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THOUGHT LEADERSHIP

Scotland's roadmap to COVID-19 recovery and renewal: five key actions for supporting vulnerable people and communities

Improvement Service staff working in violence against women, child poverty and inequalities set out how COVID-19 and its impacts have exacerbated existing inequalities and disadvantage. They also suggest five actions to support vulnerable people and communities.



Key messages

▶ It is clear that, while anyone can be at risk of catching COVID-19, the virus itself and the wider population health measures disproportionately impact on some groups, and also compound existing risks and inequalities amongst already disadvantaged and vulnerable people and communities.



- ► Evidence shows that the economic crisis caused by COVID-19 has served to exacerbate existing economic inequalities and disadvantage.
- ► COVID-19 has also highlighted and exacerbated the inequalities that people currently experience in society as a result of sex, race, disability, age and/ or other protected characteristics.
- ► Tackling the root causes and consequences of social and economic inequalities and protecting human rights cut across many of the priorities identified in Scotland's roadmap to recovery, renewal and transformation.
- ▶ It is crucial that local COVID-19 recovery and renewal planning identifies and responds to the specific support needs of all vulnerable communities, taking into account the additional vulnerabilities that people and communities are likely to experience because of poverty and deprivation, gender and racial inequality and socio-economic disadvantage.

We know that inequalities interplay with other forms of discrimination, and that those challenges and risks multiply for people with multiple protected characteristics and/ or complex needs.

Introduction

The impact of the COVID-19 pandemic and the measures put in place to protect the population have had an unequal impact on different people and communities across Scotland. This paper considers what is meant by 'vulnerable communities' and explores how COVID-19 has created new vulnerabilities and exacerbated existing inequalities and exposure to risk factors. To conclude it offers five key actions that will support vulnerable people and communities as we continue to deal with the impact of COVID-19.

As the pandemic progresses, it is clear that while anyone can be at risk of catching COVID-19, the virus itself and the wider population health measures disproportionately impact on some groups, and also compound existing risks and inequalities amongst already disadvantaged and vulnerable people and communities. This includes, but is not limited to, women, those living with violence, abuse and trauma, disabled people, those living with low income and in poverty and/or people from black and minority ethnic backgrounds. We know that inequalities interplay with other forms of discrimination, and that those challenges and risks multiply for people with multiple protected characteristics and/ or complex needs.

During the COVID-19 crisis, the term "vulnerable people" has been used to describe a variety of individuals and communities with different needs, varying from people who are shielding due to underlying health concerns, to children experiencing abuse and neglect and people affected by issues such as problem drug and alcohol use, homelessness and/ or physical or mental health issues. It is crucial that local COVID-19 recovery and renewal planning identifies and responds to the specific support needs of all vulnerable communities. However, it is equally vital that any discussions around meeting the needs of vulnerable communities also takes cognisance of the additional vulnerabilities that people and communities are likely to experience because of poverty and deprivation, gender and racial inequality and socio-economic disadvantage.



Those living in socio-economic disadvantage and who are already experiencing the greatest inequality of outcomes are more likely to experience food insecurity, financial insecurity, poor and cramped housing, fuel poverty, poor educational attainment. poor physical and mental health and digital exclusion.

How has COVID-19 created and exacerbated existing inequalities and vulnerabilities?

Tackling the root causes and consequences of social and economic inequalities and protecting human rights cut across many of the priorities identified in Scotland's roadmap to recovery and renewal. COSLA's Blueprint for Scottish Local Government recognises that groups "facing poverty, inequality and other social harms have felt the impact of the pandemic more than others" and that there is need to support the "realisation of human rights, tackling poverty and addressing intersectional inequalities" as we look towards recovery. Local authorities and community planning partners have played, and continue to play, a vital role in protecting and supporting vulnerable individuals and communities throughout the crisis and as we move towards the "new" normal. It is vital that local COVID-19 recovery, renewal and transformation agendas prioritise identifying and supporting vulnerable individuals and communities and tackling inequalities as key to building back better.

