
A wake-up call for change : **The impacts of COVID-19 on SDG implementation** **and reduction of inequalities in and by the EU**

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The Ministerial Declaration of the 2020 UN High-Level Political Forum recognises that “the poorest and the people in vulnerable situations are being left behind in the implementation of the 2030 Agenda and are the most affected by the COVID-19 crisis,” and reaffirms that “the 2030 Agenda should be our collective roadmap to respond and build back better.” Across the EU, COVID-19 has exposed and exacerbated existing inequalities and thus, severely impacts the EU’s achievement of SDG 10 to reduce inequalities, as well as a wide range of other SDGs.

This analysis explores how the COVID-19 pandemic and the immediate measures taken in response impact human health and well-being and interact with and exacerbate existing inequalities in the EU. It shows how the pandemic challenges the realisation of the Sustainable Development Goals (SDGs) in and by the EU. COVID-19, with the impacts that it has already made and will continue to make, is a wake-up call for change. It highlights the urgency of addressing the deep inequalities that persist in the EU and beyond, the need for European policies to focus on strong social protection, ensure a robust health care system and a resilient, low-carbon well-being economy; and to put in place ambitious policies to tackle the climate, biodiversity and pollution crises for a healthy environment and planet. This analysis does not cover in detail the long-term impact of recovery measures, as these are yet to be fully experienced.

“Whether we like it or not, COVID is a disease of poverty, powerlessness, inequities and injustice.”

Dr David Nabarro, Special Envoy to the UN Secretary-General on COVID

An X-ray of global crises

As an X-ray displays illness, the pandemic has exposed the ugly consequences of existing socio-economic, civil and environmental inequalities, together with the triple environmental crises of climate breakdown, biodiversity loss and pollution across nation states in all regions of the world.

The pandemic threatens the progress made on poverty reduction and socio-economic development in the last two decades and casts a dark shadow over the prospects for the 2030 Agenda for Sustainable Development – in particular its commitment to leave no one behind.²

Unemployment around the world is rising rapidly and, as livelihood support measures come to an end (where they exist), the numbers of unemployed will increase further. The UN is predicting that, as a result of the COVID-19 crisis, global human development, as measured by the Human Development Index which measures countries’ education, health, and living standards is on course to decline for the first time since the measurement began in 1990.³ According to the latest estimates, the global extreme poverty rate is projected to be

¹ Ministerial declaration of the high-level segment of the 2020 session of the Economic and Social Council on the annual theme “Accelerated action and transformative pathways: realizing the decade of action and delivery for sustainable development”. Revised draft 16 June 2020.
https://sustainabledevelopment.un.org/content/documents/26339HLPF_MD_Revised.pdf

² Ladd, P and Bortolotti, E. (2020) UNRISD COVID-19 Response. Protecting and Supporting Vulnerable Groups Through the COVID-19 Crisis, see:
[http://www.unrisd.org/80256B3C005BCCF9/\(httpPublications\)/0AC8BC84CFBB2D488025859F001EB3C3?OpenDocument](http://www.unrisd.org/80256B3C005BCCF9/(httpPublications)/0AC8BC84CFBB2D488025859F001EB3C3?OpenDocument)

³ UNDP (2020) COVID-19 and Human Development: Assessing the Crisis, Envisioning the Recovery.

8.4-8.8% in 2020. This means that an estimated 40-60 million people will be pushed back into extreme poverty, mainly due to job loss, causing the first increase in global poverty in more than 20 years. A recent global survey on COVID-19 impact published by UNRISD with input from 82 countries “supports the narrative that – as a result of lockdowns – many people have faced a terrible choice between lives and livelihoods.”⁴

While the virus is affecting the way of life of all people, in all societies, and is impacting economies at their core, it has exacerbated pre-existing inequalities in opportunities, income, health care and social protection globally. The poorer segments of our societies experience multiple deprivations and inequalities. They have unequal access to quality health care and other essential services, exposure to disease, poor housing and overcrowding, vulnerable working conditions in addition to high levels of air pollution, inadequate sanitation and water availability and lack of access to quality education. Migrant workers, as well as those in informal work situations are particularly affected. In many places, minorities or migrant workers have also been made scapegoats and have been the object of hate speech and threats. To add to this, gender inequality in the workforce puts millions of women at risk of infection, as they are classed as “essential workers”, and work on the front lines as shop workers, cleaners, carers and hospital workers, often for inadequate minimum pay. At the same time, women are among the first to lose their jobs in the COVID-19 recession.

The COVID-19 crisis is a direct consequence of human activity and decision making. The majority of mankind’s infectious diseases have originated in animals, and urbanisation and encroachment on the natural environment have brought an increasing number of people into direct contact, and often conflict, with animals. The spread of infections is facilitated by ever-increasing global mobility. It is linked to an economic system that depends on growth and expansion at any cost, and that is responsible for the cutting back of social protection and health services.

