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THE IMPACT OF CORONAVIRUS ON BLACK, ASIAN AND ETHNIC MINORITY COMMUNITIES

THE IMPACT of COVID-19 has been felt across the whole of the UK, however this burden has not been shared equally. From the outset of the pandemic, deeply entrenched social inequalities and longstanding structural racism created an environment where this deadly virus could thrive. Under these conditions, BAME communities across the country were put at immense risk and without support from Government.

Throughout this crisis, the Government has liked to describe the fight against coronavirus as a war. To use their analogy, our BAME communities would have been the cannon fodder – these people's lives are not, and should not, have been dispensable.

Going into any public health crisis, it's clear that the role of healthcare workers is absolutely crucial. We knew that our health and care workforce is significantly overrepresented by people from BAME backgrounds, yet the Government failed to roll-out risk assessments until it was too late and hundreds of BAME healthcare workers had already tragically died.

It was not just those on the frontlines of the NHS paying the price. So many BAME people are in insecure work and have to carry on with unsafe practices for fear of the repercussions, afraid to speak out. They could not afford not to go to work – they could not risk losing their jobs.

Perhaps just as worrying as the health inequity faced by BAME communities are the economic consequences of lockdown. BAME people are up to twice as likely than the national average to face economic hardship through loss of work



and lack of financial support. As we face the very imminent threat of a second wave, these factors create the perfect storm for further transmission and increased suffering in BAME communities.

This vital report highlights the disproportionate anguish BAME communities have faced, and will continue to face, in light of COVID-19. It showcases the anger BAME people feel towards the Government for the lack of support and, crucially, it rightly calls on the Government to step up and ensure that its future actions in response to the pandemic act to address social inequalities and systemic racism in society, not further entrench them.

DR ROSENA ALLIN-KHAN

Member of Parliament for Tooting, Shadow Minister for Mental Health and A&E Doctor



WITH THE THREAT OF A SECOND WAVE IMMINENT, THE GOVERNMENT MUST ACT NOW TO ENSURE PROTECTIONS ARE IN PLACE, AND TO ADDRESS STRUCTURAL RACIAL INEQUALITY.

The disproportionate impact of the coronavirus outbreak on people from Asian and Ethnic minority communities in Britain highlights the importance of looking at the wider implications of racial disparities in healthcare.

Our research on responses to the coronavirus outbreak among BAME¹ Britons should shock the Government into action to take action on longstanding racial inequalities, and to ensure that the needs of BAME communities are addressed in the event of a second or third wave of the virus.

We find widespread anger at how the government has handled the response to covid-19, and frustration about the disproportionate impact on people from BAME backgrounds. This has substantial implications for public health messaging regarding prevention, testing and contact tracing, as it suggests a furthering of mistrust among BAME groups; already more likely to be 'hard-to-reach' with public health messaging and more wary of engaging with authorities and statutory services. We also find that uneven impact of the coronavirus outbreak has not just been medical, but has affected BAME Britons at twice the rate of the national average through job losses, cuts to working hours and financial difficulties. Lockdown is the best way to stop the spread of the virus and we are not suggesting this should be rethought for a potential second wave. Nonetheless, BAME communities face a double bind of health inequality, and a disproportionate impact of lockdown and its associated economic impact. This ultimately leaves communities more vulnerable to transmission.

We urge the Government to rethink the plan for recovery to ensure financial support to those impacted by any potential local lockdowns, which are most likely to impact BAME communities.

We are also calling for the Government to make greater efforts to rebuild trust in public health and improve public health messaging, to ensure communication is embedded in communities.



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EXECUTIVE SUMMARY

1. The majority of people from BAME groups are concerned about how racial disparities have shaped the spread of Covid-19, and there is widespread anger that the Government's response to this has been inadequate

The vast majority of BAME Britons (72%) agreed that Ethnic minority communities have been most impacted by Covid-19; just 7% disagreed. Yet overall, more than half (57%) of respondents said that the government has not done enough to protect BME communities specifically from the threat of Covid-19. Only 15% disagreed with this.

