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Contacts: Tony Thomas, +44 7525 625 866, tonythomas@surgoventures.org

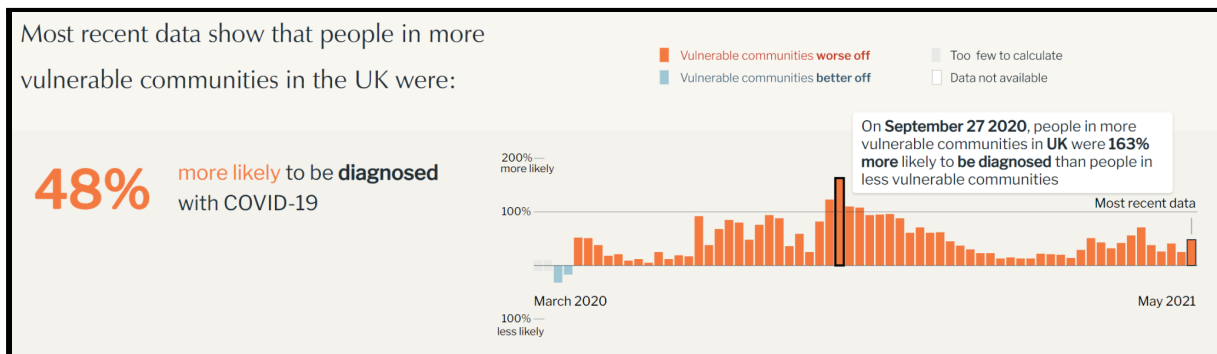
Bethany Hardy, +1 202 277 3848, bethanyhardy@surgoventures.org

New Live Inequity Tracker Reports Disproportionate Impact of COVID-19 on Vulnerable Communities Across the UK

For 62 Weeks Straight, Vulnerable Communities in the UK were Harder Hit by COVID—and Data Shows Inequity is Increasing Again as the UK Re-Opens

LONDON, June 03, 2021— Surgo Ventures today released a dynamic new perspective on the shocking and persistent inequity in health and socioeconomic impacts of COVID-19 on vulnerable communities across the UK.

According to Surgo’s new UK COVID-19 Vulnerability Impact Tracker (precisionforcovid.org/UK), the health burden of people in vulnerable communities in the UK have been significantly worse than those living in non-vulnerable communities, for 62 weeks straight (March 23, 2020 to May 30, 2021)—with those in vulnerable communities being 47% more likely to be diagnosed with COVID-19, 29% more likely to be hospitalised, and 49% more likely to die.



Source: UK COVID-19 Vulnerability Impact Tracker as of June 2, 2021.

Most recently (as of May 30, 2021), **as COVID-19 cases start to rise in the UK with the Delta variant (B.1.617.2), Surgo found that those in more vulnerable communities are 48% more likely to be diagnosed.**

“Although we are all ready to move on, reopen, and be done with COVID-19, the data shows that COVID-19 is not done inflicting disproportionate harm on the UK’s most vulnerable communities,” said Dr. Sema K. Sgaier, Co-Founder and CEO of Surgo Ventures and Adjunct Assistant Professor at Harvard T.H. Chan School of Public Health. “We are launching the UK COVID-19 Vulnerability Impact Tracker today recognizing that we all need to do more to address the sustained negative health and socioeconomic impact of the pandemic on people in need. Our hope is that policymakers, health officials, advocacy groups, concerned citizens, and others in the UK will find it a useful tool to quickly raise the alarm as inequity rises, re-allocate resources effectively, and strengthen health services to prepare for the future.”

The [UK COVID-19 Vulnerability Impact Tracker](https://precisionforcovid.org/UK) builds on the [British Red Cross Covid-19 Vulnerability Index](https://www.britishredcross.org/covid-19/vulnerability-index) to show the differential burdens of COVID-19, and highlights the changes in

inequity over time since the start of the pandemic. The tracker is updated daily to show the disproportionate impact of COVID-19 on people in the UK's most vulnerable communities in each of the nine regions within England, and in Scotland, Wales, and Northern Ireland.

