

Corona crisis part 2 (with a request to respond)

Looking for paths towards 'a new normal'

Dear Colleagues and Friends,

In April we sent you a Newsletter focusing on the Corona crisis and the measures taken to overcome the crisis, to protect ourselves and others.

We underlined the importance of equal rights and adequate medical care for older persons, highlighting that 'we all have equal rights, regardless of age *and these must be equally protected during the pandemic*. Advanced age should never be by itself a criterion for excluding persons from specialized care.'

In this issue we are looking ahead, as all governments all looking for measures to lift the lockdown. We know that this step-by-step looking for paths towards 'a new normal' will take a lot of time. Meanwhile, we need to think about today and about tomorrow, about how to build a 'post-pandemic world' together....

But now, let us concentrate on the 'step-by-step lifting of restrictive measures' and look at some specific needs of seniors.

We repeat our request: send us your reaction to this newsletter (and to the previous one) and we will share it in one of the forthcoming ~~next~~ newsletters.

As we hope everyone can find reliable information (facts and figures) about the pandemic and the developments in several countries, we would ask you to concentrate on problems, good practices and the opinions of senior generations.

- *What are/were some of the main challenges during this crisis, especially for seniors?*
- *Are there positive solutions that have been put forward that could lead us also in the future?*
- *Are there particular stories you would like to highlight?*

We thank you for reading this newsletter and await your reactions.

Kind regards,

An Hermans

Solidarity needed for a coordinated European exit and recovery strategy

In Europe, we can only recover together. We need a strong European-wide response to overcome the corona crisis and to give a common resilient response to the immense economic, social and societal challenges. No one country can respond solely to the problems, even cooperation between Member States is not enough. We need the EU playing an effective and visible role in leading the common strategy, developing a contingency plan, coping with the challenges in several fields and giving citizens the trustful feeling that the EU, governments at all levels and all stakeholders are acting together to create solutions.

After a lot of discussions and communications, meetings of the EU parliament, several video conferences of the EU Council, agreements on important initiatives, an 'EU Roadmap to lifting containment measures' is almost finalised. It is aiming for a well-coordinated approach in the EU and among all Member States, ensuring EU-level and cross-border coordination, while recognising the specificity of each Member State. Several initiatives need to be operational very soon (1st June): therefore the Commission will 'fine-tune' some of the initiatives and clarify the links with the EU Multi Annual Budget. See : https://ec.europa.eu/info/sites/info/files/communication_-_a_european_roadmap_to_lifting_coronavirus_containment_measures_0.pdf

The European policy-making mostly develops slowly and, although policy-makers work hard, decision-making takes a lot of time. Also in this time of 'emergency'...because of the lack of a well-oiled contingency plan, member states resorted to reactions such as closing their borders, refusing to share prevention equipment etc. And... citizens often had the impression that Europe was absent, or at least invisible, while the media focused on the spread of the disease in the own countries.

Citizens hope that we will overcome this crisis together, therefore we need Europe, acting in solidarity 'with one great heart' as EU Commission President Ursula von der Leyen said. This is what citizens expect and deserve.

Seniors looking ahead towards 'a new normal'...

Although all age groups are at risk of contracting COVID-19, older people face significant risk of developing a severe illness if they contract the disease, due to the physiological changes that come with ageing and potential underlying health conditions.

The World Health Organisation, as well as the EU and all governments have underlined:

- older persons' rights to receive the health care they need, independent of ~~from~~ age;
- the need to act in solidarity and in a responsible way to prevent the community spread of the virus;
- to stimulate healthy living and regular social contact with older persons to prevent isolation;
- to support health and social care workers who provide nursing and social care services for older people;
- to give special attention to older people living alone in the community to provide them with the necessary services...

Now that the spread of the disease seems to be diminishing, new measures need to be imposed or proposed, so that businesses, workplaces, shops... can reopen and societal life-slightly can be restored slightly. Although measures are taken carefully, it seems often a process of 'trial and error' because even the most competent scientists and planners have never had to act in a similar societal context. And again: we are all involved.

Also in this new period, the rights of older persons must be adequately protected in COVID-19 exit strategies. Special attention and support is needed to analyse the possibilities for lifting confinement measures in nursing/care homes which lacked protective equipment, and updated hygiene routines.

Governments and persons involved in the organisation of the 'exit strategy' need to take into account:

- the obligation for seniors to stay longer in confinement, only with reference to their age (70 ? 80 ? 60 ?) without taking in account their health condition seems not to make much sense;
- seniors living in isolation and loneliness, cut off from their loved ones in residences, or living in their own houses have suffered and all kind of creative forms of communication cannot replace trustful human contact;
- the lifting of the confinement measures and the 'step by step' participation in public life can have an impact on people in vulnerable situations, such as persons with an underlying health condition (e.g. cardiovascular disease, diabetes, chronic respiratory and cancer diseases), persons who are diagnosed or with mild symptoms and/or many older persons ; we are sure that all these groups will act with great caution and take precautions and that people's judgment will be the criterion, not just age.
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Whatever measures individual Member States will take, they should be assessed from the perspective of people's well-being and human rights considering all possible implications of the prolonged confinement. Considerations that it would be a good thing that older persons – with reference only to their age – need to be isolated for a longer time, maybe until the end of the year, meet a lot of criticism. In the first place among older persons themselves. "We've been forgotten", they say. They have the feeling that they are isolated in the waiting room while gradually all other groups take part in active life. Here too, the older persons want to participate in society. This participation is crucial for their wellbeing, for their health, for their existence as human beings.

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