STATEMENT ON THE IMPACT OF COVID-19 ON BAME AND MIGRANT COMMUNITY

May 2020

It is clear that COVID-19 is having a significant impact on the BAME (Black, Asian and minority ethnic) community. Thus, as leaders in the Diaspora community we are feeling the impact from both a professional and personal perspectives.

There are a number of key themes emerging that will require immediate, medium and longer term actions are highlighted below.

KEY THEMES

• High COVID-19 Risks of exposure to BAME Population:

The BAME community are actively engaged in front line work supporting the nation's direct and indirect response to COVID-19 e.g. health and care workers, transport drivers, cleaners, benefit workers etc. With BAME more likely to be employed in less senior and lower paid roles as well as less likely to be listened to when they raise concerns, they are at a greater risk of exposure to COVID-19.

• High COVID-19 Risks and economic impact on BAME:

The BAME population forms a significant part of the workforce of the social care sector, a sector that is well known to have zero based contracts and with less than adequate protection for pay and workers' rights. With many of the BAME workers focus on doing their jobs and getting paid to help and support their families back home (via remittances), the higher risks of COVID-19 means that these remittances are now an even more critical lifeline to families in their countries of origin. In addition, the limited financial guarantees coupled with the costs of living in the UK impacts adversely on many of the BAME workers as they are more likely to live in overcrowded accommodations thereby making self-isolation of those of them at risk extremely difficult and almost impossible.

• Risk to Sociocultural and Religious Wellbeing:

Sociocultural and religious factors are critical factors in maintaining health and well-being in the BAME community and these issues have been severely impacted by the lockdown.

• Risk to Underlying health factors and Health Inequalities:

The high prevalence of conditions such as diabetes and high blood pressure disease in the BAME community and the emergence of COVID-19 has significantly increased their risk to complicated health issues.

Legacy:

The history of institutional racism has resulted in many in the BAME community not engaging with wider UK mainstream communication channels being used for COVID-19 messaging. Many BAME prefer to engage with BAME/Diaspora media channels to satisfy their cultural and communication needs.

IMMEDIATE ACTIONS

• Engagement with National Inquiry and relevant Committees:

While we welcome the government inquiry into the disproportionate impact of COVID-19 on the BAME community, there is however, the need to improve engagement with BAME workers, particularly those in frontline roles and experiences in the Inquiry and any national committees set up to respond to the COVID-19 issue. This will ensure that the right insights and voices are utilised to inform and shape the development of relevant and practical actions to minimise the risks to the BAME communities.

• Engagement with Charites and Funding Organisations:

There is need to improve on the engagement of BAME with Charities and relevant funding organisations seeking to address the impact of COVID-19 on health and care staff and the wider population.

• Visibility of Actions:

There is need to provide more visibility on actions aimed at providing assurance to BAME population that their concerns are being heard and are continuously being addressed (i.e. visibility of actions by someone who looks like and speaks like me. Giving a voice to the voiceless).

Endorsed by:

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