

# Together in Tribulation: British Muslims and the COVID-19 Pandemic



## **Together in Tribulation: British Muslims and the COVID-19 Pandemic**

The Muslim Council of Britain (MCB) is the UK's largest and most diverse national Muslim umbrella organisation with over 500 members including mosques, schools, charitable associations and professional networks.

It is an independent, democratic body, established to promote consultation, cooperation and coordination on Muslim affairs in the United Kingdom.

The Muslim Council of Britain is a non-sectarian body working for the common good without interfering in, displacing or isolating any existing Muslim work in communities.

It is a broad-based, representative organisation of Muslims in Britain, accommodating and reflecting the variety of social and cultural backgrounds and outlook of Muslim communities.

The Muslim Council of Britain is pledged to work for the common good of society as a whole; encouraging individual Muslims and Muslim organisations to play a full and participatory role in public life.

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# Foreword

*In the name of God, the Most Beneficent, the Most Merciful.*

## **“Verily with hardship, comes ease.” (Qur’an 94:5)**

This Qur’anic verse has been a source of comfort during the COVID-19 crisis in reassuring and reminding us that this too, will pass, as we soldier on with much resolve, faith and patience. Indeed, the world has been brought to a standstill by the pandemic, having to deal with its repercussions in a range of ways and witnessing the inequalities in societies and the plight of those on the margins. At the time of writing, we are seeing restrictions being re-imposed as we anticipate a second wave of the virus coming our way. This shows that COVID-19 will remain part of our lives until a vaccine has been discovered and we can protect ourselves. Until then, we will continue to learn new and innovative ways to keep going in spite of the pandemic. After having experienced over seven months of its impact in Britain, it is an opportune time to reflect on what we have gained and learnt thus far.

This report serves to document and collate the chilling impact of the pandemic thus far on Muslim communities across Britain. The statistics revealing the disproportionate number of lives lost to COVID-19 in ethnic minority and Muslim communities can be felt when we look at the spike in the demand for burial services and that the first four lives in the NHS taken by the virus were indeed of Muslims. It is undeniably a period of time to mourn the loss of these lives, the loss of our freedom, agency and routine we have long taken for granted, and the loss of income and health.

Nonetheless, the response of Muslim communities through these trying months has been awe-inspiring. This is not only shown by the sheer volume of grassroots initiatives and Muslims working on the frontline jobs, but also by the resilience of communities when mosque activities were suspended, particularly through the holy months of Ramadan and *Dhul Hijjah*, and the festivals of *Eid-ul Fitr* and *Eid-ul Adha*. This report seeks to serve as a positive reminder of just how adaptable, resilient and hopeful we have been in such troubling times, particularly as we are not yet at the end of this pandemic. Muslim communities up and down the country have indeed exemplified the teachings of Islam through keeping the faith, compassion, mercy and patience which kept them going strong, in spite of adversity. It is important that we remember this, and continue to channel these teachings and this sense of resolve as we continue to see the pandemic affect our lives.

I would like to express my deepest gratitude to our friends, affiliates and partnering organisations for their selfless efforts in helping our communities tide through this period. I would also like to thank those who have toiled at the forefront saving lives, keeping us protected and making our lives in the age of pandemic as bearable as possible at the expense of their own lives. I pray to Allah to give us the strength and wisdom to continue to serve our communities to the best of our ability. Ameen.



A stylized, handwritten signature in black ink, appearing to read 'Harun Khan'.

**Harun Khan**  
Secretary General

# Executive Summary

## Background

While there is no doubt that COVID-19 has hugely impacted all communities, **the impact and experience has been different for various segments of society**. Muslim communities in particular have dealt with the pandemic **from a place of disproportionate disadvantage**, and even within British Muslim communities, some have been more impacted than others.

## Aims and Objectives

This report seeks to highlight **the specific issues Muslim communities faced during the first seven months of the pandemic**. These include having the highest COVID-19 mortality rates by faith group and the particular circumstances which put many British Muslims at the highest risk, the suspension of mosque activities and the economic and social implication this has had, the adaptations made to traditional funeral and burial processes, mental health repercussions, and the way in which Muslims were often negatively portrayed in the media reporting of the pandemic.

This report also seeks to demonstrate **how Muslim communities across the nation have responded to the impact of the pandemic thus far despite the hardships they faced**, and showcase a mere handful of the incredible, innovative and impactful initiatives set up by Muslims to support their local communities and beyond.

## Summary Points

**The Muslim Council of Britain (MCB) has been collaborating with the British Islamic Medical Association (BIMA) to provide a coordinated and robust response to the various consequences of the pandemic so far**, including on burials, mental health and personal finances. This was achieved through the setting up of ten COVID response groups addressing and overseeing the various needs of Muslim communities. The MCB has also been working alongside a range of affiliate members, experts in the fields of medicine, law, mental health, Islamic jurisprudence and others, as well as many Muslim-led organisations to support communities across Britain

**Regular and timely online community briefings and resources during the most critical times throughout the course of the pandemic were essential** in communicating key public health messages, as well as a forum for community members to share concerns and provide feedback. The provision of clear, tailored guidance as well as signposting of assistance and services were crucial, particularly when communities were under lockdown restrictions and having to celebrate Ramadan and *Eid ul-Fitr* at home, and when mosques were preparing to safely re-open as restrictions first began to ease.

**At the grassroots level, British Muslims have showed the strength of their resolve, resilience and community spirit in the way in which they played their part in the national effort**. From a large representation in key worker industries including healthcare, education, transport and food production, to setting up over 100 community support groups delivering food and medicines to those in need, **there is no doubt British Muslim communities embodied the Islamic principle of acting in service to others to the fullest extent**. This included innovative ways of working for their

communities by using empty mosque premises to set up emergency end-of-life care facilities, to providing COVID-19 patients with home oxygen monitoring systems to take the strain off the NHS, setting up Imams to deliver services via live-streaming services throughout Ramadan, and hosting funerals on Zoom for the benefit of those who were self-isolating and grieving for their loved ones.

## Lessons Learnt and Recommendations

Although the pandemic has shown the immense strength of Muslim communities, **there have been a number of lessons which have been learnt so far**, which can inform preparations to be better equipped in dealing with subsequent peaks of the pandemic and future surges in cases.

1. There is a need for **collective leadership and strong coordination between different sectors and service providers** of Muslim communities. It is fundamental to have a coordinated and aligned response where resources and best practice could be shared.
2. There is a need to **strengthen the burial sector**, which can be met by investing in cold storage or external spaces in case of spikes in burial demands and **establishing a centralised system in which the deaths of every Muslim in Britain can be recorded** and from which this data can be analysed to get a better understanding of British Muslim communities and their needs.
3. With an increasing reliance on technology, it is essential that **support is provided to those who are not technologically literate in order to help them to access services and programmes** that have now moved online.
4. Community members should be encouraged to keep up their regular donations to their mosques, Islamic institutions and other charitable causes to help **ensure the long-term financial sustainability of these institutions** which are at the heart of the lives of so many Muslims.
5. It must be ensured that every segment of British Muslim society is aware of and understands the public health messaging in order to keep safe. Alternative methods of communication should be explored, including **translating all key public health messaging into community languages, having this relayed by Imams and community leaders from the pulpit, facilitating conversations between Muslim healthcare professionals and community members to directly answer questions** and provide a greater understanding of the measures that must be taken to remain safe.

This is not an exhaustive list, and more work should be done to evaluate the efforts thus far, recognise the gaps and devise solutions to continue to confront the pandemic together.

Last but certainly not the least, there may be untold stories and initiatives within the communities which are impossible to capture fully in a single report, but have indeed been invaluable in their response to the crisis. The MCB recognises the contribution of all individuals and communities who have served and played their part, large or small, as they have all indeed been impactful.

# Chapter 1: COVID-19 and the Call to Community Action

Since the outbreak of the pandemic in early March, our lives have shifted significantly in an attempt to meet the new, evolved circumstances. All across the globe, more than a million lives have been lost, many economies have been predicted to face recessions with individuals having lost their jobs, young people having to complete their education from home, increased mental health issues, widening inequality, and community organisations having to quickly adapt to serving their members in new and innovative ways. We have never been more reliant on technology, had a greater appreciation for our loved ones and the services our local communities offer, and been more cautious in the way we approach things which once felt so ordinary.

All segments of society have been affected by the COVID-19 pandemic, but socio-economic factors and structural inequalities, including long-standing health and social inequalities affecting some communities more than others, have exacerbated the impact, which will be further illustrated in this report.

While COVID-19 has cast a shadow over our lives, we have also witnessed incredible strengths in communities all across the UK. This can be seen in the grassroot initiatives complementing organisational and governmental responses to the crisis, and filling in gaps where the demand for public services and support far surpassed the supply. Key workers have been

tirelessly working on the frontlines - whether it is treating those infected with COVID-19, restocking shelves in supermarkets and grocery stores, delivering food to our homes, driving us safely, and keeping the country moving whilst putting their own lives at risk. It is therefore more pertinent than ever to reflect on this crisis, not only focusing how COVID-19 has adversely affected our lives, but also how the human strength shines bright in the dawn of the pandemic.

Amongst the numerous collective and individual responses to the crisis, the Muslim Council of Britain (MCB), as an umbrella organisation of its affiliate members, has played a significant role in spearheading a collective and coordinated response to the needs of Muslims in Britain and supporting Muslim communities since the outbreak of the pandemic. This has included leading the call to suspend congregational activities in Muslim communities in mid-March, guiding communities through Ramadan and Eid in lockdown, dealing with the disproportionate number of Muslim lives lost, transitioning towards the safe re-opening of mosques, and now working to prepare communities for the second wave of the virus. This has all been integral to minimise the risk to Muslim communities, inform and educate about the virus and its impact, and to ensure individuals get the support they need throughout these tumultuous times.



Photo courtesy of Green Lane Masjid, Birmingham

# Timeline of Events

**5 March**

First COVID-19 death in the UK<sup>1</sup>

**12 March**

MCB writes to all its affiliates urging them to plan for the likely suspension of congregational activity from the following week, as true scale of the impact of COVID-19 becomes apparent

**16 March**

MCB calls for the suspension of all congregational activities across Muslim communities in the UK, including in mosques and Islamic centres<sup>2</sup>

**23 March**

UK Government led introduction of lockdown restrictions in England, Scotland and Wales

**25 March**

Dr Adil El Tayar, a Muslim doctor, becomes the first healthcare worker in the UK to pass away of COVID-19

**28 March**

Introduction of lockdown restrictions in Northern Ireland

**6 May**

Death toll hits 30,000 in the UK<sup>4</sup>

**13 May**

First easing of lockdown measures in England, with households now able to meet from a distance

**18 May**

MCB issues initial discussion guidelines for preparing for the safe and phased re-opening of mosques

**24 May**

Celebration of Eid-ul Fitr, with Eid prayers restricted to people's homes with their households only instead of being held at mosques or parks

**4 July**

Places of worship are able to re-open for communal worship in England, with many mosques re-opening though many still choosing a more conservative approach and opening later

**10 July**

First jumu'ah (Friday congregational prayer) in almost four months takes place

**31 July**

Celebration of Eid-ul Adha, with local lockdown measures in place in Leicester, Greater Manchester, East Lancashire and parts of West Yorkshire affecting Eid celebrations

**22 September**

The Prime Minister announced new measures to limit the rising cases of coronavirus

**12 April**

Death toll hits 10,000 in the UK<sup>3</sup>

**20 April**

Launch of the MCB's #RamadanAtHome campaign, focusing on how to celebrate the month safely

**24 April**

Holy month of Ramadan begins

**10 June**

MCB publishes the 9-step guide for safe re-opening of mosques

**13 June**

Places of worship are able to re-open for individual worship, though many mosques choose to focus on re-opening for communal worship from July

**22 June**

Saudi Arabia announces changes to Hajj for international pilgrims

**29 June**

Local lockdown measures are announced in Leicester

**20 August**

1st Muharram and start of the Islamic New Year of 1442

**14 August**

Tightening of lockdown restrictions in England to comply with the "Rule of 6"

**12 October**

The Prime Minister announced new local COVID alert levels, the three-tiered system in England

**19 October**

Welsh Government announced a 17-day 'fire-break' lockdown from 23 October, including Welsh places of worship closing again

# A National Coordinated Response

Since the outbreak of the pandemic, it became evident that a myriad of issues were emerging and would come up as a result, requiring action to be taken to address these. The MCB, in collaboration with the British Islamic Medical Association (BIMA), saw the need for robust communication with and guidance for Muslim communities, and begun to coordinate a response to the pandemic within Muslim communities, working with key Muslim-led organisations.

Ten COVID-Response Groups (CRGs) were formed to monitor different areas, provide leadership in these spaces and support community members in the most effective way possible.

## National CRG

The National CRG comprises a network of Muslim individuals and representation from various leading organisations to address the impact of the COVID-19 pandemic, including BIMA, Muslim Charities Forum and the National Burial Council, amongst others. The group includes the Muslim Council of Scotland and Muslim Council of Wales – independent entities who are affiliates of MCB – to ensure that guidance tailored to government advice is provided in their respective nations. The CRG also comprises of experts from fields of law, mental health, Islamic jurisprudence, and media. This group serves as the consultative body as well as the core group of all CRGs, overseeing and coordinating the work of all CRGs.

Notable work by the National CRG includes the creation of the #RamadanAtHome campaign, the production of the #StayHomeSaveLives guidance in ten community languages and the guidance on the safe re-opening of mosques. Translating guidance and resources has been extremely important in maximising the reach of key messages to different communities.

A consultation with hundreds of mosques and dozens of regional and national Muslim associations was also held, discussing guidance and advice on safe and gradual reopening of mosques for congregational worships.

## Medical CRG

The Medical CRG serves to provide medical advice to all other CRGs upon request. From the outset of this pandemic, this group published a statement supported by over 180 Muslim healthcare professionals calling for congregational prayers and mosque activities to be suspended. It contributed to the production

of guidance on social distancing in mosques and public spaces, the review of visitation rights of COVID-19 patients in hospitals and guidance on how to safely perform ghusl and other burial procedures, among others.

## Economic Impact CRG

Made up of experts in the field of accounting, business and finance, this group has kept abreast of all the different financial support schemes announced by the UK Government in order to explain and disseminate this information to community members. This has included producing clear infographics explaining the different support packages available for different groups of people, including employees, employers, self-employed, mosques and charities.

## Mental Health CRG

The Mental Health CRG has formed a consortium of expert Muslim-led mental health organisations in order to be able to provide support to as many Muslims as possible. The group not only signposts to mental health organisations, but also holds monthly webinars to support communities and helps to coordinate the work of Muslim-led mental health organisations who have seen a huge surge in demand for their services amidst the pandemic.

## Publicity CRG

The Publicity CRG brings together a range of Muslim-led media, including digital media and TV channels, along with experts in communication to ensure key messaging to keep people safe is

communicated to the widest Muslim audience, and to find innovative ways of doing so.

### Charities CRG

Facilitated by the Muslim Charities Forum, the Charities CRG brings together the majority of leading Muslim charities to ensure a coordinated effort in assisting Muslim communities throughout the pandemic. The CRG also collaborated with LaunchGood, the Muslim crowdfunding website, to set up #SupportOurMosque initiative, which serves as a platform to help mosques transition to online fundraising and deliver training to assist mosques in the transition. Introduced in April 2020, the campaign has thus far helped over 130 participating mosques in the UK raise over £440,000.

### Burial CRG

The Burial CRG works closely with National Burial Council (NBC) and BIMA to provide advice on how to perform *ghusl* safely, according to Islamic jurisprudence and UK Government guidance. A notable cause spearheaded by the group was working alongside NBC and lawyers in negotiating with the UK Government to ensure the potential for enforced cremations for Muslims and Jews was explicitly removed from the emergency Coronavirus legislation, thereby protecting the religious rights of Muslim and Jewish communities.

### Education CRG

The Education CRG was set up to support parents in home-schooling their children, giving top tips and advice on managing this where many parents have never had to do this before. The group has also been overseeing the safe re-opening of *madrasas*.

### International CRG

The International CRG aims to support Muslim-led organisations across the globe by sharing best practice and resources on the COVID-19 response and how these can be applied to other contexts, in particular Muslim-minority nations including Canada, Germany and Norway. The group set up an international COVID-19 task force with the Islamic Medical Association of North America, Medical Association of Canada, Australian Islamic Medical Association and others. The group also contributed in helping to draft letters to governments in other nations, present at medical conferences, and produce guidance for Norway, Kenya, Malaysia and South Africa.

### Scholars CRG

Scholars CRG comprises of scholars from a range of Muslim groups and schools of thought. The group discusses and shares opinions on theological issues related to COVID-19 that may arise throughout the course of the pandemic, providing support and advice from a jurisprudential aspect.

