

**UKRI/AHRC Covid-19 research project report 4:
Cultural translation and interpreting of Covid-19 risks among London's ethnic and
minority communities**

10 May 2021

PI Nana Sato-Rossberg

Continuing our online survey, we have received 831 responses up to 7 May 2021. After removing responses from respondents who are not within the project's scope, there 688 responses which are the subject of this report. The survey responses include all the languages we list above. Our analysis does not include adjustments for demographic structure.

We have to note that not everyone who considers themselves part of ethnic and minority communities has access to the internet, e-mail, social media, or other forms of electronic communication. Our first survey has been conducted in English, as noted in Report 1. However, for some languages, e.g., Sylheti and Yiddish, researchers translated the questions to respondents in order to obtain more than 30 responses, which is the threshold for inclusion we set for this survey.

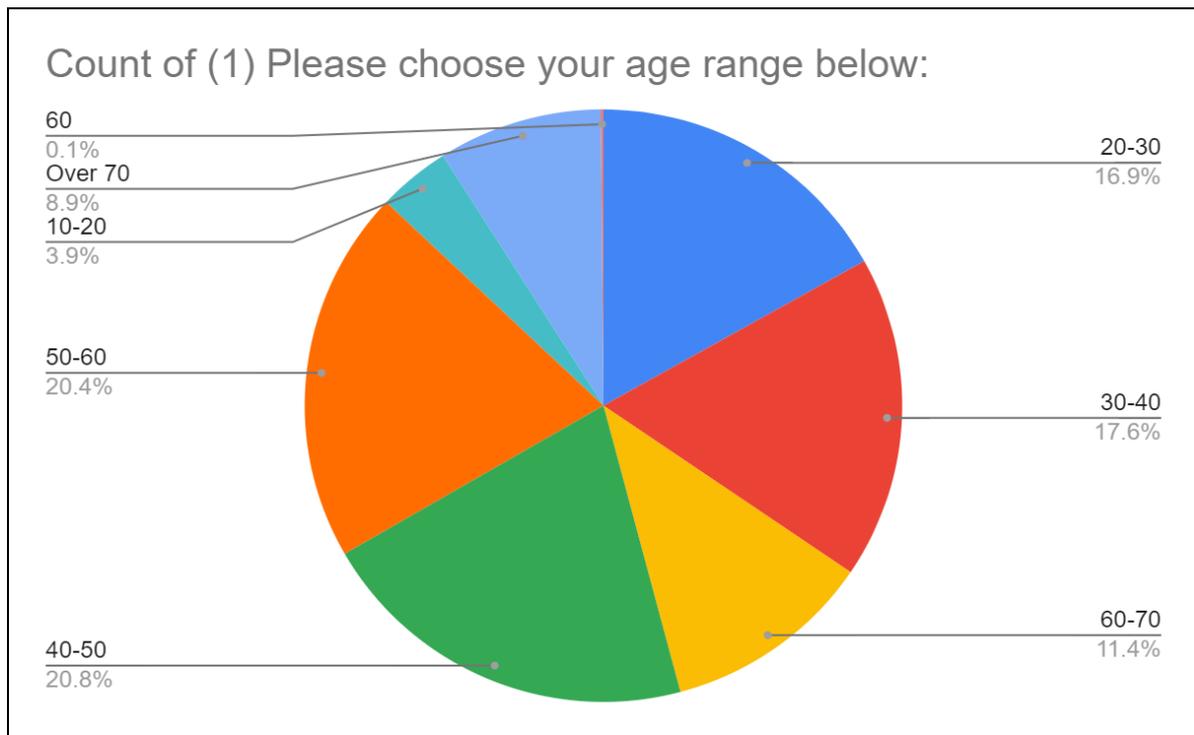
Compared to the results of Report 1 there were no major changes in the distribution of responses, when analysed for all language and ethnic minority communities. However, as we have shown in Reports 2 and 3, there are differences between communities, e.g., in the response regarding vaccines.

The key questions we asked in the survey were how and from where participants received information about Covid-19, if they think they understand Covid-19, if their communities are doing everything to contain the spread of Covid-19, and how they understand vaccination. Compared to the results from Report 1, we did not see major changes in the answers to any of these questions. As in Report 1, we include below several free text answers from respondents.

