with.

Concerns were expressed about ambiguity and a lack of clarity in clause 6. Mr Chambers brought clarity to it. In response to Rachel Woods's contribution, he said that, when determining impact, you need to ask the person who has had that unsolicited or unwanted approach, had their access blocked or been recorded going about their work. Ask them how that made them feel. That will clear up any ambiguity. That is what needs to be acted on.

I suspect that we could go round the houses on this for a long time. As I said, I am more than happy to receive constructive comment on the issues. If the Bill is passed, I will look forward to the Committee scrutiny and, of course, engage with all concerned, including the PSNI, as I have said.

I turn now to clause 8(2). Again, a wording issue was raised. It would be less effective for a Bill — an Act, if it becomes an Act — to instruct a Department to "maybe" or "perhaps" do something; rather, it is best to remove ambiguity and instruct directly. For that reason, the word used is "must".

3.45 pm

Another issue that was raised related to Sajid Javid and the UK Home Office reporting. It claimed that, in its opinion, no national zones were needed or would be implemented. Of course, we are not in the same place as England, Scotland or Wales on the issue. I am not aware that Mr Javid or the Home Office paid any consideration to the women in Northern Ireland when reporting that there was no need for national zones. CEDAW has, and, in its UK inquiry, it identified the difference between Northern Ireland and GB and recommended safe zones as a solution. When they have been

put in place in England, it has been done under the authority and remit of a council. Of course, councils in Northern Ireland have very different powers from those in GB. We are the Northern Ireland Assembly, and the Assembly is tasked with creating Northern Ireland-specific legislation. That is what the Bill is.

I also acknowledge Liz Kimmins's contribution. She rightly thanked her constituents for coming together and, in direct response to the ongoing protests on their streets, forming themselves into the Supporting Women Newry group. However, they should not have to do that. We need to be cognisant of that level of response and any unintended consequences that come from it. We are tasked with creating solutions, rather than creating none and allowing people to come up with their own.

In summing up, I thank every Member, even those who are not supportive of the Bill, for acknowledging the deliberate campaign of harassment and intimidation that is being allowed to continue on our streets. It is heartening that that has been acknowledged. I thank Sinn Féin, SDLP, UUP, the Alliance Party, People Before Profit, Claire Sugden and Trevor Lunn — I know that he did not participate in the debate, but he has sent support for the Bill — for all their support at this stage. I thank the Health Committee for agreeing to receive the Bill for scrutiny, if passed. I look forward to working with the Committee through the process, if the Bill progresses to that stage. I commend the Bill.

Question put.

Mr Deputy Speaker (Mr Beggs): I remind Members that they should continue to uphold social distancing and that Members who have proxy voting arrangements in place should not come into the Chamber.

Members, please resume your seats. Before I put the Question again, I remind Members present that, if possible, it would be preferable to avoid a Division.

Question put a second time.

Mr Deputy Speaker (Mr Beggs): Before the Assembly divides, I remind Members that, as per Standing Order 112, the Assembly has proxy voting arrangements in place. Members who have authorised another Member to vote on their behalf are not entitled to vote in person and should not enter the Lobbies. I remind all Members of the requirement for social distancing while the Division takes place. I ask

Members to ensure that they maintain a gap of at least 2 metres between themselves and others when moving around in the Chamber or the Rotunda and especially in the Lobbies. Please be patient at all times, observe the signage and follow the instructions of the Lobby Clerks.

The Assembly divided: Ayes 58; Noes 29.

AYES

Dr Aiken, Mr Allen, Dr Archibald, Ms Armstrong, Ms Bailey, Mrs Barton, Mr Beattie, Mr Blair, Mr Boylan, Ms Bradshaw, Ms Brogan, Mr Butler, Mr Carroll, Mr Catney, Mr Chambers, Mr Delargy, Mr Dickson, Ms Dillon, Ms Dolan, Mr Durkan, Ms Ennis, Ms Ferguson, Ms Flynn, Mr Gildernew, Ms Hargey, Ms Hunter, Mr Kearney, Mrs D Kelly, Mr G Kelly, Ms Kimmins, Mrs Long, Mr Lunn, Mr Lyttle, Mr McAleer, Mr McCann, Mr McCrossan, Mr McGlone, Mr McGrath, Mr McGuigan, Mr McHugh, Ms McLaughlin, Mr McNulty, Ms Mallon, Mr Muir, Ms Á Murphy, Mr C Murphy, Mr Nesbitt, Ms Ní Chuilín, Mr O'Dowd, Mrs O'Neill, Mr O'Toole, Ms Rogan, Mr Sheehan, Ms Sheerin, Mr Stewart, Ms Sugden, Mr Swann, Miss Woods.

Tellers for the Ayes: Ms Kimmins and Miss Woods

NOES

Mr Allister, Mr M Bradley, Ms P Bradley, Mr K Buchanan, Mr T Buchanan, Mr Buckley, Ms Bunting, Mrs Cameron, Mr Clarke, Mrs Dodds, Mr Dunne, Mr Easton, Mrs Erskine, Mr Frew, Mr Givan, Mr Harvey, Mr Hilditch, Mr Humphrey, Mr Irwin, Mr Lyons, Miss McIlveen, Mr Middleton, Mr Newton, Mr Poots, Mr Robinson, Mr Stalford, Mr Storey, Mr Weir, Mr Wells.

Tellers for the Noes: Mr Buckley and Mr Robinson

Question accordingly agreed to.

Resolved:

That the Second Stage of the Abortion Services (Safe Access Zones) Bill [NIA 35/17-22] be agreed.

Mr Deputy Speaker (Mr Beggs): That concludes the Second Stage of the Abortion Services (Safe Access Zones) Bill. The Bill therefore stands referred to the Committee for Health. I ask Members to take their ease before we move to the next item of business.

Assembly Business

Mr Muir: On a point of order, Mr Deputy Speaker, earlier today, there was a question for urgent oral answer to the First Minister and deputy First Minister. The deputy First Minister was not in the Chamber. I ask for a ruling on whether that was in order and whether the responses from the First Minister reflected the joint office, given that most of them seemed to be "DUP question time".

Mr Deputy Speaker (Mr Beggs): The Member has put his views on the record. I am sure that the Speaker will listen carefully and examine the Hansard report to see what has been said and that he will, if necessary, come back to the Member. I will pass that to the Speaker's Office.

I ask Members to take their ease before the next item of business.

(Mr Deputy Speaker [Mr McGlone] in the Chair)

Private Members' Business

Cancer Screening for Firefighters

Mr Hilditch: I beg to move

That this Assembly recognises the urgent need to protect firefighters from cancer; acknowledges the increasing evidence highlighting the serious health risks to firefighters and their families following exposure to carcinogenic fire effluents; further recognises that, as a result of their profession, firefighters can be up to four times more likely to develop cancer and other illnesses than other members of the public; and calls on the Minister of Health to introduce annual cancer screenings to monitor and manage the health status of serving firefighters.

Mr Deputy Speaker (Mr McGlone): The Business Committee has agreed to allow up to one hour and 30 minutes for the debate. The proposer of the motion will have 10 minutes in which to propose and 10 minutes in which to make a winding-up speech. All other Members who are called to speak will have five minutes. As an amendment has been selected and is published on the Marshalled List, the Business Committee has agreed that 15 minutes will be added to the total time for the debate. Please open the debate on the motion.

Mr Hilditch: Thank you, Mr Deputy Speaker. I hope that my lungs and throat and my voice will hold out for this.

Recently, I have had conversations with colleagues, friends and constituents to ask how they think a firefighter most commonly dies as a result of their work in the fire service. The common answer given is that they have been caught in a fire or died from smoke inhalation. People are shocked when I point out that the vast array of scientific literature shows that, when compared with the general public, firefighters are at significantly higher risk of being diagnosed with and subsequently dying of cancer, and that that is fundamentally related to and caused by the service work that they do.

Running into the face of a fire is not the only major threat that firefighters face. Men and women on the front line of Northern Ireland's Fire and Rescue Service (NIFRS) are often exposed on a daily basis to toxic smoke, asbestos and other chemicals and substances.

As a result, the rate of cancer diagnosis among those responders is statistically higher than that among the general population, according to an independent University of Central Lancashire (UCLan) report, commissioned by the Fire Brigades Union (FBU) and led by fire chemistry and toxicity expert Professor Anna Stec.

The study, which involved over 10,000 firefighters, found that firefighters can be up to four times more likely to develop cancer and other illnesses than other members of the public. Three quarters of the firefighters had served for at least 10 years before receiving a diagnosis, more than half were under 50, and a fifth were under 40. Of those diagnosed, 26% had skin cancer, which is the most common type for them; 10% had testicular cancer; 4% had head and neck cancer; and 3% had non-Hodgkin lymphoma.

That work is a UK first and is the latest in a growing body of international evidence from North America, Europe and Australia suggesting that firefighters are at an increased risk of developing cancer and other diseases. In parts of Canada and the United States, presumptive legislation has already been introduced that recognises certain cancers as occupational diseases amongst firefighters. In the UK, it has so far been concluded that there is not enough evidence to link occupational exposure to carcinogenic fire effluents with a higher risk of cancer. That means that, if a firefighter believes that their illness is work-related, they are required to prove it in each case. That is an almost impossible retrospective task. The reality is that UK research has been significantly underfunded, allowing the UK to fall further and further behind in the treatment of our serving firefighters.

Today is a major opportunity for Northern Ireland to be proactive rather than reactive and to lead the way in the United Kingdom. No longer should firefighters be undervalued, and, as a government, we should no longer allow them to become disproportionately affected by cancer solely due to the career that they have chosen.

We are quite happy to support the amendment that has been proposed to the motion, as, based on the shocking finds from the University of Central Lancashire's report, scientists have already created a best practice guide for fire and rescue services, putting forward a number of urgent recommendations to minimise firefighters' exposure to toxic fire effluent and simple changes that could be made protect the lives of firefighters and their families. With that, the DECON campaign was born. That has

recently been introduced to make small changes to the health and safety of all firefighters and their families. It provides training to educate and inform firefighters of the dangers of contaminants, challenges old habits and creates a change in mindset in the service. That involves firefighters washing dirty clothes, showering after incidents, cleaning what they carry and decontaminating before driving. Whilst the campaign is extremely positive, the luxury of time may not always be afforded to on-call firefighters, who are often leaving places of employment and managing the time expectations of their main employer.

A UK firefighters cancer and disease registry (FCDR) has been established to help researchers to study the long-term risk of firefighting. The more firefighters who register, the better we can understand and respond to the health risks that the profession faces. The registry collects information on firefighters' work routines, exposure to fire effluents, lifestyle and health. It will enable scientists to identify and recognise the most common cancers and diseases related to firefighters' work, and, in the future, it will offer preventative health screening, education and support.

Whilst both DECON and the firefighters cancer and disease registry are essential, the Finance and Health Ministers must explore practical ways of enhancing awareness among firefighting personnel and their families about the health risk of toxic chemicals and the urgent need for better detection and regular check-ups. Annual health screenings and evaluations are essential, as early detection is the key to survival for our retired, current and future firefighters. Staff in the Northern Ireland Fire and Rescue Service perform an essential and often life-saving role. They make up our families and communities, and we owe it to them to ensure that they are afforded appropriate, robust levels of protection.

In closing, I would like to dedicate the debate to all firefighters, particularly those who are battling cancer or who have lost their battle with cancer. As some of you may know, I have personal experience of the topic, and I wish to do all that I can to protect the lives of those who give so much to protect us all.

Some Members: Hear, hear.

4.15 pm

Mr Deputy Speaker (Mr McGlone): Glaoim ar Colm Gildernew leis an leasú a mholadh. I call Colm Gildernew to move the amendment.

Mr Gildernew: I beg to move the following amendment:

At end insert:

", and to engage with the Fire Brigades Union on implementing best practice procedures regarding post-incident decontamination, adequate personal protective equipment, and fire kit laundry and replacement, in order to prevent firefighters, their families and colleagues being exposed to harmful contaminants."

Mr Deputy Speaker (Mr McGlone): The Member will have 10 minutes to propose and five minutes to make a winding-up speech. All other contributors will have five minutes.

Mr Gildernew: It is extremely worrying that cancer rates are, on average, four times higher amongst firefighters because of their dangerous work. Contact with toxic materials that are released during fires, and even some of the materials that are used to fight fires, are only some of the dangers that are faced by firefighters and, indeed, of further concern, by their families.

The dangers of life-threatening contaminations due to the work that they do is the reality of every firefighter's life. Firefighters are worthy of every tribute that is paid to them in the Assembly. They are front-line workers who put themselves at considerable risk to protect the rest of us. Honestly, I do not think that we can ever do enough to repay them for the sacrifices that they make every time that the siren rings and they put on their uniforms to rush to the scene of an accident or a burning building. That type of work presents unique challenges.

Therefore, I welcome David and Jonathan's motion, which calls on the Department of Health to provide annual screening of all firefighters to detect early signs of cancer and other illnesses. As we know, the early detection of illnesses is often the key to recovery and, perhaps, particularly when it comes to cancer. That is the very least that we can do for these workers. Sinn Féin's amendment takes the prevention idea a step further by asking the Department to look at other ways in which we can help to protect the lives of firefighters and those of their families. After all, firefighters put themselves and, by extension, their families at additional health risk just by doing their job and doing it well.

