

# Connecting during Covid: Practices of care, remittance sending and digitisation among UK communities

Access to care and support during Covid-19

Policy Brief 1



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# 1. Introduction

The Connecting during Covid (CDC) study aims to address gaps in understanding remittances and care practices of migrant communities in the UK in the context of Covid-19.

While much attention has been given to remittances as economic flows, less consideration has been given to the lives and circumstances of people and communities who have been sustaining these flows in the context of a global, ever changing and complex health and economic crises.

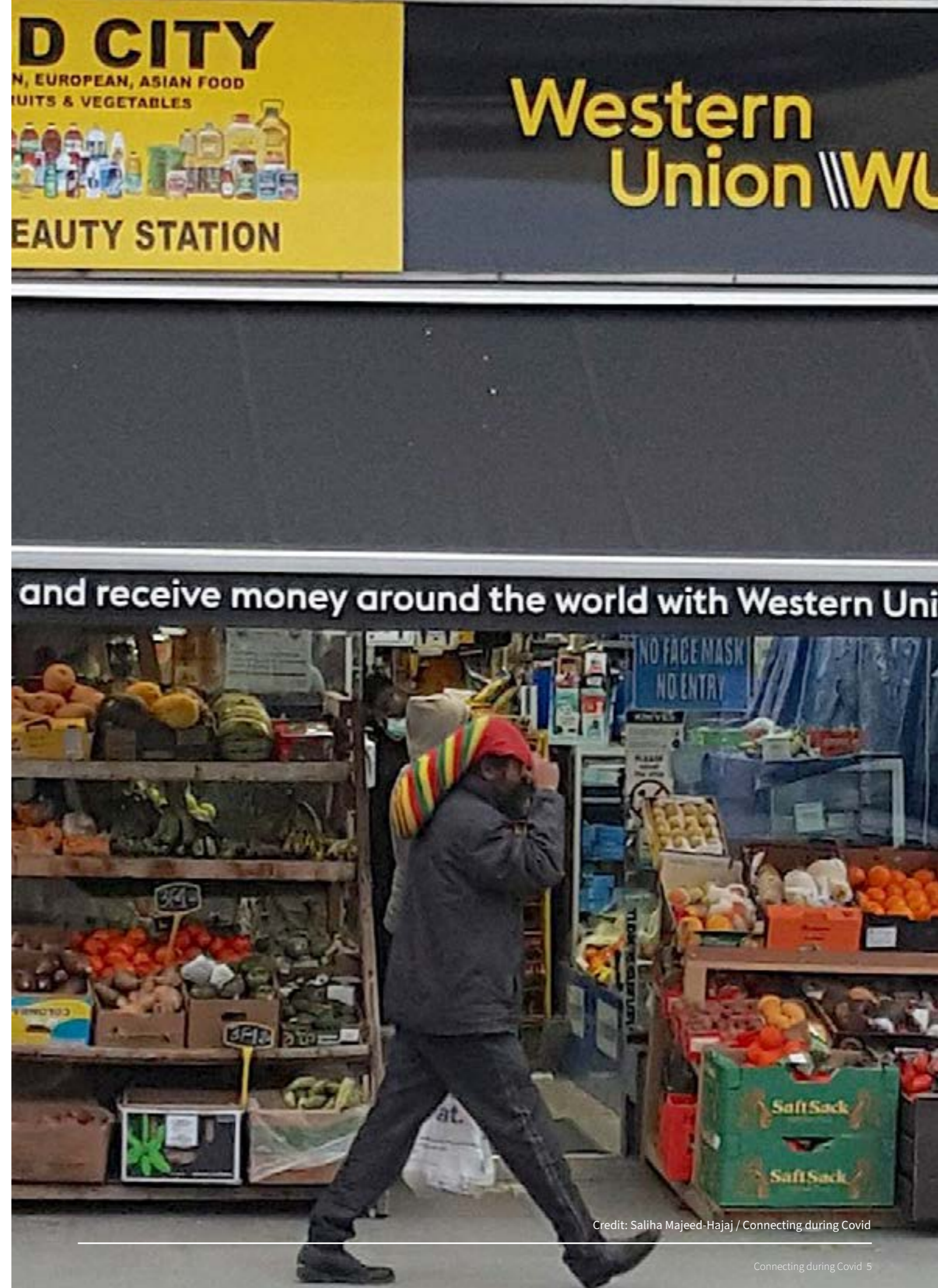
Considering remittances as practices of care, in this brief we highlight some of the reported challenges faced by Brazilian, Indian and Somali migrant communities living in London, Glasgow and Cardiff and the practices and strategies they have adopted to navigate the pandemic.

These findings indicate that many of the government and remittance industry policies and procedures which were put in place to alleviate the impacts of the pandemic did not alleviate the difficulties encountered by migrant communities.

By contrast, community organisations have stepped up to fill the gap in statutory provisions and have been central to sustaining help and support to migrant communities in the UK and globally. They have done so despite a serious shortfall in resources to community organisations from central and local government.