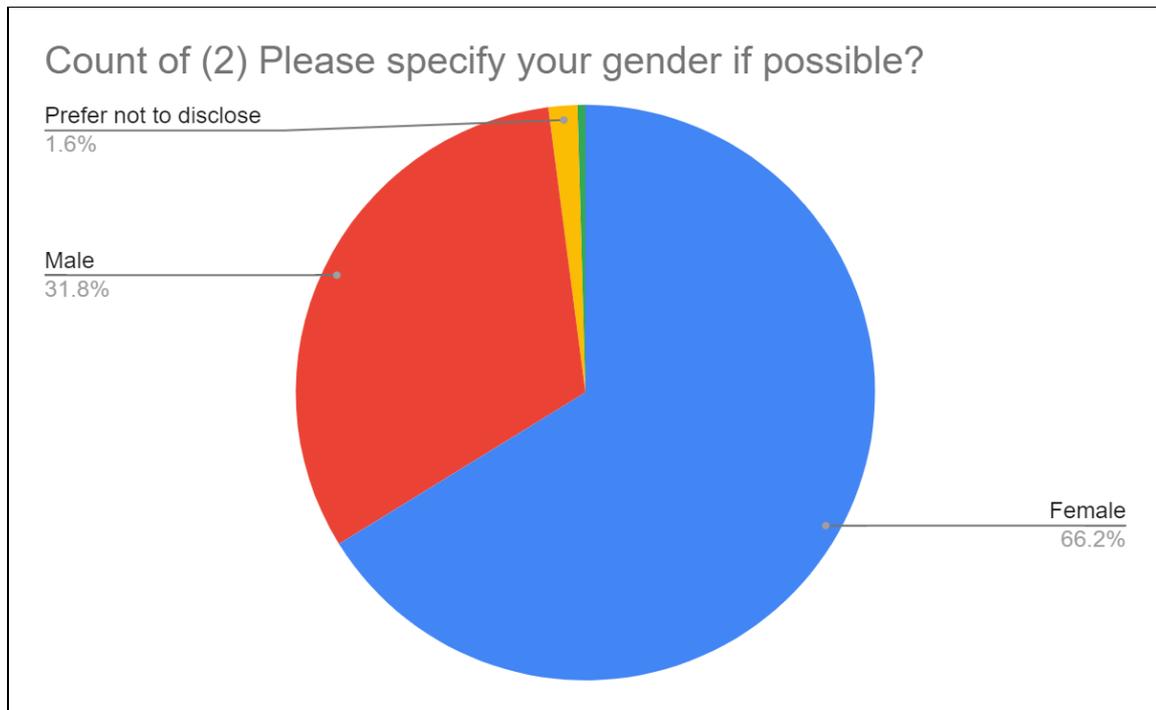
Responses to Question 9-1 show that a high number of participants feel that their communities are not doing their best to help prevent the spread of Covid-19. The free-text responses to the follow-up question show that there are language and cultural barriers.

Please note that not all survey questions and responses are published below. To read all question, please visit the survey: [Click here to read the survey:](#)

