



# Responding to COVID-19 in the Liverpool City Region

**Inequality in the Face of COVID-19: How do we  
Build Back Stronger in the Liverpool City Region?**

*Professor Fiona Beveridge*

## Map of Liverpool City Region Combined Authority (LCRCA) boundary (in red) and constituent local authorities



Data sources: Westminster parliamentary constituencies (December 2018 - ONS), local authority districts (December 2018 - ONS), and combined authorities (December 2018 - ONS)

# Inequality in the Face of COVID-19: How do we Build Back Stronger in the Liverpool City Region?

## Key takeaways

1. The disruption imposed by the COVID-19 pandemic presents an opportunity to employers, service-providers, and local and combined authorities to appraise their responses through an equality lens. Ignoring this opportunity will exacerbate inequalities whereas seizing this opportunity offers an historic chance to introduce systemic and lasting social and economic equality.
2. Large organisations and service providers already have the tools and levers to ensure they can progress equality as they recover from the present health and economic crisis and should mobilise these to ensure they emerge stronger, not weaker, from an equality perspective.
3. Leadership, employing appropriate management tools, and mobilising expertise of different kinds are critical to ensuring organisations emerge stronger from the crisis from an equality perspective. Good data, reporting and measuring progress against equality targets are also essential components of a successful recovery.
4. Targeted support and positive action should infuse local and combined authority and organisational activity to direct investment in skills, retraining and personal development to groups most at risk of being excluded from the recovery.
5. Fixing the care economy across the UK and Liverpool City Region is essential to unlock large pools of human capacity and should be given greater priority in recovery plans and their implementation. The Women's Budget Group's "eight steps to a caring economy" offers a framework for achieving this progressive change.

## 1. Introduction

As the COVID-19 pandemic progresses we count its toll not only in lives lost and bodies scarred, but also in economic and social impacts: this pandemic and the measures implemented to control it have had highly-differentiated impacts on different parts of the population.

The context of widespread economic disruption presents a unique opportunity to employers, service-providers, and local and combined authorities to appraise their responses through an equality lens. Ignoring this opportunity will exacerbate inequalities whereas seizing this opportunity offers a unique historic chance to introduce systemic and lasting social and economic equality. In this policy briefing, the unequal impacts of COVID-19 are firstly set out, with particular emphasis

on women and Black, Asian, and minority ethnic (BAME) communities. How to address these inequalities across the Liverpool City Region, including some essential elements of success and specific targeted interventions recommended, are then elaborated.

## 2. Inequality and COVID-19

In April 2020 the [Women's Budget Group](#) (WBG) sounded an early warning about how the impacts of the virus would exacerbate structural inequalities in the workforce, with implications for health, employment and poverty. Women are clearly on the front line of our care services, forming 77% of healthcare workers and 83% of the social care workforce. Of the 3.2 million jobs with the highest level of exposure to the virus, 77% are occupied by women; whilst women



represent almost exclusively the one third of such workers who earn below 60% of median wages (WBG 2020).

Gender Pay Gap reporting may have been suspended during the pandemic to lift the reporting burden from organisations, but it does not automatically follow that self-determined goals, targets and action plans should be abandoned. On the contrary, many organisations are being pushed to re-imagine their business fundamentals including how their staff work and the skills which will be important to their survival and this has presented a unique opportunity to support and invest in those previously under-represented or under-skilled within the workforce.

Women were also hardest hit by the move by many to working from home and by school closures, bearing the brunt of the additional care and home-schooling responsibilities. Parents struggled in many cases to balance paid work and childcare, while three quarters of women were reported as doing “all” the housework. 90% of lone parents are women and 45% of these families were already living in poverty, so that the pandemic and the withdrawal of support services and the social isolation it brought added to already very difficult pressures.

Also in April, analysis from the [Institute for Fiscal Studies](#) (IFS) highlighted those most impacted by sector shut-downs: essentially low-earners and the young. Low earners were seven times as likely as high earners to have worked in a sector which had been shut down, and employees aged under 25 were over 2.5 times as likely to work in a sector which was shut down as other employees (and this calculation excluded students with