The contribution of organisations, individuals and experts from different fields and professions in the respective CRGs has been for one purpose – to support and serve Muslim communities and keep Muslim communities safe. To achieve this mission, the MCB has facilitated and collaborated with over 35 expert Muslim organisations offering services online which addressed, and are still addressing the various needs of communities ranging from medical issues, burial rites, financial difficulties, guidance on mental health issues, and guidance on celebrating Ramadan and Eid during lockdown. With extensive and thorough consultations with its affiliate members and Muslim-led organisations, and the support from councils of mosques, national and regional mosque representative bodies and Muslim-led associations, the MCB facilitated 18 webinars and training sessions which saw over 10,000 participants and reached over 300 mosques nationwide since the outbreak of the COVID-19 pandemic. The work of each CRG is constantly evolving and must continue, in order to adapt to the changing circumstances of the pandemic which is still prevalent.

# Chapter 2:

## How Muslim Communities Were Impacted by COVID-19

The impact of the virus itself and the consequences of the lockdown restrictions have no doubt been incredibly difficult for every community – faith and non-faith communities alike – and there is not a single section of society that remains unaffected. British Muslims are no exception to this, but it has become increasingly evident that Muslim and minority ethnic communities in general have been impacted by this in different and more acute ways.

This chapter aims to bring to the fore more specifically the extent, gravity and severity of the impact of the COVID-19 crisis on Muslim communities in Britain: the disproportionate number of lives lost; the effects of lockdown on employment; financial security; social and spiritual life; mental health; and changes to burial and funeral practices. This chapter seeks to illustrate the effects of lockdown on these aspects of our lives and how the COVID-Response Groups (CRGs) responded.

The data used in this chapter is limited by availability; where faith-specific data is not available and where BAME data is used. It is worth noting that given approximately 90% of Muslims are from BAME backgrounds (and that approximately 1 in 3 of the BAME population is Muslim), this is not an unreasonable proxy.

### COVID-19 Mortality Rates

The starkest way in which Muslim and ethnic minority communities have been hit by the pandemic is in terms of mortality. Evidence has clearly showed that ethnic minorities are disproportionately impacted by COVID-19, and Muslim communities are the faith group with the highest mortality rates.

#### Trends in BAME (Black, Asian and Minority Ethnic) and Muslim Deaths

While the number of deaths was soaring high in the early stages of pandemic, it also became evident that the mortality rates within BAME communities were disproportionately high. Given that approximately 90% of Muslims are from BAME backgrounds, even without the data, it was logically assumed that Muslim communities were also being disproportionately impacted.

According to the review undertaken by Public Health England (PHE), Black ethnic groups reflected the highest age-standardised diagnosis

rates of COVID-19 per 100,000 population while their White counterparts reflected the lowest.<sup>6</sup> After controlling for the effect of sex, age, deprivation and region, those of Bangladeshi ethnicity showed around twice the risk of death as compared to those of White British ethnicity. The risk of death found in people of Chinese, Indian, Pakistani, Other Asian, Caribbean and Other Black ethnicity was 10 – 50% higher than that to White British.<sup>7</sup>

The Muslim Council of Britain (MCB), British Islamic Medical Association (BIMA) and the Muslim Doctors Association, among others, had recommended that PHE record and publish disaggregated data which would give a clearer idea of the impact on different faith communities, which would allow for better tailored public policy to protect different at-risk groups.

On 19 June, the Office for National Statistics (ONS) subsequently published provisional analysis according to religious affiliation, confirming that the Muslim faith group had the highest mortality rate with 198.9 deaths per 100,000 males and 98.2 deaths per 100,000 females.<sup>8</sup> This data was based on death registrations up to 29 May 2020

which occurred between 2 March and 15 May 2020. Muslim men displayed 2.5 times greater risk of dying than that for Christian men, while Muslim women displayed 1.9 times greater than their Christian counterparts. In general, those identifying as Muslim, Jewish, Hindu and Sikh showed higher rates of death than other faith groups. With the growing evidence showing the disproportionate number of Muslim lives lost to COVID-19, there is an urgent need to ascertain why this is the case.

## **Possible Factors Leading to Higher Risks in Muslims and Ethnic Minority Communities**

The MCB's previous research into Muslim communities in Britain and their characteristics has found a number of reasons which could contribute to the high mortality rates in Muslim communities of COVID-19. With evidence showing that the pandemic has exposed and exacerbated pre-existing, longstanding, systemic inequalities already affecting BAME and Muslim communities, it is likely that these factors make these communities more susceptible to contracting COVID-19, but much more research must be done to understand this better and to produce policy recommendations to tackle this.<sup>9</sup>

### **Socio-economic Deprivation and Poverty**

Data shows that COVID-19 has had a proportionally higher impact on those living in the most deprived areas of the UK, with 128.3 deaths per 100,000 population, 118% higher than the least deprived areas.<sup>10</sup> General mortality rates are normally higher in more deprived areas, but COVID-19 appears to be exacerbating this. With 46% of all British Muslims living in the 10 most deprived Local Authority Districts in England,<sup>11</sup> Muslims are put more at risk, particularly because evidence also shows both individual and neighbourhood deprivation increase the risk of poor general and mental health. It was found that living in a deprived neighbourhood might have the most negative effects on poorer individuals, impacting Muslims the most.<sup>12</sup>

### **Geographical Distribution**

Muslims in Britain are concentrated in urban areas and particularly in London and West

Midlands, the two regions worst hit by COVID-19. London reflected the highest mortality rate compared to any other region in England with 137.6 deaths per 100,000 persons, followed by the West Midlands showing 92.6 deaths per 100,000 persons. In England, there were 128.3 deaths per 100,000 population in the most deprived areas, which accounts for more than double the mortality rate of that in the least deprived areas.<sup>13</sup> In Wales, the mortality rates involving COVID-19 in the most deprived areas were nearly twice as high (109.5 deaths per 100,000 population) as in the least deprived areas.<sup>14</sup>

### **Housing Challenges**

With COVID-19 spreading rapidly between individuals at a close range, the housing conditions individuals live in can have a huge impact on the likelihood of them contracting COVID-19. Based on the 2011 census, 35% of Muslim households are overcrowded, lack at least one bedroom, have no central heating, or residents have to share a kitchen or bathroom, compared to 13% of the total population. Furthermore, 28% of Muslim households live in social housing compared to 17% of overall households,<sup>15</sup> which may not offer the most ideal, quality space and conditions for decent living. The 2011 census also revealed that Black Africans (43%) and Bangladeshis (42%) experience the highest housing disadvantage. Muslims within these ethnic groups also show higher levels of housing disadvantage compared to those from other religious groups.<sup>16</sup>

The intergenerational nature of Muslim and BAME households could also play a contributing factor in understanding the risk to communities. At the start of the pandemic, the advice given to those over the age of 70 was to self-isolate to reduce the risk of infection. There are 150,200 households with residents of school age (0-15), working age (16-64) and old age (65+), with the Bangladeshi ethnic group having the highest proportion of three-generation households.<sup>17</sup>

These housing conditions make it challenging and close to impossible for people to self-isolate and maintain social distancing if they have symptoms of COVID-19, thereby making members of these households more



susceptible to contracting the virus from their family members.

The MCB's Research and Documentation Committee organised online briefings for councillors in London boroughs with high Muslim populations (Newham, Tower Hamlets, Redbridge, Barking & Dagenham) between April and June 2020, following the publication of statistical analysis of each of these boroughs to better understand how different aspects of the lockdown could be impacting their communities. These briefings provided an opportunity for information sharing on dealing with COVID-19 and facilitating a question and answer session with a public health expert. Research in this space is crucially important in understanding the different ways in which British Muslims are at risk. Recommendations include that Public Health England and the UK Government collaborate with community organisations and seek to address long-standing issues like structural inequality, deprivation, unemployment, and health inequality that characterise the lives of BAME communities in the UK and which also aided a disproportionate loss of lives in BAME communities.

### **Occupational Overexposure to COVID-19**

According to a recent report by Amnesty International, the UK has recorded amongst the highest number of COVID-19 health worker deaths in the world.<sup>18</sup> Among the COVID-19 deaths in NHS, 63% comprised

of deaths from BAME communities,<sup>19</sup> a huge overrepresentation considering ethnic minorities make up only 21% of the total NHS staff.<sup>20</sup> In England, approximately 10% of NHS doctors, excluding GPs, are Muslim which suggests that Muslims are also overrepresented in the NHS frontline jobs.<sup>21</sup> It is noteworthy that the first four doctors who died of COVID-19 in the NHS were all also Muslim.<sup>22</sup>

The widespread problem of discrimination and bullying of BAME and Muslim healthcare staff has also been raised. Research conducted on ethnic minority NHS staff during the pandemic found staff feeling fearful in the most at-risk frontline roles, feeling they are being unfairly deployed, feeling unheard and at an increased risk of infection.<sup>23</sup> With anecdotal evidence showing BAME staff being deployed to the most at-risk wards while their White counterparts remained in the safer areas, it is unsurprising that half of all those surveyed felt discriminatory behaviour played a role in the high death toll.

Looking at other sectors of employment and occupational exposure, the Health Foundation found that only 31% of BAME workers in London were classified as 'non-key workers', implying that the majority work in various key sectors. Those in key sectors are also less likely to be working from home, and research shows ethnic minorities are more likely to use public transport to commute to their place of work, which further exposes people to the virus.<sup>24</sup>

Bangladeshi and Pakistani ethnicity group also showed the highest percentage of transport workers (17.8%),<sup>25</sup> and COVID-19 mortality rates among taxi drivers and bus drivers in particular is reported to be at 36.4 deaths per 100,000.<sup>26</sup> The sizeable representation of Bangladeshis and Pakistanis, who are overwhelmingly Muslim, in the transport industry inadvertently puts these ethnic groups at a higher risk of contracting COVID-19.

In addition to the overrepresentation of Muslims in the healthcare sector, ethnic minorities working in key worker sectors, the exposure during commuting and the impact of structural racism and discrimination faced could subject them to a greater risk of developing COVID-19.

## Economic Impact

### Loss of Jobs and Income Gap

As a result of the pandemic, BAME individuals are more likely than others to lose their income, fall behind on bills or have to apply for Universal Credit. According to the Institute of Social and Economic Research, BAME communities are more likely than their White counterparts to have lost their jobs instead of being placed on the furlough scheme.<sup>27</sup> Out of 4,000 workers who lost their jobs due to COVID-19, 21% of those are from ethnic minorities compared to only 7% who are White. The study further reveals that the high numbers of ethnic minorities having lost work can be accounted for by being self-employed and working in insecure employment sectors. According to the Runnymede Trust, 25% of BAME workers have zero-hour “gig economy” jobs as compared to 14% of the general population,<sup>28</sup> which puts them at a disadvantage as their income is not guaranteed, and they are not eligible to benefit from the UK Government’s emergency support packages.

Other ethnic minorities working in retail and hospitality sectors also suffer as these industries were subject to closures during lockdown. Nearly 1 in 3 Bangladeshi men work in restaurants compared to 1 in 100 White British men.<sup>29</sup> With these businesses closed and people out of work, this can heavily impact families’ primary sources of income, entrenching Muslims further into the financial insecurity.

## Financial Impact on Mosques and Muslim Charities

Many mosques rely on cash donations from attendees, particularly on Fridays, and *madrassa* fees to cover their costs, with this typically making up around 75% of total yearly income of many mosques according to one analysis.<sup>30</sup> With mosques physically closed for several months during lockdown and many having relatively undiversified incomes compared to other places of worship (i.e. income from investments, trust and foundation grants for projects, etc.), they have found themselves in a difficult financial situation, with many concerned that the potential long-term sustainability of mosques is at risk.

The month of Ramadan also usually sees mosques receiving significant donations from worshippers, many of whom attend on a daily basis throughout the month. Many Muslim charities also use the month of Ramadan to fundraise, with many mosques hosting fundraisers for different charities through the month. Analysis by Muslim View found that many mosques and charities depend on the funds raised during Ramadan for their full year’s income.<sup>32</sup> With in-person donations no longer possible in the mosque during Ramadan, many charities, as well as mosques, will have felt the knock-on effects of this, and experienced a significant fall in donations.

According to the Muslim Charities Forum, British Muslim annually give an estimated amount of £100 million to charities during Ramadan.<sup>33</sup> JustGiving, an online fundraising platform, found that during Ramadan in 2017, donations to Muslim charities rose by 487% compared to the previous month.<sup>34</sup> With in-person donations in mosques suspended for four months, charities have faced considerable pressure to reduce their overall costs including salaries of their staff. Furlough schemes have little impact on charities as furloughed staff are unable to generate income for the charity, jeopardising the ability of the charity to continue employing staff after the lockdown if funds are severely depleted.<sup>35</sup>

For mosques, though they were closed for many months, the work of the staff did not stop and in many cases, increased exponentially. Many mosques were still providing services, though doing this virtually which required technical equipment. Furthermore, considerable additional

pastoral care and funeral provision has been provided by mosques but without the steady flow of income to manage this. In addition, the extra workload makes it impractical to furlough staff, but many mosques would have not had the excess funds to continue to pay wages or hire additional staff for the extra work.

With mosques needing to diversify the way in which they fundraised in order to maintain a regular stream of income, the MCB partnered with LaunchGood, a Muslim crowdfunding platform, to set up the #SupportOurMosques initiative. The aim of this was to assist mosques in online fundraising not just by providing a platform, but also by giving mosque leaders free fundraising tips and training, and bespoke advice on how to increase their donations. Introduced in April 2020, the campaign has thus far helped over 130 participating mosques in the UK raise over £440,000. The *Jummah Grants* fund, launched on 6 June, served as a continuation of #SupportOurMosques and was

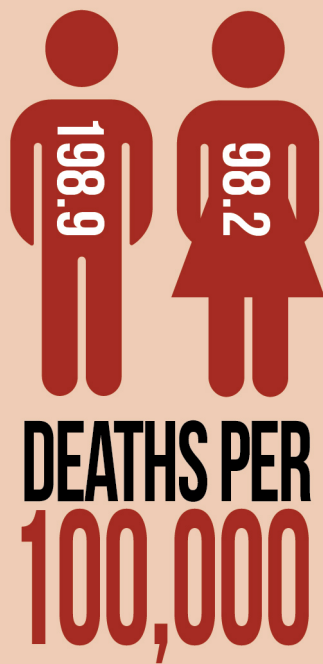
initiated by the MCB, LaunchGood, with the support of Penny Appeal, Mercy Mission UK and generous individual donors. This seeks to further incentivise weekly community online giving by holding weekly fundraising competitions every Friday for small mosques with an annual turnover of £250,000 or less.



## Trends in BAME and Muslim Deaths

MUSLIM MEN ARE  
**2.5X**  
MORE LIKELY TO DIE  
OF COVID-19 THAN  
CHRISTIAN MEN

MUSLIM WOMEN ARE  
**1.9X**  
MORE LIKELY TO DIE  
OF COVID-19 THAN  
CHRISTIAN WOMEN



Source: ONS provisional analysis

## Possible Factors Leading to Higher Risks in Muslims and Ethnic Minority Communities

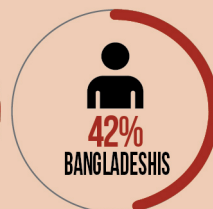
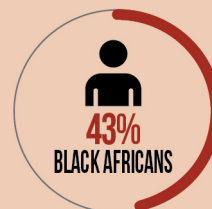
### HOUSING CHALLENGES

**35%**  
OF MUSLIM HOUSEHOLDS ARE OVERCROWDED, LACK AT LEAST ONE BEDROOM, HAVE NO CENTRAL HEATING, AND RESIDENTS HAVING TO SHARE A KITCHEN OR BATHROOM, AS COMPARED TO 13% OF THE TOTAL POPULATION



OF MUSLIM HOUSEHOLDS LIVE IN SOCIAL HOUSING COMPARED TO 17% OF OVERALL HOUSEHOLDS

Source: British Muslims in Numbers 2015



**EXPERIENCE THE HIGHEST HOUSING DISADVANTAGE**

Source: 2011 census

## Economic Impact

OUT OF 4,000 WORKERS WHO LOST THEIR JOBS DUE TO COVID-19, 21% OF THOSE ARE BAME INDIVIDUALS AS COMPARED TO ONLY 7% WHO ARE WHITE

Source: The Telegraph

**25%**  
OF BAME WORKERS HAVE ZERO-HOUR "GIG ECONOMY" JOBS AS COMPARED TO 14% OF THE GENERAL POPULATION

Source: Runnymede Trust

### OCCUPATIONAL EXPOSURE



**IN NHS 63% OF DEATHS ARE FROM BAME COMMUNITIES WHILE ETHNIC MINORITIES ONLY MAKE UP 21% OF NHS STAFF**

Source: GOV UK, ethnicity facts and figures



**IN ENGLAND, APPROXIMATELY 10% OF NHS DOCTORS EXCLUDING GPs, ARE MUSLIMS**

Source: NHS Digital

**BAME WORKERS ARE STAFF**

<b>54%</b>	IN FOOD PRODUCTION, PROCESS AND SALE
<b>48%</b>	IN THE HEALTH AND SOCIAL CARE SECTOR
<b>44%</b>	IN THE TRANSPORT SECTOR
<b>37%</b>	IN KEY INFRASTRUCTURE AND UTILITIES
<b>30%</b>	IN CHILDCARE AND TEACHING
<b>24%</b>	IN KEY PUBLIC SERVICES

Source: The Health Foundation, 7 May 2020



Photo courtesy of East London Mosque

## Funerals and Burial Services

The lockdown restrictions and risk of transmission of COVID-19 meant hospitals were unable to facilitate visitors, with those hospitalised due to COVID-19 unable to be visited by their loved ones, or chaplains and religious figures at all. This meant a number of people who died of COVID-19 in hospital died alone, with loved ones unable to say their final goodbyes. Ismail Mohamed Abdulwahab, a 13-year-old boy from London, died on 30 March alone in hospital, with his family all self-isolating and also unable to attend his funeral. In what appears to have been a direct result of this case, the UK Government announced that close family members would be able to see their dying relatives to say goodbye so that other individuals were not forced to go through the same difficulties.<sup>37</sup>

## Proposal to Amend Burial Legislation

At the very start of the pandemic, there was an understanding across communities that more needed to be done to ensure local authorities, funeral providers and cemeteries had the capacity to meet the potential surge in demand for services. Muslim funerals, according to Islamic law, are to be carried out as soon as possible, with funeral rites performed including the *ghusl* (washing) and *kafan* (shrouding) of bodies. Muslims are also to be buried in all circumstances, with cremation not being permitted.