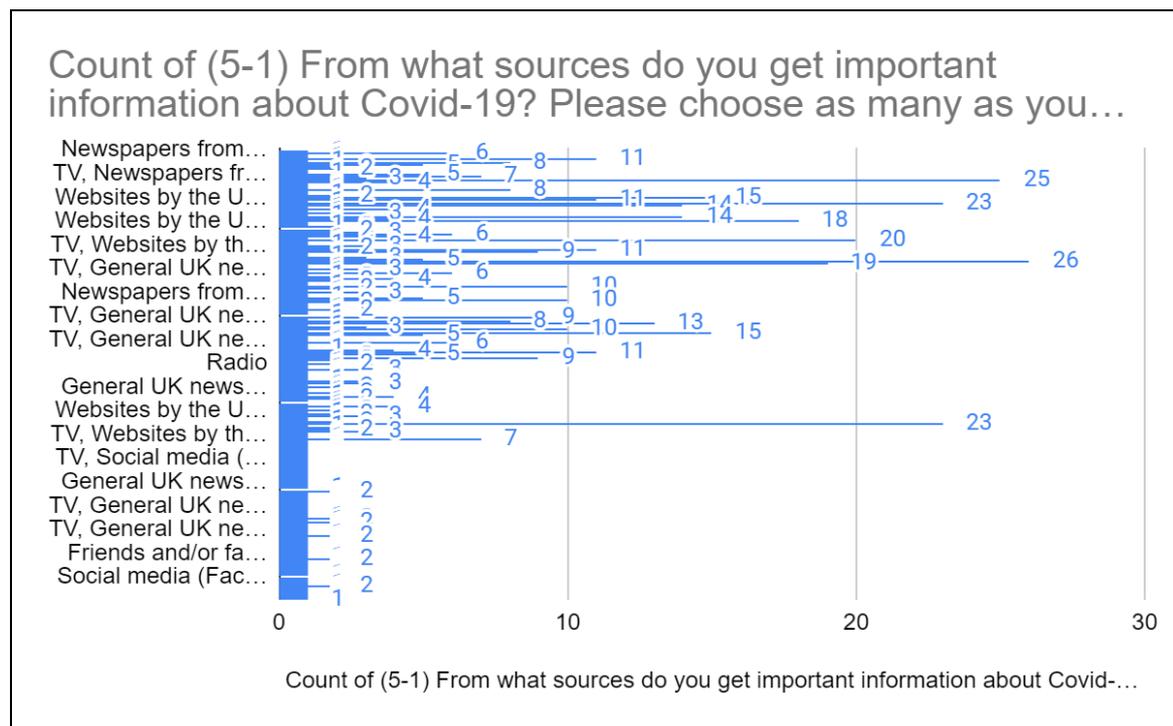
Summary of responses (688 responses unless noted)



