COVID-19 recovery

16th April 2021

**Title:** Crisis, Communities, Change. Demands for an equitable recovery

Royal Society for Arts, Manufactures and Commerce (RSA) | 12th April 2021

This report explores how communities have fared during the pandemic. The survey of 2,600 people in Great Britain, including a weighted sample of 1,000 people from ethnic minority backgrounds, was carried out by Savanta ComRes for the RSA.

Amongst the findings was that discrimination in local services was twice as high among ethnic minorities: 52 per cent of Asian and 50 per cent of Black respondents have faced discrimination when accessing local services – compared to 19 per cent of the white population. The data suggests that institutional distrust because of discrimination may play a role in vaccine hesitancy.

The report also finds that ethnic minority groups have been worse impacted by Covid:

* Minority groups have struggled to access government support: 46% of Asian respondents, 41% of those with mixed ethnic backgrounds and 39% of Black respondents say they have struggled or been unable to access government support, despite being eligible for it.
* These issues are compounded by issues with living space and caring responsibilities. Asian, Mixed and Black respondents are twice as likely to say that they have struggled during the pandemic due to a lack of space at home than White respondents.

Full report: [Crisis, Communities, Change. Demands for an equitable recovery](https://www.thersa.org/globalassets/_foundation/new-site-blocks-and-images/reports/2021/04/rsa_communities-polling-briefing.pdf)

Press release: [Ethnic minorities twice as likely to face discrimination in local services](https://www.thersa.org/press/releases/2021/ethnic-minorities-twice-as-likely-to-face-discrimination-in-local-services)

**Title:** Gender divide: a post-COVID recovery must address pandemic inequalities

The Health Foundation | 7th April 2021

The COVID-19 pandemic has affected us all. However, it’s clear women across the UK have faced particular challenges over the past year. From key workers, the majority of whom are female, to mothers supporting their children with home learning – often combined with working from home – women have shown incredible resilience, but at what risk to their long-term health?

Full detail: [Gender divide: a post-COVID recovery must address pandemic inequalities](https://www.health.org.uk/news-and-comment/blogs/gender-divide-a-post-covid-recovery-must-address-pandemic-inequalities)

**Title:** Health of women and children is central to covid-19 recovery

BMJ | 2021; 373: n899 | 14th April 2021

This BMJ analysis argues that new economic policies focusing on the wellbeing of women and children will produce a fairer, stronger, and more resilient society

Covid-19 has widened longstanding health and socioeconomic inequalities affecting women and children. The effects will be seen for many years because the wellbeing of women and children is central to population health and resilience across generations, which in turn affects sustained economic recovery.

Scientists, societies, and economists have long marginalised the health and wellbeing of women and children, but the pandemic has forced new behaviours and ways of working and brought about the collapse of industries that previously seemed invincible. This has led to a questioning of previous norms and provides a window of opportunity for change. This article examines the scientific, rights based, and economic rationale for post-pandemic investment in the health and wellbeing of women and children.

Full detail: [Health of women and children is central to covid-19 recovery](https://www.bmj.com/content/373/bmj.n899)

**Title:** Government hits vaccination target as PM praises "precious protection" offered by jabs

Prime Minister's Office| 12th April 2021

All adults over 50, the clinically vulnerable and health and social care workers have now been offered a Covid-19 jab, as the government prepares to move into the next phase of the Covid-19 vaccination programme. The target was reached ahead of schedule, with the government having pledged to offer a first dose to priority cohorts 1-9 by 15 April.

Nearly 40 million vaccines have now been given in total, with adults under 50 expected to begin to be invited in the coming days.

Full detail: [Government hits vaccination target as PM praises "precious protection" offered by jabs](https://www.gov.uk/government/news/government-hits-vaccination-target-as-pm-praises-precious-protection-offered-by-jabs)

**Title:** Moderna jabs mark new milestone in NHS vaccination programme

NHS England | 13th April 2021

The first Moderna jabs will be delivered in England as the NHS vaccination programme reaches another milestone. More than 20 sites, including the Sheffield Arena, will initially use the newest vaccine, as the NHS continues to expand the vaccination programme.

