Holding On to the Gains

Understanding the impact of the COVID-19 crisis on BAME groups in Wales

All Wales BAME Engagement Programme fora series (March to August 2020)

Acknowledgements

Ethnic Minorities and Youth Support Team (EYST) is the leading Welsh charity that supports Black, Asian and minority ethnic (BAME) young people, families, individuals and community groups living in Wales to contribute to, participate in and be valued members of Welsh society. EYST provides a range of services to achieve this aim, including one-to-one support; family support; advice and support for refugees, asylum seekers and EU migrants; volunteering opportunities; supported employment; and capacity-building. It also challenges and counters negative stereotypes about racial diversity, and increases awareness and understanding about the diverse communities that live in Wales. This report was commissioned by EYST and much is owed to Rocio Cifuentes, CEO of EYST, for her vision and stewardship. The fora series lies within the remit of EYST's All Wales BAME Engagement Programme. Ginger Wiegand has played a key role in the capture of the documentary evidence, with the summary notes of each meeting, transcripts and interim analysis of emerging themes evident both in how the final set of findings have been cross-referenced, and in how the recommendations have been drafted. In drawing on the comments made by attendees and presenters, special thanks are extended to all those who shared their views and experiences.

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1. Introduction

1.1 Background

The 2019 novel coronavirus pandemic (COVID-19) is reshaping all facets of society for many reasons, not least because it highlights the persistent and long-standing health inequities and social equality that mark Wales, as well as most other societies around the world. For many reasons, the following groups continue to be at higher risk of serious illness and death as a result of the virus:

- people from Black, Asian and minority ethnic (BAME) backgrounds
- older people
- disabled people
- people with underlying health issues (e.g. cardiovascular disease, diabetes, chronic respiratory disease and cancer)
- poor and disenfranchised people living in chronically under-resourced environments
- men.

Moreover, in their varying intersecting configurations (e.g. older poor people and disabled men), these are some of the key groups that are taking the brunt of the socio-economic fallout due to lockdown measures[1]. It is evident that Wales – irrespective of particular locales – is a multicultural, multi-ethnic, multilingual society. Indeed, it is 'super diverse', understood – as Vertovec[2] suggests – as being not easily readable as a conglomeration of discrete communities, but being more an amalgamation of highly differentiated peoples who, for the sake of convenience, we categorise into minority ethnic groups[3]. The common denominator, however, is that racialised minoritisation forms one of the major social divisions of modern Britain sic Wales and is one of the enduring indicators of poor health and social outcomes. The focus of this report is on racialised and minority ethnic population groups in Wales.

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[1] https://gov.wales/black-asian-and-minority-ethnic-bame-covid-19-socioeconomic-subgroup-report - accessed 26/11/2020

[2] https://www.tandfonline.com/doi/abs/10.1080/01419870701599465?journalCode=rers20 – accessed 14/11/2020

[3] It is axiomatic that BME populations are heterogeneous, with differences both within and between groups. Categorisation, however, is a fact and a point of contention for many. In the UK, the terms 'minority ethnic' and 'ethnic minorities' are most often used to refer to all minority groups of the population not indigenous to the UK that hold cultural traditions and values derived, at least in part, from countries of their own or their ancestors' origin. The term 'Black' is often used not to differentiate black minority groups from other minority ethnic groups, but rather to ensure that the continuing impact of the legacy of racism remains highlighted and is seen as problematic. In keeping with EYST's usage, the term 'BAME' (to describe people, populations and groups) will be used in this summary, with key minority ethnic groups identified using the UK census classification system. EYST notes: 'We recognise that this is a contested term and that others prefer to use "BME", "Black" or "Ethnic Minority/ Minority Ethnic" or "POC"/ People of Colour". We will discuss and review the preferred terms to be used within our practice on an ongoing basis, and also note that EYST team members, participants and partners may not all agree on their preferred terminology.'

Since March, work has taken place across all sectors to ensure that – as we move through the pandemic cycle – we seek to establish in Wales recovery frames, principles and approaches that are rooted in transformative ways of working, delivering services that do not re-enforce these social inequalities[4] and health inequities[5]. Key to this work has been the wide array of citizen-facing engagement programmes and outreach work to gather evidence of the lived experiences of the impact COVID-19 is having on the daily lives of people, not least (i) those who are particularly vulnerable or marginalised; and (ii) those organisations and services that provide support and services to them. The aim of this commissioned report is to conduct a rapid narrative review of the themes emerging from a series of fora on the impact of the COVID-19 crisis on BAME groups in Wales and on organisations seeking to support them.

The COVID-19 fora series was run as part of the All Wales BAME Engagement Programme. Established in response to the pandemic lockdown, the fora had two aims:
- to provide an online platform to gather the views, experiences and impacts of the COVID-19 pandemic on BAME people, communities and organisations across Wales
- to give an opportunity to enter into this online space to learn, as well as to provide relevant and timely information and updates. This opportunity was targeted at practitioners, advocates and service providers working across a broad range of sectors; key policy and service leads; and members of government.

The fora ran from the start of the national lockdown in late March to its easing in August. The notes on the number of attendees, topics, key discussion points and quoted comments – together with content created in the online chat function – were carefully drafted. Full transcripts of some of the meetings were provided and – in the majority of cases – the discussion topics were themed for ease of understanding.

1.2   Outline of report

The rapid review of the fora documentation was conducted in September 2020 in consultation with EYST staff. An overview of the fora series will be provided in Section 2, followed by a summary of the key concerns and impacts of the pandemic, as revealed by the attendees, in Section 3. As the title of this report suggests, a framing preoccupation is to track and spotlight the gains: Section 4 pools the solutions to the challenges that have been faced, and draws out models of engagement and innovations to services that have developed in the face of the pandemic. In the situation of human loss and upheaval, exacerbated for many by long-standing health and social inequities, such learning cannot be lost. In most cases, the meetings and direct quotations of attendees are identified based on the list provided in the Appendix (e.g. F1 is the first forum, and F2 the second). In keeping

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[4] https://www.wcpp.org.uk/publication/planning-for-a-prosperous-equal-and-green-recovery-from-the-coronavirus-pandemic/ – accessed 15/11/2020
[5] https://gov.wales/cabinet-paper-healthier-wales-two-years-html – accessed 15/11/2020

with the aim to amplify lived experiences, direct quotes will be used to frame and ground this rapid review.

The themes and reflections outlined in this commissioned report complement both the mapping work of BAME voluntary and community organisations[6] operating in Wales conducted by EYST, and the rapid review commissioned by EYST on the impact of COVID-19 on the BAME voluntary and community sector[7]. This review offers: (i) a critical reflection of the engagement model; (ii) a categorisation of the key solutions and challenges offered by the attendees; and (iii) an overview of key learning points and gains. Importantly, it is not the aim of the report to attempt to capture every issue and solution raised in each of the online meetings. It is important to note, therefore, that readers will need to access the following original summaries and linked papers to follow up their interest in particular issues:

- EYST summaries and EYST interim summary of the first tranche of fora (March to April)[8]
- EYST All Wales BAME Engagement Programme – Response to Equality, Local Government and Communities Committee Inquiry: Impact of COVID-19 Crisis in Wales[9].

2. The fora series on the impact of COVID-19 on BAME communities

2.1   How were the fora organised?
The World Health Organization declared COVID-19 a pandemic on 11 March 2020, and the first forum was held on 25 March 2020, two days after the UK national lockdown was announced and began. Over the next five months, the online fora alternated between being held weekly and fortnightly. The overwhelming majority of the 17 meetings held between March and August 2020 were chaired by the EYST CEO, who put in place a simple format, 'to talk about the main issues affecting BAME people in Wales in light of the COVID-19 pandemic, as well as to offer and share solutions and best practice', with notable themes and topics emerging from one meeting used to shape the next (8 April, F2).

