

**Building equal foundations:
Tackling the disproportionate
impact of COVID-19 on Black,
Asian and other ethnic
communities in Camden**

Executive summary

August 2020

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Introduction

Camden is one of the most diverse areas of the country, with a history of fighting for equality and progress.

Camden 2025, our vision for the future of our borough, sets out our ambition to make Camden a place where everyone has a chance to succeed and where nobody gets left behind. We are committed to creating a place that works for everyone, and where everybody has a voice.

Racial inequalities are in sharp focus and, prior to the pandemic, we had been working on tackling disproportionality in a number of ways. This included our response to the recommendations from the Lammy Review (2017), where our Youth Offending Service tackled the issue of overrepresentation of Black, Asian and other ethnic individuals in the criminal justice system in Camden. Through the Youth Safety Taskforce, Camden Council has sought to tackle the disproportionate impact of youth violence. We have also been working with schools to address the higher rate of school exclusions amongst students from Black, Asian and other ethnic backgrounds. Tackling health inequalities, including inequalities in access, experience and outcomes amongst some of our Black, Asian and other ethnic communities has also been key to our public health work in Camden. Camden's faith communities play a pivotal role in supporting community cohesion, including the work of Camden's Faith Leaders' Forum.

We have strong foundations to build on, but there is a need to accelerate this work and bring our Camden community with us on this journey. The COVID-19 pandemic has both shone a light on, and exacerbated, existing and entrenched structural inequalities that disproportionately affect people from Black, Asian and other ethnic backgrounds. We also recognise that the disproportionate impacts of COVID-19 vary between different ethnic groups.

In Camden, over 34% of our residents are from Black, Asian and other ethnic backgrounds. In some neighbourhoods in Camden, [the levels of deprivation](#) are within the top 10% to 20% in the UK, and Black, Asian and minority ethnic residents are more likely to live in the more deprived parts of the borough. Evidence shows us that people who live in deprived areas have higher COVID-19 diagnosis rates and death rates than those living in less deprived areas, with the most deprived areas experiencing more than double the mortality rates from COVID-19.

Despite Camden's diversity, and relative deprivation levels, Camden's COVID-19 age-standardised mortality rate to date has been significantly lower than London's overall rate (55 versus 86 per 100,000) and is one of the lowest age-standardised COVID-19 mortality rates amongst all London boroughs. Yet we also know that our diverse communities have been disproportionately impacted by COVID-19 and the measures taken to reduce the spread of the virus.

Some of the key findings in Camden were:

- A significantly higher proportion of Asian residents were shielding from COVID-19 compared with other ethnic groups – Asian residents made up 11% of Camden's shielding population, compared to 7% in the general population.
- There was a disproportionate number of new registrations in April and May from young people from Black, Asian and other ethnic backgrounds for Kooth, an online mental health support service commissioned by Camden.
- 73% of households with overcrowding points on the Council's Housing Allocation Scheme have a lead tenant from a Black, Asian or other ethnic background.

Introduction

The work outlined in this report focuses on one protected characteristic, namely race. Given the national evidence that emerged early on in the pandemic (and which has continued to emerge over time), highlighting the direct impacts of COVID-19 on people from Black, Asian and other ethnic backgrounds, as well as the impacts of the measures taken to control the spread of the virus, this focus on race was both appropriate and necessary. The indications of disproportionate impacts are clear, and it is important that the Council understands, analyses and takes action to address these disproportionate impacts as soon as we can. However, as we progress with our work on tackling racial inequalities, we will consider the intersectional nature of inequalities, and the impact of multiple protected characteristics on a person.