In March, the UK Government introduced emergency legislation to deal with COVID-19, which introduced a range of measures and powers including a proposal to amend burial procedures. This clause initially allowed local authorities, in the event the number of deaths increase dramatically, the power to disregard legal safeguards that currently prevent the cremation of individuals against their wishes. This, if it had come into effect, would have meant that Muslims who had died of COVID-19 could have been subject to cremation and not burial, despite cremation not being practised in Islam.

## Mohamad Gheewala Leicester

The lockdown made us realise the many freedoms and gifts we have taken for granted. My uncle and aunt became ill at the start of the lockdown. Normally we would have visited them daily, eaten with them and given them comfort to make them feel better. However, with the restrictions in place, we couldn't. After they were admitted into hospital, we couldn't visit them or comfort them, and we were left feeling alone and in the dark as to what was happening to them and their conditions. The hospital was kind enough to allow us to drop off food and other items at the reception. Alas, the last we saw of them was when the ambulances came to collect them from their home.

When they passed away at the hospital, nobody was at their side, whereas relatives would have been able to pray for them till the end under normal circumstances. The hospital kindly allowed a Muslim Chaplain to be there for them in the last moments. Under normal circumstances, the entire family would gather in one house to pray, comfort and support one another other to help come to terms with the news of the deceased. We couldn't grieve in these ways, so our communications and points of contact shifted to text messaging and phone calls. Hearing the voices of our relatives offered some respite, but in no way could it compare to a hug and embrace.

There were limitations placed on how many burials can be performed in a day, the number of people who can attend and the preparations for ghusl. The Muslim Burial Council of Leicester (MBCOL) is usually very quick in arranging burial services, however due to restrictions, the process was slowed down. Nonetheless, they worked as fast as they could and regularly contacted us with updates. Further delays were caused by the short staffing of the local authority, delays in paperwork and their limited services due to lockdown. While the *janazah* (funeral rites) process usually take place within one or two days, the *janazah* for my uncle and aunt took four days. We were also assisted by a local volunteer group from the community who usually helps in arranging and carrying out burials. Despite the new procedures to follow, the volunteer group was fantastic in providing us the relevant PPE and guiding us on the new procedures.

At the cemetery where we would usually witness hundreds of visitors, we only had a few relatives present. Whilst tears were shed as we come to terms with the loss, we weren't allowed to hug and comfort each other. Although the burial has taken place, we still haven't been able to reach full closure with our loss due to the lack of being able to visit and offering support for one another.

The National CRG worked with the Pro Bono Lawyers Groups in establishing contact with local authorities on the importance of burials for Muslims and in ensuring that they did not exercise their powers to cremate bodies. A bid to change this was also led by Naz Shah MP, supported by a range of parliamentarians and religious leaders, particularly from Muslim and Jewish communities. As a result of this pressure and the constructive work of parliamentarians and faith communities, the UK Government supported this, recognising the importance of faith communities being able to bury their deceased instead of cremating. The UK Government's support and understanding has been helpful in allowing faith communities observe their burial rites accordingly.

### **Adaptations in Burial Rites and Procedures**

Given the disproportionate number of Muslim deaths due to COVID-19, Muslim burial and funeral services and operations saw a sizable increase in the demand for their services. With the easy transmission of COVID-19, new measures were introduced for handling COVID-19 funerals, which included the need for funeral rites to be performed in properly ventilated facilities and Personal Protective Equipment (PPE) to be worn by all those preparing the funeral. It was also advised that those who were considered at

high risk of contracting COVID-19 due to their age and underlying health conditions should not take any part in the funeral process.

Research was done by the National Burial Council and BIMA into the way in which Islamic funeral rites could be carried out without risking spreading the virus, working closely with the Burial CRG and Public Health England. Extensive guidance for mosques and funeral providers handling COVID-19 funerals was produced to support them in carrying out the Islamic funeral rites in the safest way possible.

Many funeral providers are run by volunteers in communities who tend to be older. The pandemic saw many of these individuals needing to shield due to their age or health conditions, which meant a new generation of volunteers had to be recruited and trained to carry out the funeral rites. In some cases, Imams and volunteers who had provided funeral services for years took to using Zoom to teach younger members of the community how to perform the traditional burial rituals.

Imam Mohammed Patel, from Leicester, led one of these teaching sessions and shared that the younger members of the community stepped up to take over this role in order to protect the elderly and also reduce the burden on the NHS.



*Photo courtesy of East London Mosque*



Photo courtesy of Green Lane Masjid, Birmingham

These training sessions not only covered how to carry out the burial rites according to Islamic law, but also included sessions with medical professionals explaining the importance of using protective equipment and how best to clean and disinfect facilities to minimise the risk of transmission.<sup>38</sup>

Culturally, Muslim funerals are held in mosques and are open affairs, attended by big crowds. *Salaat al-janazah*, the funeral prayer, is usually prayed in the mosque in congregation, with many joining the prayer even if they did not know the deceased. Due to the lockdown and social distancing measures in place, mosques were closed and therefore unable to hold funerals, and it was no longer permissible for funerals to be attended by many people. Instead, *salaat al-janazah* was prayed in the cemetery, with funerals only attended by the Imam and a few other individuals wearing PPE and keeping a 2-metre distance from each other. This often meant Imams were performing multiple funerals a week, and in some cases a day, on top of performing their other duties and providing

pastoral support to their communities. With some Imams over a certain age and therefore considered high risk and unable to take part in the funeral, younger Imams and those not at risk were called upon to fulfil these duties where their colleagues could not.

In addition to the extremely limited numbers of those able to attend funerals, those who were self-isolating were also unable to attend. Therefore in some cases, individuals had to bury their family members while some loved ones were not able to be present. Due to this, many mosques and funeral providers took to harnessing the power of technology, livestreaming funerals or providing a video link via a conferencing facility so that family members and friends self-isolating or unable to attend were still able to take part in the funeral of their loved ones. With Muslim funerals during the peak of COVID-19 showing stark contrast to funerals held during normal times, this helped those feeling the absence of their community during distressing times feel supported.

## Spikes in Demand of Funeral Services

The additional requirements to safely carry out funerals also meant that a number of mosques which provided funeral services no longer had the appropriate facilities to do this, placing additional demand on the funeral services that were able to operate. Due to the need for Muslim burials to be carried out as soon as possible, there was a struggle for funeral providers to keep up with the huge levels of demand at the beginning of the outbreak of the pandemic.

The Eternal Gardens cemetery, established in 2013 to cater for Muslim communities in London, had to quickly adapt its practices in order to accommodate the huge spike in demand for its services. Richard Gomersall, Chief Executive at GreenAcre cemeteries, shared that Eternal Gardens cemetery was used to performing five burials per week, but during the peak of COVID-19, the number had increased to 30 burials per week. Following a consultation with Imams and scholars, a system of having *saff* (rows) burials was implemented. This method saw the deceased laid to rest in rows separated by wooden screens and soil to create individual chambers for each body inside the grave. <sup>39</sup> This

was to ensure the deceased were given a burial as per Islamic law, but also that they were able to conduct funerals as soon as possible and not have to delay them while waiting for new graves to be dug. Asif Hassanali, Development Manager at Eternal Gardens, explained that this *saff* burial method was approved after having been consulted by local Muslim scholars on the best way to deal with the increased demand for burials. <sup>40</sup>

## Mental Health Impact

COVID-19 is having a “profound and pervasive impact” on global mental health, <sup>41</sup> with the lack of social contact, disruption of routine, the economic downturn and general uncertainty posing a problem for all communities. The feelings of anxiety about the general uncertainty the pandemic has posed – about how long it will last for, how a recession could impact people’s jobs and their overall sense of financial security, coupled with many individuals grieving over loved ones – create a situation in which many people require mental health support.





Mental health within Muslim communities is still often not discussed openly, particularly with older individuals who may be even more at risk of struggling with their mental health as a result of the fear of being at risk of contracting COVID-19, the isolation that has come with needing to remain at home and not being able to partake in social activities or attend the mosque. In order to address the needs within Muslim communities, the weekly community briefings hosted by the MCB often had a focus on mental health and included a range of mental health professionals addressing a range of issues, including anxiety, depression and dealing with feelings of isolation.

Another consequence of the pandemic we have seen is a surge in the number of cases and an increased risk of domestic abuse. In the UK, there was one domestic abuse call to the police every thirty seconds in the first seven weeks of lockdown.<sup>42</sup> The national domestic abuse helpline run by the charity, Refuge, received 49% more calls in the week prior to 15 April than the average week before the pandemic.<sup>43</sup> There have already been concerns of domestic abuses cases prior to the pandemic, but the lockdown

restrictions elevated these concerns even more. There were concerns around victims struggling to access services and not being able to reach out for help because of being in lockdown at home with their abusers.

With resources in the NHS and among specialist charities stretched, it has been more important than ever to ensure guidance, advice and support for mental health is disseminated and is accessible as widely as possible. Muslim mental health organisations in the UK came together through the Mental Health CRG to provide a range of services together to support Muslim communities. This symposium included Inspired Minds, Muslim Counsellors and Psychotherapists Network (MCAPN), Muslim Youth Helpline (MYH), Sakoon, British Islamic Medical Association, Muslim Women's Network UK (MWNUK), MindworksUK and Approachable Parenting. With each organisation specialising in a different aspect of mental health, they were able to direct those in need to the organisation best placed to support them, seeking to ensure everyone who needed help was able to access this.

## Maaria Mahmood

Director of Muslim Youth Helpline

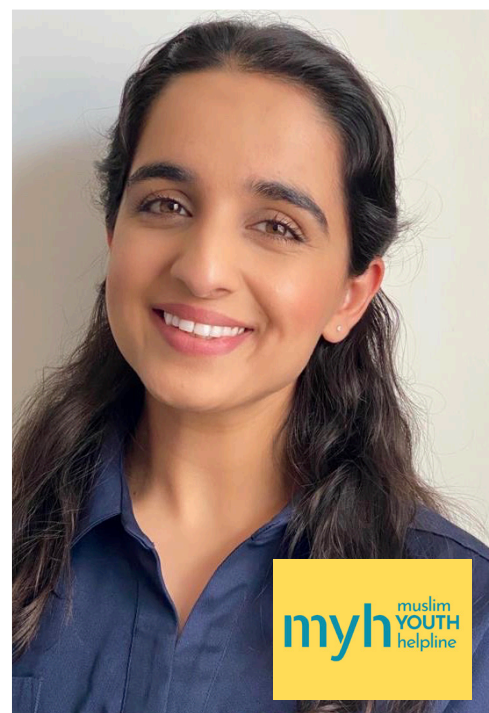
Muslim Youth Helpline (MYH) is a 19-year-old charity and a listening helpline that provides free and confidential faith and culturally sensitive support services targeted at vulnerable young people in Britain. In March, the spread of COVID-19 had physical health implications for the entire population. However, another real long-term impact of the coronavirus and lockdown has been brewing behind many closed doors and that is, our mental health and well-being.

COVID-related deaths were felt the hardest in our communities, with higher infection and mortality rates. We were witnessing friends and neighbours suffering, but could not support our community in the way we knew how to and were left to grieve from a distance. Furthermore, periods of isolation, feelings of uncertainty, and misinformation in the media can cause anxiety, stress and an increase in depressive symptoms in people. People's usual coping mechanisms to grief, isolation and anxiety can be attending the masjid, seeing family members and going for walks, but these could no longer be adopted and were restricted particularly during lockdown.

Mental health charities warned of a 'tsunami' of new patients in the months since the outbreak, and this was challenging on top of our existing clients who have experienced a decline in mental well-being due to lack of access to services during the lockdown. Since lockdown, MYH has seen a 313% increase in calls and enquiries. Since then, our primary concerns on the helpline have been on faith and spirituality, family issues, suicidal thoughts, depression and anxiety due to long period of staying at home and fear of losing jobs and opportunities, among others. On one particular night, half our calls were centered around suicidal feelings. To give an idea of the differences between prior and during COVID-19 phases, MYH received 26 enquiries related to suicide/suicidal thoughts between January-March, and a much higher number of 87 enquiries in April – August.

At MYH, we quickly adapted to working from home to cater and answer calls for support. Our helpline officers have gone above and beyond to make sure the helpline ran during the lockdown, by opening their homes and taking calls from their living rooms and bedrooms. At the beginning of lockdown, MYH was engaging with media channels – the likes of the BBC and the BBC Asian Network – to develop spaces to speak about mental health struggles and break barriers within the BAME and Muslim communities.

We continue to answer enquiries from young people who are feeling the lockdown's weight and are experiencing depression and mood disorder for the first time. As a community, we are still grieving and reeling from the effects of the pandemic and we still have a long way to go to address them. Collaborative work is pivotal and at MYH, we are ready to continue to support the community through our helpline.





## The Muslim Women's Network UK

The Muslim Women's Network UK (MWNUK) was set up in 2003 and works to improve social justice and equality for Muslim women and girls, through research, advocacy, and training. One key project is the MWN Helpline which was established in 2015, a national helpline which provides a specialist faith and culturally sensitive service that is confidential and non-judgmental. Our fully trained staff offer information, support, guidance and refer to other support available.

Since 2015, the MWN Helpline has supported over 5000 individuals, on over 45 different issues, including domestic abuse, mental health, divorce, homelessness and housing matters, and issues of discrimination.

When the COVID-19 lockdown measures began in March 2020, we initially saw a lower rate of calls on domestic abuse, and we were particularly concerned about those experiencing domestic abuse who may not be able to access support due to the lockdown measures. For example, women living with extended families may now have no safe space or time to call as they may be in more regular contact with their abusers. In response, MWNUK produced 5 short safety message videos in English, Arabic, Urdu, Sylheti Bengali and Gujarati and circulated them primarily through WhatsApp. The impact was more victims of abuse contacted the MWN Helpline.

Between 23 March 2020 to 31 July 2020, the MWN Helpline supported 475 new enquiries of which 180 cases involved domestic abuse, 233 cases involved mental health issues and 65 cases were related to COVID-19. Amongst these cases, issues like loneliness, being furloughed, or having family members at home during lockdown have proved to be challenging for many. During this period, MWNUK also provided 156 free faith and culturally sensitive counselling support sessions. The MWNUK Hardship Fund supported many in need across the UK with monetary support for food, clothing, transport to safety, and hygiene packs among others. The MWN Helpline also supported on a range of other issues, and received an increase in enquiries and referrals from other frontline services, including GPs, mental health services, the police and others.

# Negative Portrayal of Muslims by Politicians and in the Media

From the outbreak of the pandemic, throughout the lockdown period and the easing of lockdown restrictions across the UK, there has been a disappointing trend towards attributing blame for the spreading of the virus to minorities, particularly those of Asian appearance and Muslims, both explicitly and implicitly. This not only further perpetuates the negative portrayal of Muslims in the media more generally, but feeds into the far-right trend of blaming Muslims explicitly for the spread of the pandemic, which fuels hate crime, prejudice and discrimination and exacerbates community tensions.