In the early phase, the focus was very much on: (i) gathering experiences – what one attendee defined as 'local wisdom'; (ii) sharing knowledge of emerging coordination strands across local and regional lines, and new service responses being developed in the voluntary and community sector in particular; and (iii) identifying concrete actions to be taken forward. By mid-April, there was an additional focus on: (iv) providing opportunities for

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[6] BAME organisations are defined as any community groups or organisations that are run predominantly for or by people of Black, Asian or minority ethnic backgrounds. There are currently 100 such organisations in Wales, although more effort is needed to capture the work undertaken by very small and informal groups.
[7] Murray, K (2020), *The Impact of Covid-19 on BAME Community and Voluntary Sector in Wales: innovation, resilience and sustainability.*
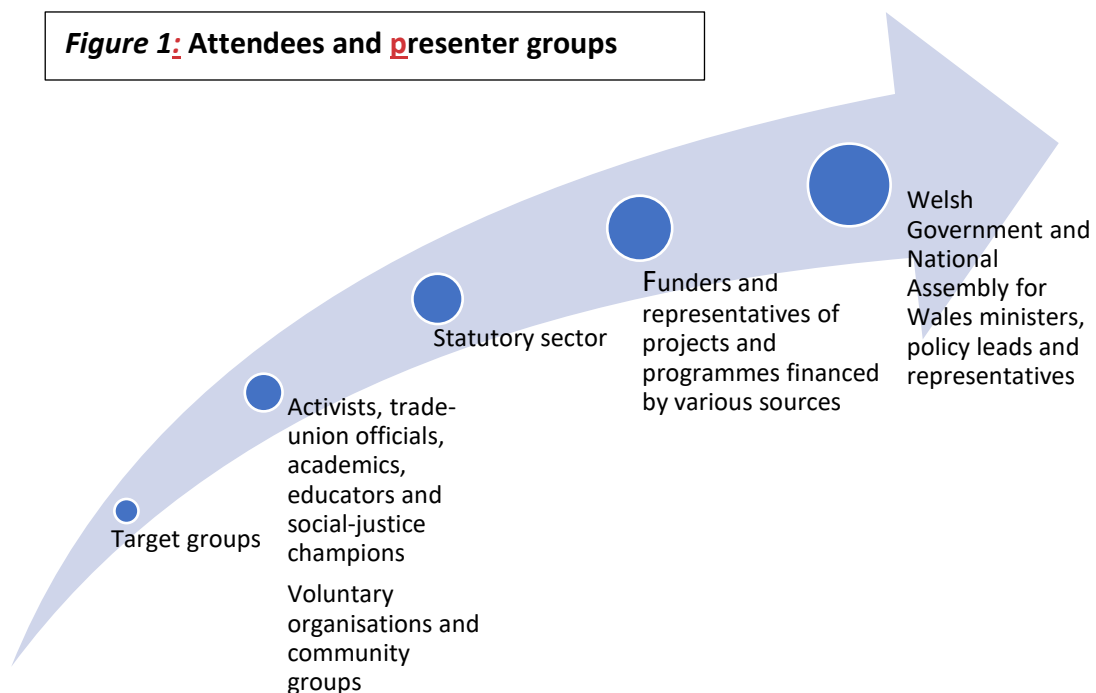[8] http://eyst.org.uk/project.php?s=all-wales-bame-engagement-programme – accessed 18/11/2020
[9] https://business.senedd.wales/documents/s101492/ELGC%20COV%2017%20-%20Ethnic%20Minorities%20Youth%20Support%20Team.pdf – accessed 18/11/2020

knowledge-sharing across key policy-related and political domains. At this point, the format was further developed, with two additional knowledge-exchange platforms utilised alongside the open-discussion approach. For some of the fora that took place between May and August 2020, leading representatives in both the public sector and politics attended and addressed the attendees; in other cases, discussion panels were convened. In both types of fora, key discussion points raised during the meetings sought to feed into new thinking around emerging local regional and national post-pandemic recovery programmes and policies.

2.2   Who attended the fora?

Figure 1: **Attendees and presenter groups**

Target groups

Activists, trade-union officials, academics, educators and social-justice champions

Voluntary organisations and community groups

Statutory sector

Funders and representatives of projects and programmes financed by various sources

Welsh Government and National Assembly for Wales ministers, policy leads and representatives

In total, 844 people attended the meetings dedicated to BAME people and groups. The number of attendees ranged between 16 and 81 (with ten of the fora having 50 or more attendees), and presentations were made by 37 speakers and panel members. As Figure 1 above shows, attendees included members of specific population groupings (e.g. young people and university students; people representing religious, ethnic and cultural groups; people living with an unsettled status and refugees; and people making use of BAME voluntary-sector services), together with voluntary organisations, community-group representatives and members of staff (e.g. engagement workers and project coordinators/leads). Attendees also included staff working in health (e.g. Public Health Wales and Health Boards), police, policy, equality and human-rights organisations (e.g. Diverse Cymru) – and in local authorities (e.g. community cohesion and engagement teams).

3. What were the main ways in which COVID-19 impacted BAME people and groups?

3.1   Key themes

The fora series was launched with a meeting to examine the wide-ranging topic of the impact of the COVID-19 crisis on BAME communities, with notable themes and topics emerging from the discussion used to shape the next meeting, and indeed the series (see the Appendix for a full listing). The review revealed that many (though not all) of the recurring concerns and impacts of the pandemic tracked throughout the fora series were identified in the first three meetings, as detailed in the sidebar. Although there is overlap, the key themes outlined have been clustered as follows: (i) health (risk factors, care quality and risk-management messaging) and social care; (ii) children and young people (education and wellbeing); (iii) loss of income, jobs and businesses; and (iv) material conditions (including poverty, food precarity, safety and physical environment).

What follows is a snapshot of the key impacts and concerns, with the textboxes containing interim findings published by EYST in May 2020, and also included as part of EYST's recent consultation submission on the impact of COVID-19.

	Framing concerns
1	Health risks and impact on BAME people
2	Food insecurity
3	Social care, welfare and advocacy (to include burials, funerals and bereavement support)
4	Loss of income, jobs and businesses
5	Children, young people and education
6	BAME families in intergenerational houses
7	Hate crime, community cohesion and tension monitoring
8	The hostile environment policy underpinning immigration measures
9	Mental wellbeing, isolation and loneliness (as linked to all of the above and across the life-course)
10	Variously vulnerable groups (e.g. Travellers, EU migrants and older people)
11	Holding on to the gains (new learning and innovation)

3.2   Health and social care (risks, care quality and risk-management messaging)

Unsurprisingly, older people, minoritised groups who held irregular immigration status, EU migrants and Travellers, pregnant women and new mothers were all groups whose social care and welfare – as well as health and mental wellbeing – were considered by fora attendees to be of particular concern. The unease felt regarding the quality of care they and others would receive – a long-recognised barrier in research and policy literature – was, perhaps unsurprisingly, another concern. The data gathered are rich and multi-layered. For example, there was a whole session dedicated to the importance of all key stakeholder groups (NHS, advocacy, those working in family violence, and social care) to address the wide range of social-economic and health issues linked to maternal care. All the speakers – including the Minister of Health and Social Services in Welsh Government, leads in organisations working with pregnant women of colour, and health improvement and midwifery leads – noted the huge risks faced by women of colour, and the need for a wide-

ranging programme of work to address maternal mortality and differential outcomes.