## Key findings:

- Migrant communities reported facing cumulative challenges and inequalities during the pandemic
- Government responses often proved inadequate and inappropriate to the needs of migrant communities
- Migrant communities have played a significant role in addressing gaps in support within their own and across communities, yet such efforts have not been adequately recognised or supported by government.
- Community-based organisations are better placed than many statutory services to provide appropriate and timely support to migrant communities but require adequate government support and resources to do so.



Credit: Saliha Majeed-Hajaj / Connecting during Covid

## 2. Economic, social and health-related impacts of Covid-19

Some people in the study reported being able to sustain employment during the pandemic, largely because they were essential workers, were able to work from home, had stable employment and access to relevant job retention and financial support schemes.

However, in keeping with other research (Migration Observatory, 2021), many others in the study reported working on non-permanent contracts in sectors of the economy hardest hit by the pandemic (such as hospitality) and as a result suffered job losses.

Whether or not migrants could sustain their employment, nearly half of a total of 357 survey participants – 45% of Somalis, 50% of Indians and 51% of Brazilians – reported a decrease in household income during 2020; while 29% of Brazilian, 38% of Indian and 46% of Somali respondents described struggling to meet essential expenses associated with food, housing, education and heating.



**The restaurant shut completely and it opened after a while for take away but with only one or two workers, someone to cook and another to make deliveries outside to serve those who came for the takeaway. So we couldn't, we didn't have a way to go back to work. So, I spent almost five months in this situation. Those were the five months that... I had some money saved too and that money was disappearing.” (Brazilian, female, 33)**



**I am a taxi driver, I don't get the same amount of money I used to get before Covid-19 [...]. We were in lockdown for about 3 months the first time, then there were no customers calling taxis [...] so the electricity bill, the gas bill, the water bill – everything was going up [...] We had some grant from the council [...] £500 for self employed people [...] If you are renting [a car], you have to pay £280 every week but I was lucky, I owned the van.” (Somali, male, 56)**

An additional area of concern for respondents was insecurity in relation to food, particularly noted within the Indian community and affecting primarily migrants with insecure legal status and precarious living conditions, alongside international students<sup>1</sup>. Food scarcities manifested from having to access food banks and carefully manage food intake (by skipping meals and prioritising the needs of children), to challenges in being able to access or afford adequate and culturally appropriate food. Importantly, a number of participants said that they had experienced food insecurity prior to Covid-19 which had become exacerbated by the pandemic.

In terms of housing, there were frequent references to the difficulties of paying rent; whether people could remain in their accommodation during the pandemic was often contingent on whether landlords were flexible enough to allow them to defer rents. In a number of cases, people were evicted from their accommodation despite supposed legal protections preventing this.

Aside from economic hardships, participants described the challenges associated with living in cramped, overcrowded and uncomfortable living arrangements which were made worse by the impacts of lockdowns. Some spoke of how hard it was to share with strangers who had different lifestyle practices and who were thought to not be taking adequate safety measures and hence exposing them to the risk of infection with coronavirus.

Others reported living in a single room in a shared house with limited access to kitchen and bathroom facilities – many chose to eat in their bedrooms and avoided using the bathrooms to minimise risk of exposure to the virus. One Somali mother complained that she could no longer remove her headscarf in the privacy of her own home since there was always the risk of her being seen while her children were learning online.



**There are five rooms in this house and 15-16 people live in the house. We were very careful. We were stressed out as we have a child. These people used to go out during [the] pandemic and we were concerned about our health [...] Sometimes we try not to use the toilet as much because of infections.” (Indian, female, 29)**

The physical and mental health impacts of Covid-19 were frequently alluded to. Some had experienced the illness directly, while others knew of people in the communities in the UK and internationally who had been affected. Many described anxieties relating to the wellbeing of family and friends in home countries.

Particularly in the Somali community, participants spoke of how lockdowns prevented opportunities to collectively grieve and observe cultural norms around care and solidarity following the death of a loved one. Older and young people described the impacts of isolation, loneliness, anxiety and depression during the pandemic and how concerns for loved ones across the globe heightened these feelings. Elder Somali men discussed their frustration at being unable to go out to pray collectively or participate in café culture which were central to their social lives.



Credit: World Bank Photo Collection



**[The pandemic has] changed a lot of things for me. I couldn't go to the gym, I couldn't go swimming and I couldn't meet up with my friends – I used to visit them in their homes and I couldn't any more. I couldn't really go into town because there wasn't a reason to as all the shops and cafes were closed. [...] I'm isolated [...] I've got 150 friends because I'm a taxi driver.” (Somali, male, 56)**

In addition to these widely-experienced challenges, a number of community organisations described an observed increase in domestic and intimate partner violence during the pandemic and how they struggled to facilitate access to appropriate and timely support for women affected.



**Women were coming to us when they need to leave [their homes] so this makes everything more complex, it is riskier than what is already normally risky for the women's journey... They need to go to refuge or safe accommodation and what we are noticing is that housing officers were being very slow to deal with these cases, not considering our service users priority... which means that the whole process is long and more time consuming and harder for us, as well, because we have to do something that before was a referral; now, it takes lots of advocacy to ensure that women are accessing services.” (NGO support worker, Brazilian community)**

Other concerns related to the challenges of sustaining learning opportunities. Many Indian students described the challenges of being unable to pick up part-time work which had been crucial in enabling them to afford studying and living in the UK. Others described how inequitable availability of computers and internet meant that children were unable to access learning online.

