

UK Covid-19 Public Inquiry - Rule 9 Request to Race Equality First - M2/2B/REF/01

Please provide the following information:

1. A brief overview of the history, legal status and aims of the organisation or body. Please explain whether the work of the organisation or body is UK wide, or is instead confined to Wales only.

Race Equality First is a charity and company limited by guarantee which was established in 1976 as one of the Race Equality Councils. We are now one of only four remaining race equality councils in the UK. We are based in Cardiff and our community activities and face-to-face advocacy services are provided for people across the whole of Wales. However, our discrimination and hate crime casework service and our training is provided for individuals and organisations across the UK.

Our core service is to support, advise and represent victims of discrimination and hate crime across Wales. We often represent victims who experience persistent abuse; grievous assault and continuous threats of violence; neighbourhood disputes with letters of hatred, damage to vehicles and property and sometimes people even being forced to move home due to ongoing intimidation. The largest majority of our civil discrimination cases are employment cases, with many of these leading to tribunal.

We are a very small team of just 14 staff and last year we dealt with over 200 discrimination cases. 85 of these were discrimination in employment & 9 of these went to tribunal with a successful outcome.

We also conduct research. The research project we are delivering at the moment is in partnership with Cardiff University. The project will investigate the 'justice gap' faced by many victims of hate crime, how only a small proportion of reported hate crimes lead to conviction, and the difficulties with proving the hostility element of hate crimes.

As well as research we also deliver anti-racism and equality training such as diversity and cultural awareness training and we currently have a portfolio of three projects which promote equality by removing barriers of access. One of these is a mental health project which provides one-to-one counselling and physical wellbeing activities in community venues across Wales. We also deliver a financial and digital inclusion project which supports individuals and families through the cost of living crisis.

2. A brief description of the group(s) which the organisation or body supports or represents.

We support Black and Ethnic Minority people aged 18 years to 90 years of age, including Indian, Chinese, African, Pakistani, Polish / Czech / Slovak and other Eastern European, African Caribbean, Bangladeshi, Middle Eastern, Filipino. We support victims of discrimination and hate crime and those who experience barriers to accessing public services because of their lack of English, confidence, race, religion or nationality.

3. A brief overview of the work of the organisation or body in supporting or representing the relevant group(s) between January 2020 and May 2022 as it relates to the response to Covid-19 of (i) the UK Government; and/or (ii) the Welsh Government.

In mid-March 2020, as the coronavirus pandemic hit and we had to close our office and work from home, all of our group sessions ceased. Our Discrimination and Hate Crime casework service continued unaffected as all communication resumed over the telephone and by email. All of our cases progressed quickly during Lockdown because organisations and clients were easier to contact.

During lockdown there was an increase in discrimination cyber hate claims, discrimination in employment cases and a large number of racist and Islamophobic neighbourhood disputes.

To stay in contact with beneficiaries of our advocacy and group sessions, we provided Government information and updates such as on how to stay safe, around furloughing staff, support and grants that were available for the self-employed or the vulnerable. We circulated self-help tips and activities for isolation via our social media and our WhatsApp groups.

We are pleased to report that no COVID-19-related illness or deaths were reported from our beneficiaries, their family or friends. However, our beneficiaries reported that they were too afraid to access healthcare for existing health conditions such as Type II diabetes, blood pressure, heart conditions and kidney disease. Several called Wales Ambulance Trust for oxygen therapy and many used the dedicated NHS lines for advice and guidance.

The lack of school meals had a great impact on families and we were told that the information about how to access this was unclear. As energy and food costs increased and caused a strain on low-income families, claims for Universal Credit proved problematic for many of our beneficiaries. In Cardiff, we referred people to local food banks and Mosques in Grangetown and Riverside as they prepared culturally appropriate food parcels for our beneficiaries.

Over the first 6 weeks of lockdown our staff called and spoke to 1,987 of our most vulnerable beneficiaries. During the six weeks our staff supported:

- 125 individuals with weekly food parcels. We worked with a number of our charity partners to get these food parcels to our beneficiaries.
- 10 families with school meals in Cardiff, Barry and Newport.
- 1 family in Newport with temporary accommodation in one day.
- 1 family to apply for Education Maintenance Allowance for their son.
- 2 families to apply for Universal Credit.
- One-to-one advocacy was provided for 5 elderly beneficiaries over the telephone.
- 3 of our beneficiaries to apply for financial assistance from the Biscuit Foundation totalling £200

4. A list of any articles or reports the organisation or body has published or contributed to, and/or evidence it has given (for example to UK Parliament or Senedd Select Committees) regarding the impact on the group(s) which the organisation or body supports or represents of the response to Covid-19 by

(i) the UK Government; and/or
(ii) the Welsh Government. Please include links to those documents where possible.

None

5. The view of the organisation or body as to whether the group(s) it supports or represents was adequately considered when decisions about the response to Covid-19 were made by (i) the UK Government; and/or (ii) the Welsh Government. Please also explain the reasons for the view expressed by the organisation or body in this respect.

We worked with and attended a number of committees and forums run by the Welsh Government, during which all responses were taken into account and most were acted upon where the Welsh Government had power to act.

6. Whether the organisation or body raised any concerns about the consideration being given to the group(s) which it supports or represents with (i) the UK Government; and/or (ii) the Welsh Government, when those governments were making decisions about their response to Covid-19. Please provide a list of any such correspondence or meetings with (i) the UK Government; and/or (ii) the Welsh Government, including the dates on which the body or organisation wrote or such meetings were held, to whom the correspondence was addressed or with whom the meeting was held, and any response received from the UK Government or the Welsh Government addressing such concerns.

Petitions were signed and we attended Covid forums with the Welsh Government along with a number of other organisations, all of whom raised concerns about the impact of covid on black and ethnic minority people.

7. A brief summary of the views of the organisation or body as to any lessons, if any, that can be learned from any consideration which was given to the group(s) that the organisation or body supports or represents by (i) the UK Government; and/or (ii) the Welsh Government when they were making decisions about their response to Covid-19.

COVID-19 had a disproportionate impact on black and ethnic minority people. Many of the health or social care workers who died from COVID-19 were from black and ethnic minority backgrounds. Patients from black and ethnic minority backgrounds required critical care than that expected from the overall population prevalence.

We do not fully understand the reasons for such impact. Though we know that people from black and ethnic minority backgrounds have higher rates of underlying health conditions, such as type 2 diabetes and hypertension and that for this reason they may have increased vulnerability, we do not fully understand the reasons for such impact.

There were calls for an urgent investigation to understand the factors involved. In particular, the government was asked to identify quickly the evidence that will enable us to act in an informed way and do all that we can to minimise avoidable harm in vulnerable groups.