

COVID-19 and ethnic inequalities

Ross Warwick, Institute for Fiscal Studies

An IFS initiative funded
by the Nuffield Foundation

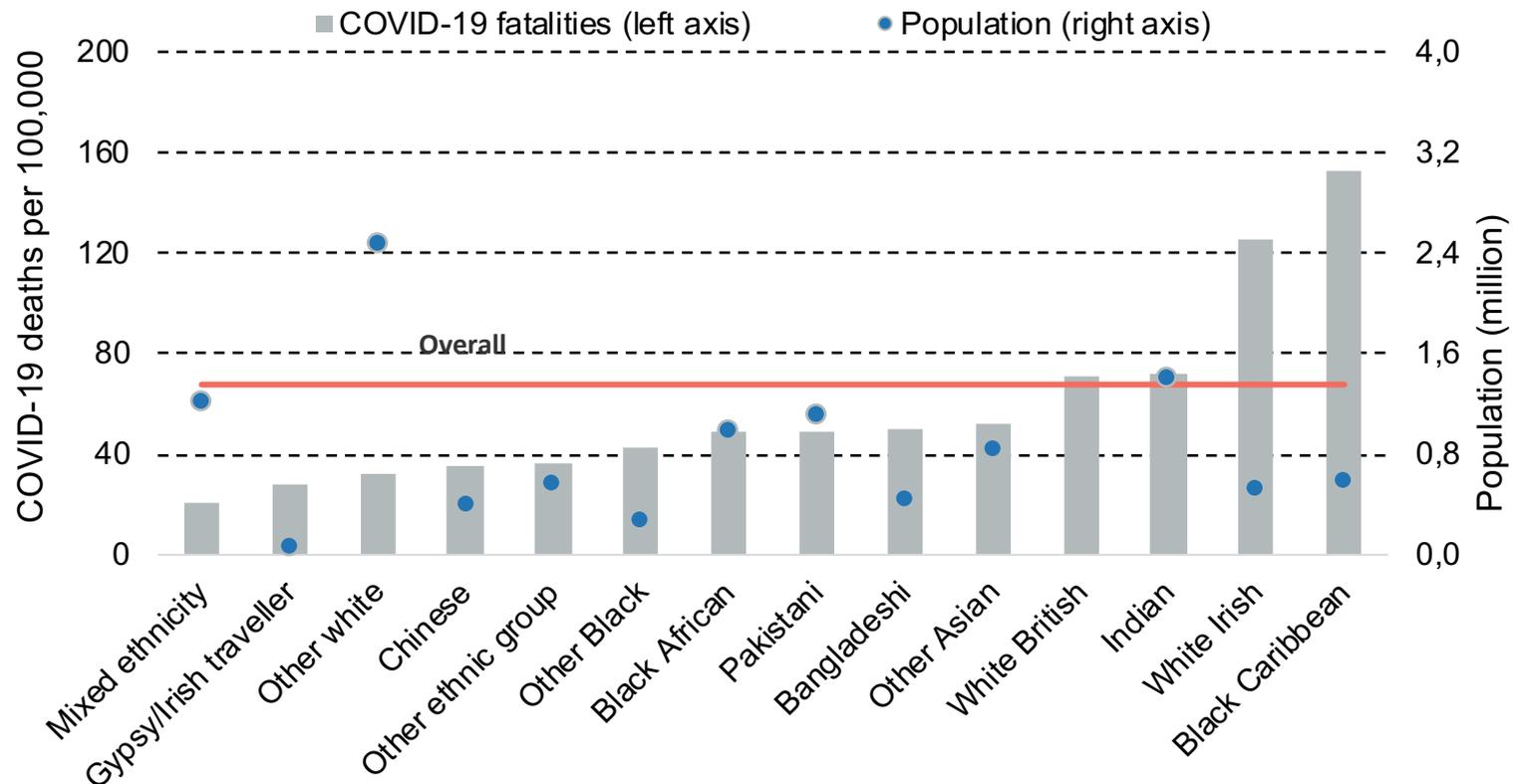


The IFS Deaton Review

Overall COVID-19 mortalities by ethnic group

There are big differences between different ethnic groups, including between different minority populations

