

Launch event: COVID-19 impact inquiry

Monday 5 October 2020



Join the conversation on Twitter
[#COVID19ImpactInquiry](https://twitter.com/COVID19ImpactInquiry)

COVID-19 impact inquiry

What we know so far

Tim Elwell-Sutton, Assistant Director (Healthy Lives)

October 2020



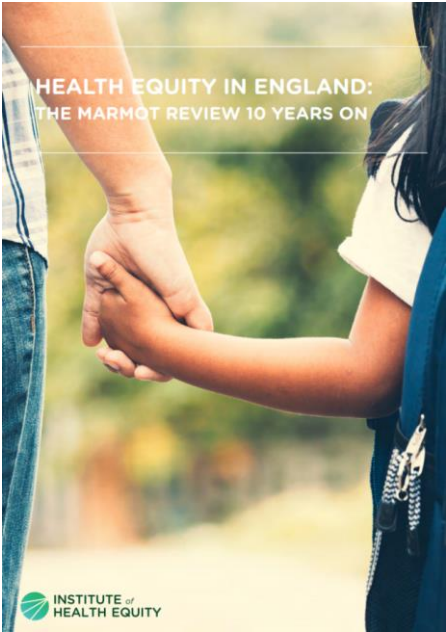
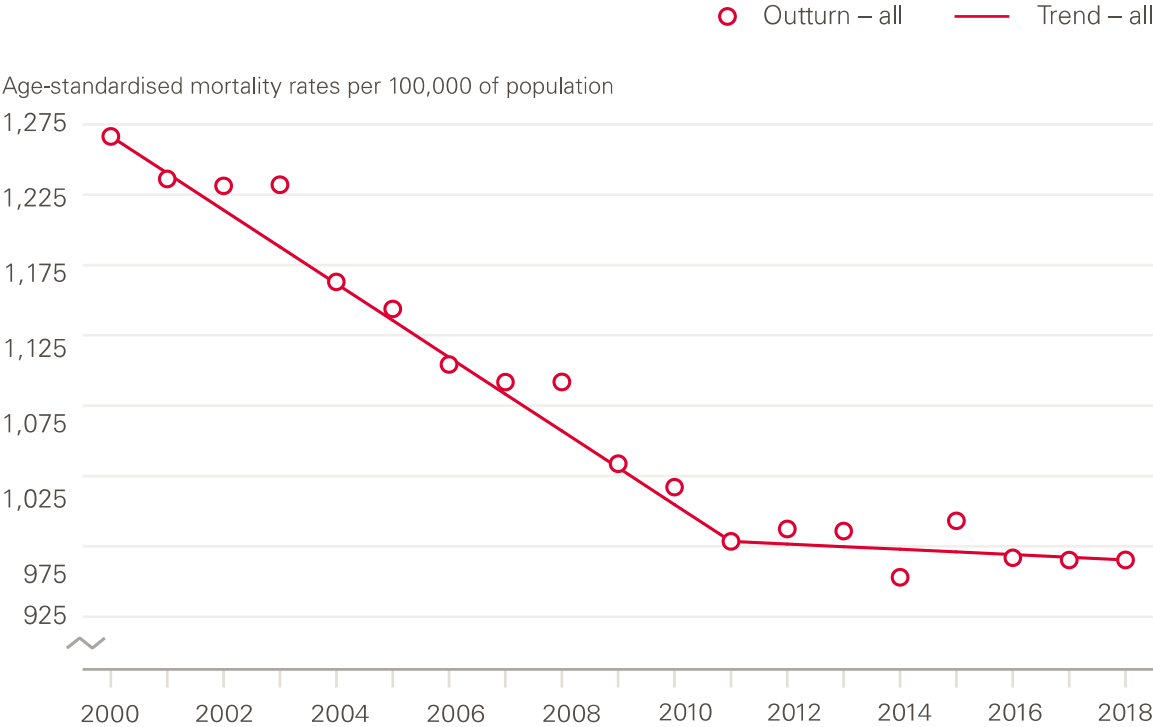
Join the conversation on Twitter:
[#COVID19ImpactInquiry](#)
[@tim_esPH](#)

The starting position

Health and health inequalities going into the pandemic

Pre-pandemic: health trends

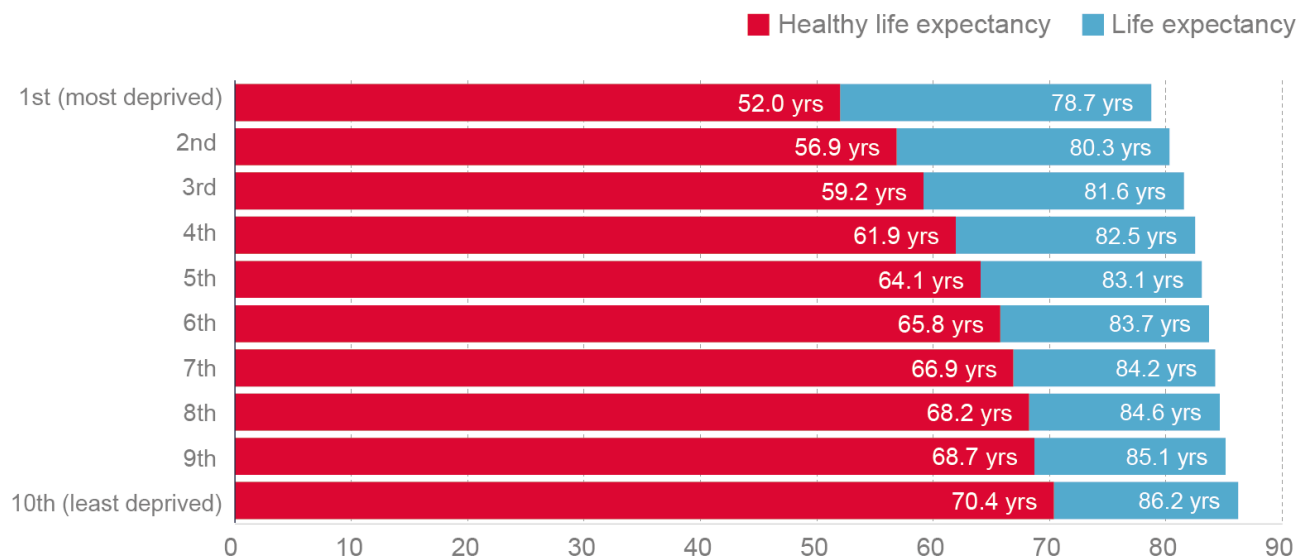
The changed trend in mortality rate improvements: England and Wales, 2000–2018



