# AN ANALYSIS OF CORONAVIRUS RESTRICTIONS AND HELD BACK COMMUNITIES

**NO HOLDING BACK**

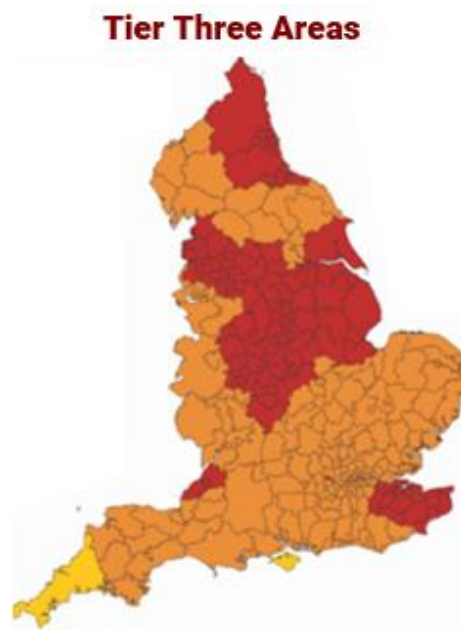*An analysis of coronavirus restrictions and held back communities*

## Contents

## Introduction

**Tier Three Areas**

On Thursday 26th November, Boris Johnson announced the tier restriction levels for England in relation to containing the second wave of the Coronavirus pandemic.[1] Much of northern England was placed in tier three while London and most other parts of southern England, excluding Kent, was placed in tier two. The government said they based this decision on the following five criteria (shown below)
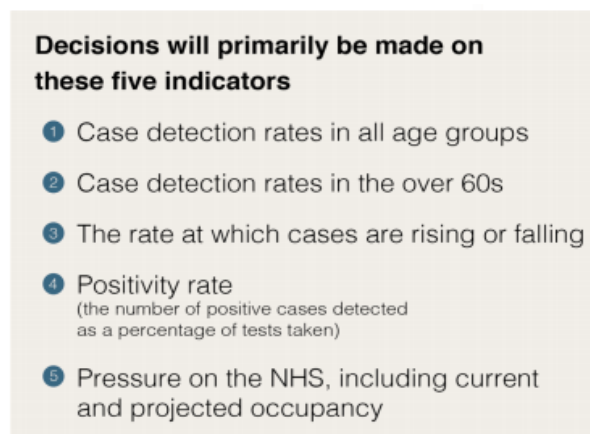
**Decisions will primarily be made on these five indicators**

1. Case detection rates in all age groups

2. Case detection rates in the over 60s

3. The rate at which cases are rising or falling

4. Positivity rate
   (the number of positive cases detected as a percentage of tests taken)

5. Pressure on the NHS, including current and projected occupancy

*Figure A: Criteria used to decide tier levels[2]*

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[1] Prime Minister's statement on coronavirus (COVID-19): 26 November 2020
https://www.gov.uk/government/speeches/prime-ministers-statement-on-coronavirus-covid-19-26-november-2020
[2] Press conference slides, No. 10 Downing Street, Thursday 26th November,
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/938969/2020-11-26_COVID-19_Press_Conference_Slides.pdf

Put simply, the government measured the following five things in deciding tiers

- Infection rates
- Especially among over 60s
- Are rising or falling
- Positivity rate
- CV19 Bed Occupancy

This paper assesses the reasons and merits of that decision. It asks whether London was held to the same criteria as the north of England and particularly left behind communities. Are infection levels lower in London? Is the virus under control there? Are hospitalisations stable in London? And is the infection level stable among the over sixty age group deemed most at risk of death from the virus? The paper adds two more criteria. First, by examining testing levels in London to assess whether the data being used is comparable to that used to place most of northern England in tier three. And also looking at the health outcomes for poorer people and ethnic minorities to judge whether their health outcomes were factored into the decision making.

## Executive Summary

This decision to place London in tier two, whilst placing areas like Manchester, Yorkshire and Humber and the North East of England in tier three is flawed. Infections in London are on the rise, especially among those aged sixty and over, the infection positivity rate is rising as is the level of CV19 hospitalisations. Coronavirus is growing in London, and despite the much lower levels of testing in the capital city, it is recording 16,000 infections a week.

- London's infection rate is rising.
- Much of northern England's infection rate is falling.
- The spike of London's hospitalisations shows no evidence it is crushing the curve, in fact all evidence is that it continues to grow.
- That infection levels in Southern England in general are on the rise, especially the South East of England whose authorities now occupy many of the top forty most infected places.
- That London has the lowest testing level of any region in England and if its testing levels matched Yorkshire or the North East that it would show London as having the greatest number of infections of any region over the last week
- Areas in London such as Havering & Redbridge have higher infection levels that Wakefield which is in tier three
- Areas in London such as Bexley, Dagenham, Hackney, Havering & Redbridge have infection levels higher than Northumberland which has been placed in tier three
- ONS show CV19 mortality impacts poor communities & Black and Asian communities worse. Thus, the decision to keep London out of tier three will cause many unnecessary deaths in London.