An important example is when Craig Whittaker, MP for the Calder Valley, claimed that the “vast majority” of people breaking lockdown rules were from BAME communities and that BAME and Muslim communities did not take the pandemic seriously.<sup>4445</sup> The Yorkshire Post called this out as “ill-informed prejudice”, with its editor calling it out as a “blatantly racist, frankly idiotic view”.

<sup>46</sup> Whilst the Prime Minister could have chosen to talk about our joint responsibility as a nation, and disown these comments after being questioned by Yorkshire Post’s Rob Parsons at a press conference, he “opted not to”, in what appeared to be a “tacit endorsement” of Whittaker’s prejudice.<sup>47</sup> The message sent across to Muslim communities across the country should not be underestimated.

When it comes to the media, the Centre for Media Monitoring (CfMM), a project of the MCB’s, has been working to identify and analyse problematic instances, and raise them with journalists and publishers to improve the quality of reporting. While there were a few instances of clearly inappropriate editorial choices being made, these were small in number compared to the thousands of articles published on the subject. The two main issues with the media reporting has been the imagery used and apportioning blame to Muslims.

There have been numerous instances whereby images of visible Muslims have been used in the coverage of the pandemic, many of which were seemingly irrelevant to the context of the reporting.



## Lockdown tightened in parts of northern England with ban on indoor meetings

Bar on households meeting inside in Greater Manchester, West Yorkshire and East Lancashire

*Press Association*  
21:39 Thu 30 July 2020



Shoppers in Oldham, which has the highest Covid infection rate in the country

MARTIN RICKETT/PA:PRESS ASSOCIATION

CORONAVIRUS

## Partygoers put Oldham at risk of further curbs

Charlotte Wace, Northern Correspondent  
Wednesday August 12 2020, 5.00pm, The Times

Reports of coronavirus rule breaches in Greater Manchester have risen by 25 per cent in a weekend at a time when it is feared that high rates in Oldham could lead to the entire area facing tighter



Although these incidences were few in terms of overall coverage, they can create a link in the readers' minds between Muslims and the spread of the virus. While some may claim that these photos are showing diversity, that does not address the issue of relevance, for example, images of Indonesian women in hijab accompanying a story about cases in London. Other photos depicted visible Muslims appearing to ignore safety advice, which would imply they are ignorant of, or disobeying the rules, and therefore complicit in spreading the virus. This is particularly important given the broader narrative being shared by senior politicians.

There were also a number of instances where Muslims were blamed for the spread, despite this being unsubstantiated or based on inflated statistics. On 12 April, The Times, Metro and Birmingham Mail ran articles with headlines claiming there would be a spike in cases during Ramadan.<sup>48 49</sup> These headlines implied that Muslim communities would be gathering in Ramadan despite lockdown regulations, and that medical experts were warning of an inevitable spike as a result, though there was no evidence to support this.

After CfMM's intervention, The Times amended their headline to read: "Expert fears a spike in UK coronavirus cases if communities gather for Ramadan," while the Metro changed theirs to, "Fears of spike in Coronavirus during Ramadan." The Birmingham Mail removed the article entirely. This reporting dangerously blames Muslims for something there is no evidence they

are responsible for, and while headlines online can and often are changed, this does not fix the damage the initial headline does to community tensions.

On 26 June, The Telegraph ran an article headlined, "Exclusive: Half of UK's imported Covid-19 infections are from Pakistan."<sup>50</sup> The Sun and the Mail Online picked up the article the following day, with equally problematic headlines. The Sun ran, "Half of UK imported coronavirus cases 'originate from Pakistan' amid calls for tougher checks on 'high risk countries'," while the Mail Online headlined: "Pakistan was origin of HALF of Britain's imported coronavirus cases..."<sup>52</sup>

These headlines implied that people from Pakistan were a major cause of infection, and with the majority of Pakistanis being Muslim, it further embeds the idea that Muslims are responsible for spreading the virus. Upon further investigation by CfMM, it was found that this was based on statistics that were not publicly available at the time, and that in actual fact the total number of cases was only 30, and the time period this was based on was from 4 to 26 June. At that time there had been over 310,000 confirmed cases in the UK, with the 30 imported from Pakistan only accounting for 0.01% of all cases, a tiny number<sup>53</sup>.

This headline, even with the correction, is a clear example of sensationalist apportioning of blame where none exists.<sup>54</sup> For more details on these cases and others, visit [cfmm.org.uk](http://cfmm.org.uk).

# Chapter 3:

## Meeting the Spiritual and Religious Needs of Muslims

The role of the mosque and the community is of huge importance both spiritually and socially in Islam, which can be seen in the crowds at daily and Friday congregational prayers, attendance for religious sermons and at *madrasa* (supplementary schools), breaking of fast (*iftar*) and communal prayers in the nights of Ramadan, and general community activities and social gatherings. Thus, mosque attendance forms the core aspect of many Muslims' weekly and even daily routines, particularly during the holy months of Ramadan, *Muharram* and *Dhul Hijjah* where mosques tend to see huge crowds. Given the centrality of attending the mosque in the lives of many Muslims, the unprecedented suspension of congregational activities for a period of many months had huge implications for individuals not just in terms of disrupting their routine, but also in terms of emotional support and spiritual upliftment that places of worship provide.

### Congregational Activities in Mosques

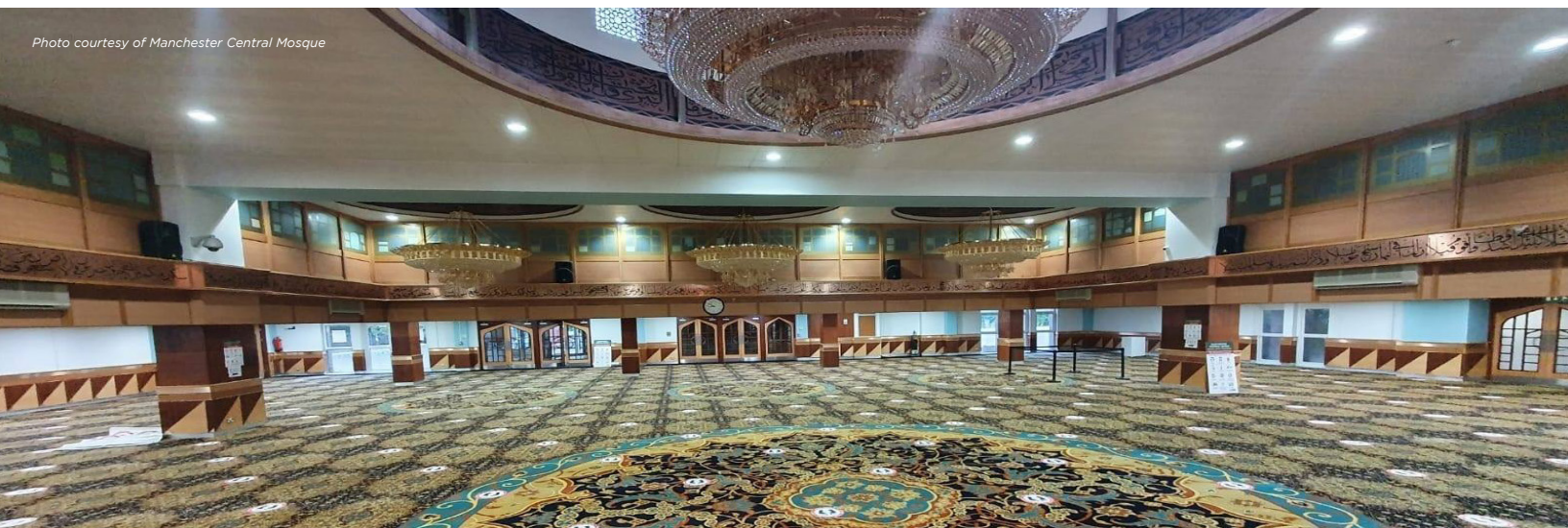
On 12 March, the MCB wrote to all its affiliate organisations urging them to plan for the likely suspension of congregational activity from the following week, as the true scale of the impact of COVID-19 becomes apparent. The letter was also accompanied by a poster produced in collaboration with the British Islamic Medical Association (BIMA) with key public health messages.

On 16 March, the MCB made the unprecedented call for the suspension of all congregational activities in Muslim communities across the UK, recognising the immense risk of COVID-19.

This call was made taking into account the strong calls from UK's Chief Scientific Advisers for extraordinary social distancing measures, overwhelming medical advice from the British Islamic Medical Association (BIMA) and the strongly stated opinions of a wide range of Muslim scholars and jurists on the imperative of the preservation of human life.

In Islam, *jumu'ah salaah* (Friday prayers) is obligatory to be prayed in congregation for much of the community, and the closure of mosques would therefore prevent Muslims from performing what Allah has decreed of them. The MCB liaised with scholars and jurists across schools of thought and communities, alongside the British Board of Scholars and Imams (BBSI) and other Muslim-led organisations in the UK to come to the jurisprudential position that in order

Photo courtesy of Manchester Central Mosque



to ensure the preservation of life and prevent the further transmission of the virus, the obligation to perform *jumu'ah salaah* in congregation can be temporarily lifted. This position has not been

taken before in the UK, but was hugely important in trying to limit the spread of COVID-19 within Muslim communities at the very start of the pandemic.



## Naomi Green

Admin and Community Relations Officer  
in Belfast Islamic Centre, Northern Ireland

Unlike larger communities in England, many Muslims in Northern Ireland are geographically and socially isolated from other Muslims. The community has grown rapidly in recent years but still remains relatively small and close-knit. Therefore, mosques play a central role to the Muslim community here by offering community spaces as well as places of worship to gather everyone. Belfast Islamic Centre hosts English classes, mums and tots and coffee mornings, alongside religious services and children's Islamic classes. When lockdown was first implemented, there was a real sense of further isolation felt by many Muslims and their families. This isolation was exacerbated by the deaths of well-loved and well-known members of the community whose families had to mourn alone. There are no Muslim funeral directors

in Northern Ireland so we had to work closely with a local funeral home to provide *ghusl* (washing) of the body with some additional precautions. *Janazah* (funeral rites) could only be held at the graveside with only a handful of mourners and we had to adapt by streaming the funeral services online.

For decades, Belfast Islamic Centre provided daily *iftar* meals during Ramadan for over 200 people. Lockdown during Ramadan not only prevented us from having our usual taraweeh prayers but also our daily iftars at the mosque. This year, we used our donations to buy and deliver food parcels to those most in need from the community and made use of social media platforms to broadcast reminders and *adhaan*. Having said that, we still felt the loss of the community spirit. This was particularly difficult for students, Muslim converts and singles who had no family to break their fast with.

There are no purpose-built mosques in Northern Ireland. Although places of worship could re-open relatively early, we still had difficulty opening our mosques. The two largest mosques in Northern Ireland are in converted houses in Belfast which offer limited social distancing. Due to this, they haven't been able to open for social activities or allow large numbers to attend prayers. Furthermore, the increased presence of the far right in Northern Ireland and financial uncertainty remain real concerns for the community. Although we don't know when we will be able to have our usual numbers and activities, the re-opening for prayers has certainly given the community a small boost.

This was followed by an open letter to Muslim communities from more than 200 Muslim physicians, coordinated by BIMA on 16 March, highlighting the clinical urgency and danger in continuing congregational activities in Muslim institutions. The UK Government subsequently called for the closure of places of worship and imposed lockdown restrictions across the UK on 23 March.

A statement by the Inter Faith Network (IFN) Co-Chairs and Faith Communities Forum Moderators was also published on 31 March, recognising the efforts of faith communities in responding to the needy and providing assurance and hope in dealing with the pandemic.<sup>53</sup>

With mosque attendance and congregational prayer playing an essential part of the daily lives of many Muslims, the sincere hurt and distress the closure of mosques had on communities should not be underestimated. For most Muslims, there has never been a time when mosques have had to close, and there has certainly never been a time when the holiest month of the Islamic year, Ramadan as well as the festival of Eid, had to be celebrated within the confines of our own homes.



Photo courtesy of Masjid Al Farouq, Walsall

## Bringing Mosque Activities Online

During the nationwide lockdown, technology has proven to be vital in ensuring that mosques are still able to reach their communities and to help individuals overcome their sense of isolation and disconnection. Many mosques and Imams harnessed the power of social media, taking their services online and offering a livestream of daily Qur'an recitation sessions and sermons for worshippers to still feel connected. Many Imams also recognised the importance of providing pastoral care for their communities and took to communicating with their members virtually. Livestreamed sermons and talks were used to stress the Islamic duty to preserve life, which in this case required adhering fully to the social distancing measures in place, and public health messaging was translated and appropriately relayed to their communities.

While most mosques used YouTube and Facebook to livestream services, others turned to more traditional means. Radio station initiative such as Revive FM, Unity FM, Heritage Radio, Radio Ramadan and many others were also broadcasted throughout the month of Ramadan, airing Qur'an recitations, sermons and talks by different Muslim organisations, seeking to reach to members of the community who may not use the internet.



Photo courtesy of Lancashire Council of Mosques during Virtual Visit My Mosque weekend



## Muhammad Hamzah Rumi

Imam of a mosque in Edinburgh

Six months following the unfortunate outbreak of COVID-19 pandemic, our lives have changed both globally and locally. As an Imam and a teacher, I have witnessed its effects – both positive and negative – on the Muslim community in Edinburgh. The management and teachers at our masjid responded actively to the sudden lockdown by transitioning the masjid's religious activities online, making use of various social media platforms to deliver daily reminders for the Muslim community during the month of Ramadan, and providing online Qur'an, Islamic studies, and Arabic language classes to children and adults.

There have been numerous advantages of using online platforms to deliver religious activities. Parents have the opportunity to supervise and observe their children's learning,

which has resulted in the parents taking a keener interest in the child's religious learning and growth. Due to lockdown and being kept at home, parents also have the opportunities to further their own religious knowledge and revisit their past knowledge. It has been a challenge to accommodate the Muslim community's needs through the online platform, however it has been satisfying knowing that the religious requirements and needs are still being provided.

Unfortunately, one negative aspect of lockdown restrictions is the elderly community's lack of connection to the *masjid*. The elderly formed the main social group of the masjid prior to lockdown as they often visited the *masjid* on a daily basis. As their Imam, I have witnessed their contributions to the *masjid* and it is unfortunate that the *masjid* was deprived of their presence. I hope that things can return to normality so that they can reconnect to the *masjid*, like before.

One of the greatest strengths I have witnessed has been the unity of various charities and masajid coming together to assist the community regardless of their religion or background. This has presented a very positive image of Islam in the wider community. We pray that Allah removes this trial from us and gives us the ability and understanding to fulfil our religious and moral obligations under these different circumstances. Ameen.

Ramadan for many Muslims is spent at the mosque, gaining spiritual upliftment through listening to sermons and *du'as* (supplications) and performing the *Taraweeh* prayers (recommended prayers performed during Ramadan nights by some Muslims) in congregation, and engaging socially by having *iftar* (the meal to break one's fast) with friends, family and fellow community members. This year, with Ramadan in lockdown, the MCB produced a #RamadanAtHome guide for British Muslims to make the most out of Ramadan from home and away from the mosque, which has also been used by employers and other organisations to understand how best to accommodate their Muslim staff and volunteers during this time. This guide encouraged hosting and attending virtual *iftars* to keep the spirit of Ramadan alive, and praying the *Taraweeh* prayers in congregation within households.

The 'Taraweeh At Home' campaign, headed by the National Huffadh Association UK, encouraged Muslims to perform their *Taraweeh* prayers at home with their families and produced a toolkit which offers guidance on how to perform *Taraweeh*, Qur'an memorisation tips, interactive Qur'an games and books on prayers.<sup>54</sup>

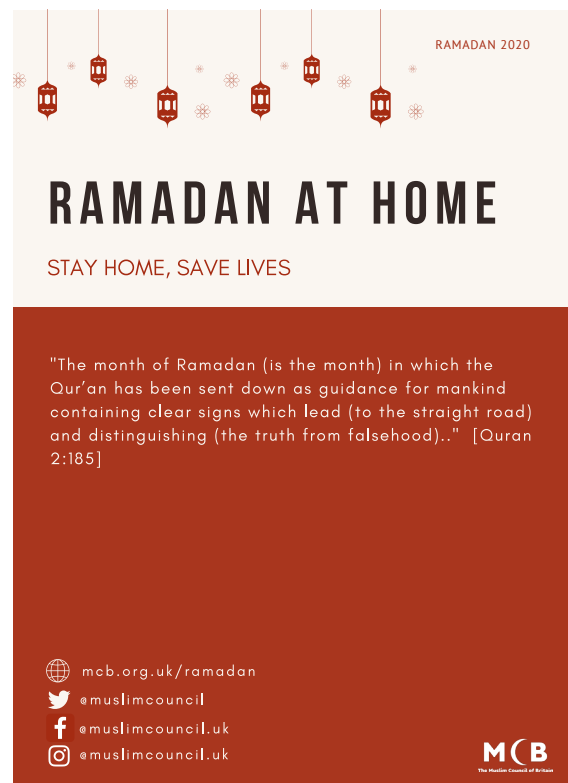
Open Iftar, the flagship initiative of Ramadan Tent Project which usually hosts thousands of people breaking their fasts together in a public space, instead held virtual programmes every

night, encouraging and fostering the sense of community that is the very essence of the month. Their #MyOpenIftar packs were also created, which consisted of toolkits, decorations, activities, recipes and games to help people self-isolating recreate the cultural Ramadan experience in their homes.