Poverty, economic inequality and socio-economic disadvantage

COVID-19 has brought economic inequality and poverty into sharp focus, highlighting the impact of low paid and insecure work in particular. Evidence shows that the economic crisis caused by COVID-19 has served to compound existing economic inequalities and disadvantage. Those living in socioeconomic disadvantage and who are already experiencing the greatest inequality of outcomes are more likely to experience food insecurity, financial insecurity, poor and cramped housing, fuel poverty, poor educational attainment, poor physical and mental health and digital exclusion.¹

Before COVID-19, almost one in four children in Scotland lived in poverty and, for already vulnerable families, the crisis is likely to further compound family stress and trauma.² Analysis during lockdown found that one in five Scottish households with dependent children were in serious financial difficulty.³ The financial impacts of COVID-19 are more likely to disproportionately impact minority ethnic groups who are already

49% of households with dependent children in Scotland find themselves in the two most serious categories of financial stress.

at a greater risk of poverty, more likely to be in precarious employment and more likely to be private renters. Figures show that people living in areas of high deprivation in Scotland are twice as likely to die from COVID-19.⁴ Many people on low incomes will be working in key worker roles which will expose them to the virus more than those who can work from home.

^{1 &}lt;a href="https://www.improvementservice.org.uk/__data/assets/pdf_file/0013/16402/">https://www.improvementservice.org.uk/__data/assets/pdf_file/0013/16402/
Poverty-inequality-and-COVID19-briefing.pdf

^{2 &}lt;a href="https://www.improvementservice.org.uk/__data/assets/pdf_file/0026/17369/COVID-19-and-children-young-people.pdf">https://www.improvementservice.org.uk/__data/assets/pdf_file/0026/17369/COVID-19-and-children-young-people.pdf

³ https://www.ippr.org/blog/covid-19-how-are-families-with-children-faring-so-far

⁴ https://www.nrscotland.gov.uk/covid19stats



Before COVID, there were 31,333 households assessed as homeless or threatened with homelessness. This is an increase of 1,097 (4%) compared to 2018/19. These households contained 51,365 people, including 35,654 adults and 15,711 children.⁵ The number of young people living homeless is expected to rise in light of the pandemic due to an increase in domestic tensions and a lack of employment opportunities. Poverty is the key underlying cause of homelessness and the impact of the increase in unemployment and reliance on benefit will no doubt relate to an increase in the number of people in need of housing support.

Social inequality

COVID-19 has also highlighted - and exacerbated – the inequalities that people currently experience in society as a result of sex, race, disability, age and/ or other protected characteristics.⁶

Research also shows that the COVID-19 pandemic has, and will continue to. place women, children and young people experiencing all forms of violence against women and girls (VAWG) at increased risk of harm for the foreseeable future.



Survey data published for Carers Week 2020 suggests that there are now as many as 1.1 million unpaid carers in Scotland - 61% are women.

For example, research highlights that the pandemic is likely to exacerbate the inequality of outcomes that women already experience in society. Evidence shows that women have been disproportionately affected economically by the restrictions put in place to reduce the spread of the pandemic and the crisis has further entrenched unequal gender roles, such as unpaid care.7 Research also shows that the COVID-19 pandemic has, and will continue to, place women, children and young people experiencing all forms of violence against women and girls (VAWG) at increased risk of harm for the foreseeable future. This includes women and children experiencing domestic abuse, rape and sexual assault, commercial sexual exploitation (CSE), trafficking, forced marriage and female genital mutilation (FGM).

Recent evidence reviews published by the Scottish Government have highlighted that, while many specialist VAWG services initially saw a drop in referrals during the lockdown period due to increased barriers in accessing support, many women and children experiencing VAWG in local authority areas across Scotland will have experienced increased levels of harm and trauma during this period. Local authorities also reported a marked increase in child wellbeing concerns and child protection concerns during mid-June to mid-July, compared with the same four-week period in 2019. Proportionally, domestic abuse has been identified in more child protection cases than in the same period last year.8 Consultation with service providers highlights that this is likely to result in increased demand for specialist support as social

- 6 https://www.gov.scot/publications/the-impacts-of-covid-19-on-equality-in-scotland/
- 8 https://www.gov.scot/publications/coronavirus-covid-19-domestic-abuse-forms-violence-against-women-girls-during-phases-1-2-3-scotlands-route-map-22-11-august-2020/



restrictions are lifted and women and children come back into contact with both universal and specialist services. However, <u>recent new restrictions</u> <u>announced by the Scottish Government</u> may also present future challenges for vulnerable communities and the services that support them.

