

Global pandemics require a community response

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People in minoritized ethnic groups were hit much harder by the coronavirus pandemic than others, with higher numbers of infections and deaths from the virus and also more exposure to the negative economic consequences of the pandemic and the associated lockdown. This research shows that knowledge of these higher rates of infection and death added to people's stress, even in the absence of infection itself. Moreover, certain employers were felt to have put people at greater risk, in ways which could be considered racially motivated. People suffered from policy-makers' poor recognition of the particular needs of some minoritised communities during this time. With statutory services closed, over-stretched or unable to support the needs of diverse communities, local charities and voluntary organisations often stepped in. More generally, Government messaging was considered confusing and unhelpful, in ways which people felt were purposefully divisive and directly contributed to a rise in racist violence.

We must centre the perspectives and needs of minoritized ethnic groups to ensure crisis responses are inclusive and effective. We must also recognise that the roots of these pandemic problems lie in the persistent marginalisation of those in minoritised ethnic groups in British society.

About the research

This report documents the experiences of 107 people from different minoritised ethnic groups during the first lockdown in South West England in 2020. The survey was conducted in partnership with Black South West Network (BSWN), through our joint Research Action Coalition for Race Equality, with respondents recruited through BSWN's mailing list and those of other organisations in the region. The sample was ethnically diverse. Over a third (38%) of people described their ethnicity as 'Black Caribbean' or 'mixed - Black Caribbean and white'. 16% describing themselves as 'Black African' or 'mixed Black African and white', and 4% specifically describing themselves as 'Somali'. A further 16% described themselves as 'Indian'. Other people described themselves as Bangladeshi, Chinese, Pakistani, or as having other ethnicities. Responses were concentrated among people living in Bristol. As well as completing the survey, many of respondents also provided written comments, which are the focus of this report.

Our recommendations are developed in collaboration with representatives from several Black, Asian and minority-led community organisations who provided critical support during the pandemic. We ran workshops with representatives from Bristol Somali Resource Centre, Bristol & Avon Chinese Women's Group, Nilaari, and Bristol Somali Youth Voice. We then received comments on the emerging recommendations from the Bristol Commission on Race Equality and the Bristol Race Equality Covid-19 Steering Group, who between them include over one hundred stakeholders from organisations across the city. Further details on these organisations are below.



Research findings

The pandemic produced a sense of isolation and fear among many people. This was made worse by knowledge of ethnic inequalities in infections and deaths, particularly when people were unable to work from home, as well as not being able to visit family living abroad.

"It has been hard being isolated and not able to visit family who live in a different county. It has been a constant worry with my husband and eldest son going to work. It has been a huge worry knowing that BAME people are at a higher risk. It has just been a huge worry overall and it has battered my mental health." (Female, 36, Mixed – Black Caribbean and white).

"since the news of BAME people being much more likely to be impacted I have been very worried - I rarely leave the house and it has caused me anxiety for the first time in my life" (Male, 37, Mixed – Black African and white).

A lack of support or clear guidance from Government

These fears were made worse by an incoherent Government response. People described inconsistent and conflicting guidance which caused confusion and added to people's sense of vulnerability.

People also felt that statutory services had not recognised the ways in which particular cultural traditions could place a toll on people in certain communities.

"Cultural expectations of many South Asian communities require different types of support during illnesses & deaths. E.g Bangladeshi families don't cook for 3 days post any death in the family. Family & friends are expected to deliver food to the mourning family during this time. Lockdown during this pandemic has increased the burden of community care on many of us. Without any state support & the disproportionate death rates in our community puts us under unprecedented anxiety & stress." (Female, 36, Bangladeshi)

People felt that this reaction had shown "the Government's lack of priority [to protect people in ethnic minority groups] even though we appear to be the worst affected." A sense of a lack of protection was also clear in people's descriptions of experiences of racist treatment from the police. People feared that they would not receive appropriate care, e.g. from health services, if they did become ill, adding to this sense of vulnerability.

Lack of protection for workers

People also felt that they had been poorly treated by their employers. Some employers appear to have failed to comply with even basic expectations regarding staff protection.

Some employers were described as having acted in ways which had directly increased people's risk and contradicted Government advice, in order to protect white workers.

"I was given more responsibility to lighten the load [on] other senior members of staff [...] I was offered no flexibility [...] WFH [working from home] was only for the senior staff, whom are white." (Female, 43, Indian)

[Despite being vulnerable and having caring responsibilities] "Our management is trying to get us back into the office when the Council is giving out the message that we should still be working from home." (Male, 59, Indian)

There was also a sense of insecurity about the future. While 68% (73/107) of respondents said that their role would be the same after the lockdown, 12% didn't know if this would be the case and 4% said they would receive less pay or fewer hours. 12% said they wouldn't be able to return to the same role they had had prior to lockdown.

