

8th June 2020

Coronavirus (Covid-19) and the impact on people with protective characteristics

Introduction

Coronavirus (COVID-19) does not discriminate, but it does impact people differently. Over the last few months research has been advancing on the impacts of coronavirus for people with protective characteristics. There is now growing recognition that Covid-19, rather than being a great leveller, may actually be exacerbating existing inequalities.

This report sets out some of the key points emerging from recent research on COVID-19. It reviews the evidence that black and minority ethnic communities are at greater risk of catching and dying from the virus than their white counterparts. It also considers the impact coronavirus is having on other minorities such as women, people with disabilities and LGBT+ groups. Exploring the government's reactions, the report also highlights what the trade union movement have been calling for in response.

Black and Minority Ethnic (BAME)

The Intensive Care National Audit and Research Centre (ICNARC) were one of the first organisations to identify the disparities between race and contracting the virus. Compiling regular reports relating to the disproportionate impact on BAME Communities, recent data analysis up until the 21st May 2020 illustrates:

- Out of 9,026 confirmed cases of Coronavirus in the UK, more than 30% were BAME, compared with 66.8% White.
- A total of 15.2% were from Asian backgrounds, 9.7% were recorded as Black and 6.6% described themselves as other.
- Similar outcomes were found for patients receiving advanced respiratory support with 34.8% coming from BAME Communities, compared with 65.2% White.¹

In addition, research conducted on the 7th May by the Office of National Statistics (ONS) has found **black men and women are four times more likely to die from Coronavirus than white people.**

Bangladeshi/Pakistani ethnicity were ranked 3.6 times more likely to die with the virus than white men, with the comparable figure for Bangladeshi/Pakistani females set at 3.4.

Men of Indian ethnicity were found to be 2.4 times more likely to die from Covid-19 than white men, while the figure for women of Indian ethnicity is marginally higher, at 2.7.

For people of Chinese ethnicity, the ONS found an increased risk among men but not women: men were 1.9 times more likely to die from Covid-19, while the figure for women was 1.2.

¹ ICNARC, ICNARC Covid-19 report, 22nd May 2020, accessed at: <https://www.icnarc.org/Our-Audit/Audits/Cmp/Reports>

The emerging ONS research has also found that BAME groups are more vulnerable, especially **when you take into account their socio-demographics, age and health factors. The risk of a Covid-19-related death for black men and women was then 1.9 times more likely than the white population.**

Males in the Bangladeshi and Pakistani ethnic group were found to be 1.8 times more likely to have a COVID-19-related death than white males, when age and other socio-demographic characteristics and measures of self-reported health and disability were taken into account; for females, the figure was 1.6 times more likely.

These results show that the difference between ethnic groups in COVID-19 mortality is partly a result of socio-economic disadvantage and other circumstances but a remaining part of the difference has not yet been explained.²

Supporting evidence from the 2011 Census illustrates BAME people are more likely to live in densely populated areas such as London and West Midlands³ and are more likely to live in overcrowded housing, creating difficulties to shield from the virus. According to the 2011 Census, while only 2% of White British households experienced overcrowding, it was 30% of Bangladeshi households (the highest percentage), 16% of Pakistani households and 12% of Black households who lived in the most overcrowded household conditions⁴

The socio-economic disadvantages for ethnic groups may also be a driving factor. The TUC reported, prior to the pandemic outbreak that BAME workers were more likely to be in lower paid, temporary and insecure work than their white counterparts. Data from the TUC's most recent analysis states out of 3.9 million BAME working people, BAME people are:

- More than twice as likely to be stuck on agency contracts than white workers
- Much more likely to be on zero-hours contracts – 1 in 24 BAME workers are on zero-hours contracts, compared to 1 in 42 white workers
- 1 in 13 BAME workers (264,000) were in temporary work, compared to 1 in 19 white workers
- BAME working people are twice as likely to report not having enough hours to make ends meet.
- And many are working in temporary and zero-hours jobs where pay is typically a third less an hour than for those on permanent contracts.⁵

² ONS, Coronavirus (COVID-19) related deaths by ethnic group, England and Wales: 2 March 2020 to 10 April 2020, 7th May 2020, accessed at:

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/coronavirusrelateddeathsbyethnicgroupenglandandwales/2march2020to10april2020>

