

# Guest editorial

Simone Bacchini

## Our special issue on Covid-19

It has now become a cliché to say that 2020 has taken us all by surprise. Pandemics are nothing new, but for most of us alive today, COVID-19 has been – still is – the gateway to a new, unwelcome reality to which we are all still trying to adapt, and with which we are still coming to terms.

No two pandemics are alike. The current one has proven to be particularly dangerous for older people, as well as those with pre-existing conditions and members of ethnic and minority groups.

Many of us still remember the early days of the crisis, when politicians and commentators seemed to suggest that, because the virus appeared to be particularly dangerous only for the older segment of the population, as well as those with existing morbidities, we need not worry too much. For those of us interested in the discourse around age, ageing and older people this was immediately a worrying sign.

In the UK and elsewhere, the notion of herd immunity was floated, almost casually; with it came the corollary that many would die. On 12 March, at a press conference, Boris Johnson, the British Prime Minister, infamously announced, “I must level with the British public: many more families are going to lose loved ones before their time.” But we soon realised that that very same people were our grandparents, our parents; they were family members, friends, and loved ones. As the coffins started to emerge in large numbers from care homes and overfilled hospital wards, we all had to stop and take notice.

As societies, we will be discussing at length (I hope) the wisdom of discharging older COVID patients into ill-equipped care homes where, despite the often valiant efforts of staff and managements, the virus spread rapidly, and the death toll increased.

We will also continue to reflect on the consequences of social isolation, combined with the consequences of poverty and of years of cuts to public services, on the health and well-being of older citizens.

As many noted, the pandemic made more apparent a number of problems in social and health care that have existed for a long time. Far from being a great equaliser, COVID proved to be particularly dangerous for the members of our societies that are already at a disadvantage because of existing social, financial, health and racial inequalities.

Without wanting to find the positive in the face of any challenge (the glass, sometimes, is really only half-empty), the pandemic also showed the possibilities and the advantages of social inclusion and cooperation. For those of us who have been advocating for a long time in favour of bringing down the artificial barriers that exist between “old” and “young”, the lockdown period proved the value, and the possibility, of intergenerational cooperation.

The often overlooked role of grandparents as informal carers for their family member and in providing child care can no longer be ignored. As well as the crucial role played in every society by so-called “unskilled workers” (cleaners, cashiers, drivers, hospital porters and the other many professions that are constantly undervalued, only to “discover” that they are, well, rather essential), the important part played by older people – unpaid and unrecognised – in allowing our complex societies to function has been brought to the fore. Hopefully, it will not

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be forgotten, and it will help us to view older people not only as receivers of care but as active, essential providers of it.

Many older citizens have enthusiastically embraced technology. They did so to remain in contact with their loved ones but also to offer support. Grandparents began offering support to their grandchildren by helping them with their schoolwork, via Zoom and other platforms. Some offered to sew much needed uniforms for health and social care workers. If proof was needed that any separation between “us” and “them”, when it comes to social cohesion and general societal wellbeing is concerned, this was it.

We at *Working With Older People* wanted to offer a platform to show the many challenges and the opportunities brought to life by the pandemic. We wanted to bring voices together, to share experiences, encourage and inspire each other as we continue to face a situation that is ongoing and may even get worse.

The response to the call for papers was phenomenal. We witnessed a huge interest and a large number of submissions.

Exceptionally, the issue that is now before you contains ten contributions. For many others, there simply was not enough space; they will, however, find space in subsequent issues and, as usual, will be available on the EarlyCite system. We are extremely grateful to all the contributors, to their testimony and their work.

The special issue opens with a touching, personal testimony by Tina Wallace on losing a parent during lockdown. Her contribution is testaments that behind the daily figures of deaths, infections, and hospitalizations, there are human stories. Stories of love, resilience, pain and personal struggle.

We then discover some of the possibilities than museums have found for working with older people during the pandemic. We get a glimpse of the toll of the pandemic among the 65+ population in Turkey, a reminder that, being a pandemic, all countries and societies have been affected. The role of technology in addressing loneliness during the pandemic is addressed by Sonny Patel and his colleagues. Adalberto Fernandes takes us to Portugal, highlighting older people's sacrifices as a result of the crisis. Ellery Altshuler discusses how misunderstandings about older people fuel complacency, in the fight against COVID-19. However, ageing can still be successful – even in these most unusual times – Lukas Richter reminds us in his contribution. The particular challenges of older people in developing countries face are discussed by Setayesh Sattary. The role of social work assessments for older people with advanced dementia in the times of the “new normal” is presented by Hilary Wilson. And the special issue concluded with an assessment of COVID-19 and the gender infectivity–mortality rate in Pakistan.

I am truly grateful to all our contributors and the editorial team at Emerald. Putting together a special issue is always demanding, particularly so because of the restrictions imposed by lockdown and other measures.

As editor, my hope is that this special issue, and our journal in general, will contribute to help us work for the benefit of older people, and *with* older people. To learn from them and with them because, as it should be obvious by now – but too often is not – older people, far from being a burden, are indeed a precious resource. There can be no “us” without “them”.