Issues such as relevant training for midwifery students, the need for interpreters, nationwide systems that allow women to indicate (as part of their care) family-violence issues, and transparent evaluation of existing clinical initiatives were all raised by attendees. Importantly, during this period, there was a trebling in contact made with Live Fear Free, Wales' national helpline for those affected by violence against women, domestic violence and sexual abuse[10]. With this came reports of more frequent abuse with shorter escalation periods – something that some women and families from BAME no doubt experienced. In other fora, linked issues such as the pressures facing young mothers – and also health concerns, such as infertility and the low weight of new-borns – were raised as pressing for some.

It is by now an established fact that some groups are more at risk of contracting COVID-19 based on the work that they do. This will be explored further below, but one key in terms of direct health risk was the lack of personal protective equipment (PPE) and of testing that characterised the first months of the pandemic, and people's fear of bringing the virus home and infecting family members. This was especially the case for those working in essential services (e.g. catering and hospitality), and in health and social care settings.

> ### *Key points from interim report: Supporting Travellers, particularly those without permanent accommodation*
>
> *'I have been asked to raise a Gypsy/Traveller site concern on behalf of residents. The residents depend on tokens for water and electricity. They rely on local authority site staff availability to provide these tokens. No staff, no tokens. No tokens, no water or electricity.'*
>
> *'Health provision must take particular care to ensure that greater trust and better, more comprehensible information is delivered to families, in partnership with established and respected Romani and Traveller community organisations and representatives, and that individuals are encouraged to seek medical care if they should fall ill, with the assurance that hospital services and healthcare practitioners will be unbiased in their delivery of advice and medical care.'*
>
> *'Self-isolation and social distancing are going to be particular challenges in circumstances where family space is limited and families live in close proximity with each other – on Gypsy and Traveller caravan sites, for example, or in multiple-occupancy dwellings where many Roma reside in over-crowded conditions.'*
>
> *'Particular attention needs to be paid to the needs of residents on sites …that house Romani and Traveller families, including information delivered in appropriate forms (infographics) and languages (Czech, Slovak, Hungarian).'*
>
> *'Many Romani and Traveller people will turn to their church or mosque for support, advice and reassurance in these troubled times.'*

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[10] https://business.senedd.wales/documents/s106528/ELGC%20COV%2052%20-%20Equality%20and%20Human%20Rights%20Coalition.pdf – accessed 15/11/2020

In the session dedicated to mental health (29 July, F16), invited speakers addressed the lack of specific care pathways for BAME children and young people, and the lack of evidence on experiences, and on the care and support needs of BAME older people living with dementia in Wales[11]. As for all the sessions, a key feature was the ongoing work of small projects across Wales – in this case, those delivering specialised services (e.g. play-therapy sessions for children of people seeking asylum). The issues linked to the increase in the need for support – and to the many ways in which services were seeking to diversify their offer – with the onset of the pandemic were recurring themes. Attendees spotlighted the stigma that continues to exist around mental health for many people, the importance of specific pathways to care, and the need for more research evidence to inform policy and practice. As one attendee noted:

'We need to hear their voices on equal terms with mental-health teams. We need to do some very focussed work … at the moment we don't have a picture through data and we don't have a picture through service level, so we need to paint that picture.'

The care of older people living in care homes – and those struggling to stay independent, to get food and other basic necessities, and to remain connected with health care services – was of particular concern for members of the

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> ### *Key points from the forum on older BAME people (8 July, F13)*
>
> *'We are all experiencing this tragic and challenging time. It is tragic to see the deaths in care homes and people struggling to stay independent, get food, connect with health care services. But we have also seen all the great voluntary work done to stay connected.'*
>
> *'Physical abuse includes giving people too much medication to stay quiet or sedated. Financial abuse is probably one of biggest areas of abuse in relation to older people – that could be theft or fraud but is more likely to be pressure to be able to handle money.'*
>
> *'Refuges are not always suitable for older women, so this does not encourage older women to get help. When you have been abused for perhaps 30 or 40 years, it is even more difficult to leave home when you have no money and perhaps family who are unaware of the abuse that has been going on, such as cohesive control. We need more refuges that are suitable for older women.'*
>
> *'There is a market here to meet the needs of BAME older people but the people who need it are least likely to be able to pay market rate for it … the message to Welsh Government is that initiatives like this will need support in beginning.'*

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community, for service leads, and for the Older People's Commissioner who attended the forum dedicated to this population group (8 July, F13). Importantly, issues linked to older people's rights, and the rising concern in pressure to agree to Do Not Resuscitate Agreements – together with the potential for forms of abuse (financial, emotional and physical) to escalate for this group during the crisis – were also spotlighted, as were ongoing

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[11] https://www.diversecymru.org.uk/wp-content/uploads/Lets-talk-about-dementia-report-for-web.pdf - accessed 25/11/2020

programmes, campaigns and policy initiatives to address them. Concerns were also raised about the impact of COVID-19 on those older BAME people who were shielding, and on older people with existing or emerging poor mental health, not least those who were lonely or feeling socially isolated.

The concerns linked to older people centred on the shielding put in place at the start of the pandemic, and extended to the negative impact of such measures on large non-white intergenerational families with limited choice for separation. This was spotlighted in the forum dedicated to the Muslim community, in terms of the abrupt restrictions to daily practices of older people attending mosque, visiting friends and socialising outside the house. Also revealed were the confusion as to who is categorised as 'extremely medically vulnerable' and the unease at the shielding messaging, which did not always translate effectively across languages, and across local knowledge and information pathways. Of equal importance was the issue of digital inclusion, considered a lifeline for older people yet also triggering concerns that the pandemic was working to widen the digital divide further amongst older population groups in particular.

People bereaved during the COVID-19 crisis face significant challenges that shape their experiences of grief. The sudden nature of many COVID-19 deaths, together with infection-control measures that limit family contact with patients, adds to the distress of the bereaved, as do the measures put in place in terms of social distancing and restrictions in group mourning and funeral attendance. In one of the very first sessions dedicated to Muslim people and groups in Wales, the rising number of people requiring a burial in keeping with Islamic traditions was spotlighted. This brought to the fore the needs for a regularisation of protocols for burial practices (e.g. washing and preparing of the body, and the PPE necessary), for guidance, and for knowledge to be shared with mosques and with local authorities across regional areas (for example, on food preparation during the mourning period, and linked with Ramadan). Other pressing areas of discussions were fears of approaching health providers, and the support needed – as well as being offered by – mosques and local organisations for Muslim students, and for Muslims with irregular or recently settled status.

Last, the fora revealed the pressing need for timely communication of messages around COVID-19, social distancing, health advice, social care and welfare support. While these are critical planks of public health for all residents, the stress was on the role of translation in the delivery of messages, the importance of communication methods that are appropriate to a range of diverse groups (so, no 'universal recipient') and the attention needed to the utilisation of a wider range of information pathways. This extends to vulnerable child patients with existing health conditions, as revealed by an attendee who outlined the concerns faced by those living with sickle cell disease:

> *'Members are already marginalised. [They] are not getting information from*

consultants regarding their vulnerability. They haven't received any guidance/letter and are more disadvantaged if they have more regular hospital appointments and aren't aware of processes … We are looking for ways to get them the information, but it shouldn't be on us. It really highlights how marginalised our communities are.' (29 July, F16)

3.3 Children, young people and international students (education and wellbeing)

A total of 191 attendees attended the online meetings that had a specific focus on children and young people. This mini-series comprised: two open discussions, one panel of university members of staff charged with international student management and support, and one meeting with a Welsh Government health representative and the Young People's Commissioner. The concerns raised revolved mainly around the impact of the pandemic on:

Children, young people and international students (education and wellbeing) fora	
7 April	Impact of COVID-19 on BAME pupils (open discussion, 50 attendees)
24 June	Impact of COVID-19 on BAME young people (open discussion, 30 attendees)
15 July	Safe return to school for BAME children (invited speakers, 62 attendees)
22 July	Impact of COVID-19 on international students (panel discussion, 49 attendees)

(i)   access to educational resources

(ii)   key educational transitions (including the policy of using predicted grades)

(iii)   specific negative consequences being experienced by children from poor families, those with an irregular or unsettled status, international students, and those from families where parents had limited English language proficiency

(iv)   risks associated with the then-impending return to education for all students.