The overall picture doesn't account for the very different profiles of groups

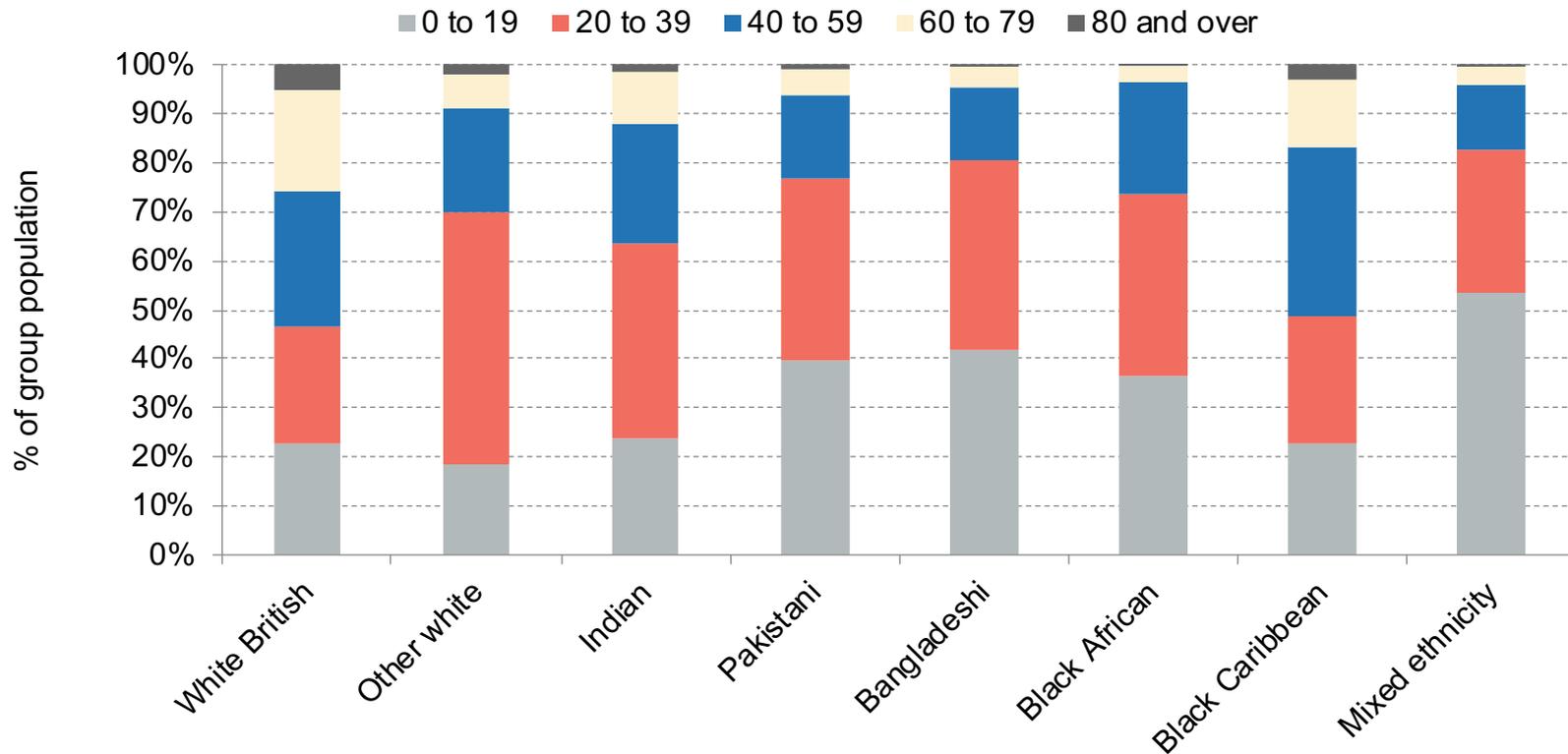


Source: author's calculation using ONS statistics on COVID-19 death occurrences by ethnic group as of 15th May and the 2011 Census of England and Wales

Age and location are two key risk factors

Many ethnic minorities are concentrated in specific parts of the country: at the 2011 Census, almost 60% of the black population lived in London