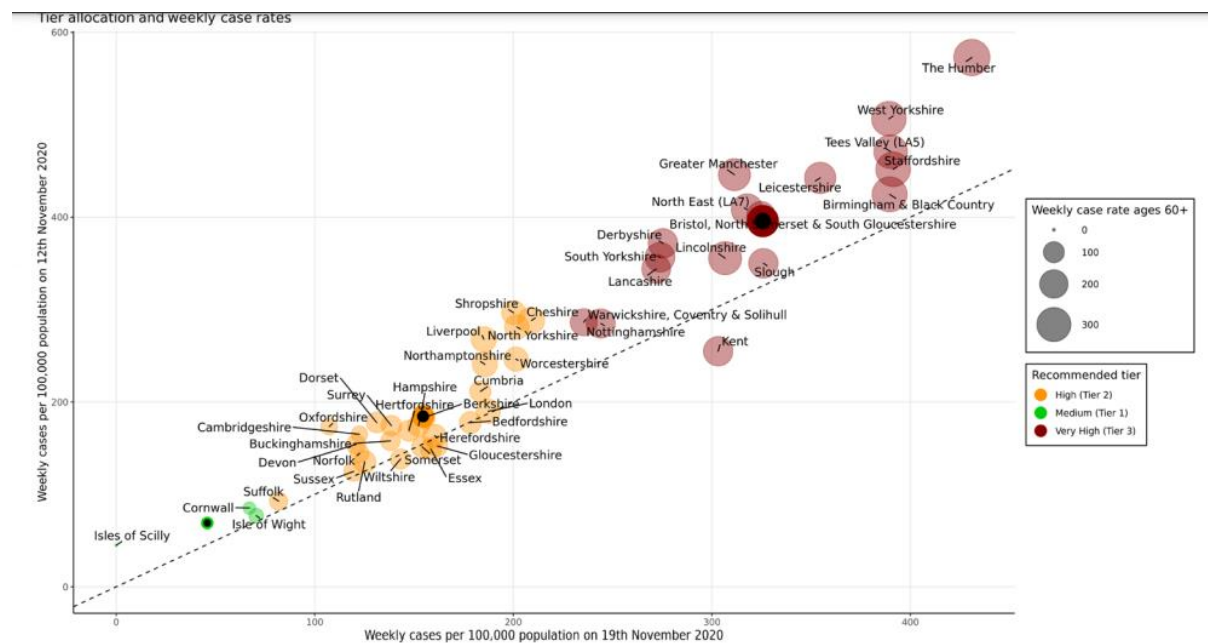## Part One: What is the Government's defence of its tiering decisions?



*Fig 1: Weekly Cases of CV19 infections per 100,000 for those aged 60+*

The government's justification for their tiering decisions is the above graph, published on 26th November.[3] The government says that the weekly case rates for those aged over 60 should be the key deciding factor in deciding which Tier to place each authority into. The data is for the 19th November infection rate level. One Tory MP proudly boasted that 'the data' provided all the justification that was needed.[4] First, it is important to accept that this does broadly correlate to the tier decisions they have reached. It is quite possible that this is how they arrived at their decision.

There is some room for scepticism, however. The infection rate above is a single snapshot from 7 days before tiers were announced. As we shall see later, many local authorities within the names you see above have much higher infection rates than those in tier three. The names on the graph above are not local authorities, parliamentary constituencies or even regions.

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https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/938964/Coronavirus_England_briefing_26_November.pdf

4 https://twitter.com/NeilDotObrien/status/1332034654174654471

They're a selection of counties, cities or twinned areas. Coventry & Solihull, for example, is a particularly arbitrary selection. As we shall see later, when you look at the infection data on a local authority level it paints a different picture. The age threshold choice is also significant. The figure of 60 requires further justification. Health outcomes do worsen by age but this becomes more pronounced over the age of 70. Also health outcomes are closely related to co-morbidities and disabilities – not just age. As we shall see later, health outcomes are also linked to ethnicity and the level of deprivation suffered. In addition, all the evidence from the second wave shows that the infection rate works its way up the age spectrum. Just because infection rates might be lower among the over 60s now tells us very little. What matters more to future trends is infection rates more generally and specifically if infection rates are growing among the young. Indeed, the very report the above diagram is from states clearly that infection rates are growing most quickly among the young. And the same report confirms that infections are on the rise mostly in the south of England and in decline mostly in the north of England. In summation, it looks like the government have found one barometer where their decisions on tiering have an element of logic, but this comes at the expense of ignoring a lot of other barometers which say the opposite. The report below outlines some of those other barometers and reaches the conclusion that the decision to place large areas of London in Tier 2 is an error that will cost lives.