For those aged 18-29 who are eligible for a jab, the Moderna vaccine provides another alternative to the AstraZeneca vaccine, in line with updated MHRA guidance last week.

More than 27 million people in England have now received their first jab, with more than 6.1 million second jabs also being given.

Full detail: [Moderna jabs mark new milestone in NHS vaccination programme](https://www.england.nhs.uk/2021/04/moderna-jabs-mark-new-milestone-in-nhs-vaccination-programme/)

**Title:** Comparing COVID-19 Vaccine Schedule Combinations - Com-COV2

University of Oxford | 14th April 2021

A study led by experts at the University of Oxford is trialling and comparing the different Covid-19 vaccines to determine whether different vaccines can be 'mixed and matched'.

The "blind" trial is recuriting people agde over 50 who have already received their first dose of the Covid-19 vaccine (Pfizer or Astra-Zeneca), they will be randomised to receive either the same again Astra-Zeneca or Pfizer, or Moderna or Novavax. Participants will not know which vaccine as a booster they have receieved until the trial ends.

* Between 5 and 7 routine blood tests will be taken over 10 months to look at the immune responses to the vaccine depending on the group you are in.
* Participants will need to complete an online diary for up to 28 days following the vaccine received in the trial
* Participants should expect their involvement in the trial to last approximately 10 months

Further details about the Com-COV 2 trial are available from the [University of Oxford](https://comcovstudy.org.uk/about-com-cov2)

See also:

* [Moderna and Novavax vaccines to be tested in mixing vaccines trial](https://www.bmj.com/content/373/bmj.n971) | BMJ
* ['Mix and match' UK Covid vaccine trial expanded](https://www.bbc.co.uk/news/health-56730526) | BBC News

**Title:** Covid-19 has redefined airborne transmission

BMJ | 2021; 373: n913 | 14th April 2021

This BMJ editorial suggests Covid-19 may well become seasonal, and we will have to live with it as we do with influenza. It states that governments and health leaders should heed the science and focus their efforts on airborne transmission.

Wearing masks, keeping your distance, and reducing indoor occupancy all impede the usual routes of transmission, whether through direct contact with surfaces or droplets, or from inhaling aerosols. One crucial difference, however, is the need for added emphasis on ventilation because the tiniest suspended particles can remain airborne for hours, and these constitute an important route of transmission.

This editorial argues that safer indoor environments are required, not only to protect unvaccinated people and those for whom vaccines fail, but also to deter vaccine resistant variants or novel airborne threats that may appear at any time. Improving indoor ventilation and air quality, particularly in healthcare, work, and educational environments, will help all of us to stay safe, now and in the future.

Full editorial: [Covid-19 has redefined airborne transmission](https://www.bmj.com/content/373/bmj.n913)

**Title:** COVID-19 mental health support programme made free for all

Health Tech Newspaper | April 8th 2021

A digital mental health platform is to be made free for all . Silver Cloud is  an informative online therapy programme proven to help support mental health. The ‘Our Space From Covid programme’ is made up of six modules, each addressing issues you may be experiencing due to the COVID-19 Pandemic.

Each module provides clinically-backed support for trouble sleeping, coping with stress, developing mindfulness, financial worries and experiencing grief and loss.

SilverCloud is now offering this service completely free of charge and for anyone to use. The average module takes 30 minutes to complete and is accessible 24/7 from a smartphone, tablet or computer.