With many mosques usually providing *iftar* for their congregations every night of Ramadan, many took to upholding the spirit of this by delivering food to the homes of their members, or donating hot meals to staff at their local hospitals.

In addition, a number of mosques also worked with their local councils to gain permission to broadcast the *adhaan* (call to prayer) publicly during the month to help Muslims stay connected to their mosques despite the lockdown. In east London, Waltham Forest Council worked with the Waltham Forest Council of Mosques to give permission to eight mosques in the borough to take part, with the *adhaan* followed by a one-line message in Arabic encouraging people to pray in their homes. This was initiated by Al-Manaar Muslim Cultural Heritage Centre, which received permission to do so on a trial basis from the Royal Borough of Kensington and Chelsea.<sup>56</sup> The BBC also began to broadcast weekly Islamic sermons on 14 local radio stations every Friday at 5:50am to help Muslims feel a sense of community while everyone was isolating. Each week, a different

# OPEN IFTAR 2020



Front cover of Ramadan At Home guide by the MCB

Imam led the broadcast with recitation of the Qur'an, and a short sermon based on a saying from the Prophet Muhammad (peace be upon him), and its relevance in the world today.<sup>57</sup>

The festival of *Eid-ul Fitr* was also celebrated from home in lockdown, with congregational Eid prayers also prayed within households at home while mosques remained closed. This was also difficult and deeply saddening for many Muslims, with Eid usually a time spent in celebration with friends and loved ones.

The emotional and spiritual toll of closing mosques is not one that can be underestimated. With many older and vulnerable people still needing to shield and stay away from crowds, it may be a long time before they are able to go back to their mosques safely. Though many mosques re-opened when restrictions were easing, services no longer look the same, but for many, just being able to go back to the mosque provides a degree of serenity and peace during times of uncertainty.



## Zakaria Mohamed

Student in his 20s, Cardiff

Since I was young, going to the mosque has been my normal daily routine. The mosque is not a place for me to just perform prayers, but also a community place where I'd sit with friends and family to socialise and bond with. My local mosque is the South Wales Islamic Centre which is attended largely by the Yemeni community, while also welcoming people of all nationalities and backgrounds.

The lockdown due to COVID-19 changed many things this year. Our mosque has never had to close like this. This meant that we weren't able to attend our five daily congregational prayers and Friday sermon and prayers. Not only that, we also felt a big difference in the fasting month of Ramadan where the mosque is usually filled with members of the community praying, eating together and reciting the Qur'an.

This year, we all spent Ramadan at home which was very different for me and the elders in the community. The community spirit was not there. Even though the lectures and lessons were delivered online via Zoom, it was still very different and the atmosphere of the mosque was truly missed. Just attending the mosque, sitting down and listening to stories of the Prophet Muhammad (peace be upon him) usually has a positive impact on my spirituality, but during lockdown, I struggled to feel connected in the same way.

I miss listening to the call to prayer and leading some prayers. During the lockdown, I was tasked with going to the mosque to perform the call to prayer which would allow people to hear from home through radio antenna devices. As there was no one to pray with, I would do the call to prayer and leave the mosque immediately after. The feeling of doing the call to prayer while the mosque was empty was a very saddening feeling and sight. The spirituality we feel in the mosque disappeared for five months, but it is slowly returning now as the mosques are re-opening. I look forward to when things return to normal.

# Safe Re-opening of Mosques

As the UK Government started to lift certain lockdown restrictions, significant work needed to be done within Muslim communities to ensure that places of worship are able to re-open safely and that they have put in place necessary measures in order to mitigate the risk of further spreading the virus.

Between May and July, the MCB launched a consultation and listening exercise to engage with over 300 Muslim institutions on safe re-opening of mosques, including the Council of Mosques, regional Muslim associations and large London mosques. Through five regional and national webinars in early June, mosque leaders were also given a space to share their views and initial plans for re-opening and discuss what were the expectations from community members at the grassroots. Medical and legal advisors were also present at these webinars to address specialist questions.

From these consultations, a 9-step guide on safely re-opening mosques was issued on 10 June, a few weeks in advance of the official UK Government guidance and before places of worship were allowed to re-open in England, to provide sufficient time for mosque and community leaders to make the necessary arrangements. The Muslim Council of Wales and Muslim Council of Scotland were also heavily involved in the production of this guidance in order to ensure applicability to Welsh and Scottish mosques, due to the slight differences in Welsh and Scottish Government guidance. Later, the Federation of Student Islamic Societies (FOSIS) also developed bespoke guidance for the safe re-opening of university prayer rooms.

Measures in the guide included requiring all attendees to wear face coverings and to bring their own prayer mats, suspending use of communal objects like Qur'ans and books, and marking out 2-metre gaps in the prayer hall. A range of Muslim civil society organisations stepped up to offer support and advice to mosques as they performed venue risk assessments and planned for re-opening,

including a range of training providers, national associations of mosques, regional associations such as Councils of Mosques, and advice and courses on COVID-19 compliance were also provided by the Mosques and Imams National Advisory Board (MINAB). Some of the recommended measures were in addition to what was required by the UK Government to make places of worship 'COVID-secure', but these were important to make mosques as safe as possible.

Throughout the pandemic, the MCB kept in regular contact with leaders from Britain's other faith communities to share best practice around the guidance material being issued on the safe re-opening places of worship. Internationally, best practice was also exchanged with national Muslim medical and representative bodies abroad in countries where lockdown rules were also being relaxed, including Canada, USA, Germany, Norway, Malaysia, South Africa and others, with the MCB's guidance being adapted for use by national Muslim organisations in several other nations.

*In the Name of Allah, the Most Beneficent, the Most Merciful*

## 9 STEPS TO RE-OPENING MOSQUES SAFELY

The UK Government has indicated the earliest that mosques may be able to re-open for congregational worship in England is 4th July, with timelines for Wales and Scotland to be confirmed.

This guide is designed to help mosque leaders carefully plan and decide when and how to re-open whilst maintaining the safety and wellbeing of their communities.

**Step 1: Plan When & How**

Prior to re-opening, it's important to appoint a COVID safety officer, do a full risk assessment and get legal, medical and scholarly advice about when and how to re-open safely. **Do not rush: if you need more time to prepare, that's fine!**

**Step 2: Plan the Space**

Calculate your new capacity, consider outdoor space, close unnecessary facilities (wudhu, toilets), establish one-way entrances and exits if possible, and set up a cleaning plan.

**Step 3: Plan the Equipment**

Get new signage, a contactless payment machine and cleaning products. Decide what items you will ask worshippers to bring themselves (i.e. prayer mats, Qur'ans, face masks etc.).

**Step 4: Plan the Space and Volunteers**

Train your staff and volunteers on the new rules, how to handle personal protective equipment (PPE), COVID screening on entry, queue management, venue cleaning and other essential new measures.

**Step 5: Prepare the Community**

Have a plan to educate your local community on who should be praying at home, as well as what the new rules are for those who can pray at the mosque.

**Step 6: Plan the Pre-Prayer**

Consider a pre-booking system, queue management, keeping entrances and exits clear to minimise crowds, carrying out basic COVID screening upon entrance and a having a one-way system.

**Step 7: Plan the Prayer**

Limit opening times, advise people pray sunnah prayers at home, mark out 2 metre gaps, ensure an empty row between each row of worshippers, shorten khutbah/prayers, and have multiple/staggered congregations.

**Step 8: Plan the Post Prayer**

For multiple/staggered congregations, ensure at least 30 minutes between each to allow for cleaning, remind worshippers to not touch/shake hands, donate via contactless card machine or online and lock the building until next prayer.

**Step 9: Plan for Problems**

Have a plan if a worshipper was to be infected with COVID, keep a list of attendees for contact tracing, how to handle complaints, and how to keep supporting those who can't attend the mosque via online services.

Download the full 9-step guide at [bit.ly/MosqueReopening](https://bit.ly/MosqueReopening)

Training sessions to support you with implementing the above will be starting soon insha'Allah. Please identify your COVID safety officers who should attend the training sessions.

 [muslimcounciluk](https://www.instagram.com/muslimcounciluk)  [muslimcouncil](https://twitter.com/muslimcouncil)

Help us do more, donate: [LaunchGood.com/MCB](https://LaunchGood.com/MCB)

**MCB**  
The Muslim Council of Britain

Locally, dozens of Councils of Mosques and regional Muslim associations across England played a pivotal role in educating their members at borough, town, city or county level. From the beginning of lockdown in March when many rapidly brought local mosque leaders together and drove towards consensus around the difficult decision to suspend congregational services, to later in the summer in coordinating re-opening plans, with many drawing upon national guidance to provide their members with advice and support to re-open as safely as possible, and in-line with the latest public health guidance.

In England, places of worship were able to re-open from 13 June for individual worship. Although many mosques had already implemented measures to ensure they were 'COVID-secure', many chose not to, instead, waiting until 4 July

when they were permitted to re-open for communal worship. In Northern Ireland, places of worship were able to re-open from 29 June<sup>57</sup>. In Scotland, places of worship were able to re-open for congregational worship and religious life event ceremonies from 15 July,<sup>58</sup> while in Wales, they were able to re-open.<sup>59</sup> The first ever *Jum'uah salaah* (Friday prayers) following the lockdown was performed on 10 July, which was a momentous day for many Muslims.

On 31 July, the festival of *Eid-ul Adha* was celebrated, with *Eid salaah* permitted inside mosques and in congregation again. In order to accommodate the huge crowds safely, many mosques and communities took to organising *salaah* outdoors, which reduces the risk of the virus spreading compared to indoor gatherings and allowed for more people to attend.



Photo courtesy of East London Mosque



Photo courtesy of Glasgow Central Mosque



Photo courtesy of Cheadle Masjid



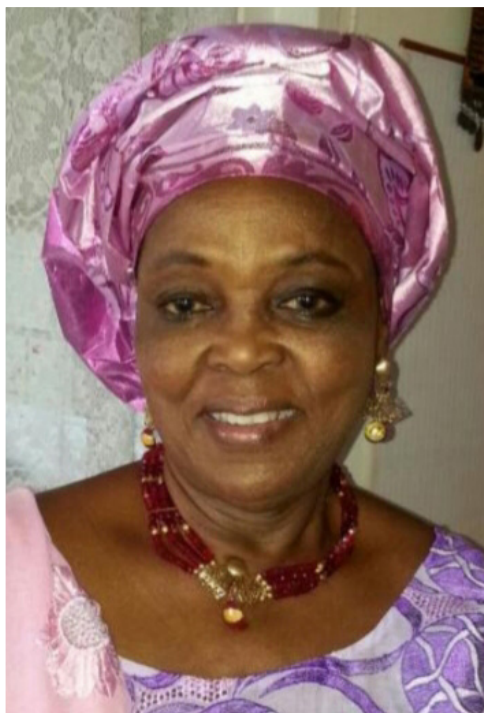
Photo courtesy of Mohebban Al Mahdi Youth Foundation, Salford

30 August marked the day of Ashura, the 10th day of the Islamic month of Muharram, with many communities usually attending ten consecutive evenings prior to Ashura in mosques. Some mosques facilitated their usual programmes for Muharram and Ashura by keeping attendees at a distance inside the mosque and ensuring only those who were not showing any symptoms of COVID-19 could attend and need to wear face covering. Other mosques remained closed and continued their services online.

In Salford, Mohebban Al Mahdi Youth Foundation (MYF) hosted their Muharram programme every night in the style of a drive-in cinema at the AJ Bell Stadium carpark. The organisers worked closely with health and safety advisers and the local council to implement this drive-in style model according to strict COVID-19 guidelines, including registering attendees for contact tracing, checking all attendees for symptoms of COVID-19 and ensuring everyone remained in their cars for the duration of the programme unless being escorted when leaving. Only 200 cars were allowed on site for the ten days the

drive-in series were held, with the programme consisting of Qu'ran recitation and lectures by scholars, discussing issues affecting communities such as social justice, racism and domestic abuse.

Although some Muslims managed to experience praying in congregation whether in mosques or in outdoor spaces during the easing of restrictions, there still remains certain individuals who were unable to do so, such as the elderly and those at risk who are still advised to stay at home. As some mosques and Islamic centres have limited spaces for congregational prayers, some prayer areas had to be repurposed to allow safe congregational prayer to occur whilst taking into account the 2-metre social distancing between congregants. While many eagerly awaited and celebrated the safe re-opening of mosques, the process involved significant planning, detailed risk assessments and often compromises and limitations in the services made available to the local communities.



## Alhaja Airat Adeyeye

A lady in her 70s, South London

I am a member of the Muslim Association of Nigeria, UK (MANUK), a mosque in South London. Prior to COVID-19, I used to attend the mosque regularly for daily and Friday prayers, Qur'an recitation circles and dhikr (remembrance of God) sessions on Sundays. I also used to attend social gatherings for the elderly community members, where I was able to partake in different activities with other worshippers.

As an elderly Muslim woman, the sudden closure of mosques and suspension of mosque activities as a result of the lockdown really affected me. I felt feelings of uncertainty about what was going to happen, especially when there was a lot of news about COVID-19, and every day I was hearing about how it had taken the lives of many elderly people. As someone who is at risk, I felt increasingly anxious about who would be the

next person to die, and I felt fearful about how this situation may worsen over time.

In order to cope with my fears and feelings of panic and anxiety, I wrote *du'as* (prayers) for myself in English as I could not read or write in Arabic. I practiced meditation, where I would speak to Allah and make *du'a*. This helped calm me down.

The *du'a* I would make is:

"Oh Allah, teach me to have patience and contentment in patience, so as to survive this pandemic. I seek for your forgiveness and I repent to You. You alone are worthy of worship. Heal my sickness, forgive my parents, guide my children to the straight path. Have mercy on me when the time comes and grant me *Jannatul Firdaus* (Heaven), the everlasting paradise for ever where the river flows. Ameen."

I am trying to manage and hoping that soon this period will come to pass, *inshaAllah*.

# Madrasas and Islamic Educational Institutions

Much has been discussed about the suspension of congregational activities in mosques, which has undoubtedly affected most Muslims particularly during Ramadan and Eid. This also meant the suspension of *madrasas* and Islamic educational institutions. Just as with schools, many of these services were moved online, with parents supporting this learning from home.

When the restrictions began to ease, announcements were made by the UK Government on safe re-opening of places of worship, both for individual and communal worship, but it was unclear how *madrasas* could safely re-open as well. The Lancashire Council of

Mosques produced guidance on safe *madrasa* re-opening and template risk assessments for safe re-opening in line with Government guidelines to fill this gap. This guidance was produced following extensive consultation with educational specialists, public health consultants, policy makers and other faith-based organisations. This culminated in the launch of the guidance on 16 June, reflecting guidelines not only from a professional standpoint, but also from an Islamic perspective.

Guidance material for out-of-school settings was also produced by the Association of Muslim Supplementary Schools (AMSS) including sign-posting to templates produced by the National Resource Centre for Supplementary Education (NRCSE), while the Association of Muslim Schools (AMS) supported Muslim faith schools with bespoke school reopening resources as well.



## Guidance on Madrasah Reopening Plan

This template guidance on Madrasah Reopening Plan and Risk Assessment has been produced by Lancashire Council of Mosques (LCM).

The current Government position legally is that Madrasahs are not open and encouraged that services continue to take place online wherever possible. Further information from Government will be given in due course relating to out of school settings which includes Madrasahs.

The earliest expected date for Madrasah re-opening currently is to be no earlier than 4th July 2020.

This guidance is to help support Madrasah committees and staff to prepare for reopening. Madrasahs should adapt and personalise the reopening plan to meet their individual needs.

LCM recommends the following action plan to be in place before reopening the Covid-19 secure Madrasah:

1. Appoint a COVID-19 designated person(s) (from existing staff)
2. Appoint other volunteers / staff to covid-19 team managed by the covid-19 designated person(s)
3. If possible all staff to undertake infection control training
4. Where possible try to keep Masjid and Madrasah activity separate
5. Complete the Risk Assessment
6. Produce Reopening Plan to meet covid-19 requirements / regulations and building capacity.
7. Consult with staff
8. Secure approval from Trustees / Madrasah Committee
9. Prepare the Madrasah estate (including the production of posters to reinforce social distancing and hygiene expectations)
10. Communicate with parents
11. Induct and train staff in the new expectations and operational procedures
12. Induct pupils in the new expectations and operational procedures

# Facing the Second Wave

Since August, there has been a surge of COVID-19 cases in parts of the UK, with many parts of England, Scotland and Wales placed back into local lockdowns. Announcements by public health experts and statements published by Prime Minister, First Ministers in the devolved administrations and Combined Authority Region Mayors have impressed upon the need for everyone to apply the lessons learnt from the first wave and to anticipate stricter measures and restrictions to slow the spread of the virus.