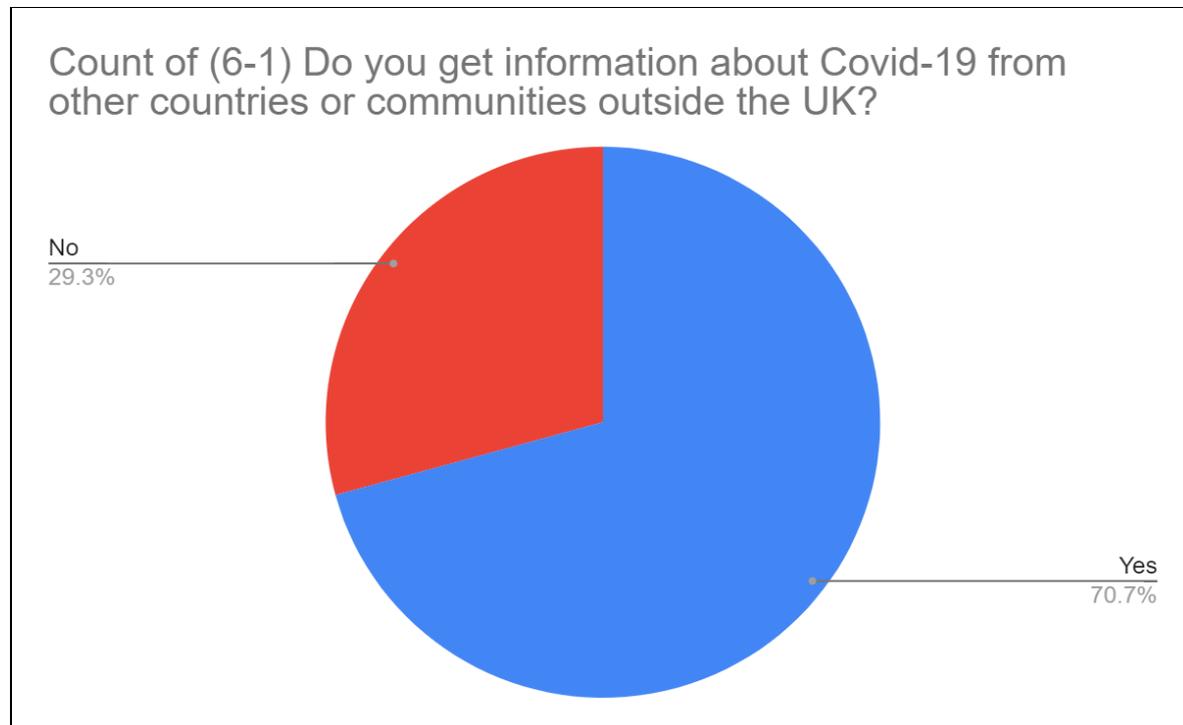
Responses 684



688 responses

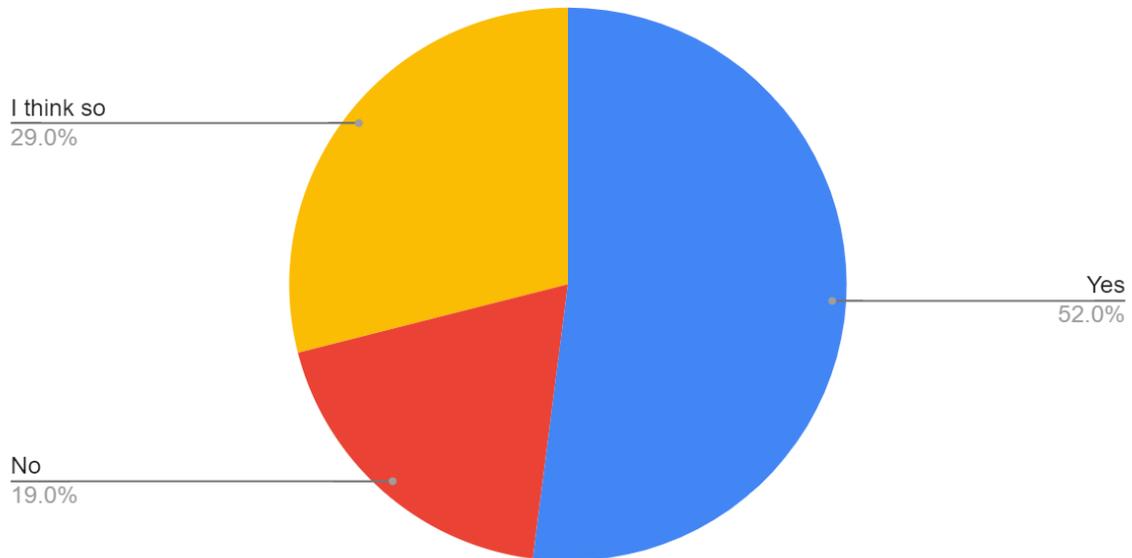


Responses 688



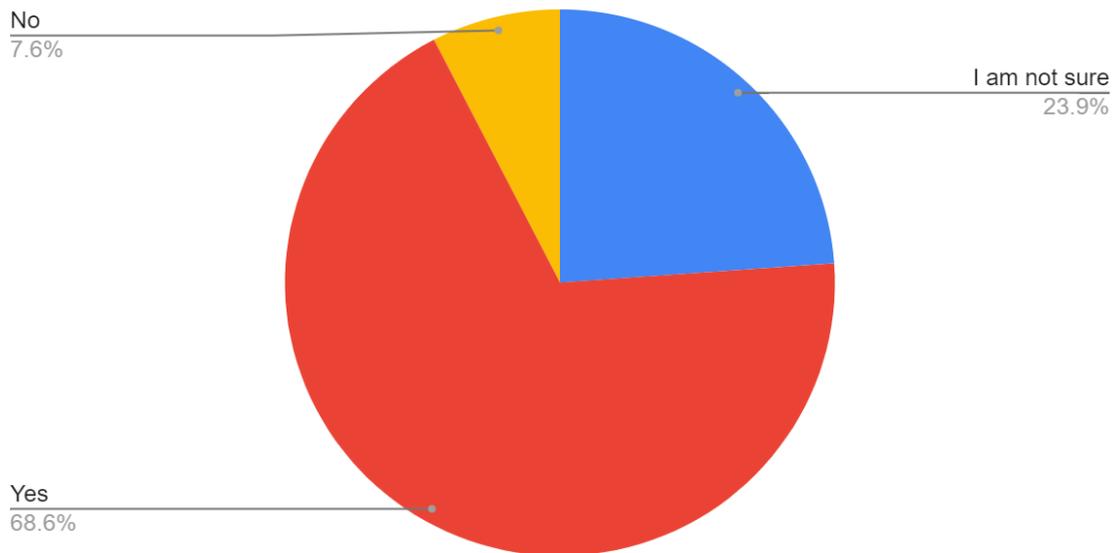
Responses 522

Count of (6-3) If you answered yes, did the information from outside the UK help you to better understanding Covid-19 an...

