

Welcome to the
**COVID-19 & BAME Communities
Friday Focus Webinar**

31 July 2020

**A focus on individuals, groups and
community**

Key public health messages



Group facilitators

Jacqui Demirovska
Cornerstone Community Church

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Dudley Council

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Transforming Communities Together



Zoom etiquette

- Please ensure your device reflects **your name** (First name and/or last name)
- Please ensure that your **video remains off and your audio muted** at all times unless you are asked to speak
- Please use the '**chat**' facility to put forward any questions
- The content of this webinar is accurate at the time of presentation
- Always refer to updated online versions of guidance

Seminars will be recorded and shared on the
Cornerstone Community Church YouTube channel/website
www.cornerstone.cogop.org.uk



Covid-19 and BAME communities: moving forward together

Dr Lola Abudu
Public Health England - Midlands



Disparities in the risk and outcomes of COVID-19

May 2020

	Cases	Hospital admissions	Deaths in confirmed cases	COVID-19 death registrations	All cause death registrations	Excess mortality	Survival
Age and sex	✓	✓	✓	✓	✓	✓	✓
Geography	✓	✓	✓	✓	✓	✓	✓
Deprivation	✓		✓	✓	✓	✓	✓
Ethnicity	✓	✓	✓	✓	✓	✓	✓
Occupation	✓ NMC by ethnicity			✓	✓		
Inclusion health groups	✓ homeless			✓	✓ country of birth		
Deaths in care homes				✓	✓	✓	
Comorbidities				✓	✓		



CORONAVIRUS INEQUALITIES AND MORTALITY RATES

Risk of dying among those diagnosed with COVID-19 **was higher** in those living in the **more deprived areas** than those living in the least deprived



The mortality rates from COVID-19 in the most deprived areas were

more than double for both **males** and **females**

This is greater than the inequality seen in mortality rates in previous years

STAY ALERT ▶ CONTROL THE VIRUS ▶ SAVE LIVES

GOV.UK/coronavirus
NHS.UK/coronavirus

COVID19 & BAME COMMUNITIES ZOOM SEMINARS
YOUR **HEALTH, CARE**
& **WELL-BEING**

Dudley
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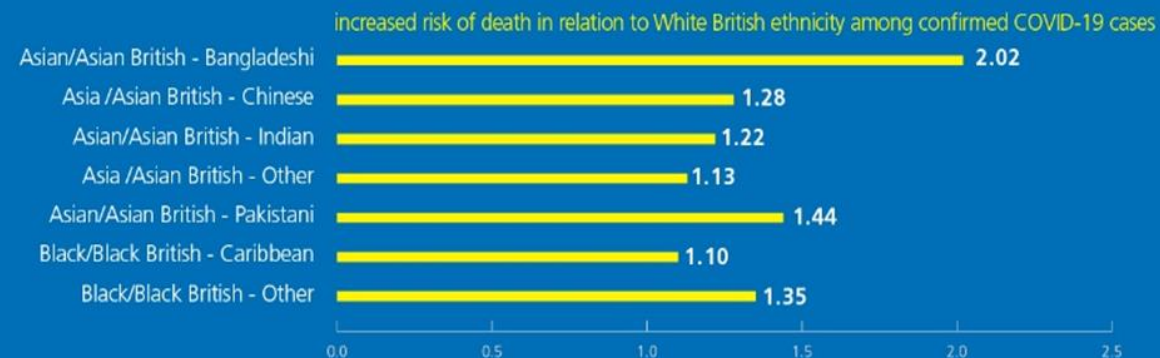
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CORONAVIRUS MORTALITY RATES BY ETHNICITY

Risk of dying among those diagnosed with COVID-19 **was higher** in those in **Black, Asian and Minority Ethnic (BAME)** groups than in **White ethnic** groups

In previous years, the mortality rates were lower in BAME groups when compared to White ethnic groups

An analysis of survival among confirmed COVID-19 cases, using more detailed ethnic groups and after accounting for the effect of sex, age, deprivation and region:



Among people who tested positive for COVID-19 Bangladeshi ethnicity had **around twice the risk of death** than people of White British ethnicity

People of Chinese, Indian, Pakistani, Other Asian, Caribbean and Other Black ethnicity had **between 10 and 50% higher risk of death** when compared to White British ethnicity

People of Black Caribbean ethnicity have **approximately 10% higher risk of death** than people of White British ethnicity

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Survival summary

- Influenced by survival factors such as comorbidities, but may also be influenced by any variation in testing between areas
- Risk of dying following a positive test for COVID-19 (pillar 1):
 - 70 times higher in people 80 years or older than those under 40
 - Higher in males than females (2x in working ages)
 - Higher in those living in the more deprived areas vs those living in the least deprived areas (2x)
 - Higher in many Black, Asian and Minority Ethnic (BAME) groups than the White British ethnic group (up to 2x)
- Adjusted for age, sex, deprivation, region and ethnicity, but not the existence of comorbidities
- Other evidence has shown that when **comorbidities are included, the difference in risk of death by ethnic group among hospitalised patients is greatly reduced**



Comorbidities

All of the conditions examined in the review were more likely to be mentioned on a death certificate when COVID-19 was also mentioned, than they were for deaths overall. However, for cardiovascular disease, the difference was very small.

Condition	Percentage of all deaths where condition is mentioned	Percentage of COVID-19 deaths where condition is mentioned
Cardiovascular disease	44.1	44.5
Diabetes	14.6	21.1
Hypertensive diseases	14.5	19.6
Chronic Kidney Disease	8.5	10.8
Chronic Obstructive Pulmonary Disease	10.6	11.5
Dementia	23.8	25.7

Table 8.1:
Percentage of all deaths, and percentage of COVID-19 deaths where one of the conditions were mentioned, 21 March to 1 May 2020, England

Source: Public Health England analysis of ONS death registration data

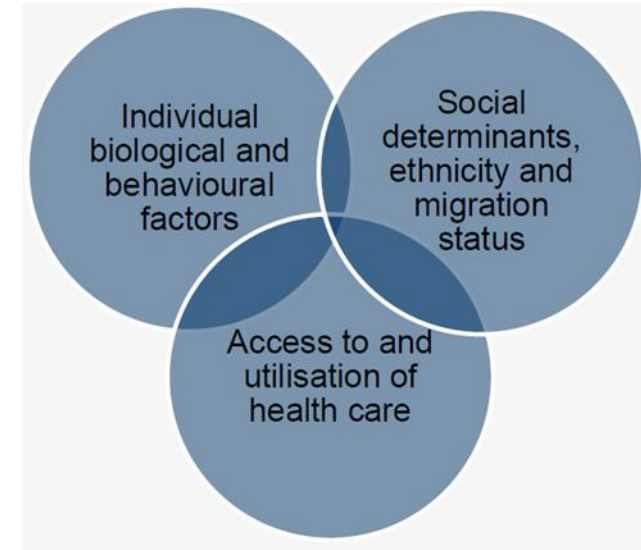


COVID19 and pregnancy

Women from BAME communities are already at increased risk of poor pregnancy outcomes