## Part Two: Infections are rising in London and the South East & mostly falling in the North
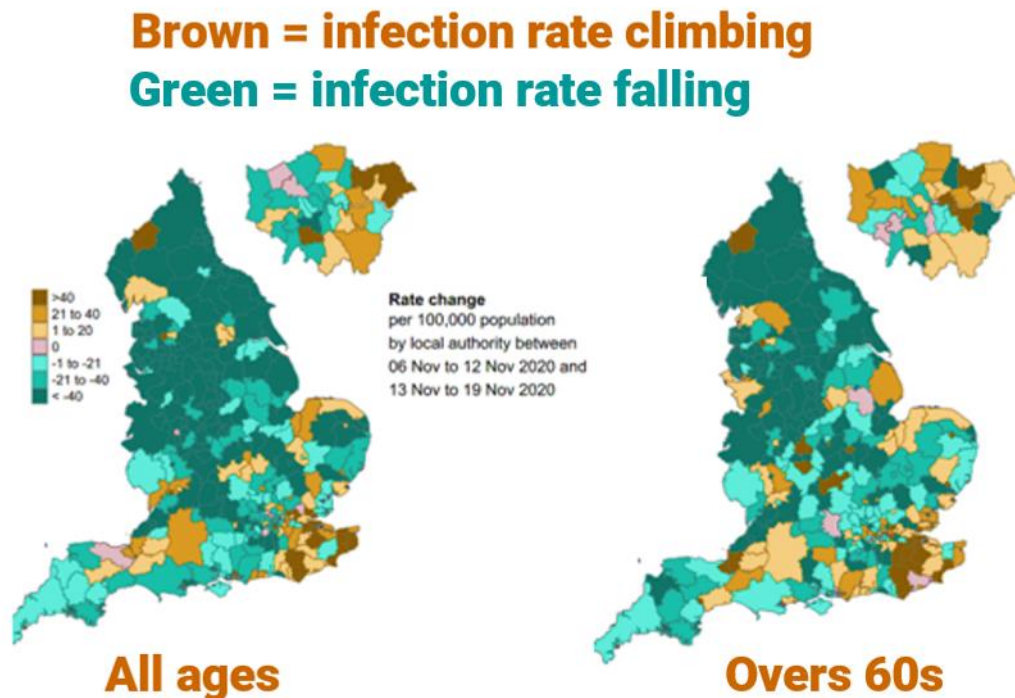


*Figure 2: Rate change in CV19 infection rates in the most recent week*

The government's own situation report shows quite clearly that the coronavirus infection rate is falling sharply in the North of England and is climbing in large parts of London and the South East. It shows this to be the case even among the over 60s age group that the government cited in their diagram on page 2 as their justification for the tiers. Put simply, the government wilfully designated the South of England and London Tier 2 in certain knowledge that it is there where the cases are now rising. This requires further examination.

## Part Three: Held Back Communities are the hardest hit by the second wave and lockdown restrictions

**Held Back Communities are hit hardest by Coronavirus & Lockdown restrictions**



Labour GE17 Seats    Leave Areas    Deprivation    Tier Three

@Jon_Trickett
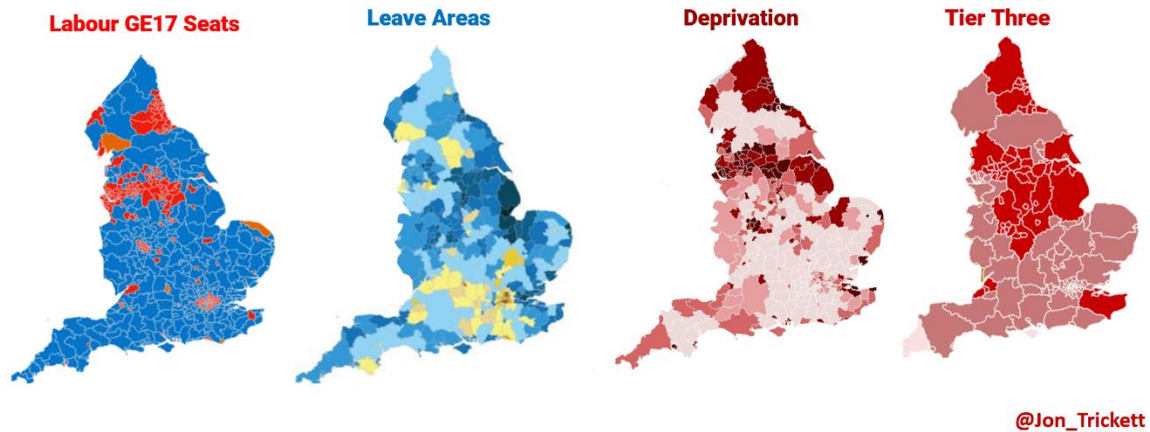
The maps above where compiled together for illustrative purposes only. We accept that correlation is by no means evidence of causation. It was included to prompt discussion. The common theme from above is that the communities No Holding Back is most keen on amplifying in our campaigning have been adversely affected by CV19 and the restrictions imposed. The areas placed in Tier 3, prima facie, tend to be poorer and more deprived constituencies. Yorkshire & the Humber has high levels of deprivation as does Northumberland and the North East in general. It is noticeable that these are the areas in Tier 3. It is also noteworthy to find Kent in Tier 3 and for pockets of deprivation to be noticeable on the map too. London, of course, suffers some of the most appalling levels of poverty & we are concerned that several of their areas should be in Tier 3. Specifically, it is very concerning that Barking & Dagenham, Harlow, Havering, Redbridge, Bexley & Newham, Tower Hamlets, Redditch, Hackney, Ealing, Enfield, Brent, Bromsgrove, Harrow, Croydon, Barnet Hounslow & Hillingdon all remain in Tier 2 despite high levels of infection. It caused us to ask the question, why? Why is London in Tier 2? The government are on record as saying they are keen to strike the balance between the economy and health. Whilst we argue that this is a false choice, health is wealth, it is worth pondering whether it is that consideration that is keeping London in Tier 2? Regardless of what the answer is, it is evidence that held back communities who voted to leave the EU and voted Labour in 2017 are those suffering the most severe restrictions. We don't think this correlational is causal, nor are we arguing that the Tories are deliberately targeting Labour areas. After all, many of those red 2017 seats have now

switched to blue. Equally, Labour control many seats in London, and it remains in Tier 2. No, instead what we are asking you to consider is whether the economic considerations of deprived left behind communities are being overlooked or deemed less important than the country's financial centre. London. This was certainly the argument the Metro Mayor for Manchester was putting forward on 20th October when the government were reluctant to even agree to 67% of furlough pay for workers, never mind the 80% figure that was announced the moment London went into lockdown. The increased rate of furlough payment when London went into lockdown does certainly point to a hierarchy of regions which the government deem worthy of economic support. We ask whether that same bias shown in furlough considerations is now being reflected once more in consideration of tier restrictions.