If better equipment saves the lives of our firefighters, they should have better equipment.

If upgraded decontamination procedures and better PPE protects our firefighters from further risk and disease, they should have those. In their everyday work lives, firefighters take considerable risks on our behalf. However, a chairde, the risks to their lives do not end at the scene of an accident or when the fire has been extinguished. The potential for contamination from the toxic materials that they encounter in their job poses considerable additional and ongoing risk to firefighters and their families.

During the COVID pandemic, we saw how important PPE became in keeping our healthcare workers safe. Modern and effective PPE equipment is also needed by firefighters as they try to go about their work and keep themselves safe. The Sinn Féin amendment addresses the preventative measures that the Department of Health can take to ensure better health for firefighters. One of the key issues is the decontamination of kit and equipment. A firefighter recently told me that more kits and better, more efficient processes for laundering and replacing PPE are required if they are to reduce their risks.

While cancer screening is obviously worthwhile and should be offered to firefighters given the increased risk that they face — we all support it — we should do much better in reducing the risk and preventing cancer in the first instance. That is why the Minister, the Department and the Fire Service should engage with the Fire Brigades Union and firefighters to interrogate international best practice and ensure that we are putting in place the best procedures for decontamination and fire-kit laundry and replacement in order to protect firefighters, their families and their colleagues. I support the motion and the amendment.

Ms Hunter: I welcome the opportunity to speak in the debate, and I thank the Members who proposed the motion and tabled the amendment.

Firefighters are undoubtedly amongst the most selfless people in our society. I can recall the bravery and selflessness that we all witnessed in New York City during 9/11 and, more recently, in London following the Grenfell tower fire. Both incidents were heartbreaking and both had a profound negative impact on firefighters' physical health. In particular, 9/11 has left a devastating, decades-long imprint in the form of mental and physical illness that, for first responders especially, has proven deadly. As has been mentioned, many of those who did not die on the scene that day developed deadly chronic illnesses such as cancer and respiratory and gastrointestinal conditions. As

of 6 September 2021, it was listed that 250 New York City Fire Department deaths have taken place since 2001, resulting directly from 9/11-related illnesses. Those are real people who made great sacrifices and who have left loved ones behind. Research reveals that those firefighters developed those conditions as a direct consequence of breathing in toxic fumes ejected by the collapsing World Trade Center.

That leads me to the wording of the motion. It is deeply worrying that studies reveal that firefighters have a higher risk — four times higher — from environmental contamination from fires, leading to great concern about their health. We welcome the fact that the Fire Brigades Union has launched new training that aims to fight the threat of cancer to our firefighters. That is intended to help them to reduce the effects of toxic substances released in fires, with actions such as taking showers soon after fires being advised. The SDLP wholeheartedly agrees that introducing additional annual cancer screening to monitor and manage health will greatly assist in assessing the health status of our firefighters and better serve them. The inclusion of the amendment on post-incident decontamination is also warmly welcomed, as it will ensure that family members are also prevented from being exposed to those harmful contaminants.

The SDLP strongly supports the motion and the amendment, and it strongly supports our firefighters.

Mr Butler: At the outset, I declare a bit of an interest in this topic as a former firefighter of 16 years. Also — I have to check this, Mr Deputy Speaker — I think that I was an honorary member of the FBU up until very recently. I think that my membership has expired, but I will check that to be sure. I stand in support of the motion and the amendment. I particularly thank David Hilditch for tabling the motion. It will have been a very difficult topic for him to speak on, given his personal story. Some of us know a little bit about that, so I thank him so much for that. Thank you also to the party opposite for its amendment, which adds to the topic.

I will give a bit of context to this, as I have a bit of insider knowledge of what goes on. The Fire and Rescue Service performs a very particular and peculiar emergency response. As the Member from East Londonderry pointed out, firefighters go into the danger zone when everybody else is heading out. That should never be undervalued or played down. It does not matter what part of the world you are in. I have spent some time with firefighters from all over the world, including the west coast and

east coast of America, Sweden, Europe and Australia, and they have a camaraderie around trying to protect people. Today, we collegiately pay tribute to firefighters all over the world, and particularly to our own Fire and Rescue Service in Northern Ireland — each of those men and women serve selflessly, whether they are whole-time or retained — but also to their families. When a firefighter goes out on an appliance or responds to their Gartan — the wee bleper — when it goes off in a part-time retained area, their families do not know what is going to happen, how long they will be away for or what danger they will be in. It is an uncertain job and it is a dangerous job.

If you will indulge me, Mr Deputy Speaker, it would be remiss of me not say this. Over the past three years, two of my colleagues, who were serving firefighters, passed away. In July of this year, a friend of mine Andy McLucas died of cancer. So did Kenny McEwan. They were both fantastic firefighters who died too young from cancer. That is what we are talking about today.

As has been pointed out, firefighters carry out a range of very dangerous operations. A lot of that centres around fire, whether that is putting out car fires, grass fires or house fires. Each of those brings different levels of risk. To be fair, however, the Northern Ireland Fire and Rescue Service has high levels of supervision and training. It also has good levels of PPE. I am going to be honest. I started in February 2000. To be honest, what has happened to its approach to managing risk between February 2000 and today is quite remarkable, but that is not to say that we cannot do better. That is why we support the motion. We should always strive to improve on the levels of safety that our front-line services and responders are exposed to.

The other thing that was mentioned is that a lot of the things that our firefighters are exposed to are not just dangers to their physical health. Their mental health can also be stressed and stretched, because they respond to life-or-death scenarios.

I put it on record that I hope to bring forward a private Member's Bill that will look at protecting our first-line responders from PTSD and mental ill health as a result of their exposure. That is much like the motion. Some of our illnesses are physical, while some are mental. We need to do all that we can to protect our firefighters from both.

I looked at some of the studies that were included in the research pack and at some other studies worldwide. There is conflicting

evidence about the types of cancer and their prevalence. The motion refers to firefighters being "four times more likely" to develop cancer: that depends on what region the research is taken from, but there is no doubt that there is an increased risk. From my background, I know that, when you come back from a fire — I will be honest and tell it like it is — and blow your nose into a handkerchief, you should see what comes out at times. Such issues have perhaps not been at the forefront of the actions taken, which have focused on limiting your exposure time, increasing your distance from what is on fire and having a reasonable amount of protection. There is more that we can do, and I put on record my thanks to the Fire Brigades Union for being proactive and creating a training video.

If it is OK, Mr Deputy Speaker, in the final few seconds of my contribution, I want to send a message to my compatriots in the Fire and Rescue Service. A cultural shift needs to happen. Our firefighters are very brave, but they need to look after themselves.

Mr Deputy Speaker (Mr McGlone): I ask the Member to draw his remarks to a close, please.

Mr Butler: We in the Chamber will do everything that we can to support them.

Ms Bradshaw: I support the motion as the Alliance Party's health spokesperson. We will also support the amendment. I am chair of the Assembly's all-party group (APG) on cancer.

I will be interested to hear from the Minister what concrete steps will follow, particularly in the context of ongoing budgetary pressures and the need to make proposals to fund this step. I have been concerned about this broad issue for some time and have had discussions with the Fire and Rescue Service, most recently about the University of Central Lancashire's 'Minimising firefighters' exposure to toxic fire effluents' report. I also raised that report with the Minister. The report is primarily about prevention rather than screening, but the point about the enhanced risk is also clear.

The figures presented in the motion give a stark warning. As has already been said, depending on the exact nature of the situations that they face, their specific duties and whether they are part-time or full-time, firefighters can be up to four times more likely to develop cancer, not least because they are more exposed to carcinogens. Let us remember that, in the past few days, we have been talking about the danger of smoking in cars and vehicles in which

children are present and the associated long-term health risks, particularly of cancer. If we elevate that danger to working at the scene of a serious fire, it is not hard to imagine the heightened risk involved.

We must do all that we can to prevent cancer. Training has been undertaken, other means of reducing exposure have been explored and, in general, prevention is thankfully now being taken more seriously. The next complementary thing that we can do, however, is to ensure that heightened risk is met through heightened monitoring so that early intervention becomes not just a possibility but the norm. That is where the motion comes in. For long-term prognosis, the benefits of identifying cancer at an earlier stage are obvious to us all. Annual cancer screening would not be an easy undertaking, but it is surely a worthy one. Given the clearly heightened risk experienced by at least some of our firefighters in some contexts and our knowledge of that risk, screening could make a significant difference. It would be a useful way of assuring public servants that they are valued and that the public sector is available and, indeed, responsive to them. A further question is whether screening should be extended to former firefighters, given that they will have experienced risks.

I look forward to hearing what steps, including on funding, will be taken following the debate on the motion, which, I am sure, will enjoy unanimous support. I put it on record that the all-party group on cancer stands ready to support whatever comes forward from here.

Mr Deputy Speaker (Mr McGlone): Before I call Fra McCann, I am sure that he will not mind my saying a few words. Like everyone else, I have read the newspapers and know that he is, unfortunately, leaving the Assembly, and I may not be in the Chair to avail myself of the opportunity again before he does.

Fra, I have always found you to be a good and respectful person as we have worked together on the common interests of our people. I thank you for that and for the contribution that you have made to the Assembly.

I wish you and Janette all the very best for a happy and restful retirement. You have been in elected office since 1987, and that is some time to have been serving the community. I thank you for your input to the Assembly. Go n-éirí leat, a chara.

4.30 pm

Mr McCann: Go raibh míle maith agat, a LeasCheann Comhairle.

It was interesting to listen to Robbie, who has first-hand experience of what firefighters go through. To have someone like that speaking in the debate is invaluable.

I am pleased to support a motion and amendment that provide additional health security to vital workers. The risks of being a firefighter are clear. Every day, these workers put themselves at considerable risk as they go about protecting, and often saving, the lives of people in our communities. I honestly do not know how we could ever go about thanking them adequately for all that they have done on our behalf. However, there are small measures that we can take.

The motion to introduce annual cancer screening is welcome, but more is needed. The statistics tell us, as Members have said, that firefighters are four times more likely to develop cancer due to their regular exposure to pollutants in the work that they do on behalf of society. Further preventative measures are obviously needed, and that is what the Sinn Féin amendment addresses.

As my colleague said earlier, we have been informed by firefighters that, here in the North, only two kits are issued to them. When a kit is contaminated at a fire or another incident, it is supposed to be laundered to decontaminate it. However, that can sometimes take weeks, and firefighters often reuse contaminated kits, shift after shift, putting themselves, their co-workers and their families at considerable risk.

The Assembly needs to send a message that that is not an acceptable way to treat front-line workers who put their lives on the line day and daily. The Department of Health needs to look at what is being done in other jurisdictions in regard to best practice when it comes to the decontamination of kits and vehicles used by firefighters. For example, in the United States, firefighters remove their kit immediately after an incident. In fact, after an incident, to reduce the risk of further contamination, they do not even get back into the fire truck while wearing their kit.

We must do everything that we can to protect the lives of those who, all day, every day, put their lives on the line for us. Better decontamination measures and modern, accessible facilities will improve the working lives of firefighters and help to reduce their risk of cancer and other illnesses.

I thank the DUP for bringing the motion to the Assembly, and, in conclusion, the Sinn Féin amendment strengthens what is a good motion.

Mrs Cameron: I also put on record my best wishes to Fra McCann on his retirement. I feel quite jealous. I wish you all the best, Fra, for the future.

I commend my colleagues David Hilditch and Jonathan Buckley for bringing the motion to the House. David does so not only as an MLA but as a father who carries a heavy heart after the loss of his son Stuart. David, what you do today is a fitting tribute to your son, and I know that it will be felt by his colleagues who continue their incredible work.

This is an emotional subject for many, but the motion is about an issue that really matters to hundreds of firefighters and their families. As a community, we are reliant on our firemen and firewomen to keep us safe, so we must step up to protect them as they step up, each and every day, to protect us.

Sadly, despite the recognition of the incredibly complex and dangerous nature of the situations in which firefighters must place themselves, there is not enough recognition that these conditions have long-term impacts, due to the chemicals and toxins that firefighters are exposed to.

In areas of Canada and the USA, presumptive legislation recognising certain cancers as occupational diseases amongst firefighters has been introduced. However, to date, the UK has concluded that there is not enough evidence to link occupational exposure to carcinogenic fire effluents with a higher risk of cancers.

Sadly, that lack of recognition means that, if a firefighter were to receive a cancer diagnosis that they believed to be work-related, the onus would be on that firefighter to provide evidence to prove the link in order to secure financial and practical support. Given the nature of their work, it is understandable why the general secretary of the Fire Brigades Union has described this as "an almost impossible retrospective task". That means that many fire personnel are without the vital support to which they should be entitled during the most difficult period of their lives. It is simply not good enough. Rather than being driven by evidence, the policy is driven by a lack of research into the effects of firefighting on the long-term health of those on the front line.