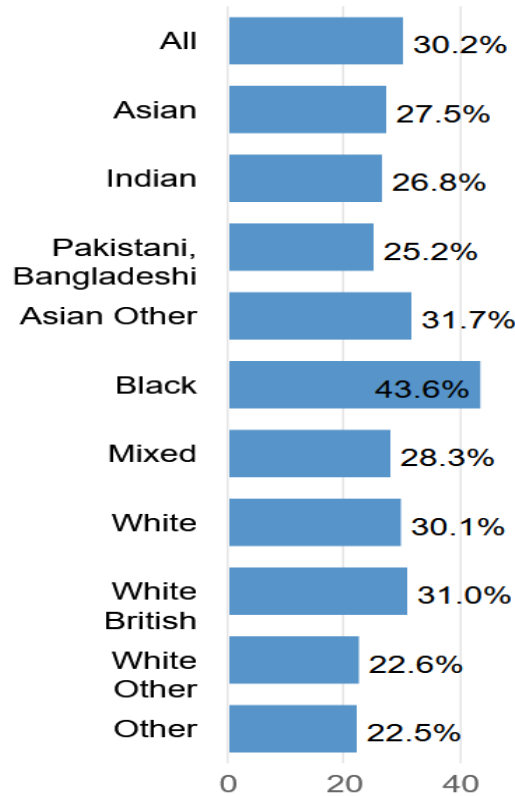
³ Gov.co.uk, Regional ethnic diversity, 11th July 2019, accessed at: <https://www.ethnicity-facts-figures.service.gov.uk/uk-population-by-ethnicity/national-and-regional-populations/regional-ethnic-diversity/latest>

⁴ Gov.co.uk, Overcrowded Households, 27th April 2020, accessed at: <https://www.ethnicity-facts-figures.service.gov.uk/housing/housing-conditions/overcrowded-households/latest#by-ethnicity-and-socio-economic-group>

⁵ TUC, BME workers far more likely to be trapped in insecure work, TUC analysis reveals, 12th April 2019, accessed at: <https://www.tuc.org.uk/news/bme-workers-far-more-likely-be-trapped-insecure-work-tuc-analysis-reveals>

BAME people are also more likely to work in front line services, increasing exposure to the virus. According to the ONS Annual Population Survey, 30% of workers in the UK work in public administration, education and the health sectors, whom employ the highest percentage of workers in almost every ethnic group – Please see figure 1.

Figure 1: Percentage of workers in each ethnic group employed by public administration, education and health.



ONS, 15th May 2020

The second highest sector was the distribution, hotels and restaurants sector with a highest combined ethnic group of Pakistani and Bangladeshi at 30.7%.⁶ The Runnymede race equality charity has also found BAME workers are more likely to participate in the ‘gig’ economy – up to 25% compared to 14% of the general population.⁷

The economic positioning of BAME people in the labour market during the pandemic has not only placed them at greater risk of contracting the virus but it has also amplified existing inequalities in working conditions. In a recent BMG poll conducted by the Independent Newspaper BAME people were reported to have had their incomes reduced by 46% as a result of coronavirus, compared with

⁶ GOV.co.uk, Employment by sector, 15th May 2020, accessed at: <https://www.ethnicity-facts-figures.service.gov.uk/work-pay-and-benefits/employment/employment-by-sector/latest>

⁷ Runnymede, The Colour of Money How racial inequalities obstruct a fair and resilient economy, April 2020, accessed at: <https://www.runnymedetrust.org/uploads/publications/pdfs/2020%20reports/The%20Colour%20of%20Money%20Report.pdf>

28% of White British households. They also found that 15% of BAME people have lost their job, compared to 8% who identify as White.⁸

In a survey conducted by the Royal College of Physicians findings revealed:

- More than three-quarters of BAME doctors are going to work fearing their lives.
- A third of doctors have been off work with illness during the epidemic, most with confirmed cases of Covid-19.
- Out of 1,500 doctors who participated in the survey, a fifth have tested positive for the virus and just under 40% said they had reported suspected infections.⁹

Whilst the BMA have found:

- 46% of doctors have felt pressured to work in settings with inadequate PPE. This compares with 33% of doctors who identify as white.
- 4 out of 10 BAME doctors in GP settings said they had insufficient PPE compared to 7 out of 10 doctors who identify as white.¹⁰

As evidence grows the government has been under increasing pressure to launch an independent public inquiry on the issue. On the 10th May more than 70 public figures wrote to the Prime Minister calling for a full independent public inquiry into deaths from Covid-19 among people from ethnic minority backgrounds. Signatories include author Malorie Blackman, playwright, Kwame Kwei-Armah, and Baroness Doreen Lawrence. In response the government have announced that they have commissioned Public Health England to better understand the different factors, such as ethnicity, that may influence the effects of the virus.¹¹

Public Health England (PHE) claimed their analysis would examine thousands of existing health records of patients who have had coronavirus as well as data on health outcomes for NHS staff. The study also claimed to establish more robust data on the factors impacting the number of Covid-19 cases and severity of the outcomes for different groups within the population, including vulnerable groups and people experiencing homelessness.¹²

The PHE's report was published on the 2nd June 2020, findings confirmed that BAME groups were most likely to be diagnosed with coronavirus and that death rates from the virus were highest among people of Black and Asian ethnic groups. In particular Bangladeshi ethnicity were found to have around twice the risk of death than people of White British ethnicity. People of Chinese, Indian,