Full details about the programme are available from [HTN](https://htn.co.uk/2021/04/08/covid-19-mental-health-support-programme-made-free-for-all/)

Silver Cloud: [Our Space from Covid](https://www.silvercloudhealth.com/uk/landing-page/space-from-covid#space-from-covid)

**Title:** Unemployment and mental health: Why both require action for our COVID-19 recovery

The Health Foundation | 16th April 2021

Unemployment has a detrimental impact on mental health, as does poor quality employment. This article is concerned mainly with unemployment and mental health. Entering the pandemic, unemployment in the UK was at a historic low, but has since begun to rise, and is expected to rise further, as a result of pandemic restrictions.

Two areas that have felt the continued impact of those restrictions are the UK’s labour market and the mental health of the population. The complex connection between mental health and unemployment means that systems designed to address one area must not neglect the other area.

Despite the extension of the Coronavirus Job Retention Scheme to the end of September, the unemployment rate is still projected to reach a 7-year high by the end of 2021. Policies announced in the Budget are rightly focused on economic recovery and tackling the expected rise in unemployment. However, their impact will fall short unless they also tackle the mental health consequences of the pandemic and unemployment.

Full detail: [Unemployment and mental health: Why both require action for our COVID-19 recovery](https://www.health.org.uk/publications/long-reads/unemployment-and-mental-health)

**Title:** Interpreting differential health outcomes among minority ethnic groups in wave 1 and 2

Scientific Advisory Group for Emergencies | COVID-19 Ethnicity subgroup | April 2021

It is clear from ONS quantitative studies that all minority ethnic groups in the UK have been at higher risk of mortality throughout the Covid-19 pandemic (high confidence). Data on wave 2 (1st September 2020 to 31st January 2021) shows a particular intensity in this pattern of differential mortality among Bangladeshi and Pakistani groups (high confidence).

This paper draws on qualitative and sociological evidence to understand trends highlighted by the ONS data and suggests that the mortality rates in Bangladeshi and Pakistani groups are due to the amplifying interaction of I) health inequities, II) disadvantages associated with occupation and household circumstances, III) barriers to accessing health care, and IV) potential influence of policy and practice on Covid-19 healthseeking behaviour (high confidence).

Full detail: [Interpreting differential health outcomes among minority ethnic groups in wave 1 and 2](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/976030/S1168_Ethnicity_Subgroup_Wave_1_and_2_qual_comparison.pdf)

**Title:** Physical inactivity is associated with a higher risk for severe COVID-19 outcomes

British Journal of Sports Medicine | 13th April 2021

A new study from the US has been published in the British Journal of Sports Medicine. It compares hospitalisation rates, intensive care unit (ICU) admissions and mortality for patients with COVID-19 who were consistently inactive, doing some activity or consistently meeting physical activity guidelines. The authors findings indicate that consistently meeting physical activity (PA) guidelines was strongly associated with a reduced odds for severe COVID-19 among infected adults.

Full article: [Physical inactivity is associated with a higher risk for severe COVID-19 outcomes: a study in 48 440 adult patients](https://bjsm.bmj.com/content/bjsports/early/2021/04/07/bjsports-2021-104080.full.pdf)

**Title:** Suicide trends in the early months of the COVID-19 pandemic: an interrupted time-series analysis of preliminary data from 21 countries

The Lancet Psychiatry | 13th April 2021

The COVID-19 pandemic is having profound mental health consequences for many people. Concerns have been expressed that, at their most extreme, these consequences could manifest as increased suicide rates. This study aimed to assess the early effect of the COVID-19 pandemic on suicide rates around the world.

This is the first study to examine suicides occurring in the context of the COVID-19 pandemic in multiple countries. In high-income and upper-middle-income countries, suicide numbers have remained largely unchanged or declined in the early months of the pandemic compared with the expected levels based on the pre-pandemic period. We need to remain vigilant and be poised to respond if the situation changes as the longer-term mental health and economic effects of the pandemic unfold.