The work described in this report was overseen by a senior level working group chaired by Councillor Abdul Hai (Cabinet Member for Young People and Cohesion) and Julie Billett (Director of Public Health). It included a review of a wide array of evidence and the development of a framework of actions to tackle the inequalities identified. This evidence came from residents, councillors, a small number of voluntary and community sector (VCS) groups, and practitioners. The working group also drew on local and national data, including the [Public Health England](#) reports 'COVID-19: understanding the impact on BAME communities' and 'Beyond the data: understanding the impacts of COVID-19 on BAME communities'. The work also took into account the wider social context, specifically the resurgence of the Black Lives Matter movement in the UK following the death of George Floyd in the United States, and the shock, anger, grief and fear experienced and expressed by our Black and Asian residents. Through this work, we have acknowledged the urgent need to work with our communities to tackle entrenched structural racism and racial injustice.

The six areas in scope of the working group's review included:

- Understanding the lived experiences of people from Black, Asian and other ethnic backgrounds
- Health inequalities and the direct and indirect health impacts
- The experiences of our most vulnerable residents – shielding people and Adult Social Care clients
- Housing supply and overcrowding
- Employment and the labour market (including our own workforce)
- Schools and education, including the digital divide.

The voice and contribution of our voluntary and community sector (VCS) has been critical to this work. Woven through the evidence we heard was a clear sense of the financial impact of the pandemic on VCS organisations and their delivery of services now and in the future. Many small organisations working with, and run by, people from Black, Asian and other ethnic backgrounds raised concerns regarding financial sustainability and difficulties in accessing some of the larger COVID-19 funds that had been distributed to the sector. A reduction or lack of funding for core costs (overheads) has impacted most of the VCS at a time when our communities need their help and support the most. Nearly all faith and VCS organisations have seen a reduction in donations. As we move into the next phase of the pandemic, we are committed to continuing to work with these groups to ensure fair access to funding and commissioned contracts. We will continue to enable collaboration across the sector and facilitate discussions with the Government and larger funders, so that our VCS organisations are able to continue their vital work.

Introduction

Working together is the only way we will deliver on our ambition to make Camden a place where everyone has a chance to succeed, where nobody gets left behind and where everybody has a voice. We are committed to working out in the open with residents, members, VCS groups and businesses to continue to understand the experiences of our borough's diverse communities, and to find effective solutions together to tackling inequalities.

This report summarises the findings of the working group and makes early recommendations on how we can continue this journey together. Through this work we aim to tackle racism and inequality head on. We may find ourselves in places of discomfort as we continue to have conversations and challenge everyone to act. However, we must take the time to rebuild the foundations of society and build a better, more equal place for everyone in Camden.

Summary of findings

Health inequalities

There is a complex system that causes health inequalities to thrive. Pre-existing health inequalities amongst Black, Asian and other ethnic groups, and the interrelationship with deprivation and other social, economic, cultural and environmental determinants of health, are all likely to underpin the different experiences and health outcomes we have seen during the pandemic.

Some of the key pieces of evidence gathered by the working group were:

- Camden has a COVID-19 age-standardised mortality rate that is significantly lower than the London average (55 versus 86 per 100,000) and has one of the lowest COVID-19 mortality rates amongst all London boroughs.
- However, local analysis reveals a similar picture to that seen nationally in terms of disproportionate impacts. In North Central London, there has been a higher percentage of COVID-19 deaths of people born in Africa or Asia, when compared to those born in the UK or Europe (taken from death registration data).
- The prevalence of key long-term conditions that increase clinical vulnerability and poor COVID-19 outcomes, such as diabetes, heart disease, obesity and high blood pressure, is higher in some Black, Asian and other ethnic groups compared to their White counterparts.
- Local GP data shows that prior to the pandemic, Black men and women, and Asian men, were more likely to be overweight and obese compared to the Camden average, adjusted for age.
- A significantly higher proportion of Asian residents were shielding from COVID-19: 11% of shielding residents were Asian, compared to 7% in the general population.
- People who live in deprived areas have higher COVID-19 diagnosis rates and death rates than those living in less deprived areas, with the most deprived areas experiencing more than double the mortality rates from COVID-19.
- Locally, the VCS heard from some residents that the cancellation of hospital appointments for people with pre-existing health concerns has left many people with worsening health conditions. Additionally, some Black, Asian and other ethnic residents have felt unable or reluctant to attend hospital for non-COVID-19 health issues, out of a belief that hospital services are either not available or will put them at risk of COVID-19 infection.
- Many residents have reported feeling more stressed, anxious, isolated or depressed as a result of COVID-19. Additionally, local evidence gathered prior to the pandemic indicates that Black and Asian residents in Camden rate having a supportive community as more important for their health and wellbeing than White residents, suggesting lockdown might have had a greater negative impact on residents who value community interaction and support more highly.