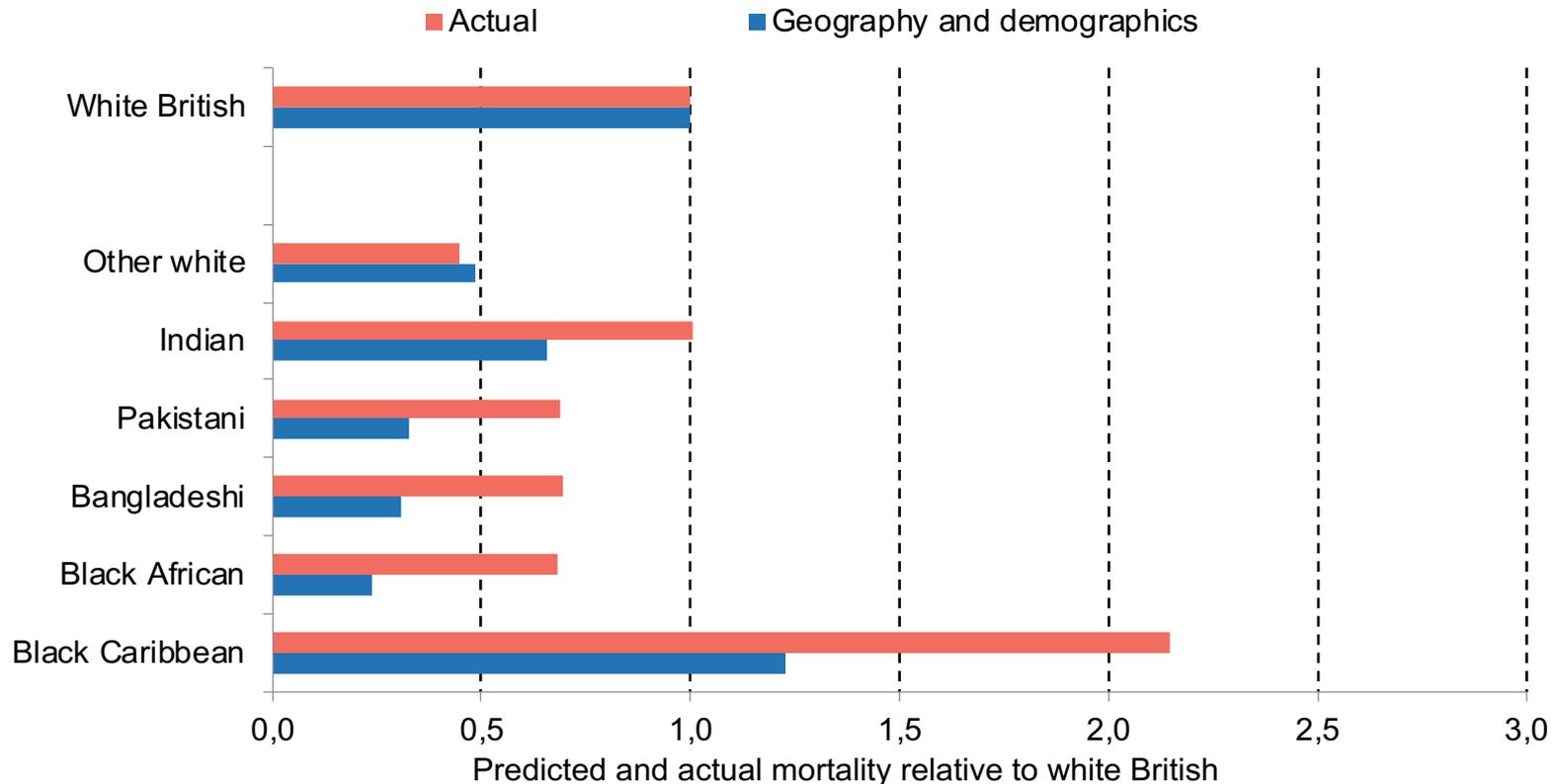
However, most minority groups are also disproportionately young



Source: 2011 Census of England and Wales

Disproportionalities in mortality

ONS analysis has confirmed these conclusions, and has also highlighted that ethnic inequalities are particularly large for men