Pre-pandemic: health inequalities

Female life expectancy and healthy life expectancy at birth

By decile of deprivation, England: 2015-17



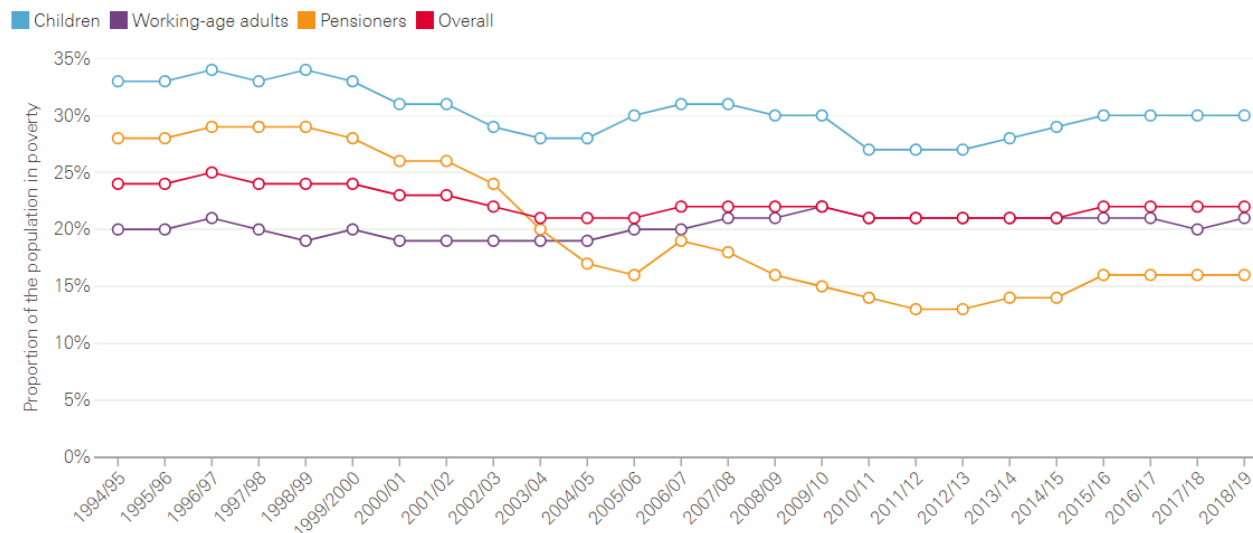
Inequalities in health resilience:

- One in four adults had 2+ health conditions, around 14.2m people in England
- People in the most deprived areas have 2+ health conditions 10 years earlier than in the least deprived areas on average

Pre-pandemic: economic and social resilience

Poverty trends flat in recent years despite employment increases

Poverty rates by household type, % households below 60% of median income AHC: UK, 1994/95–2017/18



The years leading up to the pandemic saw:

- Employment rising to high levels but quality of work and incomes stagnant
- 65% of low-income families had no savings or savings below £1,500
- Major cuts to public services especially in more deprived areas