Residents at risk when contracting COVID-19: clinically vulnerable 'shielded' and Adult Social Care clients

The Adult Social Care review of disproportionate impacts highlighted that, whilst quantitative data is important in understanding specific impacts on people who are Black, Asian, or from any other ethnic background, it does not tell the full story and needs to be considered alongside qualitative information and people's lived experiences. Use of the term 'BAME' (Black, Asian and Minority Ethnic) can be problematic and risks the perception that a homogenous group is being described, which is far from the case. Adult Social Care recognises the need to reflect genuine voices of the lived experiences of

Summary of findings

people from the many different backgrounds represented within Black, Asian and other ethnic groups. While considering this theme, the working group also reflected on the experience and impacts of the pandemic on the clinically vulnerable ‘shielded’ cohort.

Adult Social Care: care workforce

- The care workforce in London is made up of a much greater proportion of Black, Asian and other people from other ethnic groups compared to the general population (72% of the direct care workforce against 40% of population of London – 2011 census).
- 23% of the national care workforce is over 55 years old, so Black, Asian and other ethnic people in this group can be considered to be at even greater risk of serious illness from COVID-19.¹
- The care workforce is at greater occupational risk of contracting COVID-19, and given the over-representation of Black, Asian and other ethnic groups in the care workforce, this increases the risk of COVID-19 infection in these groups.

Adult Social Care clients

- Based on local data, there is no evidence currently that Black, Asian and people from other ethnic groups known to Adult Social Care are disproportionately impacted by COVID-19, in terms of deaths or in changes to care received. There is also no evidence from the data that Adult Social Care’s emergency response has disproportionately impacted people who are Black, Asian and other ethnicities. However, we acknowledge that this data picture is currently incomplete, and we need to hear more from residents who use Adult Social Care services to develop our understanding of this.

Previously shielding (clinically vulnerable to COVID-19) residents

- In the wider shielded cohort, a significantly higher proportion of residents from Asian backgrounds were shielding from COVID-19 than Asian residents in the general population.

Children and young people

In Camden, there are 48,823 children and young people aged under 19, and 25,037 Camden households have dependent children. In 2018, 43% of children in Camden were classed as living in poverty. There are 21,761 learners in Camden state schools, plus over 3,500 under-fives in early years settings. Half of these children are from Black, Asian and other ethnic groups compared to the national average of 21% (Autumn School Census 2019).

We heard about the direct and unprecedented impacts of the pandemic on the education sector when the UK Government made the decision to close schools to all students from 23 March 2020, except for children of key workers and children considered to be vulnerable.

We also heard directly from some young people in Camden at a series of roundtable discussions with the Council, head teachers, Camden Learning and the police. There were clear calls for change, particularly around the impact of systemic racial injustice and inequality in our communities, and their impact on the lives of Black people in Camden.

¹ The Intensive Care National Audit and Research Centre found that patients most likely to survive in intensive care were those aged between 16 and 49, 76% of whom were discharged. The number fell to 50% for those aged 50 to 69, and to 32% for those aged 70 and over.

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Digital divide

- Schools with the highest percentage of pupils with no access to digital devices have tended to be those with higher percentages of disadvantaged and/or Black, Asian and other ethnic pupils.
- Disadvantaged and/or Black, Asian and other ethnic families have required the most support to access remote learning. Students' lack of access to digital devices has exacerbated computer literacy issues.