## Part Four: Hospitalisation rates are rising in Tier 2 areas but stabilising in Tier 3 areas

It is argued that one of the key considerations of the government in deciding lockdown levels is a desire to avoid overwhelming the NHS. This is a noble goal, and certainly the lockdown of March 2020, although belated, ultimately saved the NHS from collapse. Below, we argue that London's hospitalisation levels are still rising and certainly show no sign of flatlining or declining. Contrary, it is in Yorkshire & Humber and the North East of England where hospitalisation levels are stabilising. This, once more, causes one to question the wisdom of keeping London in Tier 2.
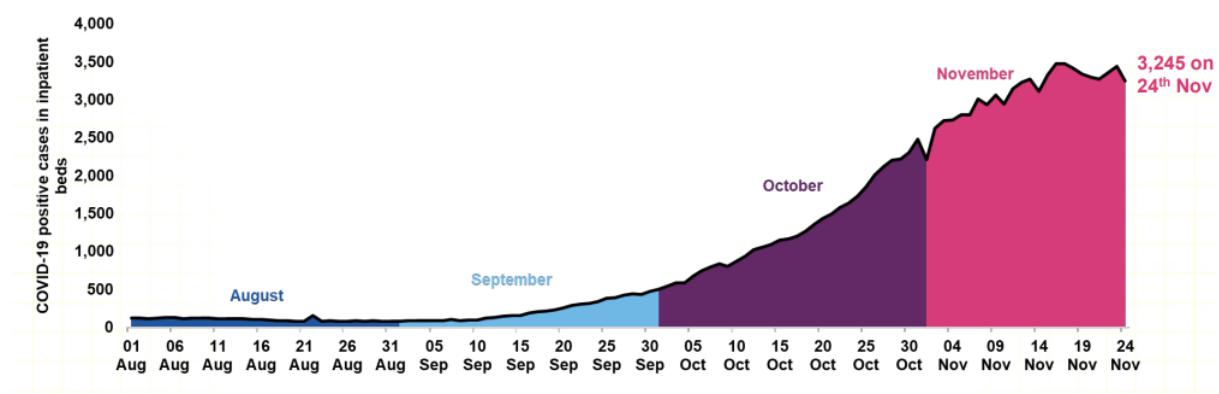


Figure 4:  Hospitalisation levels of CV19 in- patients in Yorkshire, Humber & the North East of England

The above graph shows that hospitalisation levels have been stabilising in Yorkshire & Humber and the North East of England for 3 weeks. Added to the knowledge that infection levels are now declining markedly in the north of England it would appear that the risks of NHS capacity being exceeded in these regions are waning. This, of course, does not preclude a third wave, nor indeed does the chart measure hospitalisation from normal winter admissions such as influenza which are expected to pose the same pressures on the NHS that we have seen in recent years. The NHS faces its toughest winter to date regardless of whether or not CV19 hospitalisations stabilise or not.
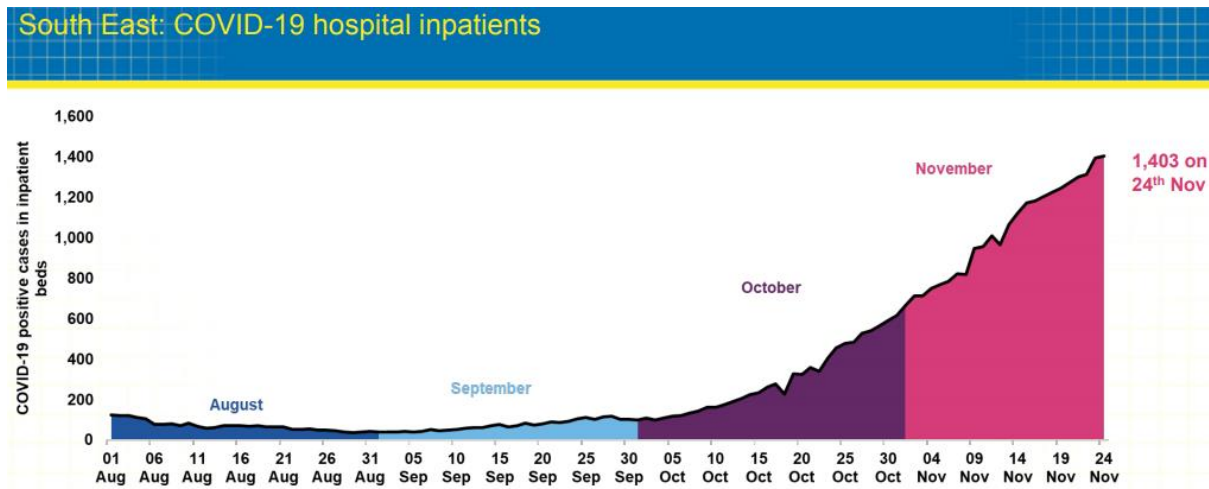
Figure 5: Hospitalisation levels of CV19 in patients in the South East of England