Divisive coverage encouraged racial tensions

People felt that the Government and media's responses to the pandemic had directly contributed to social disharmony. People felt they had ignored the actual causes of these ethnic inequalities – related to the concentration of people in minoritized ethnic groups in poverty and frontline occupations – to focus on issues which blamed the victims, in coverage described as "disgustingly divisive". The Government's continued use of the term 'BAME' had also encouraged a sense that people in minoritized ethnic group were all the same. This had directly led to an increase in "race-related attacks" and left people feeling "on edge [about the risk of...] racial tensions."

"The [Government] narrative shifted from 'white people pulling together and fighting this through', to members of the BAME community [being] targeted as the 'major carriers' and 'causing harm and being reckless'." (Male, 50, Black Caribbean)

"I don't like being classed as BAME, as I am a Black Woman... and since COVID it has been [used to] underline the racism where people are distancing themselves even more so and making it known that we are carriers. BAME I see as classed as 'others'." (Female, 56, Black Caribbean)

Rather than helping the victims, participants felt that the Government had "turn[ed the pandemic] into a race war". As a consequence, the Government's response would have implications which stretched far beyond the pandemic itself and undermine race relations in the country for a long time to come.

Recommendations

This research and the experiences of frontline BME-led community organisations who provided critical support to local people during the pandemic offer clear recommendations regarding how to respond to future crises.

1. Crisis responses must be inclusive and effectively planned

- National and local policymakers must engage community representatives in the design of crisis responses from the outset. This will better enable national and local policy to respond to the public's diverse needs. It will ensure the provision of culturally appropriate services and reduce risk of marginalisation. It will also ensure the support provided by grassroots organisations is effective.
- To enable this, national and local policymakers must establish effective mechanisms for collaborative working between themselves, community representatives and others prior to the onset of any crisis. Opportunities for learning and improved crisis preparation must be identified in collaboration and embedded into resilience strategy plans in advance.
- National and local policymakers must protect marginalised groups from further exploitation during times of crisis, and ensure that any guidance, e.g. for employers, is complied with.
- National and local policymakers must ensure that any additional support for the public - such as grants - is provided in ways which are not discriminatory, e.g. due to the use of criteria which make them inaccessible to certain groups. They must also provide practical support to enable people to access these opportunities.

2. Information must be accessible to all

- National Government and the media must work together with researchers and others to provide an empirically-grounded, clear and comprehensive account of crises to the public.
- National and local policymakers must provide comprehensive public briefings regarding their responses to these crises and the evidence on which their responses are based, including their perceived benefits to society.
- Local and national policymakers and service providers must provide all communications in languages other than English as a matter of course.
- Local and national policymakers must ensure that information on any additional support being provided (by themselves or others) is distributed widely and in ways which are accessible to those without English-language skills, computer literacy or digital access.

3. National Government must provide practical support and statutory funding for frontline support organisations, particularly during crises

- As often the only source of support following the closure of other services, grassroots organisations offer an important conduit between policymakers, service providers and the public. This provision must not be risked by insecure funding.
- Such organisations can quickly become overwhelmed. The onus is on national and local government to monitor these activities and provide practical support to ensure they continue.

4. As a society, we must acknowledge the ways such crises perpetuate and are perpetuated by pre-existing social inequalities

- The Covid-19 pandemic increased exposure to racist violence and exacerbated inequalities in health, education, and employment. Improved dialogue between policymakers, practitioners, marginalised groups, and the media would have identified these issues earlier and enabled a range of context-specific, effective responses to mitigate their impacts.
- The Government and media must commit to presenting this evidence accurately, given that this has been argued to have directly contributed to a rise in racial tensions.
- The impact of future crises will be significantly ameliorated by more concerted efforts to end ethnic and other inequalities in British society, by all its members.





Further information

This work was supported by the Elizabeth Blackwell Institute, University of Bristol, with funding from the University's alumni and friends, and the Faculty of Social Sciences and Law, University of Bristol.

[The Research Action Coalition for Race Equality \(RACE\)](#) is co-led by Black South West Network (BSWN) and University of Bristol. It aims to identify and address gaps in the evidence regarding the drivers of race disparities in the South West, while enabling the development of effective responses to them.

[BSWN](#)'s over-arching strategic intent is to build dynamic, independent and strong Black communities, businesses and organisations that are empowered to flourish while challenging systemic barriers and forging a true path for themselves.

[Bristol Somali Resource Centre](#) works to empower and improve the lives of some of the most vulnerable people in Bristol, by resolving the problems and challenges they face.

[Bristol & Avon Chinese Women's Group](#) exists to support the health and social care needs of Chinese women and their families in Bristol and the surrounding area.

[Nilaari](#) are a Black, Asian and Minority Ethnic led registered charity delivering social care support, talking therapies and training to adults and young people across Bristol.

[Bristol Somali Youth Voice](#) advocates for and empowers disadvantaged young people from deprived areas of Bristol.

[Bristol Mayoral Commission on Race Equality](#) was set up in January 2018 to help address the systemic discrimination and disadvantages experienced by members of its community because of their race or ethnicity and is made up of commissioners working with organisations across the city.

[Bristol Race Equality Covid-19 Steering Group](#) was established to respond to policy recommendation to address ethnic inequalities in Covid-19. It includes over ninety representatives from organisations working across the city.

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