2. This erosion of trust in the Government's handling of the crisis has serious implications for PHE to reach BAME communities with public health messaging regarding prevention, testing and contact tracing

A quarter (26%) of all respondents felt that Covid-19 is not as serious as the government and media makes it out to be, with younger BAME men most likely to reject the severity of the virus.

3. BAME communities face a double bind of health inequalities and a disproportionate impact of lockdown and its economic impact

BAME respondents were twice as likely (13%) to report having had their hours reduced as those in our nationally representative polling from May (7%) and more than our nationally representative sample from June (9%). They are also twice as likely to report having lost their job (7% compared to 4% nationally from May and 3% from June), to have struggled to pay rent (9% compared to 5% nationally from May and June) and to have gotten into debt (9% compared to 5% from May and 6% from June).

4. BAME Britons are nervous about a potential second wave of the virus. The Government must act now to ensure protections are in place, to rebuild trust, and to address broader structural racial inequality.

Just 37% of BAME Britons feel confident that the UK is fully prepared to deal with a second wave of Coronavirus. Given the devastating impact this first wave of coronavirus has had on BAME communities, the Government must do more than simply reflect on what went wrong. They must act to put protections in place that directly support those from Black, Asian and minority ethnic groups, and to put a greater emphasis on addressing structural racial disparities as part of an economic recovery plan.

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THE DISPROPORTIONATE IMPACT OF COVID-19 ON BAME COMMUNITIES

By now it has been well documented that Black, Asian and Ethnic minority (BAME) people have been disproportionately represented among serious illness and deaths related to the coronavirus. A study from the Intensive Care National Audit and Research Centre² in April found that despite BAME only representing 14% of the population of England and Wales, they represented 33% of intensive care cases. Office for National Statistics (ONS) data³ on coronavirus deaths has shown that Black people are 1.9 times more likely to die than white people while Bangladeshis and Pakistanis are 1.8 times more likely to die and Indians are around 1.5 times more likely. When accounting for age only, Black men and women were more than four times more likely to die from Covid-19 compared with white men and women.

Differences in cultural factors may play a role in disease risk, but research more strongly suggests that health determinants are structural⁴. BAME Britons tend to have poorer socioeconomic circumstances which lead to poorer health outcomes, with socioeconomic deprivation strongly associated with the prevalence of smoking, obesity, diabetes, hypertension and their cardio-metabolic complications, which all increase the risk of disease severity.

Moreover, BAME Britons are more likely than their white counterparts to face racism, stigma, fear and a lack of trust in statutory services, all of which result in a reluctance to engage with healthcare and authorities, or to take public health messaging seriously. Already older BAME Britons are considered 'hard-to-reach' by public health messaging, and communications are not always translated for those who cannot speak English⁵.

The localised outbreak in Leicester, a city with one of the largest South Asian populations in England, shed further light of the inequalities both highlighted and reinforced by the virus. The localised outbreak has been largely attributed to overcrowded housing, with multiple generations cohabiting, occupational risks associated with

"Our experiences on the ground have shown the extent of the difficulties in protecting vulnerable groups and communities with whom institutions haven't built strong historical links. HOPE not hate Charitable Trust's research shows how fundamental engagement and relationship building will be to safeguard ethnic minority communities who appear to be the hardest hit and most at risk in this pandemic. Whilst a national standardised approach will be fine for many people, the government must prioritise the development, planning and implementation of measures specifically aimed at ethnic minority communities who otherwise will slip through the gaps. For example, people in deprived areas are often worried about returning calls from contact tracers because they can't afford to self-isolate and don't want to miss work nor cause others to, or they are wary about calling back on an 0300 number, sometimes thinking it is a hoax.