The South East of England shows a very different picture. In fact during lockdown hospitalisations from CV19 patients more than doubled and continue to grow. The epicentre of the virus is now shifting to the South of England. In light of this, prioritising the North of England for Tier 3 restrictions is illogical.
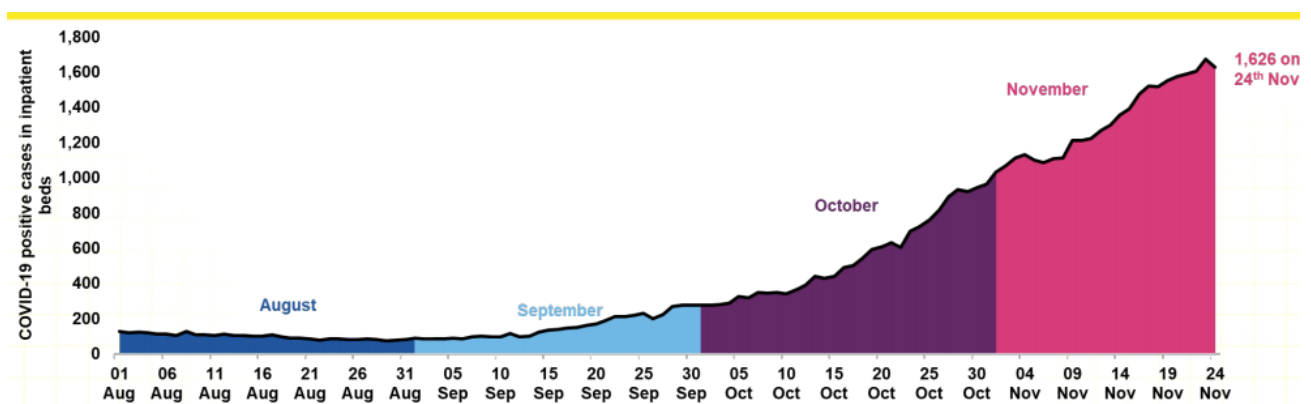


Figure 6: Hospitalisation levels of CV19 in patients in London

London CV19 hospitalisation levels have also increased during lockdown, rising by more 60%. It is too soon to say that levels are stabilising and increased infection rates among the over 60s in London, addressed above, would indicate that hospitalisations in London will continue to grow. The trajectory of London CV19 hospitalisations is certainly in marked contrast to Yorkshire & Humber and the North East. In view of this, it is surprising that London remains in Tier 2.

## Part Five: Testing levels are lowest in London & disguise higher numbers of infected

### Coronavirus: England Briefing 26th November

| | Individuals tested per day per 100,000 population (7 day moving average) | Percentage individuals test positive (weekly) | Case rate per 100,000 population (weekly) | Case rate per 100,000 population aged 60 years and over (weekly) | Case rate per 100,000 population aged 17-21 year olds (weekly) | Confirmed cases in previous 7 days |
|---|---|---|---|---|---|---|
| East Midlands | 425 ⬇ | 10% ⬇ | 275 ⬇ | 225 ⬇ | 317 ⬇ | 13297 |
| East of England | 386 ⬆ | 6% ⬇ | 141 ⬇ | 89 ⬇ | 221 ⬇ | 9149 |
| London | 328 ⬇ | 9% ⬆ | 187 ⬇ | 143 ⬆ | 272 ⬇ | 16799 |
| North East | 453 ⬇ | 12% ⬇ | 336 ⬇ | 265 ⬇ | 366 ⬇ | 8974 |
| North West | 557 ⬇ | 8% ⬇ | 255 ⬇ | 201 ⬇ | 259 ⬇ | 18698 |
| South East | 421 ⬆ | 6% ⬇ | 170 ⬇ | 119 ⬇ | 244 ⬇ | 15177 |
| South West | 428 ⬆ | 6% ⬇ | 164 ⬇ | 101 ⬇ | 274 ⬇ | 9206 |
| West Midlands | 461 ⬆ | 11% ⬇ | 317 ⬇ | 244 ⬇ | 377 ⬇ | 18825 |
| Yorkshire and Humber | 441 ⬇ | 12% ⬇ | 339 ⬇ | 266 ⬇ | 366 ⬇ | 18629 |
| **England** | **440** ⬇ | **8%** ⬇ | **230** ⬇ | **173** ⬇ | **293** ⬇ | **129610** |

It is noticeable from the chart above that London is carrying out fewer tests per 100,000 inhabitants than any other region. Markedly so. For example, the North West of England is carrying out 70% more tests than London. Yorkshire & Humber is carrying out 34% more tests & the North East of England is carrying out 38% more tests. If London tested at the same rate is Yorkshire & Humber or the North West, then the infection rate if it held constant means that several thousand more infections would be detected. Of course, increased testing can lower the infection rate, but few would dispute that it would still record enough infections to make London the region with the most infections in England. By keeping the rate at just 328, London has managed to come only 4<sup>th</sup> in the most numerously infected regions, disguising its real place as first.

The chart above also tells us that London is now the only region where the infection rate of those testing positive is rising. It also confirms that London is the only region where the infection rate in the over 60s in rising. Given that London is now the main source of increased infections it is remarkable that the government decided not to place it in Tier 3.