Digital access, the space and capacity to provide online access at home, and the possible negative impact of home-schooling were raised as particular issues of concern, not least because of the longer-term impact that such possible resultant gaps in education could have on young people. Not having any or – in the case of those in large families – enough digital devices at home, not knowing how to access support to acquire devices, and not having access to broadband were all pressing concerns raised by attendees. In terms of the move to online schooling, one person who attended the discussion group reported that this had allowed him to learn new things in his own way. However, for some, this was a source of tension as they thought much more support was needed. In the open discussions, young people also shared their fears about the use of predicted grades, with others highlighting the long-established evidence of teacher bias and the underestimating of BAME pupils' actual exam performance. With this came the acknowledgement of class privilege, with one person stating:

'If a family is well-off, they can hire tutors. But if a family is poor, the children won't have the same experiences as other people who have resources.' (24 June, F11)

The issues faced by international students included feeling unsupported by their universities, in terms of both securing information on how to manage their risk of COVID-19 and knowing how best to engage with the extenuating-circumstances processes for those who had contracted the virus. The perceptions held by some were that their university was their 'home from home' and that they felt abandoned during this period of lockdown when access to both the university campus and to staff in person was limited.

As in other key areas, communication pathways were problematic. This extended beyond language barriers (including where there is limited English and – for some families with children in Welsh-medium schools – limited Welsh proficiency), with comments raised about the length and quantity of messaging from schools and universities, the automated online messaging regime that had sprung up in many cases, and the need for more accessible information pathways.

For some, this period was a time when young people moved closer to their families and – having been able to 'slow down and not have a 100-mile-per-hour lifestyle' – were reflecting on their personal development. However, a key theme for this age group was young people's mental wellbeing. The sudden upheaval to core routines such as school and university exam schedules and the linked curtailment of face-to-face meeting-up with friends and social networks raised anxiety for many of the attendees. This was especially the case for those for whom elements of the lockdown measures triggered past trauma (e.g. as

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Children and young people: Key points from interim report (May 2020)

- Several attendees at EYST's recent fora knew close family members or friends who had the experience of outperforming teachers' predicted grades on high-stake exams. One parent at our children/young people/pupil forum shared her child's previous experience of passing with As, Bs and Cs, despite being predicted to fail at GCSEs. This child is now having the same experience of being predicted low A-level grades and the current situation is 'very distressing'.

- Pupils are concerned that they will not get the necessary grades to attend university or progress to the next steps in their education or employment pathways in the autumn. For young people who have put everything into preparing for high-stake exams to gain university entrance, there is a huge mental-health impact: all of a sudden, they now feel that gaining entrance is beyond their control.

- There are concerns that some young people in Wales who do not get sufficient grades to enter university in the autumn may drop out of university pathways altogether rather than repeat a year. This phenomenon may impact an entire cohort of BAME young people, with a risk of a rise in young people from BAME backgrounds not in education, employment or training in coming years.

related to the experiences of some young asylum seekers and refugees). Some attendees also spoke not only about tensions within their homes (due to the isolation regulations and the increased surveillance on young people's activities) but also about heightened tension more generally when moving around in public domains during lockdown. For some international students, the negative mental impact was rooted in feelings of loneliness, as well as the pressures to secure funds to cover their ongoing education during a period of job loss and financial insecurity – both for them and, in some cases, for family members back at home who were also being negatively impacted by the pandemic.

Noting, in the 15 July meeting, the impending return to school, pressing issues included access to school uniforms, to free school meals and to continued digital support. Questions were spotlighted on how best to use the additional investment in the education budget to support those who may have suffered the most through the lockdown, and how to ensure that BAME children's risk of getting infected in school was not raised by their return to school. In this meeting the fear of some children facing hate incidents in school and not receiving adequate support (or the incident not being recorded as such by the school) was also raised:

> *'Our children are not confident in reporting hate/racial incidents as they don't have the trust in the school/teachers. I thought this only happened when I was in school; obviously not much has changed.'* (15 July, F14)

The issue of the impact of racism on young people was also raised in other contexts (e.g. as linked to the Black Lives Matter (BLM) movement, discussed below).

3.4   Loss of income, jobs and businesses

Given the huge impact of the pandemic on daily life, it is no surprise that a recurring concern raised in all the fora (not just the two dedicated to it) was the precarity of working life across all sectors (including those working off the books, i.e. the informal economy) and the loss of income (not least in essential and public-facing services, and for those in low-wage positions) (13 May, F4; and 28 May, F8). The issues raised mirrored those highlighted in reports published during this period, both in England[12] and in Wales[13]. Groups facing disproportionate disadvantage and discrimination that were being exacerbated by the global pandemic included BAME employees – as well as younger and older workers, and disabled people – in terms of their current roles and participation in the labour market. Other workers linked to the informal economy, including people with an irregular immigration status, were also of concern to attendees.

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[12]
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/908434/Disparities_in_the_risk_and_outcomes_of_COVID_August_2020_update.pdf – accessed 15/11/2020
[13] https://gov.wales/covid-19-bame-socio-economic-subgroup-report-welsh-government-response-html – accessed 15/11/2020

The evidence from the fora revealed a few examples of successful attempts to secure loans, to access information about COVID-19-related government initiatives to maintain businesses, and – for newly unemployed people – to navigate the employment sector (and linked benefits). However, the fears expressed by attendees most often revolved around the seeming inaccessibility and lack of knowledge of these pathways. Access to advice on rights and entitlements, and on navigating the universal-credits system (and the very long delays occurring as more and more people made applications), was a key concern; some were worried their employment- or business-loan applications would be rejected in the same way as job applications (based on 'foreign' names). It was noted, for example, that many Chinese small-business owners, particularly in the restaurant industry, were having a hard time accessing advice on COVID-19-related benefits and applying for universal credit, due to language barriers. Concern regarding the risks faced by taxi drivers was also raised, not least because of the large number of men from BAME in this sub-sector in the cities of South Wales in particular. Importantly, as linked evidence has shown, the economic effects of lockdown fall heavily on women. Women are carrying the majority of the workload in the home, are more likely to be keyworkers, and are more likely to be in low-paid work on insecure contracts in sectors that are most likely to be shut down. Those facing family violence are even more at risk due to the early social-isolation and lockdown measures, and the very sudden change in (and in some cases closure of) support and service provision.[14]

Of importance also were the unfair practices that were revealed in terms of low-paying employees without regularised status (including those working off the books and EU migrants) being forced to work in unsafe conditions. Evidence shared included that people were being asked by their employers to work without PPE, and that some employers were not following social-distancing guidelines, exacerbating the risk of becoming infected with COVID-19, and of passing the virus on to family and friends. This population group also noted the impact of racism and racial bias that could – in this period of economic insecurity and job losses – adversely impact on BAME and migrant employees in the workplace in terms of employment and also in using the mechanisms in place to challenge bias, discrimination or racial harassment in their workplaces.

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[14] https://www.cardiff.ac.uk/__data/assets/pdf_file/0017/2410343/Covid-19-and-the-Welsh-economy-shutdown-sectors-and-key-workers-briefing-paper.pdf – accessed 15/11/2020

3.5 Material conditions (poverty, food precarity and housing)

The financial impact faced by many people from BAME backgrounds was and remains a recurring and cross-cutting issue, being raised in almost every online session. As noted above, no grouping has been immune, and those already living in poverty – as well as those new to such precarity – range from business owners, those who were the main bread-winner, and those whose salaries supplemented their education as international students to those who were not employed, were dependent on others, or had no recourse to gainful employment or government support/benefits.