“Rampant deforestation, uncontrolled expansion of agriculture, intensive farming, mining and infrastructure development, as well as the exploitation of wild species have created a ‘perfect storm’ for the spillover of diseases from wildlife to people. This often occurs in areas where communities live that are most vulnerable to infectious diseases. Our actions have significantly

*impacted more than three-quarters of the Earth’s land surface, destroyed more than 85% of wetlands and dedicated more than a third of all land and almost 75% of available freshwater to crops and livestock production.”*⁵

The virus is a wake-up call for change – to build back differently and better. Investing in the well-being of all people, across the life course and in all their diversity, is now an urgent necessity, and is essential for survival. We need now to transform our socio-economic system so that it focuses on the well-being of people and the natural world and to put in place a genuine global partnership for sustainable development.

Prioritising policies and programmes that build trust and confidence between citizens and government will mean putting in place universal systems that guarantee the human right to essential services such as access to health and social protection in all countries, to live in a healthy environment and to breathe clean air, for all people across the life-course. The challenge now is to ensure that the short term measures taken in many countries evolve into a set of sustainable policies – and to ensure that these address the vulnerabilities exposed by the pandemic, particularly those related to gender, age, disability, ethnicity, socio-economic status, diversity and location.

Ready for change

The impacts and spread of the virus have made people look critically at their work and travel habits, opened possibilities of digital inclusion for all, and focused attention on the need for greater care and attention to the natural world as well as our dependence on animal products. It has asked us to question our addiction to goods that are delivered through complex supply chains linked to environmental destruction and labour exploitation. A growing body of evidence shows that the pandemic and its impact are significantly affecting people’s priorities for the future and that policies previously viewed as “radical” are receiving more widespread support. Tackling inequalities and climate change are now seen as urgent priorities, together with wealth redistribution, basic income and higher taxes on wealth, the reduction of corporate power, stronger workers’ rights, the de-privatisation of strategic companies and an end to austerity. Research across countries has found that many governments are starting to

⁴ See [http://www.unrisd.org/80256B3C005BCCF9/\(httpPublications\)/0AC8BC84CFBB2D488025859F001EB3C3?OpenDocument](http://www.unrisd.org/80256B3C005BCCF9/(httpPublications)/0AC8BC84CFBB2D488025859F001EB3C3?OpenDocument)

⁵ Josef Settele; Sandra Díaz; Eduardo Brondizio; Peter Daszak. (27 April 2020) COVID-19 Stimulus Measures Must Save Lives, Protect Livelihoods, and Safeguard Nature to Reduce the Risk of Future Pandemics. IPBES (Intergovernmental Science-Policy Platform on Biodiversity and Ecosystem Services). 27 April 2020. <https://ipbes.net/COVID19stimulus>

consider bolder policies such as basic income, moratoria on debts and rent, conditionality on corporate bailouts, and wealth or solidarity taxes.⁶ People around the world want change now.

How COVID-19 undermines the implementation of the SDGs in the EU

There are three principal elements of the impact of COVID-19. The immediate impact of the disease itself, in terms of the people infected by the virus, deaths and excess mortality; the immediate impact on well-being, health, socio-economic, environmental and civil rights caused by the measures taken by governments to slow and halt the disease – principally lockdowns; and, third, the more long-term environmental, social and economic impacts both of COVID-19 itself, of lockdown and recovery measures, yet to be fully experienced.

COVID-19 impacts all of the SDGs in various, interconnected ways – as the infographic illustrates. Many of these impacts still need to be researched while other impacts will only become apparent in the long-term. We focus in this analysis on the impacts in the EU on human health and well-being and their strong links to existing inequalities and other key challenges regarding the implementation of the SDGs.

In relation to health and well-being, SDG 3 commits governments to strive for healthy lives and well-being for all during the course of their lives. The pandemic is creating new challenges to SDG3 every day. In mid-August, the Johns Hopkins Coronavirus Resource Centre had recorded over 20 million infections and nearly 750,000 deaths, with infection and mortality rates varying widely across the world.⁷ There are growing numbers of infections, in particular in the United States, Latin America, and India, and across Africa and Central Asia, where the real numbers are likely to be higher than those reported.

⁶ Leah Zamore and Ben Phillips (June 2020). COVID-19 and Public Support for Radical Policies, NYU, International Castro for Cooperation, see <https://cic.nyu.edu/sites/default/files/zamore-phillips-covid19-public-support-radical-policies-web-final.pdf>

⁷ For up to date figures see <https://coronavirus.jhu.edu/map.html>

⁸ Jérémie F. Cohen; Daniël A. Korevaar; Soraya Matczak; Joséphine Brice; Martin Chalumeau; Julie Toubiana (16 April 2020) COVID-19-related mortality by age groups in Europe: A meta-analysis. MedRxiv, see <https://www.medrxiv.org/content/10.1101/2020.04.11.20061721v1.full.pdf>

⁹ See <https://www.statista.com/statistics/1110906/comorbidities-in-COVID-19-deceased-patients-in-italy/>

¹⁰ World Health Organization (14 April 2020) COVID-19 Strategy Update, see <https://www.who.int/publications-detail/COVID-19-strategy-update---14-april-2020>