## Part Six: Clear Bias Evident in Local Authority Tiering

| Rank | Local Authority | 7 days per 100k | 1 Day Chng | Added Today | Added 25th Nov | Added 24th Nov | Added 23rd Nov | Added 22nd Nov | Added 21st Nov | Added 20th Nov | Total Cases |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | *England Misc.* | | | +111 | +78 | +125 | +61 | +75 | +141 | +143 | 18,426 |
| 1 | Swale | 599.0 | ↑ 3.3 | +119 | +198 | +67 | +139 | +131 | +163 | +82 | 3,937 |
| 2 | Thanet | 505.2 | ↓ 25.4 | +114 | +110 | +61 | +91 | +128 | +105 | +108 | 3,652 |
| 3 | Medway | 482.8 | ↑ 20.8 | +216 | +214 | +143 | +192 | +199 | +217 | +164 | 5,304 |
| 4 | Boston | 454.6 | | +64 | +72 | +24 | +26 | +57 | +46 | +30 | 1,830 |
| 5 | Oadby and Wigston | 429.7 | ↑ 22.8 | +41 | +41 | +26 | +32 | +42 | +37 | +26 | 2,365 |
| 6 | Dudley | 410.1 | ↓ 22.7 | +177 | +206 | +71 | +209 | +133 | +281 | +242 | 9,958 |
| 7 | Gravesham | 409.6 | ↓ 2.8 | +69 | +75 | +35 | +55 | +62 | +82 | +60 | 2,204 |
| 8 | Stoke-on-Trent | 391.2 | ↓ 32.8 | +165 | +147 | +104 | +122 | +134 | +158 | +173 | 8,792 |
| 9 | Sandwell | 387.3 | ↓ 22.8 | +172 | +178 | +78 | +147 | +186 | +211 | +300 | 11,844 |
| 10 | Kingston upon Hull, City of | 385.3 | ↓ 40.8 | +154 | +164 | +57 | +120 | +133 | +177 | +196 | 10,032 |
| 11 | Leicester | 374.6 | ↓ 0.6 | +182 | +201 | +124 | +186 | +163 | +335 | +136 | 17,042 |
| 12 | East Lindsey | 371.8 | ↓ 35.3 | +96 | +51 | +18 | +68 | +87 | +91 | +116 | 3,271 |
| 13 | Lincoln | 365.6 | ↑ 4.0 | +50 | +97 | +13 | +42 | +35 | +80 | +46 | 2,825 |
| 14 | Wolverhampton | 349.0 | ↓ 7.6 | +112 | +125 | +70 | +101 | +155 | +139 | +217 | 7,698 |
| 15 | East Staffordshire | 345.7 | ↓ 10.9 | +43 | +57 | +33 | +51 | +65 | +103 | +62 | 3,412 |
| 16 | Newcastle-under-Lyme | 343.0 | ↓ 46.4 | +52 | +56 | +46 | +82 | +60 | +62 | +86 | 4,270 |
| 17 | Slough | 333.7 | ↓ 10.7 | +69 | +113 | +24 | +69 | +104 | +73 | +47 | 3,617 |
| 18 | Rochdale | 331.4 | ↓ 5.4 | +146 | +108 | +62 | +96 | +83 | +113 | +129 | 12,346 |
| 19 | Walsall | 328.6 | ↓ 9.8 | +146 | +129 | +77 | +101 | +151 | +162 | +172 | 9,004 |
| 20 | Burnley | 328.4 | ↑ 12.4 | +45 | +40 | +28 | +23 | +38 | +57 | +61 | 4,457 |
| 21 | Oldham | 324.7 | ↓ 28.3 | +62 | +133 | +72 | +91 | +114 | +115 | +183 | 14,497 |
| 22 | North East Lincolnshire | 324.6 | ↓ 26.9 | +69 | +72 | +40 | +45 | +84 | +109 | +99 | 4,993 |
| 23 | Hartlepool | 324.6 | ↑ 5.3 | +48 | +33 | +25 | +30 | +31 | +59 | +78 | 3,787 |
| 24 | Dover | 323.4 | ↑ 5.1 | +63 | +80 | +33 | +47 | +77 | +40 | +42 | 1,991 |
| 25 | Hyndburn | 323.3 | ↓ 56.8 | +29 | +35 | +28 | +36 | +32 | +39 | +63 | 3,700 |
| 26 | Birmingham | 322.2 | ↓ 16.8 | +575 | +523 | +216 | +450 | +637 | +558 | +720 | 38,766 |
| 27 | Redbridge | 320.4 | ↓ 7.2 | +134 | +143 | +100 | +165 | +170 | +166 | +100 | 6,980 |
| 28 | Kirklees | 318.6 | ↓ 33.4 | +153 | +212 | +120 | +205 | +148 | +240 | +323 | 18,550 |
| 29 | Maidstone | 314.9 | ↑ 27.4 | +91 | +75 | +54 | +71 | +87 | +91 | +72 | 2,549 |
| 30 | Tamworth | 311.6 | ↓ 23.5 | +26 | +32 | +17 | +49 | +25 | +48 | +42 | 2,106 |
| 31 | Havering | 311.3 | ↓ 27.4 | +78 | +130 | +84 | +108 | +169 | +121 | +118 | 6,041 |
| 32 | Pendle | 307.2 | ↑ 1.1 | +38 | +50 | +24 | +38 | +42 | +40 | +51 | 4,597 |
| 33 | Bradford | 304.2 | ↓ 36.7 | +213 | +264 | +152 | +176 | +208 | +279 | +350 | 28,396 |
| 34 | Rossendale | 302.2 | ↑ 15.4 | +39 | +30 | +25 | +23 | +26 | +16 | +57 | 3,166 |
| 35 | Stafford | 298.7 | ↓ 30.6 | +51 | +52 | +39 | +75 | +46 | +57 | +90 | 3,741 |
| 36 | Blackburn with Darwen | 297.3 | ↓ 27.4 | +62 | +66 | +53 | +48 | +59 | +60 | +97 | 9,379 |
| 37 | South Tyneside | 296.7 | ↓ 14.6 | +61 | +51 | +49 | +62 | +57 | +69 | +99 | 5,549 |
| 38 | South Staffordshire | 295.3 | ↓ 22.2 | +36 | +58 | +23 | +57 | +39 | +56 | +63 | 3,421 |
| 39 | Bolsover | 292.9 | ↑ 7.4 | +29 | +27 | +15 | +24 | +45 | +45 | +51 | 2,417 |
| 40 | Wakefield | 291.4 | ↓ 21.8 | +129 | +128 | +128 | +143 | +131 | +143 | +213 | 13,179 |