The impact of COVID-19

Health and health inequalities during the pandemic

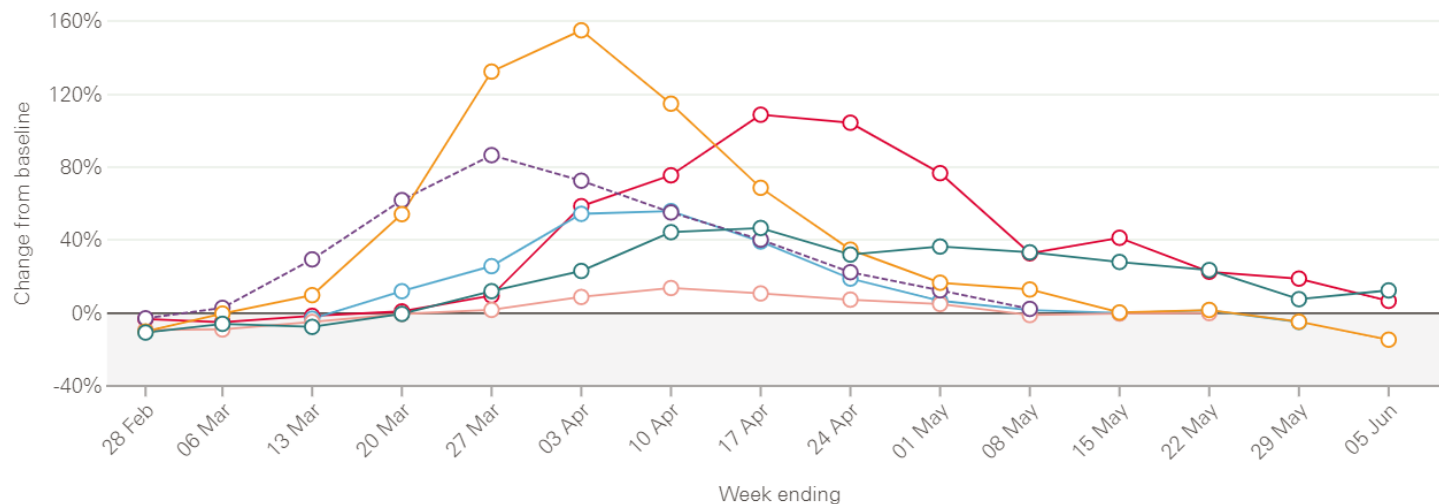
Impact on the nation's health

Weekly excess deaths for selected European countries

Change from baseline weekly deaths, by week, 2020

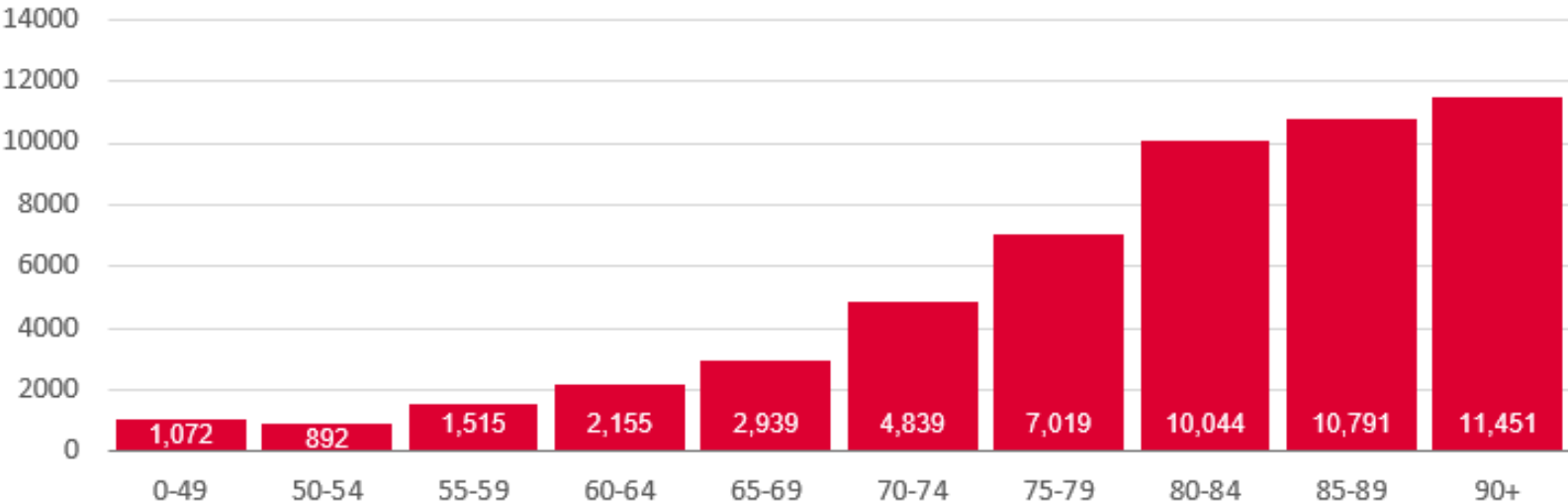
Select countries to show

UK France Germany Italy Spain Sweden



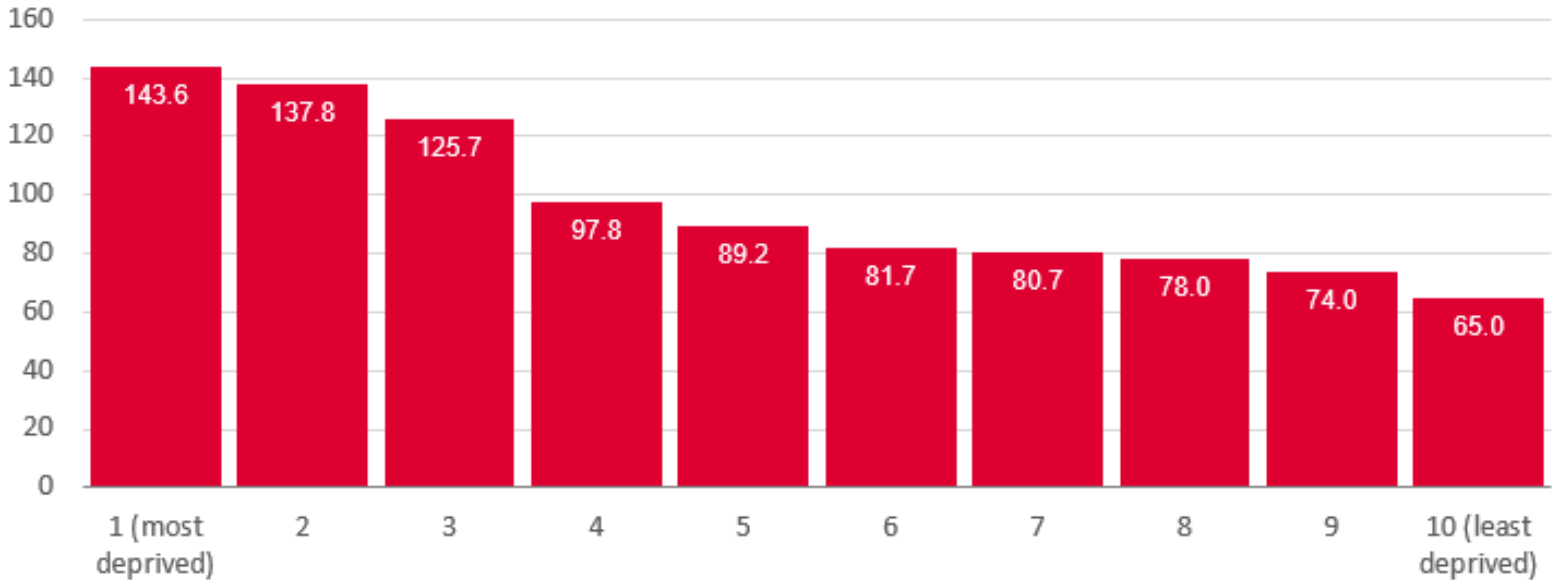
Impact on the nation’s health

Deaths involving COVID-19 by age, January to September 2020



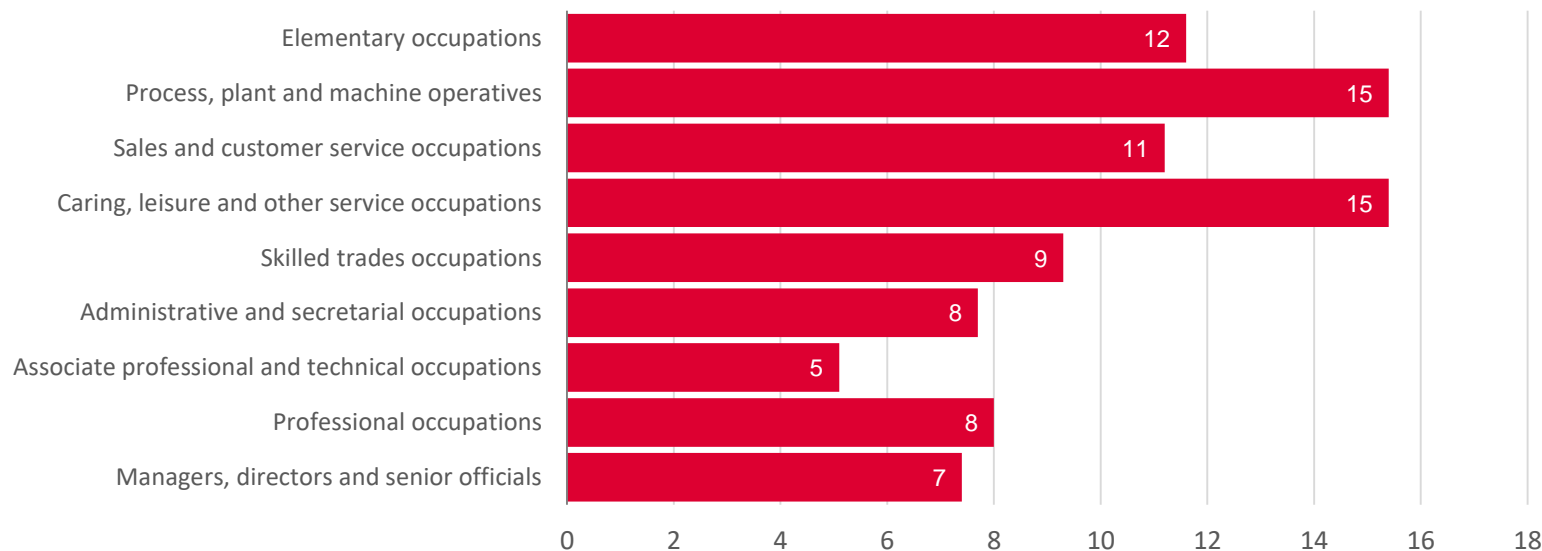
Impact on the nation’s health

Age-standardised mortality rate per 100,000 for deaths involving COVID-19 in England and Wales between March and July 2020



