COVID, Race and Racism

Miqdad Asaria 16 June 2020



1. Race, biology and history

Race is not biological

History is fundamental to understanding of race in Britain

BAME people are in the UK because of colonialism and slavery

The relationship between BAME people and White British people is predicated on a history of racial hierarchy

2. COVID and excess deaths in BAME communities

Black women are 4.3 times more likely to die from a COVID-19-related death than White women (ONS)

Black men are 4.2 times more likely to die from a COVID-19-related death than White men (ONS)

Bangladeshi/Pakistani women are 3.4 times more likely to die from a COVID-19-related death than White women (ONS)

Bangladeshi/Pakistani men are 3.6 times more likely to die from a COVID-19-related death than White men (ONS)

3. How has this inequality been explained

COVID is particularly interesting because we have no science yet - research hypotheses guided by assumptions

The moral position you hold on race and history will shape assumptions, research questions and interpretation of findings

Many people believe BAME people are innately biologically inferior and/or culturally deficient

"The continent [Africa] may be a blot, but it is not a blot upon our conscience ... The problem is not that we were once in charge, but that we are not in charge any more."

Boris Johnson - UK Prime Minister - The Spectator - 2 February 2002

"Yet having been inculcated with the unchallengeable belief that they are victims of white society, black people believe that any disadvantage they may suffer is not the result of bad luck, circumstances beyond anyone's control or (perish the thought) their own behaviour but must be the product of white racism"

Melanie Phillips - BBC Moral Maze Panelist and Journalist - The Times - 8 June 2020

"As it happens, prior medical complications are not found in equal proportions in all ethnic groups ... These differences have no connection to discrimination ...

Then there are cultural differences. South Asians are more likely to live in large households comprising three generations ... These are lifestyle choices unrelated to discrimination"

David Green - Director, CIVITAS - Daily Telegraph - 5 April 2020

"Let us not in this House use statements like 'being black is a death sentence', which young people out there hear, don't understand the context and then continue to believe that they live in a society that is against them when actually this is one of the best countries in the world to be a black person."

Kemi Badenoch - Minister for Equalities - BBC report on parliamentary debate - 4 June 2020

The pervasiveness of these beliefs have resulted in many researchers running models adjusting out the social determinants of health shaped by structural racism and instead looking for answers in the innate biological or cultural inferiority of non-White races

Others have instead viewed the racial hierarchies underpinning British society as unjustified and instead focussed on structural racism and discrimination as causes of COVID deaths

"Structural racism abounds in the UK...We need starting now, to address structural racism and the deep-seated inequalities that cause inequalities in health."

Sir Michael Marmot - Director, Institute of Health Equity, UCL - RCP - June 2020

"We also need to know how far the British, every bit as much as the Germans, helped codify a system of scientific racism, creating a hierarchy of race that put white Caucasians at the top and blacks, "wandering Jews" and Indian Muslims at the bottom. Yet while the Germans have faced up to the darkest periods of their past, and are taught about it unvarnished in their schools, we have not even made a start to this process."

William Dalrymple - English Historian - Guardian - 11 June 2020

"But these two moments are not disconnected. It is increasingly clear that COVID-19 is having a disproportionate impact on our black, Asian and minority ethnic (BAME) patients, friends and colleagues. And this in turn has brought into stark and urgent focus the layered impacts of years of disadvantage and inequality.

The flash point may have been righteous anger at the murder of George Floyd in Minneapolis. But it would be wrong to marginalise this moment by trying to compartmentalise it: as racism 'over there in America, not here in Britain'. Or racism as 'part of our history – from slavery to the Windrush, but not our lived present'.