Some London Local Authorities are placed in Tier 2 despite having higher infection rates per 100,000 than Manchester, Wakefield & Northumberland who are all placed in Tier 3. Thank you to @AVDS for compiling the analysis, which is accurate to 27th November 2020, 2.30pm.[5]

- Manchester is ranked 77th of the worst affected and is in Tier 3. Barking & Dagenham, Harlow, Havering, Redbridge, Bexley & Newham, however, are all ranked higher than Manchester, yet they are in Tier 2.

- Wakefield is ranked 40th, and correctly in Tier 3, but you can see that Havering & Redbridge in London are both ranked higher but remain in Tier 2.
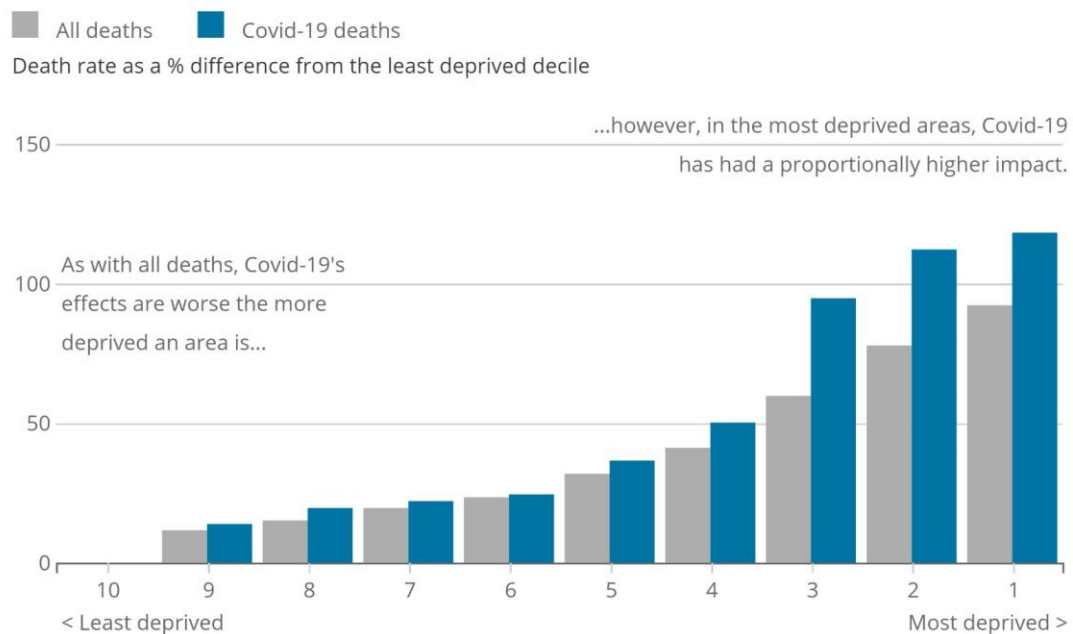
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[5] https://twitter.com/avds/status/1332027922455162884

- Northumberland is ranked 101$^{st}$ and in placed in Tier 3 restriction. Barking & Dagenham, Harlow, Havering, Redbridge, Bexley & Newham, Tower Hamlets, Redditch, however, are all ranked higher in terms of infections per 100,000 citizens yet they are placed in the lower Tier 2.

- Cheshire East is ranked 164$^{th}$ in England & had a lower infection rate than the London authorities of Barking & Dagenham, Harlow, Havering, Redbridge, Bexley & Newham, Tower Hamlets, Redditch, Hackney, Ealing, Enfield, Brent, Bromsgrove, Harrow, Croydon, Barnet Hounslow & Hillingdon. Cheshire East is in Tier 2 as are the London places listed above.