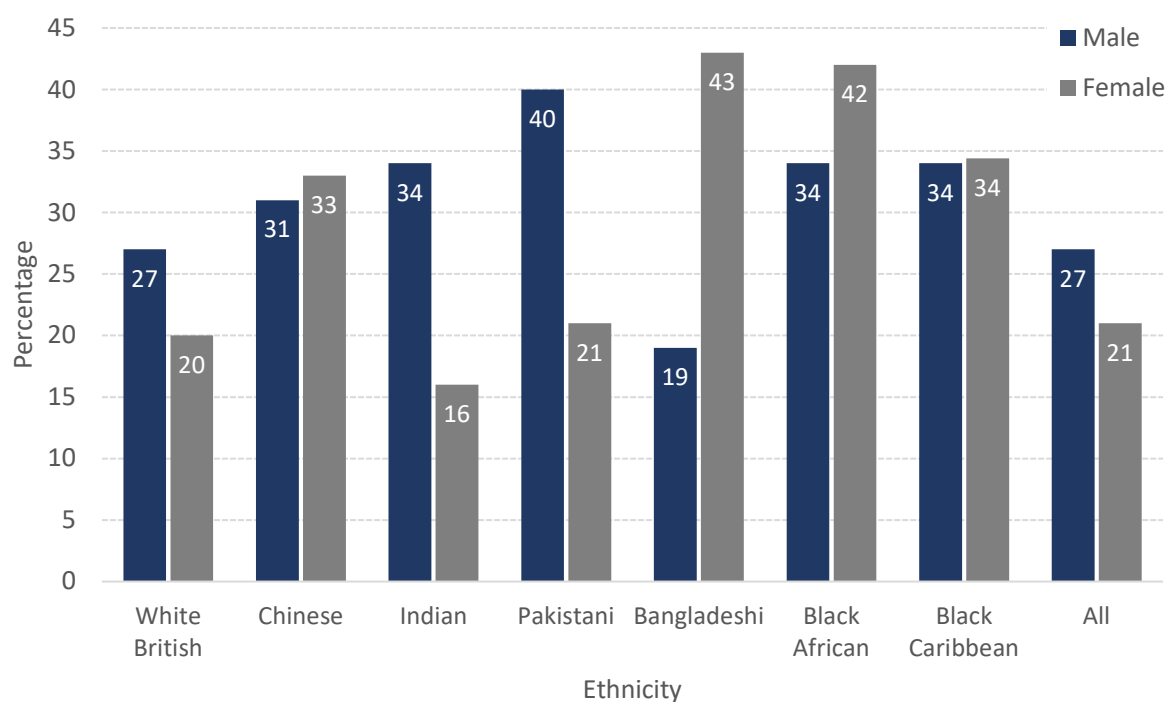
part-time jobs, also badly impacted) (Joyce & Xu 2020).

In June, amid rising concerns about high levels of serious illness and death from COVID-19 amongst BAME patients, a report from the [Fawcett Society](#) with others highlighted the severity of the impact on BAME women, documenting a vicious combination of physical, psychological and financial impacts on BAME communities and women in particular. Not only are BAME people disproportionately likely to become seriously ill and die from COVID-19 if they contract it, they are over-represented in the key worker jobs which put them at risk and have often worked very long hours through the pandemic to maintain services – see Figure 1 overleaf.

The report counts the cost of the pandemic for BAME women in terms of mounting debt, anxiety and work, including the struggle to balance paid and unpaid care work. Nearly a quarter of BAME women reported that they were struggling to feed their children. Anxious about going to work, but unable to manage without their often-low wages, BAME women have carried the brunt of this crisis (Fawcett Society et al. 2020).

Older and disabled BAME people who are retired or unable to work reported particular concerns arising from the loss of government support and other support mechanisms, with more than twice as many BAME as white people reporting a loss of support, and over 51% of BAME women reporting they were “not sure where to turn for help” compared to less than 19% of white women (Fawcett Society et al. 2020).

**Figure 1.** Key worker roles in the UK by ethnicity and gender (%)



(Source: [Runnymede Trust 2020](#))

Overall, the burden placed by this crisis on BAME communities, and particularly black people, reveals a long-standing failure to dismantle institutional racism across a broad set of institutions.

More is yet to come. As the furlough scheme is wound down and the economy begins to re-open, albeit in a faltering and hesitant way, fresh equality risks will emerge. The elderly, many of whom have sheltered effectively initially, remain particularly vulnerable to this virus and will need to continue to self-isolate to the degree they judge necessary to keep themselves safe whilst trying to restore their sense of community and wellbeing.