⁸ The independent, Coronavirus economic effects hitting ethnic minorities and young people hardest, 13th April 2020, accessed at: <https://www.independent.co.uk/news/uk/politics/coronavirus-economic-effect-uk-ethnic-minorities-young-people-a9460511.html>

⁹ The guardian, Over three-quarters of BAME doctors fear they will contract Covid-19, 18th May 2020, accessed at: <https://www.theguardian.com/society/2020/may/18/over-three-quarters-of-bame-doctors-fear-they-will-contract-covid-19>

¹⁰ BMA, BAME doctors hit worse by lack of PPE, 24th April 2020, accessed at: <https://www.bma.org.uk/news-and-opinion/bame-doctors-hit-worse-by-lack-of-ppe>

¹¹ The Independent, Boris Johnson urged to launch independent public inquiry into disproportionate impact of coronavirus on ethnic minorities, 10th May 2020, accessed at: <https://www.independent.co.uk/news/uk/politics/coronavirus-boris-johnson-public-inquiry-ethnic-minorities-bame-a9506596.html>

¹² Digital Health, Public Health England to review impact of ethnicity on Covid-19 outcomes, 11th May 2020, accessed at: <https://www.digitalhealth.net/2020/05/public-health-england-to-review-impact-of-ethnicity-on-covid-19-outcomes/>

Pakistani, Other Asian, Caribbean and Other Black ethnicity had between 10 and 50% higher risk of death when compared to White British. Disappointingly the PHE's review did not include the effects of BAME occupation nor has it considered comorbidities - secondary health conditions – or obesity into its analysis¹³.

Prior to the release of the inquiry, controversy aroused from BAME campaigners following suggestions that Trevor Phillips would have a significant part in the review. Operation Black Vote claimed that Phillip's involvement would undermine the review and a signed open letter to PHE from 100 black women claimed that Phillip is renowned for discarding the very real issues and consequences of structural racism. In March, Phillips, an anti-racism campaigner who previously chaired the Equality and Human Rights Commission, was suspended by the Labour party for alleged Islamophobia. Phillips condemned the decision, as did some Labour MPs.

The Guardian reported on the 29th May 2020 that Mr Phillip's has played no role in the review, however PHE have stated that Phillip's involvement may be considered in future after the review's publication.¹⁴

The Trade union movement via the TUC have responded to the announced PHE review by calling for:

- The EHRC to conduct an urgent evidence gathering exercise to inform which of their powers might be most appropriate to use to address discriminatory behaviour which may be exposing BAME workers to higher levels of risk.
- Public Health England to invite the EHRC and relevant organisations with specific expertise such as the Runnymede Trust to review the terms of reference the review is conducting into the impact of COVID-19 on BAME people to ensure that it considers the root causes rather than the outcomes of poverty and decades of systemic discrimination.
- Parliament to publish a cross departmental action plan, with clear targets and a timetable for delivery, setting out the steps that they will take to tackle the entrenched disadvantage and discrimination faced by BAME people. In order to ensure appropriate transparency and scrutiny of delivery against these targets we recommend that regular updates are published and reported to Parliament.
- Government to strengthen the role of the Race Disparity Unit to properly equip it to support delivery of the action plan.¹⁵

¹³ Public Health England, Disparities in the risk and outcomes of COVID-19, 2nd June 2020, accessed at: https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/889195/disparities_review.pdf

¹⁴ The Guardian, Trevor Phillips has played no role in BAME Covid-19 deaths review, 29th May 2020, accessed at: <https://www.theguardian.com/uk-news/2020/may/29/trevor-phillips-has-played-no-role-in-bame-covid-19-deaths-review>,

¹⁵ TUC, TUC response to inquiry on Coronavirus (Covid-19) and the impact on people with protected characteristics, May 2020, accessed at: https://www.tuc.org.uk/sites/default/files/2020-05/WESC%20COVID_final%20%28002%29%20%281%29.pdf

Women

Although the ONS has found that men are more likely to die from coronavirus than women, with a 41.6% mortality rate for men compared with 32.4% for women¹⁶, the impacts of the virus are having devastating effects on women's rights, women's health and women's economic status.

Following the Government's lockdown measures on the 23rd March 2020, many women living with abusive partners have been confined to their homes placing them in more vulnerable conditions. The UK's largest domestic abuse charity, Refuge, have reported that during the initial stages of the Covid-19 crisis they experienced around a 50% increase in demand to its Helpline and a 300%+ increase in visits to its National Domestic Abuse Helpline website. More recently reports claim that the demand has spiked again significantly – calls and contacts to the Helpline have risen to a weekly average increase of 66% and visits to Refuge's websites (where women can request a safe time to be contacted) have seen a phenomenal 950% rise compared to pre Covid-19.¹⁷

On April 14th, the Victims' Commissioner for England and Wales told MPs that the number of women killed by men was the highest it's been for at least 11 years with 16 domestic killings during the first three weeks of lockdown, including those of children.¹⁸

