Covid-19 in the United Kingdom: Navigating a global pandemic

We are not all in the same boat. We are all in the same storm. — Damian Barr

The first two cases of Covid-19 in the United Kingdom were recorded on 31 January 2020, and up to 28 February, all cases in the UK were contracted abroad. By early March, cases had been reported in England, Wales, Northern Ireland and Scotland. By 19 July there were 294,066 confirmed cases with 45,318 deaths. The numbers are likely to be underestimated because they do not include all Covid-19 deaths in care homes and in the community because of testing and reporting processes.

The four nations of the United Kingdom: England, Scotland, Northern Ireland and Wales, responded to Covid-19 in different ways, and in different timeframes. The responses in these four different entities highlighted the extent of devolution. This article focuses primarily on what happened in England.

The international media coverage of Covid-19 brought the topic to the fore in England by early March. By the time lockdown was introduced, the public was more than ready for decisive action to address the spread of Covid-19, largely complying with restrictions. To begin with, it seemed the government followed the lead of the people rather than the government leading the people.

The pandemic hit Britain at a time when the Prime Minister and his Cabinet were focusing on *Getting Brexit Done*, the key slogan of the campaign that brought them to power on 12 December 2019. The United Kingdom was bitterly divided by the process of Brexit; broken promises, prolonged negotiations and lack of clarity. Boris Johnson's pleas for the UK to unite following Brexit fell on deaf ears. There had been a Cabinet reshuffle in mid-February; the newly elected government was still getting its house in order. The official opposition, the Labour Party, was in disarray, having fared badly in the election, and was in the throes of a hotly contested leadership race.

The UK government's supply and distribution of essential equipment throughout the Covid-19 crisis has come under fire. There seems to have been no clear strategy and no identified standards.

The government did not act decisively in containing the spread of the virus: slow to ban mass gatherings and close pubs and restaurants. Scientific and behavioural science advisors were warning ministers that the public might react badly to draconian measures such as those imposed in China and would not tolerate them for long. Politicians invoked the spirit of the

'blitz', calling on citizens to pull together and respond as they had to the bombing in the second world war. Indeed, the analogy of war was often used in relation to the pandemic.

To some extent this accorded with a view that many British people have of themselves. Many people recognised the call to revive the spirit of the blitz or what was also referred to as the *Dunkirk spirit*. There is a perception among many British people that they have an innate sense of fairness – that individuals can be trusted to do the right thing. This leads to resistance to being told what to do. Individual freedoms and choice are perceived as an essential right of being British. Some have said that this emphasis on individual freedoms often leads to what amounts to peer pressure. Some saw the lockdown and later on, the use of masks in public spaces, as an imposition and a restriction of choice, rather than as a precaution to protect themselves and others from infection. While some resisted the restrictions of lockdown, others welcomed the sense of security in the crisis, and were reassured that the state was following the science. Overall, the British public was largely compliant and cooperative despite the lack of clarity from government.

The British government's messaging around the pandemic and its response to it was mixed, unclear, and often contradictory and has been met with varied success in its efforts to enlist the support of the British public.

On 3 March, Prime Minister Boris Johnson unveiled the Coronavirus Action Plan. The coronavirus outbreak was declared a level-4 incident, which meant that the response to it would be coordinated on a national level. Chief Medical Adviser to the UK government, Chris Whitty, outlined a strategy to tackle the outbreak based on four aims: contain infection, delay demand on the National Health Service (NHS), act based on science and research, and mitigate the socioeconomic impacts of the pandemic.

The upbeat tone of the briefing stood in sharp contrast to the growing unease of many of the government's scientific advisers behind the scenes. The unease did not stop at the level of advisors. The UK government engaged one of the 'big four' accountancy firms to manage PPE procurement. But there was a failure to deliver and those businesses attempting to meet the demand for personal protective clothing, ventilators and other medical supplies reached the conclusion if you wanted to get something done, avoid the British state. Five textile manufacturers interviewed at this time reported increased stress levels – sickness, repeated loss of sleep and raised anxiety – from knowing they could help, yet having their factories empty during the crisis.

A centralised system was used in rolling out a national testing programme. The national system was accused of overlooking and undermining local initiatives including those headed by local government, communities and general-practitioner surgeries. The same national approach was attempted in developing a Covid app, leaving people little control over, and access to, their own data. The criticism of the national-level decision making came to head at the end of July when local lockdown measures were imposed in specific geographic areas. Notice of lockdown was given with immediate effect, late on the evening of 30 July 2020 as

the Muslim community was preparing for Eid al-Adha. There was rage that the notice had come so late after preparations had been made and families were eagerly preparing for the celebration. Some people suspected that the timing was not accidental and accused the government of deliberately targeting the Muslim feast and being grossly insensitive to the expectations that had been engendered as the celebration approached.