Impact on the nation's health

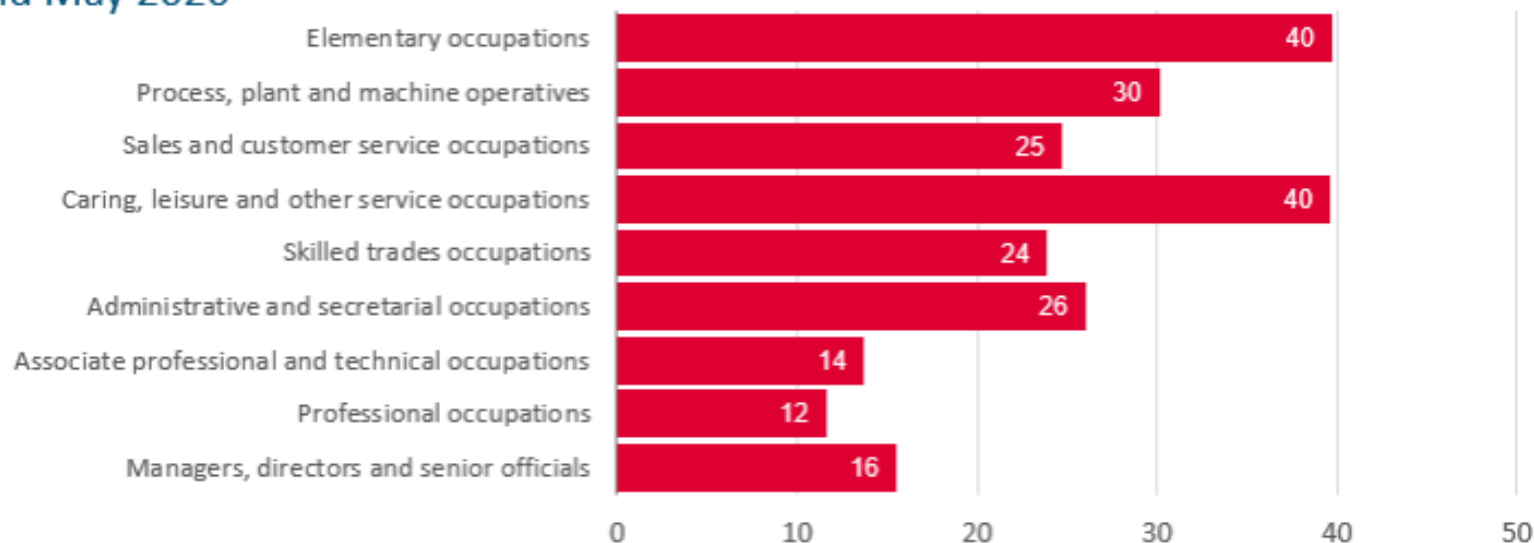
Age-standardised mortality rate for women 20-64 per 100,000 for deaths involving COVID-19 in England and Wales between March and May 2020



Source: Coronavirus (COVID-19) related deaths by occupation, England and Wales: deaths registered between 9 March and 25 May 2020

Impact on the nation's health

Age-standardised mortality rate for men 20-64 per 100,000 for deaths involving COVID-19 in England and Wales between March and May 2020

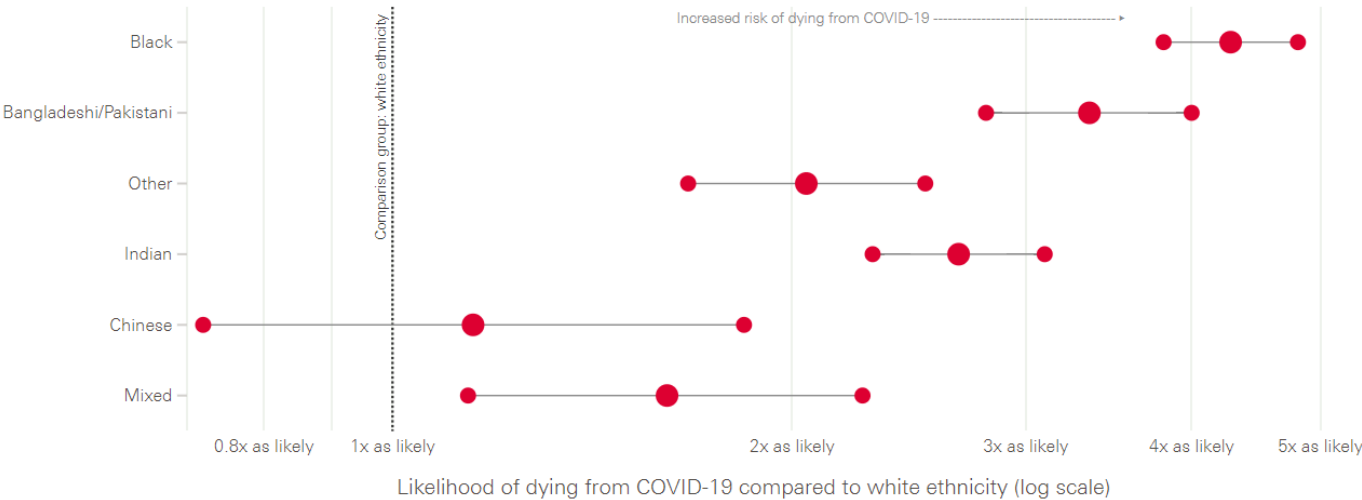


Some groups are more affected than others

The risk of COVID-19 related death is more than four times as high for people of black ethnicity than for those of white ethnicity after adjusting for age

Risk of COVID-19-related death by ethnic group and sex, England and Wales, 2 March to 10 April 2020.

Women

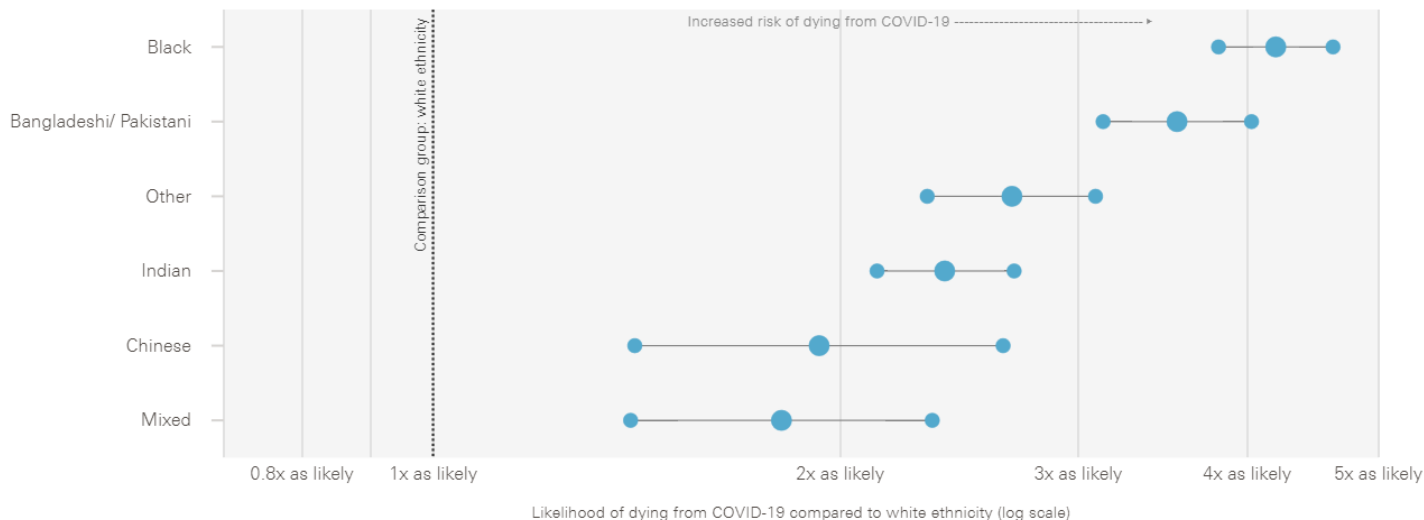


Some groups are more affected than others

The risk of COVID-19 related death is more than four times as high for people of black ethnicity than for those of white ethnicity after adjusting for age

Risk of COVID-19-related death by ethnic group and sex, England and Wales, 2 March to 10 April 2020.