¹¹ Comas-Herrera A, Zalakaín J, Litwin C, Hsu AT, Lane N and Fernández J-L (2020) Mortality associated with COVID19 outbreaks in care homes: early international evidence. Article in LTCCOVID.org, International Long-Term Care Policy Network, CPEC-LSE, <https://lccovid.org/wp-content/uploads/2020/05/Mortality-associated-with-COVID-3-May-final-5.pdf>

¹² Brookings Institute (1 May 2020) COVID-19 trends from Germany show different impacts by gender and age. <https://www.brookings.edu/blog/techtank/2020/05/01/COVID-19-trends-from-germany-show-different-impacts-by-gender-and-age/>

¹³ Milwaukee Journal Sentinel (15 June 2020). More men dying from COVID-19 than women, but as with so much about this disease, the reasons are unclear, <https://eu.jsonline.com/story/news/2020/06/15/men-more-risk-dying-COVID-19-than-women-but-why/5343586002/>

¹⁴ Flaxman, S. et al. (2020) Estimating the effects of non-pharmaceutical interventions on COVID-19 in Europe. Nature https://www.nature.com/articles/s41586-020-2405-7_reference.pdf

It has been clear from early on in the pandemic that those most likely to be hospitalised and to die from COVID-19 in hospital and in care homes are older persons,⁸ persons with underlying health conditions (co-morbidities) and persons with disabilities living in segregated institutions.⁹ Fatality rates of older people across Europe and the Americas are much higher than those of people below the age of 60. For people over the age of 80 fatality rates are five times the global average.¹⁰ Early research in Europe showed that deaths of residents in care homes accounted for an average of 50% of all COVID-19 related deaths.¹¹

Once infected, taking age into account, men are more likely to die from COVID-19. Research by the Robert Koch Institute in Germany shows that the mortality rate for men had grown significantly since the beginning of the pandemic and by May was 50% greater than the mortality rate of women.¹² Other countries have similar findings. Therefore, regarding SDG 3, there is a disproportionate impact on men. The causes, as yet not fully understood, appear to be a combination of risk factors, with older men more likely to have underlying health issues such as diabetes, obesity and cancer, and differences in the immune systems of women and men.¹³ As older men are dying in greater numbers than older women, increasing numbers of older women are widowed, potentially without support (with implications in particular for SDG 1, SDG 2 and SDG 10).

While in some countries lockdowns have been largely effective in slowing the spread of the virus – it has been calculated, on the basis of data from 11 European countries, that they have prevented about 3.1 million deaths which would have occurred in the absence of any intervention¹⁴ – fresh spikes are occurring as lockdowns ease.

Enormous resources are being deployed to develop a vaccine, but we do not know if or when an effective vaccine will become available. In the meantime, suppression of the

virus is dependent on social distancing, wearing of masks and continuing limits on travel and indoor gatherings to prevent infection, and track and tracing. These measures are difficult to implement in low-income countries, where many people are faced with a choice between hunger and continuing to work regardless of the risks to themselves and others. However, these factors also apply in middle- and high-income countries where such measures are challenging for workers in precarious conditions or for people living in informal settlements. The measures taken to protect human health impact on all other SDGs, in particular on SDG 1 (no poverty), SDG 2 (zero hunger), SDG 4 (quality education), SDG 5 (gender equality), SDG 8 (decent work), SDG 10 (reducing inequalities).

Many people who contract COVID-19 display no symptoms or only mild symptoms. At the same time testing facilities in most countries, even where they are most extensive, do not detect everyone who has the disease and yield a significant proportion of false negatives.¹⁵ In poorer countries with limited testing facilities only a small proportion of total infections are detected, so reported rates of infection significantly underestimate the true rates.

For these reasons, excess death rates are a more accurate measure of the impact of COVID-19 than figures produced for COVID-19 related deaths.¹⁶⁻¹⁷ Excess deaths are the difference between death rates in the COVID-19 period with average death rates for the same months in previous years. This measure includes deaths which may have been caused by conditions which have not been treated because hospital services have been narrowly focused on COVID-19. Reluctance to go to hospitals and fear of infection have also kept people away from hospitals. EuroMOMO estimates that there were approximately 170,000 excess deaths across its 20 reporting countries between 16 March and 31 May only. COVID-19 accounts for about 80% of these deaths. While all EU countries have been affected, some stand out. The UK, no

longer part of the response and recovery plans of the EU, has the highest numbers of cases and deaths, followed by Italy, France, Spain and Belgium.¹⁸

Gender

The pandemic has impacted SDG 5 on ensuring gender equality in various ways. Nursing and caring are occupations in which women predominate with 85-90% of all nurses being women in many countries around the globe; in Europe, 76% of the 49 million care workers in the EU are women.¹⁹ This puts them in the front line of the fight against COVID-19 in hospitals and care homes. Carers UK surveyed over 5,000 informal carers in April 2020. 81% of respondents were women and 54% of respondents were 55+ years old. The survey showed that 70% of unpaid carers were providing more care due to COVID-19 outbreak; 35% reported services reduced or closing; and 55% of carers felt overwhelmed and worried about burnout.²⁰ But as cleaners, cooks, supermarket and shop-workers, women also come face-to-face with the public every day and are therefore at greater risk of being infected with the virus. At the same time, hospitality and tourism, where women account for 60% of the workforce,²¹ are likely to suffer the greatest number of job losses. Eurofound argues that “measures taken by governments to control the spread of the virus are exacerbating gender divides in unemployment, domestic labour and financial security, all to the disadvantage of women”.²²