In Calderdale we are adopting a personal, street level approach – sending messages from local numbers and following up by knocking on doors with a range of multilingual contact tracers who can speak the languages in our community such as Urdu, Punjabi, Czech and Slovak to reach the people the national system has been unable to, working as a local arm of the national programme. This research shows that BME people are more vulnerable to the economic effects of this pandemic as well as being more vulnerable to the disease itself – we need central government, local government and our health institutions across the country to take collective responsibility and tailor approaches to protect minority communities and protect them from a potential second wave."

BEN LEAMAN, Consultant in Public Health (FFPH), Calderdale Council

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certain jobs, highlighting illegal employment practices and modern slavery in Leicester's clothing factories.

A review from public Health England⁶ concluded that BAME groups were at greater risk of death or serious illness from coronavirus because of a complex crossover between "socio-economic disadvantages, high prevalence of chronic diseases and the impact of long-standing racial inequalities". The review came with not just short-term recommendations to ensure the protection of workers in frontline roles and improve track and trace measures, but also longterm recommendations to tackle health, housing and employment inequality.

Moreover, a study from the Runnymede trust has shown how BME groups are at greater risk from Covid-19: they are more likely to be working outside their home, more likely to be using public transport, more likely to be working in key worker roles, less likely to be protected with PPE and more likely to live in multigenerational, overcrowded housing, so much less able to selfisolate and shield⁷.

The Equality and Human Rights Commission (EHRC) has launched an inquiry into the "longstanding, structural race inequality" to build on PHE's report to better understand the how racial inequality has led to the disproportionately high number of black, Asian and minority ethnic (BAME) deaths during the pandemic.

These discussions are taking place in the shadow of global protests and rising momentum for the Black Lives Matter Movement, triggered by the murder of George Floyd in the U.S. The movement has had a significant impact in bringing long overdue conversations on race and racism to the forefront of public consciousness, shedding light on the pervasiveness of systemic racism and structural violence in Britain.

The protests in the UK are calling for justice for Belly Mujinga, who died in April. Mujinga was a railway worker who died after contracting coronavirus after she was assaulted and spat at by a man claiming to have the virus, while she worked without adequate Personal Protective Equipment.

From the outset of the coronavirus outbreak, it was clear that although the virus does not discriminate, the structural conditions lining the path of infection ensured that coronavirus was indeed, no great leveller and cannot be divorced from structural and institutional racism. But given the imminent threat of a second wave of the coronavirus, responding to the disproportionate impact coronavirus is having on BAME communities cannot wait.

This briefing will outline findings of a new poll of BAME Britons to better understand how they are impacted by, and responding to, the Coronavirus outbreak.

Between 3rd-10th July 2020, HOPE not hate commissioned a poll of 1,001 Britons from Black, Asian and minority ethnic groups, weighted by ethnic background and region to be nationally representative of the UK's BAME population.

We find widespread anger at how the government has handled the response to covid-19, and frustration about the disproportionate impact on people from BAME backgrounds. But we also find that the impact of lockdown, and the economic impact of the coronavirus outbreak serve to reinforce racial disparities.

For those mourning loved ones, it is no comfort to know that the struggles these people faced in their lives also put them most at risk of death. But it is even more frightening that the broader impacts of the crisis, lockdown and economic decline, are further feeding racial inequalities. This will ultimately put BAME communities at even greater risk if there is to be a second, third, or fourth wave.

In order to fully address the disproportionate impact coronavirus has had on BAME communities, this cannot be divorced from structural and institutional racism. And given the immediate threat of a second wave, addressing BAME Briton's concerns in the response cannot wait.

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HOW BAME BRITONS ARE RESPONDING TO THE CORONAVIRUS OUTBREAK

The majority of people from BAME groups 1. are concerned about how racial disparities have shaped the spread of Covid-19

The vast majority of BAME Britons (72%) agreed that Ethnic minority communities have been most impacted by Covid-19; just 7% disagreed. Black respondents were most likely to feel strongly that ethnic minority communities have been most impacted, overall 76% agreed, of which 52% strongly agreed.

