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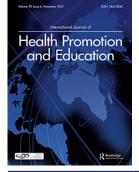
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Humanity was already facing ever increasing inequality and accelerating threats to our planet before we were devastated by COVID-19 and its containment measures: perfect storm or the opportunity of the 21st Century?

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Welcome to this final issue of 2021 and the last in our series of guest editorials that have highlighted the complex health, economic and social impacts arising from the COVID-19 pandemic. The five themes set out in issue one have suggested a reframing of the pandemic as a syndemic, reminding us of the importance of health promotion linked to the complexity of human health and the essential interconnections between people and planet.

By the end of the 20th century, humans were struggling to come to terms with the impact of their activities on planetary boundaries. While there has been some success in addressing stratospheric ozone depletion (Weber et al. 2018), concerted action on climate change has proved much more difficult (IPCC Report forthcoming). Meanwhile, protecting biodiversity is almost too big a challenge for humanity to understand (IPBES report 2019) and, waiting in the wings, are the related challenges of a runaway nitrogen cycle, ocean acidification and pollution, deforestation and other land-use change along with collapsing freshwater supplies (Steffen et al. 2015).

On top of this, the world then had to face, the rapid spread of COVID-19, a largely predictable zoonotic pandemic. This has almost certainly been sourced by our pressures on planetary boundaries such as deforestation and changes in agricultural land use forcing subsistence farmers into close contact with undomesticated wildlife and driving up the illicit trade of rare species (WWF 2020). The difficulties in implementing control measures have been fermented by 21st-century behaviours and economies such as wide-spread international travel, global trade systems and high-density urban lifestyles (Independent Panel for Pandemic Preparedness and Response 2021).

While we are still assessing the impact of COVID-19 on different groups and communities, it is apparent that some groups have been more vulnerable (PHE report 2020) and some countries and regions have suffered more than others. For example, some middle-income countries (Peru, Hungary, Brazil, Bulgaria, Columbia and Slovakia) have had both very high mortality rates (per 100 K population) and also high case fatality rates with a smaller number of high-income countries (Belgium, Italy, UK and USA) not far behind (John Hopkins, Coronavirus Research Centre 2021). For low-income countries,

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This is an Open Access article distributed under the terms of the Creative Commons Attribution-NonCommercial-NoDerivatives License (http://creativecommons.org/licenses/by-nc-nd/4.0/), which permits non-commercial re-use, distribution, and reproduction in any medium, provided the original work is properly cited, and is not altered, transformed, or built upon in any way. where case ascertainment may be poorer, disease control is compounded by a slower pace and poorer quality of vaccine programmes, especially for many African and Asian countries (Our World in Data 2021).

There are some who argue that only major catastrophes can seriously change economic inequality (Scheidel 2017). Therefore, it could be that national and international strategies across COVID-19 recovery, climate action and biodiversity will determine whether COVID-19 results in further acceleration of inequalities or our best opportunity for tackling institutional inequalities since the last great catastrophic era (two world wars sandwiching a lengthy global depression).

It is already apparent that the unprecedented measures to try and control the spread of SARS-CoV-2 have themselves had wide-ranging impacts on inequality and on the environment, many of which are difficult to quantify. It is worth exploring some of the more obvious impacts to see if this helps us to make more informed decisions about what sort of world we want to help evolve after both COVID-19 and COP26 (the key Climate Change conference held in Glasgow in 2021).

The first and most obvious area to look at is health and healthcare services. It has been apparent from the outset that some groups were much more at risk from COVID-19 than others. An early report from Public Health England (PHE Report 2020) showed that 'the impact of COVID-19 has replicated existing health inequalities and, in some cases, has increased them'. The risks of hospitalisation and of death from COVID-19 increased with age and was higher for males and for those in Black and Asian groups; furthermore, mortality rates in the most deprived areas were more than double the least deprived areas (PHE Report 2020). We also know that the pandemic will have had wider impacts than those due to COVID-19 morbidity due to disruption of health services and to health impacts of COVID containment measures. For example, an early study from Italy (Magnani et al. 2020), one of the countries badly affected by the first wave of COVID-19, showed a sharp increase in excess deaths, especially in the over 60 age group, and less than half the excess mortality was due to COVID-19 deaths. The disruption to health care services has been shown by a large number of studies including mental health services, noncommunicable disease, cancer diagnosis and treatment, childhood immunisation, family planning and contraception (IN WHO Global Pulse Survey 2020); it is likely that disruption of many of these services will have long term consequences for health inequalities.