By contrast, the self-organising responses have done much better: mutual aid groups numbering approximately 4,300 connected an estimated 3 million people by mid-March. A survey undertaken by the New Local Government Network found that levels of trust and community cohesion have never been higher despite opportunities for social mixing, one of the most powerful forms of reducing prejudice and promoting empathy between different identity groups, being severely curtailed with restrictions likely to continue for some time. Social connection has moved online.

Between 3 and 16 March, the primary message for containment was, 'Wash your hands frequently with soap and running water for at least 20 seconds, use hand sanitiser gels that contain alcohol, and do not touch your face.' The government suggested one way of beating coronavirus was by allowing 60% of British people to get infected to build herd immunity.

Several major sporting events, attracting large crowds were allowed to go ahead during this period: the England vs Wales Four Nations rugby match; ten Premier League football games around the country took place over the same weekend and the Cheltenham horse race, which extends over four days and attracts in excess of 250,000 people, went ahead. Organisers were criticised for holding the event after several racegoers claimed they contracted the coronavirus at the festival – raising speculation that a more strict response to the pandemic had been delayed to allow for these events which were highlights on the sporting calendar and revenue creating.

Daily public briefings from government started on 16 March, following the World Health Organisation's declaration that Covid-19 had reached pandemic status.

Briefings usually took the form of a senior politician accompanied by a medical advisor and a scientific advisor. The first briefing saw Prime Minister Boris Johnson flanked by Chris Whitty and Patrick Vallance, Chief Scientific Advisor. Within the week schools were closed, followed by pubs and restaurants.

Boris Johnson unveiled a new slogan on 23 March, *Stay at home, Protect the NHS, Save Lives*. The message was pushed relentlessly.

Members of the public were confused by the mixed messages from government. International and social media was full of reports about the extent of the virus in Italy and in Spain. The reaction for the UK seemed to be out of step with international events and concerns raised by the government regarding the NHS capacity to meet demand – which was set out clearly in the first press briefing

This response was considered by many to be too late; and by some to be an over-reaction. Many people feared losing their jobs and income.

A range of measures were announced by Finance Minister Rishi Sunak, in an attempt to encourage compliance with lockdown and buoy up the economy. Job-retention packages were introduced, including furlough schemes, and loans and grants for business across different economic sectors. This initial financial aid package was amended from time to time as discrepancies and omission were identified. Despite these measures food insecurity increased dramatically.

In addition, concern was voiced that the independent advisors who formed part of the daily briefing team with political leaders were being co-opted into political roles. Mistrust of the government was heightened when chief advisor to the Prime Minister, Dominic Cummings, broke lockdown procedures without being called to account for his actions. The public was outraged at what they perceived to be double standards.

There were sporadic gatherings and large events (illegal rave parties), and a heatwave brought many people to parks, beaches and open spaces where social distancing was not well observed.   Many people cited the behaviour of Dominic Cummings as legitimising breaking the lockdown protocols.

The government enlisted the help of police to persuade the public to comply with restrictions. While there were many depictions in the press of police talking to people and encouraging them to disperse, there were also reports of increased criminal activity during lockdown and an increase in stop-and-search and other enforcement activities by the police. Criticism of police prejudice and use of excessive force came to the fore once again during and after the Black Lives Matter movement, and remains a cause of grave concern for many people in Britain, especially those who are from black, asian or minority ethnic (BAME) groups.

By 10 May, as lockdown restrictions were eased, the slogan changed to *Stay Alert, Control the Virus, Save Lives*. On 30 June, following a decline in the number of hospital admissions of Covid-19 patients and a decrease in the number of reported Covid-19 deaths, and in recognition of the need to address the socioeconomic knock-on effects of extended lockdown, the government slogan changed to *Build, Build, Build – build back better, build back bolder, build back greener*. The Prime Minister assured people that there would be no return to austerity. Once again, many people were critical of the government. The Prime Minister, in particular, was criticised for the lack of clarity with regards to returning to work ('if you can'), travelling on public transport, and wearing masks. The reopening of schools meant that government could avoid being held responsible if the numbers of infections increased.

The capacity of the NHS was severely undermined by years of austerity, and there were fears that it would be unable to meet the demands of the pandemic. The government provided additional hospital space in an attempt to elicit compliance and support from citizens by reassuring them that people would get the care they needed.