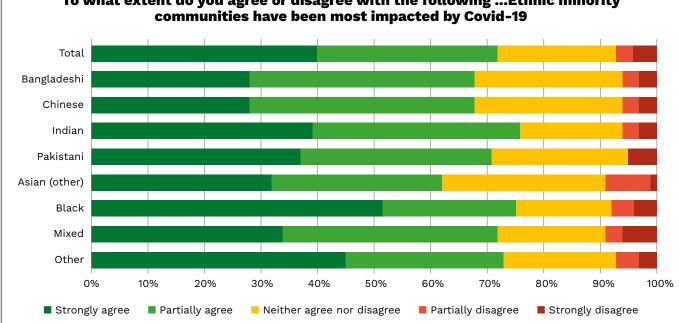
A majority (61%) agreed that Covid-19 is exposing great inequality in British society, while just 11% disagreed. Broken down by ethnic group, 71% of Black respondents and 62% of Bangladeshi respondents agreed, most likely to see the impact. This compares to 56% of HOPE not hate's nationally representative poll of 2,003 carried out by Focaldata in May 20208.

The strength of opinion about racial disparity among Black respondents reflects ONS data on coronavirus deaths that Black people are 1.9 times more likely to die than white people while Bangladeshis and Pakistanis are 1.8 times more likely to die.

There is widespread anger in the way that 2. the government has handled the response to covid-19, which has disproportionately impacted BAME people. This erosion of trust has serious implications for PHE to reach BAME communities with public health messaging regarding prevention, testing and contact tracing

Overall, people from BAME groups are more likely to voice discontent at the Government's handling of the crisis. 62% of our BAME poll say The Government has not dealt with the Covid-19 pandemic well while 38% say The Government has dealt with the Covid-19 pandemic well. This compares to 51% of people of all ethnicities who said they felt the Government has been too slow in dealing with the Coronavirus and 49% who said they felt that the Government was dealing with the Coronavirus as well as could be expected.

And while this could be considered more of a political position than frustration about the disproportionate impact coronavirus has had on BAME communities, with BAME voters less likely to vote Conservative than the white population, this trend holds true among Conservative voters, too. 38% of Conservative voters in our BAME



To what extent do you agree or disagree with the following ... Ethnic minority

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poll feel that the Government has not handled the crisis well, compared to 26% in our national representative poll who say the Government has been too slow in responding to the crisis.

Those born outside of the UK less likely (47%) to think that the government has not done enough to protect BME communities specifically from the threat of Covid-19 than those born in the UK (62%), as this group tend to be less critical of the Government overall. Nonetheless, immigration status has been a factor that has put those without British citizenship at greater risk, not just those with no recourse to public funds, but as the Public Health England review found, hostile environments against immigrants ensures adverse effect through heightened prejudice and social tension, and weakens trust in NHS services and treatment resulted in their reluctance to seek care on a timely basis.

Overall, more than half (57%) of respondents said that the government has not done enough to protect BME communities specifically from the threat of Covid-19. Only 15% disagreed with this.

This indicates a fractured relationship between BAME communities and the Government, with greater mistrust in the Government also likely to entail mistrust in public health.

While the majority of respondents accepted the severity of the coronavirus outbreak, some remain sceptical. Overall, a quarter (26%) felt that Covid-19 is not as serious as the

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government and media makes it out to be. 56% disagreed with this statement. Men (31%) and younger people (28% 16-24s, 31% of 25-34 and 32% of 35-44s) were all more likely to think that Covid-19 is not as serious as the government and media makes it out to be - just 9% of over 65s think the same.