Many are at risk of unemployment in the sectors shut down, and other areas of the economy operating at less than full strength: the young are particularly at risk in hospitality, retail, leisure and travel and tourism. BAME people, especially women, remain in the triple bind of frontline exposure to the virus, low-paid jobs and increased care responsibilities. And with

working from home set to continue for months for many, and employers increasingly embracing flexible work patterns, there are fears that, rather than fostering the improved work-life balance many would welcome, flexible working will institutionalise the increased domestic responsibilities which women have faced through the pandemic so far.

### 3. Tackling inequality in the Liverpool City Region

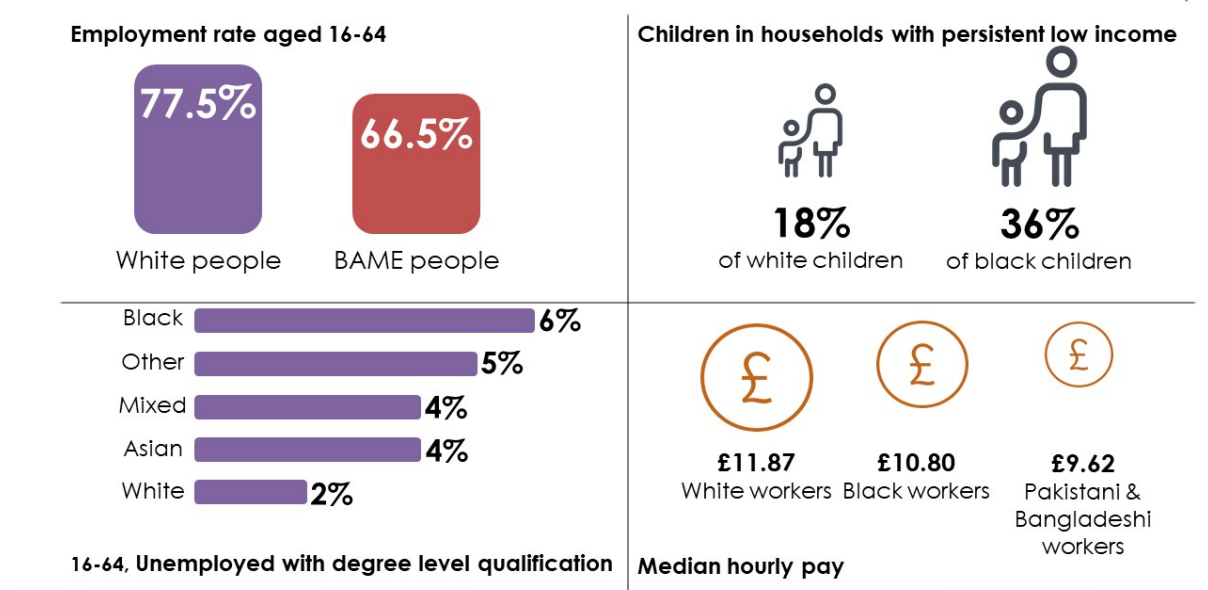
In *Building Back Better*, the Liverpool City Region Economic Recovery Plan, the Liverpool City Region Combined Authority (LCRCA) notes the existing deep inequalities in the City Region: “We entered the pandemic with 70,000 people unable to seek work as a result of ill health; one third of communities in the most deprived decile; women earning, on average £9k less than men; 25% of people in work paid below the real living wage; and an employment rate of 57% for ethnic minorities compared to 74% for

white residents”(LCRCA 2020, p.21). As Figure 2 attests, multiple indicators highlight the range of economic inequalities experienced by BAME people across the UK.

COVID-19 did not create these inequalities, which are long-standing and structural. Rather, the pandemic and the

measures implemented to control it have played out along existing fault-lines in the employment market and in wider society; ruptured some of the coping mechanisms deployed by those at the sharp end of poverty; closed down services relied on to support the disabled, carers and the elderly; and plunged a fresh group into unemployment or underemployment.

**Figure 2.** Indicators of economic inequalities experienced by BAME people in the UK



(Source: Liverpool City Region Combined Authority)

*Building Back Better* recognises the historic opportunity to secure change through the recovery plans being put in place, and the necessity to tackle inequalities: “Prosperity across the City Region is weakened by inequality.”

The LCRCA has already committed to tackling inequalities through the recovery process: “Moments of social, economic and political disruption provide a chance for progressive change. The values and changes we embed now are fundamental to realising the globally competitive, environmentally responsible and socially inclusive economy that we need.”

The question is how!