The Department of Health and Social Care (DHSC) established temporary hospitals in seven locations across England at a cost of about £220 million during April and May. These facilities were on standby in case their intensive care beds were needed to cope with a surge in Covid-19 patients. By mid-May, the Manchester hospital was the only temporary site still treating patients.

In response to criticism of an over-reaction in establishing these hospitals, the Prime Minister's official spokesperson attributed the under-use of the temporary hospitals to 'the sacrifices of the British public and the hard work of the NHS'.

Building temporary Nightingale hospitals was one of the largest national military responses in peacetime. In addition to building these facilities, the Standing Joint Command (SJC) also designed and built more than 90 mobile testing units that are operating in communities.

The cost of measures to address Covid-19, and the measures undertaken to increase healthcare capacity, amount to more than £192 billion. Forecasters warn that the UK is headed for the worst economic slump in 300 years.

Small business in the UK is an important part of the economy, and entrepreneurship has been encouraged by the conservative government during the time of austerity and as a means of moving away from a welfare state. These small businesses have been disproportionately affected by lockdown.

There is an urgent need to reopen the economy. 0n 28 May, the government launched a test and trace service which is critical to their coronavirus recovery strategy. Anyone with symptoms will be tested, and their close contacts will be traced. Those who have been in close contact with someone who tests positive must isolate for 14 days, even if they have no symptoms. Plans were initiated to develop an app for track and trace.

The NHS Test and Trace service included 25,000 dedicated contact tracing staff working with Public Health England, and was intended to have the capacity to trace the contacts of 10,000 people per day, and could be scaled up if needed. £300 million of new funding was made available to local authorities to work with NHS Test and Trace to develop local outbreak control plans, building on the work already done to respond to coronavirus. On 19 July, the health secretary finally bowed to pressure from councils to allow full access to the names and data of people in their areas who tested positive for Covid-19, and those with whom they had been in contact to allow for local managing of the spread of the virus.

Plans for the app were abandoned in mid-June, despite the apparently successful testing of the app on the Isle of Wight. Ministers are now working towards a model based on Apple and Google technology. Northern Ireland's contact tracing operates exclusively by phone. Scotland's system is called [NHS Test and Protect](), while Wales' [Test Trace Protect]() system launched on 1 June.

There have been calls for greater clarity from the government throughout the crisis - initially about each of the different stages of lockdown, and then about the different levels of opening space for movement and interaction.

Disinformation and conspiracy theories have led to outbursts of ridicule and attack of health care workers, emergency services and members of the police force. While these attacks may have been few, they remain a cause of concern. The systemic prejudice and racism of British society towards BAME groups has intensified during the pandemic.

The government has found itself unable to escape the consequences of a wider failure to prepare. Ministers came under criticism over the lack of protective equipment for frontline NHS staff and ventilators for patients in intensive care, and for a failure to test more widely for Covid-19, particularly among NHS and care home workers. Stored emergency supplies were found to be out of date. There were resignations of senior health care workers in response to the lack of equipment and adequate protection. The public became sceptical of the government's competence to meet the demands of the pandemic.

There was overwhelming support from the public for key workers. Key workers include doctors, nurses, healthcare workers, emergency services, armed services, public transport staff, delivery drivers, porters, shop workers, waste collectors, manufacturers, postal workers, cleaners, vets, specific engineers and a small number of teachers who kept schools open for children of emergency workers and the most vulnerable children. Clap for our Carers was a display of support that started on 25 March, and soon turned into Clap for Key Workers.

While the weekly collective action in Clap for Key Workers was often described as moving and bringing people together in solidarity, there was also keen criticism that it was an empty display while medical staff were overlooked and underpaid. This act of solidarity came to an end on 28 May.

There were also many efforts to raise funds on the part of the British public – notably Captain Tom, a former British Army officer and centenarian, who raised a staggering £32.79 million by walking sponsored laps in his garden.

As time passed, the pandemic highlighted some existing fault lines in British society. There was an attempt to address the issue of homelessness by commissioning unoccupied hotels to house those who would have been sleeping rough. This move was not met with universal approval.

An increase in household poverty saw an unprecedented demand for food from food banks as the economic impact of lockdown was felt. Because of school closures, many of the most vulnerable children no longer had access to what was often their only meal of the day. Attempts were made to rectify this through supplying meal vouchers, but this was only partly successful as records were not accurate.

Domestic violence and domestic homicides increased during lockdown. Charities and services dealing with domestic violence reported that many victims did not have the privacy needed to seek help or report acts of violence and were fearful of breaking lockdown by venturing out.