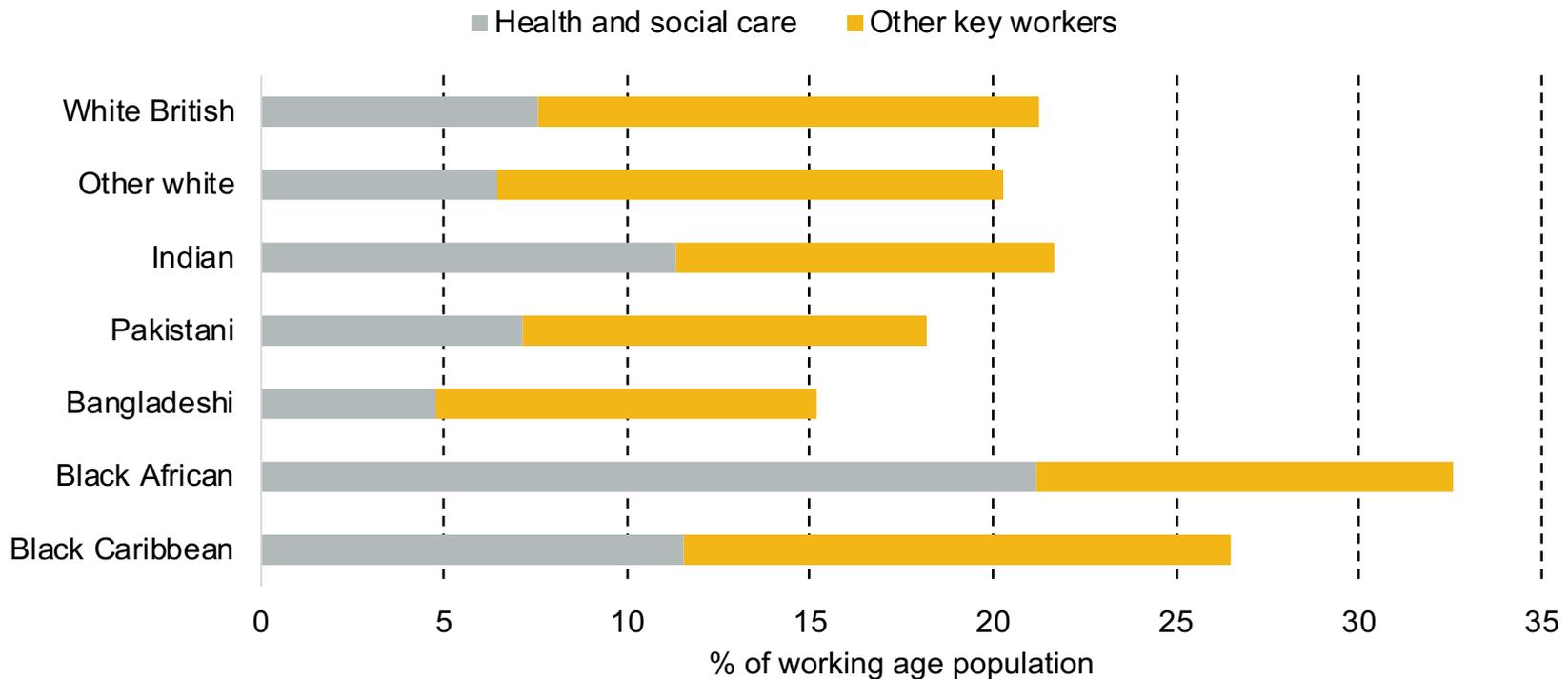


Source: author's calculations using data from ONS on weekly occurrences of COVID-19 deaths up to May 15th, and the 2011 Census of England and Wales

Occupational exposure

Key worker employment is most common in the black British population

ONS analysis has documented big differences in mortality by occupation, but so far there isn't direct evidence that this channel explains ethnic inequalities