(MBRRACE, 2019)



Risk factors for hospital admission with COVID-19 infection in pregnancy

- Risk factors that appear to be associated with hospital admission with COVID-19 illness include:
 - 1. Black, Asian or minority ethnicity (BAME)
 - 2. Overweight or obesity
 - 3. Pre-existing comorbidity
 - 4. Maternal age >35 years

www.npeu.ox.ac.uk/ukoss/current-surveillance/covid-19-in-pregnancy#case-definition



Beyond the data - Understanding the impact of COVID-19 on (BAME) communities

www.gov.uk/government/publications/covid-19-understanding-the-impact-on-bame-communities



Beyond the data: Literature review findings

PHE and NIHR found evidence that:

- BAME groups are more likely to be tested and to test positive
- BAME groups have increased risk of death associated with COVID-19
- Ethnicity and income inequality are independently associated with COVID-19 mortality

Individuals from BAME groups are more likely to:

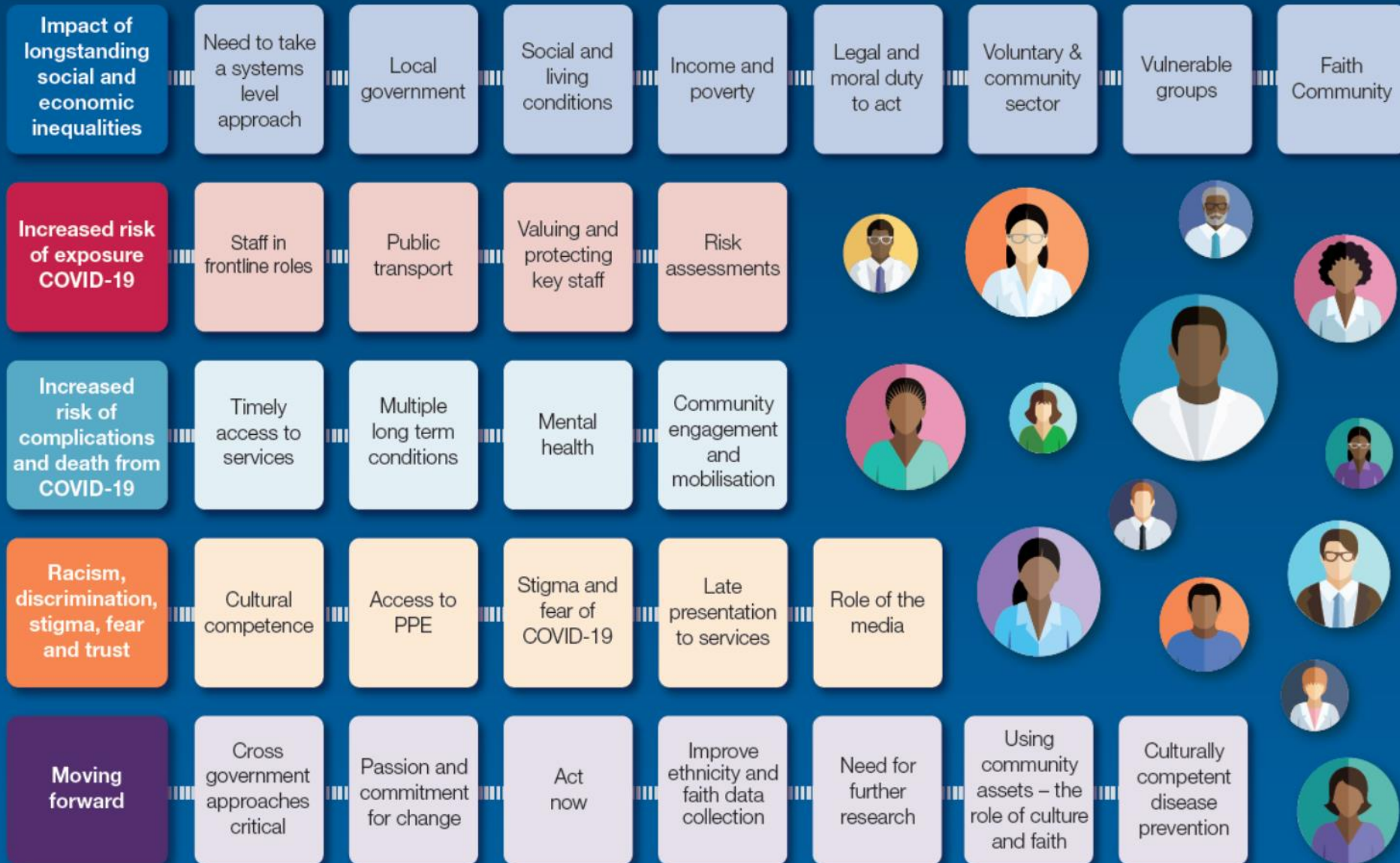
- Live in overcrowded housing
- Work in occupations which place them at increased exposure to COVID-19
- Use public transport to travel to work

Individuals from BAME groups may be less likely to:

- Seek care when needed
- Speak up when they have concerns about PPE or testing



Major and sub-themes emerging from stakeholder engagement sessions



Local Voices: West Midlands Combined Authority Round Table

- Clear and concise communication through faith and community organisations is key to reduce risk of coronavirus from current and future phase(s)
- Faith and community organisations are pillars within communities that need to be engaged and are able to provide trusted messages through people who have credibility within their communities
- Rebuilding trust and reducing fear within communities regarding the NHS is required
- Concerns raised around victim blaming of communities
- Structural determinants need to be investigated to understand differential impact as health inequalities are not new
- Recording of ethnicity and faith within routine data (mortality and morbidity) is key to provide nuanced understanding of impact on communities
- Increased digitalisation of services may exacerbate digital inequalities



Recommendations

1. Mandate comprehensive and quality **ethnicity data collection and recording** in NHS and social care data collection systems, including at death certification
2. Support **community participatory research** to understand the social, cultural, structural, economic, religious, and commercial determinants and to develop solutions
3. Improve **access, experiences and outcomes of NHS, local government and Integrated Care Systems commissioned services** including audits, equity in workforce and employment and rebuild trust.
4. Accelerate development of **culturally competent occupational risk assessment tools** for a variety of occupational settings.



