



Wilton Park

Programme

Addressing the disproportionate impact of COVID-19 on minority ethnic communities

Tuesday 24 November 2020 1400-1730 (GMT) | WP1861V

Online

COVID-19 has disproportionately impacted minority and diaspora communities, particularly Black, Asian and minority ethnic people across high, middle, and low-income countries. A recent Public Health England [report](#) found that survival among confirmed COVID-19 cases showed that, for example, after accounting for the effect of sex, age, deprivation and region, people of Bangladeshi ethnicity had around twice the risk of death when compared to people of White British ethnicity. People of Chinese, Indian, Pakistani, Other Asian, Caribbean and Other Black ethnicity had between 10 and 50% higher risk of death when compared to White British. This pattern has been seen in the US as well, where the COVID-19 mortality rate for Black Americans is more than double the death rate of any other ethnic or racial group in the country. In São Paulo, data from the Brazilian Ministry of Health found ethnic minority groups are 62% more likely to die from the virus than those of white ethnicity. [Research](#) has found that this is due to a complex range of factors from social and economic inequalities (overcrowded housing, where people live, types of jobs), occupational risk, prevalence of pre-existing health conditions, historical racism, discrimination, and stigma.

COVID-19 is a test not only of healthcare systems and mechanisms for responding to infectious diseases, but also the ability to work together as a community of nations to face the common challenge. The response to this epidemic must encompass those whom society often neglects or relegates to a lesser status. The health of every person is linked to the health of the most marginalised members of the community. Preventing the spread of COVID-19 requires outreach to all and ensuring equitable access to prevention, care, and treatment. This means overcoming existing barriers to accessible healthcare and tackling long-ingrained differential treatment based on income, gender, geography, race and ethnicity, religion, or social status.

Local authorities and community led organisations have played a critical role in protecting minority ethnic people from the adverse impacts of COVID-19. How can governments work in partnership with local and faith communities to reinforce individual and household risk reduction strategies; rebuild trust within governments and with communities to reinforce messages on early identification, testing and diagnosis; and prepare communities to take full advantage of interventions including contact tracing, antibody testing and ultimately vaccination. How can COVID-19 recovery strategies actively reduce ethnic inequalities of health to create long term sustainable change. Fully funded, sustained and meaningful approaches to tackling ethnic inequalities must be prioritised.

This Wilton Park dialogue aims to:

In association with:



- identify and share best practise case studies from the UK and globally, at community level to better support national and regional responses;
- apply learnings from COVID-19 in different countries to develop strategies to rebuild trust within healthcare services and avoid stigmatisation and discrimination of minority communities, through cross-learning and synergies with local community groups;
- understand what support is needed from community leaders to enhance outreach into minority communities to encourage uptake of vital prevention services;
- promote strategies to ensure public health guidance and communication is culturally appropriate and available in different languages;
- broaden the network of organisations involved in COVID-19 efforts to ensure greater coordination and harmonisation of approaches.

This dialogue will bring together faith and community representatives and focus on supporting groups that are most at risk from COVID-19 which was a key recommendation from the Race Disparity Unit's [Quarterly report on progress to address COVID-19 health inequalities](#).

Tuesday 24 November

1345-1400 (GMT)

Orientation session

Technical check ahead of the official start of the meeting.

1400-1430

Welcome and introduction

Nancy Lee

Programme Director, Wilton Park

Keynote speaker

Michelle Bachelet

United Nations High Commissioner for Human Rights, The Office of the High Commissioner for Human Rights, New York

Respondents

Halima Begum

Director, Runnymede Trust, London

Loyce Pace

President & Executive Director, Global Health Council, Washington, D.C.

Paul Boateng

Member, Wilton Park Advisory Council; Peer of the Realm, House of Lords, London

1430-1455

1. Going beyond the statistics: Social, structural and economic determinants

Introductory session: context setting and overview of the way in which COVID-19 has disproportionately impacted minority communities. The session will identify the risks and challenges minority communities face, including: social and economic inequalities (overcrowded housing, where people live, types of jobs), occupational risk, prevalence of pre-existing health conditions, historical racism, discrimination, and stigma.

Short introductions by panellists followed by interactive discussion.

Ima Miah

Chief Executive Officer, Asian Resource Centre Croydon

Marie DesMeules

Director, Social Determinants of Health Division, Public Health Agency of Canada

Michael O'Flaherty

Director, European Union Agency for Fundamental Rights (FRA), Vienna

1455-1500

Break

1500-1520

2a. Shared learnings: Where are the gaps, what are the solutions, and what support is needed?

This session will illustrate different responses to supporting minority communities, through case study examples, demonstrating different adaptable approaches that have been deployed to protect minority communities, at healthcare and community levels. Discussions will also identify where extra support is required. What is missing and what can be done? What might be required to change health systems?

Short introduction by panellist followed by interactive discussion.

Charles Kwaku-Odoi

Chief Officer, Caribbean and African Health Network, UK

1520-1550

2b. Breakout groups

- What are the required long-term strategies and how can this be funded adequately to respond to long-term systematic inequities?
- What type of support is needed by community and faith organisations?
- How can government and healthcare institutions build trust amongst those that have been marginalised?
- From a health systems perspective, looking forward, what needs to be considered to redress disproportionate impact of COVID-19 on ethnic minorities?

Facilitators**Daniel Dawes**

Director, Satcher Health Leadership Institute, Morehouse School of Medicine, Atlanta

Chi-Chi Ekhaton

General Practitioner, GP NHS Appraiser, National Health Service; Chair, Ascension Trust, London

Ripon Ray

Founder, Britbanglacovid.com, London

Elen Høeg

Senior Policy Manager, Coalition for Epidemic Preparedness Innovations, Oslo

1550-1605

2c. Feedback

1605-1610

Break

1610-1635

3a. Next steps: Commitments for moving forward

How to increase funding and resources, political will, and demonstrating success? What are three actions that can be carried out next? Who else needs to be engaged in these discussions? How can actions be taken forward?

Short introductions by panellists followed by interactive discussion.

Kevin Fenton

Regional Director, Public Health England London; Regional Director of Public Health, National Health Service London

Lisa Hilmi

Executive Director, CORE Group, US

Salma Abdalla

Analyst, The Independent Panel for Pandemic Preparedness and Response, Geneva

1635-1705

3b. Breakout group

Each breakout group will be asked to come up with one action they and other groups can take forward as an organisation or as individuals.

- What would this group prioritise to see happen next?
- How can adequate funding and resourcing be obtained and then appropriately implemented for equitable health outcomes? What policy change is needed?

Facilitators

Roopa Dhatt

Executive Director & co-Founder, Women in Global Health, US

Jennifer Messenger

Executive Vice President, Metropolitan Group, Portland

Tim Elwell-Sutton

Assistant Director of Strategic Partnerships, Health Lives team, The Health Foundation, London

Sufyan Dogra

Senior Research Fellow, Bradford Institute for Health Research

1705-1725

3c. Feedback

1725-1730

4. Conclusion and next steps

Nancy Lee

Programme Director, Wilton Park

1730-1740

Informal networking

The Zoom meeting room will stay open for 10 minutes for optional networking.

This is an invitation only conference.

Enquiries about the programme to:

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