

EXECUTIVE SUMMARY

This report presents key findings from a 6-month ethnographic study on the impact of the Covid-19 pandemic on disadvantaged households and communities across the UK conducted by anthropologists from the London School of Economics, and associates.

This research involved in-depth interviews and multiple surveys with people across communities in the UK, with particular focus on a number of case studies of intersecting disadvantage. Crucially, our research has found that government policy can improve adherence to restrictions and reduce the negative impacts of the pandemic on disadvantaged groups by placing central importance on the role of communities, social networks and households in economy and social life.

This would be the most effective way to increase public trust and adherence to COVID-19 measures, because it would recognise the suffering that communities have experienced and would build policy on the basis of what is most important to people - the thriving of their families and communities.

This presents our 6 key policy recommendations.

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Research Funded by the London School of Economics and Political Science Innovations in Care' Grant

Illustration by Maggie Li.
Photographs by Grey Hutton with support from National Geographic Covid-19 Emergency Fund

Ethics approval awarded by LSE Research Ethics Committee [REC ref. 1137]

1 | THE HOUSEHOLD



Although largely invisible in COVID-19 policy, households and their informal networks of carework and support are at the core of a thriving UK society and economy. As a result of Covid-19 policies cutting off usual social support networks and formal social care, there has been an emergence of a kinwork and care deficit. The mental health, physical health and financial impacts of these cut networks are significant. Households, and in particular women within them, have had to fill this deficit by absorbing greater care burdens. As a result, particular categories of people with multiple caring responsibilities, or managing multiple households, are experiencing immense pressure.

We suggest government policies that restrict social networks of support as little as possible and only as a last measure. When restrictions on households are introduced they should follow social bubble household policies rather than arbitrary regulations such as the rule of six that do not match household practices and discriminate against particular social groups.

In addition, there should be immediate, emergency mental health and care support measures put in place in regions under Tier 2 & 3 restrictions. These would include financing the expansion of mental health care and subsidising, or in the most deprived regions, providing free of charge Covid-19 safer child and elder care facilities. These could be on the model of mutual aid networks helping in people's homes or otherwise through the subsidised use of existing private facilities.

Tackle the kinwork and care deficit that social distancing measures generate.

Alongside this, households should be paid a care supplement similar to a Child Benefit through the second wave to recompense them for the burdens unpaid care-workers are bearing. These measures are as important for our economy and society as sustaining businesses through the pandemic.

In the longer term, community renewal centres should be created. These should be broader in reach than the older Surestart Centres. These would provide formal free or highly subsidised child, elder and other care alongside mental health and access to small business grants.

2 | THE COMMUNITY

Forms of third sector, mutual aid and government social care can either help or hinder the social foundations of life in the UK. As we enter into the second wave of Covid-19, we need to address how to strengthen organisations at the local level. This means improving the access, assessment capacity and adequacy of services to meet the diverse needs of those in their communities. We believe that communities themselves should have a role in identifying priorities and co-producing solutions.

We suggest investment in social infrastructures at community level, so local authorities, citizen groups and the third sector are able to provide complementary and comprehensive support to the diverse needs of their communities. This can be achieved through the local renewal centres where paid community champions, peer supporters, local authorities, other stakeholders and public health bodies work together to co-produce locally appropriate solutions. Mutual aid networks can be financed through a national mutuality fund and/or national investment bank.

Build the social infrastructure of communities so they can be adherent and recover



Melissa Francis lives with her two children, T'shaya and T'quarn, in Hackney, 18th August, 2020. After years of volunteering for several organisations in Hackney, she started the CIC Bridge The Gap - Families In Need at the beginning of the pandemic. The aim is to help low income families that require support, get access to the help that's available. Melissa's two children have autism, and the difficulty she experienced accessing these services was her inspiration. Her current campaign to help tackle digital poverty in Hackney has seen them distribute laptops and tablets to over 30 families across the borough. Grey Hutton/National Geographic Society Covid-19 Emergency Fund

3 | THE ECONOMY

The Treasury's one-size-fits-all response was premised only on selective aspects of the economy. Firstly, it eclipses the complexity of current labour arrangements at the level of the region, household and community, and their gendered, classed and racialised forms, including the prominence of casual work and in-work poverty.

Secondly, they focus on waged work and businesses alone, while ignoring financial and rentier economies and their impact.

Build an economic package that meets the diverse working conditions of the population

In the short term, the Government should, as a priority, take a centralised approach to regional regeneration through government investment, particularly in family businesses and SMEs. This should be carried out in partnership with local authority economic officers.