Attainment

- Comparative performance of ethnic groups at the end of Key Stage Two in Camden for the academic year 2018/19 shows that all groups perform above the expected national standard apart from children in the 'Black Other' group.
- At Key Stage Four (2018/19), Progress 8 scores vary across ethnic groups with most groups having nationally average scores. The lowest attaining group at Key Stage Four is White British disadvantaged students, who perform significantly below national averages. Caribbean students also perform significantly below average.
- Young people raised concerns about unconscious bias in predicted grades and how this might affect the educational outcomes of Black, Asian and other ethnic students. Evidence shows that Black students receive lower A-Level predictions than their peers, however they often perform better than predicted grades. The existing gap in attainment for students has the potential to widen further as a result of the compounded disadvantages experienced in the pandemic.
- With recent events and discussions relating to the Black Lives Matter movement, we heard from some young people that there is a lack of education of Black history in schools, and, when it is taught, there is a lack of information and focus on positive Black history.

Returning to school

- Parent/community anxiety: Anecdotal information from schools is that some communities are more reluctant for children to return to school, with the most noticeable gap between expected returns and attendance in schools amongst pupils with higher levels of disadvantage and/or Black, Asian and other ethnic pupils.
- Mental health: Camden Council has commissioned Kooth, an online mental health service for 11 to 18 year olds. April and May data showed 38.16% and 55.33% new registrations for support were from young people from Black, Asian and other ethnic backgrounds.

Policing

- During lockdown many young people felt that they could not go outside – not because of COVID-19, but fear of being arrested or stopped for being perceived to have breached social distancing or lockdown regulations.

Housing and overcrowding

Through engagement with VCS organisations, we have heard about people's lived experiences of lockdown, and how COVID-19 has exacerbated existing inequalities, and had a disproportionate impact on Black, Asian and other ethnic communities. From overcrowded households and lack of access to green spaces impacting on wellbeing and family relationships, to the ability (or lack thereof) to work from home both educationally and professionally, the impact has been significant.

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- 73% of households with overcrowding points on the Council's Housing Allocation Scheme have a lead tenant who is from a Black, Asian or other ethnic background – this is compared to a general population of 34% (2011 census). The largest proportion of people in overcrowded households are Bangladeshi (18%), Black African (12%) and Somali (9%).
- Some Bangladeshi and Somali residents with large families are living in overcrowded environments and cramped conditions. Children and young people, especially those at exam age, were finding it hard to study due to lack of space.
- Some Bangladeshi families are living in multi-generational households with elderly family members, some of whom were amongst those most clinically vulnerable to COVID-19.

Employment and the labour market

Whilst the availability of labour market data relating to ethnicity is limited, the data we do have shows that even prior to the COVID-19 pandemic, labour market inequalities disproportionately impacted Black, Asian and other ethnic communities.

- Whilst 77% of businesses continued to trade, a high proportion of those in the accommodation and food service, as well as in the arts, entertainment and recreation sectors, paused trading or closed altogether ('shut down' sectors).
- Workers in shut down sectors are amongst the lowest paid across the workforce, with the typical pay for workers in those sectors less than half of that of those able to work from home. People from Black, Asian and other ethnic backgrounds have been more likely to be in shut down sectors, or to be key workers facing the biggest health threats.

Access to financial support

- Of the 821 council tenants who submitted Universal Credit claims from 23 March to 27 April 2020, 50% were from Black, Asian and other ethnic backgrounds.
- Around 9,100 of the working-age population in Camden were claiming Employment and Support Allowance, with approximately 40% coming from Black, Asian and other ethnic backgrounds (May 2019).
- Data from Citizens Advice Camden in relation to enquiries received between early March and mid-May 2020 showed a higher proportion of people from Black, Asian and other ethnic backgrounds making financial and employment enquiries.

Moving towards action

Taking the necessary action to ensure people are safe and informed, and providing reassurance to our communities, remain our biggest priorities. At the start of July 2020, we published the [mid-point findings](#) of this project, as part of our commitment to working in the open and to ensuring that residents could continue to share their lived experiences and inform the report.