The COVID-19 crisis and the responses to it have had a huge impact on disabled people, including the removal of care services, lack of support for children with additional support needs and a negative impact on mental health. Disabled people are experiencing consequences which are likely to continue far into the future.⁹

Five key actions for supporting vulnerable individuals and communities

Supporting vulnerable individuals and communities is key to achieving existing and ongoing local and national priorities. Tackling and eradicating inequalities is fundamental to building back better. The continued response to and recovery from COVID-19 will require vision to ensure that the approach draws on all levers available to play their part in ensuring a fairer recovery and future.

Below, we provide five key actions that can support local areas and organisations to take an inclusive lens to their COVID-19 recovery and renewal planning. These actions are built on what we know works in both

tackling socio-economic disadvantage and social inequality, and supporting those individuals and communities facing some of the most challenging vulnerabilities that have been created and/ or compounded by the pandemic.

1. Identifying vulnerable people and communities and the uneven impact of COVID-19

It is vital that appropriate data is collected in the short, medium and long term to understand the impact of the crisis on local communities and to ensure that planning and services meet local needs. Wherever possible, data should be collected on and disaggregated by gender,¹⁰ ethnicity, age, disability and other protected characteristics. Doing so will help decision makers identify both the varied risks and impact across different communities and any gaps in local data and planning. It may be helpful to explore what data is currently collected across relevant

Figures show that people living in areas of high deprivation in Scotland are twice as likely to die from COVID-19, and structural inequalities place BME groups at much higher risk of severe illness from COVID-19.

- It may be helpful to explore what data is currently collected across relevant community planning areas, such as violence against women, housing and homelessness. problem drug and alcohol use, community justice, employment, poverty and welfare.
- 9 https://inclusionscotland.org/rights-at-risk-covid-19-disabled-people-and-emergency-planning-in-scotland-a-baseline-report-from-inclusion-scotland/
- 10 https://www.improvementservice.org.uk/content/publications/Covid-19-Gathering-and-using-data-to-ensure-that-the-response-integrates-womens-equality-and-rights.pdf
 https://www.improvementservice.org.uk/_data/assets/pdf_file/0032/19697/COVID-19-Supplementary-VAW-Guidance-Sept-2020.pdf



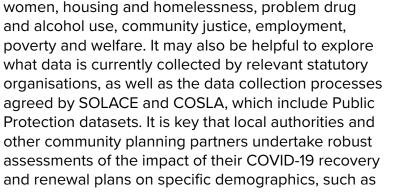
community planning areas, such as violence against women, housing and homelessness, problem drug and alcohol use, community justice, employment, poverty and welfare. It may also be helpful to explore what data is currently collected by relevant statutory organisations, as well as the data collection processes agreed by SOLACE and COSLA, which include Public Protection datasets. It is key that local authorities and other community planning partners undertake robust assessments of the impact of their COVID-19 recovery and renewal plans on specific demographics, such as women, children and young people, and people living in socio-economic disadvantage.

Some questions to consider:

- What data on vulnerable communities is already collected and what gaps currently exist? Is the data gender disaggregated?
- Has an Equality Impact Assessment of your area's local recovery and renewal plans been completed? Has your area considered how your local recovery and renewal plans respond to human rights and UNCRC responsibilities (for instance, completing a Children's Rights and Wellbeing Impact Assessment)? Has compliance with the Fairer Scotland Duty been considered?
- Do all of the strategies, policies and services put in place locally to respond to the social and economic impact of COVID-19 adopt a lens that takes into account different vulnerabilities and how they may have been compounded by the pandemic?

2. Prioritising prevention and early intervention

Estimates suggest that, even before the pandemic, as much as 40% of spending on all public services was accounted for by interventions that could have been avoided by prioritising a preventative approach.¹¹ Service demand will likely increase over time as the impact of COVID-19 continues to be felt in the years to come, and it is vital that actions focus on the long term, and not just crisis and short-term risk. Evidence shows that prevention and early intervention approaches often reduce long-term costs and service demand and improve outcomes. A commitment to early and effective intervention is now more vital than ever to respond to the risks faced by vulnerable people and communities, and to ensure that inequalities and negative impacts on outcomes do not become further entrenched and compounded across generations.





One survey found that more than half (55%) of families in receipt of Universal Credit or Child Tax Credit in Scotland have been pushed to borrow money since the start of the crisis.

Some questions to consider:

It is vital that people with lived experience are able to play a meaningful role in shaping their local area's COVID-19 recovery and

renewal...