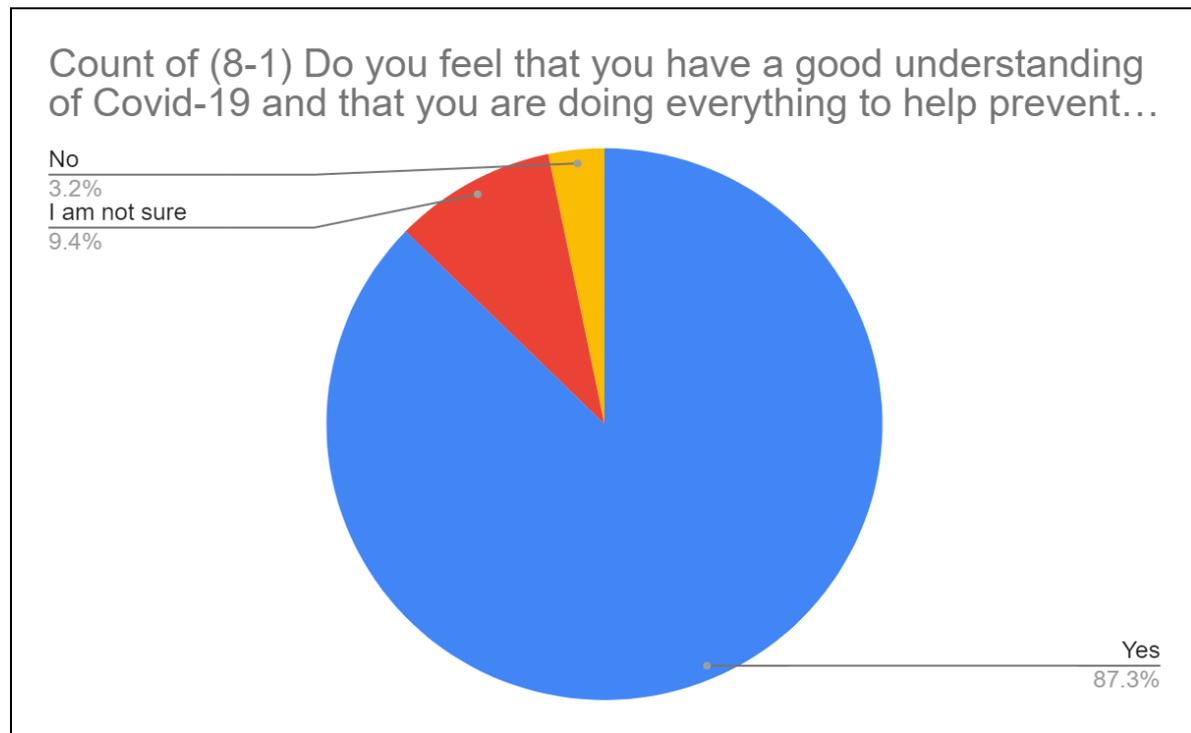


Responses 688

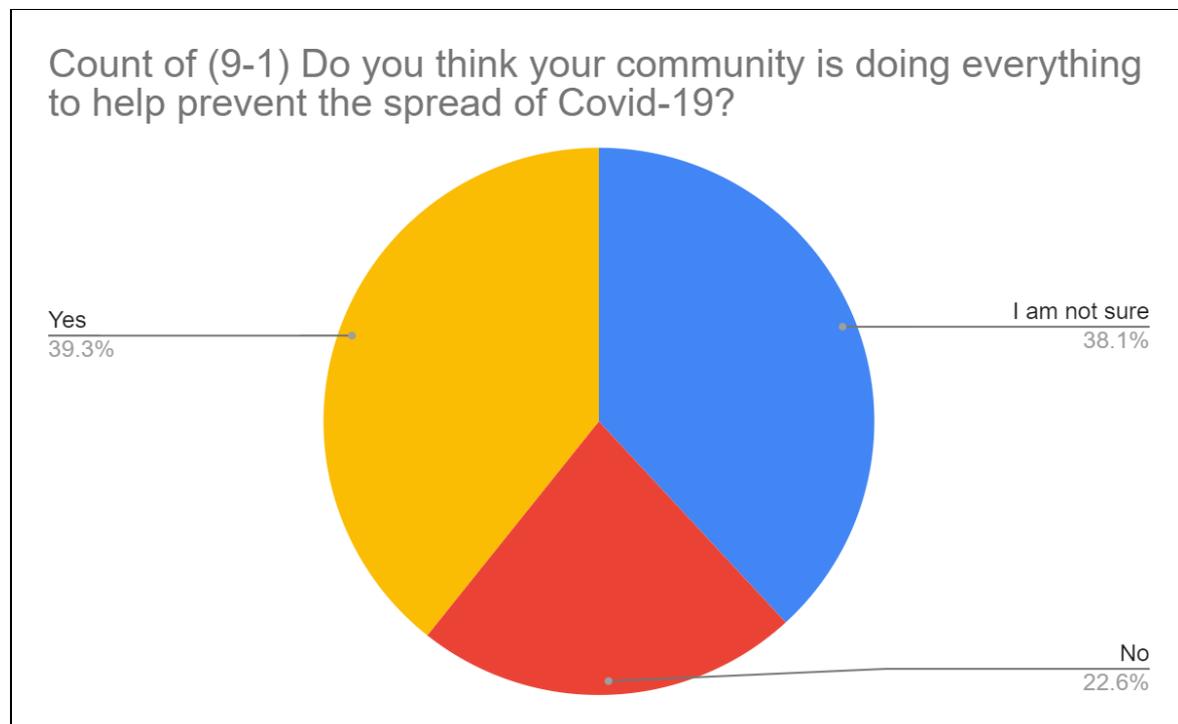
Count of (7-1) Do you think you have sufficient information about Covid-19?



Responses 679



Responses 688



Free text responses on communities' effort:

(some comments are combined, simplified, anonymised, or lightly corrected for grammar)

The comment in the group below shows that people do not get enough information or that the information they get is not clear. There seems to be a need for information in various translations by mediators who understand and communicate with people with different cultures and habits.

- The language barrier
- Cultural up bringing reflects the application and the adherence to the procedure and precautionary measure
- I don't think people are understanding the information
- I think educating community leaders would help in this regard