Men



Mental health impacts have been large and unevenly distributed

- Mental health scores have declined by 8.1% since pre-COVID levels
- Disabled people: 46% report the pandemic has made their mental health worse compared to 18% for non-disabled people
- Young people and health workers: 71% of young health care worker report worse mental health



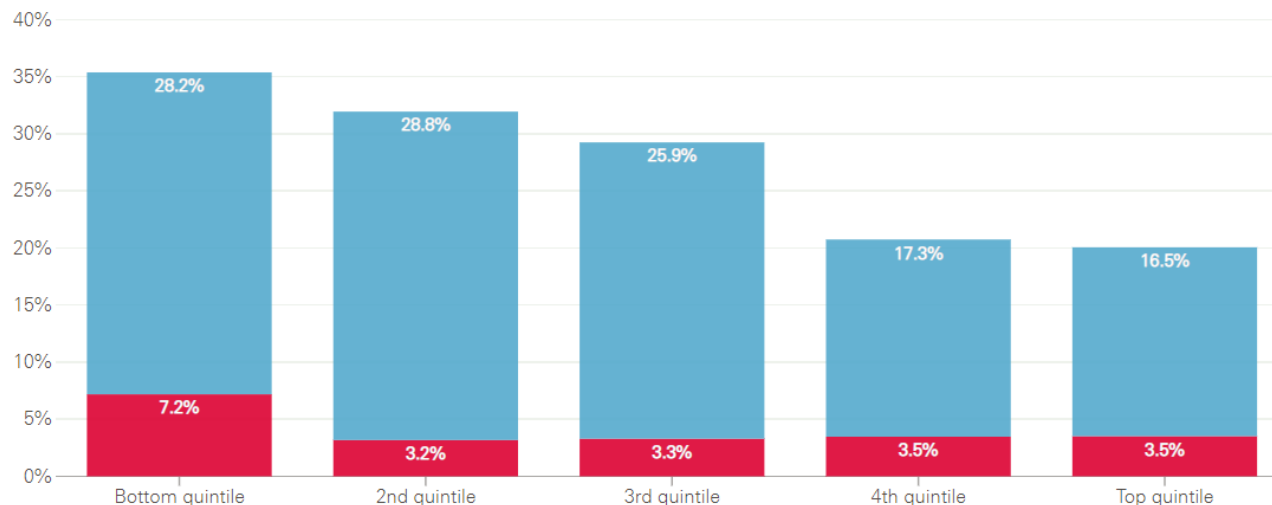
Long-term impacts

Economic and social impacts have long-term health consequences

Employment impact has been greatest for those previously on the lowest incomes

Changes to employment earnings by income quintile: UK, 2020

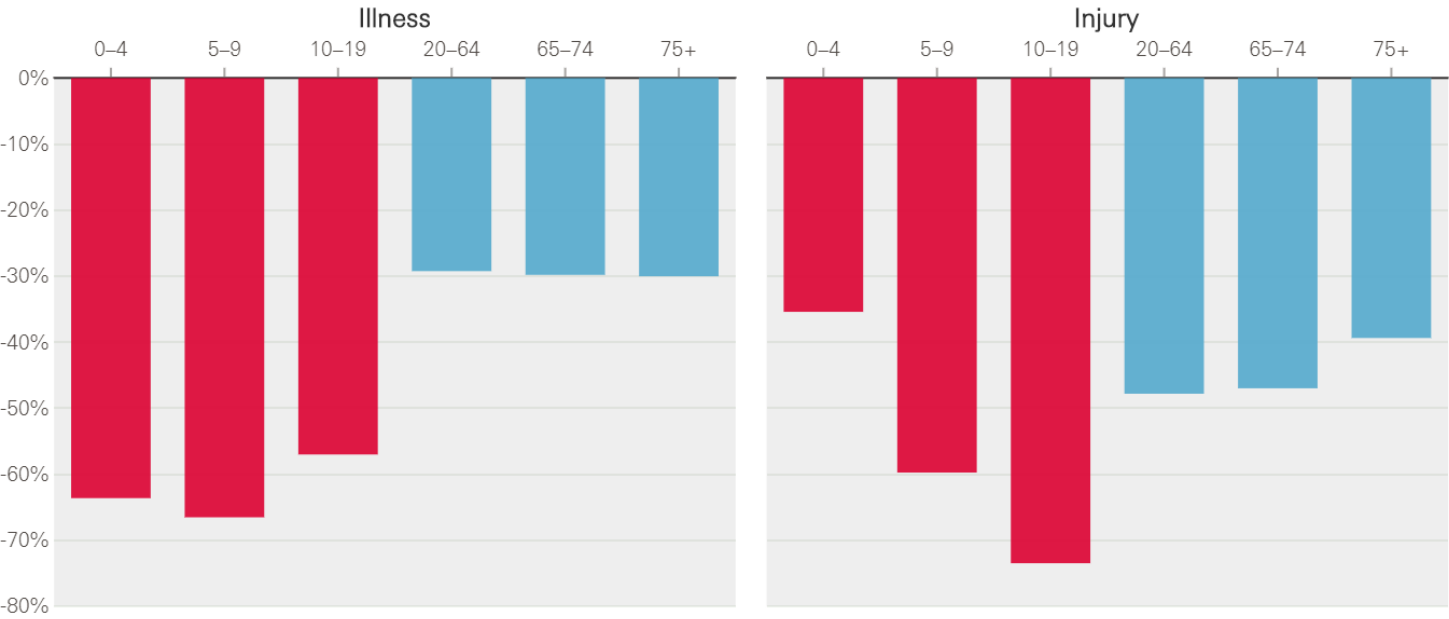
- Proportion of those in work in January / February losing employment by April
- Proportion of those in work in January / February placed on furlough by April



“The pattern of employment loss and furloughing by income suggests that the future economic consequences of COVID-19 may be borne by those on lower incomes. This in turn risks an additional long-run burden on health”
Adam Tinson, the Health Foundation

Access to health-care services

Visits to A&E have fallen by much more for children and young people than for adults
Percentage change in visits to A&E, by age group: England, between 18 March–19 May 2019 and 2020



Intersectionality: the same people affected in multiple ways

Mental health

(Mental health has declined more than in other age groups)

Employment

(Twice as likely to have lost their job or been furloughed)

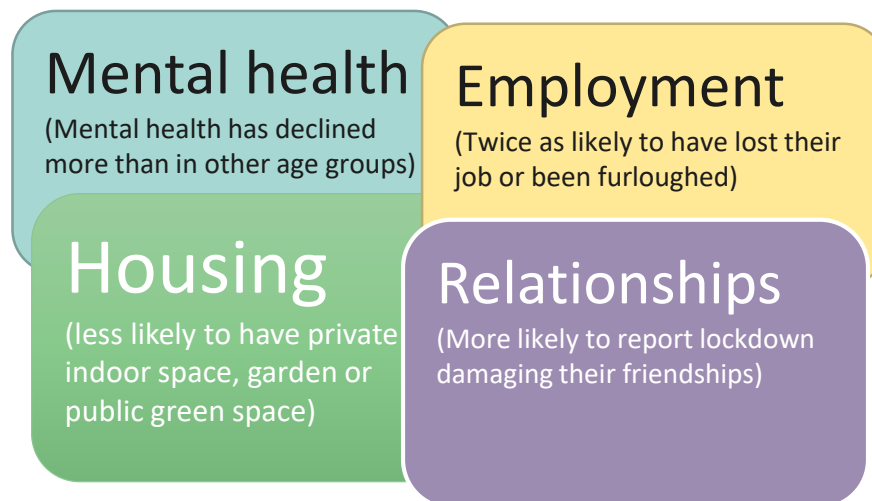
Housing

(less likely to have private indoor space, garden or public green space)