Lockdown has reinforced gender inequality, compelling women to combine roles as educators (with schools closed), carers, housewives and sometimes distance workers. A French feminist campaigner said, “There’s a form of regression for mothers during the lockdown. They are now having to do a triple day. We already know women’s work is double (compared to men’s) because they have to do their jobs, housework and parenting ... to that they have had to add home schooling.”²³

¹⁵ Johns Hopkins Medicine (26 May 2020) Beware of False Negatives in Diagnostic Testing of COVID-19, see <https://www.hopkinsmedicine.org/news/newsroom/news-releases/COVID-19-story-tip-beware-of-false-negatives-in-diagnostic-testing-of-COVID-19>

¹⁶ EuroMOMO Bulletins, see <https://www.euromomo.eu/bulletins/2020-22/>

¹⁷ The Economist (16 April 2020, updated 13 June) Tracking COVID-19 excess deaths across countries, see <https://www.economist.com/graphic-detail/2020/07/15/tracking-covid-19-excess-deaths-across-countries>

¹⁸ ECDC (20 June 2020) Europe: 187 231 deaths; the five countries reporting most deaths are United Kingdom (42 461), Italy (34 561), France (29 617), Spain (28 315) and Belgium (9 695), see <https://www.ecdc.europa.eu/en/geographical-distribution-2019-ncov-cases>

¹⁹ ElGE (2020) Frontline Workers, see <https://eige.europa.eu/covid-19-and-gender-equality/frontline-workers>

²⁰ Carers UK (April 2020) Caring behind closed doors – Forgotten families in the Coronavirus outbreak, see https://www.carersuk.org/images/News_and_campaigns/Behind_Closed_Doors_2020/Caring_behind_closed_doors_April20_pages_web_final.pdf

²¹ Eurostat. (2017) Characteristics of jobs in tourism industries, see https://ec.europa.eu/eurostat/statistics-explained/index.php/Tourism_industries_-_employment#Characteristics_of_jobs_in_tourism_industries

²² Eurofound (3 June 2020) COVID-19 fallout takes a higher toll on women, economically and domestically, see: <https://www.eurofound.europa.eu/publications/blog/COVID-19-fallout-takes-a-higher-toll-on-women-economically-and-domestically>

²³ The Guardian (29 May 2020) We are losers in this crisis: research finds lockdowns reinforcing gender inequality. <https://www.theguardian.com/global-development/2020/may/29/we-are-losers-in-this-crisis-research-finds-lockdowns-reinforcing-gender-inequality>

Lockdown has also provoked a sharp spike in domestic violence, described by UN women as a shadow pandemic. “Confinement ... is increasing isolation for women with violent partners, separating them ... from the people and resources that can best help them ... as health systems are stretching to breaking point, domestic violence shelters are also reaching capacity, a service deficit made worse when centres are repurposed for additional COVID-response. Even before COVID-19, domestic violence was already one of the greatest human rights violations. In the previous 12 months, 243 million women and girls (aged 15-49) across the world have been subjected to sexual or physical violence by an intimate partner.”²⁴ Where studies exist those over 49 also report greater levels of violence, with domestic abuse experienced by the over 60s a growing concern.²⁵

Young people

Young people, while less affected by the actual disease itself, are likely to be strongly affected by the economic downturn caused by COVID-19. Before the crisis, the unemployment rate among young people (15-24 years) across the EU 27 was already at 15% (while for the general population it was 6.7%)²⁶. These numbers are likely to rise sharply (youth unemployment in June 2020 was at 15.7%). COVID-19, in addition to interrupting and disrupting education for all young people, especially for those due to sit exams this year, has had a disproportionate impact on employment, with the risk that “they will be scarred throughout their working lives – leading to the emergence of a ‘lockdown generation’.”²⁷ Young people are also more likely to be employed in the informal sector, and are therefore more vulnerable to economic crises and shocks, revealing a close link between SDG 10 and SDG 8 on decent work.²⁸

²⁴ UN Women. 6 April 2020. Violence against women and girls: the shadow pandemic. Statement by Phumzile Mlambo-Ngcuka, Executive Director of UN Women. <https://www.unwomen.org/en/news/stories/2020/4/statement-ed-phumzile-violence-against-women-during-pandemic>

²⁵ Reliefweb. 15 06 20. Neglect and abuse of older people around the world intensified by COVID-19. <https://reliefweb.int/report/world/neglect-and-abuse-older-people-around-world-intensified-COVID-19>

²⁶ Eurostat. For young people, [https://ec.europa.eu/eurostat/statistics-explained/index.php?title=File:Youth_unemployment_rates_and_ratios_2019_persons_aged_15-24_\(%25\).png](https://ec.europa.eu/eurostat/statistics-explained/index.php?title=File:Youth_unemployment_rates_and_ratios_2019_persons_aged_15-24_(%25).png) For general population, <https://ec.europa.eu/eurostat/databrowser/view/tps00203/default/table?lang=en> Please note, there are large variations between different EU Member States.