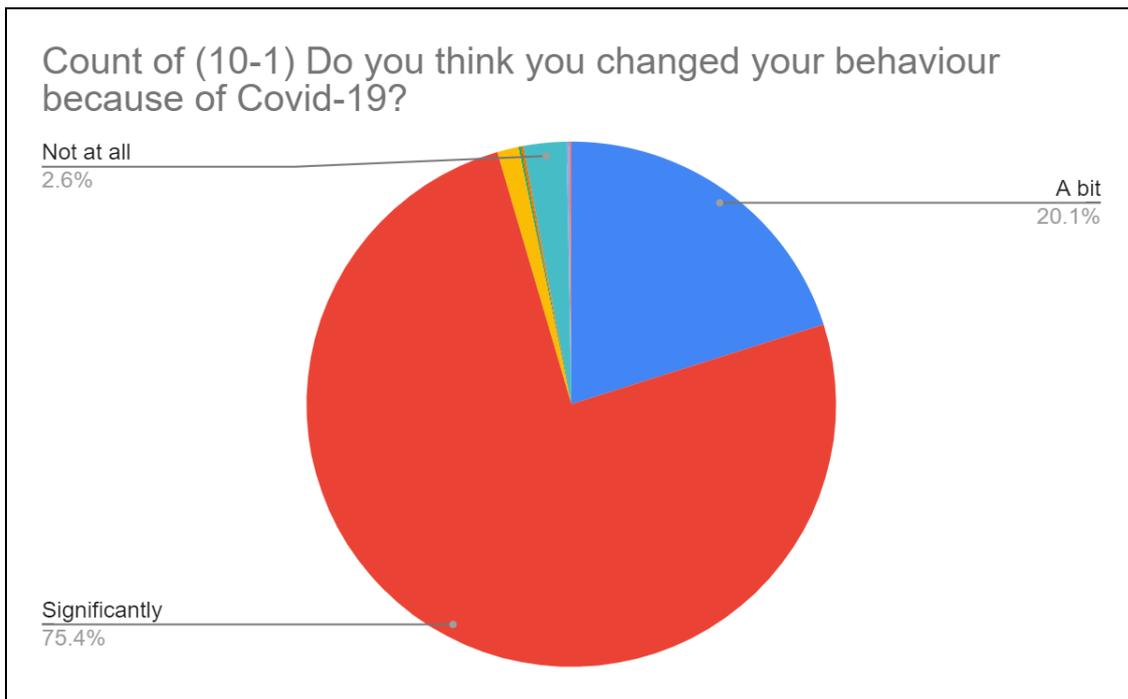
- Our community over relied on our Conservative government for answers and they were viciously wrong about herd immunity - the government lied and many more people died.
- I also think the British government have created so much confusion and mistrust that many people don't want to listen to government advice and will question what the purpose of the restrictions are for.
- Propaganda campaigns and mistrust of government sources
- Not all the community are adhering to it

- Safe practices are not widespread
- Because they act like it's not real
- Many people not wearing masks
- Because people are still making weddings and acting like Corona does not exist anymore

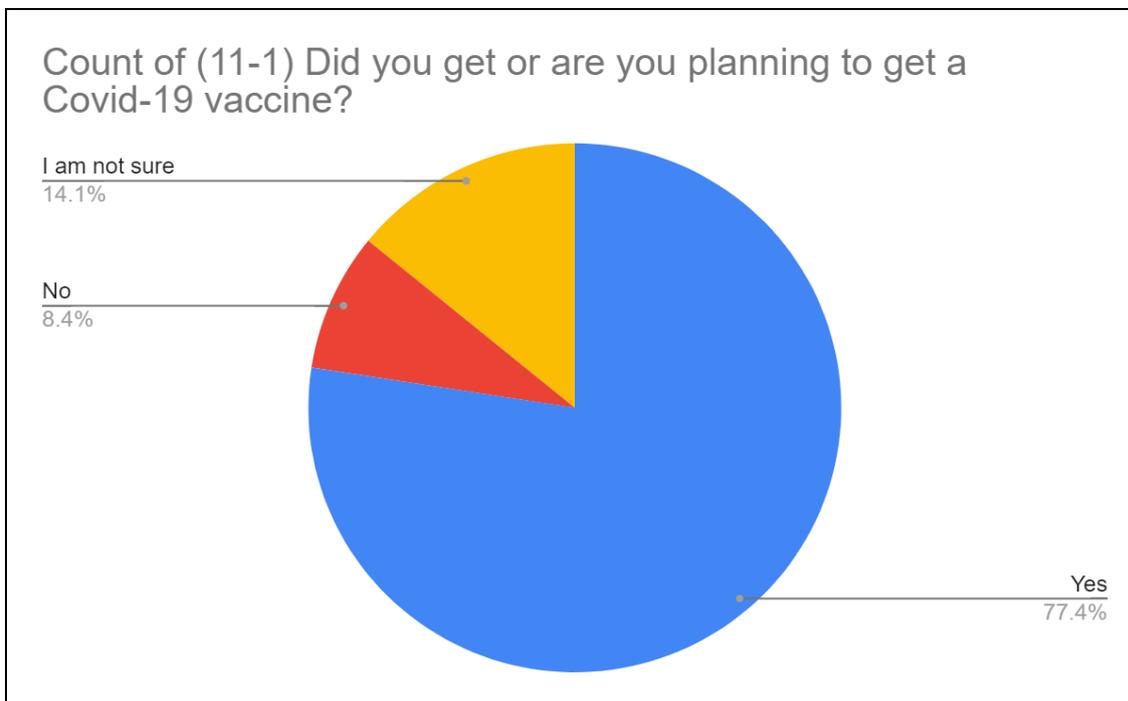
- I feel there is a lot myths and not enough understanding of covid 19 and how easily it spreads
- Spreading of social media misinformation. Someone says he's a doctor, sticks up a you tube video and says the vaccine is dangerous, and people believe it without question.

