

Coalition of Race Equality Organisations' (CORE) Position Paper on Low Uptake of COVID-19 Vaccines within Black, Asian and Minority Ethnic Communities

During the COVID-19 pandemic, it has been well documented that Black, Asian and Minority Ethnic groups have been disproportionately impacted in terms of higher infection, hospitalisation and death rates.¹ However, this disparity has not been reflected with regard to vaccine uptake, with figures demonstrating significant underrepresentation amongst these communities, in comparison with those from White British backgrounds.² This lower uptake also extends to ethnic minority healthcare workers, despite the fact that the nature of their roles predisposes them to a higher risk of COVID-19.

There are a number of underlying factors contributing to the low uptake ranging from: inequalities in access and poorer outcomes in engagement with health services, the perception of high risk associated with the vaccine, and a lack of culturally tailored communication. Additionally, when it was established that individuals from minority backgrounds were more vulnerable to COVID-19, elements of mistrust will have been exacerbated by the fear that their communities will play the role of 'guinea pigs' in testing the efficacy of vaccines.

There have also been concerns raised regarding the vaccines' impact on individuals with immune deficiencies such as sickle cell anaemia, which are more prevalent within those from Black, Asian and Minority Ethnic backgrounds. It is also important to note that the low uptake of vaccines within minority communities has been weaponised by 'anti-vaxxers', thus reinforcing existing scepticism.

As CORE, we have concerns regarding the narrative associated with low vaccine uptake. Citing factors such as lower levels of education and higher levels of deprivation, only serves to further marginalise those from ethnic minority backgrounds - we believe that greater emphasis should

¹ Alder, C. *The disproportionate impact of COVID-19 on BAME communities in the UK: An urgent research priority*. [online] British Medical Journal. Available at: < <https://blogs.bmj.com/covid-19/2020/09/25/the-disproportionate-impact-of-covid-19-on-bame-communities-in-the-uk-an-urgent-research-priority/>>

² GOV.UK. *Factors influencing COVID-19 vaccine uptake among minority ethnic groups?*. [online] Available at: <https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/952716/s0979-factors-influencing-vaccine-uptake-minority-ethnic-groups.pdf>

be placed on compassionate public health messaging, which can be communicated effectively by community and faith-based organisations.

The Black community in particular have valid reasons to distrust pharmaceutical companies, due to historically unethical behaviour such as Pfizer's 1996 illegal trial of an anti-meningitis drug in Nigeria (without parental consent) that killed 11 children and left a number of subjects disabled.³ If low uptake in minority communities is perceived as resulting from superstition, lack of education, 'being selfish', or lack of commitment to fulfilling their 'moral duty', this dismisses genuine concerns, and will lead to increased alienation within particular groups. Stigmatising of communities through inappropriate messaging in the media, deviates attention from resolving issues such as addressing misinformation that persists, for example claims that the COVID-19 vaccine has a negative effect on fertility.

Engagement with Black, Asian and Minority Ethnic communities, community groups and faith leaders, through the development of culturally tailored intervention for example, is essential in building confidence to address doubts concerning vaccination. There is a sense of distrust in the Government and wider healthcare system, as many COVID-19 interventions were not explicitly aimed at supporting those from ethnic minority backgrounds. Targeted messaging endorsed by healthcare workers from these communities will also play a major role as vehicles to reinforce trust.

We applaud the vaccine roll-out but stress the importance of it being accessible and available to all in order for it to be effective. Those from Black, Asian and Minority Ethnic backgrounds are at higher risk of particular medical conditions such as diabetes and kidney disease, and should therefore be offered the vaccine as a matter of urgency, in order to prevent increased hospital admission.

We are concerned that the current data is not specifically highlighting disabled people from Black, Asian and Minority Ethnic communities, and therefore suggests all disabled people are a homogenous group. Based on this, we suspect uptake is even lower amongst disabled ethnic

³ Smith, D. *Pfizer pays out to Nigerian families of meningitis drug trial victims* .[online] The Guardian. Available at: <https://www.theguardian.com/world/2011/aug/11/pfizer-nigeria-meningitis-drug-compensation>

minorities, when compared with non-disabled, and ethnic minority communities as a whole.

We urge that the whole of the UK population, regardless of immigration status, is vaccinated. This should extend to vulnerable migrants, whose immigration status prevents them from registering with a GP. The virus makes no such distinctions and neither should our roll-out policy. Furthermore, it must be clearly communicated, that data relating to vulnerable individuals such as refugees and asylum seekers, will not be shared with the Home Office.

Additionally, with regard to mandatory domestic vaccine passports and 'no job no job' employers⁴, there is a real concern that communities which have already been disenfranchised, will face further discrimination. If uptake in Black, Asian and Minority Ethnic communities is lower than for the rest of the population, vaccine passports will increase disparities in both economic and social engagement.

CORE is encouraged by the activities of organisations led by Black, Asian and Minority Ethnic people up and down the country, in their efforts to organise community events with health professionals to address concerns about safety of the vaccines. There is evidence that when concerns of people have been addressed by health professionals from their communities, this has resulted in people accepting the vaccines when offered.

We therefore call for investment to such organisations across Local Authorities funded by the Ministry of Housing, Communities and Local Government Community Champions Scheme, to enable further engagement to increase uptake of the vaccines. In addition to the £23m in funding that the Government has allocated to Local Authorities and faith-based organisations, we also call for the Government to invest in Black, Asian and Minority Ethnic led community groups, in order to increase the capacity and effectiveness of COVID-19 Community Champions.

⁴ Hinsliff, G. *No job, no job – the moral minefield confronting the UK government*. [online] The Guardian. Available at: <https://www.theguardian.com/commentisfree/2021/feb/26/job-job-uk-government-covid-vaccine-passports>

CORE, the Coalition of Race Equality Organisations, is comprised of a number of the leading organisations within the UK Black Asian and Minority Ethnic, voluntary and community sector. CORE acts as a collective voice to lobby government, influence policy, and raise awareness of issues of inequality that permeate society. Priority areas include housing, health, criminal justice, education, employment, and political engagement and representation.

CORE's membership is outlined below:

- **Alliance for Inclusive Education**
- **Black Training and Enterprise Group**
- **Black South West Network**
- **Blacksox**
- **BME National**
- **BRAP**
- **Caribbean and African Health Network**
- **Council of Somali Organisations**
- **Croydon BME Forum**
- **Friends, Families and Travellers**
- **Greater Manchester BAME Network**
- **JCORE**
- **Lancashire BME Network**
- **Migrants' Rights Network**
- **NHS BME Network**
- **OLMEC**
- **Operation Black Vote**
- **Positive Action in Housing**
- **Race on the Agenda**
- **Race Equality Foundation**
- **Race Equality Matters**

- **Runnymede Trust**
- **South Asian Health Action**
- **Steering Group for London Race Equality Councils**
- **The Traveller Movement**
- **UKREN**
- **Voice4Change England**