

Kayla's story 19th August 2020

About me	Household	Children	Community	Area
I'm 50 years old and I'm a Black British Christian woman. I work in the community as a nurse.	In our household there are three of us - me and my two children.	My children are 12 and 10 years old	It's quite family orientated, and mostly affluent - most people are professionals. On my road there's nurses, bankers, builders. It's a very mixed area in terms of ethnic diversity.	We've lived in this suburb of London for about 12 years. In terms of amenities, there's supermarkets, shops, leisure centres, swimming pools and gyms.

My life before COVID

The first I heard of COVID was from Facebook - Chinese people just falling over. I think there was more on social media, than there was on the news. It's not normally the truth on the news, so you have to decide between social media and the news.

I worked as a nurse doing infection control, so I've lived with SARS and MERS and thought it was just another one. I paid more attention when it was showing in Italy. Most of my friends and family were absolutely terrified. But being a nurse, I wasn't that terrified because the NHS still had to carry on. I'm the only nurse in our family, so people were calling me to find things out.

My experience of COVID

"I became extremely stressed out because I was like trying to juggle everything; to drop the kids, go to work, do my work, collect them, with shortened hours of school because there was no childcare in the evenings. I was so stressed out and then I think in the middle of it they were saying more black and ethnic people were being affected. That's when I took note. That's the first time I ever thought 'this is affecting us!'"

I tend to stay in my local area, but my daughter had a hospital appointment around the time that cases were rising. We normally drive everywhere and don't use public transport, but that day we went on the tube. About 6 days after, my daughter had a really bad cough. At the time I just thought, well they go to school, they pick things up.

Then two weeks later the rest of us started to show symptoms. I was nailed to my bed with muscle aches and a sore throat. My GP said unless you've got a fever and a cough then it's probably not COVID. It strikes me as odd that there's only two symptoms for something that's killing people. Our symptoms were over pretty quickly - I just took cold and flu, and herbal remedies, ginger, lemon - and within about 36 hours my symptoms were gone. My son never got ill - he seems to have this random immunity. It was just really strange, then Idris Elba came out saying he had it but with no symptoms.

Working as a community nurse during COVID-19 was a nightmare. The NHS didn't know what was going on. Our manager insisted that everybody came into the office. We can work remotely from home but they're a bit slow to change. A lot of people were off isolating. At that point, I stopped seeing patients because they are high risk. I just said 'if you need me, call me'. The redeployment at work really stressed me out and I actually ended up off sick. Lockdown was not good for me because I need to socialise. It took a

while before it really affected me because I'm a key worker, so the kids went to school, and I was guaranteed to go out to pick them up.

My life after COVID

I haven't been as scared as everybody else. I've got friends and family who just stopped going anywhere and didn't do anything. I haven't been that person and I'm quite sceptical. When I hear that lots of people are dying, I want to know how they keep records of how many people died at the same time last year or the year before.

Why my COVID experience matters

First of all it was 'older people are dying' and then it was 'black people are dying'. If they weren't collecting all the data from the beginning, then how do you know that we're more affected? My friend who works in A&E said they weren't writing down ethnicity. They were also saying that we lacked vitamin D. How do they know? They test us for vitamin D under the same parameters that they test white people, Asian people etc. So maybe we need a lower level of vitamin D. There are lots of tests that are done but they have never been tested on Black people, so you don't know what's normal for us. No one has stopped to say what is the normal parameter for Black people? We've been here for almost a hundred years, my granddad fought in the war, so we're talking about a long time.

Another issue is that we are lumped together with all the other ethnicities. The government shouldn't just assume that ethnic minorities don't follow the rules. I'm educated, I have a degree, I have a job, I'm well paid, so is my partner, we live in a three-bedroom house, we own it - even people like me were dying, so it wasn't that 'we all live in overcrowded houses', because we don't. They were saying that people were coming into hospital who didn't have underlying comorbidities. I think the reason that we were affected more is because we don't know our underlying conditions, and we don't receive the care that we should from the beginning, because there are inequalities within health.

I think the inequalities that we face as a race of people is out of control now. It's time to act. We face a lot of discrimination from our primary care. If a Black person comes into your GP practice with concerns, then you need to test them. It's that fight that we have to do that's absolutely exhausting. It's a lot more than just GPs. I would say to the government; we need testing. We don't just need to hear 'you are more affected' - what's the action?