²⁷ ILO Monitor: COVID-19 and the world of work. Fourth edition. https://www.ilo.org/wcmsp5/groups/public/@dgreports/@dcomm/documents/briefingnote/wcms_745963.pdf

²⁸ Ibid. 32.9% of 15-24 year old workers are informal employment compared with 12% of all workers. (ILO Europe and Central Asia region)

²⁹ European Parliament. Elderly women living alone: an update of their living conditions. 2015. https://www.europarl.europa.eu/RegData/etudes/STUD/2015/519219/IPOL_STU%282015%29519219_EN.pdf

³⁰ Kuper H, Banks LM, Bright T et al. Disability-inclusive COVID-19 response: What it is, why it is important and what we can learn from the United Kingdom’s response [version 1; peer review: 2 approved]. Wellcome Open Res 2020, 5:79 (<https://doi.org/10.12688/wellcomeopenres.15833.1>)

- Lack of care and residents left unattended due to staff shortage – staff cannot work as they are infected or under quarantine, or do not work because of fear of becoming infected;
- Forced medication and forced restraint measures under the pretence of preventive measures;
- Forced confinement leading to lack of contact with the outside world – family, friends and others.

If persons with disabilities require treatment for COVID-19 they may also face the possibility of medical bias, stemming from views about their quality of life and social value. These can be reflected in triage guidelines for allocation of scarce resources with exclusion criteria based on certain types of impairment or medical condition. Dangerous narratives have emerged that persons with disabilities cannot contribute to the response to COVID-19, that their lives are not considered as worth saving, and that they are a “necessary sacrifice” to be left behind in the recovery period. Persons with disabilities and their families have faced pressure within the health system to renounce resuscitation measures.³¹ Public health information at the European and national level has also not been accessible to persons with disabilities. The lack of accessibility of public health announcements, which lack captioning, sign interpretation and easy to understand format, has put the lives of many persons with disabilities at risk. It is clear that this pandemic is not only a public health emergency, but an economic, social and human rights crisis which threatens progress towards inclusive, sustainable growth and the achievement of the Agenda 2030 for Sustainable Development.

Refugees

Many organisations have highlighted the vulnerability of refugees and displaced persons to COVID-19, a threat to achieving target 10.7 to facilitate orderly, safe, regular and responsible migration and mobility of people. Those held in already overcrowded and not fit-for-purpose camps and

reception centres have been unable to self-isolate or access hand-washing facilities, while asylum seeking women and girls have had limited access to specialised medical services, including access to sexual and reproductive health and rights. Social distancing and hygiene measures are nearly impossible to follow in overcrowded refugee camps, both within and outside the EU. In a refugee centre in Baden-Württemberg, where there were 259 COVID-19 cases in April, the local refugee council commented, “The rise in infection numbers... shows that the high risk of infection continues to be a serious threat as long as people have to live in such camps where they have to share bathrooms, toilets and canteens with many others.”³² The informal jobs that many refugees need to sustain themselves are also threatened by the pandemic. It has been reported that the most acute anxiety of Syrian refugees subject to lockdown in Lebanon is hunger and access to medical services. They can no longer work and thus not afford food.³³ They face difficulties in visiting clinics for urgent treatment.³⁴ In the Greek refugee camps, such as Moria on Lesbos and Vial on Chios, so far no COVID-19 related death has been reported. However, the lockdowns of the camps lasted longer than for the rest of the country until 2 August which severely impacted the well-being of people inside the camps. After a first COVID-19 case was detected in Moria in early September, a two-week quarantine was imposed. The camp will remain completely sealed and only accessible for security personnel.³⁵ Refugees in Greece feel discriminated against by stringent lockdown measures while Greece has long opened up to tourists.³⁶

Ethnic minorities and migrants

Ethnic minorities and migrants across the EU are more likely to be poorer, to live in overcrowded accommodation and to be in insecure jobs – e.g. as delivery drivers, in factories and warehouses, where physical distancing is challenging – which puts them at greater risk of contracting COVID-19. They are also more likely to have underlying health conditions which put them at greater risk of dying when they do fall ill with COVID-19.

³¹ UN OHCHR (2020) COVID-19 and the rights of persons with disabilities, see https://www.ohchr.org/Documents/Issues/Disability/COVID-19_and_The_Rights_of_Persons_with_Disabilities.pdf

³² InfoMigrants (17 April 2020) Hundreds of corona cases between two migrant facilities in Germany, see <https://www.infomigrants.net/en/post/24158/hundreds-of-corona-cases-between-two-migrant-facilities-in-germany>

³³ France24 (20 June 2020) Syrian refugees in Lebanon: ‘After corona, there’s no food anymore, see <https://www.france24.com/en/20200620-syrian-refugees-in-lebanon-after-corona-there-s-no-food-anymore>

³⁴ The New Humanitarian (21 April 2020) How COVID-19 is limiting healthcare access for refugees in Lebanon, see <https://www.thenewhumanitarian.org/feature/2020/04/21/Lebanon-coronavirus-refugee-healthcare>