Food insecurity was felt in part due to rising prices, the closure of foodbanks, and the closure of services issuing foodbank vouchers. As outlined in the forum on food insecurity (22 April, F5) disabled people, people with health conditions, people who are self-isolating, the low-waged, those who work cash-in-hand and people struggling financially whilst seeking universal credit were those who were particularly facing food shortages.

As early as mid-April, new foodbanks (community -based as well as others) were popping up in many areas, with established banks operating alongside community groups and centres seeking to address known food shortages for members of the public. Although some organisations were operating in isolation, attendees spoke of local networks in

> ### Key points on poverty taken from consultation response (October 2020)
>
> - Universal credit claims have increased, and the queues for processing are unprecedented, with worries that the usually five-week waiting period will turn into a much longer one. The relaxation in Discretionary Assistance Fund (DAF) rules is welcome, but there were questions in our forum about whether people could readily access DAF if they did not have support to do so or had not done so before, particularly for people with English as an additional language.
>
> - There are serious concerns about what happens to No Recourse to Public Funds (NRPF) families post-COVID-19. We were presented with some evidence that people subject to NRPF were not seeking assistance from local authorities because they were afraid of being unhoused at short notice.
>
> - It is an established fact that poor housing, large numbers of family members living together (whether through custom or out of necessity), and high numbers of people living in rental accommodation that is not often secure all contribute to and exacerbate health and social inequalities. Such conditions have also been linked to COVID-19 deaths.
>
> - For the attendees, these factors were also making it difficult for social-distancing measures to be followed, and for quarantine and self-isolation requirements to be adhered to.

Swansea, Newport and Cardiff, in particular operating to support a wide range of people. Issues noted as being dealt with by providers included getting information to people about foodbanks; providing appropriate food for people with cultural, religious and medical requirements; and ensuring that large households secured enough food – as well as differing eligibility criteria, referral pathways, voucher dispensing and delivery options (for those without transportation or who were shielding). With regard to food insecurity during high holy periods, discussion focussed in this period around Ramadan. There were reports of people not being able to have appropriate food during Ramadan (i.e. food to break fasting), and discussion on how best to support mosques that very often provide iftar meals to vulnerable people – an activity made difficult with the social-distancing and lockdown restrictions. Likewise, after a death in many Muslim families, food is often delivered by others and – with that – came the need for awareness of and guidance for such practices, not least during the period of lockdown and when food was scarce for some people.

3.6   Hate crime, community wellbeing and cohesion

According to the latest national hate-crime statistics, incidents of hate crime based on race, faith, sexuality and gender identity in the community have increased during the last 12 months. There has been an overall 2% increase in recorded hate crime for Wales, compared to an 8% increase across England and Wales as a whole. The statistics included a 10% increase in transgender hate crime, a 2% rise in disability hate crime, and a 2% rise in hate crime where sexual orientation is the motivating factor. It has also been reported that there has been a 2% decrease in race hate crime, and a 3% decrease in religious hate crime[15]. Although the above figures were released after the fora, similar findings were presented to – and at times disputed by – attendees in fora dedicated to the impact of COVID-19 on community cohesion on racism and hate crime (29 April, F6), to BAME communities and policing (17 June, F10) and to the BLM movement (1 July, F12). For some attendees, the apparent mismatch in the reduction in hate crimes associated with race and religion was linked to a number of factors.

First, some attendees referred to the ongoing impact of measures put in place in 2012 by the then Home Secretary Theresa May, which aimed to create a hostile environment for 'illegal immigrants'. Directly targeted at public or essential services (such as the NHS and schools) and at fundamental sectors (such as housing and employment), the measures aimed to make it difficult for those who could not evidence and document their right or need to come to and to settle in the UK[16]. It was a sanctioned set of policies that created an environment and a dominant political discourse that have, over the years, meant that those

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[15] https://www.gov.uk/government/statistics/hate-crime-england-and-wales-2019-to-2020 – accessed 15/11/20202
[16]
https://www.researchgate.net/publication/316281226_Go_Home_The_politics_of_immigration_controversie
s - accessed 27/11/2020

deemed less deserving – i.e. the unemployed, non-British nationals and settled migrants – also faced the sharp end of such government-sanctioned hostility. For some attendees, the impact of this policy, and the suspicion and fear it has engendered in dominant public narratives has been compounded by the pandemic.

It was in the context of this hostility that the regulations imposed because of the pandemic lent themselves to everyday micro-aggressions, flashes of abuse and more localised (and perhaps considered low-level) forms of racism that – in the context of a health crisis – were deemed of less importance and to be tolerated.

Everyday micro-aggressions shared in the fora were being felt by, for example, members of the Chinese community at the start of the pandemic, with attendees also providing examples of people living in unstable accommodation who were scared to report neighbours' abuse for fear of reappraisals during periods of lockdown. Other concerns raised by attendees included hostility based on the public perception that because certain groups were more at risk of infection, they were indeed the cause of increasing rates of infection. For others, public discourse centred on another form of victim-blaming. One attendee explained this as follows, in response to views circulating in multiple online platforms/spaces that COVID-19 would peak during Ramadan because the Muslim community was gathering and socialising:

> *'During Ramadan, we are supposed to pray in the mosque, and this is the first time in history that we can't ... These rumours are causing panic in the community because we are in fact following the guidelines strictly and we are already in spiritual pain.'* (1 April, F2FX)

Excerpts from forum on BME communities and policing (17 June, F10)

'We should not be misled by low hate-crime figures. That would be akin to a misconception that shoplifting is down now. Coming out of this, things will get worse and we need to prepare.'

'Community cohesion is currently strong because people are helping each other now, but we should not get lulled into a false sense of security.'

'Hate-crime reporting is currently low because people are living in fear of uncertainty and reporting is the last thing on their agenda, as they are struggling to survive.'

Victim Support notes that clients it is currently supporting are mainly experiencing neighbour-related abuse, rendering them *'prisoners in their own homes'*.

'All of the community cohesion coordinators across Wales are working to get key messages out and keeping communication up with marginalised and vulnerable groups. They are looking at what they can do collectively and [how they can] support organisations and minority groups and monitor tensions.'

'Hate crime (except online) may be low, but we need to prepare for what happens after COVID-19 is over. The blame game is coming; society always needs scapegoats. How do we prepare for post-COVID?'

For some, however, the tide was turning, with the period of the pandemic coinciding with a global focus on systemic racism, chiefly via the BLM movement. Significantly galvanised by the killing of George Floyd, the BLM movement is a response to the societal inequality faced by people of colour across the globe due to racialisation and racism, the consequences of which include a host of health and social inequities, of which the disproportionate impact of COVID-19 has been revealed as a particularly telling example. The forum brought together a panel of mostly young BLM movement leaders based in Wales who spoke of their campaigning work and the links being made with protests taking place across the UK and worldwide. The structure of Wales' education system – together with dominant historical narratives presented as devoid of ethnic, cultural or religious diversity – was raised as being in need of transformation. There is also a need to address racism in rural areas where, as one attendee noted, 'it has tended to flourish … [with BLM events resulting in] … a backlash' (1 July, F12).

Interestingly, the BLM movement framed the forum on policing in Wales. With a focus on both the differences and similarities between America and the UK in terms of police brutality and policing injustices, there was strong consensus about the need to address the negative impact of stop-and-search practices: the profiling of BAME people results in innocent people being stopped and searched, and even one incident can have lasting and profound effects. There is a need to develop further meaningful relationships between communities and police forces. Presenters provided evidence of the steps being taken to increase diversity in the police force, to monitor stop-and-search activity effectively, to reduce community tensions, and to find ways to work with communities across Wales to offset the often (but not solely) negative perceptions of modern policing. Presenters also provided evidence of attempts to coordinate more effectively the monitoring of racial tensions across Wales (i.e. community tension meetings held weekly across all four forces), using social-media platforms to raise awareness and to make connections.