¹¹ Christie Commission. 'Commission on the Future Delivery of Public Services.' 2011. https://www.gov.scot/publications/commission-future-delivery-publicservices/pages/2/



- ► Through procurement policy, what community benefits can be realised that can enable positive work on key priorities, such as child poverty, violence against women and girls, and social and economic inequality?
- What have local data, needs assessments and feedback from vulnerable individuals and communities indicated about how systems and services could provide earlier and clearer pathways to support?
- ➤ Can you identify those who have been pushed into hardship as a result of the pandemic, who, with a quick and focussed intervention, could be supported towards more positive outcomes, to prevent problems and poverty becoming entrenched? What would that preventative action look like?
- ► How can referral processes be strengthened to ensure people can access services as early as possible to improve outcomes?

3. Including the voices of lived experience

Evidence highlights that, to ensure services are as effective as possible, people affected by adversity, trauma and disadvantage must be involved in their design. Organisations should collect continual feedback from clients about where services are performing well and where they could improve. It is vital that people with lived experience are able to play a meaningful role in shaping their local area's COVID-19 recovery and renewal, and that there are opportunities to safely capture and learn from vulnerable people and communities' experiences. As traditional ways to

It is estimated that one in five women and one in five children in Scotland experience domestic abuse, and evidence shows that the pandemic and associated restrictions have exacerbated the intensity and risk

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engage communities will be challenged by social distancing, services need to think creatively about how to engage meaningfully.

Some questions to consider:

- ▶ What measures are in place for people with lived experience to safely engage and shape local recovery and renewal planning?
- ► How will people with lived experience be able to participate in service redesign?
- ▶ What skills and resources are needed to build new ways of engaging with individuals and communities in a socially distant world?

The impact of the pandemic on many of Scotland's frontline workers has been immense. resulting in experiences of trauma and retraumatisation, chronic stress and burnout. and poor mental health and wellbeing.



4. Strengthening workforce wellbeing and development

The pandemic has increased the risk of trauma for many people across Scotland, particularly for those already affected by inequality, trauma and adversity. The impact of the pandemic on many of Scotland's frontline workers has been immense, resulting in experiences of trauma and re-traumatisation, chronic stress and burnout, and poor mental health and wellbeing. It is vital that our workforces understand the impact of trauma and abuse and have the skills and confidence to respond in a trauma-informed way that reduces the likelihood of further harm to both themselves and clients.

Some questions to consider:

- ▶ What structures are in place to support staff wellbeing? Where might improvements be made for staff support based on learning, feedback and good practice highlighted during the pandemic?
- ► How can training, such as that provided in the <u>National Trauma Training</u> <u>Framework and Plan</u>, be built into local recovery and renewal planning, to support workforce development and service delivery?

5. Adopting a joined-up, person-centred whole systems approach

The crisis has highlighted the importance of partnership working across the public and third sectors, and it is vital that this commitment to multi-agency partnership work sits at the core of all activities moving forward. Collaborative working is at the heart of a whole systems approach, which recognises that everyone has a role to play in tackling the causes and effects of inequality and adversity. Tackling the adversity, trauma and inequalities caused and compounded by COVID-19 requires the engagement of the full range of community planning partners.

The crisis provides a key opportunity to review the pathways and processes in place locally across both universal and specialist services to assess the extent to which they currently meet the needs of those experiencing or at risk of inequality, particularly individuals with complex needs. It is vital that local areas identify opportunities for different community planning partners to work more closely together to support the development of holistic, person-centred pathways of support moving forward.

Some questions to consider:

- ► How do different policy/business areas understand their role in tackling inequality and supporting those who are affected as part of COVID-19 recovery and renewal? Is your partnership/organisation using all levers available to support recovery and renewal?
- ▶ What opportunities are there to embed a whole systems approach into local service/systems redesign in light of COVID-19? What leadership is required to enable this?
- Where traditional levers are challenged, what more can other services and approaches do to lift people out of poverty or to protect people from

Tackling the adversity, trauma and inequalities caused and compounded by COVID-19 requires the engagement of the full range of community planning partners.



harm, e.g., if employment opportunities are limited, what more can housing policy and practice do to support families on low income?

- ► How can pathways to support be re-designed in the long term to ensure a person-centred approach? How can systems and services work together to ensure this is embedded?
- ► How can systems and services better support people with complex needs and those who are facing multiple disadvantage?