

Supplementary written evidence submitted by Professor Lucinda Platt (CVB0003)

Here follow some additional points of clarification or additional information that I hope may be useful to the committee in relation to the questions posed today. I also provide some statistics which are not available in existing published sources, as I prepared them specifically for the evidence session, alongside links to additional sources. The points also relate to some of the issues powerfully raised in the second panel session.

I have aimed not to repeat anything I already said in the evidence session. I would of course be happy to supply further information or evidence on any of these points or any of my earlier statements if desired.

- I noted the importance of using and reporting disaggregated ethnic groups, given their different demographic, geographic, family, and occupational profiles, but also distinguishing by whether UK born or not. For example, Black Africans have the highest disproportionate mortality are disproportionately likely to work in social care roles (Black African men at seven times the rate of White British men and Black African women at four times the rate of White British women) and those of working age are predominantly (85%) non-UK born. The reason for the importance of the latter distinction is that:
 - a) immigrants tend to be more occupationally concentrated than the UK born;
 - b) while some immigrants will be British citizens or have indefinite leave to remain / settled status, for others their status will be contingent on their employment, leaving them fewer options to remove themselves from workplaces where they may be at risk or at risk of infecting others;
 - c) relatedly, some will have no recourse to public funds, as discussed in the second panel session, leaving no options to claim benefits if work ceases, and some will also be subject to health surcharge and visa fees necessitating ongoing engagement in paid work. For example, 2% of care workers across the four years 2016-2019 had been in the UK for less than 5 years at the time they were surveyed. While this may seem a small percentage, it amounts to a substantial number of workers.
 - There are also issues for families where family reunification requires no recourse to public funds if the worker loses their employment.
- While the situation of health workers is a very important issue as was discussed, overall deaths have been highest for drivers, care workers (around 25% of whom are not UK born) or security guards (around one-third of whom are not UK born), and chefs. Those from specific minority ethnic groups are over-represented in all these roles (e.g. Pakistanis among drivers, Black Africans among security guards, Bangladeshis among chefs). These roles are also associated with economic vulnerability, in terms of job security, and possibilities of negotiation with employers, and therefore merit particular attention for understanding the excess patterns of covid-19 mortality.
- More broadly the adequacy or otherwise of safety nets and social security and healthcare provision for ethnic minorities cannot be considered in isolation from immigration rules with which it interacts, and which have been shown to have ['unintended consequences'](#) for legitimate applicants.
- In terms of household density and (avoidance of) infection, as well as the ONS overcrowding statistics cited, the average size of households varies: 2.3 persons on average for White British, around 3 for Indian and Black African households, and around 4 for Pakistani and Bangladeshi households expanding the number of people who someone who is infected may come in in contact with. Multigenerational households with

children, working age adults and pension age adults are also more common among Pakistani and Bangladeshi households (5% compared to less than 1% White British) extending the potential for household infection.

- There was a question about local authority responses to local area deprivation, with a focus on housing. A general discussion of neighbourhood-based approaches to local deprivation is beyond the scope of this evidence, and it is not clear that neighbourhood deprivation is particularly implicated in driving ethnic disparities in impacts of covid-19. Moreover, while on average minorities are more likely to live in deprived areas, there is little evidence that the effects of such location are worse for minorities than for any facing deprivation. Instead deprived areas are those with higher shares of deprived individuals, who lack employment income or adequate safety nets, areas that are largely beyond local authorities to resolve. However, I would note that local authorities have faced substantial reductions in budgets over recent years, as well as the loss of housing grants, which places some limits on what they can achieve in terms of providing housing. They have also taken on additional public health roles, to which reduced budgets present challenges. There is, nevertheless, extensive evidence about the effective use and [upgrading](#) of housing stock
- There was a question about the impact on women in terms of work, which I responded to, but there is also a wider issue about the family circumstances of workers who have been laid off of either sex. First, workers cannot be laid off if they are out of work and unemployment rates are substantially higher than the average for Black Caribbean, Black African, Pakistani, and Bangladeshi women. In addition, some workers who are vulnerable to shut-down are more likely to have dependents, not only are Bangladeshi men, for example, more likely to work in shut-down sectors but they are also more likely to be older and have family responsibilities. Over half of Bangladeshi men aged 45-59 work in a sector that has faced shutdown; and while 29 per cent of Bangladeshi men both work in such a sector and live with a partner not in work, compared to 1 per cent of White British men in this situation. Women's economic position is also, thus, affected by the economic stability of other family workers.
- The psychological effects of lock-down have [been suggested to be greater for minority group women](#), but without breakdowns by specific ethnic group and linking to family contexts it is harder to infer causes or potential mitigation for such effects. Future analysis will investigate this issue.
- Where there is access to social security, it may offer more or less of a safety net depending on family circumstances, given the two-child limit in universal credit, and the benefit cap, with implications for child poverty. [Child poverty rates](#) already differ markedly across ethnic groups, with Pakistani and Bangladeshi child poverty rates double those of Indian and White British children, with Black groups in-between. The negative impacts of child poverty are well attested and the impacts of the current crisis on families and children of affected workers may well exacerbate the risks of poverty. For instance, Bangladeshi, Pakistani and black African workers in industries that have been affected by the shutdown have 1.5 children on average, compared to less than one for workers in this situation from other ethnic groups.
- A further issue for families and children are the consequences of missing school – not just on education but also psychologically and on social contacts. School performance varies considerably by ethnic group but most minority groups are now outperforming their White British counterparts, particularly when taking account of free school meal receipt. Whether attainment will be differentially affected is a question to which we do not yet know the answer, though it is likely to increase socio-economic inequalities in educational attainment. Current research is also examining the extent to which

educational support varies by ethnicity. School also offers an important context for [social interaction with those from different backgrounds](#), and this important aspect of school socialisation may be impacted by the closing of schools and the nature of the return, regardless of any educational effects.

- Those leaving education and currently in post-compulsory education are also likely to be [particularly vulnerable to economic impacts of the crisis](#). The great recession impacted [youth employment particularly severely](#), and among youth, rates of unemployment were particularly high for Black Caribbean youth. We might therefore anticipate that such patterns are likely to be repeated in the current economic crisis.
- There was a question about the role of a possible commission to investigate ethnic inequalities. While I was not asked to comment on this question directly, I would note that the current context does not invalidate the extensive knowledge we already have about ethnic inequalities and diversity across ethnic groups in educational and occupational outcomes, as well as the insights from across disciplines including organisational research, law, sociology and economics, into more and less effective ways of addressing economic, labour market and workplace inequalities, at the level of employers as well as wider policies. It is not immediately clear what additional knowledge a further commission would bring at this point.

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