³⁵ Al-Jazeera (2 September 2020) Moria refugee camp under quarantine after Coronavirus case, see <https://www.aljazeera.com/news/2020/09/moria-refugee-camp-quarantine-coronavirus-case-200902120237795.html>

³⁶ The Guardian (27 May 2020) Greece ready to welcome tourists as refugees stay locked down in Lesbos, see <https://www.theguardian.com/global-development/2020/may/27/greece-ready-to-welcome-tourists-as-refugees-stay-locked-down-in-lesbos-coronavirus>

For example in the UK, the Institute for Fiscal Studies found that “the death rate for people of black African descent was 3.5 times higher than for white British people, while for those of black Caribbean and Pakistani descent, death rates were 1.7 times and 2.7 times higher, respectively.”³⁷ These disparities are still subject to research, which must take account of the socio-economic inequalities affecting these communities. In the UK African and Caribbean populations and people of South Asian heritage are more likely to have front-line jobs, to live in overcrowded accommodation and to have poor diets³⁸ and also to suffer from diabetes and hypertension.³⁹ Black and minority ethnic medical staff also report that they had greater difficulty in obtaining good personal protective equipment than white colleagues.⁴⁰

In metropolitan Paris, the department of Seine-St Denis is home to many non-European immigrants (23% of the local population⁴¹) and has some of the worst social conditions in France. Excess mortality rates in Seine-Saint-Denis are dramatic: almost 130% overall⁴² (compared with a national excess death rate of 26%⁴³ and for people over 65 years of age - 44.6%⁴⁴). Insecure employment, insufficient medical facilities, comorbidities and over-crowding are key features of social and health inequalities. Risk is increased by travel to and from work: just over half of residents have to travel outside their department to their place of work - twice the average proportion for metropolitan Paris as a whole.

Roma communities across the EU face difficulties in implementing key measures to reduce the spread of COVID-19 such as maintaining physical distances, self-quarantine and

regular handwashing: 30% live in households with no tap water and up to 80% in some countries live in overcrowded housing.⁴⁵ The failure to realise SDG 6, which promises access to water and sanitation for all, is putting Roma families at immense risks during the pandemic. Other sources report that “soldiers, police personnel, and drones have been more present in Roma communities in Bulgaria and Slovakia than have nurses, doctors, and medical supplies” and “distance learning measures leave more than half of Roma children out of school and will likely lead to an increase in the already high dropout rates among Roma students.”⁴⁶ Roma communities across the EU have been made scapegoats for the propagation of the virus and have faced hate speech and threats. Looking at the socio-economic impact, a survey of 11,000 Roma in Spain showed that the closure of street markets, and the impossibility of collecting scrap metal, selling fruit and other informal jobs have left many families facing a situation of acute emergency. One third of Roma in paid employment lost their jobs, another third was temporarily laid off and 12% saw their working hours reduced.⁴⁷

Informal workers, freelancers, artists

Governments across Europe and elsewhere are providing bailouts to businesses and support for furloughed workers. While the detail of support schemes and safety nets varied across Europe⁴⁸, well-established businesses and employees and workers with formal contracts did best out of these measures. The distance between poor, informal sector workers without financial support and middle-class employees who can work at home on a laptop has never been greater. The

³⁷ Tony Kirby (8 May 2020), Evidence mounts on the disproportionate effect of COVID-19 on ethnic minorities, The Lancet, see [https://www.thelancet.com/journals/lanres/article/PIIS2213-2600\(20\)30228-9/fulltext](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(20)30228-9/fulltext)

³⁸ Full Fact (30 June 2020) What do we know about COVID-19 inequalities among people from minority ethnic groups? <https://fullfact.org/health/Covid-19-inequalities-minority-ethnicities/>

³⁹ See British Heart Foundation at <https://www.bhf.org.uk/informationsupport/risk-factors/ethnicity>

⁴⁰ British Medical Association (BMA) (2020) Fighting the odds – BAME doctors at greater risk from COVID-19, <https://www.bma.org.uk/news-and-opinion/fighting-the-odds-bame-doctors-at-greater-risk-from-covid-19>

⁴¹ Institut national de la statistique et des études économiques (2020) Étrangers - Immigrés en Département de la Seine-Saint-Denis (93), see <https://insee.fr/fr/statistiques/3569308?sommaire=3569330&geo=DEP-93>

In France it is prohibited to collect data on ethnicity, so the figure for immigrants is an approximation and an underestimate because it does not include minority ethnic people who are French citizens (non-immigrés).