However, it may be that the impact of both COVID-19 containment and COVID recovery on inequalities may be much greater in areas and sectors beyond healthcare (Aragon de Leon et al., Lancet Planetary Health forthcoming). While it is too early to assess these comprehensively, the areas with potentially greatest impacts on inequality include transport, education and childcare, nutrition and food supply, employment and work patterns.

A study in the UK (Marsden et al. 2021) of the impact of COVID-19 and containment on transport showed that there have been big increases in walking since the beginning of the pandemic – with 20% more people continue walking regularly – and there have also been increases in cycling; apart from the fitness benefits of improved activity, there has also been evidence of improved air quality (Jephcote et al. 2021) although the impact was modest and the authors suggest that 'sustained improvements in air quality require actions across various sectors'. There has also been a marked decline in journeys by public transport, where 60% of bus passengers say they have no alternative transport for their journeys (Marsden et al. 2021). It is difficult to assess the final impacts on health inequalities; however, walking and public transport have always been more accessible to low-income groups, so there are potential gains and risks to health equity from these changes. International data showed a 60% decline in passenger air travel in 2020 but evidence that this is bouncing back sharply in 2021 (International Civil Aviation Organisation 2021), suggesting that the potential benefits of reducing greenhouse gases and transport inequalities might be rapidly reversed.

Both complete and then partial school closures have been widespread across the world as a response to COVID-19 (UNESCO website 2021). UNESCO have also looked at the impact of school closures on learning and how these can be offset by adequate catch-up strategies; this shows that lack of adequate space for home learning and poor internet access reduce the opportunities for disadvantaged children to engage in catch-up programmes. (UN CCSA 2020). This is particularly marked for young people who are forcibly displaced such as internal refugees. There are also concerns about negative developmental affects and poor mental health from prolonged periods of isolation and of risks of increased domestic abuse, especially for vulnerable children and women (UN CCSA 2020).

While there has been less disruption to food supply from COVID-19 than was initially feared, it has raised awareness of the key role of low-paid workers in agriculture, food supply and retail sectors (International Panel of Experts on Sustainable Food Systems 2020). Both anxiety about the risk of infection and concerns about the closure of outlets (temporary or permanent) is likely to have caused economic hardship and adverse mental health in low-paid and insecure workers (Rosemberg et al. 2021). There has also been increased interest in urban farming (Evans and Davies 2020) whether in private gardens, allotments or public spaces (building on the international success of the 'Incredible Edible' movement (Giacchè and Porto 2018)).

Finally, employment and work patterns have seen major changes as a result of COVID-19 control measures. On the one hand, there has been increased insecurity for workers in many sectors, a trend towards homeworking (especially among professional groups) and some large shifts to online transactions and home delivery. On the other hand, there has been an increased awareness of the value of some key jobs not just in health and social care but also in vital retail services and transport, which might not have previously been recognised as key workers (Aragón de León et al. forthcoming).

Can we use the COVID catastrophe to simultaneously reduce inequality and better protect the planet for future generations? The first answer is that we will need the greenest of recoveries with prioritisation of action to halt greenhouse gas emissions and prevent further loss of biodiversity; we dare not support practices that have led us to the brink of environmental chaos. For transport, this means support for policies that enable and normalise walking and cycling rather than road infrastructure and air travel. For nutrition it means less meat consumption and a return to more local and seasonal produce; we may have to pay a little more for sustainable food but we can waste a lot less and more of our money will remain in our local economies. For the new world of work, this will mean more digital interaction, less commuting and business miles and it may 340 🛞 S. MORTON AND M. BAYBUTT

mean more social investment close to where we live rather than where we work; crucially it also means we need to value the contribution of our work to local communities rather than the profit made for major companies.

However, the second answer is that we cannot make the radical changes we need without addressing the current underlying inequalities that have helped to drive this environmental destruction (Carney, 2021; Jackson 2009; Raworth 2017). Put simply, if we are to reduce our exploitation of the earth's resources, we have to share the reduced resources more equitably. This means the world of macroeconomics cannot continue as it is after the COVID catastrophe if humankind is to survive but changing this will require vision, courage and persistence.

Disclosure statement

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