



## The devastating blow in residential care for elderly in Europe

The group of people identified as the most at risk for COVID-19 in all countries of the world were the elderly. Seniors are the largest target group of social services - homes for the elderly, care services, respite care, day care and other types of services. And it was these services, their clients and employees that faced the greatest pressure. It was a test that they had never faced in their existence up to now. How did the global pandemic affect social services in Europe?

### Increased deaths of seniors

The European Surveillance System (TESSy) showed an increased number of hospitalized people over the age of 50 with a significantly higher proportion of people over the age of 65. According to TESSy, the total number of deaths from the COVID-19 viral disease was 44% in the age group of 65-79 and 46% in the age group of people who were over 80.

The London School of Economics and Political Science conducted a mortality survey in care and nursing homes in a total of ten countries (Australia, Belgium, Canada, France, Germany, Hungary, Ireland, Israel, Italy, Norway, Portugal, Singapore, Spain and the United Kingdom). What were the results of this survey? In the countries studied, the proportion of coronavirus-related deaths in the elderly (65+) ranged from 19-72% in care and nursing homes. Compared to these countries, the percentage in the Czech Republic is "only" 24%.

### The speed of lightning

In the Czech Republic, the first unconfirmed cases of a COVID-19 positive client appeared in nursing homes in February. The first confirmed case was then proven on 18th March. Three weeks later, twenty facilities reported infected clients. The total number of infected quickly exceeded 200. Eventually, this number later peaked - over 300 confirmed cases occurred and more than 40 people died.

Yet we were one of the more fortunate countries. In May, France reported infected elderly people in 4,367 care and nursing homes. Germany reports 22,071 elderly infected with coronavirus in care and nursing homes and similar facilities. Belgium states that from the total number of 9,052 COVID-19 that are fatally infected, 51% are from long-term care providers. Spain also reported 17,730 cases from a total of 5,400 care and nursing homes in May which represents 66% of all fatal cases.

### The biggest problems and mistakes... they forgot about us

The whole period of the crisis was marked by a lack of information. There was a lack of information, recommended procedures, innovative solutions, preventive procedures, etc. Every health or social service provider tried to obtain the necessary information. The lack only proved how unprepared we were.



Professional associations, professional societies and individual providers communicated together intensively not only within Europe but also around the world. The European Ageing Network (E.A.N.), as well as the Global Ageing Network (G.A.N.) held regular online meetings with two main goals. The first was to find out the real situation in other countries and thus be able to better anticipate developments in their own country. And the second, more importantly, was to get information about possible solutions, ideas and approaches.

However, these meetings had another key reason. To discover and identify any possible mistakes and bad decisions or mistakes that had taken place in individual countries. Some of these were heard again and again - lack of protective equipment, hospitalization of all infected, and thus congestion and collapse of the health system, underestimation of the whole situation, etc.

However, one mistake was repeated in all participating countries independently from each other. In Spain, France, Austria, Switzerland, the Netherlands, Portugal, but also in Australia, Africa, America, Canada or Slovakia and the Czech Republic. What was the mistake? What was the lament of all countries from social service providers, old people's homes, care services, long-term care facilities and others around the world? "They forgot about us - we were left behind!" It was too late for the governments of the countries (central or regional) to remember that in addition to hospitals and health care, there was a social services system that looked after and cared for the most vulnerable group of seniors.

This situation is special and significant at the same time. How is it possible that the social sector has been forgotten all over the world? Does it have a common explanation? Yes, it does. It has been forgotten because it has previously been "invisible" to these national governments and even to the European Commission.

And what is the "European evidence" of neglect of the social care sector? Here are three examples:

1. The European Commission, or more precisely its chairman, Ursula von der Leyen, set up a Coronavirus Response Team to try to solve the impact of the pandemic on Europe besides other things. But, the Commissioner for Social Affairs, Nicolas Schmit, remained on the doorstep. He is not represented at all in this "rescue team".
2. The European Commission has launched a rescue investment fund to mitigate the effects of the coronavirus crisis - **Coronavirus Response Investment Initiative Plus** - in the amount of up to 37 billions Euros. However, the possibility of using social services is still zero.
3. Although social services are a key sector in Europe with 5% of all employees specifically over 11 million workers, the European Commission is reluctant to allow the establishment of a European Social Dialogue Committee in social services.

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### The opportunity for change

Every crisis and every mistake is an opportunity for change, a lesson that will lead to greater preparedness if a similar situation occurs again. If we talk about using the opportunity for positive change, I certainly do not mean the cries in the media of pseudo-experts presenting confident opinions about what should have been done differently or putting down proposals without deeper reflection and consideration. One of them also appeared in the Czech Republic. Due to the fact that 25% of all deaths of elderly in the Czech Republic were in nursing homes, he was considering whether or not these facilities should be abolished in the future. We know that 90% of all deaths are amongst people over 65. We know that the average age in care and nursing homes in Europe is around 85. Age and chronic diseases are the common denominator which means that the people in care and nursing homes are the ones at risk. By this logic, we could conclude that because two-thirds of people die in hospitals, we should solve this "problem" by abolishing them.

On the contrary, without a doubt, using the opportunity is rational consideration such as a rapid global survey intended by European and World associations. On the basis of its results, there will be concrete proposals for measures that will lead to greater preparedness for something that no one expected at such speed and intensity and that could have not even been prepared for and similar crisis situations as we experienced with COVID 19. Finally, let me emphasize one more aspect of the opportunity we have or will have after overcoming the current crisis. That is the potential of our teams across professions. Obviously, even bold goals can be achieved with people who, in the most difficult moments, willingly sought solutions and used all their strength wherever necessary. And for that, I thank our teams.

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