In response to this need, the Fire Brigades Union commissioned independent research

from the University of Central Lancashire. The research surveyed more than 10,000 serving firefighters and found that 4.1% of respondents had already been diagnosed with cancer compared with less than 1% of the general population. More than half were under the age of 50, and a fifth were under 40. Those are deeply alarming statistics that the Assembly and the Department of Health cannot ignore. They are devastating to young lives and young families, and we absolutely must protect those lives. The FBU interim best practice report, published in response to the research, provides guidance to minimise the risk to which firefighters are exposed. The guidance emphasises the need to provide health screening to any staff member who is regularly exposed to fire effluent. Early screening and early evaluation will lead to early detection and will save lives.

Today's proposal is sensible. It serves a life-saving purpose. It shows that we as legislators and the community at large take seriously the health and well-being of those who give their professional careers to protect us, regardless of the extreme dangers and horrendous situations that they face. It would not have a huge financial implication, but, my goodness, it would have massive implications for firefighters and their families. Furthermore, research from Mind shows that 85% of those in fire and rescue services experience stress and poor mental health. That shows the need to do more to support those essential front-line workers.

The nature of the job results in increased exposure to carcinogens, and we need to ensure that other extremely important measures are in place to give firefighters the best protection. We need to ensure that best practice standards are implemented in the use of PPE, respiratory equipment, risk assessment, decontamination procedures and, vitally, training. That must be enabled by adequate resourcing and funding.

Our firefighters put their lives on the line to ensure our safety, and the least that we can do for those brave individuals is to ensure not only that their work is recognised but that the risks that they endure every day are recognised. That applies for the present and for the lifelong impacts that those can have. Annual cancer screenings for serving firefighters are essential.

Mr Deputy Speaker (Mr McGlone): I ask the Member to draw her remarks to a close, please.

Mr Buckley: Will the Member give way?

Mrs Cameron: I will.

Mr Buckley: Does the Member recognise that, alongside the very personal nature of the issue for Mr Hilditch, it is equally important that, as Ms Hunter pointed out, the needs of our firefighters have reached the global stage, taking into account the tragedy and the devastating scenes that firefighters in the United States rushed to following 9/11?

Mr Deputy Speaker (Mr McGlone): The Member has up to six minutes.

Mrs Cameron: I thank my colleague for his intervention. I agree with that wholeheartedly.

I will conclude. Devolution can make a real difference in areas like this. I urge the Minister to take the issue forward as a matter of urgency and to make that difference for the well-being of all those who serve our community in the Fire Service. I support the motion and the amendment.

Mr Chambers: I am pleased to hear the improved health news about Fra's wife. They are both living proof of the benefits of double vaccination.

Other Members have acknowledged the debt of gratitude that we owe to members of the Northern Ireland Fire and Rescue Service, and I concur with all those comments. Fortunately, we as members of the public are not onlookers to the work that firefighters routinely carry out daily. Their skills extend to many scenarios other than fighting fires.

We see them cutting free victims from bad traffic collisions or evacuating people from areas. We have even seen them rescuing farm animals that are stuck in a sheugh. However, we do not see, at close quarters, their core function of fighting fires. They enter business premises with, perhaps, only scant information on what chemicals or products are stored in the building. They may also be unaware of the asbestos dangers in properties, particularly older buildings, many of which have been adapted for storage.

With all the best protection and training in the world, it is entirely possible for a firefighter to be exposed to toxic fumes or dangerous particles in the air. Other Members have spoken about the experiences of firefighters and first responders in New York City during the 9/11 attacks. Over a very compact period of weeks, they selflessly worked through the ruins of those buildings to recover the remains of

victims and were exposed to a lot of dangerous, toxic materials. Of the first responders present in the direct aftermath, 45% now suffer from upper airway and digestive tract conditions and 16% have cancer. Not all of those medical conditions can be attributed to their duties, but it is a reasonable assumption that the roots of many of those conditions were in the ruins of the World Trade Center.

Over a 20-year career, our local firefighters may not match the intense experience of the New York firefighters, which was felt over a few weeks. However, given the conditions in which their duties dictate that they must operate, they could develop many of the conditions now suffered by the first responders in New York City. Routine annual cancer screening, if practical, can only be a good thing and, hopefully, it will offer some degree of reassurance to firefighters and their families.

Mr Carroll: I wish Fra McCann all the best on his retirement that probably will not be a retirement. I am sure that he will be as busy and active as ever. He has always been courteous to me, and I want to wish Fra all the best.

I fully endorse the motion. I thank the Members who brought the motion and the amendment before the House today. The Assembly needs to do more to combat cancer rates among firefighters, but it also needs to do more to expand cancer screening for women, men, children, the elderly and every person in our society and to recognise the importance of front-line workers throughout COVID, especially firefighters.

The figures are alarming, as Members have mentioned. The published research states:

"4.1% of survey respondents had already been diagnosed with cancer, compared with less than 1% of the general population."

Obviously, that is alarming and showcases the urgent need for regular health screening to detect the early changes that could lead to cancer and other illnesses that relate to their work. Public health authorities and the Fire and Rescue Service must put the necessary provisions in place urgently to keep firefighters safe from cancer and other illnesses.

Those workers are exposed to fires that produce a cocktail of toxic irritant and carcinogenic chemicals in the form of aerosols, dusts, fibres, smoke, fumes, gases, vapours and other elements. Indoor air testing at a number of fire stations and training centres

highlighted that firefighters across Britain and the North are still being exposed to high levels of toxic contaminants during and after a fire, because cancer-causing chemicals remain on PPE, clothing, equipment and elsewhere at the fire ground.

As others have said, the research stated:

"Test samples revealed carcinogens inside firefighters' helmets, on PPE, and even on breathing apparatus mask filters."

One survey, which was conducted on 10,000 people currently serving as firefighters, asked questions to:

"better understand UK decontamination practices and the prevalence of illness".

The research shows that three-quarters of firefighters serve for at least 10 years before receiving their diagnosis. Those are really startling figures, with more than half of those diagnosed being under the age of 50 and a fifth were under 40. Of those diagnosed, 26% had skin cancer, which was the most common illness; 10% had testicular cancer; 4% had head and neck cancer; and 3% had non-Hodgkin's lymphoma. Half of the respondents did not think that their fire services took decontamination practices, such as cleaning PPE equipment, seriously. That is a crucial point for the Minister and the Fire and Rescue Service to act on. One in five of the survey respondents said that they store their fire gloves in their boots or pockets and one in 10 in their helmets, risking the transfer of toxic contaminants directly to skin.

4.45 pm

Scientists have created a best practice guide for fire and rescue services, putting forward a number of urgent recommendations to minimise firefighters' exposure to toxic fire effluence. Those include every fire and rescue service having to implement fully risk-assessed decontamination procedures en route to, during and after fire incidents and ensuring that all relevant staff are trained in implementing those procedures. Fire and rescue personnel should receive regular and up-to-date training on the harmful health effects of exposure to toxic fire effluence and how those exposures can be reduced, minimised or eliminated. Firefighters should wear respiratory protective equipment at all times while firefighting, including after a fire has been extinguished but is still gassing off. PPE should be cleaned and thoroughly decontaminated after every incident in order to

avoid a build-up of toxic contaminants. Firefighters should shower within an hour of returning from incidents. Regular health screening and recording attendance at fire incidents over a firefighter's career are strongly advised and will be key to the longer-term monitoring and management of their health.

One of the last points, which is in many ways the most important, is that we need an expansion of screening and investment in the NHS that targets firefighters as well as other workers who may be at risk on the front line.

In closing, I will say that Matt Wrack, general secretary of the FBU, stated, I believe in the report:

"Firefighters risk their lives every day to keep their communities safe. But it's clear that the risk to their health doesn't stop when the fire has been extinguished.

Sadly we often see serving and former firefighters suffer from cancer and other illnesses. Every firefighter knows the fear that, someday — "

Mr Deputy Speaker (Mr McGlone): I ask the Member to draw his remarks to a close.

Mr Butler: Will the Member give way?

Mr Carroll: Yes, sure.

Mr Butler: I thank the Member for giving way. Thank you, Mr Deputy Speaker.

You covered a lot of ground. It was really good, Mr Carroll. One of the realities in the fire service is that our firefighters are attending a lot fewer fires than they used to, so the fire safety education message is getting through. Does the Member agree that we need to keep that fire safety education going so that we minimise the number of fires, which will minimise the amount of exposure for our firefighters in the first place, and try to get that upstream as well?

Mr Deputy Speaker (Mr McGlone): The Member has an extra minute.

Mr Carroll: Thank you. I thank the Member for his intervention. I agree with his point. He brings a lot of expertise, as others said, so I fully accept that.

Just to finish the quote:

"Every firefighter knows the fear that, someday, they and their family could receive

the devastating news – but we're determined to do all we can to reduce the risk of firefighters developing these terrible diseases as a result of their job."

Hopefully, if the motion passes today, that will be a reality. I am happy to support the motion and amendment.

Mr Deputy Speaker (Mr McGlone): I now call the Minister to respond, and the Minister has up to 15 minutes.

Mr Swann (The Minister of Health): Thank you very much, Mr Deputy Speaker, for the opportunity to respond to the motion, the amendment and Members' remarks.

I thank Mr Hilditch for tabling the motion on what is a practical and political issue but also for him a deeply personal one. I pay tribute to his son Stuart, who was a part-time firefighter. I not only know how much Stuart meant to David but how much Stuart meant to the Fire and Rescue Service and the commitment that he gave to it. David, please take that as a personal thanks, and take it back to your family as well.

The Assembly will undoubtedly agree that firefighting is a dangerous occupation. We heard that from many contributors. Firefighters put themselves in danger to help those most in need. The bravery, dedication and commitment shown by our firefighters often go unseen. For the past 20 months, our health and social care workers have been to the fore, and rightly so, but it is often forgotten and overlooked that our firefighters here in Northern Ireland are part of our health family, and they are a key part. It has been an honour and privilege for me as Minister to meet many of them on lots of occasions since coming into office.

It is as Minister of Health that I assure Members that I am committed to protecting our dedicated firefighters. Furthermore, supported by my Department and the Northern Ireland Fire and Rescue Service, I can say that we are fully committed to safeguarding our employees. The Fire and Rescue Service in Northern Ireland has, like all employers, a statutory duty to ensure the health, safety and welfare of its employees. The Health and Safety Executive for Northern Ireland (HSENI) is responsible for enforcing health and safety at work. The Control of Substances Hazardous to Health Regulations 2002 (COSHH) require employers to assess the risk to their employees in relation to substances that are hazardous and "to prevent or adequately control" those risks.

The motion asks:

"That this Assembly recognises the urgent need to protect firefighters from cancer".

Members will welcome assurances provided to me by the Chief Fire and Rescue Officer that, as an employer, the Northern Ireland Fire and Rescue Service is compliant with Health and Safety Executive requirements. Furthermore, the occupational risks that firefighters face are continually assessed by the Fire and Rescue Service, and action is taken to mitigate known risks, including risks associated with exposure to contaminants, as has been mentioned.

Given the work that firefighters do, Members will accept that options to eliminate exposure to harmful substances are limited. For that reason, the Northern Ireland Fire and Rescue Service, like most fire services in the United Kingdom, has focused efforts on adopting preventative measures to reduce exposure whilst on operational duties. Researchers in that area have created a series of best practice guidance for fire and rescue services. They have put forward a number of recommendations to minimise firefighters' exposure to toxic fire effluents. I advise the Assembly that the Northern Ireland Fire and Rescue Service has a well-established contaminants working group that takes forward those recommendations. The contaminants working group works to ensure that the Fire and Rescue Service follows national best practice to protect our firefighters against exposure to harmful substances. That group works collaboratively to consider the wider sector's position through the National Fire Chiefs Council and with the Fire Brigades Union.

The Fire and Rescue Service is working in partnership with the Fire Brigades Union, following the launch of its training and awareness package, DECON, which Mr Hilditch spoke of in his opening comments. The purpose of the package is to prevent and protect firefighters from the risks associated with exposure to contaminants. That campaign encourages firefighters to take practical steps before, during and after every fire incident to help to reduce exposure to contaminants.

As mentioned, the Fire Brigades Union commissioned the University of Central Lancashire to research firefighters' occupational exposure to toxic fire effluents. That report, which was published in November 2020 and entitled 'Minimising firefighters' exposure to toxic fire effluents', detailed the dangers faced by firefighters from breathing and ingesting contaminants and how those toxic fire effluents can be absorbed by the skin. The report found that 4.1% of survey respondents had already

been diagnosed with cancer, compared with less than 1% of the general population. Members referenced that particular statistic in the debate.

Members should be aware that, more recently, in March 2021, in response to a request by the House of Commons Environmental Audit Committee, the Industrial Injuries Advisory Council published 'Firefighters and cancer: position paper 47'. It reviewed the evidence concerning the risk of cancer in firefighters, and it served as an update to earlier publications on cancer prevalence in firefighters. The paper stated:

"Concern about skin exposure to chemicals and contamination of equipment and clothing needs further scientific investigation and additional control measures".

The Industrial Injuries Advisory Council has recognised increased risks associated with firefighters for specific cancer sites. However, the types of cancer and the magnitude of risk vary considerably between studies, countries, the date of the studies and the length of employment of the firefighters. The Industrial Injuries Advisory Council did not find consistent evidence that the risk of any type of cancer, besides one specifically connected to exposure to asbestos, was more than doubled as a result of firefighting.