Among its key findings are:

1. **During each wave of the pandemic, vulnerable communities have been the first to feel the effects and the slowest to recover.** As cases have increased in recent weeks, Surgo is seeing that the more vulnerable communities across the UK are being impacted earlier—as shown by the higher inequity in cases and in hospitalisations.
2. **For 62 weeks straight, people in vulnerable communities in the UK were more likely to be diagnosed with COVID-19,** ranging from 5% more likely in May 2020 to 163% more likely in late September 2020, compared to the rest of the country. Hospitalisations and deaths followed a very similar pattern: just a week after inequity in cases peaked in September 2020, inequity in deaths peaked as well at 231% more deaths in vulnerable communities.
3. **The only time inequity is low is when the virus is rampant throughout all communities** during the initial Spring 2020 wave, and during the disastrous winter wave as infections were topping 40,000 per day. This suggests vulnerable communities have been affected earlier and take longer to recover from spikes in COVID-19 transmission.
4. **In one bright spot, the volume of testing has been equitable across more and less vulnerable communities across most of the UK.** Over the course of the pandemic, vulnerable communities in all four nations received slightly more tests—an essential step to managing the spread of the virus (varying from 3% more in England to 15% more in Wales and Northern Ireland).
5. **The disproportionate economic impact has been felt by vulnerable communities, particularly in the North West, Yorkshire and The Humber, and the West Midlands.** Although the overall percentage of the population claiming loss of employment benefits is relatively uniform across the country (ranging from 4.7% in Northern Ireland to 8.1% in London), this masks regional discrepancies: those in vulnerable communities in Yorkshire and The Humber are 52% more likely than their counterparts elsewhere in the North West to need to claim unemployment benefits. Vulnerable communities in the North West are 49% more likely, and those in the West Midlands are 45% more likely, when compared to less vulnerable communities in each region.
6. **Scotland has shown the most inequity of the four nations, while Northern Ireland has shown the least inequity.** Those in vulnerable communities in Scotland were 48% more likely to test positive for and 64% more likely to die from COVID-19; the worst inequity numbers for any of the four nations. Meanwhile, those in more vulnerable communities in Northern Ireland appear to have had similar outcomes to those in less vulnerable communities: While those in vulnerable communities in Northern Ireland were 32% more likely since March 2020 to test positive for COVID-19, they were 5% less likely to be hospitalised and 12% less likely to die.
7. **Among regions in England, the two areas with the greatest inequity have been Yorkshire and The Humber and West Midlands.** They have similar case numbers to the North East, a geographically similar region, but vulnerable communities appear to have worse outcomes.

How COVID-19 Has Disproportionately Impacted Vulnerable Communities in the UK:

Note: Bold/shaded cells indicate standout regions where inequities are highest. Values in orange indicate where vulnerable communities were worse off and values in blue are where they are better off.

	How People in More Vulnerable Communities Fared Compared to Those in Less Vulnerable Communities				
	Diagnosed with COVID-19	Die from COVID-19	Hospitalised with COVID-19	Tested for COVID-19*	Claim for benefits
UK	47% more likely	49% more likely	29% more likely	10% more likely	26% more likely
England	52% more likely	52% more likely	44% more likely	3% more likely	36% more likely
North West	23% more likely	20% more likely	12% more likely	4% more likely	49% more likely
North East	18% more likely	24% more likely	31% more likely	6% more likely	17% more likely
Yorkshire and The Humber	37% more likely	46% more likely	53% more likely	9% more likely	52% more likely
West Midlands	44% more likely	40% more likely	54% more likely	13% more likely	45% more likely
East Midlands	47% more likely	29% more likely	25% more likely	17% more likely	34% more likely
East of England	10% more likely	32% more likely	11% more likely	10% less likely	34% more likely
London	21% more likely	49% more likely	11% more likely	3% more likely	32% more likely
South West	8% less likely	6% more likely	7% more likely	11% more likely	14% more likely
South East	7% less likely	9% more likely	10% more likely	7% less likely	39% more likely
Wales	55% more likely	59% more likely	3% less likely	15% more likely	14% more likely
Scotland	48% more likely	64% more likely	84% more likely**	7% more likely	36% more likely
Northern Ireland	32% more likely	12% less likely	5% less likely	15% more likely	19% more likely

Comparison of each region/nation's 50% most vulnerable lower tier local authorities against 50% least vulnerable, across the full course of the pandemic (March 01, 2020 to May 30, 2021). *For testing, being more likely to be tested is positive. (blue), and being less likely to be tested is negative (orange). **Note that we use hospital admissions for all other nations, but number of patients in hospital for Scotland due to data availability.

Access the UK COVID-19 Vulnerability Impact Tracker [here](#) and the [Methodology](#).

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About Surgo Ventures: Surgo Ventures, with headquarters in Washington, DC and a hub in the United Kingdom, is a nonprofit organization dedicated to solving health and social problems with precision. We do this by bringing together all the tools available from behavioral science, data science, and artificial intelligence to unlock solutions that will improve and save lives. We work globally; in the United States, the United Kingdom, and in low- and middle-income countries on issues including [COVID-19](#), tuberculosis, maternal and child health, housing, and more. Visit us at www.surgoventures.org.

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