uncertainty about how many significant waves of infection would be seen with COVID-19. Two years later, COVID-19 is still with us and infecting over 1% of the population at any time.

The impact of the coronavirus pandemic has been monitored closely over the past two years and the objective of this paper is to summarise the impact that the pandemic has had on health inequalities in Wales, including analysing how the impact has changed throughout the course of the pandemic. This report will present evidence to investigate whether partners in Wales have been successful in achieving the previous report's recommendation of protecting the most vulnerable population. Looking forward into the 2022/23 winter months, with the cost-of-living crisis likely to impact the Welsh population, this paper will also consider the impact this could have on health inequalities.

Introduction

Although COVID-19 poses a risk to all individuals, evidence shows that the COVID-19 pandemic has impacted some people more than others, directly and indirectly. For example, COVID-19 disease has been found to directly affect people differently, based on factors such as age, sex, ethnicity, underlying health conditions and socioeconomic deprivation. These 'axes of inequality' interact in different ways – COVID-19 has been described as a 'syndemic' meaning a disease that interacts with existing patterns of risk factors and disease. [2,3,4]

Evidence shows that COVID-19 has disproportionately affected people from more deprived backgrounds. In Wales, there is strong evidence of a socioeconomic gradient in total hospitalisations, critical care admissions and deaths.

The latest Annual Population Survey ethnicity estimates show that 4.9% of the Welsh population described themselves as Asian, Black, Chinese, mixed ethnicity or other non-White ethnic group for the year ending 31 December 2021.[5] The ethnicity pay gap in Wales in 2019 was 1.4%, meaning that employees from minority ethnic groups in Wales earned, on average, 1.4% less per hour than White employees.[6]

In the UK, the Office for National Statistics (ONS) analysis found that one in five workers in occupations with closest proximity and highest exposure to COVID-19 are from black and minority ethnic groups, compared with 11% of the working population.[7] In Wales, ONS analysis found that women and those from a minority ethnic background are more likely to be employed within occupations that have the highest potential exposure to COVID-19 and therefore face a disproportionately elevated risk of COVID-19 occupational exposure

[2] Deaths involving the coronavirus (COVID-19) by age group, Wales, deaths registered in March 2020 to February 2021 - Office for National Statistics (ons.gov.uk)
[3] Updating ethnic contrasts in deaths involving the coronavirus (COVID-19), England - Office for National Statistics (ons.gov.uk)
[4] Bambra C, Lynch J, Smith KE. The unequal pandemic: COVID-19 and health inequalities. Policy Press; 2021 Jun 15.
[5] Ethnicity and national identity (Annual Population Survey): December 2021 | GOV.WALES
[6] Ethnicity pay gaps - Office for National Statistics (ons.gov.uk)
[7] Which occupations have the highest potential exposure to the coronavirus (COVID-19)? - Office for National Statistics