Relationships

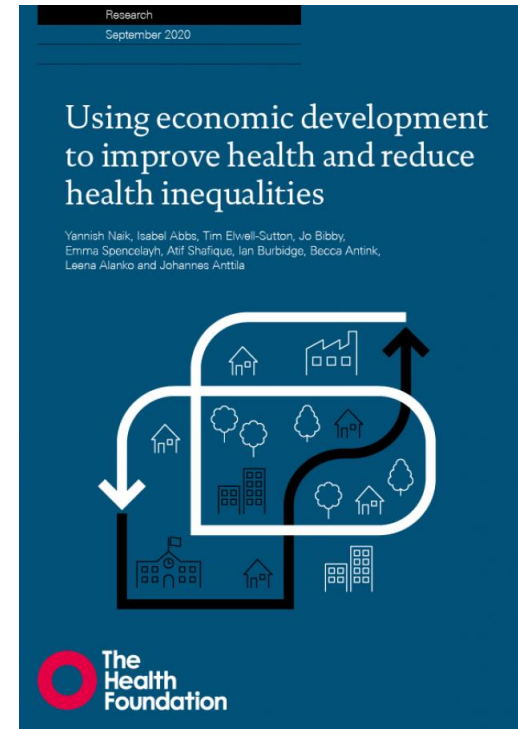
(More likely to report lockdown damaging their friendships)

Intersectionality: the same people affected in multiple ways



Are there some positive things to build on?

- Volunteering and community spirit
- Statutory sick pay and Universal Credit Increases
- Recognition of health inequalities
- A opportunity to build back better?



Thank you



COVID-19 impact inquiry

Mehrunisha Suleman

Monday 5 October



Join the conversation on Twitter
[#COVID19ImpactInquiry](https://twitter.com/COVID19ImpactInquiry)

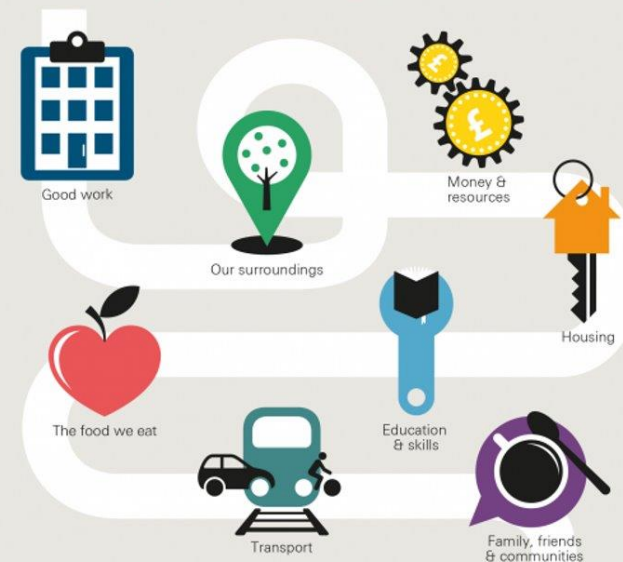
Aim

The aim of the COVID-19 Impact Inquiry is to produce a **‘touchstone’ report** describing the **impact of, and impact on,** health inequalities in relation to **Covid-19** and the **wider government and societal response** across the UK

What makes us healthy?

Good health matters, to individuals and to society. But we don't all have the same opportunities to live healthy lives.

To understand why, we need to look at the bigger picture:



The healthy life expectancy gap between the most and least deprived areas in England is over **18** YEARS

Find out more: health.org.uk/what-makes-us-healthy

Scope

Distil and draw together into a coherent record

Examine the impact of the pandemic on the nation's long-term health and health inequalities to inform decision making in the recovery phase **"Three Time Stamps"**

Spotlight specific areas of inequalities that need more focused attention.

Black, Asian and Minority Ethnic groups, Gender, Mental Health, Disability, Young and Old people, Care home & nursing home residents, Key workers, Carers, Digital Inclusion, New inequalities, Vulnerable groups (prisoners, homeless, shielding)

