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## Covid-19: Researchers investigating links with ethnicity receive £4.3m in funding

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Over £4m (€4.4m; \$5.2m) has been announced to fund six new research projects investigating the links between covid-19 and ethnicity, after evidence found that people from minority ethnic backgrounds were nearly twice as likely to die from the virus as white people, after adjusting for age and sociodemographic factors.

The money has been provided by UK Research and Innovation and the National Institute for Health Research to help explain and mitigate the “disproportionate death rate from covid-19 among people from BAME [black, Asian, and minority ethnic] backgrounds, including health and social care workers.”

The projects cover a variety of topics, including the effects of the virus on migrant and refugee groups, how health messaging can be developed to reach specific communities, and how a new framework can be used to ensure that people from minority ethnic backgrounds are represented in clinical trials.

Amanda Solloway, UK science minister, said, “Covid-19 has had an enormous impact on all of our lives, but sadly we have seen that people from black, Asian, and minority ethnic backgrounds are disproportionately affected by this terrible disease.

“There is an urgent need to better understand the complex reasons behind this. These six new projects will enable researchers to work directly with ethnic minority groups to improve our evidence base and, crucially, save lives.”

### Projects

Manish Pareek, honorary consultant at the University Hospitals of Leicester NHS Trust, is leading the UK-REACH (UK Research Study into Ethnicity And COVID-19 outcomes in Healthcare workers) project, with £2.1m of funding. His team will work to calculate the risk of contracting and dying from covid-19 among ethnic minority healthcare workers (including non-clinical staff such as cleaners, kitchen staff, and porters), using over two million healthcare records. Staff will be followed for one year to see what changes occur in their physical and mental health.

The team has also put together a stakeholder group of major national organisations including the General Medical Council, the Nursing and Midwifery Council, the General Dental Council, NHS Employers, and BAME professionals’ associations to help carry out the research and give evidence to policy makers in real time.

The second largest chunk of funding (£1.4m) will be used to evaluate the effects of the virus on minority ethnic and migrant groups and how to tackle it in community settings. This research is being led by Robert Aldridge of University College London and will build on a previous study called Virus Watch, which monitored the spread of covid-19 in England by following 25 000 people.

This new funding will enable the team to recruit an additional 12 000 people from minority ethnic and migrant groups. They will track participants’ symptoms over time, and subgroups will receive antigen and antibody tests. The team will study factors such as household transmission, occupation, comorbidities, healthcare use, and mental health and economic impacts.

Separately, the team will link the Million Migrant Cohort study of healthcare and mortality outcomes in non-EU migrants and refugees to data on covid-19 diagnosis and hospital admission to determine how often people in these groups are diagnosed, are admitted, and die—and how this is affected by their socioeconomic situation and pre-existing health conditions.

### Culturally relevant messages

Another new project, led by Aftab Ala of the Royal Surrey NHS Foundation Trust and King’s College Hospital in London, will receive £371 000 to design culturally relevant health messages for black and south Asian groups and to deliver these messages through specific and trusted communication channels.

Meanwhile, a team led by Shaun Treweek at the University of Aberdeen will receive £15 000 to complete the INCLUDE Ethnicity Framework, which will enable clinical trial designers to improve inclusion of minority ethnic participants.

Julia Hippisley-Cox at the University of Oxford and Hajira Dambha-Miller at the University of Southampton are using £327 000 to study the risk of infection and death from covid-19 in individual ethnicity groups, seeking to explain why these differences might exist.

Thomas Yates’s team from the University of Leicester will use £126 000 to examine whether the increased risk of developing severe covid-19 in minority ethnic groups is explained by differences in underlying health

status, lifestyle behaviours such as physical activity, and environmental factors including measures of social inequality.