In March, the Industrial Injuries Advisory Council, again, decided against recognising cancer as an occupational disease for firefighters. Members should be aware that research in that area is ongoing. The Industrial Injuries Advisory Council is committed to continuing to monitor ongoing research and remains open to the possibility of reviewing its position as the research evidence base grows.

A UK firefighters cancer and disease registry database has been established by researchers to collect information on firefighters' work routines, exposure to fire effluents, lifestyle and health. Members will agree that it is critical that any link between occupation and cancer is properly defined. I advise the Assembly that, as Health Minister, I, of course, support that research. I remain vigilant in relation to any new data that would enable scientists to identify cancers common in firefighters and to establish whether those diseases are linked to occupation, because I have no doubt that ongoing research will better inform future advice, guidance and procedures in the Fire and Rescue Service.

In line with the direction from the Health and Safety Executive, under COSHH regulations, the Northern Ireland Fire and Rescue Service, like all employers, has an existing statutory duty to determine whether health surveillance is required where workers remain exposed to health risks, even after controls have been put in place.

Members should be aware that all operational Fire and Rescue Service employees in Northern Ireland are required to undertake health surveillance screening. Firefighters are re-examined at three-yearly intervals. That screening is carried out in accordance with the National Fire Chiefs Council's requirements, but the Northern Ireland Fire and Rescue Service carries out additional health screening for some operational staff, due to the risks associated with specific roles. For example, compartment fire behaviour instructors have additional screening every six months for the duration of the instructor's role and specialist rescue teams attend annual health screening. The service's contaminants working group continually reviews information sources on exposure to toxic fire effluents, with a view to identifying relevant health surveillance requirements.

I accept that screening for cancer and many other conditions is clearly desirable in order to manage any health effect at the earliest stage. However, the practicalities of that approach need to be risk-assessed by the Fire and Rescue Service as the employer. Members should be aware that the general population cancer screening policy across the UK is informed by the UK National Screening Committee's recommendations. All recommendations are evidenced-based following a robust review against criteria for improving the viability, effectiveness and appropriateness of a screening programme. The Assembly should be aware that currently there are no screening programmes targeted at a population group on the basis of occupation.

I reassure you, Mr Deputy Speaker, and the House that the Northern Ireland Fire and Rescue Service constantly strives to improve our firefighters' safety, utilising the evidence and knowledge that it holds. I am fully supportive of the ongoing studies of exposures and their health effects on firefighters and will continue to study the literature for future published reports. I will maintain a low threshold for reviewing the topic at any time in the future. I have sympathy with the concerns expressed by Members. I have spoken many times on the significant impact that the pandemic has had on our cancer services in Northern Ireland, and I have no doubt that the actions taken by the

Northern Ireland Fire and Rescue Service and the associated surveillance help to protect firefighters in Northern Ireland. The Assembly will, no doubt, join me in thanking it for the hard work that it has undertaken to date.

I believe that I have clearly demonstrated that the issues raised by Members are being given serious attention by the Northern Ireland Fire and Rescue Service and my Department. Work is ongoing in the area, and every effort will continue to be made to ensure that firefighters' needs are met.

Before closing, Mr Deputy Speaker, I join you and other Members in thanking Fra McCann for his service to the House. As a new MLA, I joined the Employment and Learning Committee with Fra, Sammy Douglas and Pat Ramsey. On reflection, I often feel sorry for the Ministers and officials who appeared in front of the three of them together, because their questioning was precise, specific and well informed, and it was always done with the best intentions for the people of Northern Ireland. That is how I have worked with Fra during my time in the House. Thank you, Fra.

Mr Deputy Speaker (Mr McGlone): Glaoim ar Órlaithí Flynn chun críoch a chur leis an díospóireacht ar an leasú. Beidh suas le cúig bhomaite agat. I call Órlaithí Flynn to wind up on the amendment. You have up to five minutes.

Ms Flynn: Go raibh maith agat, a LeasCheann Chomhairle. I will just do a quick review of some of the issues that Members have touched on. I will try to keep it specific to the content of my party's amendment, which was around best practice procedures, PPE, fire kit laundry and how, by putting more effort into those elements, some of the contamination issues affecting firefighters and their families can be prevented.

I am delighted that Mr Hilditch is happy to support our amendment. He spoke about the importance of the DECON campaign, to which the Minister also referred, and of challenging old habits. It was said that there was a culture in the fire service that having a dirty kit was the sign of a good job done, but, obviously, with the health repercussions and with more evidence and more research being done, as David said, it is really important to challenge some of those old habits. David also pointed out the reality of the time limitations placed on firefighters. That is an issue when they are trying to be more careful in changing their PPE and their uniforms and stuff, because they are limited in their time to carry out proper decontamination.

Probably his most important point was on the need to raise awareness among firefighters and their families by covering every aspect in order to prevent some of those health and social care staff from ending up with serious illnesses and, if they are carrying any, from passing contaminants on to their families. Thanks to Mr Hilditch for that.

5.00 pm

Colm Gildernew, the Chair of the Health Committee, made the glaringly obvious point that the risk does not end for a firefighter at the scene of an incident. He talked about the importance of having the appropriate PPE. That is critical. The critical nature of PPE has been evidenced throughout the past 18 months of the COVID pandemic, so we need to work towards having the best possible PPE procedures in place, not just for dealing with COVID-19 but for our firefighters.

I turn now to Cara Hunter's contribution. I am delighted that there was strong support from the SDLP for my party's amendment. Cara raised the poignant example of the 9/11 experience and some of the awful outcomes for firefighters who attended the scene that day. A lot of those outcomes could have been the result of the PPE that they were wearing on that day. They may or may not have had enough protection, although I do acknowledge that they were dealing with a really extreme incident. As Robbie Butler said, there is no hierarchy of incidents to which firefighters respond. They could be putting out a fire on a grass lawn, but the quality of their PPE needs to be of high standard regardless of the incident that is being responded to.

Robbie also mentioned the mental health pressures placed on firefighters as a result of harmful exposure to different toxins. The important thing to come out of that is that, if we invest more in enhancing PPE, uniforms and the washing of kits, there could be a positive knock-on effect on our firefighters' mental well-being.

Paula Bradshaw, the chair of the APG on cancer, focused her remarks on prevention and made the point that thankfully the problem is being taken more seriously. Hopefully, Paula, our amendment can help with prevention.

I could devote the next half hour to talking about Fra McCann. Big congratulations to you for all your years in service: I completely respect you, and you inspire me every day. I will move on to your remarks on the motion, because, otherwise, I would go on and on. Fra

spoke about the importance of firefighters' first-hand experience. We tried to base our amendment on some of the feedback that firefighters had given us on their uniforms and their PPE. Fra talked about reusing the contaminated kits shift after shift after shift, which is clearly very dangerous and something that we need to do all that we can to avoid.

Like Pam, the Deputy Chair of the Health Committee, I acknowledge the proposer's personal and emotional attachments to the motion, of which I was not aware. I commend Mr Hilditch for his work and for all his energies in tabling the motion. I thank him very much for that.

Mr Deputy Speaker (Mr McGlone): I ask the Member to draw her remarks to a close.

Ms Flynn: I am very sorry that I am out of time. I had notes on the contributions from Alan, Gerry and the Minister. Thanks very much to everyone for their input. I am really happy to support the motion.

Mr Deputy Speaker (Mr McGlone): I call Jonathan Buckley to conclude and wind on the debate and the motion. The Member has up to 10 minutes.

Mr Buckley: I thank all the Members who contributed to today's debate. It is fair to say that there is unanimity in the Chamber in our appreciation for, and recognition of, the selfless effort that is made by the Fire and Rescue Service in pursuit of protecting lives. Those brave, brave men and women are the first line of response to fires, road traffic collisions and specialist rescue incidents, and we call on them in the most volatile and compromising scenarios imaginable. Sometimes, when one is winding on a motion, it can be difficult to reflect and summarise in full Members' thoughts and feelings across the political parties, but it is quite easy for me to do so today because Members are unified on the need to step up and support our firefighters.

I pay special tribute to my friend and colleague Mr David Hilditch for tabling today's motion. Many will know of the very personal circumstances in which he does so. David has always, in the time that I have known him, been a vocal advocate for firefighters across this country. We have all looked on in admiration at how he has conducted and carried himself following the very difficult, sad and tragic circumstances of Stuart's passing. Stuart proudly and diligently served in the Fire and Rescue Service. Unfortunately, like so many

other firefighters, he was diagnosed with cancer and lost his battle. Many of us know of similar circumstances. I am sure that our colleague Robbie Butler can also testify to that happening to colleagues whom he served with. Thank you, David, for your dedication and the continuation of your fight to protect firefighters across this country.

Firefighters, while on duty and enduring the elements, can be exposed to chemicals that are currently classified, as Members mentioned, as definite or probable human carcinogens. First and foremost, it is essential that exposure to those harmful toxins is minimised and that the Fire and Rescue Service carefully control risks to the health of its employees from exposure to hazardous substances. The risks are currently minimised by the provision and maintenance of suitable PPE, the facilitation of storing and cleaning equipment, and the provision of training for employees on all risks. To that end, the Health and Safety Executive continues to monitor the progress of all current research that seeks to improve the working environment of firefighters.

Members right across the House talked about the challenges that our firefighters face, whether they be time pressures, the circumstances and dangers, PPE, or their mental well-being. Firefighters encounter such a range of issues. It is important that appropriate steps and mechanisms are put in place to protect them. Although I welcome the steps that have been taken to minimise their exposure to harmful chemicals while on duty and the ongoing research that is being conducted on a national level to explore the health risks and effects from contaminated equipment, we must acknowledge the growing body of research over the past decade, as mentioned by Mr Hilditch, on the occurrence of cancer in firefighters.

In 2010, the National Institute for Occupational Safety and Health in the United States of America began a multi-year study of nearly 30,000 firefighters. The resulting evidence was that cancer diagnoses and cancer-related deaths were notably higher among firefighters than in the general population, particularly for forms of respiratory, digestive, urinary and oral cancers. Given the data and evidence that have been compiled, we should not hesitate to provide a framework to manage and monitor the health status of firefighters.

I will not prolong my comments. We have all spoken proudly about our firefighters and the Fire Service, but it is clear that the motion is about much more than words. My party,

including Mr Hilditch, welcomes the amendment, which strengthens the motion. The motion has a very clear ask, and we, as Members, must follow up on that. The motion:

"recognises the urgent need to protect firefighters from cancer".

All Members recognised that. The motion also recognises:

"as a result of their profession, firefighters can be up to four times more likely to develop cancer".

Members acknowledged that. I know that the Minister responded to the debate, but the motion also:

"calls on the Minister of Health to introduce annual cancer screenings"

for those in the profession. Although I recognise that more work needs to be done to see how screening will be implemented, we must hold fast to that. It is the collective will of the House, so it is something that, collectively, we can all push for.

In closing, I thank Mr Hilditch for tabling the motion, and I thank Members for their support. In times of vulnerability and helplessness, firefighters risk their lives to help us. It is, I believe, time for us to help them.

Question, That the amendment be made, put and agreed to.

Main Question, as amended, put and agreed to.

Resolved:

That this Assembly recognises the urgent need to protect firefighters from cancer; acknowledges the increasing evidence highlighting the serious health risks to firefighters and their families following exposure to carcinogenic fire effluents; further recognises that, as a result of their profession, firefighters can be up to four times more likely to develop cancer and other illnesses than other members of the public; and calls on the Minister of Health to introduce annual cancer screenings to monitor and manage the health status of serving firefighters, and to engage with the Fire Brigades Union on implementing best practice procedures regarding post-incident decontamination, adequate personal protective equipment, and fire kit laundry and replacement, in order to prevent firefighters,

their families and colleagues being exposed to harmful contaminants.

Mr Deputy Speaker (Mr McGlone): I ask Members to take their ease while we prepare for the next item of business.

Education Catch-up Strategy

Mr McCrossan: I beg to move

That this Assembly notes the severe impact of the COVID-19 pandemic on education, schools and youth services; recognises the immense challenges facing young people, parents and school leaders as they seek to catch up on missed time and opportunities for learning, socialising and physical activity; further recognises the specific impact this has had on children with special educational needs (SEN); regrets the mishandling of exam grading and test and trace by successive Education Ministers, which has contributed to the stress on school communities; further notes analysis from the Education Policy Institute that suggests that Northern Ireland is spending less than other Administrations on education catch-up policies; and calls on the Minister of Education to bring forward a resourced catch-up plan to address the challenges facing young people, parents and school communities.

Mr Deputy Speaker (Mr McGlone): The Business Committee has agreed to allow up to one hour and 30 minutes for the debate. The proposer of the motion will have 10 minutes to propose and 10 minutes to make a winding-up speech. All other Members who wish to speak will have five minutes.

Mr McCrossan: As the SDLP's education spokesperson, I welcome the opportunity to propose and move this important motion. Throughout the pandemic, it has been clear that education has been hit hard. We have had school closures, exam cancellations, inadequate contact tracing, significant issues with distance learning and, importantly, the decimation of special needs education. While COVID infection rates are still significant in our schools, the successful roll-out of vaccinations, especially among younger people, will, thankfully, help to contain the virus in our communities and allow schools, as far as possible, to return to some form of normality.