In response, the government have announced £67m to support vulnerable people, including £27m in emergency funding for domestic abuse service, however this figure is just a drop in the ocean when considering Women's Aid charity estimates, which claim that the sector requires £393m a year in England alone.¹⁹

Women are also bearing the brunt of caring responsibilities. As schools and childcare facilities close and health systems are overloaded, care for children and sick relatives largely falls to women. According to the ONS, men are doing more than an hour less unpaid labour than women each day²⁰. Equally, data gathered from 9th-14th April by the University of Cambridge illustrates that on average men in the UK spend under 2.5 hours on childcare and do under two hours of home schooling,

¹⁶ ONS, Deaths involving COVID-19, England and Wales: deaths occurring in April 2020, 15th May 2020, accessed at:

<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deaths-involvingcovid19englandandwales/deathsoccurringinapril2020#how-many-people-have-died-from-covid-19>

¹⁷ Refuge, Refuge reports further increase in demand for its National Domestic Abuse Helpline services during lockdown., 27th May 2020, accessed at: <https://www.refuge.org.uk/refuge-reports-further-increase-in-demand-for-its-national-domestic-abuse-helpline-services-during-lockdown/>

¹⁸ The Guardian, Domestic abuse killings 'more than double' amid Covid-19 lockdown, 15th April 2020, accessed at: <https://www.theguardian.com/society/2020/apr/15/domestic-abuse-killings-more-than-double-amid-covid-19-lockdown>

¹⁹ Women's Aid, Women's Aid report says £393 million a year is needed to fund domestic abuse services in England, 2nd December 2019, accessed at: <https://www.womensaid.org.uk/womens-aid-report-says-393-million-a-year-is-needed-to-fund-domestic-abuse-services-in-england/>

²⁰ ONS, Coronavirus and how people spent their time under lockdown: 28 March to 26 April 2020, 27th May 2020, accessed at:

<https://www.ons.gov.uk/economy/nationalaccounts/satelliteaccounts/bulletins/coronavirusandhowpeoplespenttheirtimeunderrestrictions/28marchto26april2020>

compared with women who spend over 3.5 hours on childcare and do over 2 hours of home schooling.²¹

A lack of childcare provision vastly impacts women's ability to engage in paid work and in times like these, women are often faced with unfair and sometimes impossible choices of giving up paid work to care for children, older people, the sick or people with disabilities. According to the Institute for Fiscal Studies (IFS) 16% of mothers who were working in February 2020 are no longer doing paid work due to having lost their work permanently (whether they were laid off, were fired or quit), compared with 11% of fathers. Mothers were also somewhat more likely to not be doing paid work due to having been furloughed through the Coronavirus Job Retention Scheme (34%, compared with 30% of fathers).²²

According to research conducted by the University of Cambridge a total of 15% of the UK population have lost their jobs due to the economic impact of coronavirus. Women overall are 4% more likely to have lost their job than men, with 17% of women newly unemployed compared to 13% of men.²³

Women are also more likely to be employed in precarious and low paid work or in jobs that provide critical front line services. According to the Women's Budget group, women are the majority of workers with highest exposure to Covid-19. Of the 3,200,000 workers in 'high risk' roles, 77% are women. Women also make up 69% of low earners, 54% of temporary employees, 54% of workers on zero-hours contracts and 59% of part-time self-employment.²⁴

Despite legal requirements for companies to annually publish their gender pay gaps, the coronavirus crisis has led the government to exempt companies from having to file gender pay gap data this year and as a result only half did.²⁵ Before coronavirus the Fawcett Society calculated that it would take 60 years to close Britain's gender pay gap, however, they have since reported that the crisis and subsequent economic fallout could delay this by three decades, meaning women might not close the gap until the year 2110.²⁶

Pregnant and new mothers are also experiencing pressures of the coronavirus crisis, increasing the risks of pregnancy and maternity discrimination. "Pregnant not Screwed" campaign group have recently reported that during the month of April they received five times as many calls to their helpline than they would normally experience. As a consequence they have had to open more

²¹ University of Cambridge, Women bear brunt of coronavirus economic shutdown in UK and US, 21st April 2020, accessed at: <https://www.cam.ac.uk/research/news/women-bear-brunt-of-coronavirus-economic-shutdown-in-uk-and-us>

²² IFS, How are mothers and fathers balancing work and family under lockdown?, May 2020, accessed at: <https://www.ifs.org.uk/uploads/BN290-Mothers-and-fathers-balancing-work-and-life-under-lockdown.pdf>

²³ University of Cambridge, Women bear brunt of coronavirus economic shutdown in UK and US, 21st April 2020, accessed at: <https://www.cam.ac.uk/research/news/women-bear-brunt-of-coronavirus-economic-shutdown-in-uk-and-us>

²⁴ Women's Budget Group, Crises Collide: Women and Covid-19, 9th April 2020, accessed at: <https://wbg.org.uk/analysis/uk-policy-briefings/crises-collide-women-and-covid-19/>

