

## The coronavirus crisis and its impact on residential care homes for the elderly in Spain

*The scale of the crisis.* Between March 8 and April 27, 2020, an estimated total of 23,521 people died of coronavirus in Spain. This is a provisional figure, as it is still necessary to ascertain the population that in fact died at home from coronavirus or compatible symptoms. Of this total, 15,886 were people who lived in residential care homes for the elderly and the disabled, in other words, 67% of those who died, the vast majority of whom were elderly individuals. Half of them died in Madrid and Barcelona (49.8%). This information is still provisional and as yet unconfirmed since it is reported by the 17 Autonomous Communities or regions that handle the social services. The magnitude of the impact of the pandemic on the elderly population is a dramatic event, which has affected around 3% to 4% of the population in residential care homes. It is an impact that is highly similar to that of other European countries.

*What are the causes of the differential impact on residential care homes?* It is an indisputable fact that the pandemic has had a major impact on the elderly population with multipathologies. However, there are immediate and indirect causes that explain this differential impact on residential care homes.

Among the immediate causes are: neglect and discrimination of the residential care home population caused in part by the initial overwhelming of the hospital system; but also by an insufficient structure of human and material resources; and, lastly, by a clear lack of control over the public and private residential care home sector by the regional Administrations at the onset of the crisis.

Among the indirect causes, it should be highlighted that the crisis has revealed the shortcomings of the residential care home “offloading” model in which people’s preferences and autonomy tend to be of secondary importance and a professional structure is in many cases deficient. This does not mean that the need for residential care homes as a welfare resource is negated. In fact, part of the Spanish residential care home sector is innovative and of high quality. It is a question of adapting them to a model of care centered on the individual, with adequate services of prevention, nursing and physiotherapy. It is not a question of “sanitizing” the residential care homes but rather that the residents should have access to the hospital and outpatient system without discrimination, be able to count on a residential social and health care structure with the capacity to react in crisis situations and to guarantee control by the Public Administration of the quality of care<sup>1</sup>.

*A change in the model of care is needed.* The coronavirus crisis in Spanish residential care homes has reopened the debate on how to reform them and, above all, how to define quality care and sustainable models. The debate has been going on for some time, promoted by a growing number of social service professionals, gerontologists and geriatricians. This change has resurfaced with the coronavirus crisis<sup>2</sup>. It calls for a change of approach and an operational change.

The change of approach implies the design of policies and models of comprehensive and people-centered care, acknowledging their full diversity and autonomy. The operational change consists of adapting the residential care homes towards a model of small, home-like units. Furthermore, as most people prefer to live at home, it is necessary to continue promoting a coherent model of home and community services that attend instrumental and emotional needs, thereby avoiding isolation and loneliness.

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## References

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