It has not been easy. I thank our hard-working, dedicated and committed principals, teachers and non-teaching staff from across the school estate who have had to bear the brunt of the pandemic. I thank all those school staff for their

resilience and determination and for putting children first in what were unprecedented times. The staff need special mention today, and they need full recognition from everyone across the Chamber for overcoming seemingly insurmountable challenges, especially as we faced lockdown after lockdown. Make no mistake about it: education was brought to its knees, and we have been playing catch-up since. I want to focus on that catch-up.

(Mr Principal Deputy Speaker [Mr Stalford] in the Chair)

5.15 pm

It is the SDLP's view that not enough planning, funding and resources are going into catch-up initiatives in education. If that is not rectified now, there will be significant issues for children as they progress through education and further into working life. Action needs to be taken now, and, as noted, the impact of the pandemic has hit hard on all our student population, but it is becoming increasingly clear that some children have been more disadvantaged than others, whether they are children from socially deprived backgrounds, children from rural areas or children with special educational needs.

(Mr Principal Deputy Speaker [Mr Stalford] in the Chair)

That disadvantage facing children has been difficult to quantify given that there has been no attempt to conduct research locally into the real impact. Back in January, however, 'The Times' education supplement polled 6,000 teachers. Three quarters of the teachers reported that their children are being left behind in their learning, half of the teachers reported that their children were three months behind, and one third of the teachers reported that their children were six months behind.

As noted, the impact of the pandemic has hit hard on the entire student population. Most significant are figures from the Education Policy Institute (EPI), which informed us that Scotland is spending £200 per pupil on catch-up programmes, England is spending £174, Wales is spending £88 and, surprisingly, or, unsurprisingly, Northern Ireland is spending only £82. That shocking figure indicates that we are spending 60% less than Scotland is spending per head of the student population in schools.

Therefore, it beggars belief that the DUP attempted to amend the motion by highlighting all the great initiatives around Engage I and II

and around summer schemes etc when the reality is that children in the North have had less spend per head of population than anywhere else in the UK. The Minister is spending a mere 44 pence per day per pupil. That would hardly even buy a pencil. That needs to be addressed. Members across this House recognise, from various correspondence from individual schools, that that is a serious pressure on the operation of schools at the moment.

To compound the issue even further, and, as revealed in the Children's Commissioner's recent report, Northern Ireland spends less per pupil on education than any other jurisdiction on these islands. That means that our schoolchildren are doubly disadvantaged compared with those in Scotland, for example, and there are no plans in place to properly and meaningfully catch up.

As articulated previously in my contribution, the SDLP has had severe concerns around data and informed decision-making when it comes to COVID in our schools. That has had a significant impact on the disruption in our schools. For example, 20 months into the pandemic, we are not monitoring the impact of COVID mitigations in the classroom. Rather, trends in Scotland and England are used, as data for Northern Ireland is yet to be published. Those were the words of the Chief Medical Officer (CMO) when he attended the Education Committee. Further to that, we cannot even give an indication of the levels of infection in our schools, as indicated in the Minister's response to a question this week.

With regard to areas such as ventilation, which is strongly advised by experts, we are only purchasing our CO2 monitors now to measure air quality, and we have no idea whether ventilation is as effective as it should be. That lack of data only has the potential to add to problems already facing schools and to add to the need for catch-up programmes.

When considering today's debate, it is important that we look ahead and anticipate the long-term impact if no action is taken to bolster, fund and properly resource catch-up programmes here. The EPI Chairperson, David Laws, has highlighted exactly that, stating that:

"It is very clear that current education catch-up proposals offer only a fraction of the support that is needed to deal with the huge amount of lost learning time."

The costs of lost learning time with regard to national output and social mobility are likely to

be very large. We now need a set of solutions that will match the magnitude of this momentous challenge.

When it comes to the solutions for catch-up, I believe that the North, the Minister and the Department of Education have been found wanting. I have outlined my concerns around funding and the lack of data. Those need to be addressed immediately as a matter of urgency.

There is also a great need to look at the initiatives and strategies that could be deployed to improve educational outcomes for children impacted on by the pandemic. Four specific suggestions are recommended by experts, and I will run through those briefly.

The first is to have summer schools. While they have been used here, we simply do not have adequate resources or funding for them. The second is for weekly tutoring sessions with small groups of children. Again, there are massive resource limitations on that here. The third and perhaps most controversial suggestion is to extend the school day. Again, there is a lack of resources and funding for that. The final suggestion is to increase well-being support, but, again, there are massive shortfalls in resources and funding.

Against that backdrop, the SDLP believes that it is crucial that catch-up programmes are re-examined and that the Minister brings forward a catch-up plan containing key initiatives that are fully resourced, fully funded and led by data. If that does not happen, a generation of children in Northern Ireland will be adversely impacted well into the future of their education. We could stop that now with immediate action. The programmes to date are failing some of the most vulnerable children in schools, including those from disadvantaged backgrounds, those with SEN and those whose families cannot afford private tutors or support and do not have access to reliable broadband or IT equipment. There is a massive need to go back to the drawing board, and that is why I call in the motion for the Minister to do just that.

I think that, widely, we are all on the one page in relation to the challenges that we face. I think that we all widely agree that there has been no blueprint for how to respond to the pandemic or the disproportionate impact that it has had on children and young people. However, I also think that we are very aware that the insufficient spend or allocated budget to tackle the challenges needs to be addressed immediately. Whilst money is tight and limited, we should never put a price on our children's education or futures. Often, we talk about early intervention

and the need to get in early: we cannot allow this to go any further without meaningful intervention. I believe that the Minister will take that seriously, listen to our concerns and act. For that reason, I urge the House to support the SDLP motion and look forward to the rest of the debate.

Mr Sheehan: In March last year, our education system was dealt a crippling blow when coronavirus arrived on our shores. The way our children were educated was one of the most significant changes that we had to come to terms with. As someone who has two daughters in the primary sector, I can speak with first-hand experience. Teachers and pupils had to adapt to new remote ways of learning. In many cases, the quality of the remote learning was excellent, although it is no substitute for face-to-face learning.

One thing that the pandemic succeeded in doing is to shine a spotlight on the fissures and inequalities that already existed in our education system. Families without access to devices or internet connection were left waiting months for support from the then Education Minister. That dithering and delay seems to be a hallmark of DUP Ministers' COVID response. I mentioned the difficulties with remote learning, but, of course, there were other issues, such as the fiasco with exams and transfer testing, the school restart, contact tracing — the list goes on. At the moment, when the absentee rate among teachers is higher than average as a result of the pandemic, new teachers cannot get on to the teachers' register because of the dysfunctionality in the General Teaching Council (GTCNI). That is not a new problem; we have known about the dysfunctionality in that organisation for a long time. However, we are still waiting for a DUP Minister to sort it out. I have dealt with complaints over recent days from principals who cannot hire teachers they have already offered jobs to. I spoke to one principal who made 40 phone calls before he could get one substitute teacher. That issue needs to be resolved. Newly qualified teachers cannot get work while our schools struggle with workforce absenteeism.

Of course, it is our children who have borne the brunt of the disruption in schools. The impact on them cannot be overstated. The motion refers to the fact that the North is:

"spending less than other administrations on education catch-up policies".

However, we have to recognise that children have lost much more during the pandemic. We need the Minister to develop an ambitious

programme to support the educational, social and emotional needs of our children and young people.

Prior to the pandemic, the North had the longest tail of underachievement in Europe — it still does, by the way — but the impact of the pandemic risks making that even more acute. It has been stated time out of number in the Chamber that it is the children and young people from disadvantaged backgrounds or with special educational needs who will be left behind, yet we are only weeks away from unregulated, unfair and cruel transfer tests that perpetuate disadvantage, inequality and underachievement.

In combating the impact of the pandemic, we also need to see greater urgency from the Minister in investing in and implementing the action plan and recommendations from 'A Fair Start'. The action plan provides a long-term strategic basis for closing the attainment gap and helping our young people to achieve better as they go through life. Key to that is shifting the focus to early years. Currently, we invest much more funding at post-primary level, even though international evidence suggests that investment at the earlier stages of a child's life has much more impact. I realise that the way that we fund schools is complex, but there needs to be a major undertaking by the Minister to redress the anomaly that exists. The Minister should combine efforts to tackle educational underachievement with plans to invest in a catch-up programme. The two issues are inextricably linked.

Mr Newton: I start by paying tribute to all our teachers and school staff. Regretfully, I will speak against and oppose the motion. In many ways, the body of the motion could have been supported across the Chamber, but, as with previous motions from the same source, the SDLP decided to turn it into another attack on the DUP and DUP Ministers. I will refer to some of the words in the motion. It states that its proposers regret:

"the mishandling of exam grading and test and trace by successive Education Ministers".

It also states:

"the Education Policy Institute ... suggests that Northern Ireland is spending less than other Administrations".

I will come back to each of those issues.

The DUP approach in the Education Committee has always been to seek increased investment in education and in our special needs schools and our special needs pupils and investment in and support for a SEN principals leadership group; indeed, we have sought to address through a holistic approach the issues that have come out of the pandemic. My colleagues and I have led the debate in the Committee on a holistic approach to the problems. We have spoken about the need for support from the Finance Minister and about encouraging the Communities Minister to involve the local councils in addressing the issues. We have spoken about involving the Health Minister in addressing the health issues, particularly the mental health issues, with the Education Minister taking the lead on the matter.

The facts about grades have been stated in reports, if you agree with them, in the 'Belfast Telegraph' and, indeed, by the BBC. The 'Belfast Telegraph' said:

"Students in Northern Ireland have been celebrating another record-breaking set of results, with almost 40% of GCSE pupils awarded A or A grades. And in UK-wide terms, Northern Ireland ranks as far and away the highest-performing region".*

The BBC said —

Mr Lyttle: Will the Member give way?

Mr Newton: I will not give way.

The BBC has said:

"More than half of A-level entries in Northern Ireland have been awarded ... A and A grades.*

About 25,000 pupils received their A-level and AS-level results this morning.

Almost 51% of A-level entries were awarded A or A grades"*

— a record rise in Northern Ireland terms.

5.30 pm

I turn to another aspect of the motion. The Education Policy Institute report indicated — I accept this — that Northern Ireland is not spending as much per pupil as other regions in the UK. That is why we need the holistic approach from every Department to address it. The EPI states that, whilst the funding level was

lower in Northern Ireland, it was also the best of the four regions in that:

"A larger share of programme funding is targeted at disadvantaged pupils in Wales and Northern Ireland".

The EPI acknowledged and welcomed that.

I turn to another aspect of Mr McCrossan's concerns. He makes much play with track and trace. The CMO — I assume that he will not disagree with the CMO — has publicly stated his opinion that schools are safe. He has repeated that several times. *[Interruption.]* Thank you, Mr Speaker. I will finish with this: Mr Sheehan and Mr McCrossan indicated that they support the 'A Fair Start' report. If we are to support 'A Fair Start', we need Ministers collectively to ensure that —. The report —

Mr Principal Deputy Speaker: Thank you.

Mr Newton: — estimates that the actions require £10.9 million, rising to £73 million in total —.

Mr Principal Deputy Speaker: Thank you, Mr Newton. I am afraid that your time is up.

Mr Newton: We expect support from across the Chamber.

Mr Lyttle: I welcome the opportunity to consider the impact of COVID-19 on education and, hopefully and perhaps most importantly, what action the Assembly and Executive can take in response. The COVID-19 pandemic has exposed much, including and in particular the centrality of education, particularly schools and early education/childcare, to our way of life. It has exposed the inequalities of our education system and impacted greatly on teachers, children and young people, in particular children and young people with special needs.

The COVID-19 pandemic turned principals and teachers into risk assessors and remote learning coordinators overnight. In response, they showed courage to make sure that our schools remained open to key worker pupils. They established their own best practice blended learning networks. All that was despite, at times, grossly inadequate communications from the Education Minister and the Department of Education at key stages and phases of the pandemic, including the most recent change to the pupil testing, contact tracing and isolation policy. I ask Mr Newton to acknowledge that there have been difficulties with that change and the communication of that

change to the pupil testing, contact tracing and isolation policy. The provision of an air quality fund for teachers and pupils in our schools has also been delayed, despite the delivery of such interventions in other jurisdictions such as Wales. At times, the extent of this, as it was conveyed to me, was such that our health service staff felt as though they had a Health Minister, but our teachers felt as though they had no Minister. We have to acknowledge that reality.

Children and young people sacrificed so much to keep everyone in our community safe. The pandemic revealed the inequality to which many of them are subjected across the phases of our education system, particularly, as has been mentioned, the rigid, inflexible, unadaptable, flawed, unfair and unnecessary use of academic criteria for the transfer of 11-year-olds to the Key Stage 3 common post-primary curriculum.

Children and young people with special educational needs experienced particular difficulty. We strongly advised the Education Minister at the start of the pandemic to include the Special Schools' Strategic Leadership Group (SSSLG) among the Department's consulted bodies. Regrettably, it took so long to get on top of the disruption to special educational needs provision, and, indeed, therapeutic provision, that many families felt as though they had been abandoned. Eventually, a multidisciplinary panel was put in place, which still needs enhanced cooperation between the Department of Education and the Department of Health to truly respond to the needs of our SEN pupils.