²⁵ Business in the Community, Half of businesses choose not to report 2019-2020 gender pay gap, 29th May 2020, accessed at: <https://www.bitc.org.uk/news/half-of-businesses-choose-not-to-report-2019-2020-gender-pay-gap/>

²⁶ The telegraph, Coronavirus means women won't earn as much as men for an extra 30 years, 30th May 2020, accessed at: <https://www.telegraph.co.uk/money/consumer-affairs/coronavirus-means-women-wont-earn-much-men-extra-30-years/>

helplines to cope with demand. Conducting their own research on pregnant women NHS workers, Pregnant not Screwed have found:

- 25% of pregnant NHS workers are still working with patients that could have COVID-19
- 24% of pregnant NHS workers feel unsafe at work, rising to 31% of pregnant BAME NHS workers
- 8% of pregnant NHS workers have been suspended on the wrong terms, i.e. forced to take SSP, annual leave, unpaid leave or forced to start maternity leave before 36 weeks²⁷

Whilst the government has already outlined its intention to increase protection from redundancy for pregnant women and returning mothers by increasing the application employment tribunal system to six months, the proposed legislation has yet to be published.²⁸

As the government begins the relaxation of lockdown and employers slowly begin to phase return employees back to work, working mothers and older working women may also face unfair treatment from their employers who may take preference towards resuming employees, who are less vulnerable and more flexible, back to work. Only time will tell if employers consult with these categories of women about any workplace adjustments or their preferred choice to return to work.

There is no doubt that a lack of women's voices in policy and decision making will exacerbate the unequal burden the virus has placed on women's shoulders. The lack of women's voices has been noted by women's charities and feminist politicians. In March more than 50 organisations signed a statement calling on the government to consider the challenges faced by women as a result of the pandemic²⁹. More recently the Prime Minister came under scrutiny, during a Commons Liaison meeting, by conservative MP Caroline Nokes, chair of the women and equalities committee. Questioning the Prime Minister on the lack of support for women, including the lack of childcare provision and female voice in politics, the Prime Minister's response was weak. Apart from recognising the need for more childcare and the need for more women in leadership roles, the Prime Minister's main response to women's economic suffrage was to get the economy back and up and running.³⁰

Trade Unions via the TUC have responded to the disproportionate impacts coronavirus has had on women. In a recent publication the TUC have recommended the government deploy the following:

- For the government to follow through with their commitment to extend maternity redundancy protection period to 6 months after a new mother has returned to work.
- For the government to make clear to employers that pregnant women in public-facing roles have the right to suspension on full pay based on their usual earnings and close the loophole that means pregnant agency workers miss out on this pay.

²⁷ Pregnant not Screwed, 28th April 2020, accessed at: <https://www.docdroid.net/TupDNvL/pregnant-workers-research-pdf>

²⁸ House of Commons, Coronavirus: Protections from redundancy, 5th May 2020, accessed at: <https://commonslibrary.parliament.uk/economy-business/work-incomes/coronavirus-protections-from-redundancy/>

²⁹ Fawcett Society, Coronavirus: joint call for women's visibility in UK response , accessed at: <https://www.fawcettsociety.org.uk/news/coronavirus-joint-call-womens-visibility-uk-response>

³⁰ Metro, Boris Johnson challenged over 'unequal impact of coronavirus on women, 27th May 2020, accessed at: <https://metro.co.uk/2020/05/27/boris-johnson-challenged-unequal-impact-coronavirus-women-12767445/>

- Employers must offer home working or other safe working conditions, or else suspend pregnant women on full pay.
- For the government to make part-time furloughing an option so that parents can equally share caring responsibilities.
- For the government to give an immediate and additional cash injection to ensure specialist services, particularly grassroots organisations, can meet increased levels of demand and provide the effective, lifesaving support women and children need.
- GEO should review and where necessary redraft the Gender Equality Roadmap to reflect the current context and include a clear timetable for delivery.³¹

People with Disabilities

There are an estimated 13.7 million people with disabilities in Great Britain according to the latest available government estimates.³²

According to the ONS opinions and lifestyle survey, covering the period 27th March 2020 – 13th April 2020, almost half (45.1%) of adults with disabilities, compared with around a third (30.2%) of adults without disabilities, have reported being very worried about the effect the coronavirus pandemic is having on their life. Nearly two-thirds (64.8%) of adults with disabilities said COVID-19-related concerns were affecting their well-being, whilst adults with disabilities were significantly found to be more likely than adults without disabilities to report spending too much time alone; around a third (35.0%) of adults with disabilities reported this compared to a fifth (19.9%) of adults without disabilities.³³

Whilst many of the outcomes of this survey can be argued as being a direct result of people with disabilities needing to physically isolate, stay at home and reduce social contact in order to protect themselves and others from the virus, many disability campaign groups and disability advocates have argued that some of the disproportionate impacts people with disabilities are facing are as a direct result of the government's inability to recognise people with disabilities in their policy making process. For example, the government's Covid-19 emergency bill poses serious risks to the lives of many people with disabilities by effectively freeing local authorities of their legal duties to provide social care support under the Care Act 2014. Under the Bill local authorities now only need to provide support to people with disabilities where breaches of human rights occur.