Recommendations

5. Fund, develop and implement **culturally competent COVID-19 education and prevention campaigns** in partnership with local BAME and faith communities
6. Accelerate efforts to **target culturally competent health promotion and disease prevention programmes** for non-communicable diseases
7. Ensure that **COVID-19 recovery strategies** actively **reduce inequalities caused by the wider determinants of health** to create long term sustainable change



Responding to the recommendations

1. Taking action in response to the recommendations of the report
2. Ongoing liaison with government
3. System leadership



Moving forward together



Improving maternity outcomes

NICE National Institute for Health and Care Excellence

Reducing inequalities; what service organisation

- Monitor emergent local needs and design services accordingly
 - Appropriate universal services
 - Specialist services

- Provide information about antenatal

- Provide continuity of care

- *By 2024, 75% of women from BAME communities and a similar percentage of women from the most deprived groups will receive continuity of care from their midwife throughout pregnancy, labour and the postnatal period (NHS Longterm plan).*

Women who received models of midwife-led continuity of care



7 x more likely to be attended at birth by a known midwife



16% less likely to lose their baby



19% less likely to lose their baby before 24 weeks



15% less likely to have regional analgesia



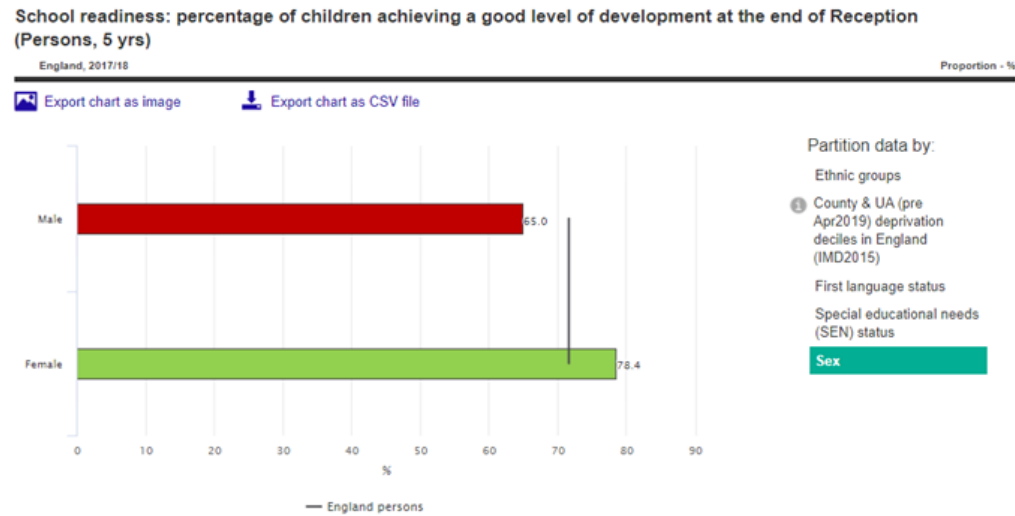
24% less likely to experience pre-term birth



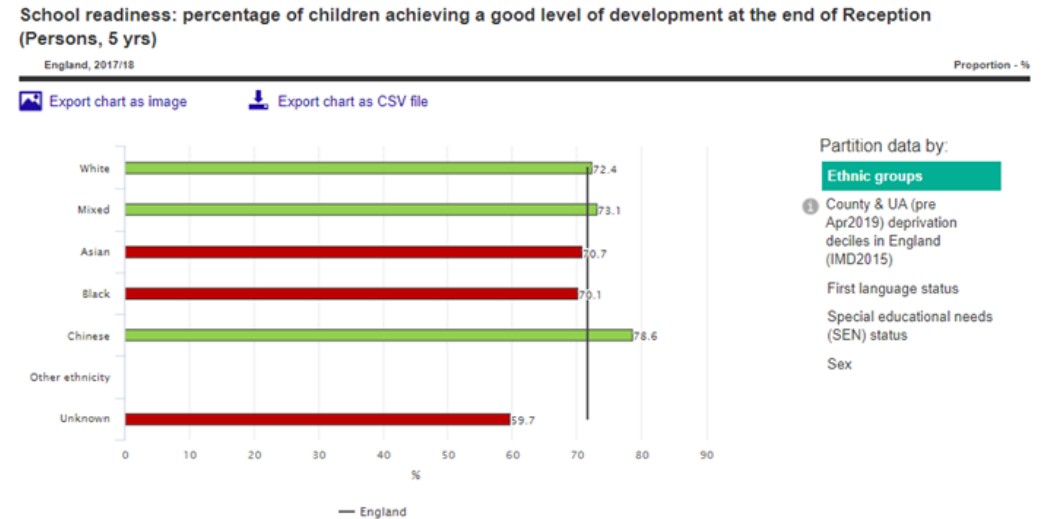
16% less likely to have an episiotomy

Inequalities in school readiness (2017/18)

Percentage achieving a good level of development (GLD) by subgroup in England



Gender

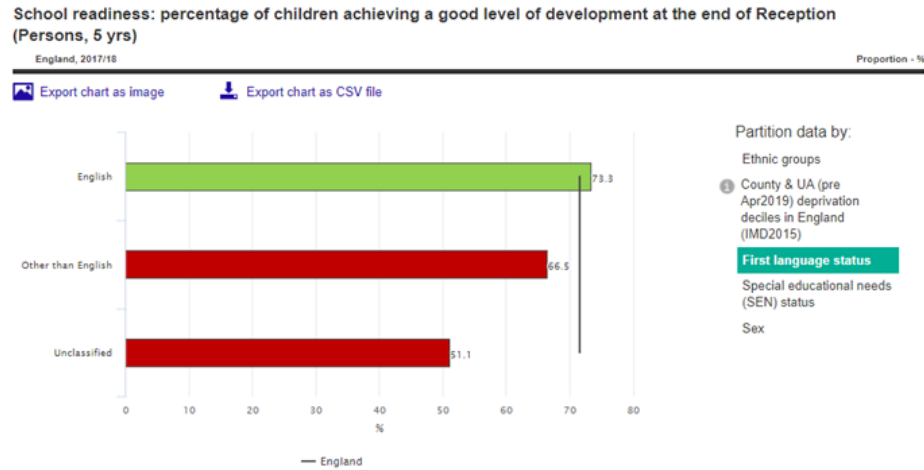


Ethnicity

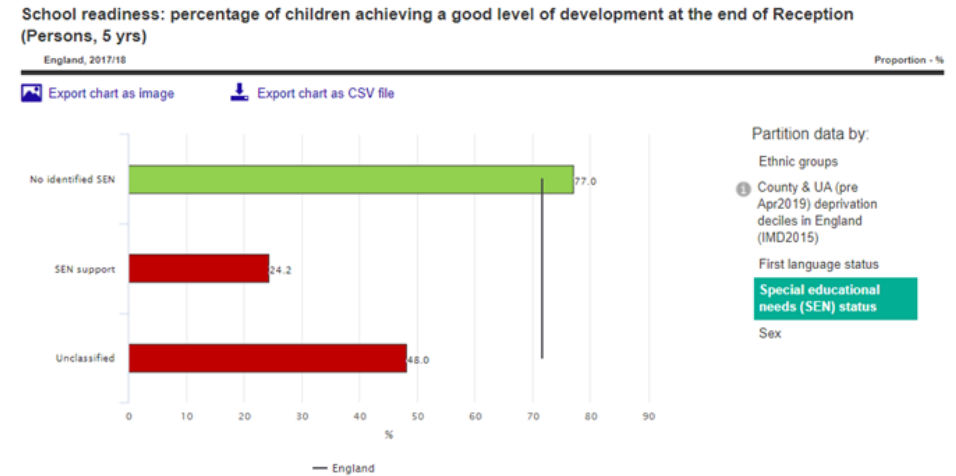


Inequalities in school readiness (2017/18)