#### 4. What is to be done?

The equality challenge is a collective responsibility for employers, service providers and local and regional government bodies across the City Region. The ability of individuals to navigate the challenges imposed by the pandemic will be impacted by both macro and micro-responses: neither governments, organisations nor close colleagues acting alone can resolve the issues but all can implement positive steps to support change. More broadly, equality work requires commitment at all levels within and between organisations.

Private and public sector organisations; voluntary, sporting and social institutions; universities, trade unions and the media must all look inwards as well as outwards to identify, measure, address and overcome the inequalities so clearly exposed by COVID-19. Large organisations and service providers already have the tools and levers to ensure they can progress equality as they recover from the crisis and should mobilise these to ensure they emerge stronger, not weaker, from an equality perspective.

The precise challenges will vary from one organisation to another but some essential elements of our responses, though well-rehearsed, are worth setting out here:

- **Leadership:** Leaders have an important role to play to acknowledge the problem and ensure that action is being taken to understand it and, in time, develop responses. Broader, more diverse leadership teams have a better chance of appreciating the full range of individual and community experiences of the pandemic so leaders should consider whose voices are being heard and how to amplify some of them. Leaders also have a responsibility to speak out about inequalities and advocate for change.
- **Data:** Organisations sit on a wealth of information about their workforces and customers or clients. It is crucial to mobilise robust evidence about the equality challenges that specific organisations and sectors face to develop tailored solutions. Robust, well-segmented data will support

analysis of the problems, target setting and progress monitoring.

- **Tools:** Many organisations already have tools that can be deployed to better understand equality challenges and/or mitigate the unequal impacts of COVID-19 on staff, customers and clients. These might include regular staff appraisal processes, training budgets, customer satisfaction reviews, client relationship meetings and more *ad hoc* approaches – one-off consultation exercises, data requests or surveys. Ensuring that an equality lens is brought to these interactions will enhance understanding.

**Expertise:** Large organisations can mobilise expertise of different kinds: equality specialists bring particular insight on established and emerging equality good practice and may be well-placed to forge links with other organisations/sector bodies for some external perspective, while front line delivery employees may have the clearest sight of very recent changes in patterns of engagement. Data or financial analysts may shed light on changing patterns, while operational managers may be dealing with the practical consequences of the pandemic on staff availability, engagement and wellbeing. Distributed leadership – enabling, supporting and requiring equality work right across organisations – will be vital to achieving timely, effective and visible responses.

**Figure 3.** Eight steps to a caring economy



(Source: [Women's Budget Group](#))

### ***Taking Care Seriously***

One telling development early in the UK Government's COVID-19 response was the designation of healthcare and supermarket workers and others as "key workers" entitled to access care through schools for their children. Too often it is conveniently overlooked that care is a vital infrastructure component which underpins economic participation. Meanwhile, UK parents pay amongst the highest childcare costs in Europe (European Commission 2019), and the majority working in adult and child care are classed as unskilled, low paid and have poor economic prospects.

In June 2020 the Women's Budget Group set out the economic case for a care-led recovery, arguing that investing in care creates 2.7 times as many jobs as the same investment in construction, increases overall employment, decreases the gender employment gap and increases tax revenues (De Henau & Himmelweit 2020). Fixing the care

economy across the UK and Liverpool City Region (e.g. by following the steps outlined in Figure 3) is essential to unlock large pools of human capacity and should be given greater priority in recovery plans and their implementation. This recommendation is further reinforced by [The Women's Organisation](#) in their recent report, [Rethinking the Economy for an Inclusive and Sustainable Future](#).

### ***Targeted interventions***

Horizontal and vertical segregation within the workforce are central to many of the inequalities exposed by COVID-19 and its associated burdens, and this segregation has proven very resilient over many decades. Skills gaps, expectation gaps, racism, sexism and health inequalities all play their part. With unemployment creeping up and digital inclusion never being more crucial it is essential that local and combined authorities and large organisations fully utilise targeted support and positive action to direct investment in



skills, retraining and personal development to groups most at risk of being excluded from the recovery. Equality goals, properly monitored, should infuse all support programmes.

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Fiona is Pro Vice Chancellor for the Faculty of Humanities and Social Sciences at the University of Liverpool. Fiona has written extensively about gender equality and gender mainstreaming. She is particularly interested in law and policy-making processes and the ways in which equality concerns can be addressed in these areas. Within the University of Liverpool she is leading work to address racial inequality across a broad range of issues, including the University's response to the Black Lives Matter movement.

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