<sup>1</sup>It should be noted that the research was able to highlight the extent of food insecurities as a result of accessing some participants through community support organisations who had set up foodbanks.

# 3. Type and sources of support

Despite the range of challenges and difficulties observed within communities, many participants spoke of inadequate and inappropriate access to support and how available government support was not tailored to the needs of migrant communities.

There is evidence of people struggling economically because they were ineligible for the government furlough scheme. This was because of the nature of their work - on highly precarious contracts, or informal arrangements often below the minimum wage.

Intersecting with the nature of work arrangements, was the question of immigration status: many people with leave to be in the UK do not have Resource to Public Funds, and others are excluded because they are undocumented. These groups were also unable to access either government employment support OR universal credit, rendering them acutely vulnerable.

Some were eligible for furlough, but still suffered significant shortfalls because so much of their modest income usually came in tips or bonuses, which were not included in the calculation.



**[At the time of the first lockdown], I was working as a chef supervisor in a Mexican restaurant, but that time restaurants they closed completely, the government closed them. So it's a big problem for us [...] money is a big problem that time because we were getting furlough, but the furlough is 80% of our salary, to be honest I was getting actually 50%. Because for a chef, we were [normally relying on] getting tips as well. It was financially [a] big problem, almost one year." (Indian, male, 48)**

Without secure legal and housing status, migrants were not protected by changes in law relating to the ban on evictions or, in the case of a number of women, access to secure alternative accommodation when they needed to flee violence at home. Within this context, existing community organisations were well placed to identify and respond to the needs of people within the community and many described a peak in demand for their services.

At the same time, new organisations and responses sprung up in direct response to the challenges that were being observed within communities. These included WhatsApp groups to help identify and get help to people in need, putting together and delivering food parcels, establishing new food banks and providing information and guidance on how to access urgent support and relief.

One Somali organisation, seeing the issues families were having with children competing for access to family computers, was liaising with schools to try to get them to change the times of their online learning so that children could work online at different times of the day, enabling them to share devices. Importantly, organisations were not only working in their immediate communities but were connecting across the UK and were making services available to others within different localities according to need.



**We used to get a lot of calls from all over the place like throughout UK. [...] The first week of lockdown I had to arrange food for someone in Edinburgh. There were people calling me up from Brighton and all sorts, rent issues, all sorts of issues. So, it was emotionally draining when people tell us about their situation. It was physically demanding because it's like – imagine getting 40 to 50 phone calls a day and it's not part of your work [...] It was demanding, but rewarding as well." [Indian, male, 49]**

# 4. Policy recommendations

While this research is still in progress, findings to date suggest three important policy recommendations for improving support to migrant communities affected by the pandemic:

1. Covid-19 has highlighted pre-existing inequities in access to support for migrant communities which were not adequately responded to by government and became exacerbated during the pandemic. This research illustrates the need to better understand these inequalities, and to move away from crisis mode short-term responses that assume that intended beneficiaries will be able to access them. This will require better engagement and understanding of migrant community needs.
2. Government measures to alleviate hardship such as furlough schemes and other forms of access to public funding need to be reconsidered in light of the challenges of migrant communities who are either currently ineligible or are not able to navigate the processes of securing such access to publicly-funded support.
3. Community organisations have been at the fore in responding to acute needs, often in contexts where their own funding is being cut. There needs to be greater recognition and resourcing for the central role of such organisations in responding appropriately to needs as they arise in times of crisis.



Credit: World Bank Photo Collection

# 5. The study

This research brief draws on the findings of an 18-month UKRI-ESRC funded project, *Connecting During Covid: Practices of care, remittance sending and digitisation among UK communities*. This project is running from November 2020 to May 2022.

The research aims to address three gaps in the understanding of remittances and care practices in the context of Covid-19. First, it examines shifts in the nature, patterns and direction of remittance sending in response to Covid-19, tracking how the pandemic has shaped migrant community labour market experiences, particular ethnic, racial and gendered vulnerabilities to the virus and community responses to the needs of transnational families. Second, it redresses a bias in remittance studies by exploring the implications of disrupted remittance flows on the wellbeing of migrant communities. Third, it investigates how Covid-19 has affected migrant communities' access to remittance services including the impacts of increased digitisation of financial services.

At the time of writing the research involves a mixed-methods study combining: (i) an online survey in two rounds (with members of Somali, Brazilian and Indian communities in London, Cardiff and Glasgow) – 357 respondents in round one and 61 respondents in round two; (ii) in-depth interviews with 72 participants; (iii) focus group discussions with 30 Somali community members in Cardiff; (iv) two community spotlight workshops; and (v) ongoing interviews with remittance sending intermediaries.

<https://www.qmul.ac.uk/geog/research/research-projects/connecting-during-covid/cdc-project/>

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