Percentage achieving a good level of development (GLD) by subgroup in England



English as a first language



Special educational needs (SEN)



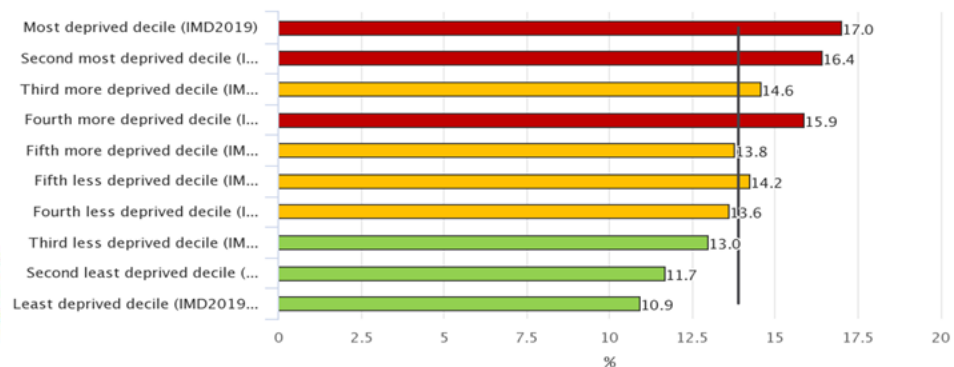
Smoking prevalence in adults

Inequalities in smoking prevalence: APS 2019

Category		Smoking prevalence in adults		
		%	LCI	UCI
Sex	Males	15.8	15.4	16.1
	Females	12.1	11.8	12.4
Age	18-24 yrs	16.0	15.2	16.8
	25-29 yrs	19.9	18.9	21.0
	30-34 yrs	17.9	17.0	18.7
	35-39 yrs	15.7	14.9	16.5
	40-44 yrs	15.1	14.3	15.8
	45-49 yrs	15.8	15.0	16.6
	50-54 yrs	15.3	14.6	16.0
	55-59 yrs	14.0	13.3	14.7
	60-64 yrs	12.7	11.9	13.4
	65-69 yrs	10.5	9.8	11.2
	70-74 yrs	7.9	7.3	8.4
	75-79 yrs	6.5	5.8	7.2
Ethnic groups	Mixed	19.5	16.9	22.1
	Other	15.6	13.6	17.6
	White	14.4	14.2	14.7
	Black	9.7	8.6	10.8
	Asian	8.3	7.6	9.0
	Chinese	6.7	4.5	8.9
Sexuality	Gay / Lesbian	21.9	18.6	25.3
	Bisexual	19.7	15.6	23.9
	Other	19.0	14.6	23.4
	Heterosexual / :	15.2	14.8	15.5

Category		Smoking prevalence in adults		
		%	LCI	UCI
Religion	No religion	17.1	16.7	17.5
	Other religion	16.3	14.5	18.1
	Buddhist	12.7	9.4	16.0
	Christian	12.1	11.8	12.4
	Muslim	11.1	10.2	12.1
	Jewish	8.6	6.1	11.1
	Sikh	5.4	3.6	7.2
	Hindu	5.1	4.0	6.2
Health status	Very good	10.2	9.9	10.6
	Good	14.1	13.7	14.5
	Fair	17.8	17.3	18.4
	Bad	24.2	23.1	25.4
	Very bad	25.3	23.3	27.3

Smoking Prevalence in adults (18+) – current smokers (APS) (2019) – England County & UA deprivation deciles in England (IMD2019, 4/19 and 4/20 geog.)



Healthmatters Community-centred approaches to health and wellbeing

1. Why work with communities?

Community life, social connections and having a voice in local decisions are all factors that have a vital contribution to make to health and wellbeing.

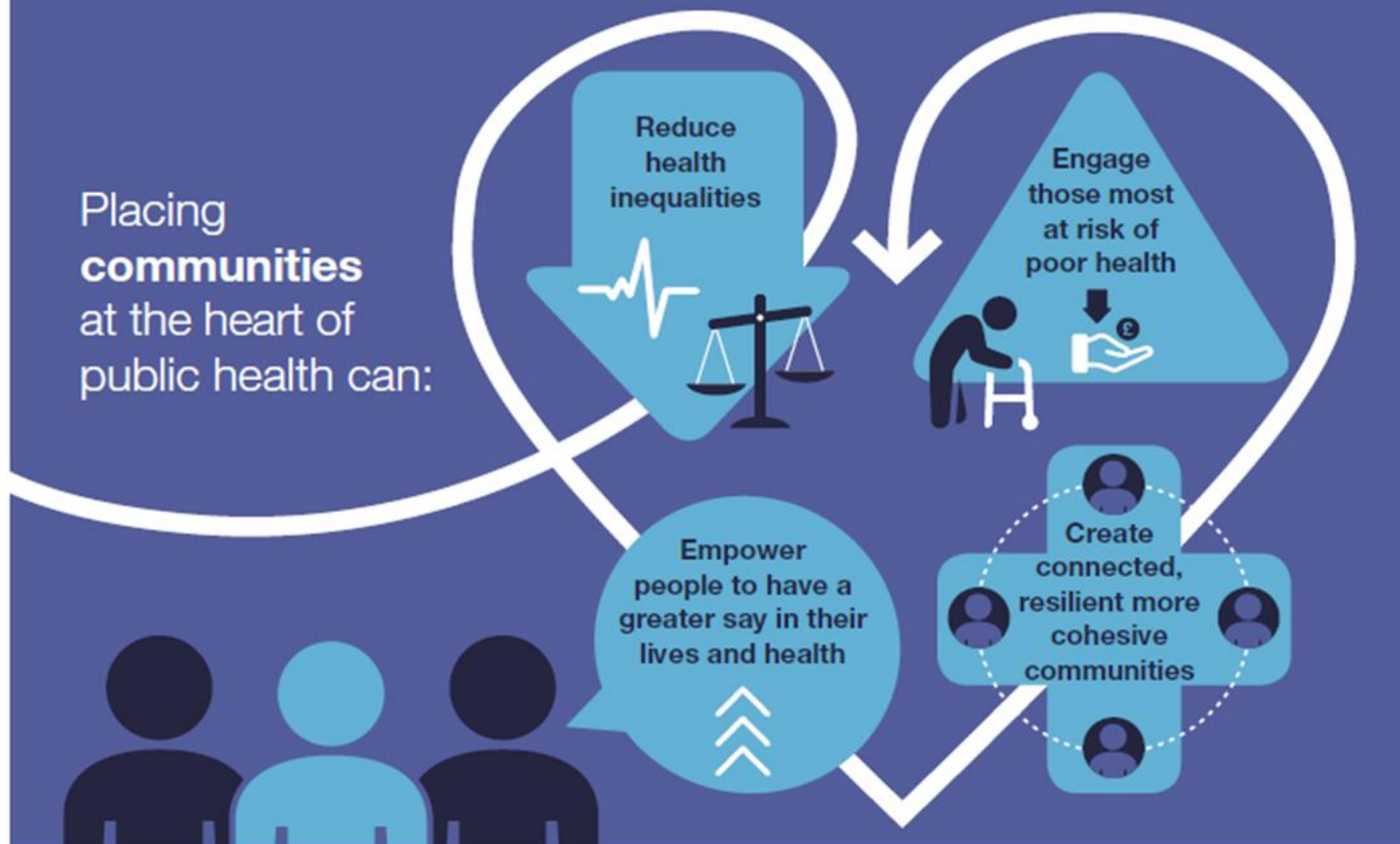
These community determinants build control and resilience and can help buffer against disease and influence health-related behaviour.