Full paper: [Suicide trends in the early months of the COVID-19 pandemic: an interrupted time-series analysis of preliminary data from 21 countries](https://www.thelancet.com/action/showPdf?pii=S2215-0366%2821%2900091-2)

See also: [Suicide rates were static in rich countries in first months of pandemic, study finds](https://www.bmj.com/content/373/bmj.n977)

**Title:** SARS-CoV-2 infection rates of antibody-positive compared with antibody-negative health-care workers in England: a large, multicentre, prospective cohort study (SIREN)

The Lancet | 9th April 2021

Increased understanding of whether individuals who have recovered from COVID-19 are protected from future SARS-CoV-2 infection is an urgent requirement. We aimed to investigate whether antibodies against SARS-CoV-2 were associated with a decreased risk of symptomatic and asymptomatic reinfection.

A previous history of SARS-CoV-2 infection was associated with an 84% lower risk of infection, with median protective effect observed 7 months following primary infection. This time period is the minimum probable effect because seroconversions were not included. This study shows that previous infection with SARS-CoV-2 induces effective immunity to future infections in most individuals.

Full article: [SARS-CoV-2 infection rates of antibody-positive compared with antibody-negative health-care workers in England: a large, multicentre, prospective cohort study (SIREN)](https://www.thelancet.com/action/showPdf?pii=S0140-6736%2821%2900675-9)

**Title:** Making vaccination a condition of deployment in older adult care homes

Department of Health and Social Care | 14th April 2021

To increase vaccine take up among staff working in care homes, the government is considering amending the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This would mean older adult care home providers could only use those staff who have received the Covid-19 vaccination (or those with a legitimate medical exemption) in line with government guidance.

The deadline for responding to the consultation is 21 May 2021.

Full detail: [Open Consultation: Making vaccination a condition of deployment in older adult care homes](https://www.gov.uk/government/consultations/making-vaccination-a-condition-of-deployment-in-older-adult-care-homes/making-vaccination-a-condition-of-deployment-in-older-adult-care-homes)

**Title:** COVID-19 and the workforce: the long path to recovery

Royal College of Physicians | 16th April 2021

As the country edges its way back towards normality, many doctors fear the NHS will take years to recover. According to this Royal College of Physicians survey of members, the majority of doctors (59%) say it will take at least 18 months to get the NHS back on an even keel, including almost a third (30%) who say the huge backlogs in care resulting from the pandemic will take more than 2 years to clear.

The survey also reveals staff wellbeing is suffering, with over two thirds (69%) reporting feeling exhausted and 31% demoralised. Only 57% of doctors say they are getting enough sleep. Two thirds said there had still been no discussion in their organisation about time off to recuperate. Even for the 29% who had had time off, 59% still felt tired afterwards and only 27% refreshed and ready to return.

When asked what impact the pandemic had on teamwork, a third (33%) thought it had a negative impact during the first wave. Two fifths thought it then worsened during the second wave. The top reasons given for that were the pressure they were under (74% in the first wave and 82% in the second) and not enough staff (64% in the first wave and 68% in the second).

This survey had 1,142 respondents, and was conducted between 9-12 April.

Full detail: [COVID-19 and the workforce: the long path to recovery](https://www.rcplondon.ac.uk/projects/outputs/covid-19-and-workforce-long-path-recovery)

Press release: [RCP survey shows doctors fear NHS will take years to recover from pandemic](https://www.rcplondon.ac.uk/news/rcp-survey-shows-doctors-fear-nhs-will-take-years-recover-pandemic)

We

[TRFT Library & Knowledge Service](https://www.trftlibraryknowledge.com/) aim to bring together the latest guidelines, research and news on Covid-19 through our [Covid-19 portal](https://www.trftlibraryknowledge.com/coronavirus.html). For daily updates on Covid-19 visit our '[Latest Health](https://trfthealthweeklydigest.wordpress.com/)' newsfeed, or use the hashtag [#covid19rftlks](https://twitter.com/hashtag/covid19rftlks?src=hashtag_click) to see our latest tweets on Covid-19 research, guidelines and news.

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