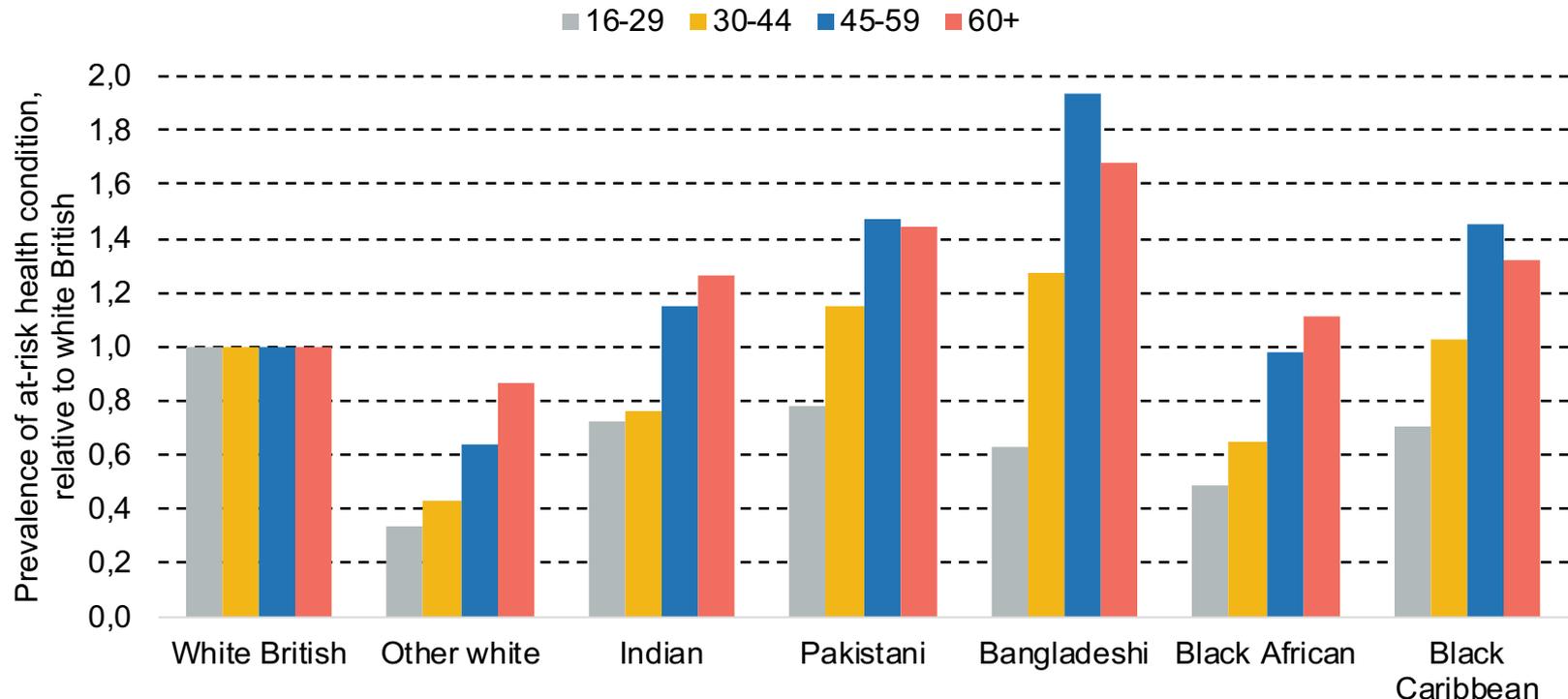


Source: author's calculations using the Quarterly Labour Force Survey, 2016Q1-2019Q4.

Underlying health conditions likely plays some role

At-risk health conditions are more prevalent in most ethnic minority populations – at least outside of younger age brackets

Research using hospital records has identified comorbidities as a factor e.g. diabetes for south Asians



Source: author's calculations using the Quarterly Labour Force Survey, 2016Q1-2019Q4. Includes self-reported chest and breathing problems, heart, blood pressure or circulation problems, and diabetes.

Much remains unknown – including the long term impacts



There are inequalities in health outcomes but we don't fully understand why

- This makes it harder to design immediate policy responses

The short and long-term economic effects will also have implications for ethnic inequalities

- Some groups have been hit particularly hard by the lockdown – Bangladeshi and Pakistani men are disproportionately likely to work in 'shutdown sectors'
- Educational disruption has widened inequalities in access to educational resources and time spent learning

Might there be opportunities to address inequalities too?

- New work patterns enabling regional rebalancing
- Changes in public awareness and attitudes: on role of certain types of work, the benefit system in society, and ethnic inequalities specifically