⁴² Le Monde (17 May 2020) Coronavirus : une surmortalité très élevée en Seine-Saint-Denis, see https://www.lemonde.fr/societe/article/2020/05/17/coronavirus-une-surmortalite-tres-elevee-en-seine-saint-denis_6039910_3224.html

⁴³ France24 (29 May 2020) Hausse de la mortalité en France pendant la crise du COVID-19, see <https://www.france24.com/fr/20200529-hausse-de-la-mortalite-c3%A9-en-france-pendant-la-crise-du-covid-19>

⁴⁴ Le Monde. 17 May 2020. Coronavirus : une surmortalité très élevée en Seine-Saint-Denis

⁴⁵ FRA (7 April 2020) Persistent Roma inequality increases COVID-19 risk, human rights heads say, see <https://fra.europa.eu/en/news/2020/persistent-roma-inequality-increases-covid-19-risk-human-rights-heads-say>

⁴⁶ Reliefweb (29 April 2020) Roma in the COVID-19 crisis: An early warning from six EU Member States, see <https://reliefweb.int/report/italy/roma-covid-19-crisis-early-warning-six-eu-member-states>

⁴⁷ EU Observer (22 June 2020) COVID-19's impact on Spanish Roma, see <https://euobserver.com/coronavirus/148675>

⁴⁸ OECD (20 May 2020) Supporting livelihoods during the COVID-19 crisis: closing the gaps in safety nets, see <http://www.oecd.org/coronavirus/policy-responses/supporting-livelihoods-during-the-covid-19-crisis-closing-the-gaps-in-safety-nets-17cbb92d/>

self-employed, owners of and workers in small businesses, informal workers or those with fluctuating incomes did less well and have regularly been left behind by support schemes. The EU's 30 million informal sector workers⁴⁹ remained beyond the scope of most income-support schemes.⁵⁰ Many will have faced the choice of continuing to work during lockdown at risk to themselves and others or going hungry.

Across Europe, with theatres, bars and concert halls closed, cultural workers and artists are struggling. Like informal sector workers, many are freelancers who fall outside government support schemes. The future of many of the venues which provide artists with their performance spaces is also in jeopardy. The Arts, a major strand in the spiritual lifeblood of European nations, is a key economic sector: there are 8.7 million people in cultural employment⁵¹ while over a million cultural enterprises contribute more to the EU economy than the motor trade sector.⁵²

Exploited labour in global supply chains

The COVID-19 crisis exposed the vulnerability of companies and workers around the world who depend on the consumer economies of Europe and North America. In response to lockdowns, clothing chains have abruptly cancelled orders from Bangladesh and other countries even when they were in production, threatening the viability of manufacturing companies and the livelihoods of their workers. The garment industry is the backbone of the economy of Bangladesh, with 4,500 factories employing more than 4 million people, exporting goods worth USD \$34 billion a year and providing 83% of Bangladesh's export earnings. The industry has already lost \$3.5 billion in orders.⁵³ For this reason in early April the Bangladeshi government announced a USD \$8 billion stimulus

package of support for the garment sector which mandated factories to continue to pay their workers.⁵⁴ This support, however, will not last more than a few weeks. At the end of March, before this package was announced, it was reported that over a million Bangladeshi garment workers had been fired or furloughed.⁵⁵ Government support will not extend to the millions of Bangladeshis who work in the informal sector. The response to COVID-19 of large clothing chains in Europe and North America has exposed the vulnerability of the Bangladesh economy, and highlights the importance of the implementation of SDG 8 (decent work), SDG 12 (sustainable consumption and production) and SDG 17 (global partnership).

Back to business as usual – or building back better?

In April 2020, the United Nations published a comprehensive road map for a global response to COVID-19, listing the most at risk populations, and five priority streams of work for recovery. The report emphasises the importance of essential health services, social protection, and basic services, protecting formal and informal sector employment, fiscal responses focusing on vulnerability and multilateralism and investment in community led responses connected by strong environmental sustainability and gender equality imperative to build back better.⁵⁶

The EU focused its short-term response on limiting the spread of the virus, the provision of medical equipment, promoting research for treatments and vaccines and supporting jobs, businesses, and the economy. The EU recovery plan, Next Generation EU (NGEU), which was agreed at the end of May and was intended "to harness all the resources in a spirit of unity and solidarity,"⁵⁷ provides €750 billion to support

Member States and ailing economies as well as research, humanitarian aid and international cooperation.

The EU's long-term budget of €1.074 trillion (Multiannual Financial Framework, 2021-2027) was agreed by the European Council on 21st July. Together with the NGEU it is hoped that it will not only help countries overcome the effects of the COVID-19 crisis but lay the foundations of a more resilient, climate friendly and socially equitable future. As negotiations on the MFF and NGEU continue, with the European Parliament withholding its consent on the MFF on 23rd July, it is critical EU decision-makers adopt a recovery plan and budget that puts the well-being of all and the planet at the centre. There are some positives: for example, the target on climate action expenditure in the EU budget has been increased to 30% from the 25% proposed by the European Commission, with climate-related spending to be consistent with the EU's 2030 climate targets and goal of becoming climate neutral by 2050.

In terms of the SDGs, civil society organisations and others have questioned whether the conditions attached to spending by Member States of funds provided by the NGEU and the budget are sufficiently robust to tackle the growing inequalities within and beyond the EU, and particularly to require Member States to reduce dependence on fossil fuels and to protect human rights and uphold the rule of law. Civil society considers that the recovery plan lacks ambition in addressing the socioeconomic impact of the pandemic and the looming food crisis. Very few conditions for a sustainable recovery are in place to support businesses and prevent bankruptcies, and Next Generation Europe comes with very few strings attached to ensure that all recovery measures are based on sustainable development principles.⁵⁸ Gender mainstreaming provisions are also absent in NGEU, given the lack of targeted measures to address the increased numbers of cases of violence against women and girls during COVID-19, and the lack of investments towards the care sector in which women form the majority of workers. Gender budgeting must be implemented across NGEU and the MFF 2021-2027 to ensure all funds and programmes benefit all rather than unintentionally widen gender inequality gaps.