Interim findings: Role of community groups and volunteers

'Community groups play a crucial role in comforting people and making sure people have food/supplies – also connecting to people and sharing information.'

'The role of community groups in this situation is key. Mainstream volunteer groups can't meet the needs of communities, for example because of language barriers.'

'We have a team of volunteers, but of course with new guidelines we are not able to handle cash. These older women are not able to shop online and are very suspicious of giving their bank details to us, let alone anyone else.'

'Many BAME clients use community groups for face-to-face advice and signposting – the majority of these services are now closed, while new email or phone-based access systems are being thought out. But this will take a while to set up, and how to offer effective interpretation via three-way calls is also a challenge.'

Linked to the concerns around safety in the context of both a hostile environment and ongoing racialised tensions, together with the global rise of the BLM movement, the importance of community cohesion and wellbeing emerged as a key issue in the discussions. Indeed, the role of the community and the fostering of a sense of community as the pandemic took hold were recurring themes in the fora series. The role of community -based collective action will be developed further in Section 4, which provides a snapshot of the solutions offered by the attendees in response to the many issues raised in the fora.

4. Holding on to the gains

> *'This is a challenging period, but we are part of the solution. Let us work together to come up with positive solutions.' (8 April, F3)*

4.1   Snapshot of solutions offered

In brief, the solutions offered by the attendees can be categorised as follows: (i) practical and pressing interfacing work to address the pandemic crisis on a local basis; (ii) solutions linked to shifts in health, social care and welfare programmes and systems; and (iii) longer-term political changes to ensure that innovation, new ways of working and new learning are captured and embedded in national policy development. In this very short section, the first two points will be explored, with the last category of considerations outlined in Section 4.2, together with summary reflections on the scoping review of the fora.

In terms of pressing considerations, local/regional coordination and the need for meaningful multi-agency work were considered fundamental. A key element of the first tranche of fora (March to April) was active signposting. In both the chat box and in the main Zoom discussions, information on new services that had sprung up – as well as on how established services were offering online support – was shared in order to help find solutions and pathways to address pressing local issues. The profiling of foodbanks and their coordination across local areas is one example offered, as was the need in the early months of the pandemic for clearer guidance on free school meals and a greater sharing of information regarding burial practices. Although this tapered off as the format of the fora changed, practical solutions geared towards local issues – and rooted in collective action being taken by small community groups, as well as innovation of existing local services – remained a theme, as did solutions that revolved around the need for local and regional coordination of services. Given the fact that the fora involved attendees from across Wales, finding ways to pool the different responses to the pandemic across localities was deemed an important learning opportunity, with attendees in the early stages making requests to EYST to fulfil that role.

Another set of solutions that was offered revolved around how best to engage and communicate messages on health-crisis management, as well as national and local-authority

directives and information on how best to manage the adverse social-welfare and economic impacts of the crisis on people and groups. Cogent, clear and comprehensive communication pathways to information, best practice and learning are all considered critical. Dedicated hotlines to support BAME groups in terms of health, social welfare, and employment and business issues were all offered as possible solutions – as was co-production with community groups of messaging and communication pathways, and skilled outreach workers to provide face-to-face engagement within and across BAME groupings.

Solutions linked to programme and institutional changes were deemed to be of importance in terms of preparing for another wave of the pandemic and of working to ensure that the inequalities laid bare by COVID-19 are now taken into account. What comes across most tellingly is the need to embed change. Ways forward in terms of solutions to pressing existing inequalities include mental-health pathways for BAME groups across the life-course, the decolonising of the curriculum, and the extension of training and education pathways that systematically address the uneven and unequal educational outcomes of minority ethnic young population groups. Offered solutions also aimed to make changes to the welfare system (i.e. scoping how best to provide refuges for older women), and to build interagency, cross-regional evaluative frameworks in order to ensure that innovation and new ways of doing things are embedded and shared via, for example, regional partnership boards[17].

Last, a recurring theme was not only to showcase the work being done during the pandemic, but also to use the innovation and shifts in health, social care and welfare systems to imagine new ways of structuring society. Section 4.2 will explore this in more detail. However, in terms of long-term solutions, the work of unions was raised as important, not least because of the role played by unions in working with government to help steer high-level policy agenda (e.g. Wales' economy recovery) – something perhaps unique in Wales, where social partnership work is a key principle, compared to other parts of the UK. Also considered vital was the role played by the voluntary and community sector, in particular the BAME voluntary sector's work to improve the lives of migrant, minority and often marginalised groups. Moreover, examples of political framings that were not rooted in what has been called a hostile environment and unequal social framing for some of those most in need included the calls for the BLM movement to be 'not a moment but a global movement' for racial equality; the insistence by many attendees to extend beyond the pandemic both the relaxation of NRPF and the moratorium on evicting people seeking asylum from National Asylum Support Service housing; and calls regarding the unemployment benefit system.

Collectively, the solutions briefly outlined above – together with the gains and identified ways forward outlined below – highlight the need to work with people and organisations

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[17] For information on the regional partnership boards and their role, visit: https://gov.wales/regional-partnership-boards-rpbs - accessed 20/11/2020

across a number of sectors. They focus on sharing knowledge and expertise, through developing cycles of engagement, accountability and monitoring that work to address and perpetuate societal inequalities. They focus also on embedding work in a rights-based and intersectional approach, and on the centrality of co-production and relationship building. Much like the solutions raised at the fora, what follows covers possible actions that require: (i) national endorsement led by Welsh Government; (ii) local understanding and embedding before they could be fully implemented; and (iii) changes in theories (the implicit and explicit rationales underpinning 'ways of doing') at the meso-level, with a focus on new ways of integrating health, social care and welfare processes and systems.

4.2   Systemic racism positioned as a key cause and framing consideration

The fora series attracted 844 attendees. Findings echo those emerging from similar engagement work across the UK – for example, the stakeholder-engagement work that underpins Public Health England's publication exploring the impact of COVID-19 on BAME groups in England[18]. Likewise, many of the findings and recommendations that could emerge from the fora have already been strongly presented in the above report. Of importance is a collective sense of loss and fear – and the deep dismay, frustration and anger felt by many – as it became evident that long-standing and persistent social and health inequalities meant that not only were BAME groups (to varying extents) at a disproportionate risk of infection and death due to COVID-19 but also that the pandemic was set to further exacerbate their quality of life and life opportunities in multiple ways.

Moreover, many of the solutions and ways forward put forth by the EYST's fora series can be housed within the recommendations emerging from the review commissioned by the First Minister to examine the socio-economic factors that contributed to the disproportionate impact of COVID-19 on Wales' BAME groups[19]. Underpinning the wide-ranging recommendations made by the First Minister's Committee was a clear statement on the need to centre any post-pandemic recovery work on addressing racial discrimination and disadvantage, and systemic racism. The report clearly states:

> *'The overall theme that ran through the factors discussed in this report is the impact of longstanding racism and disadvantage and lack of BAME representation within decision making to effect better socio-economic outcomes. Although many of the issues highlighted have been identified and discussed previously, they have not been addressed in any systematic and sustained way. The coronavirus pandemic is, in some respects, revealing the consequences of such inaction on race equality.'* (p. 2)

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[18] https://www.gov.uk/government/publications/covid-19-understanding-the-impact-on-bame-communities – accessed 15/11/2020
[19] https://gov.wales/black-asian-and-minority-ethnic-bame-covid-19-socioeconomic-subgroup-report – accessed 15/11/2020

What the fora make evident is the need to hold – in one practical, policy and political axis – this failing as both key cause and framing consideration.