- There is a lot of work, but a lot of people are helping with medical help and financial help.
- They give help to all the people who need help.
- They are doing a lot. I don't know exactly what but I know if I need help there is help available.
- I work for a charity and I know that we have helped many children who need help when the schools were closed.

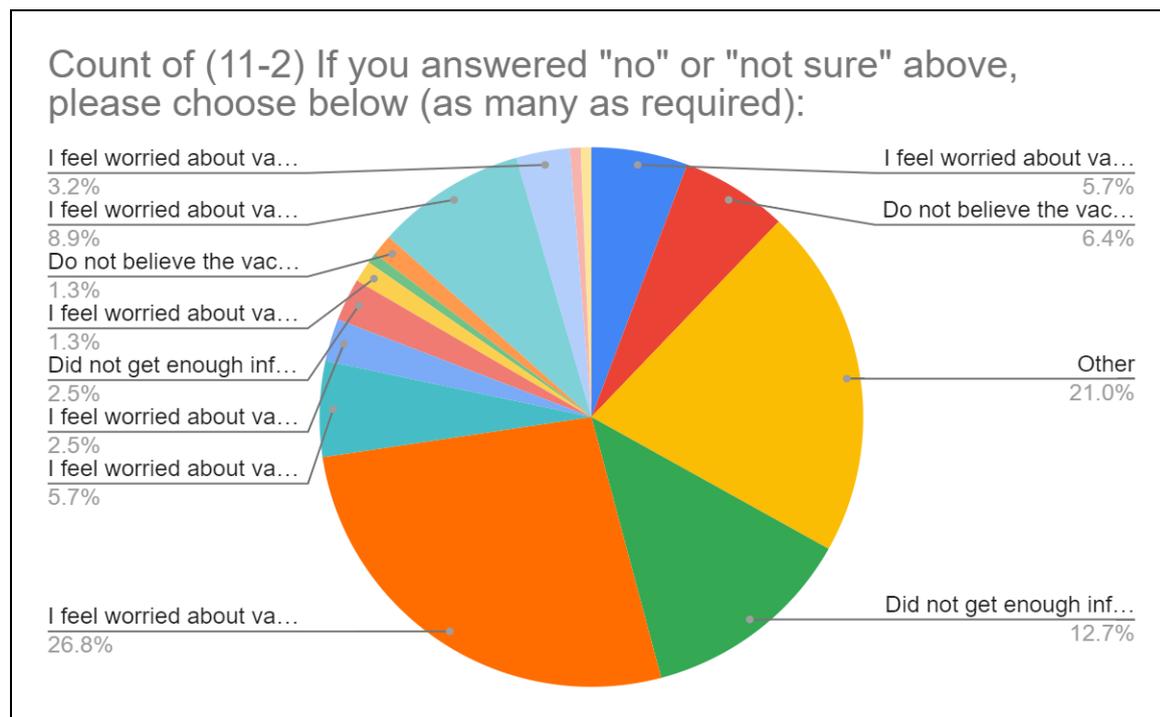
Responses 688



Responses 688



Responses 158



Free text responses on vaccines:

- I am younger, so have not been called up for the vaccine yet. However, I will research as much as I can before I do. My mother is very vulnerable due to a stroke is disabled now and she had Astrazeneca jab - now we're frightened that she might have a blood clot. It's terrible that the government is experimenting on people like lab rats.
- People get clots.
- I have reacted to vaccine badly in the past and I am not very comfortable with this quick productivity of this vaccine. So will wait a while.
- Unsure of any long-term side effects
- Possible long-term effects of the vaccine. Will it need to be given every year like the flu vaccine.
- I already have 2 doses of vaccine.
- I have taken the first dose.