Education reform and recovery and social, emotional and physical recovery for children and young people must be priorities for the Assembly and the Executive. Alliance's vision is for an integrated education system that delivers equality of opportunity for all children and young people to develop their unique talent and ability together. We need direct investment in early education and in the childcare strategy; timely assessment and support for SEN; delivery of the early years SEN framework; full-time preschool provision for all children; a flexible school starting age; food equality and widening of free school meals eligibility; and physical education provision at the guideline amount for primary-school and post-primary children, given that physical and emotional health and well-being are vital to ensuring equal opportunity for all.

We also need digital equality. We can look to Scotland, where there are local authority

partnerships with tech companies such as Apple to deliver devices and internet connectivity to all pupils to help them with education recovery. We can look to organisations in Northern Ireland such as BlendEd for best-practice support for remote learning.

We need proper area planning to identify, assess and meet parental preferences for, for example, integrated education and post-primary reform, not least because the panel on educational underachievement's 'A Fair Start' report referred to that as a "systemic inequality". That should be the priority for the Assembly. We support the motion.

Mr Butler: I speak on behalf of the Ulster Unionist Party. We reluctantly support the motion. It could have been worded much better. Mr Newton pointed to parts that can be supported, but, as I said, elements of it could have been worded much better. A couple of proposed amendments that could have added to the motion were unsuccessful.

The Children's Commissioner, the Children's Law Centre (CLC) and many other children's advocates have covered this, but, when we analyse the COVID pandemic, we may find that our children and young people were affected the most at that time. Given that they are younger than anyone in the Chamber, they will certainly be affected for the longest time. Debates such as this are really important, because things can sometimes be teased out or pushed over the line. Earlier, I looked up what that generation might be called, and I found that they may be called "Generation C". Previously, there were the baby boomers, Generation X, the millennials and Generation Z. As I said, discussions such as this can change the trajectory that we are on. We will rehearse many of the things that went on. I have to put on record the fact that, at this time, we should not politicise the actions of people who were doing their best. I believe that Peter Weir, the former Minister, did his best, and I believe that Michelle will do her best. That is not to say that we cannot assist. We have differences of opinion on many matters.

Like others, I pay tribute to our principals and teachers in particular. Having communicated with them, I know that some are still under incredible pressure because of the changes to the contact-tracing system. Minister, I therefore ask you to reach out again in order to give them confidence and again adjust the trajectory of that system.

This debate, however, is more about our young people in nursery, primary and post-primary schools. There is no doubt that they have been through a lot of uncertainty, and some of that uncertainty, around examinations and grades, has been covered. Mr Newton talked about the excellent grades that a lot of our children got, and deserved to get. What we are talking about here, however, is the pain and misery that they experienced up until that point, in the not-knowing phase.

The Minister, in responding to the debate, will probably say that that was because of the cross-nation nature of exams, and I get that. However, we represent the children of Northern Ireland here, and we need to ensure that we put them first. Minister, if we are to learn lessons from what has gone before, we need to give children hope and communicate to them that you are their Minister.

In a fiscal context, I agree with the motion about the amount that was given. Again, perhaps the Minister could tackle that with the Minister of Finance, given that, as I said at the start of my speech, it is those young people who will be most affected in the longer term. If there is a compliment to be paid, it is that the money was targeted at areas of social deprivation. If there was something good about it, that was one of those things. We often talked in the Chamber about educational opportunity and those whom COVID had affected most. That is the formula that was used in this instance, and not too many people would kick up about that.

One of the concerns that I have is that school attendance dropped to the lowest in the UK by October 2020. We need to be mindful of that when we pick up the strategy for our recovery. The part of this that we can definitely agree on is in the last sentence of the motion, which asks the Minister:

"to bring forward a resourced catch-up plan to address the challenges facing young people".

However, I think that we need to be ambitious when we talk about that. I spoke about this at my party conference. Hopefully, if you are on Twitter, you may have read a little bit about the Ulster Unionist Party conference at the weekend. If not, I am talking about pre-birth, early years provision and post-education employment opportunities. I know that Diane Dodds and I concur that this is not just about schools: if we are to get it right for these people, it is also about before and after they go to school.

Daniel, in his opening remarks, mentioned looking at the stats from England and Scotland with regard to where we are and how we adjust these things. There is, I suppose, an element of that in developing best practice. However, we are now in a position where we need to become Northern Irish-centric and make sure that we do not wait for anyone else. We need to act first and set the trend. That goes back to the Ministers in Wales and Scotland striking out and saying, "This is what we will be doing". If I have one criticism of Peter, it was that he may have waited too long to demonstrate that he was going to drive the examinations agenda and how they were to be administered.

I will stop now. Reluctantly, I will support the motion.

Mr Delargy: I noticed on social media yesterday that Michelle McIlveen has introduced an art competition as a way, perhaps, of distracting from the crisis in education. The competition is a way of celebrating 100 years of partition. Seeing as the Minister is feeling artistic, I would like to paint for her a picture of the reality in schools at the moment.

Teachers are tired, principals are tired, classroom assistants are tired, parents are tired and pupils are tired. They are tired of DUP dithering, and they are tired of delay and incompetence. I take this opportunity to thank all our education staff for everything that they do, particularly over the past 18 months when they have done their job without leadership. I like to give credit where credit is due, and Peter Weir acted as a unifying figure. I was contacted by people from republican, nationalist and unionist backgrounds with whom I went through the PGCE and then worked with. Unfortunately for Peter — I note his absence today — they were unified in opposition to his incompetence. They were unified in opposition to communication that, throughout, was lacklustre, to say the least. Communication was often received on a Friday afternoon at 4:00 pm and expected to be implemented on the Monday morning. Peter threw teachers and education to the wolves.

One of the things that surprise me in the DUP defence of this is that the party always comes back to the idea that it supports everyone, particularly the most disadvantaged children and families in our communities and our society. I find that baffling: if the DUP were serious about supporting everyone, the easiest and most beneficial way to do that would be to remove selective education — a system that is inherently classist and elitist.

Michelle seems to have adopted an approach of standing back and saying, "Well, everything that went before my tenure is nothing to do with me. I am different and distinct". Again, I find that quite baffling, but there is consistency between Peter's approach and yours.

Peter Weir's position was to make sure that principals and teachers took on all the responsibility. Overnight, teachers and principals became healthcare workers, social workers and IT technicians. Teachers are not looking for thanks for all that; they are looking for respect.

5.45 pm

You seem to have taken a different approach, Michelle. Instead of handing everything over to teachers and principals, you have offloaded it on to the Public Health Agency (PHA) and washed your hands of —.

Mr Principal Deputy Speaker: Can I ask that the Member briefly resume his seat?

Mr Delargy: Yes.

Mr Principal Deputy Speaker: I know that the Member is new, but the rules on behaviour and courtesies of the House state that you should always address the House through the Chair. In this instance, the word "you" refers to me. Other Members should not be addressed as "you". They should be referred to by their title — the Minister of Education, in this case — and their surname. They should never be referred to by their first name only. If it is clear to whom you are referring, you may refer to the Member for — in this case — the Strangford constituency. Ministers, Chairpersons and Deputy Chairpersons can also be referred to by their office. I appreciate that the Member had no intention to cause offence. That is just one of the courtesies of the House

Mr Delargy: I will resume my point. The Minister of Education has abdicated all responsibility and handed it over to the PHA. Four weeks ago, during one of the first times that I was in the Chamber, I asked whether the Minister could explain what she will put in place to make sure that the PHA is able to undertake contact tracing. I am still waiting for a response. That is another failure by the DUP.

Schools and families have been placed in an even more dangerous position than they were in in March last year. The only things that have been consistent in DUP policy, from Peter Weir

to Michelle McIlveen, are failure, incompetence and arrogance.

I understand that political leadership may not be the DUP's forte, but I ask that the Minister does what is best for teachers by listening to them. Listen to the professionals. Do what is best for our teachers, parents and children.

Mrs Dodds: Two things that I find utterly depressing in some of the debates about education are the rush to politicise education and the amnesia around the needs of children and young people. We have just had a classic example of that.

I pay tribute to the children and young people who have experienced so much over the past two academic years. Their lives have been impacted by the pandemic in ways that those of us of a certain age in the House cannot understand or even contemplate. School leaders and teachers have been instrumental in ensuring that there is a continuity to their education and experience. I am sure that everyone will join me in acknowledging the hard work and flexible approach to teaching that we have seen.

There is no doubt that the pandemic has been instrumental in the experiences of children and young people over the past two years. That experience goes from very young children to those who are sitting their GCSEs and A levels and those who are looking for employment or at continuing education beyond that.

A child entering P4 — I confess a conflict of interest, as there is one in my family — will have had only one year in which education has been uninterrupted: their primary 1 year. That is pretty startling at a time of their education when their social, physical and emotional development is proceeding at pace. Young people who started their A-level courses in September have had two years of interruptions to their GCSE studies. As my colleague from east Belfast said, despite all that, Northern Ireland recorded record grades last year at GCSE and A level across the United Kingdom. Surely we should celebrate that and say, "Well done". That was achieved against the backdrop of a pandemic. We had no idea how that would unfold or the impact that it would have.

Over the past two years, our Education Ministers have secured an additional £409 million to support young people and teachers; a fact that has been largely absent from the debate so far. For those who received their qualifications in 2020 and 2021, the learning from 2020 to 2021 is absolutely clear, and

those who will do exams in 2022 will see a huge range of reductions in the assessments that they will have to undertake.

Some Members on the Benches opposite mentioned IT support. My understanding is that an additional £7 million has been put in to ensure that there is IT support, primarily for those who live in rural communities.

Education is not just about exams. It is about addressing the isolation and loneliness that young people experienced and helping young people — very young people — to learn again through play and interactions. That is why the summer schemes were so important.

When all is said and done, at the end of the debate, the most important thing that we, as politicians, can do is to make sure that the next academic year is uninterrupted and that our children have that safe and secure environment in which to have their education. That is why I am grateful for the intervention and advice from the Chief Medical Officer.

I also note that the motion refers to funding. I am sure that the Minister will be grateful for the support of the House as she engages with the Finance Minister on the spending review and pleads for an increase to the Education budget. My understanding is that that budget has had a real-term cut of 5%, yet an additional 6% of pupils are attending school. That is an extremely difficult budget to manage. I am sure that we all look forward to the 'A Fair Start' action plan being implemented. We discussed that last week in the Education Committee. A DUP Education Minister commissioned that report, but it is still waiting for finance from a Sinn Féin Minister, perhaps —.

Mr Principal Deputy Speaker: I am afraid that the Member —.

Mrs Dodds: I will finish on this point, Mr Principal Deputy Speaker. Perhaps we can all remember that. We need to support the Minister in ensuring that she has the funds to make education available to all.

Ms Brogan: I welcome the opportunity to debate this matter. I thank my Committee colleagues and Mr McGrath for tabling the motion. I will, of course, support the motion.

There is no doubt that the pandemic has had a massive effect on children and young people. Although everyone throughout society suffered, our children and young people had to shoulder an enormous burden from the very beginning.

Their school lives and education were turned upside-down in an instant, when they were instructed to stay at home and begin at-home learning. That presented a unique set of challenges to pupils, teachers and parents. I am sure that all Members across the House heard from families who were totally stressed out and really struggled to support their children to perform throughout that period of at-home learning, and we heard that some Members had first-hand experience of those challenges. With poor Wi-Fi connectivity in so many rural areas, like mine in west Tyrone, a lack of IT devices or both, students, teachers and families faced major changes and challenges to their learning and lives.

I will take the opportunity in the debate to focus on the effect that the pandemic had on children and young people and their emotional health and well-being, which cannot be overstated. Earlier in the year, the mental health champion, Professor Siobhán O'Neill, attended the Education Committee. The Deputy Chair of the Committee, my colleague Pat Sheehan, asked her whether she agreed with his assessment that children and young people faced a tsunami of mental health challenges as a consequence of the pandemic. She, of course, agreed with that.

Also in her evidence to the Committee, she noted that there is a link between prolonged stress in childhood, mental illness and poor educational performance. Really, it is quite simple: if our children are not OK mentally, they will not be able to maximise their learning potential.

On 10 March this year, the Committee hosted a group of young people who represented the Belfast Youth Forum, the Secondary Students' Union, Pure Mental, Crisis Cafe, the Commissioner for Children and Young People Youth Panel and the NI Youth Forum. That group of young people provided us with an insight to the challenges they were facing because of COVID-19 and, in particular, the disruption to their education. The main issues they highlighted at that session were the increase in anxiety and stress felt by the student population because of uncertainty about how exams would be carried out; the difficulties of remote learning, as I mentioned; loneliness and isolation from their peers; at that time, uncertainty about returning to school; and a fear of bringing COVID home to their loved ones.

In November and December of last year, the Secondary Students' Union carried out a survey of over 2,000 students. Some 76% of

respondents said that they experienced mental health problems. That is a really a startling statistic. The young people made it really clear that more needs to be done to support them and their mental health. Because they made such huge sacrifices throughout the pandemic, they now deserve to have their efforts recognised and to be supported by all of us as we emerge from the latest COVID restrictions.