The bill also permits health care bodies to delay eligibility assessments for NHS care meaning thousands of people with disabilities are not receiving the support and care they so urgently need. Changes to the Mental Health Act under the bill means those suffering with mental health conditions can be released early or detained longer by the authorisation of just one doctor instead

³¹ TUC, TUC response to inquiry on Coronavirus (Covid-19) and the impact on people with protected characteristics, May 2020, accessed at: https://www.tuc.org.uk/sites/default/files/2020-05/WESC%20COVID_final%20%28002%29%20%281%29.pdf

³² DWP, Family Resources Survey 2018/19, 26th March 2020, accessed at:

<https://www.gov.uk/government/statistics/family-resources-survey-financial-year-201819>

³³ ONS, Coronavirus and the social impacts on disabled people in Great Britain, 24th April 2020, accessed at:

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/disability/articles/coronavirusandthesocialimpactsondisabledpeopleingreatbritain/2020-04-24#understanding-the-impact-on-disabled-people>

of the previously required two.³⁴ Subsequently a study by the Research Institute for Disabled Consumers (RiDC) have found 50% of people with care support needs are no longer receiving health or personal care visits to their home. The study also revealed that almost half of people with disabilities are concerned about access to medicine, with two in five people claiming they are “extremely concerned” about making medical appointments if they have to self-isolate for more than three months.³⁵

It is widely recognised that people with disabilities tend to have lower incomes and higher living costs than people without a disability. Over the last decade changes to government welfare provisions have left adults with disabilities four times worse off financially than adults without a disability, according to research commissioned by the Disability Benefit Consortium³⁶. Nearly half of those in poverty, 6.9 million people, are from families which include a person with disabilities³⁷. Despite this hardship, employment Support Allowance claimants, who are predominately people with disabilities or older people who are not able to work due to ill health, have received no additional financial government support during the crisis, unlike claimants of universal credit who saw an increase of £20 in their welfare awards to pay for extra costs. As a consequence the disability benefits consortium has also found 9 out of 10 people with disabilities are struggling with additional food costs – with others reporting that they have had to find money elsewhere to pay people to collect food and medicine and pay higher utility bills as a result of forced shielding.³⁸

The Government have also done very little to support people with disabilities and their employers in the workplace. Before the coronavirus outbreak, people with disabilities had an employment rate 28.6% lower than that of people without disabilities. This difference is often referred to as the disability employment gap. Following the government’s lockdown measures, 15% of workers in shut down sectors are people with disabilities (as defined by the Equality Act 2010), about the same as the total workforce average of 14%. The highest employment sector for workers with disabilities is the retail sector where workers with disabilities make up 17% of vulnerable jobs³⁹.

Trade unions and disability campaign groups have raised concerns about the impact the outbreak has had on people with disabilities in work. In a submission to the Work and Pensions Committee for the DWP’s response to the coronavirus outbreak inquiry, Disabled People Against Cuts noted that workers with disabilities have reported difficulties getting access to workplace adjustments and

³⁴ Inclusion London, Coronavirus Bill could leave thousands of Disabled people without support, 20th March 2020, accessed at: <https://www.inclusionlondon.org.uk/campaigns-and-policy/act-now/coronavirus-bill-could-leave-thousands-of-disabled-people-without-support/>

³⁵ RiDC, Covid-19: the impact on disabled and older people in the UK, 8th April 2020, accessed at: <http://www.ridc.org.uk/news/covid-19-impact-disabled-and-older-people-uk>

³⁶ Disability Benefits Consortium, Disabled adults four times worse off financially than non-disabled adults finds new DBC report, 16th July 2019, accessed at: <https://www.disabilityrightsuk.org/news/2019/july/disabled-adults-four-times-worse-financially-non-disabled-adults-finds-new-dbc-report>

³⁷ Gov.co.uk, National Statistics Households below average income: 1994/95 to 2018/19, 26th March 2020, accessed at: <https://www.gov.uk/government/statistics/households-below-average-income-199495-to-201819>

³⁸ Disability Benefits Consortium, News Campaign, 27th April 2020, accessed at: <https://disabilitybenefitsconsortium.wordpress.com/campaign-news/>

³⁹ House of Commons Library, People with disabilities in employment, 3rd January 2020, accessed at: <https://commonslibrary.parliament.uk/research-briefings/cbp-7540/>

equipment to enable them to work from home.⁴⁰ This places workers with disabilities at a considerable disadvantage.