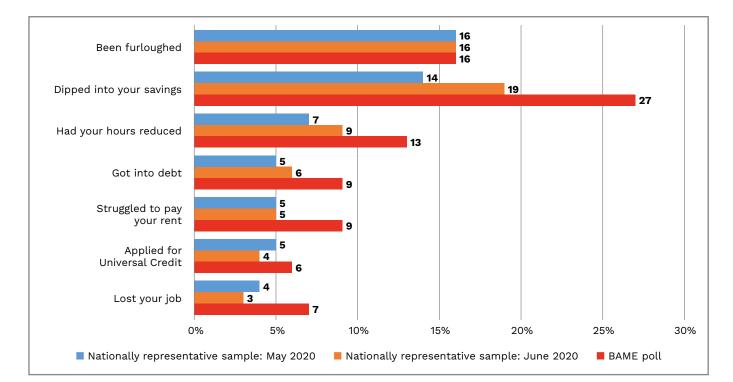
The Government has a task to not only ensure that public health messaging reaches BAME communities, but also to rebuild trust across BAME groups to ensure these messages are taken seriously and that guidance is followed.

3. BAME communities face a double bind of health inequalities and a disproportionate impact of lockdown and its economic impact

Our data shows how many BAME Britons have been struggling through the lockdown process, and have felt a greater impact in terms of job losses, cuts to working hours and to have faced financial difficulties. A majority are pessimistic about the long term impacts, and 61% say that Coronavirus will cause huge long-term disruption to the British economy.

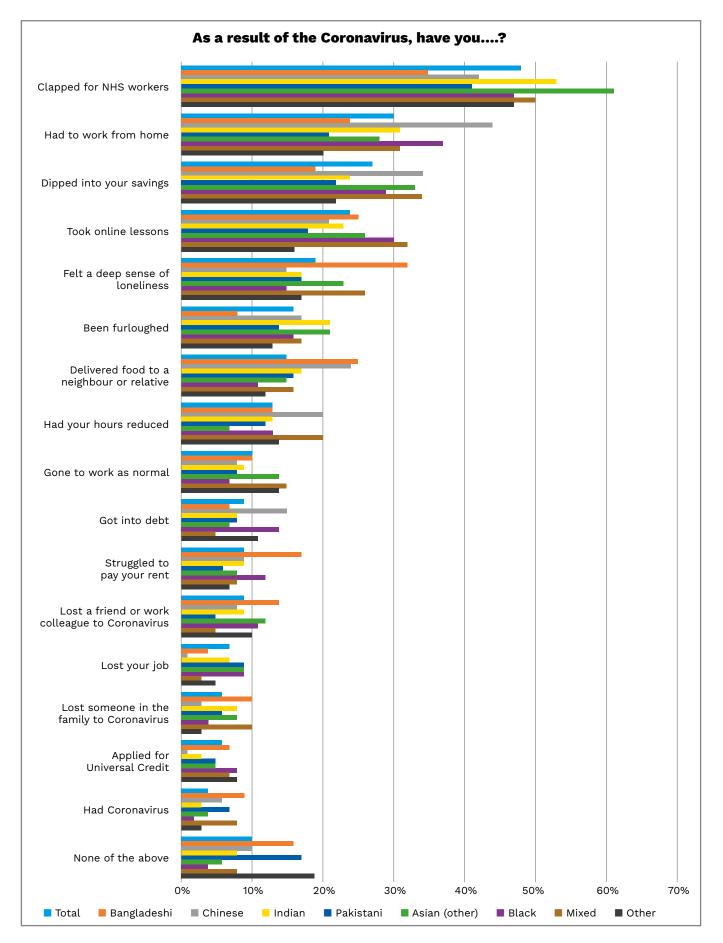
Many have been directly impacted by the virus. Just 2% of Black respondents report having had coronavirus but 11% say they have lost a friend or colleague and 4% have lost someone from their family as a result of the pandemic.

Moreover, those in our BAME poll are twice





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as likely (13%)to report having had their hours reduced as those in our nationally representative polling from May⁹ (7%) and more than our nationally representative sample from June¹⁰ (9%). They are also twice as likely to report having lost their job (7% compared to 4% nationally from May and 3% from June), to have struggled to pay rent (9% compared to 5% nationally from May and June) and to have gotten into debt (9% compared to 5% from May and 6% from June).