Other Members referenced the dithering and delay of DUP Education Ministers throughout the pandemic. It is important to reiterate the consequences that that has had on the mental health and well-being of our children and young people.

I know that an emotional health and well-being framework was intended to address those issues, but it was developed prior to COVID. Given the new dimension the pandemic has created, I ask the Minister to urgently take another look at that plan and to update it to reflect the issues that have arisen since the onset of the pandemic.

I recognise the particular challenges faced over the course of the pandemic by children and young people with special educational needs and their families. In the aftermath of the first lockdown, the Education Committee received testimony from families of children with special educational needs and their support organisations. Those families were essentially abandoned by the system. They had all support taken away from them, and they were left in a truly difficult situation. I am glad that, after that, the political parties came together in support of keeping special schools open during subsequent lockdowns and that vital support and education continued for our most vulnerable children. However, the impact of the first wave on that sector was severe, so they must now feature centrally in the wider education recovery strategy.

I am happy to support the motion.

Mr Harvey: We have all come through a very difficult period. Some have said that it is the most difficult seen by our nation since the Second World War. From 23 March last year, when the Prime Minister announced the first lockdown, our school communities, like general society, have had to adapt to a fluid set of circumstances.

I join the other Members who, in making their remarks, publicly thanked our teachers and support staff, who have worked hard in every educational sector over the past year and a half to provide consistency of educational delivery,

support and reassurance to our young people throughout this challenging time. On several occasions in the debate, the resilience and determination that our children and young people have shown throughout the pandemic has been highlighted. It is only right that we acknowledge how well they faced the challenges that were presented to them.

As normality, or the new normality, returns and the COVID situation begins to settle, it is incumbent on each Department and, more importantly, the House to evaluate performance and address areas for improvement. That piece of work will be of greatest benefit in terms of health and also as we work with various sectors, unions and Departments. It will also have an impact on education. There will be lessons that we can learn for the future, and, if that is the thrust of the motion, I welcome it. Some Members may wish to play politics with track and trace or exams and to beat the current and other Education Ministers with a big stick. That sort of approach will benefit no one.

The education community wants delivery and stability moving forward, and that should be our focus.

6.00 pm

Mr McCrossan: I thank the Member for kindly giving way. It was never the intention to play politics with track and trace, but I am sure that, in his own constituency, the Member was getting calls from principals and teachers who were under immense pressure trying to work an unworkable system, which was adding to an already very difficult workload. Will the Member agree that it was, in fact, the right move to take that responsibility away from schools but that problems remain?

Mr Principal Deputy Speaker: You have an additional minute, Mr Harvey.

Mr Harvey: Thank you for your comments.

For my part, I want to work constructively as we seek to build for the future and ensure that our education sectors are as equipped as possible to face the challenges being presented to them in the classroom as a result of the pandemic. The current and previous Ministers have sought to provide as much support to schools as possible, whilst ensuring that flexibility is always built into the process. At times, this has drawn criticism from some quarters that favour a one-size-fits-all approach. I strongly believe that it is important to give schools the ability to manage their own conditions and effectively operate

their school. No one knows what works best in an individual school better than its headmaster and its board. They must, therefore, be provided with the tools to get on with the job.

The Minister knows that, and her actions prove it. The Department has provided unprecedented levels of additional support to schools in recent months, running into millions of pounds, through the Engage I and Engage II programmes, the summer scheme provisions, the additional SEN support fund, the significant provision of additional digital services and the roll-out of the well-being and pastoral support recovery programme. All of those demonstrate significant practical efforts to meet specific needs head-on as they arise.

I am surprised that the motion makes no reference to the breadth of work that is already ongoing and the significant funding that has already been committed to address the challenges facing young people, parents and school communities. Yes, there is always room for enhancement, but it is somewhat disingenuous of those moving today's motion that that is not acknowledged in the text. I do agree, however, that it is important, as the motion references, that this work continues in the form of a longer-term catch-up programme. It is evident that the detrimental impact on learning caused by the pandemic has significantly affected many children and young people who have fallen behind as a result. They will require additional support if they are to recoup the time lost and reach their academic potential. Whilst this will be most keenly felt in deprived communities, it will, unfortunately, extend well beyond the traditional areas of need. I urge the Department to keep that in mind when it comes to funding allocations.

Children who need additional help should be fit to access it, regardless of any socio-economic considerations. It goes without saying that special educational needs provision must remain a top priority. I think that we are all aware that there is a clear indication that sufficient resources, training and support will have to be provided to allow for the full implementation of the new SEN framework, for example. There is definitely much to be progressed. However, it must be remembered that the Minister's budget is finite. A focus on financial realism is needed as we look ahead. It is already evident that there will be significant pressure on the Education budget for 2022-23. It is not beyond the realms of possibility that the Department could be subject to a budget decrease.

Mr Principal Deputy Speaker: Members, I had been due to call the Minister at six minutes past six. As there is only one additional Member to speak and, in accordance with Standing Order 17(4), the Business Committee has allowed some flexibility to go beyond the time agreed for the duration of timed debates. When used, this is known as the grace period. Because I am so gracious, I call Mr Colin McGrath.

Mr McGrath: Thank you very much, Mr Principal Deputy Speaker. We have heard lots about grace periods in the past year, and I think that we should stay clear of them as best we can. I am glad to have the opportunity to support the motion. I will declare an interest as a volunteer in the Patrician youth centre in Downpatrick that has worked with young people during the COVID period.

I am glad to have the opportunity to speak about youth services. We specifically included that in the motion, because an absolutely massive amount of work has taken place across all our communities by the band of youth workers in the voluntary and statutory sectors, to deliver to a very specific set of needs of our young people. Youth workers have played an invaluable role right across Northern Ireland in youth centres and in different youth organisations and groups.

The youth worker has a special relationship with young people. They get an opportunity to build a relationship, and they use that opportunity not only to positively influence the lives of the young people but also to provide direction and support. Quite often, the young people who engage with youth services do not engage fully at school. However, there are also many young people who engage with youth workers and the different organisations, and that relationship is critical to their mental health and participation in society. It helps them with their friendships, their skills development and their formal education, and that work has continued throughout the pandemic.

I have witnessed group work and one-on-one work with young people that has taken place via Zoom and various technological means. I have also seen innovative opportunities for participation, because many young people were totally isolated during the pandemic. I have seen youth organisations send art and craft packs to young people, and then they all came on via Zoom and followed the direction and support to be able to take part in the activities. For many young people, it was the only opportunity they got to engage with other young people in a week.

We should recognise the contribution that was made by the Youth Service. If there are any developments or support that are going to be provided to the formal education sector as a result of COVID, they should also be given to youth services in the statutory and voluntary sectors. When the figures are rolled out, there will be tens, if not hundreds of thousands —.

Ms Dillon: I thank the Member for taking an intervention. Will the Member agree that, when those in youth services were giving out their food parcels, they were doing much more than that? They were checking on those children to see if they were safe. Very often, unfortunately, that was not the case, and they had to intervene in those circumstances. That was very difficult for those staff. It was very difficult to go out to homes with not bad parents but parents who were having a very difficult time.

Mr McGrath: I thank the Member for her intervention. Again, it shows the critical importance of that youth work methodology where you get special access to young people and their lives and you get to see where there are problems. What is really important is that those youth workers are capable of sourcing the right help and support that those young people need. That need may not have been picked up on in other places. The Member has raised a very valid point, and I thank her for that.

I do not wish to prolong the pain of talking about youth services. It is something that I like to do every time I take to my feet in education debates. However, if the Minister provides support as a result of today's debate and future work, I ask for that to be extended to the youth services. The youth services work with tens of thousands, if not hundreds of thousands of young people, across the year in all of our communities. Often, when we talk about education, we only reference the formal education sector or the special education sector, but nearly £50 million of the Education budget is spent on youth services every year. I hope the work of the service over COVID will be recognised, as well as the continuing need to support the work of youth services as we go forward into the future.

Miss McIlveen (The Minister of Education): Thank you for the opportunity to address this important matter. COVID-19 has presented many significant issues for our society and our education system. Today, I place on record my sincere thanks to the education sector as a whole, which has responded professionally and positively to the unprecedented challenges of

the past 18 months. I fully recognise the severe impact of the pandemic on our young people, parents and education staff.

That is why my Department has invested no less than £330 million of Executive funding to support the education sector through COVID.

I will reflect on the challenges that we have and that we continue to face, the many achievements of our education system and my Department's significant investment in recovery. At the outset, I will address our school leaders and teachers directly. My Department knows that it has not always got it right. We, too, have faced unprecedented challenges, and we have been learning and adapting alongside you. I give you my assurance, however, that I am committed to listening carefully to your concerns, to learning from recent events locally and internationally and to working with you in the weeks and months ahead to continue to support recovery.

Unlike the Members who tabled the motion, I will not use the term "catch-up". That narrative can place unnecessary pressure and anxiety on children, parents and teachers. Rather, the focus of my Department and our school leaders is on supporting children to reconnect socially, build positive relationships and engage enthusiastically with learning. The aim is to ensure that our pupils are motivated to learn through a curriculum that places equal emphasis on knowledge, understanding and skills, rather than the deeply negative "catch-up" rhetoric. Rather than on catch-up, the focus must be on a smart recovery to build citizens of the future who are innovative, confident and empowered.

The COVID-19 pandemic has brought truly unprecedented challenges. Never before has our education system witnessed such disruption, with periods of extended school closures, the cancellation of public exams and the need to develop new ways of teaching our young people remotely. We must reflect on how COVID has negatively impacted on many children and young people's mental health and well-being. The crisis has had an impact on children from disadvantaged backgrounds in particular. Across the globe, it is likely to have widened existing inequalities.

We must also celebrate the positives, however. Our education professionals have worked tirelessly to reduce the pandemic's impact on children's education. Vulnerable children, including pupils with statements of special educational needs, were able to attend school throughout the lockdown earlier this year. That

provided much-needed assistance for families. Our Youth Service provided weekly food parcels to 5,000 young people who were at risk of food poverty and much more, as Ms Dillon mentioned. I thank Mr McGrath for his emphasis on the youth sector. I am hugely supportive of the work of the Youth Service, including the uniformed organisations, which make an incredible contribution. I have met them several times over the past couple of months, and I intend to engage with them further. Investment of £33 million has provided over 100,000 children with direct payments in lieu of free school meals during school closures and throughout school holidays. As the EPI report notes:

"Northern Ireland provided clear and early expectations for families, committing to fund holiday provision for the longest period of the four nations".

The efforts of many of our schools to deliver remote learning have been excellent. They have been ably supported by COVID-19 link officers from the Education Authority (EA), the Council for Catholic Maintained Schools (CCMS), the Education and Training Inspectorate (ETI) and other education support bodies. We are fortunate in Northern Ireland that schools have access to a centrally provided IT system: C2k. It supported online access to school services from the beginning of the COVID-19 school closures.

My Department invested almost £7 million in enhancing remote learning. Almost 25,000 new digital devices and over 9,000 free Wi-Fi and mobile vouchers were provided to learners. A wide range of professional development opportunities, resources, guidance and case studies to support remote learning were produced by my Department's continuity of learning project.

When I reflect on the past 18 months, three things stand out above all: resilience, collaboration and innovation. First, resilience: the way in which teachers, parents and pupils adapted to the situation and, with little notice, moved to a wholly different way of teaching and learning has been a case study of resilience. Instead of focusing on loss, we should praise our children and young people for adapting and working hard through a global pandemic. They need to be told how strong they are and that they can tackle any challenge that life throws at them. Secondly, collaboration: the teaching profession has learned from one another, sharing ideas and practice as never before. We have seen enhanced partnerships between our schools and health professionals, parents and

communities. Thirdly, innovation: the pace at which our schools have adapted and embraced new technologies has been impressive. The pandemic has changed teaching, creating new possibilities of doing things differently and with greater flexibility.

6.15 pm

Our world-class curriculum has stood up well to the toughest of challenges. Its flexibility allowed schools to tailor and adapt their teaching to support recovery and respond to the needs of individual learners. As a result of the excellent, innovative opportunities created by our schools, many thousands of children engaged positively with remote learning. Of course, that does not make up for the social connections and life skills that children develop at school or the fun experiences of everyday school life — music, drama, team sports and cookery — that children have missed.

Children also had a very different home experience. Understandably, some struggled to engage with remote learning. That is why my Department has put in place a wide range of tailored, evidence-based interventions that draws on international and local best practice to support effective learning and recovery. In the last academic year, over £17 million was invested in the Engage programme, which provided one-to-one or small group teaching support to thousands of pupils across every primary and post-primary school in Northern Ireland. The programme was widely welcomed by schools, as it gave them flexibility to shape the programme to their pupils' needs. This year, the Engage II programme continues that important work with an increased budget of over £16 million for the period until March.