The Government should track and ameliorate the impact of the pandemic on informalised workers who have been disproportionately impacted by it.



Three people queue and one volunteer waits for food to deliver outside one of the new 'Children With Voices' community food hub locations on the De Beauvoir Estate in Hackney, 6th August, 2020. The Community Food Hub was evicted from the Wilton Estate Community Centre and now have 4 locations distributing the donated food.

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4 | OUR RECOVERY



Relying only on economic growth and productivity as a measure of renewal as we emerge from this crisis will occlude forms of ethnic, racial and class inequality. Emphasis on productivity will lead to a dead end of automation and/or rhetoric of zombie companies which should be 'allowed to die', potentially devastating post-industrial economies. Emphasising growth as the measure of recovery will lead to a focus on consumption-led growth, modelled on supporting middle-class households only through hard times.

Apply a social calculus to measuring the health of economy and society.



We suggest a social calculus be applied to the measurement of recovery that includes attention to regional, community and household inequality and how it is deepened or reduced by government policies.

Shukri Adan and some of her volunteers hand out meals and bags filled with small gifts for Eid in Hackney Downs, 2nd August, 2020. To mark the end of fasting for the month of Ramadan there is traditionally presents for the children and a feast that families enjoy together. This year, due to social distancing guidelines, Eid couldn't be celebrated in large groups so Shukri organised meals and presents to be handed out to families one by one in the park.

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5 | STIGMA & BLAME

The uncertainty about, and generated by, Covid-19 has led to blame and discriminatory narratives across all sections of UK society. People, including politicians, policy makers and the general public, have tried to regain security by drawing on assumptions about social groups.

Politicians and the public should be discouraged from circulating these blame narratives. Communications should instead emphasise the risk of exposure for those involved in the vital work of care in the community, which results in members of hardworking families becoming unwell with Covid-19.

Alongside this, all interventions should be accompanied by government funding of community information and support through GPs, peer-educators, community champions and mental health charities and professionals.



Combat the growth of blame and discriminatory narratives

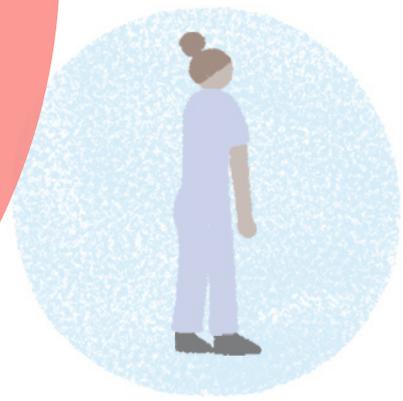
Policy, communications and strategies of community engagement should disaggregate the BAME category.

Vulnerability to Covid-19 should be mapped as a series of structural factors that intersect to create disadvantage in each social situation. More nuanced national and local communications that give clear explanations for transmission in particular environments rather than 'within communities' need to be developed. The emphasis should be that these environments are a risk for ALL social groups.

Volunteers Ziggy Noonan, Carletta Gorden, and Michelle Dornelly from Hackney charity Children With Voices sing along to Whitney Houston as they pack bags with food at the community food hub on the Wilton Estate Community Centre, 6th April, 2020.

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6 | DATA & EVIDENCE



The pandemic has intensified boundaries of stigma and public distrust of the UK government. This is, in part, due to the distance between government policies and the realities of people's lives, as well as to political blame narratives.

Unfortunately, in the absence of comprehensive population-level data on epidemiological transmission that is independent of testing foci, both decision makers and communities rely on assumptions and, sometimes, stereotypes to calculate and explain risk from Covid-19. This leads to problematic, and sometimes stigmatising, policy decisions that don't square with the realities of social life, making it impossible for communities to be adherent.

Generate more accurate, disaggregated and ethnographic, data to inform policy on social behaviour

We suggest the collection of further data and evidence, including ethnographic data, that reveals the impact of the formal and informal care deficit at the community level, particularly in communities under local Tier 2 and 3 social restriction measures. Data must be disaggregated across a range of axes to reduce stigma placed on particular groups, such as BAME communities or young people.



Inside the kitchen of the Suleymaniye Mosque, Haggerston Mutual Aid head chef Harry Wilson puts the finishing touches on meals as they are packaged and put into gifted Deliveroo bags ready for delivery, 11th May, 2020. For one month the Haggerston Mutual Aid group teamed up with Suleymaniye mosque to deliver thousands of meals to families in need across the borough. Grey Hutton/National Geographic Society Covid-19 Emergency Fund