4.3 Local wisdom and organisational knowledge as key evidential resources

> *'Stories are very powerful and it's vital to record as much as possible at this time so it's not forgotten post-COVID-19.'* (Attendee)

The fora provided a platform for people from BAME backgrounds to give voice to experiences, and for people representing organisations to bear witness to the impact of COVID-19 and organisational responses. These micro-narratives and testimonials – their capture, context and identification as sources of evidence and information – are key in the development of equitable or transformative ways to exit the lockdown.

In terms of understanding lived experiences and learning how best to make meaningful improvements, we must recognise the role of 'third spaces': those public and community spaces – community centres, mosques, churches and social clubs – where people feel at home, and where collective action during the pandemic has often emerged. Such activity has included foodbanks, delivery of food and medical prescriptions, and innovations around burial rites and practices. Such work cannot be lost under the banner of 'community action'; these are preventative and intervention services delivering work that is yet to be fully recognised within wider systems of support and care. There is, therefore, a need to explore how best to more fully embed into mainstream and existing specialised services this specialist knowledge and expertise, and to find ways to integrate this local wisdom.

4.4 The role of the BAME voluntary and community sector

> *'We organisations in the BAME/racial equality sector must connect with each other and promote these messages ourselves.'* (Attendee)

With the need to find ways to amplify the voices and experiences of all those impacted adversely by the pandemic came a strong consensus on how people were pulling together. One attendee reflected:

> *'People are coming together maintaining connectedness, indeed fostering connectedness … acts of kindness, sacrifice and also seeing the impact that the BME community has on the wider community.'* (29 April, F6)

The role played by the BAME voluntary and community sector in capturing 'local wisdom' as a key source of evidence remains a key finding and point for reflection. Community-based responses to the needs of marginalised social groups provide the impetus for the emergence of the BAME sector in the UK. Currently, there is a dearth of evidence on the role played by the BAME voluntary and community sector in Wales. However, this sub-sector most often consists of small, generally under-resourced organisations, which have much shorter histories than their mainstream counterparts and which:

• are established to articulate and address the needs of specific population groups

- advocate and challenge universalist assumptions of health and welfare provision: a philosophy that treats everyone the same, regardless of origin or status
- play a critical role in identifying gaps in service delivery and failings in social policies, developing community initiatives and projects in response to local demands from the community, and filling the gaps in mainstream service provision
- draw on deep local knowledge and expertise to provide a range of bespoke services that provide examples of culturally appropriate practice
- operate from an organisational culture that has, until recently, been distinct from those of mainstream voluntary-sector organisations, with the cultural traditions of the communities they serve reflected in the structure and practice of the organisation[20].

Given the impact of COVID-19 on BAME groups in Wales, it is unsurprising that this sub-sector is playing an important role in amplifying the voices of people and addressing pressing concerns that only they – through their connectedness to and ongoing work with those communities – have been able to provide. The work of EYST in terms of the fora series can be taken as a case study on the role and value of the sector that should inform the strategies and visioning needed to fully embed people's experiences and the expertise of the BAME voluntary and community sector into Wales' recovery plan.

First, the review revealed that the fora were described in various ways as providing a 'safe space' (29 April, F6). Moreover, as detailed above, the fora evolved iteratively and collaboratively, with topics emerging from the group, and changes made to the engagement format (open discussion, invited speakers or panel discussion) to ensure a safe space for sharing and exchanging knowledge and information. Each meeting was facilitated with attention to encouraging open dialogue, the amplification of perspectives via intermittent summarisation of key points in the meetings, and the subsequent documentation of proceedings. The flow of information across different domains represented in Figure 2 below allowed for a multi-perspective exchange, with the capture of comments (including links to information and contacts) made in the chat function of Zoom providing attendees with an additional avenue through which to engage.

Second, in responding to the huge upheaval caused by the pandemic crisis, and in the context of making changes to complex systems (such as the public health and care regimes, and social network systems), there is a need for an equally complex understanding of the actions needed to respond to changing organisational climates and priorities. This calls for attention to micro-level or hyper-local activities of individuals and their daily life, the macro-level shifts taking place at a societal level, together with a focus on policies, service systems

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https://www.researchgate.net/publication/305721227_A_scoping_study_to_map_the_research_capacity_of_health_social_welfare_voluntary_organisations_in_Wales_with_a_focus_on_BME_organisations_and_equalities_agencies_2010 – accessed 23/11/2020

and processes that link the two. Accordingly, the online fora were organised within days of the national lockdown, in light of the urgent need to maintain contact with those individuals, groups and organisations served and supported by EYST, and by the BAME sector in Wales more generally.

> **Figure 2:** **EYST engagement model**
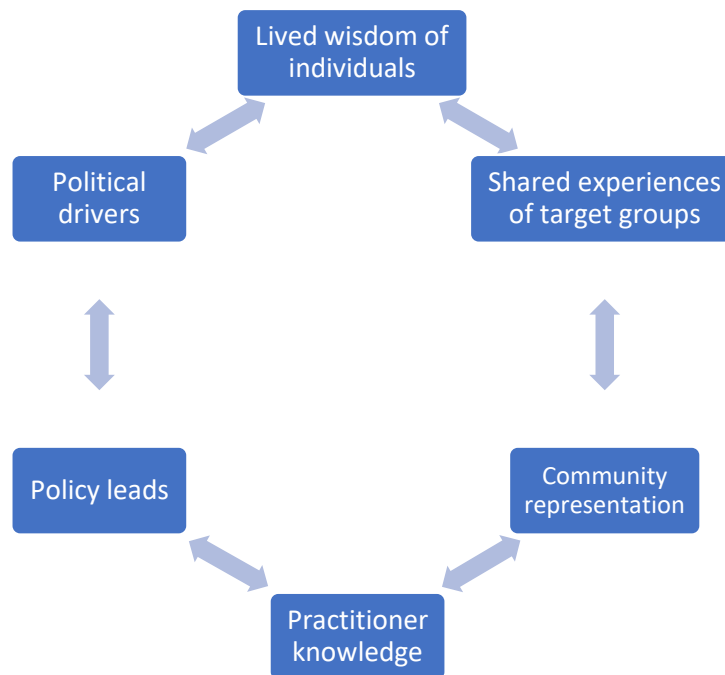
Driven by the acute context and wide -ranging impact of the pandemic and, moreover, in keeping with the social-justice and community-development underpinnings of the sector, the engagement model that emerged utilised both the innovation of online technology and the specialist knowledge of EYST (and the voluntary and community sector more generally):

(i)   to avoid the limitations of prioritising one kind of expertise over another by making different forms and sources of knowledge central

(ii)   to create spaces in which meaning-making is rooted in a responsive format and established set of interests to allow for cross-current circulation of dialogue and information exchange between stakeholder groups who often have very different sets of concerns, experiences and priorities but who also can come together to provide nuanced solutions.