# Deprivation & ethnicity as factors in the health outcomes for CV19 patients.

**The coronavirus (COVID-19) has had a proportionally higher impact on the most deprived areas of England**

Age-standardised mortality rates, all deaths and deaths involving the coronavirus (COVID-19), Index of Multiple Deprivation, England, deaths occurring between 1 March and 31 May 2020

All deaths    Covid-19 deaths

Death rate as a % difference from the least deprived decile

...however, in the most deprived areas, Covid-19 has had a proportionally higher impact.

As with all deaths, Covid-19's effects are worse the more deprived an area is...

150

100

50

0

10    9    8    7    6    5    4    3    2    1

< Least deprived                                    Most deprived >

**Source:** Deaths involving COVID-19 by local area and socioeconomic deprivation: deaths occurring between 1 March and 31 May 2020

Office for **National Statistics**

According to the ONS "The mortality rate of deaths involving COVID19 in the most deprived areas of England was more than double that in the least deprived areas:

- most deprived: 128.3 deaths per 100,000 population
- least deprived: 58.8 deaths per 100,000 population[6]

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[6] ONS, Deaths involving COVID-19 by local area and socioeconomic deprivation, 12th June 2020
https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/deaths
involvingcovid19bylocalareasanddeprivation/deathsoccurringbetween1marchand31may2020?hootPostID=99d
a561a8f846d840579c3aa49ad15fa

Coronavirus spots inequality & pounces on it, using it as a conduit to infect and kill more. Nowhere is this truer than when looking at racism. Structural racism in the UK has worsened the impact of Coronavirus on ethnic minorities. This is particularly true when looking at Black Caribbean. ONS found that females of Black Caribbean ethnic background had the highest rate of death involving COVID-19, 2.0 times higher than females of White ethnic background. It also found that males of Black African ethnic background had the highest rate of death involving COVID-19, 2.7 times higher than males of White ethnic background.[7]
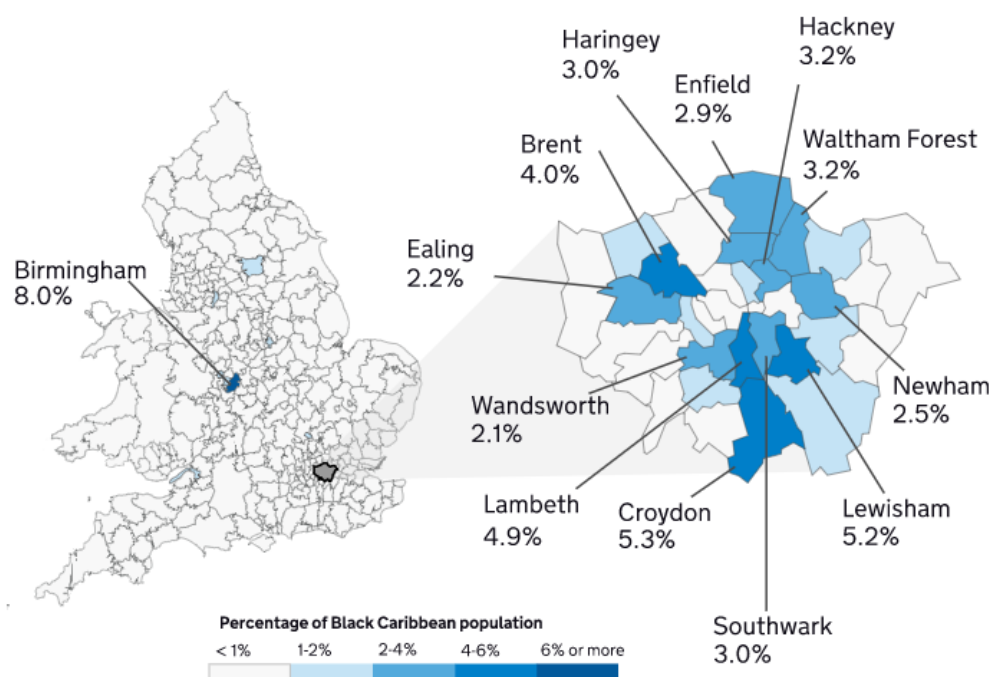


Source: Census of England and Wales, 2011

*Figure 11: proportion the population that is of Black Caribbean heritage*

This report wishes to make the point that by keeping London in tier two and allowing the virus to grow and the infection rate to rise the government are placing deprived communities and ethnic minorities lives at risk. The ethnicities most at risk of dying from CV19 live in the areas where the government has lowered the tier to two. It is as if the government have concluded that London's economy matters more than the well being of its citizens.

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[7]

https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/updatin
gethniccontrastsindeathsinvolvingthecoronaviruscovid19englandandwales/deathsoccurring2marchto28july20
20

## Conclusions

The decision to place London in Tier 2 is inconsistent with the evidence. One cannot be sure as to the motivations for such a decision, but the indications are that it is economic. Given the government's previous determination to offer the North of England just 67% furlough we are seeing yet more evidence that the economy of London is being prioritised to the detriment of left behind communities. These are the same communities that tended to vote leave and that we argue in recent reports, Northern Discomfort & No Holding Back are left behind. The same class antagonism that fuelled the leave vote is still prevalent and the unequal way the government have proceeded will only serve to increase alienation in these communities.

## Recommendations

London should be placed in Tier 3 to minimise the loss of life. Refusing to do so places London's deprived and ethnic minorities at an increased risk of CV19 fatality

A review should be carried out into the decision to only pay the North of England 67% of furlough and to keep London in Tier 2, despite rising infection levels including among the over 60s

Recommendations