As the localised outbreak in Leicester showed, socioeconomic disparities put BAME communities at greater risk of transmission. Given that BAME Britons more likely to be impacted by the economic impacts of lockdown, it is essential that financial support from the Government, in regards to business support, the furlough scheme, mortgage holidays and rent relief among others, are extended in the event of localised lockdowns.

4 BAME Britons are nervous about a potential second wave of the virus

With the dust of the coronavirus outbreak still settling, many from BAME communities do not feel safe about the prospect of a second wave. Just 37% feel confident that the UK is fully prepared to deal with a second wave of Coronavirus. 40% say they are not. Women were more likely than men to feel fearful about the UK's ability to deal with a second wave; 31% of female respondents agreed that the UK was prepared, compared with 42% of male respondents.

Given the devastating impact this first wave of coronavirus has had on BAME communities, the Government must do more than simply reflect on what went wrong. They must act to put protections in place that directly support those from Black, Asian and minority ethnic groups, and to put a greater emphasis on addressing structural racial disparities as part of an economic recovery plan.

METHODOLOGY

Sample

1,001 BAME adults aged 18+ who were sampled from across Great Britain. Strict quotas were applied on ethnicity to ensure all nonwhite ethnicities were sampled.

Fieldwork dates

Fieldwork was carried out between 3rd-10th July.

Sampling methodology

This survey has been conducted using an online interview administered by Focaldata. Our platform collects data from our commercial suppliers, such as traditional online panels and numerous programmatic sampling platforms, which allow us to find respondents to a range of panels through software. We then use Machine Learning to filter out bad respondents and get as representative a sample as possible. Users fill out the surveys in real-time across mobile, desktop, and tablet devices on the focaldata platform.

The data was weighted to be representative of the GB population. Focaldata contacted members of the panel that match the demographic profiles of the country, in particular age, gender, region and ethnicity. It then weighted the raw data to match the known population of BAME adults in Great Britain.

About focaldata

Focaldata is an AI-driven polling company based in London. It has conducted market research for a range of both commercial organisations and campaigns including M&C Saatchi, O2, AbinBev, London Sport and Best for Britain. It was the MRP provider for the Conservative Party for the 2019 General Election.

Focaldata is a member of the British Polling Council (BPC) and abides by its rules. Focaldata is also a member of the MRS

Further enquires

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ENDNOTES

- 1 In this briefing we use the term Black, Asian and Ethnic minority (BAME) with an awareness of the contentions around it. We do not mean to 'lump' all groups together, but it is polling standard to do so, and is the only way that we are able to poll representative samples of ethnic minority people in Britain.
- 2 https://www.icnarc.org/
- 3 https://www.ons.gov.uk/peoplepopulationandcommunity/ birthsdeathsandmarriages/deaths/articles/coronavirusrela teddeathsbyethnicgroupenglandandwales/2march2020to1 0april2020
- 4 https://assets.publishing.service.gov.uk/government/ uploads/system/uploads/attachment_data/file/892376/ COVID_stakeholder_engagement_synthesis_beyond_the_ data.pdf
- 5 https://bmcpublichealth.biomedcentral.com/ articles/10.1186/s12889-019-6911-1
- 6 https://assets.publishing.service.gov.uk/government/ uploads/system/uploads/attachment_data/file/892376/ COVID_stakeholder_engagement_synthesis_beyond_the_ data.pdf
- 7 https://www.runnymedetrust.org/projects-andpublications/employment-3/overexposed-andunderprotected-covid-19s-impact-on-bme-communities. html
- 8 https://www.hopenothate.org.uk/wp-content/ uploads/2020/07/HnH_Covid-19-first-threemonths_2020-05.pdf
- 9 Polling of 2,003 adults aged 18+, weighted to be nationally representative. Carried out by Focaldata between 1st-4th May 2020
- 10 Polling carried out of 2,104 adults aged 18+, weighted to be nationally representative, carried out by Focaldata for HOPE not hate. ONLINE Fieldwork : 17th to 18th June 2020