The Prime Minister was hospitalised for a week in March with Covid-19. When he was admitted to intensive care, it became clear that the government was in the hands of Dominic Raab, First Secretary of State. The Prime Minister's illness brought home to Britons the seriousness of the disease.

Towards the end of June, after the Dominic Cummings fiasco had become public and lockdown measures had eased, Britons flocked to beaches and parks in vast numbers during a spell of warm summer weather. The police called for greater powers to act against the crowds at beaches and those attending illegal parties.

Meanwhile, calls increased for greater clarity in what was expected of the public in complying with lockdown measures. The clearest message from government might have been the first slogan, *Stay Home, Protect the NHS, Save Lives*.

The spread of Covid-19 in England threw in stark relief the gaps in the health care and social welfare systems. It became apparent within the first month of the epidemic that the hospital staff who had died from Covid-19 were disproportionately from the BAME population. According to the Centre for Evidence-Based Medicine,

> *BAME groups are at markedly higher risk of developing and dying from Covid-19. Causes appear to be multiple: Overrepresentation of BAME populations in lower socioeconomic groups, multi-family and multi-generational households, disproportionate employment in lower-band key workers roles, and co-morbidities (especially cardiovascular, diabetes, renal and complex multi-morbidities).*

A London School of Economics (LSE) review has found that Brexit poses a major risk to the delivery of social policy objectives across the country, and stressed that the government needs to put in place urgent plans to offset negative consequences in priority areas, including social care provision, tackling poverty, and delivering regional growth. The research also drew attention to the fact that nearly all economic analysis points strongly towards lower economic growth under all Brexit scenarios. This will mean lower living standards and less money for public services – the opposite of Boris Johnson's promised 'Brexit dividend'.

The timing of Covid-19 couldn't have been worse for England. Following the massive cuts to public spending on essential services and reduction in welfare services that were side-effects of the decade-long period of austerity after the economic recession of 2007-08, the country was facing severe social challenges: child malnutrition, housing shortages, changes to the health-care system, and new policies with regard to immigration. The NHS had lost many

immigrant staff. The exact social consequences of these cuts were <u>spelled out in February</u>: 'For the first time in more than 100 years life expectancy has failed to increase across the country, and for the poorest 10% of women it has actually declined.'

The government was preoccupied with honouring its election promise to 'get Brexit done' by the end of 2020.

The surge of Black Lives Matter protests that followed George Floyd's death in the USA in May struck a chord in the UK, where the police have been criticised for blatant discrimination against the BAME population, and official inquiries into possible racial bias have been launched in England and Wales.

Support for the Prime Minister during the Covid-19 crisis has fluctuated, while support for the new leader of the Labour Party has steadily increased.

Prior to lockdown, the UK employment rate reached a record high of 76.6% – 0.6 percentage points higher than a year earlier. The unemployment rate was 3.9%.

These figures have changed dramatically since the end of March. In early July, the Bank of England's chief economist warned that UK unemployment may rise to levels not seen since the recession in the early 1980s. According to the latest figures from the Office for National Statistics, there was a 69.1% increase in Jobseeker's Allowance claimants and Universal Credit claimants 'searching for work' between March and April 2020.

Despite a raft of job retention measures in the coronavirus job retention scheme, 26,000 jobs were lost in the UK in the two weeks prior to 15 July. Five steps were outlined to get the economy back on track: Protecting jobs through a scheme to support work placements for young people; boosting benefits – pump additional resources into the universal credit system and an increase to child tax benefits; saving the high street by giving more immediate direct support for firms, from grants to further business rates relief; aiding green recovery through more funding for green infrastructure projects; and tax increases to get the public finances back on to a sustainable footing.

The heightened social-care gap and the economic aftershock of the pandemic will have far-reaching and long-lasting effects in the UK. The increase in unemployment and poverty will exacerbate the persistent inequalities of British society.

Given that the socioeconomic effect of Brexit is largely unknown, it is difficult to predict the future of state-society relations. Trust in the Conservative Party and Boris Johnson will hinge on the ability of the country to '[bounce back better](#)'.

Nicola Sturgeon, first minister of Scotland, reports that the pandemic has made the route map to Scottish independence clearer: 'Confidence in the UK government and its leader has

floundered.' Questions hover regarding the effect of a no-deal Brexit on trade for Wales and Northern Ireland.

The convergence of the pandemic with the rise of Black Lives Matter demands that historic injustices and the continuing tension between BAME groups and the police in the UK are engaged with.

This may be the moment to address neglected issues. Public sentiment urges not to return to the status quo, but rather to establish a new normal. This would require decisive and visionary leadership, a united national response and determined steps to redress inherent inequalities in all aspects of society.

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