Intersectionality



Image: Adobe Stock

1. How did existing health status influence people's experience of Covid19?

1. Implications for exposure,
severity and outcomes

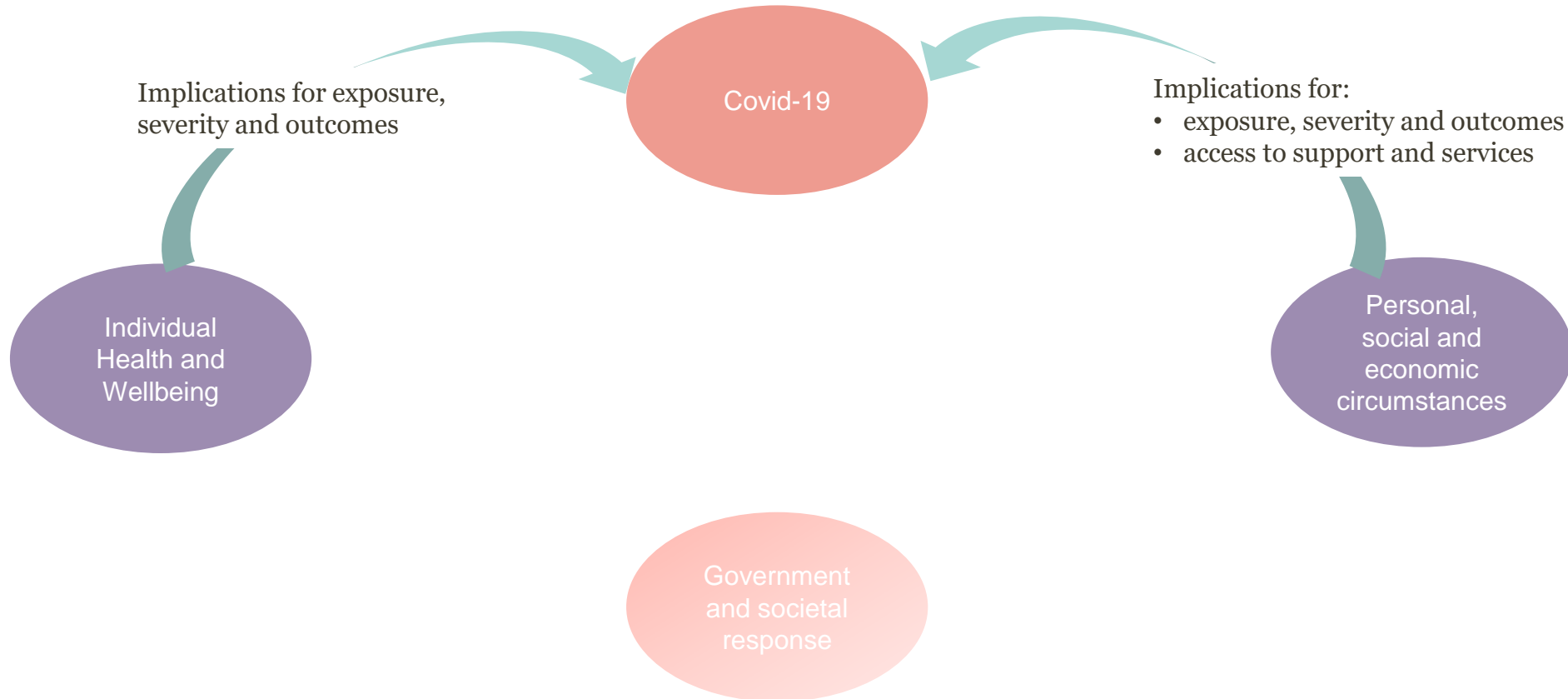
Covid-19

Individual
Health and
Wellbeing

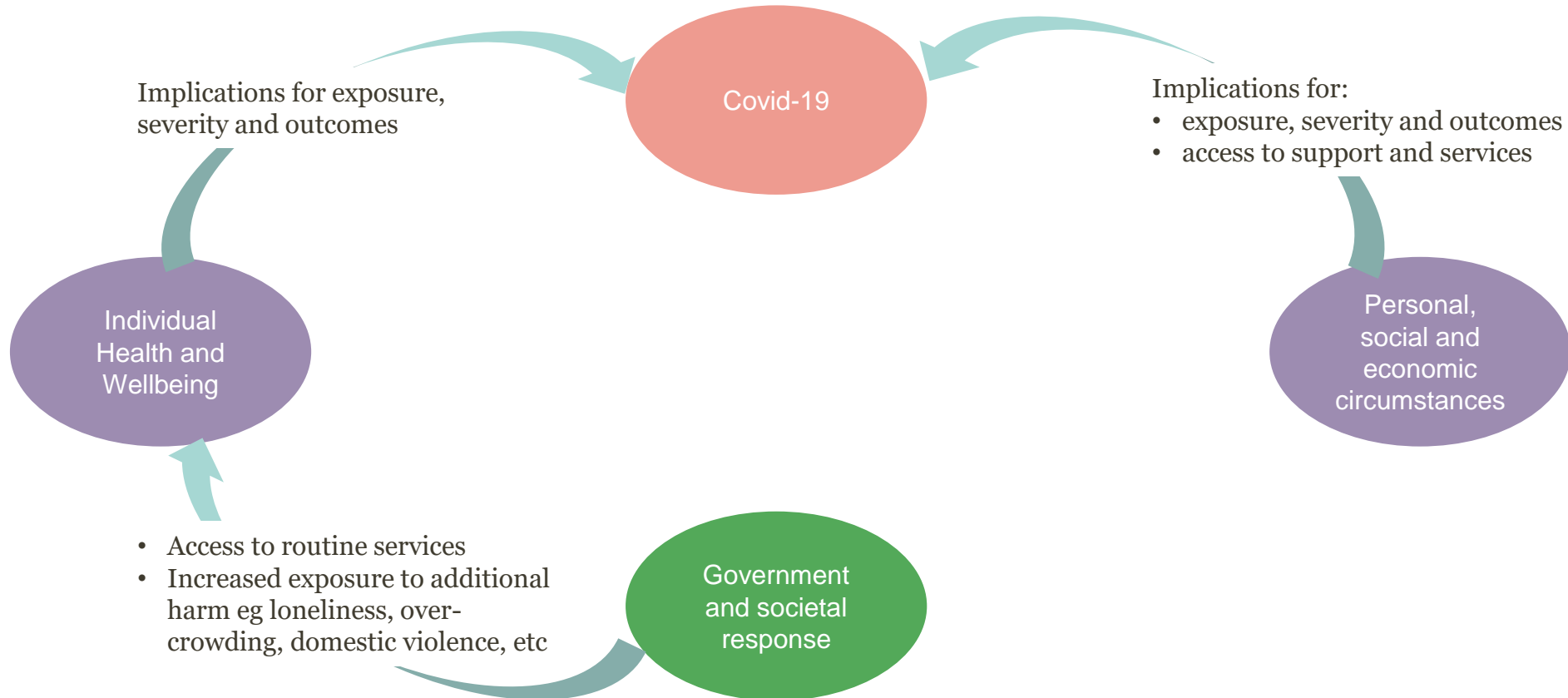
Personal,
social and
economic
circumstances

Government
and societal
response

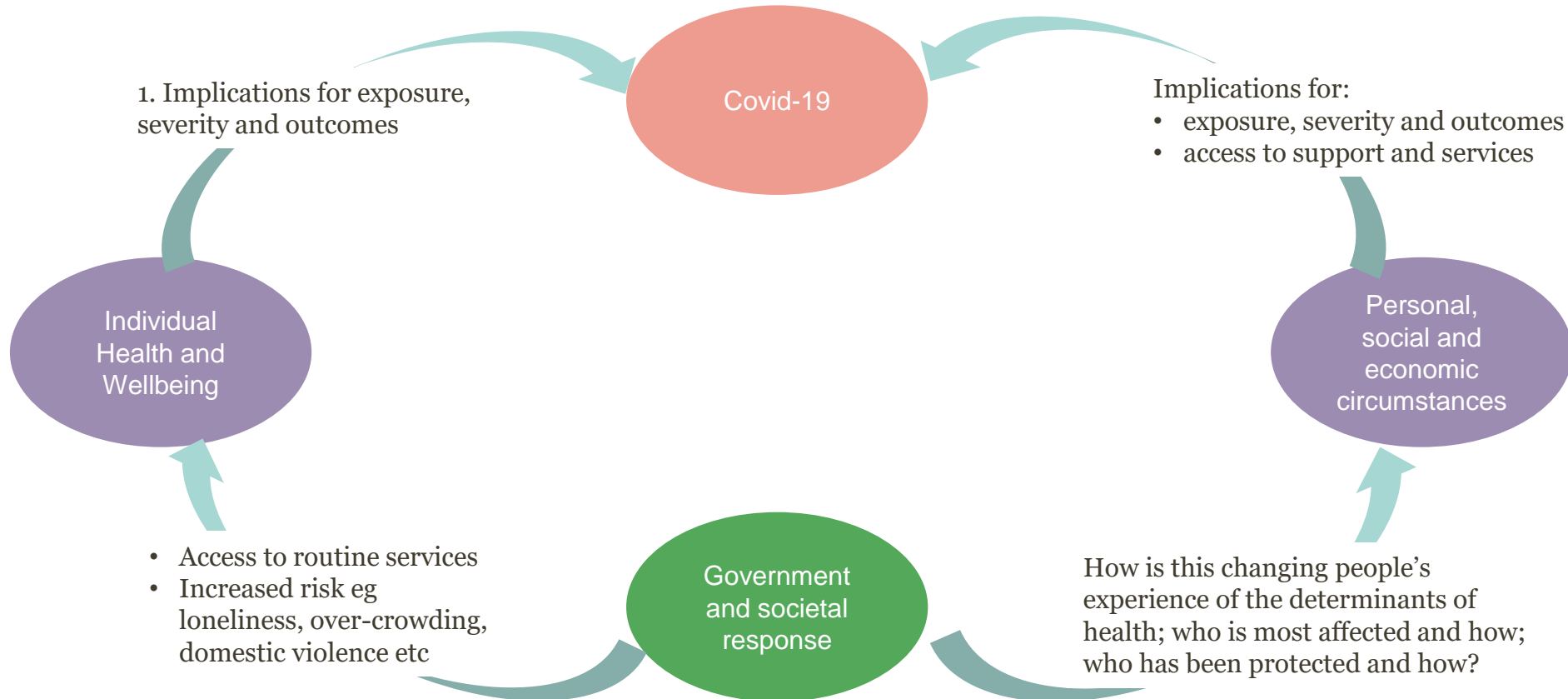
2. How did people's circumstances shape their experience of Covid-19?