Involving and empowering local communities, and particularly disadvantaged groups, is central to local and national strategies in England for both promoting health and wellbeing and reducing health inequalities.

Health inequalities persist and many people experience the effects of social exclusion or lack social support.

Why communities matter for health

Placing **communities** at the heart of public health can:





Healthmatters Community-centred approaches to health and wellbeing

2. Building on evidence and assets

Community-centred approaches are not just community-based, but about mobilising assets within communities, promoting equity, and increasing people's control over their health and lives.

The National Institute for Health and Care Excellence (NICE) guidance reiterates the importance of community engagement as a strategy for health improvement, particularly as it leads to services that better meet the community members' needs.

Community-centred approaches offer a different way to use local resources, and some studies have evidenced that there is good social return on investment.

What are community health assets?

All communities have health assets that can contribute to positive health and wellbeing

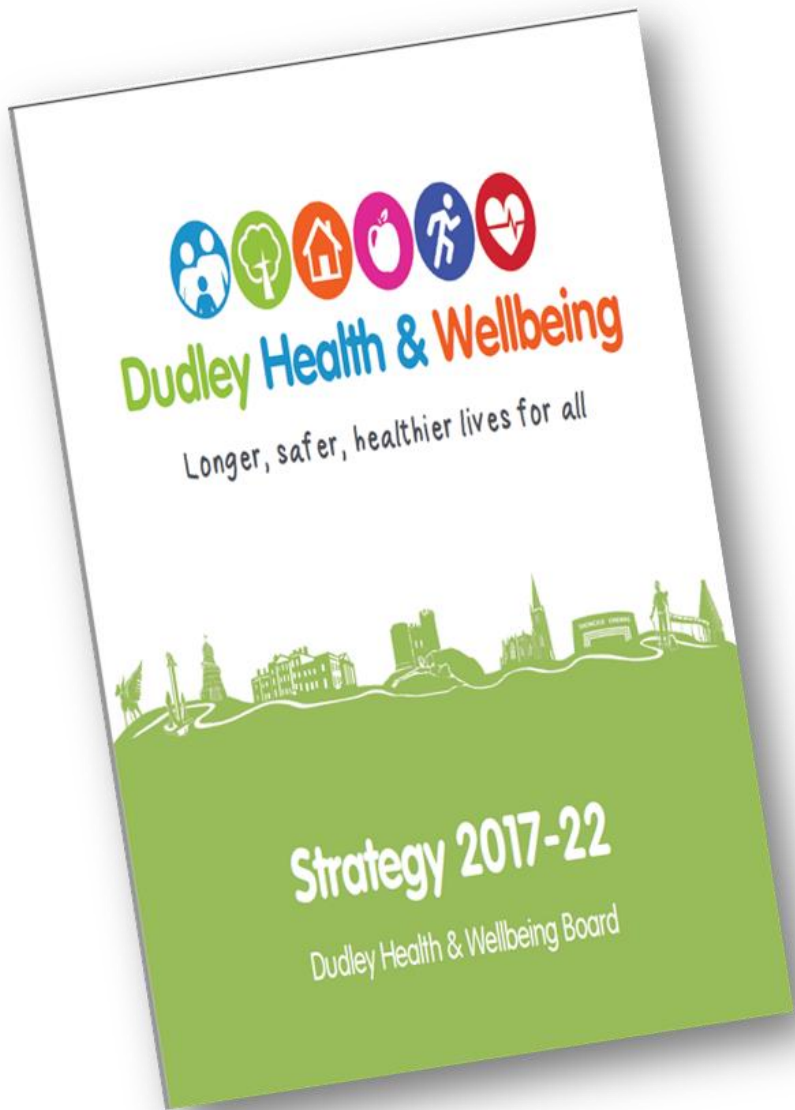
The skills, knowledge and commitment of individual community members

The resources and facilities within the public, private and third sector



Friendships, good neighbours, local groups and community and voluntary associations

Physical, environmental and economic resources that enhance wellbeing



FOREWARD

A commitment from Dudley's Health and Wellbeing Board

Our health and wellbeing strategy is about how we (individuals, families, communities, organisations and local politicians) can make Dudley a place where people live:

'longer, safer, healthier lives'

As a borough we face a number of challenges:

- Only the wealthiest in the borough can expect to get to 70 years old in good health. Some people in the borough can only expect to reach 55 years before having health problems
- People's expectation and demand for services is growing, but the money we have to spend is reducing - so we need to do more with less money