4.5 Building an intersectional social-justice framework within a Welsh context

> *'Where do we feature in conversations about recovery? … you cannot bring us in at the last minute; it has to be the opposite.'* (Attendee)

Last, what is evident is the need to position the lived experiences of people from minoritised backgrounds as a key consideration in understanding the ongoing and persistent inequalities marking their lives. With this comes an understanding of how the people themselves are drawing on their own knowledge, wisdom and understanding to care for and support themselves and their communities. But that is only one step. From the fora, it is equally evident that in moving forward, racialisation and the persistence of racial inequality in modern Welsh society must be rooted in both the wider mainstreaming agenda that so often marks equality development in Wales and based within an intersectional framing. As outlined above, what the review reveals are the cross-cutting concerns and multi-layered impacts, as expressed and experienced by the attendees and presenters alike. The summaries also reveal the impact of COVID-19 across the life-course, as well as spotlighting the impact of a range and combination of social categories (i.e. gender, age and ethnicity) that shape people's life chances and opportunities. Moreover, there will always be a need to find ways to move from individual experiences to system-level changes; the fora offered a platform for such work. In order for sustained change, necessary work includes:

- greater extraction of learning from the fora dataset reviewed in this report
- cross-referencing and consolidation of existing recommendations – both those specific to BAME groups and those more generally made as linked to COVID-19 – such as those made by the First Minister's two BAME Advisory groups[21], and the recommendations and priorities on public health[22], education[23], child and adult poverty[24], and the welfare of refugees and those seeking sanctuary
- the rapid pooling and summarising of recommendations from other BAME voluntary and community sector organisations[25].

In order to meaningfully put in place an intersectional social-justice framework that can be

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[21] Health Risk Assessment Sub Group https://www.adss.cymru/en/blog/post/all-wales-covid-19-workforce-risk-assessment-tool and Socio-Cultural Factors Sub Group - accessed 15/11/2020

[22] See, for example, https://phw.nhs.wales/topics/latest-information-on-novel-coronavirus-covid-19/staff-information-page1/covid-19-staff-news/priority-areas-for-the-public-health-wales-agreed/ – accessed 23/11/2020

[23] For example, the findings drawn from BAME students in Wales: https://www.childcomwales.org.uk/wp-content/uploads/2020/09/Briefing_Report_E_2020_FINAL.pdf – accessed 23/11/2020

[24] For example, the findings from the recent Bevan Foundation reports on child https://www.bevanfoundation.org/news/2020/11/child-poverty-newyddion/ and adult poverty https://www.bevanfoundation.org/publications/coronavirus-poverty-wales/ - accessed 17/12/2020

[25] See, for example, the role of the voluntary sector in Wales in terms of COVID-19: https://www.aber.ac.uk/en/news/archive/2020/11/title-237783-en.html – accessed 23/11/2020

monitored and evaluated, the above can be framed within, for example:

- social care and welfare legislation, with a focus on its underpinning principles of person-centred care, co-production, voice and control, sustainability, and system-wide innovation and change – bearing in mind the importance here of the local wellbeing plans and population needs assessments stipulated by the Wellbeing of Future Generations (Wales) Act 2015, and the Social Services and Wellbeing (Wales) Act 2014 respectively
- the Welsh Government's COVID-19 economic reconstruction work[26]
- existing mandates that underpin the equality work taking place in Wales, including the declaration of rights of older people and the work of the Older People's Commissioner[27]; the United Nations' convention on the rights of the child and the work of the Children's Commissioner for Wales[28]; and the work and priorities of the Equality and Human Rights Commission in Wales[29]
- national manifestos, including Race Alliance Wales' Manifesto for an Anti-Racist Wales (2020)[30] and the important recommendations put forth by BLM leaders[31]; those rooted in the Hate Crime Charter[32]; and the Manifesto for a Gender Equal Wales[33], the recent set of recommendations from the Women's Equality Network[34], and the important work being done by the newly formed BAME Women's Challenge Collective.

The fora series brought together a wide range of people during a time of great need and uncertainty. The series was one of many taking place across Wales. From the raft of recommendations emerging from a wide number of policy and political domains, there are clear pathways to addressing the systemic health and social inequalities that shape modern Welsh society. In holding on to the gains, we hold on to the promise of a better future.

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[26] https://gov.wales/coronavirus-reconstruction-challenges-and-priorities-html – accessed 20/11/2020
[27] https://www.olderpeoplewales.com/en/about/commissioners-role.aspx – accessed 12/11/2020
[28] https://www.childcomwales.org.uk/uncrc-childrens-rights/ – accessed 22/11/2020
[29] https://www.equalityhumanrights.com/en/commission-wales/about-commission-wales – accessed 12/11/20202
[30] https://racealliance.wales/manifesto-launch/ – accessed 22/11/2020
[31] https://www.southwalesargus.co.uk/news/18564770.black-lives-matter-newport-calls-welsh-government-tackle-racism/ – accessed 22/11/2020
[32] https://gov.wales/hate-has-no-home-wales – accessed 22/11/2020
[33] https://chwaraeteg.com/wp-content/uploads/2020/11/Manifesto-for-a-gender-equal-Wales.pdf – accessed 22/11/2020
[34] https://wenwales.org.uk/wp-content/uploads/2020/07/WEN-Wales-COVID19-June-2020.pdf_- – accessed 22/11/2020

Appendix: The 17 online fora (25 March 2020 to 5 August 2020)

Date	Topic	No. of participants	Format	Speakers/panel members
25 March	1. Impact of COVID-19 on BAME communities	47	Open discussion	
1 April	2. Impact of COVID-19 on the Muslim community	27	Open discussion	
7 April	3. Impact of COVID-19 on BAME pupils	50	Open discussion	
15 April	4. Impact of COVID-19 on BAME employment	16	Open discussion	
22 April	5. Impact of COVID-19 on food security for BAME people	20	Open discussion	
29 April	6. Impact of COVID-19 on community cohesion, racism and hate crime	70	Invited speaker	• Deputy Minister and Chief Whip Jane Hutt
13 May	7. Considerations for BAME communities on exiting the lockdown	27	Open discussion	
27 May	8. Considerations for BAME communities for safe return to work	52	Invited speaker	• Shavanah Taj – General Secretary, Trades Union Congress
10 June	9. Public-health response & BAME communities	57	Invited speaker	• Rebecca Fogarty – Public Health Wales
17 June	10. BAME communities and policing	81	Open discussion	• Assistant Chief Commissioner Jenny Gilmer • Superintendent Steve Jones • Police Constable Baz Narbad • Martyn Jones – Equality, Diversity and Inclusion Manager, South Wales Police
24 June	11. Impact of COVID-19 on BAME young	30	Open discussion	

		people			
1 July	12. Black Lives Matter – what next in Wales?	71	Panel discussion	• Hilary Brown – Barry • Sean Suter – Port Talbot • Chloe Cherney – Haverfordwest • Sabrina Thakurdas and Luis Williamson – Cardiff • Nimi Trivedi – Swansea • Andrew Ogun and Loren Henry – Newport • Nasir Adam – Cardiff • Riah Andrews – Llangollen	
8 July	13. Impact of COVID-19 on BAME older people	51	Invited speakers	• Helena Herklots – Older People's Commissioner for Wales • Janice Dent – Gwent Regional Violence against Women, Domestic Abuse and Sexual Violence Team • Suzanne Duval – Diverse Cymru	
15 July	14. Safe return to school for BAME children	62	Invited speakers	• Sally Holland – Children's Commissioner for Wales • Heather Payne – Welsh Government	
22 July	15. Impact of COVID-19 on international students	49	Panel discussion	• Elizabeth George – Universities Wales • Laura Dowds – NUS Wales • Natalie Buckland – Cardiff Metropolitan University • Kevin Childs – Swansea University • Lisa Davies – University of South Wales • Sujatha Thaladi – The Mentor Ring	
29 July	16. COVID-19 and mental health for BAME people	66	Panel discussion	• Suzanne Duval – Diverse Cymru • Selina Sonola – Denbighshire Child and Adolescent Mental Health Service • Jill Duarte – African Community Centre • Jessie Jones – African Community Centre	

				• Jennie Dowsell and Sarah Morgan – New Pathways
5ʰ August	17. Healthcare and BAME women's maternal health	68	Panel discussion	• Vaughan Gething – Minister for Health and Social Services • Laura Santana – Birth Partner Project • Antonia Ashaye – Orbirin Africa • Dr Julie Bishop – Public Health Wales • Lucy Evans – Swansea University