The TUC have also reported anecdotal evidence in its response to the government's inquiry highlighting that people with disabilities are being targeted by their employers for selection of furlough rather than have reasonable adjustments put in place to accommodate their needs. Other people with disabilities have reported employer's regular failure to recognise or consider reasonable adjustments leaving them unsupported in their working lives. Additionally self-employed workers with disabilities who may be forced to claim Employment Support Allowance or Universal Credit report fears that they will lose their Access to Work grant and have to start the long and arduous process of applying again. They have highlighted that this process is particularly difficult for freelancers and can take around six weeks.⁴¹

Carers for people with disabilities have also been indirectly disadvantaged due to the government's failure to enlist them under the Covid-19 vulnerable category. Recently claims from carers who care for people with disabilities, reported in the Guardian newspaper that they had been required to go into work by their employer or face dismissal when they could not show proof of vulnerability, with one worker forced to self-isolate between shifts in order to protect their disabled child.⁴²

Recently a letter signed by 97 MPs and peers - from parties including the Conservatives, Labour, the SNP and the DUP has called for the government to re-evaluate its current strategy to ensure social distancing does not lead to exclusion for those with disabilities. It also asks the government to accelerate efforts to include people with disabilities in the government's economic recovery plan.⁴³

The TUC's response to the situation calls for the government to adopt the following recommendations:

- For the Government to engage with Disabled People's Organisations and people with disabilities to ensure that the voice and experiences of people with disabilities are central to the process, reviews.
- For Access to Work grants to take account of the current context with a view to improving resourcing and processes.
- To recognise the implications of the increase in home working for workers with disabilities, with a view to improving the access to work scheme.
- To introduce the steps necessary to effectively close the disability employment and pay gaps in the current context.

⁴⁰ Disabled People Against Cuts, Disabled People Against Cuts (DPAC) submission to Work and Pensions Committee inquiry into how coronavirus is affecting people who need to rely on the benefits system, accessed at: https://dpac.uk.net/research/#_RefHeading_411_2063016499

⁴¹ TUC, TUC response to inquiry on Coronavirus (Covid-19) and the impact on people with protected characteristics, May 2020, accessed at: https://www.tuc.org.uk/sites/default/files/2020-05/WESC%20COVID_final%20%28002%29%20%281%29.pdf

⁴² The Guardian, Disabled people in UK threatened with sack unless they go back to work, 18th May 2020, accessed at: <https://www.theguardian.com/society/2020/may/18/disabled-people-in-uk-threatened-with-sack-unless-they-go-back-to-work-coronavirus>

⁴³ BBC, Coronavirus: Disabled people 'forgotten' by government strategy, 1st May 2020, accessed at: <https://www.bbc.co.uk/news/uk-politics-52504820>

This should inform the production of a time bound strategy which effectively addresses the inequalities that people with disabilities experience in the labour market.⁴⁴

LGBT+

There is no strong evidence to demonstrate that LGBT+ people are more likely to contract coronavirus or that the rates are higher in LGBT+ communities, however LGBT+ people may be particularly vulnerable during the COVID-19 pandemic.

People living with compromised immune systems, including some persons living with HIV/AIDS, are believed to face a greater risk from COVID-19, including homeless persons, a population that includes many LGBT+ people, who are less able to protect themselves through physical distancing and safe hygiene practices, increasing their exposure to contagion.⁴⁵

Despite these risks, LGBT+ people are more likely to not seek health care services. Research conducted last year by the University College of London revealed that a lifetime of prejudice and stigma for LGBT+ groups seeking health care services is leading to worse physical and mental health, poorer access to health and social care, as well as greater levels of social isolation and loneliness among older LGBT people. Moreover, older non-heterosexual men are more likely to be living with a long-term limiting illness and have lower overall life satisfaction.⁴⁶

Older LGBT+ people are not the only age group who experience stigma and discrimination in health services. A Stonewall survey found that 14% of LGBT+ people have avoided treatment for fear of discrimination because they are LGBT+. This rises to 37% of Trans people and 33% of non-binary people⁴⁷. This may mean that LGBT+ people with severe COVID-19 symptoms may delay accessing healthcare or may not access healthcare at all.

LGBT+ people are also disproportionately affected by HIV. Although HIV disproportionality affects gay and bisexual people (51% more) HIV can also affect other men who have sex with men and Trans women⁴⁸. It's worthy to note that not all HIV sufferers are at risk, however, the LGBT+ foundation has found research conducted by Avert which states that the risk of severe COVID-19 may be greater in people who are not on antiretroviral treatment and are not immunosuppressed. This includes people with low CD4 counts or who are not virally suppressed.⁴⁹ Additionally BHIVA advises that people living with HIV with a CD4 count of under 50 or people who have been diagnosed with an

⁴⁴ TUC, TUC response to inquiry on Coronavirus (Covid-19) and the impact on people with protected characteristics, May 2020, accessed at: https://www.tuc.org.uk/sites/default/files/2020-05/WESC%20COVID_final%20%28002%29%20%281%29.pdf