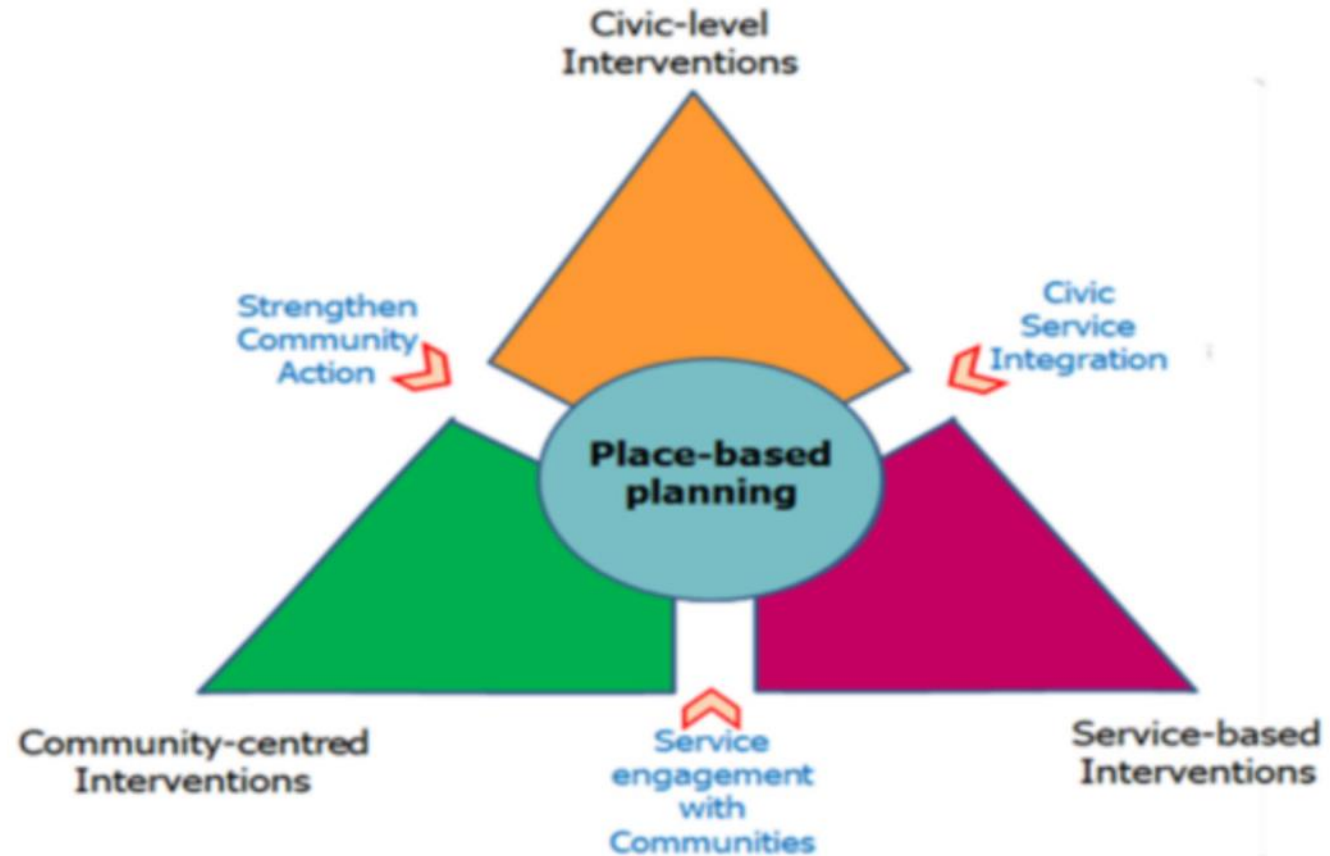
We know that if we all work together to improve people's health and wellbeing and the quality of the services we offer, there will be more money to go round and we will be able to achieve more.

Improving people's wellbeing is a really important part of achieving this vision and is about:

- Us as individuals and our connections with families, friends and community
- The way we look after ourselves and others
- How we will make Dudley a great place to live

Placed based approach to health inequalities

Components of the Population Intervention Triangle



Checklist for a healthier you!

Get it sorted	Tick when complete	Get Active	Tick when complete
Are you, and your family, up to date with vaccinations?		Are you getting moderate physically active for at least 150 minutes a week? - this should be active enough to feel warm and bit breathless.	
If you have a chronic disease like diabetes, have you had your long term condition health checks e.g. diabetes annual review at your GP practice?		Are you doing muscle strengthening exercises at least twice a week? – this could be yoga, lifting weights or body weight exercises like push-ups	
If you are between 40-75yrs old have you had an NHS health check in the last 3yrs?		Eating Healthy	
If you are a smoker, have you tried quitting with support from the free local stop smoking services?		Are you eating five portions of fruit and vegetables every day?	
Keeping Covid-19 Safe	Tick when complete	Are you avoiding full sugar drinks, especially fizzy drinks?	
Do you regularly wash your hands when you come home?		Are you limiting snacks and sweets to special treats?	
Do you wear a face covering when you go into an enclosed space like a bus or a shop?		Getting Mind Ready	
Do you know how to get a Covid-19 test if you develop symptoms?		Are you keeping in regular contact with friends and family?	Tick when complete
Do you know what you and your family will do if you test positive for Covid-19?		Are you volunteering or participating with any group activities?	
		Are you getting at least 7hrs of sleep most nights?	

Thank you

Acknowledgments:

Karen Saunders, PHE

Hashum Mahmood, PHE

Justin Varney, BCC



Useful resources

Place-based COVID - 19 resources and mitigating the impact of health inequalities at a local level

[COVID-19 place-based approach to reducing health inequalities overview](#)

[COVID-19 Summary of Guidance and support for vulnerable groups](#)

[COVID-19 Suggestions for mitigating the impact on health inequalities at a local level](#)

[COVID-19 Health Equity Assessment Tool \(HEAT\) for local areas](#)

[COVID-19 Data tools to support local areas](#)

[COVID-19 Estimated population at risk by LA](#)

Covid19 and pregnancy:

<https://bwc.nhs.uk/download.cfm?doc=docm93jjjm4n3052.pdf&ver=4597>

www.youtube.com/watch?list=PL86i3Rvw-2o96ygZEFNw097I-F3k4gIME&v=joO7IQp2tH4



Key references

[Disparities report](#)

[Stakeholder report](#)

[Equalities Minister TORs](#)

[Commission for Race and Ethnic disparities TORs](#)

[COVID-19 Public Health / LGA](#)

<https://raceequalityfoundation.org.uk/health-care/coronavirus-information-and-resources/>



Covid-19 and workplaces

Dolores Nellany

Head of environmental health and trading standards

Julie Black

Public health manager



www.gov.uk/coronavirus

NHS

Do not leave home if you or someone you live with has any of the following:

- a high temperature
- a new, continuous cough
- a loss of, or change to, your sense of smell or taste

[Check the NHS website if you have symptoms](#)

Find out what support you can get

For example, if you're out of

Guidance and support

Open all

[Protect yourself and others from coronavirus](#) +

[Testing for coronavirus](#) +

[Local restrictions](#) +

[Work and financial support](#) +

[Working safely](#) +

[Businesses and self-employed people](#) +

[School openings, education and childcare](#) +

[International travel and immigration](#) +

<https://www.gmcvo.org.uk/Coronavirus/BAMESupport> - This site has links to a range of COVID information translated into a range of languages and has some links to audio files



Protecting ourselves

- Follow the advice on social distancing; hand washing and face coverings at work and socially
- Your employer should follow Government guidance on making your workplace Covid secure
- Wear PPE when required
- You can confidentially report your employer if they are not following Government guidance
- If you are worried about returning to work, you can get advice from Citizens Advice - www.citizensadvice.org.uk/work/coronavirus-if-youre-worried-about-working/



Test and Trace

<https://www.gov.uk/guidance/nhs-test-and-trace-how-it-works>

If you have symptoms, self isolate for seven days, your household should isolate for 14 days from when you started having symptoms. Order a test via www.nhs.uk/cornoavirus or phone 119.