As these trends are emerging, many Councils of Mosques have played important roles in communicating the frequent changes to their local communities and liaising with their local

authorities for clarifications. This collaborative work of between Muslim-led organisations and their local authorities will need continue as the surge in COVID-19 cases continues. A template Friday sermon on the second wave and the importance of learning key lessons from the first wave was also issued by MCB and BIMA on 17 September to support Imams with delivering key public health messaging.

There have been increasing concerns on the lived experiences and effects of lockdown on differently abled members of Muslim communities. Recognising the importance to further support this cause, the MCB supported a number of Special Educational Needs and Disability support service providers in UK Muslim communities to come together and issue sign-posting guide on 2 October on what support is available.<sup>60</sup>

## Template Friday Sermon (Khutbah): Potential Second Wave and Protecting Our Families

إن الحمد لله نحمده ونستغفره ونعوذ بالله من شرور أنفسنا ومن سيئات أعمالنا، من يهده الله فلا مضل له ومن يضلل فلا هادي له وأشهد أن لا إله إلا الله وحده لا شريك له وأشهد أن محمدا عبده ورسوله  
يا أيها الذين آمنوا اتقوا الله حق تقاته ولا تموتن إلا وأنتم مسلمون.

Salamun-alaikum, Peace be with you,  
The Qur'an tells us:

وَإِذَا مَرِضْتُ فَهُوَ يَشْفِينِ

"And when I am ill, it is He (Allah) who cures me." Qur'an 26:80

### INTRODUCTION

- My dear brothers and sisters. As you know, the world is going through the COVID-19 pandemic and there is no person, no country, no field of human activity, that has not been impacted by this.
- It has caused some people to lose their freedom due to lockdown rules, lose their livelihoods due to the economic impacts, caused over 40,000 deaths in Britain, and nearly 1 million deaths globally.
- Many of our own Muslim communities have lost loved mothers, fathers, brothers, sisters, and to you I offer sincerest condolences.
- Now in recent days, evidence is showing there is a real risk of a second wave which may hit us harder than the first. How should we approach this?

### 1. LEARN LESSONS FROM FIRST WAVE

- The Prophet (peace be upon him) is narrated to have said, "A believer should not be stung twice from the same hole." (Bukhari)
- The first wave, we did not know what to expect so we cannot be blamed. We had to use our best guess to work out what to do.
- But the second wave, we now have experience. To not learn lessons from the first wave would be heedlessness and rejecting the mercy of Allah upon us for having survived the first wave.
- For example:
  - We have learnt that wearing face masks or coverings reduce the risk of virus transmissions significantly
  - We have also evidence that keeping 2m social distancing can reduce transmission of the virus by up to 10 times
  - And we know that large indoor gatherings in non-COVID-19 secure venues like houses, could spread the virus like wildfire
- But today, we still see too many people across society of all backgrounds and ages, are taking chances or making excuses to ignore the lessons that we learnt from the first wave.
- As Muslims, we should be at the forefront of adhering to what was learnt from the first wave because it is a sign of our Iman (faith) that we do not disregard the signs of Allah.



More template sermons at:  
[www.mcb.org.uk/friday-sermons](https://www.mcb.org.uk/friday-sermons)



Khutbah template produced by the MCB and BIMA

## Differently Abled Muslims: What Support is Available?

The World Health Organization (WHO) estimates that about 15% of the world's population has a disability. Whilst the lockdown meant we temporarily couldn't enter our mosques, madrasas (supplementary schools) or community centres, this is a lived reality every day for many Muslims living with a disability, due to buildings and/or services not being accessible. Disabilities include a wide range of physical, mental, intellectual or sensory impairments.



There are several Muslim-led organisations and campaigns in the UK providing support and advice on making mosques, madrasas and community centres more accessible for differently abled Muslim adults and children.



Deaf services including British Sign Language (BSL) Qur'an, khutbah (sermon) services, Friday Islamic classes, BSL Courses, Islamic school and deaf marriage services.  
[alisharah.com](http://alisharah.com)



A community-based group working in Greenwich, London, aiming to make mosques a welcoming and a place of belonging for children with disabilities.  
[anahuna.org.uk](http://anahuna.org.uk)



Amanati is an organisation that aims to empower and support children with special needs so that their abilities are celebrated in the community.  
[amanati.org](http://amanati.org)



Providing an online support network for Muslims with disabilities, special needs and chronic illness, as well as their parents, families and carers.  
[disabledmuslimsnetwork.org.uk](http://disabledmuslimsnetwork.org.uk)



Providing educational products with a primary focus on BSL and creative sensory products.  
[aminayasmin.com](http://aminayasmin.com)



Providing Islamic education and services for Deaf communities in a safe and secure environment.  
[islamfordeaf.co.uk](http://islamfordeaf.co.uk)



A project of The Elevate Movement which increases awareness, acceptance and inclusion of people with autism within Muslim communities.  
[autismmosque.org](http://autismmosque.org)



Supporting Deaf Muslims and seeking to educate, empower and enable Deaf people to reach their full potential.  
[muslimdeaf.org](http://muslimdeaf.org)

Does your organisation also provide support and advocacy for Muslims with disabilities? Let us know by getting in touch at [admin@mcb.org.uk](mailto:admin@mcb.org.uk)

To view a list of madrasas that cater for SEND pupils or for further information, please visit [mcb.org.uk/disability](https://mcb.org.uk/disability)

Compiled by:



admin@mcb.org.uk @muslimcouncil @muslimcounciluk mcb.org.uk

v1 - Published 30 September 2020

List of service providers for children with disabilities

# Chapter 4:

## Muslims Playing Their Part in the National Effort

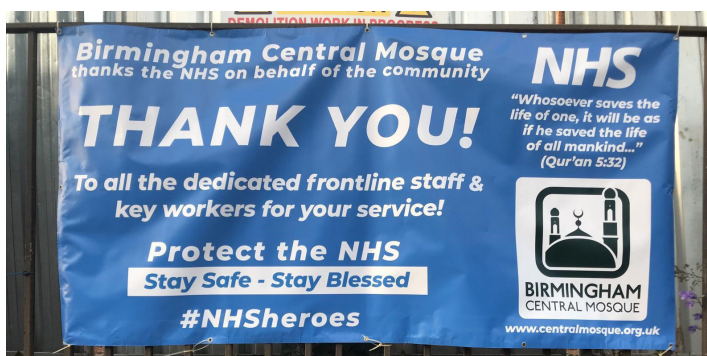


Photo courtesy of Birmingham Central Mosque

### Contribution of Muslim Key Workers

Whilst the UK was in lockdown and most people were confined to their homes, it was the key workers who continued working as per normal in order to provide various essential services to keep everyone safe. From doctors and nurses working in our hospitals and supermarket workers ensuring shelves are stacked, to teachers working with young people in difficult circumstances and transport workers getting other key workers to work, an immense amount of gratitude is owed to such individuals.

With the majority of BAME workers in London being key workers,<sup>61</sup> it is likely that many Muslims across the UK have been filling these important roles, as 1 in 3 Britons from ethnic minorities are Muslim.<sup>62</sup> In the food production industry, which includes processing and sales, over 50% of the workforce are from ethnic minorities. Similarly, 49% of the health and social care sector, 44% of the transport sector, 37% of those working in key infrastructure and utilities and 30% of those in childcare and teaching are from ethnic minorities. The Bangladeshi and Pakistani ethnic group, which is overwhelmingly Muslim, also has the highest percentage of transport workers (17.8%).

These roles have been crucial in keeping the UK going during the lockdown. In the media, Muslim keyworkers have also been celebrated and recognised,<sup>64 65</sup> with the NHS thanking Muslim staff for working hard particularly through Ramadan.<sup>66</sup>



## Dr Yassar Mustafa

### Intensive Care Unit Doctor in Birmingham

I am an intensive care doctor working in inner-city Birmingham. Like many others during this pandemic, life for us quickly became surreal. Several aspects of our intensive care work changed tremendously when the trickle of critically unwell COVID-19 patients arriving into the Intensive Care Unit (ICU) quickly turned into a tsunami. From emergency rota patterns with 13-hour shifts, to an almost unrecognisable work environment with colleagues drafted in from other medical specialities, and with everyone now in Personal Protective Equipment, there was a steep learning curve for all of us in the new intensive care. We had to adapt to the changing conditions quickly.

Performing emergency life-saving procedures one after another such as tracheal intubation to help people breathe and giving powerful drugs through neck lines straight to the heart in order to keep someone alive, pushed us to our limits. I have vivid memories etched in my mind – of critically unwell COVID-19 patients that kept coming in during the middle of the night, often coughing and frothing from the mouth, all in extremely distressed states and clearly close to death. Due to the rapidly evolving situation, we all learnt to work dynamically together in our teams and became slick at our duties. We had to – because of the sheer numbers.

The most challenging part for me was watching the clinical states of some patients who did not have major health conditions deteriorate despite our best efforts. It was as perplexing as it was distressing to witness, almost helplessly, their oxygen requirements continuing to increase relentlessly, despite all of our ICU drugs, gadgetry and physiotherapy, and eventually witnessing them succumbing to COVID-19. However, when patients did improve and were discharged from ICU, it gave us hope and we would all take a moment to pause and clap them out of the unit.

Through the highs and the lows, the camaraderie that developed between all of us – the nurses, doctors and the rest of the team – was awe-inspiring and something to remember and cherish.

## Dr Parveen Ali

Nurse and Senior Lecturer in Sheffield

Nursing is an integral part of the healthcare system, which encompasses the promotion of health, prevention of illness, and care of the physically and mentally unwell, and disabled people of all ages in all healthcare and other community settings. Nurses, alongside other healthcare professionals, contribute to planning, implementation, and evaluation to ensure the adequacy of the health system. Nurses are trusted healthcare professionals not only in the UK but throughout the world.

Health promotion and health education remain an integral part of nurses' role and they have performed this role very effectively during various pandemics including the current COVID-19 pandemic. My colleague Mr Nisar Gilal and I, both Pakistani-born living in the United Kingdom and qualified nurses, run a weekly programme called 'Health Show' on Link FM 96.7, a Sheffield-based local radio station. The radio programme aims to provide relevant healthcare information to the South Asian population who speak Urdu and Hindi. We believe that conveying authentic information by credible healthcare professionals in the language that is easy for the targeted audience to understand can be impactful. We both worked voluntarily throughout this period of crisis and delivered relevant programmes focusing on COVID-19, its impact on individuals, its manifestations and ways to prevent the spread. We have also talked about the mental health impact of COVID-19 and what can be done to minimise the impact and cope with stress. Since February 2020, these programmes had nearly 30,000 views and listeners via Facebook and live radio transmission. While the programme is aimed at people living in Sheffield and surrounding areas, live broadcast on social media means that people not only from other cities in the UK, but also from other countries could benefit from listening to the programme.

Our work demonstrates that modern day nurses not only work in hospital and community settings but also use their knowledge and skills innovatively to contribute to health promotion, disease prevention and dissemination of information. By doing so, they not only fulfil their duties as health care professionals but also act as leaders who strive to portray a better and attractive image of the nursing profession not only in the UK, but all across the world.



## **Salma Rehman**

### **Carer in a Nursing Home in Sheffield**

I am a student at a university and also working in a nursing home. Working during the COVID-19 pandemic was initially very stressful due to the lack of understanding of its transmission. Healthcare providers were always in fear of becoming infected so much so that hearing anyone coughing in the nursing home would trigger instant panic and fear of contracting the virus. As an infection of this scale was something none of us had seen before, we have been learning how to manage on a daily basis and taking precautions as per the guidelines. During the outbreak of COVID-19, the majority of the staff in the home became infected. Everyone had different symptoms and had different recovery time – it took more than one month for me to recover.

During this period, most of the staff were afraid to get back to work for fear of being re-infected with the virus and infecting the elderly. The significant concerns also included the shortage of Personal Protective Equipment (PPE), long work hours and the emotional involvement while providing care. We have a lot of older residents in the nursing home, and it was heart-breaking to see them leave this world without the presence of their family. Some of them were asking when they will be visited by their children, whether the virus had gone, and when this pandemic will end – most of which we don't have answers to. Despite the availability of communication options such as WhatsApp, Skype and FaceTime, most of the elderly are not familiar with modern technology and thus found difficulties in using these tools.

Although the situation is changing, and we are slowly returning to normality with precautions and restrictions to follow, we still feel uncertain about the situation. I am still worried about bringing home infections and putting my family at risk.

## Umar Shareef

### Bus Driver in London

Hearing the news of the death of one of my bus driver colleagues made me undoubtedly nervous. I continued working out of fear of the upcoming recession and the need to earn and save money as much as I could. Whilst it is tragic that there were lives of transport workers lost predominantly at the outbreak of the pandemic, I was reassured that my profession as a bus driver has been well catered for in the COVID-19 pandemic. Transport for London (TfL) was quick to respond and adapt to the situation by sealing the driver cabs on buses with air-tight plastic and only allowing passengers to board and disembark from the back doors. Moreover, a lower passenger limit was put in place, which was easy to uphold during lockdown due to fewer people venturing out.

With lockdown now eased, boarding is back to normal, but our cabins remain sealed and there is still a lower-than-normal passenger limit. However, it is admittedly becoming more difficult to uphold this limit as more people begin to ease into their normal routine. I also noticed that the public seemed to show a relaxed attitude on buses. While face coverings are officially mandatory for all passengers, the public seem to have a relaxed attitude on buses, with fewer and fewer covering their faces each day. I fear more for the safety of the public than just for myself.





## Talib

### Primary School Teacher in London

Being a teacher is a very important duty, and we have a responsibility to give the children the best education we can. The COVID-19 pandemic raises many worries and concerns for teachers from BAME backgrounds. When schools were re-opening, on the one hand, there was a sense of moral duty to educate the children the best that we can knowing that some of them have struggled to continue to work at home. A big concern was a widening gap between lower attainment children and higher attainment children. On the other hand, being requested to come in to work physically, given that I'm from a BAME background and knowing that social distancing would be difficult in school settings, was challenging for me.

I learnt to cope with these conflicting feelings by speaking to my colleagues and exchanging support and understanding for each other. Knowing that we are in this together was rather uplifting. The school implemented encouraging health and safety procedures, such as hand sanitisers being readily available, keeping class sizes very small, and the physical arrangement of desks and the classroom environment, which helped to alleviate some of my concerns. It was not easy, but I was hoping that I would stay safe and there would be no serious health risks that could take place.

The actual day-to-day teaching was positive, and it was nice to see some life to the school once again and to see the children. However, it is not the same as we can't bond in the same way as before, such as exchanging high-five with the children or embracing our colleagues. The children have coped surprisingly well. The vast majority of students who attended school looked like they were enjoying themselves after being able to see their peers and teachers again. It was heart-warming seeing Year 6 again, as they had a challenging year – they didn't get a chance to sit for SATS or have an end-of-year party. Fortunately, they got a wonderful leavers assembly, which is an event that celebrates the final year of the children in primary school before moving onto secondary school. It was a wonderful highlight for the children as they got a chance receive an emotional farewell in front of their parents and school staff.

## Serving Communities

Since lockdown was implemented in March, many volunteer initiatives from Muslim communities across the UK have sprung up to provide support, fulfilling an essential public service at a time of incredible need. Mosques and Muslim groups have always worked for the benefit of their wider communities, but the pandemic has shown just how essential the public service they provide has been, particularly in times of such intense hardship. This includes running foodbanks and providing hot meals, supplying Personal Protective Equipment (PPE) for health workers and much more. These serve to crucially help those self-isolating and shielding, amongst whom are the elderly, single parents, the disabled, and the socially and economically vulnerable.