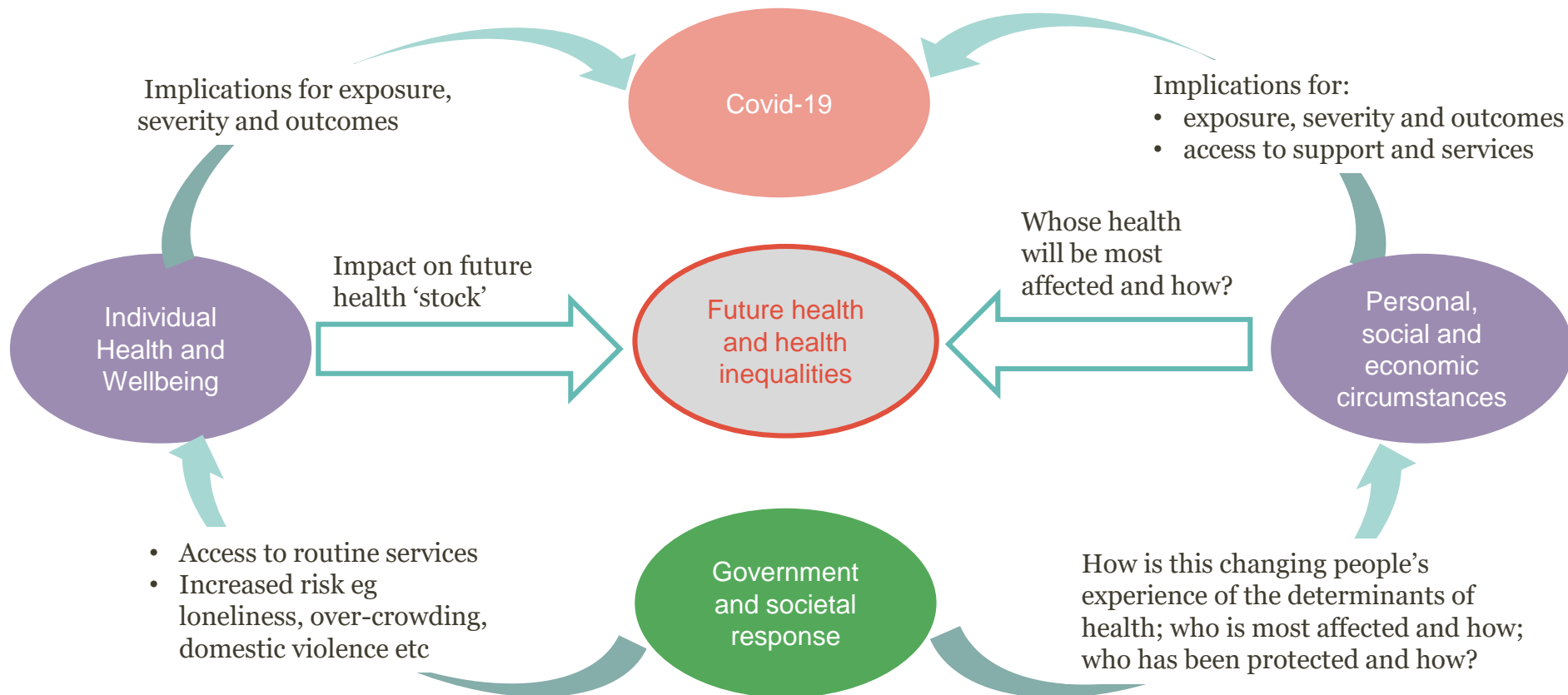
3. How has the pandemic response influenced people's health status?



4. How will the pandemic response impact on people's circumstances?



5. What are the consequences for future health and health inequalities?



Methodology

Evidence gathering

Existing literature

Existing and ongoing research
(Quantitative and Qualitative)

Aim: What we know & What is missing

Evidence Generation

In house analysis, interviews, polling

Aim: Address data gaps

Who are below the data line?

Evidence Synthesis



How can you get involved?

The logo consists of a square divided into three colored sections: a dark blue section on the left, a green section on the right, and a yellow section at the bottom. The text 'COVID-19' is in white, bold, sans-serif font, and 'impact inquiry' is in white, lowercase, serif font, both centered in the upper half of the square.

COVID-19
impact inquiry

**LOOK OUT FOR OUR
“Call for Evidence”**

Thank you



The human cost of COVID-19

Launch event: COVID-19 impact inquiry

Monday 5 October



Join the conversation on Twitter
[#COVID19ImpactInquiry](https://twitter.com/COVID19ImpactInquiry)

COVID-19

The week commencing 28th September we heard that

- 1 million people globally have died from COVID-19
- The President and 1st lady of the USA have tested positive for COVID-19
- 42,202 people have died in the UK and there have been 460k people tested positive for the disease.
- Local lockdowns are in place up and down the country impacting on the lives of millions of British people

Impact of COVID-19

Along with clinical vulnerability the risk factors that have been identified are:

- your age – your risk increases as you get older
- being a man
- where in the country you live – the risk is higher in poorer areas
- being born outside of the UK or Ireland
- living in a care home
- being obese
- being from a Black, Asian or minority ethnic background
- having certain jobs, such as nurse, taxi driver and security guard

Our Clinicians



Impact of COVID-19 on non white communities

In April we began to witness the disproportionate deaths of people from non white backgrounds

The ONS report dated April 10th

- When taking age into account black males are 4.2 times more likely to die from COVID-19 and black females 4.3 times more likely than their white counterparts .
- After taking age and other socioeconomic factors, like health and disability, black males and females still 2 times more likely to die of COVID-19.
- Bangladeshi and Pakistani groups are 1.8 (males) and 1.6 (females more likely to die of COVID-19.

Understanding the reasons

- Co-morbidities
- Excessive exposure
- Living in houses of multiple occupancy
- Obesity
- Lack of Vitamin D
- Racism and discrimination

COVID-19 October 2020

- Unsure of when things will get back to normal
- What the long term effects will be on individuals, families and the economy
- How to live with the virus in the short medium and if necessary in the longer term.
- How we will protect the most vulnerable members of our society.

Thank you