If you have to self isolate, work from home if you can and are well enough to do so you should, if not, you may be able to claim SSP. If you are not entitled to SSP, you may be able to take your annual leave. If you have no income, speak to our benefits advisers, you may be able to claim a benefit allowance.



My employer is not covid secure – what are my options

- Speak with your employer, ask to see the covid risk assessment
- You can make a complaint to environmental health by calling Dudley Council Plus on 0300 555 2345
- Your contact with the council is completely confidential and your name will not be given to your employer
- Employment law gives protection to “whistle blowers”



What if there is an outbreak at my work

- Employers are encouraged to report cases or suspected cases
- An outbreak control team will be set up to help the workplace manage the outbreak.
- Not automatic that all staff have to go home or that a workplace will have to close
- Workers who have to self isolate can claim SSP or take paid annual leave



Where to get help and advice

- www.dudleysafeandsound.org/ - advice on modern slavery, hate crime and many more safeguarding issues
- www.dudley.gov.uk/residents/benefits/ The council has information on claiming benefits or pop into Dudley Council Plus for face to face help
- Report a health and safety concern to environmental health via Dudley Council Plus by calling 0300 555 2345 or online at www.dudley.gov.uk and enter 'health and safety complaints' into search tool
- Citizens Advice Service



Benefits for people affected by Covid-19

Sharon Tilt
Dudley Welfare Rights Service



Background

- Link between health and financial wellbeing
- Public Health England - (<https://www.gov.uk/government/publications/covid-19-understanding-the-impact-on-bame-communities>)
- The economic impact of CV-19 'shut-down' - felt differently across different ethnic groups in England
- Occupational factors (platt et al)



Background continued

- Across all BAME groups – occupations with greater exposure = high levels of ill health
- Occupations more likely to be self employed = downturn in business
- Those in restaurant or retail trade affected financially by lockdown
- All aspects, ill health, shut down, loss of trade, furlough, lead to financial loss = self compounding
- Full economic effects still not known



Aims of presentation

- Increase knowledge of the welfare benefits system
- Overview of other help on offer
- Support to those in financial hardship
- Focus -
 - ill health
 - self employment
 - Furlough
 - loss of job



Employed - off work due to illness, symptoms or self isolation

- SSP – employees only
 - earning on average £120 week +
 - Paid by employer
 - 28 weeks
- No waiting days – will require an ‘isolation note’
- <https://111.nhs.uk/isolation-note>
- £95.85 per week
- Possible contractual sick pay
- May need top up benefits



No SSP?

- Earning below £120; reached 28 weeks; or self employed = New Style Employment Support Allowance (ESA)
- Based On NICs www.gov.uk/check-national-insurance-record
- Non means tested
- CV19 related:
 - person, or their child, thinks they have coronavirus or is recovering from it
 - a person, or their child, is self-isolating



How to claim

- Claims can now be made online - www.gov.uk/how-to-claim-new-style-esa
- New style ESA is £74.35 week aged 25+
- £58.90 for those under 25
- Might need 'top up benefits' – claimant only
- Not enough contributions? May get Universal Credit



Fuloughed

- Corona Virus Job Retention Scheme (CJRS) March 2020
- Aims to keep people in employment
- Assistance for employers from HMRC
 - 80% of an employee's salary (cap of £2500)
 - includes some zero hours contracts and agency workers
 - closed to new entrants from 30 June



CJRS continued

- Gradually being phased out as follows:
 - 1 July - part time work allowed
 - 1 August, employers to pay employer NI & pension contributions
 - 1 September, employers to pay 10% of wages
 - 1 October, employers to pay employer NI, pension contributions and 20% of wages
- 'top up' benefits may be needed



Redundant?

- May be entitled to a redundancy payment
employee - worked for current employer for 2 years+
www.gov.uk/redundancy-your-rights/redundancy-pay
- Employer insolvent? Possible help from government
www.gov.uk/your-rights-if-your-employer-is-insolvent
- may be able to access welfare benefits



Unemployment – What can I claim?

- New Style JSA- sufficient NICs
- www.gov.uk/check-national-insurance-record
- claim online www.gov.uk/jobseekers-allowance/how-to-claim?step-by-step-nav=e7b3ea75-05d5-4341-b27a-be3b767b1e3f
- £58.90 per week for those under 25 / £74.35 for those 25+
- available for and actively seeking work
- paid for 26 weeks
- www.gov.uk/guidance/new-style-jobseekers-allowance
- Insufficient contributions? May be able to claim UC
- Top up benefits may be needed – claimant only



Self employed income support scheme

First phase - tax return for 2018/19, deadline 23 April 2020

- have a trading profit of less than £50,000 for 2018/19; or average trading profit of less than £50,000 for tax years 16/17, 17/18 and 18/19
- traded in the tax year 2019-20 & intend to continue to trade 2020-21
- grant of 80% of monthly profits (up to £2,500 a month) for 3 months - now closed

Second phase - Applications from 17 August 2020; same rules as above

- businesses adversely affected by coronavirus on or after 14 July 2020
- 70% of average monthly trading profits
- single instalment – 3 months' worth of profits; capped at £6,570 in total
- second grant even if didn't claim the first



Help with rent and council tax

- Currently in receipt of HB/CTR?
 - Report changes to benefit services on 0300 555 8100 - HB/CTR re-calculated
- Help with CTR? By phone or claim online www.dudley.gov.uk/residents/benefits/make-an-application/
- Help with rent but not in receipt of HB - may qualify for Universal Credit (UC)
- Struggling to pay council tax? Call 0300 555 8000 for help to reschedule



I have a mortgage

- Means tested benefits offer help with M.I
- Now a loan
- not interest free – ‘charge’ on the property
- Recovered from equity in the property
- independent legal and financial advice strongly recommended
- Check for mortgage protection policy
- Home owners may be eligible for a ‘mortgage holiday’
- mortgage repayment deferred = interest will still accrue
- Not everyone eligible = contact lender



I have children

- Already receiving tax credits, and HB? benefit check before taking any further decisions!
- Claim for UC will end any legacy benefits
- Some people better off; some find no difference, some worse off
- Not in receipt of benefits? Most people no longer able to claim tax credits, or HB = claim UC