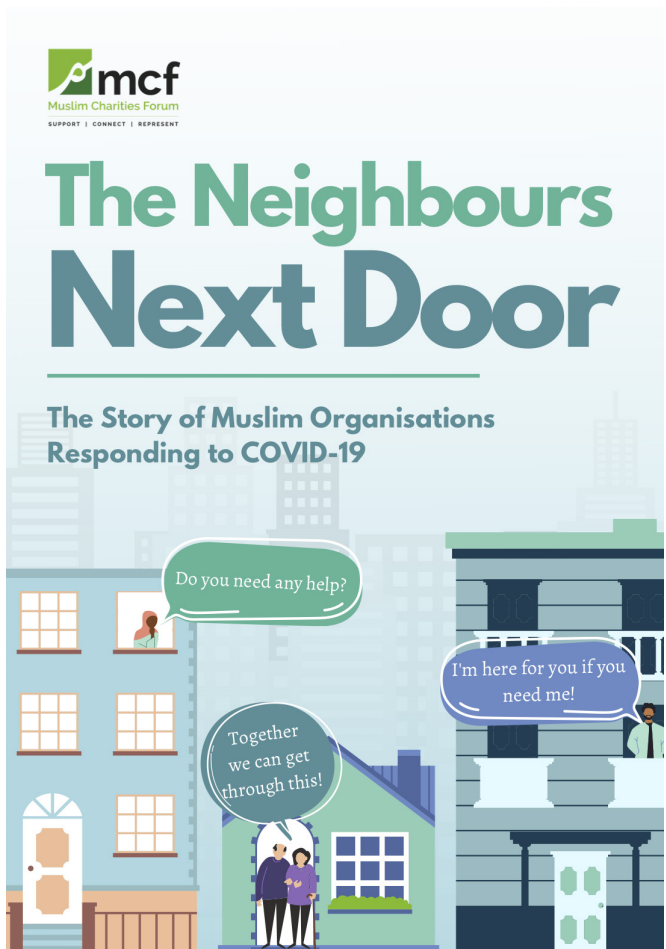


Photo courtesy of Old Kent Road Mosque & Islamic Cultural Centre (MANUK), South London



Photo courtesy of Shia Ithna Asheri Community of Middlesex, North West London

Since the outbreak of the pandemic, Muslim Charities Forum (MCF) collaborated with the Muslim Council of Britain (MCB) to collate the various Muslim-based community initiatives and responses to the pandemic across the UK. The initiatives collated are also documented at the end of this report in Appendix A. At the time of writing, MCF has compiled a list of 231 organisations who have responded to the crisis, of which many can be found on MCF's website.<sup>67</sup> Some of these initiatives have also been highlighted in MCF's report, *'The Neighbours Next Door: The Story of Muslim Organisations Responding to COVID-19'*.<sup>68</sup> These initiatives consist of work done by international non-governmental organisations, non-governmental organisations, mosques and places of worship, cultural or faith-based organisations, voluntary groups, umbrella organisations and private Muslim family foundations, all to support their neighbours during these tumultuous times.





## Muslim Women's Council, Bradford

Since December 2013, Muslim Women's Council (MWC) has been delivering the Curry Circle, a weekly food initiative for the destitute, in conjunction with MyLahore. Due to the unprecedented effects of COVID-19, the sessions have been changed to a hot meal takeout service from the same location, Carlisle Business Centre, from 6pm to 8pm on Thursdays. This ensures volunteers and service users are kept safe while enabling the team to continue providing as much support as possible.

In further response to the outbreak of COVID-19, MWC also launched the MWC Helpline on 23rd March in conjunction with MyLahore. The helpline's services include emergency food provision (through hot meal food packs), signposting to relevant services, updates and advice on COVID-19 in additional languages, befriending and emotional support. The helpline operates from 10am to 8pm, seven days a week, to support those members of the Bradford community who are vulnerable or elderly. Many people are having to self-isolate due to the virus symptoms or underlying health conditions, and are therefore struggling with meals. So far, the helpline has delivered 6183 hot meals to families all over Bradford, supported 119 different households with hot meals, food parcels & mental health support and provided 2163 takeaway hot meals to Curry Circle service users.

MWC is also producing a report on the impact of the COVID-19 lockdown on Muslim women in the UK. This report aims to understand the experiences of Muslim women on issues ranging from home-schooling children and the impact on mental and physical health to finances, views on government handling of the crisis and challenges to civil liberties. With many pieces of research currently being undertaken about the impact of COVID-19 on the general population, the women researchers felt it was imperative to examine the impact of the pandemic on Muslim women in particular, in a timely and relevant manner, especially considering their own lived experiences at this time. The researchers formulated questions around distinct themes relating to the impact of the pandemic, ensuring questions were both easy to understand and open, to allow participants to express as much thoughts as possible. MWC also published the online survey on their social media platforms, website and by direct emails to their members. The survey results are currently being formulated into a report and is due to be published within the next few weeks.

## Sheikh Nuru Mohammed

Chair of West Midlands Citizens UK  
and Imam of Mehfil E Abbas Mosque  
(KSIMC), Birmingham

Islam offers guiding principles on how to attain a holistic spiritual, material and social life. This also includes the importance of giving back to the community and reaching out to others. Our sense of belonging to communities is a natural need, akin to our need for food. Human beings are social in nature as we live in society, having to interact with others, to love and be loved, to reach out and being reached out to in return.

Prophet Muhammad (may peace be upon him and his family) did not only reach out to Muslims, but also non-Muslims. The Prophet also reminded the ummah that God will continue to assist His servants and show them mercy as long as they continue to help others. Hence our faith is not complete until we show love to others, based on the principle of desiring for the other what we desire for ourselves. This is also further affirmed by the tradition of Imam Ali (as): 'People are of two kinds, either your brother in faith or your equal in humanity'. During this time of difficulty, we have seen the implementation of the teachings of God in our service and acts of charity to others.

As an Imam of KSIMC of Birmingham and co-chair of Birmingham Citizens UK, it is crucial to emphasise the importance of health, following the teachings of the Holy Prophet. Since the outbreak of the pandemic, mosques have suspended their activities and started to establish taskforces to disseminate medical advice. Here in Birmingham, some mosques suspended their programmes before the main announcement of lockdown was made. We also arranged virtual conferences with medical experts within our community in both English and Gujarati languages. We attended weekly conferences addressed by the public health director, alongside other mosques, as well as the virtual conferences arranged by the MCB.

There were people who wanted to return to mosques after the initial suspension of mosque activities, particularly the elderly and retirees as the mosque is the only place they go to. I continued to emphasise the importance of health and looking out for each other during Friday virtual khutbahs (sermons). Even when communal worship is allowed, some mosques seemed to remain closed for now. At my mosque, we have many elders in the community who used to frequent the mosque daily. As such, we want to ensure their safety is protected and only open when we are 100% comfortable.

COVID-19 has taught me that we are more willing to take advice on board and place importance on health. After all, Islam did not start in a mosque, but rather, people were initially seeking spirituality in the confines of their area. This is not to say mosques are not important. I'm proud of my Muslim communities, whichever mosque they came from, in how they have been responding to this pandemic. COVID-19 is still with us, it is not over. We need to take extra precaution as we will be questioned on the day of qiyamah how we are grateful for the *ni'mah* (blessings) bestowed upon us, and that is the *ni'mah* of health.



## MCB: Uniting, Serving & Protecting Muslim Communities

The Muslim Council of Britain has been working to address the needs of Muslim communities since the outbreak of the COVID-19 pandemic, collaborating with experts to produce advice on how best to protect ourselves, our loved ones, and our communities.



18 webinars & training sessions  
10,000+ participants



35+ expert Muslim organisations collaborated with



25 guidance resources issued, translated into  
8 different languages



30+ regional & national mosque representative bodies engaged  
100s of mosques reached

For more information, visit: [www.mcb.org.uk/coronavirus](http://www.mcb.org.uk/coronavirus)



Help us do more, donate: [LaunchGood.com/MCB](https://LaunchGood.com/MCB)



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**MCB**  
The Muslim Council of Britain

## Guiding Muslim Communities

From the outset of the pandemic, the MCB has been partnering with the British Islamic Medical Association (BIMA) to provide expert medical advice and support for Muslim communities. In early March, this consisted of posters to display in mosques advising community members on how to stay safe, by performing their *wudhu* (ablution) from home, washing their hands regularly and not attending if they felt unwell or were high risk. This was also translated into a number of community languages to ensure that as many Muslims were able to understand how best to stay safe when visiting the mosque.

As the lockdown commenced in March, weekly community briefings via Zoom were facilitated by the MCB, bringing health care professionals and specialists to provide an update on the virus, answer questions from community members and dispelled myths. These community briefings also provided support and information on mental health, for parents home-schooling their children, how to spot fake news, how mosques could take their services online and short sermons from a range of scholars to provide spiritual guidance. These webinars were important to provide up-to-date, factual information directly to Muslim communities from trusted sources and to provide an opportunity for community members to have their questions answered by professionals.

As mosques prepared to re-open, a series of training sessions were held for mosque leaders and COVID safety officers, as well as worshippers looking to return safely. This training included medical, legal and operational

advice for mosques and was a chance for best practice to be shared across communities. It also helped worshippers understand what would be expected of them so that they could return to their mosques prepared with their face coverings and own prayer mats.

As and when the UK and national governments introduced new measures through the course of the pandemic, the MCB, BIMA and a range of other Muslim civil society organisations, produced a range of resources to facilitate understanding of the new measures in the context of Muslim communities. The MCB also prepared guidance and advice whenever key events in the Islamic calendar occurred. This included messages explaining the need for individuals to stay at home during Ramadan and a guide on how best to make the most of this, advice on how to celebrate *Eid al-Fitr* according to the lockdown measures in place in each nation in the UK, how to safely re-open mosques and safely hold their first Friday prayers, how to prepare to re-open *madrasas* and FAQs on burials and funerals.

Many of these resources were also translated into different community languages, including Arabic, Urdu, Bangla, Tamil, Gujarati, Turkish, Somali and Yoruba. In total, the MCB and BIMA hosted 18 webinars and training session with over 10,000 participants, collaborating with over 35 expert Muslim-led organisations and reaching hundreds of mosques. The UK Government's advisory body, the Scientific Advisory Group for Emergencies (SAGE), highlighted public awareness material produced by BIMA as a good example and practice for engaging with minority communities.





## Dr Sharif Kaf Al-Ghazal

President of BIMA and a Consultant Plastic Surgeon in Bradford

In collaboration with the MCB and other Muslim organisations in the UK, BIMA led on the formation of COVID Response Groups (CRG). BIMA was responsible for the Medical CRG and since the beginning of the pandemic, we have been helping Muslim communities by organising and supporting many virtual seminars discussing infection prevention, the suspension of congregations and eventual re-opening of mosques, the importance of staying at home, providing advice on mental health and end-of-life concerns, and public health issues during Eid. BIMA has issued many statements in different languages in line with local community demographics, and also produced guidance and public health pathways for performing *ghusl* (washing) for the deceased with COVID-19.

In Ramadan, BIMA also produced a pioneering academic research piece on the safety of fasting in Ramadan, which offered evidence on fasting in light of the COVID-19 pandemic. This was the first attempt to make a patient-centric decision tool to help clinicians make decisions concerning Muslim patients and whether or not they should fast given a long-term illness. This was shared nationally by Royal Colleges, medical societies and NHS Trusts. BIMA also produced guidance for NHS managers and employers on how to support our frontline Muslim staff in Ramadan, as well as published guidance on occupational health and PPE. We also joined a virtual iftar with the HRH Prince Charles discussing the issue of COVID-19 in the first week of Ramadan.

A lot of work was done by Muslim healthcare professionals in their free time to educate Muslim communities, as well as provide induction courses for our own junior members which were supported by NHS Health Education England, to equip them in joining the frontline workers. We have also worked with other BAME medical organisations and made representations to MPs, NHS, Public Health England and Department of Health and Social Care, around the disproportionate impact that COVID-19 has had on Muslim NHS staff and communities. Recently we have launched a campaign on improving the uptake of the flu vaccine this winter in light of the known pressures our community may face.

BIMA is very proud to work with the MCB and other organisations on safeguarding the lives of Muslims and lobbying on their behalf. It is the responsibility of us all to use our various areas of expertise to support our communities during these tumultuous times. It is our duty to protect and serve our communities, and we are only able to do this by all working together.

## Establishing Temporary Mortuaries

From the early outset of the pandemic, it was evident that measures needed to be taken in order to cope with the excess number of deaths in a short space of time. In response to this, at least 10 mosques across the UK took the initiative to utilise the space they had to set up temporary mortuaries in order to take the strain off of the NHS and the local authority.<sup>69</sup> One of the mosques which did this was the Green Lane Mosque in the West Midlands. Abid Khan, one of the lead volunteers of the mosque, shared that they saw about 20 – 25 funerals a week, which usually would be the average for a year. The mosque also used a 40ft refrigerated container to store extra bodies to accommodate the deceased.<sup>70</sup>

Another mosque which also took part is the East London Mosque, situated near the Royal London Hospital in Whitechapel, London. The mosque provided an overflow facility, taking an estimated 25 deceased bodies every day during the peak period to ease the burden on other cemeteries and funeral services.<sup>71</sup> The mosque helped to

transform railway arches into a mortuary within 2 weeks,<sup>72</sup> and has expressed readiness to provide this service again should the need arise.<sup>73</sup>

## Donating PPE to the NHS

In partnership with a volunteer-led project, Loft 25, Green Lane Masjid and Community Centre in the West Midlands contributed to the production of PPE for the NHS. Loft 25 is a soft furnishings manufacturer owned by Zhagum Arshad, and the campaign was initially set up by Zhagum and his 16-year-old son, shortly after lockdown was announced when there was a critical demand for PPE.<sup>74</sup> Green Lane Masjid subsequently came on board to offer the support of volunteers, providing a lead project manager, project coordinators, admin, quality assurance checkers and over 150 delivery drivers. According to Mr Arshad, the campaign has produced over 25,000 PPE items with a selling value of over £400,000, and there were over 1000 volunteers in total who helped in this cause.



Photo courtesy of NHS PPE campaign

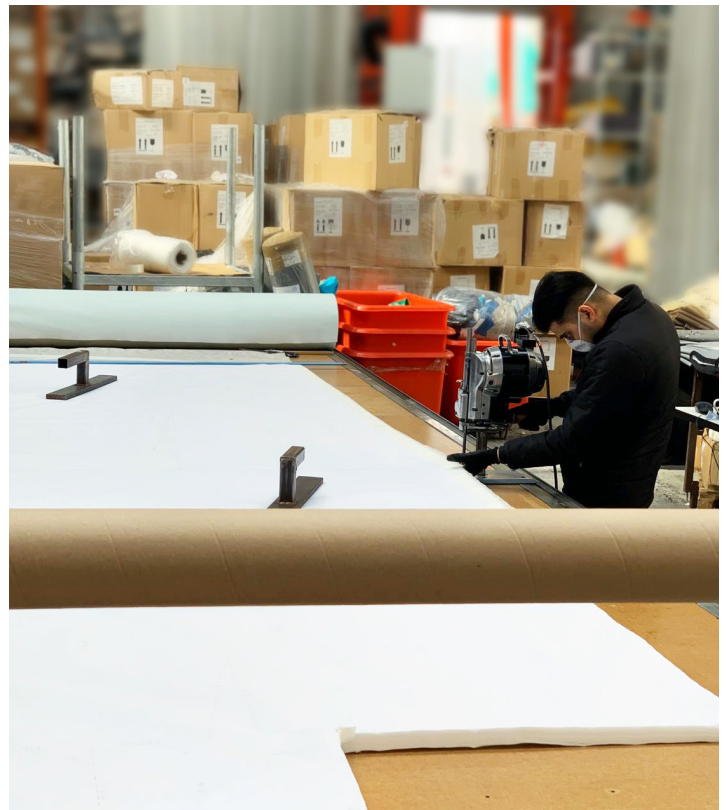


Photo courtesy of NHS PPE campaign



Photo courtesy of UKIM Masjid Ibrahim, London

## Home Oxygen Monitoring Service (HOMS)

Home Oxygen Monitoring Service (HOMS) is a joint initiative from four Islamic Centres in Harrow, north London, providing free oxygen monitoring devices on a loan basis for those with COVID-19 symptoms and those at-risk.<sup>75</sup> The Islamic centres involved are Hujjat Stanmore, Harrow Central Mosque, Sri Lankan Muslim Cultural Centre and Shia Ithna'asheri Community of Middlesex.<sup>76</sup> These devices, Digi Pulse Oximeters, offer convenience for those at-risk who need to monitor their oxygen levels in order to manage their illness better. According to Dr Hussein Khaki from Hujjat Stanmore, this may help to prevent situations where patients end up at the hospital too late with very low oxygen levels,<sup>77</sup> allowing doctors to intervene early to prevent an individual's health from deteriorating.<sup>78</sup>

## Free Hygiene Care Packages to over 65s

Asiyah Javed and her husband Jawad, grocery shop owners in Falkirk, Scotland, have been giving away free face masks, anti-bacterial hand gel and cleaning wipes for anyone over the age of 65.<sup>79</sup> This initiative was inspired when lockdown restrictions started in March when Asiyah witnessed an elderly woman crying outside the supermarket because she wasn't able to afford these necessities. The couple then decided to use £5,000 from their savings to buy sanitiser and other products needed and organised them

into care packages for the elderly. Within one month, they donated 3,000 masks and delivered more than 1,000 food parcels to the vulnerable.<sup>80</sup> During the Easter season, they also gave away hundreds of free Easter eggs while still continuing to provide care packages to the elderly, hospitals and care homes.<sup>81</sup> Asiyah kept her deceased grandparents in mind whilst carrying out this initiative during the COVID-19 crisis. The couple's generous efforts were recognised during a clap for carers in April.<sup>82</sup>

## Nightingale Masjid

Masjid E Ghosia in Deane, Bolton, anticipated that there would be high demand for hospital beds and planned to repurpose their mosque to offer create an overflow facility for the local hospital for COVID-19 patients. Its hall and 12 rooms which were normally used for community functions and the *madrassa* would be used to provide end-of-life care to 23 people who need it.<sup>83</sup> This plan was proposed by Dr Mohammed Jiva, together with three other Muslim doctors in the community. Dr Jiva planned to have up to 55 beds which could be used by the local hospital and for those concerned about giving the best care in their own homes.<sup>84</sup> Though the facility was never needed, there were 60 volunteers ready to serve this facility, including doctors, nurses and pharmacists.