Development NGOs are critical of the EU's weakened international solidarity at a time when developing countries are struggling with the COVID-19 crisis and facing ever more severe consequences of climate change.⁵⁹ The budget negotiations cut development funding by 10.4% to €70.8

billion within a largely static external spending budget with Member States rejecting the Commission's proposal of an additional €10.5 billion for development funding and €5 billion for humanitarian aid as part of the May pandemic recovery package. Climate and environmental funding is also likely to suffer although the pandemic has demonstrated the importance of preserving nature and forests in particular to curb the spread of zoonoses.

European civil society argues that all recovery measures need to be based on sustainable development principles, in particular leave no one behind, the realisation of human rights, people's empowerment and participation in decision-making, and ambitious environmental protection and climate justice.

SDG Watch Europe has put forward 10 key demands for the EU to build back better while ensuring the implementation of the SDGs by 2030:

- ✓ Let this be a Wake-up Call: Our System is the Problem - We need a paradigm shift
- ✓ Make the SDGs and the Paris Agreement the Guidelines to get out of the Crisis
- ✓ Strengthen the Social Protection System and make it Accessible for All
- ✓ Lead the Way to a Socially and Ecologically Sustainable Economic System with Revised, Green Budgets
- ✓ Link Economic Recovery to Clear Conditions and Say No to Bailouts for Polluters and No to Tax Havens
- ✓ Implement Immediate Debt Cancellation and Stop any Unjust Austerity Measures
- ✓ Fight all other Crises too
- ✓ Protect our Democracies, Human and Civic Rights
- ✓ Ensure Transparency of Political Decisions on COVID-19 and Beyond, as well as Full Inclusion and participation of Civil Society
- ✓ Show Transformative Global Action against Poverty and Hunger

Read SDG Watch Europe's full statement on its 10 demands [here](#)

⁴⁹ ILO (November 2019) Calculation of total numbers of informal sector workers based on total estimated employed population 15+ for 2020, available at https://www.ilo.org/shinyapps/bulkexplorer/52/?lang=en&segment=indicator&id=EMP_2EMP_SEX_AGE_NB_A; and ILO estimates of informal employment in ILO: Women and Men in the Informal Sector A Statistical Picture, available at https://ilo.userservices.exlibrisgroup.com/discovery/delivery/41ILO_INST:41ILO_V2/1252879760002676

⁵⁰ Ibid.

⁵¹ Eurostat (2018) Culture Statistics – Cultural employment. Culture provides 3.8% of employment, see https://ec.europa.eu/eurostat/statistics-explained/index.php/Culture_statistics_-_cultural_employment

⁵² European Parliament (2020) EU support for artists and the cultural and creative sector during the coronavirus crisis. In 2016 culture contributed more to the economy than accounted for 2.7% of the value added (€192 billion) of the non-financial business sector, slightly more than the motor trade sector. These are EU28 figures, see [https://www.europarl.europa.eu/RegData/etudes/BRIEF/2020/649414/EPRS_BRI\(2020\)649414_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/BRIEF/2020/649414/EPRS_BRI(2020)649414_EN.pdf)

In 2017 (EU27) 1.1 million cultural enterprises contributed €145 billion of value added, see https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Culture_statistics_-_cultural_enterprises&oldid=449346

⁵³ The Guardian (11 May 2020) Bangladesh garment factories reopen despite coronavirus threat to workers, see <https://www.theguardian.com/global-development/2020/may/11/bangladesh-garment-factories-reopen-despite-coronavirus-threat-to-workers>

⁵⁴ BBC News (29 April 2020) Coronavirus: Two million Bangladesh jobs 'at risk' as clothes orders dry up, see <https://www.bbc.co.uk/news/world-asia-52417822>

⁵⁵ Penn State Center for Global Workers' Rights (27 March 2020) Abandoned? The Impact of COVID-19 on Workers and Businesses at the Bottom of Global Garment Supply Chains., see <http://www.workersrights.org/wp-content/uploads/2020/03/Abandoned-Penn-State-WRC-Report-March-27-2020.pdf>

⁵⁶ Ibid.

⁵⁷ See <https://www.consilium.europa.eu/media/43384/roadmap-for-recovery-final-21-04-2020.pdf>

⁵⁸ See <https://www.euractiv.com/section/energy-environment/news/eu-decides-no-green-strings-attached-on-cash-to-virus-hit-firms/>

⁵⁹ Vince Chadwick (22 July 2020) Foreign aid neglected in historic EU budget deal, see <https://www.devex.com/news/foreign-aid-neglected-in-historic-eu-budget-deal-97747>

Impacts of COVID-19 on SDG implementation in the EU and globally