Universal credit

- Universal Credit (UC) - replaced means tested benefits
- Paid monthly in arrears; five week wait for the first payment
- Advance of benefit (loan); Repayments from UC, over 12 months
- Can top up SSP, New Style ESA, and New Style JSA – amounts for partners and children
- Help with rent for those not receiving HB
- Means tested benefit - income and capital rules
- www.gov.uk/universal-credit for information
- Apply for UC online at <https://www.gov.uk/apply-universal-credit>
- Help to claim - Citizen's Advice help to claim service at www.citizensadvice.org.uk/about-us/contact-us/contact-us/help-to-claim/



Further help

- online checker available at www.gov.uk/benefits-calculators.
- You can also call the Welfare Rights Service on **01384 815002**, available Tuesdays and Thursday 9.30am to 1pm and 2pm to 4.30pm
- Limited face to face contact with DWP - social distancing or via telephone/digital
- DWP use The Big Word for non English speakers
- Dudley Council's L2L service if no one to help



References

Beyond the data: Understanding the impact of COVID-19 on BAME g (Public Health England, PHE Publications June 2020)

Welfare Benefits and Tax Credits 2020/2021 (Child Poverty Action Group 2020)



Transforming Communities Together

Cassius Francis
Just Finance Development Worker for the Black Country



Coronavirus financial context

- Many households are now facing an unprecedented and prolonged income shock. We estimate that 28% of adults, or 14 million people, have experienced a direct negative effect on their income
- A broad swathe of the population has been affected but those who are younger, female, are responsible for children, or in insecure work are most likely to have experienced a negative impact
- We estimate that 4.6 million people negatively affected have accumulated £6.1 billion of arrears and debt, averaging £1,076 in arrears and £997 in debt per adult affected. These figures reflect the situation as of late May and are likely of increase substantially before the lockdown is fully phased out; a process that remains uncertain

StepChange debt charity, July 2020



Coronavirus financial context

- National data shows that in the last year for which figures are available, black people had the highest unemployment rate of all groups; were most likely to have a household income below £400 a week; and, after Bangladeshi households, were most likely to claim income-related benefits. Only 8% of black pensioner families drew any income from a personal pension
- According to a recent report by the Runnymede Trust, Black African and Bangladeshi households have only 10p of savings and assets for every £1 of white British wealth
- Guardian Newspaper, June 2020
www.theguardian.com/money/2020/jun/20/financial-inequality-the-ethnicity-gap-in-pay-wealth-and-property



Coronavirus financial context

- 11.5% of people living in Dudley are from ethnic groups other than White British (2011 Census)
- May 2020 data for Job Seekers Allowance (JSA) shows that Black, Chinese and other ethnic communities in Dudley are currently above the comparative average numbers for England, Wales and West Midlands region
- There has been a significant increase in JSA claimants from Chinese and other ethnic communities between March and May this year

Thank you to Greg Barbosa, Dudley Council, for pulling these figures and much more of the data together



Money and Pensions Service

- We define people as needing debt advice if they have missed payments in 3 or more of the last 6 months AND across the last 6 months as a whole, they have been behind on bills/credit
- For most regions it is around 10% need it and one-third who access it
- It's also worth noting that 20% of the BAME population in the UK need debt advice



Where can you get helpful information?



The Money Advice Service | Free and impartial money advice

Debt & Borrowing | Homes & Mortgages | Budgeting & Saving | Work & Benefits | Pensions & Retirement | Family & Care | Cars & Travel | Insurance | BLOG

This article appears in: Coronavirus | Coronavirus information

Coronavirus – what it means for you and what you're entitled to

The spread of coronavirus, also called COVID-19, in the UK and across the world could have implications for your work, benefits and travel plans. This guide will look at your rights to sick pay, what benefits you can claim if you're self-employed or not entitled to Statutory Sick Pay (SSP). This page will help you find out what help is available.

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- COVID 19: Martin's coronavirus update 21 NEW need-to-knows
- Free: Updated, 15 things they've made free online. Eg. watch Lloyd Webber musicals, and Love Never Dies
- Can I cancel my car insurance as I'm not driving? Coronavirus car insurance need-to-knows
- Savings update... Incl NS&I cancels Premium Bond & other May rate cuts

Martin's coronavirus update

www.moneyadviceservice.org.uk

www.moneysavingexpert.com



Where can you help?

Acts 435 - Small grants – bit like crowdfunding – organisations can post for an individual help for bills etc and fundraise for them. – good success rate at the moment. It is a Christian organisation. No cost to use it.

www.acts435.org.uk



Where can you help?

NZF - Muslim grant platform which can help you with basic costs – like food, travel, clothing and monthly bills. It could also help you with small debts – for money owed on credit cards, bank loans, and gas and electricity bills.

www.nzf.org.uk



National Zakat
Foundation™



Budgeting and tools

You could plan for three scenarios:

- Normal budget (not coronavirus affected)
- Best case scenario (coronavirus affected)
- Worst case scenario (coronavirus affected)

Budgeting tools

- Online: www.moneyadvice.service.org.uk/en/tools/budget-planner
- Downloadable/printable: www.stepchange.org/portals/0/assets/pdf/Budget-planner.pdf
- Excel spreadsheet: www.moneysavingexpert.com/banking/budget-planning/#bplanner



Budgeting and tools

Savings – saving a little every week/month can make a huge difference

- “If a family has £1,000 in accessible savings, it reduces their chances of being in debt by 44%” StepChange
- “Each year 4-6 million working-age people experience a life event likely to cause an income shock” Financial Resilience Taskforce



If you are in debt help is at hand and free advice is available...

Struggling with debt repayments?

Contact a debt advice service. A full list can be found www.moneyadviceservice.org.uk/en/tools/debt-advice-locator

Online services include:

www.payplan.com

www.citizensadvice.org.uk

www.Tully.co.uk

Telephone services include:

National Debtline: 0808 808 4000

StepChange: 0800 138 1111



Avoid illegal money lenders or loan sharks

- Little or no paperwork
- Unclear about interest rates or fees
- Increase the debt or add charges
- Get nasty and use threats or violence

0300 555 2222

www.stoploansharks.co.uk

Call for support, an intervention
or to report a loan shark



Further help that's available...

TRANSFORMING COMMUNITIES TOGETHER **JUST FINANCE FOUNDATION**

Covid Cash Course

A short train the trainer session to equip you to support people in this financially distressing time



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www.covid-cash-black-country.eventbrite.co.uk

CAPITAL MASS **TRANSFORMING COMMUNITIES TOGETHER**

VIRTUAL COFFEE MORNINGS

THURSDAYS IN JULY
10AM TO 11AM



zoom

For anyone supporting people with money worries or debt concerns



Castle & Crystal Credit Union (Dudley)

<https://castleandcrystal.co.uk>



Credit unions are non-profit organisations and they are often able to lend money at lower rates (less than 43% APR) than traditional lenders such as banks and payday lenders.



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Thank you for taking part in our
Covid19 and BAME Webinar

Questions and Answers



Meet and greet the community