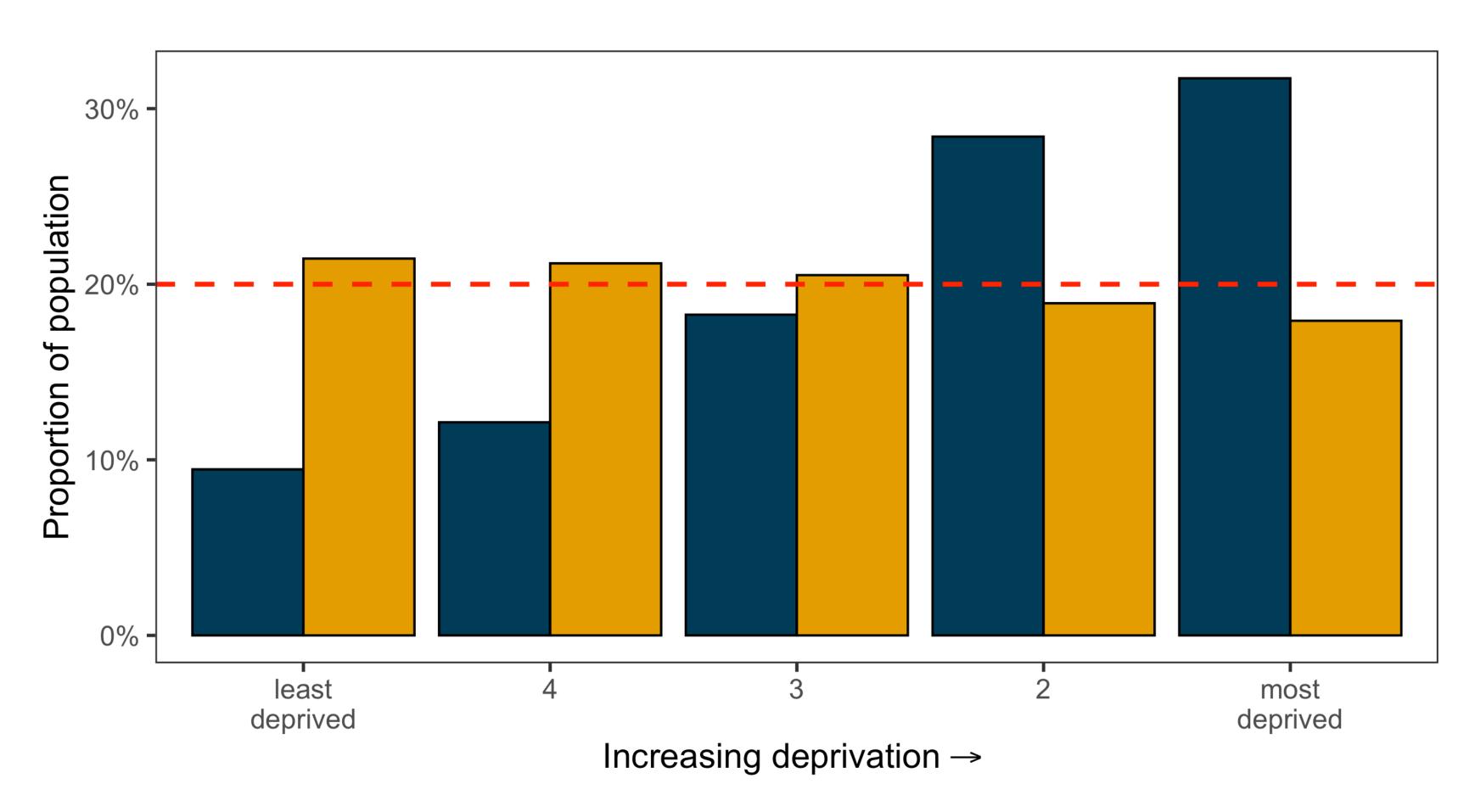
That would be to misunderstand and obscure important truths about fairness and equality in modern Britain."

Sir Simon Stevens - CEO NHS England - Letter to NHS staff - 9 June 2020

Researchers who hold such views have explored racially patterned inequalities in the social determinants of health and their impacts on the likelihood of catching, having a severe case of and receiving good care for COVID

Index of Multiple Deprivation by Ethnicity





4. The way ahead

"The function, the very serious function of racism is distraction. It keeps you from doing your work. It keeps you explaining, over and over again, your reason for being. Somebody says you have no language and you spend twenty years proving that you do. Somebody says your head isn't shaped properly so you have scientists working on the fact that it is. Somebody says you have no art, so you dredge that up. Somebody says you have no kingdoms, so you dredge that up. None of this is necessary. There will always be one more thing."

Toni Morrison

"If you can only be tall because somebody is on their knees, then you have a very serious problem. And my feeling is, white people have a very, very serious problem and they should start thinking about what they can do about it."

Toni Morrison

Interventions to address structural racism and discrimination are crucial if we are to stem the cries of "I can't breath" on our streets and in our hospitals - our willingness to pursue these will indicate whether or not as a society we genuinely believe that Black Lives Matter