I will bring forward proposals for further funding for the remainder of the school year. Unfortunately, at this stage, I am not confident of support from all Executive colleagues, given the focus on other priorities. The Engage programmes have also been supplemented by a wide range of complementary interventions: £10 million of investment in summer schemes serving over 40,000 children; half a million pounds to help year 12 pupils taking GCSE maths; and a new well-being and pastoral support programme for children with special and additional educational needs. I am also delighted that £1.4 million of additional investment in teacher professional learning will support a new capacity building project to be delivered by the Education and Training Inspectorate. The Stepping Forward Together project will provide professional learning opportunities in the key area of self-evaluation,

and this will lead to improvement. The chief inspector will write to all schools later this week inviting them to participate. I have also prioritised increased investment in early years interventions. Around £2 million of additional annual funding has been provided for Sure Start, and a further £1 million of additional investment has been provided this year for the pathway fund to target young children at risk of not reaching their full potential.

Having reflected on the support and investment provided by my Department, I note the highly selective extract from the EPI report cited in the motion. A more balanced summary would note that the EPI acknowledges the inherent difficulties in trying to draw funding comparisons across the UK and internationally; that the boundary between specific catch-up spends and other interventions is not always clear; that the analysis compares different funding periods, notably including spending plans in England into the next financial year; here, it does not do that; that spending in Wales includes all investment to support 16- to 19-year-olds and vocational learners, whereas investment by the Department for the Economy here is not included in the report; and that our programmes are also evidence-based and appropriately targeted. I quote directly from the EPI website:

"the ... programmes of Wales and Northern Ireland are far better targeted at their most disadvantaged pupils, who according to research, have seen their education suffer the most over the course of the pandemic. In these two countries, around half of catch-up funding is allocated to poorer pupils."

The proposers of the motion are, of course, entirely silent on those matters. They are also silent on the most recent EPI study that compared the educational outcomes of pupils across the UK in reading, vocabulary, language and maths. It concludes:

"Pupils in Northern Ireland lead the way among UK nations in most measures of pupil outcomes".

The report particularly notes the high scores of children in Northern Ireland from low-income households. We have an education system of which we should rightly be proud. It is a system with significant strengths that performs extremely well internationally and has many of the features of top performing systems.

I turn to qualifications. For the first time in over 70 years, public exams were cancelled in 2020. It was a unique and unprecedented situation for Governments across the United Kingdom.

Ultimately, teacher grades were awarded in every jurisdiction. In 2021, when exams were cancelled again, my Department and CCEA put in place the best possible arrangements in the circumstances.

When I reflect, therefore, on summer 2021 awarding — a summer with the lowest number of appeals on record — I struggle to recognise the picture painted by those who tabled the motion. Thousands of young people completed their qualifications and progressed to the next stage of education, employment or training despite the impact of the pandemic, so where is the mishandling? Again, I cannot praise enough our school leaders and teachers, who stepped forward to provide centre-determined grades with fairness and consistency. It is due to their dedication and professionalism that our students were enabled to obtain those important qualifications. Here in Northern Ireland, CCEA sampled evidence from every school and college, giving young people, parents, universities and employers confidence in the grades awarded.

My Department has introduced a comprehensive package of reductions in assessment across CCEA qualifications for 2022. We were the first jurisdiction in the United Kingdom to announce such measures. Our young people, uniquely, will have significantly fewer exams in 2022. That reflects the significant disruption that they faced, and it will ensure that they are again supported to fulfil their potential and to progress successfully.

In conclusion, over the past 18 months, our education system has overcome unprecedented difficulties. The continually negative rhetoric about loss, damage and catch-up in education set out by those who tabled the motion is singularly unhelpful. So is political point-scoring around alleged mishandling, when our education system has faced completely unprecedented and unknown challenges and when a pandemic has swept across the world. The current crisis has tested our ability to deal with large-scale disruption. It has upended the education landscape. We have, however, endured and succeeded, and we have made changes for the better. Our education system has shown its resilience and its ability to innovate and work in partnership. We must celebrate that.

I do not underestimate, of course, the huge challenges facing our school leaders, teachers, parents and, most importantly, children and young people. As we emerge into a new reality, there continue to be many unknowns and challenges ahead. As I have outlined today, my

Department is providing significant funding to support schools as they work to identify and limit the long-term impact of disruption: a range of high-quality, well-evidenced interventions for our pupils. Yet, of course, more can be done. Today, I make the case to Members to prioritise additional investment in education. That will support our young people, not to catch up but to develop the knowledge and skills that will equip them for whatever the future holds. The pandemic has surely awakened and strengthened our commitment to education as a common good and a force for inclusion, equity, solidarity and individual and collective achievement. It is up to us to build, as a legacy of the pandemic, a modern, fit-for-purpose education system that truly meets the needs of our society in the 21st century. I lay down the challenge to those who tabled the motion and its supporters to commit, in the Assembly and the Executive, to prioritising educational recovery. The future of education in the months and years ahead is in all our hands.

Mr Principal Deputy Speaker: I call Mr Justin McNulty to make a winding-up speech.

Mr McNulty: Go raibh maith agat, a Phríomh-LeasCheann Comhairle. Go raibh maith agaibh to all teachers, principals, parents and pupils whose lives have been disrupted beyond belief since the arrival of the pandemic. They deserve major credit, and all Members have shared with me in giving them credit. What they have come through, and how they are prevailing, for the most part, has been extraordinary.

I want to identify that, every year, October is recognised worldwide as dyslexia awareness month. It is a time to come together to raise awareness of, share resources for and tell stories about dyslexia successes. One of those dyslexia successes is Dyslexia Awareness NI (DANI), an organisation that, through the Law Centre, will be presenting to the Education Committee tomorrow morning. We must recognise that one child in 10 is affected by dyslexia. What will the impact of the pandemic be on those children and on how they will navigate the education system? What will it be on the trauma experienced by children with dyslexia who have not had the appropriate resources allocated to them to allow them to shine and become the great students and leaders of the future that they can potentially become?

I am going to draw attention to some of the comments that were made during the debate. Daniel McCrossan said that education has been hit hard. He thanked our principals, teachers

and non-teaching staff for their efforts in overcoming the almost insurmountable challenges that they have faced, lockdown after lockdown. He said that sufficient resources must be provided to allow children to catch up. Crucially, he identified that some children have been more affected than others, especially those from disadvantaged backgrounds and those with special educational needs.

Mr McCrossan also highlighted a worrying disparity between the spend on catch-up per schoolchild here compared with that in other regions in these islands; it is 60% less here than it is in Scotland. We are not using the data to monitor the impact of COVID mitigations on the rate of infections or contact tracing.

On the issue of contact tracing, Suzanne Kenny, who is a teaching assistant in Newry, has started a petition to highlight the concerns of teachers, staff and parents on contact tracing. That petition has 35,000 signatures, and I will be tabling it with the Speaker in the coming weeks. Thirty-five thousand people have signed a petition, sharing their concerns about contact tracing and expressing their wish that it be reassessed.

Daniel McCrossan also talked about going back to the drawing board on some of the measures and allocations. More allocations to be provided, perhaps.

Pat Sheehan talked about education being dealt a critical blow and said that teachers and pupils have had to adapt to a new way of learning. Mr Sheehan identified the digital divide and how that has impacted on pupils and families. He talked about exams, transfers and the GTCNI fiasco — Minister, nobody can deny that it was a fiasco. He talked about the education of special needs children and how the emotional needs of children have been impacted on by the pandemic.

Pat recognised the crucial importance of early years education. I declare an interest as my son has just started early years provision with Sure Start in Newry, and what a provision it is: it is wonderful for the children and the parents. However, some parents do not have access to that provision, which is just not fair and is total inequality. Why should my child have access to that provision but the children of some other parents have not? It is just inequality, which is not acceptable.

Robin Newton recognised the efforts of teachers and school staff and called out the Finance Minister for his support. It is good to batter the Education Minister, but if she does

not have enough money to fulfil the tasks that she needs to fulfil, where do you come back to? You need financing to support all the things that you need to do. There has to be a cross-departmental approach to this: the Finance, Communities, Health and, of course, Education Departments all need to work together to help our kids be the best that they can be. Robin also talked about the great exam results that were achieved and how they were commendable. That has to be recognised: great exam results have been achieved, and, in the midst of a pandemic, that has to be commended.

Chris Lyttle said that the COVID-19 pandemic has exposed many of the inequalities in our education system and impacted greatly on teaching staff and children, particularly those with special needs, which is a huge concern for us all. Teachers and principals became risk assessors and contact tracers overnight. What a burden that was to have placed on their shoulders, on top of trying to keep up with their teaching responsibilities and duties. Teachers, school staff and principals did that under extraordinary pressure, which is a wonderful achievement.

Robbie Butler suggested that this generation may be referred to as "generation C". I do not think that they will thank you for that Robbie; I think that you were talking about generation COVID and shortened it. However, it is startling to think about the impact that the pandemic has had on young people more than any other generation.

Mr Lyttle: Will the Member give way?

Mr McNulty: Of course.

Mr Lyttle: We could change it to "generation courageous".

Mr McNulty: I second that — generation courageous — because courageous is certainly what they are. The impact on young people has been extraordinary. Place yourself in a young person's position: your social life, education and sport have been taken away for almost two years of your life. The impact of that on young people may be extraordinary, but I draw attention to the fact that young people are resilient, tough and able to pull through.

Pádraig Delargy pulled no punches whatsoever. He talked about a lack of leadership and communication and about the incompetence of the two most recent Education Ministers, Michelle McIlveen and Mr Weir. He talked about

how teachers became healthcare workers, IT consultants and contact tracers overnight.

6.30 pm

Diane Dodds noted the amnesia in the House about the roles played by certain parties, particularly when it comes to failures in education. Reading between the lines, I think Mrs Dodds was referring to the fact that Sinn Féin had the Education Ministry for 12 years. She wondered whether the references to incompetence and the failure of Ministers applied to its Ministers as well. I wonder about that. Importantly, Mrs Dodds identified the isolation and loneliness that was experienced as a consequence of the pandemic. She said that addressing that was crucially important. She also highlighted the importance of the Finance Minister providing support.

Nicola Brogan talked about the tsunami of mental health challenges coming down the tracks as a consequence of the pandemic, and she highlighted the importance of more being done to support children and young people's mental health. Ms Brogan drew attention to the abandonment in the first lockdown of children with special educational needs. We do not know what the impact of that has been, but it was a horrendous situation for those children and parents alike, who were in crisis stations every day because of the experience.

Harry Harvey highlighted the resilience and determination of young people. That is so important. We must not forget that our young people are resilient and determined. They can overcome the challenges that are placed before them. We must not talk them into a hole. Young people are resilient, strong and determined. They can pull through. Mr Harvey identified the unprecedented level of support that was given to schools in order to address the effects of the pandemic. It is true that there has been a huge level of support, but some people feel that not enough support has been given to certain areas. It is important to recognise that there have been unprecedented levels of support.

Colin McGrath spoke about the volunteering work in youth services and the extraordinarily important role they have played. My God, they have. It has been wonderful to observe. Only for them, where would children be? Only for youth services, where would the mental health of so many of our young people be? I thank our youth services, youth workers and volunteers. They have had an extraordinary impact throughout the pandemic. I also pay major tribute to sporting organisations, such as the

GAA. They have played an enormously important role.

Minister McIlveen talked about the pandemic and highlighted the many steps that the Department has done. She spoke about how well the Department has done. I have to challenge that, Minister, because the SDLP conducted an education survey that had over 700 respondents. It shows that 87% of parents feel their children have significantly missed out on learning, and 77% believe that has impacted their children's life chances. That is a really worrying statistic, Minister. The survey also shows that 86% of parents believe their children should be given the opportunity to catch up on missed learning. In addition, 72% of parents believe their children's mental health has deteriorated during the pandemic. That is another really worrying statistic. Furthermore, 95% of parents say the Department has handled the pandemic badly or could have handled it better. Those statistics are concerning, but I know that you, Minister, will do your best to address them and help every child to have the opportunity to grow.

The Minister said that children are strong and able to bounce back and that they have resilience. We must place our focus there. Children are strong and resilient. The Minister was the only Member to mention sport and physical activity. Nobody else mentioned it. What has been the impact of our children not having any access to organised sports and physical activity for over a year? It is not just a physical issue; it is an emotional and a mental well-being issue. Sport is a tool to help children to grow and shine. I am talking about children of all abilities. The effect on children of the withdrawal of that for so long has to be identified and addressed. Hopefully, more support will be provided to allow every child to grow and shine in a sporting sense, in an educational sense and in their lives.

Mr Principal Deputy Speaker: I am afraid —.

Mr McNulty: Thank you very much. I support the motion.

Mr Principal Deputy Speaker: Brilliant.

Question put and agreed to.

Resolved:

That this Assembly notes the severe impact of the COVID-19 pandemic on education, schools and youth services; recognises the immense challenges facing young people, parents and

school leaders as they seek to catch up on missed time and opportunities for learning, socialising and physical activity; further recognises the specific impact this has had on children with special educational needs (SEN); regrets the mishandling of exam grading and test and trace by successive Education Ministers, which has contributed to the stress on school communities; further notes analysis from the Education Policy Institute that suggests that Northern Ireland is spending less than other Administrations on education catch-up policies; and calls on the Minister of Education to bring forward a resourced catch-up plan to address the challenges facing young people, parents and school communities.

Adjourned at 6.34 pm.

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