⁴⁵ UNHRC, www.ohchr.org/COVID-19 AND THE HUMAN RIGHTS OF LGBTI PEOPLE, 17th April 2020, accessed at: <https://www.ohchr.org/Documents/Issues/LGBT/LGBTIpeople.pdf>

⁴⁶ UCL, Raising the equality flag Health inequalities among older LGBT people in the UK, May 2019, accessed at: <https://ilcuk.org.uk/wp-content/uploads/2019/05/ILC-Raising-the-equality-flag.pdf>

⁴⁷ Stonewall, LGBT in Britain health report, accessed at: https://www.stonewall.org.uk/system/files/lgbt_in_britain_health.pdf

⁴⁸ LGBT+ Foundation, The Essential Briefing on the Impact of COVID-19 on LGBT Communities in the UK, April 2020, accessed at: <https://s3-eu-west-1.amazonaws.com/lgbt-website-media/Files/237f78f1-e06c-46d7-ae08-1c9d5f9ca0bc/The%20Essential%20Briefing%20on%20the%20Impact%20of%20COVID-19%20on%20LGBT%20Communities%20in%20the%20UK%20%2520-%208%20April%202020.pdf>

⁴⁹ Avert, Coronavirus (COVID-19) and HIV, 1st June 2020, accessed at: <https://www.avert.org/coronavirus/covid19-HIV>

opportunistic infection in the last 6 months should stay at home at all times and avoid face to face contact for 12 weeks. This means that trans people with HIV are potentially more likely to be at risk as 2016 data revealed that trans adults with HIV were twice as likely as other adults to be diagnosed late with a CD4 count of <350 mm.⁵⁰

Homelessness, isolation and living with LGBT+ phobic family members are also having disproportionate impacts. The LGBT+ Foundation have reported an increase of 64% in calls about isolation, 70% increase for calls about transphobia and 36% in calls related to homophobia.⁵¹

LGBT+ people are also more likely to face domestic abuse. A study conducted in 2018 by Stonewall found that 11% of LGBT people have faced domestic abuse from a partner last year. This includes 13% of bi women and 10% of lesbians, 12% of bi men and 7% of gay men, in comparison to 6% of women and 3% of men in the general population.⁵² Whilst many domestic abuse victims are now housed in hotels, concerns amongst LGBT+ organisations and campaign groups highlight the national strategy to house victims of domestic abuse in hotels omits LGBT+ victims and instead focuses on straight women and children. This may mean that the issue of a lack of support and acknowledgment for LGBT+ domestic abuse victims is exacerbated during this time.

Economically LGBT+ people face pay inequalities and discrimination in the labour market which may be exacerbated by the current crisis. A 2019 poll of 4,000 staff by YouGov for LinkedIn found a 16% pay gap for LGBT+ workers, taking home an average £6,703 less per year than their straight colleagues. The poll also found 21% of LGBT+ respondents have experienced verbal abuse at work. More than six in 10 said they have been made to feel uncomfortable while working and more than a third have witnessed homophobic behaviour.⁵³

The TUC's inquiry response for LGBT+ communities places recommendations for the government to adopt the following:

- For the government to provide appropriate funding for LGBT+ services supporting people experiencing domestic abuse and violence.
- To prioritise work to address homophobia, biphobia and transphobia given the current levels of hostility faced by LGBT+ people

⁵⁰ LGBT+ Foundation, The Essential Briefing on the Impact of COVID-19 on LGBT Communities in the UK, April 2020, accessed at: <https://s3-eu-west-1.amazonaws.com/lgbt-website-media/Files/237f78f1-e06c-46d7-ae08-1c9d5f9ca0bc/The%20Essential%20Briefing%20on%20the%20Impact%20of%20COVID-19%20on%20LGBT%20Communities%20in%20the%20UK%20-%20-%208%20April%202020.pdf>

⁵¹ LGBT+ Foundation, The Essential Briefing on the Impact of COVID-19 on LGBT Communities in the UK, April 2020, accessed at: <https://s3-eu-west-1.amazonaws.com/lgbt-website-media/Files/237f78f1-e06c-46d7-ae08-1c9d5f9ca0bc/The%20Essential%20Briefing%20on%20the%20Impact%20of%20COVID-19%20on%20LGBT%20Communities%20in%20the%20UK%20-%20-%208%20April%202020.pdf>

⁵² Stonewall, LGBT in Britain: Homes and Community, 2018, accessed at:

https://www.stonewall.org.uk/sites/default/files/lgbt_in_britain_home_and_communities.pdf

⁵³ The Independent, LGBT+ workers paid £6,700 per year less than straight workers, survey suggests, 2nd July 2019, accessed at: <https://www.independent.co.uk/news/business/news/lgbt-workers-pay-gap-paid-less-straight-linkedin-pride-a8983181.html>