We have also implemented a range of actions, both during the emergency response phase and beyond, drawing on the lived experiences of our Black, Asian and other ethnic communities to prevent and mitigate further disproportionate impacts in the short term.

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These short-term actions include:

- We are taking action at a local level to improve ethnicity data collection: Public Health are working with local registrars on the death registration process, and our Inclusive Economy team are working with the Department for Work and Pensions to encourage the timely release of local labour market data. We are also calling for the introduction of ethnicity data collection at death registration nationally.
- We are continuously developing and improving our communications channels and messaging to ensure information is culturally competent and accessible to our diverse communities.
- We have provided 806 devices and 119 4G Wi-Fi routers for young people with social workers and looked-after children, and 279 devices and 121 4G Wi-Fi routers for disadvantaged Year 10 students. Many schools have distributed their own stocks of laptops and tablets for pupils to use at home, and businesses have also donated devices directly.
- We shared information with Camden Giving about the disproportionate impact of COVID-19 on Black, Asian and other ethnic communities as part of briefing Camden Giving's panels for their COVID-19 Charity Fund. This resulted in all of the 20 applications for support for Black, Asian and other ethnic communities being awarded funding in the second round – a total of £90,950.

Building equal foundations

We have worked with our partners at a rapid pace to understand the impact of COVID-19 on our residents from Black, Asian and other ethnic backgrounds. This is a testament to everyone's genuine commitment to making Camden a better, fairer place for everyone. From the start of this process, we recognised that the impact of COVID-19 on our diverse communities is linked directly to the deeply entrenched structural inequalities of society. With this knowledge, we are making a commitment to go beyond addressing the immediate impacts of the virus, working towards dismantling a system that does not work for so many of our residents and building a new one with equal foundations.

Our approach to this work has been relational rather than bureaucratic, bringing together residents, professionals, VCS representatives, elected members and council officers to discuss evidence and start to form action plans. Not only have we discussed evidence at weekly meetings, we have had roundtables with young people and attended meetings with VCS and faith leaders to hear experiences of the pandemic first-hand and feed these into the framework for our action plans. This is also reflective of work done over the last few years, which has seen us start to let go of old structures and hierarchies, see the strength and power in our communities, and invest in our residents' capacity to change their lives and their neighbourhoods. Addressing this disproportionate impact is a shared endeavour and we want our residents, particularly our Black, Asian, and other ethnic residents, to play an active role in our response. We must ensure this work does not take place in isolation and that the whole organisation works together with residents, members and partners.

Our intentions are:

A shared endeavour

- Continue to develop a **shared endeavour with residents and VCS partners** working with Black, Asian, and other ethnic communities in the borough. We must also go a step further and ensure that we harness the strength of Camden's large institutions and work in partnership with key stakeholders who provide jobs, healthcare and education.
 - We will set up a citizens' panel for residents from diverse backgrounds as a critical friend to the Council to make sure we stay true to our objectives and deliver the change we are promising.

Summary of findings

Healthy, independent lives

- Work together across the health and wellbeing system in Camden to prevent and mitigate further health impacts of COVID-19 on our Black, Asian and other ethnic communities in the short term, and take sustained action to **tackle longstanding health inequalities affecting Black, Asian and other ethnic groups**. We will work with our Black, Asian and other ethnic minority residents to co-design and deliver **culturally competent health education campaigns and prevention programmes, and to adapt and tailor health services** to meet the needs of our diverse communities, as well as support the **training and development of staff** on health inequalities, cultural competency and conscious inclusion.
 - We will work with our local NHS partners to develop a new approach to improving population health outcomes at neighbourhood level in Camden, focusing on action that will target health and care inequalities, including inequality gaps in long-term health conditions experienced by Black, Asian and other minority ethnic groups. We will work with our Clinical Commissioning Group (CCG), primary care networks and Camden Healthwatch to deliver creative, innovative models of outreach, proactive care and delivery.