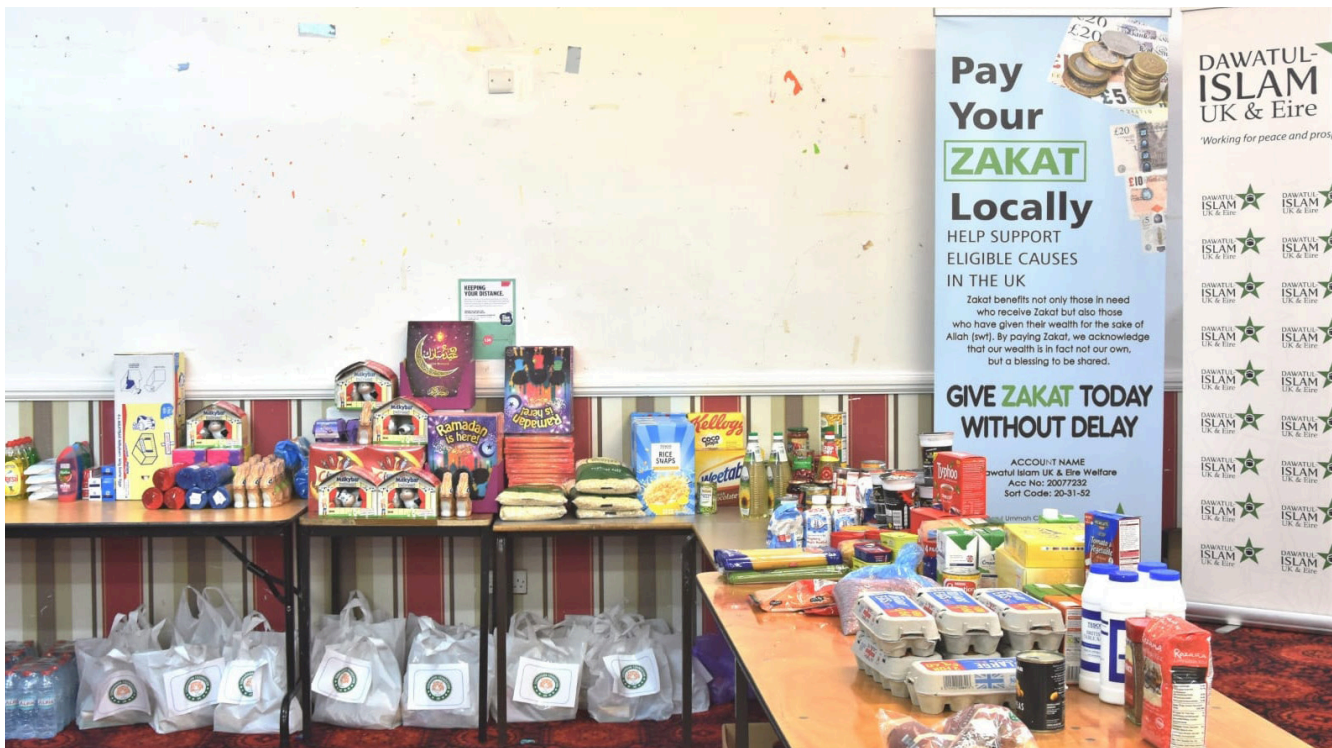


Photo courtesy of Darul Ummah

## Feeding Those in Need

In London, UKIM Masjid Ibrahim established the iCare food bank in April, to distribute essential groceries and provide home cooked meals on a daily basis.<sup>85</sup> It has since provided 500 free hot meals to the homeless and those in need in the London Borough of Newham.<sup>86</sup> This was especially impactful during the month of Ramadan which can be trying times for those who may be struggling and would usually be attending the mosque and receiving dinner there.

In Bury, some Muslims depending on food banks found they were not able to receive halal products due to a surge in demand for these emergency services. Ayesha Arif lived in Bury for years and knew the struggles local families were dealing with and opened up Bury's first halal food bank. In just two months, she managed to help more than 50 families in need of food and basic necessities.<sup>87</sup> According to Ayesha, there were 20 food banks in Bury, but none provided halal goods for Muslim families in need.<sup>88</sup>

## Befriending Services

Maswood Ahmed, Assistant Secretary General of the MCB and Sajeda Ahmed, a Muslim Chaplain involved with Darul Ummah, and a leader of Women100, have both been jointly co-ordinating the Darul Ummah Befriending Service. This is a service that runs alongside a food bank. The project has been running since the beginning of the lockdown period and continues to provide a dedicated volunteer run befriending service which includes one-to-one counselling and support to the most vulnerable and needy, irrespective of their backgrounds. Many of the beneficiaries are the vulnerable and elderly who experience a sense of isolation during this pandemic. Along with talking therapy, they have also been offered practical help with shopping for food and essential items. The service has been able to keep the most vulnerable of our community motivated, restoring their dignity and self-respect and building their confidence to cope in face of the pandemic.



Photo courtesy of Muslim Women's Council



Photo courtesy of Muslim Women's Council



Photo courtesy of Al-Ikhlās Centre

# Chapter 5: 'To Him We Belong, and to Him We Return' - Remembering the Victims of COVID-19

The pandemic has taken a significant number of lives across all communities in the UK. There have been deaths of many British Muslims, including public figures, Imams, community leaders and key workers. While Muslim communities do not have a single record of the death of every Muslim, it is not – and may not be for a long time to come – possible to know of every British Muslim who has lost their life due to COVID-19.

However, in this chapter, we highlight a small number of deaths within British Muslim communities. We offer our sincerest condolences to all those who have lost loved ones as a result of COVID-19, and pray Allah grants them strength and patience to manage. We pray to Allah to grant His mercy on all those who have lost their lives during this time, and that He accepts their deeds.



### ***Ismail Mohamed Abdulwahab, youngest COVID-19 victim***

Ismail Mohamed Abdulwahab was the youngest victim of COVID-19 to have died, aged just 13 years old with no underlying health conditions. He died on 30 March at King's College Hospital in London after his lungs failed and he went into cardiac arrest. As two of his siblings also developed symptoms, none of his immediate family members could attend his funeral.<sup>89</sup>

### ***Dr Adil El Tayar, first Muslim doctor who died***

Dr Adil El Tayar, originally from Sudan, died at the age of 63 on 25 March at West Middlesex University Hospital in, London. Dr El Tayar spent his last few days working in the A&E department as an organ transplant specialist.<sup>90</sup> He started self-isolating when he displayed symptoms but he was eventually hospitalised and placed on a ventilator, dying 12 days later.<sup>91</sup> He left behind his wife and four children, two of whom are also doctors in the NHS.

### ***Mr Sabir-Hussain Mirza, first Muslim councillor in Oxford***

Mr Sabir-Hussain Mirza died on 23 April, aged 75 years, of COVID-19. He was the first Muslim city councillor in Oxford and was an instrumental member of the Oxford community.. In his spare time, he was at the forefront of interfaith work in Oxford, alongside being the Chairman of Manzil Way Mosque and having co-founded the Anglo Asian Association to promote interfaith harmony.<sup>92</sup>

### ***Areema Nasreen, first Muslim nurse who died***

Areema Nasreen, a mother of three, lost her life to COVID-19 at the age of 36 on 3 April, despite not having any underlying health conditions. She had recently graduated in nursing in 2019 and worked at Walsall Manor Hospital where she contracted COVID-19 while supporting patients who had tested positive.<sup>93</sup>

### ***Dr Munir Hassan Mujtaba, Imam from Derby***

Dr Munir Hassan Mujtaba, the Imam at the Jamia Nizamia Centre in Derby for over 15 years, died at the age of 49 after contracting COVID-19 on 27 April. As a senior Imam at the mosque, he was fluent in English, Arabic and Urdu, which allowed him to connect with worshippers in their own languages. Upon developing symptoms of COVID-19, he was admitted at Royal Derby Hospital for approximately four weeks before he died three days into Ramadan. He left behind his wife and five children.<sup>94</sup>

# Concluding Remarks

The COVID-19 pandemic has had significant impact and presented critical challenges on the lives of many, but has also revealed hidden strengths and opportunities for incredible work in different communities. For British Muslim communities, it has led to an unprecedented time for civil society organisations to work together and form partnerships to address the needs of their local communities. There has been a number of initiatives at local, regional and national levels which have been highlighted by the media, but a wider appreciation of the innovative work of Muslim communities during these difficult times is warranted. This report seeks to showcase the incredible work of Muslim communities to help, support and serve others in need, despite the circumstances they found themselves in, having witnessed friends and loved ones dying of COVID-19 at alarming and disproportionate rates and being faced with such hardship.

It remains uncertain how long the pandemic will last and how fast a vaccination can be developed or an alternative solution can be found to curb the spread and allow normal life to resume. At the time of writing, a second wave in the UK is well underway and it is extremely pertinent to reflect on the last seven months, understand the work that was done, the impact it has had, and how this can be done better to support more people effectively in the challenging months ahead.

Some key lessons have already been identified from the first seven months of the pandemic, including harnessing a collective leadership and strong coordination between different sectors and service providers of Muslim communities, both at regional and national levels. It is fundamental to have a coordinated and aligned response where resources and best practice could be shared. It is also essential to strengthen the burial sector by investing in cold storage or external spaces in case of spikes in burial demands, establishing a centralised system in which the deaths of every Muslim in Britain can be recorded.

With an increasing reliance on technology, it is essential that support is provided to those who are not technologically literate in order to help them to access services and programmes that have now moved online, and that those who do not have IT resources but are in need are recognised and supported. Community members should be encouraged to keep up their regular donations to their mosques, Islamic institutions and other charitable causes online to help ensure the long-term financial sustainability of these institutions which are at the heart of the lives of so many Muslims.

Furthermore, it must be ensured that every segment of British Muslim society is aware of and understands the public health messaging in order to keep safe. Alternative methods of communication should be explored, including translating all key public health messaging into community languages, having this relayed by Imams and community leaders from the pulpit, facilitating conversations between Muslim healthcare professionals and community members to directly answer questions and provide a greater understanding of the measures that must be taken to remain safe. This is not an exhaustive list, and more work should be done to evaluate the efforts thus far, recognise the gaps and devise solutions to continue to confront the pandemic together.

While this report seeks to showcase the various ways Muslim communities have been impacted by the pandemic and the myriad of incredible grassroots initiatives to address the challenges of the pandemic, there will be untold stories and efforts within the communities which are impossible to capture fully in a single report, but have indeed been invaluable in their response to the crisis. The MCB recognises the contribution of all individuals and communities who have served and played their part, large or small, as this has indeed been impactful.

The Qur'an and *Sunnah* (prophetic actions) of Prophet Muhammad (peace be upon him) teach the value of resilience in times of adversity, both as individuals and communities. We pray to Allah to give strength and patience to all those dealing with the effects of COVID-19, who have lost loved ones, and who are going through tumultuous times. We pray He makes this an opportunity to strengthen British society, and He grants us many more opportunities to serve our communities and help one another.



Thank you

to our amazing NHS staff

#thankyouNHS

JCDecaux



Lift

12:42:52

Toilets



information

Thank you  
to our amazing NHS staff  
JCDecaux

WELCOME



↑ Underground  
↑ Overground  
↖ Toilets  
← Toilets Accessible, baby  
↑ Lift Way out, Underground  
↑ Way out  
By platform 10  
Lost property by platform 10

↑ Underground  
↑ Overground  
↑ Stansted Express tickets  
↑ Tickets  
↑ Travel and tourist centre  
↑ Lift Way out, Underground  
↑ Way out  
By platform 10  
Lost property by platform 10

# Appendix A

Since the outbreak of the pandemic, Muslim Charities Forum (MCF) collaborated with the Muslim Council of Britain (MCB) to compile and collate the various Muslim-based community initiatives and responses to the pandemic across the UK. This appendix documents the initiatives collated by the MCB while the wider list can be found on MCF's website. At the time of writing, MCF has collated 231 organisations who have responded to the crisis, of which many can also be found on their website.<sup>88</sup>

The following Muslim-led organisations have set up community initiatives or specific projects in response to the pandemic. The services offered range from food banks and emergency supplies, personal protective equipment to hospitals and funeral directors, laptops for children completing their schooling from home, daily *iftar* meal during Ramadan, emotional support through a buddy system, and much more. For more information about these organisations and the work they are doing, visit: [www.muslimcharitiesforum.org.uk/covid-19-resources/localaction/](http://www.muslimcharitiesforum.org.uk/covid-19-resources/localaction/)

## LONDON

Islamic Help  
KSIMC of London  
Muntada Aid  
MindworksUK  
NADI  
SWAN  
Yaseen Youth Tours  
North London Muslim Community Centre (NLMCC)  
Sufra NW London:  
The Breaking Bread Trust  
Aishah Help  
Eden Care UK and Muslim Burial Fund  
Masjid-E-Quba  
One Unity Foundation  
PL84U Al Suffa  
Quwwat UL Islam Mosque  
Sunnah and Self-Esteem  
Al Manaar  
Gulham Trust  
Hand On Heart WWP  
WF-Aid  
Sri Lankan Muslim Cultural Centre  
Al Nagashi Mosque and Centre  
Jamaa'tul Ahli Llahi  
Lewisham Islamic Centre  
Old Kent Road Mosque  
Purley Masjid  
Tooting Community Kitchen  
The Lateef Project

## SOUTH EAST ENGLAND

Maidenhead Mosque  
Masjid al Jannah  
Karima Foundation  
WISE Masjid as-Salaam  
Seerah Today  
Road Reps & Mutual Aid Community Initiative  
Kent Muslim Welfare Association  
Shah Jahan Mosque

## WEST MIDLANDS

As-Suffa Outreach  
Bahu Trust  
Birmingham Central Mosque  
Green Lane Masjid  
Islamic Help  
Islamic Medical Society of University of Birmingham  
The KSIMC of Birmingham  
Solihull Muslim Network

## EAST MIDLANDS

Peace Centre  
Himmah  
Jamahly Community Nottingham  
Nottingham Muslims Care

### **EAST ENGLAND**

Cambridge City Foodbank  
Colchester Islamic Community Centre

### **YORKSHIRE AND THE HUMBER**

Al Mahad Ul Islami & Masjid Noorul Islam Community  
JKN Outreach  
Human Relief Foundation  
Masjid-e-Madani  
Masjid-E-Umar  
Muslim Women's Council  
Muslim House of Welfare Trust Sheffield  
Save the Mothers Trust  
Serving The Creation Foundation  
SKT Welfare  
Zakaria Masjid

### **SCOTLAND**

Taught By Muhammad  
World Care Foundation  
Jannah Charity  
Kirkcaldy Mosque and Community Centre  
Glasgow Central Mosque  
Masjid Al Furqan

### **WALES**

Al-Ikhlâs Centre

### **NORTH EAST ENGLAND**

Islamic Diversity Centre  
Newcastle Central Mosque

### **NORTH WEST ENGLAND**

Al Madeenah Educational Trust  
Barakah Food Aid  
Bolton Council of Mosques  
Bury Active Women's Centre  
Cheadle Mosque  
Homeless Aid UK  
Manchester Islamic Centre  
Manchester City Council  
Neeli Mosque  
Penny Appeal  
Planet Mercy  
Route 99  
Supporting Sisters  
Tameside COVID-19 Emergency Response  
The Myriad Foundation  
Abu Faisal Trust  
Benefit Mankind  
Madrasah Zeenatul Quran  
Masjid-e-Sajadeen  
Masjid-e-Anwaar  
Masjid-e-Raza  
Lancashire Council of Mosques  
Quwwatul Islam Mosque and Madrasah  
The Bhaja Initiative  
The Outreach Project  
Imam Mahdi Awareness Campaign  
Guidance Hub  
Khizra Masjid  
Preston's Promise

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