The best start to life

- Look across the entire system to ensure that everyone in the borough gets the best start in life. We will work directly, and with our partners, to rapidly increase access to digital devices and resources to support the **reduction of the disadvantage gap in education, and we will use the new education strategy to tackle disproportionality in attainment**. We will use our influence to **tackle disproportionate representation in the youth justice system and will take steps to ensure our own practice is anti-racist**.
 - We are committed to reducing inequalities and promoting life chances by developing tutoring opportunities, delivering virtual work experience, and supporting access into science, technology, engineering, arts and mathematics (STEAM) careers.
- Strive to be the best Black, Asian and other ethnicity corporate parents, providing a **culturally sensitive** Children's Safeguarding and Early Years service and support offer that meets the needs of our children and young people from Black, Asian and other ethnic backgrounds. We will also support our Black, Asian and other ethnic residents into employment through targeted careers advice and guidance, focusing on sectors where these groups are underrepresented.
 - We are committed to the management team being more representative of our communities and frontline staff. We are exploring ways to promote new managerial positions to Black, Asian and other ethnic applicants.

Strong growth and access to jobs

- Invest in high-quality employment support that is both available to all, and responsive to the specific labour market challenges that disproportionately impact residents from Black, Asian and other ethnic backgrounds. To do this, we will effectively use relevant data and connect with residents across Camden to design our 'Job Hub' employment support services. Through this approach, we will endeavour to understand and highlight the lived experience of the labour market for residents from Black, Asian and other ethnic backgrounds. With a **more informed understanding of the barriers to good work, we will deliver support that is specific to individual needs and aspirations** – working with established and specialist organisations and local employers to ensure that there are accessible and clear pathways into work.

Summary of findings

A strong and diverse voluntary sector

- Drive social value and value for money through every pound we spend, harnessing our buying power to create benefits and opportunities for our residents. Creating social value means placing people's lives at the centre of our approach and tackling the negative elements of lived experiences of our Black, Asian and other ethnic residents and communities. This could be done by providing employment and skills development opportunities, addressing pay inequalities, creating better access to jobs, improving community cohesion and improving the environments people live and work in.
- Listen to the VCS and ensure that we maintain strong connections with the organisations that work with Camden's diverse communities. We will work with our grassroots VCS to **ensure fair access to funding and facilitate discussions with the Government and larger funders** to contribute to organisations being able to continue their vital work. We are committed to enabling collaborations across the sector to build a stronger VCS who help us to tackle structural inequalities.

Safe homes

- Work towards **reducing the number of residents who are in severely overcrowded housing** and support residents to take practical steps to mitigate the impact of living in overcrowded conditions. We aim to tackle structural inequalities through inclusive participation and procurement approaches when building homes.
 - We will explore the use of housing voids to provide some temporary accommodation as an option to protect those living in severely overcrowded housing where someone becomes ill in a second wave of COVID-19 or a similar pandemic. We will work with Public Health to agree priority households, particularly those with a family member identified as being clinically vulnerable to COVID-19.

A happy and healthy workforce

- Camden Council strives to be a great place to work and an organisation we are all proud of. Being a truly inclusive and diverse council is a vital part of this. We need to make sure that **everyone who works for Camden Council feels valued, safe and respected every day**. It is clear that despite our efforts, we have not progressed as far, or as quickly, as we would like. We will not tolerate any form of discrimination, victimisation, harassment or bullying against our Black, Asian and other ethnic workforce. We remain committed to removing all of the barriers that prevent people from being their best selves at work and fulfilling their true potential.
 - We are committed to working with the Camden Black Workers group and staff from Black, Asian and other ethnic backgrounds to ensure that all plans around inclusion and diversity are co-designed and fit for purpose. We will establish a new staff Inclusion Forum to share our plans, update our progress and hold ourselves to account.

A full set of commitments and actions are available in the full report and the appendix. This is only the start and we will continue to work with our residents and partners to shape the action plans and next steps.

The story of the COVID-19 crisis in Camden shows the real cost of an unequal society and economy, but also the power of our communities' ability to lead change. We believe that we have a once in a generation moment to turn the pain and loss of the COVID-19 crisis into a coalition for lasting change.

