

# Guest editorial

Bridget Penhale and Margaret Flynn

In this final issue for this calendar year we are delighted to present a Special Issue of the Journal of Adult Protection. The issue contains an original collection of papers concerning issues covering the broad area of violence, abuse and safeguarding during the Coronavirus-19 pandemic, together with consideration of some of the implications of such events for policy, practice and research in this area.

Across the world, people continue to share their lives with the potentially deadly virus, COVID-19. Countries are still developing and adapting their management of the threat(s) posed by the virus, with further periods of major restrictions on daily life including lockdowns occurring again in many places as winter approaches across the northern hemisphere.

Few people could have predicted the upheaval brought about by COVID-19. Bereavements and their disparities – a disproportionate death toll on black and Asian ethnic groups, men, older people and those from the most deprived areas – compromised health, the synchronized shutdown of the global economy, job insecurity, strained household incomes, and physical distancing requirements. Add to these travel restrictions, cashless payments, workforce practices, the challenge of maintaining behavioural changes and other disruptions to our day to day lives arising from the crisis: all of these lead us to question whether these impacts are potentially permanent. The pandemic has seen neighbourhoods and communities pulling together, it has advanced digital and technology trends and low carbon developments, which may potentially point to a more sustainable future. However, since crises and recessions cause disruption and uncertainty, not to mention delay and prevarication, their impacts are profound for our unequal, multi-ethnic and mobile societies. There is emerging evidence that the mental health consequences include suicidal behaviour and yet disincentives to seeking and accessing help prevail [1].

Thursday 10 September was World Suicide Prevention Day. Suicidal behaviour is pervasive and persistent. While understanding suicidal risk factors is deepening and there are excellent materials to promote a sense of connection [2], the testimony of two Singaporean mothers clearly conveys their raw suffering and desire to prevent other families being condemned to their pain. Their message to young people is: “Please stay” [3].

On 3 July 2020, the Office for National Statistics released figures concerning the deaths of care home residents in England and Wales between 2 March and 12 June. Of the 66,112 deaths (wherever the death occurred), 19,394 involved COVID-19. That is 29.3% of all deaths of care home residents. The opportunity to do more than clap for carers came and went during May with the UK government’s immigration bill to repeal the EU freedom of movement. Now migrants must have a job offer with a salary of more than £25,600 – insulting care workers and all employees designated as “unskilled” despite the multitude of contributions to quality of life and wellbeing of thousands in the UK health and care sectors. Although care homes were not provided with adequate PPE, the Prime Minister stated that “too many care homes didn’t really follow the procedures [ . . . ]” [4] Recruitment crises are familiar to the care home sector with its demanding work and low pay and status. In addition, some of the home care sector’s essential workers are subject to precarious working conditions with zero-hours contracts. It takes a pandemic to reveal that the poor working conditions of undervalued workers pose a lethal threat to all of us and a boon to tyrants and bigots the world over.

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The UK government has been overriding rules for public procurement of items deemed essential because of the emergency of the pandemic and private companies are benefitting from generous terms which very much appear to favour the pals of politicians [5] [6]. Full details of the contract for £252m to Ayanda Capital for 50 million masks are not known. What is known is that these proved to be unsuitable for use by NHS workers [7]. Such contracts are valued at more than £5bn. As George Monbiot notes: “Transparent, competitive tendering is a crucial defence against cronyism and corruption. It is essential to integrity in public life and public trust in politics [..]” In addition, the person appointed to lead the national Test and Trace system and NHS Improvement had no prior expertise or experience in this area but is married to a politician who is the Anti-Corruption champion for the (Conservative) government.

Thanks to the actions of the UK footballer Marcus Rashford, families continued to receive free school meals during the school holidays in late July and August. His open letter to MPs resulted in a £120m summer school fund – shamefully, only after his persistence and extensive public support. He has donated his time and money to the FareShare charity which fights hunger and food waste in the UK because he grew up in poverty. His eloquence and tireless campaigning are inspirational. Further attempts to secure free meals for children in need during the October holiday from schooling (last week in October) failed to bring any action by government but widespread condemnation of such a stance by government and concerted actions by organisations, particularly in the hospitality sector, to ensure that meals were provided for those most in need.

Much is still to be learnt about the most effective responses to the crisis; this includes professional practice in the health and care sectors. The impact of measures such as lockdown(s) and social distancing would appear to pose a significant threat to the relationship-based skills on which human services work has traditionally relied and the importance of this has been reasserted over the past decade. Some of the changes that have been introduced include essential home visits requiring the use of visors and other personal protective equipment; the prohibition of supportive touch with individuals who may be fearful, distressed or confused; the use of online meetings and video conferencing that have developed to replace multi-professional decision-making fora generally perceived as potentially more inclusive and supportive. All of these changes and adaptations challenge modes of interaction which have traditionally existed and are preferred. However, not all is entirely negative, as bureaucracy has been and is being reduced and rather more efficient ways of working have been developing.

In this issue, we are pleased to provide six papers concerning different aspects of violence, abuse and adult safeguarding within the context of the pandemic from a number of countries across the world (Canada, Ghana and Turkey as well as the UK). All of these papers were submitted in response to a specific call for papers in the early summer for a Special issue on safeguarding within the context of the pandemic. The call resulted in quite a large number of submissions and we are pleased to say that there will be a further, second special issue on this topic published in the early part of 2021.

The first three papers in the issue have a major focus on issues relating to older people, whilst of the final three, one considers gender-based violence and the other two relate to safeguarding practices and the changes that have been wrought by the pandemic and are still evolving due to the nature of subsequent waves of COVID-19, which are now happening. Our first contribution, by Michael Lyne and Jonathan Parker from Bournemouth University is a policy paper that considers Advanced Decisions to Refuse Treatment within the context of COVID-19 and its transition into a matter of concern related to safeguarding. The paper aims to explore such decisions and their development within the broader context of the pandemic and then considers the implications of the changes that occurred. This is a conceptual paper that examines professional concerns that have been expressed about the use of such decisions and explores apparent misunderstandings for both professionals and the broader

public. Amongst the implications raised in the paper resulting from the current crisis are a need to increase awareness and reflective practice for professionals about these matters and to promote the centrality of the individual who is principally concerned in such decisions in all decision-making of this type in order to offer protection from potential misuse.

The second paper in the issue, from Ariel Tsiboe of the University of Southampton is a research paper that explores the experiences of the Coronavirus crisis by older people with disabilities who live in rural Ghana. This qualitative study used semi-structured interviews with a sample of older people living in Ghana and focused on their recent experiences in relation to the virus. The provision of care to individuals in need of support was adversely affected by measures relating to lockdown and this resulted in neglect of individuals' needs for different forms of support and at times even including access to adequate food. Even individuals who lived with other family members were subject to restrictions such as isolation, imposed in order to reduce, if not prevent, the spread of the virus to older people who were considered to be more vulnerable to and at increased risk of infection. The paper calls for the introduction of more formalised care and support services for individuals at increased risk from pandemic crises.

Our third paper of the issue is by Beaulieu and colleagues from the University of Sherbrooke in Canada and also focuses on concerns about older people during the pandemic. This review paper considers aspects of institutional care of older people during the initial stages of the pandemic across different countries, specifically relating to concerns about protective measures taken within care homes, the different types of mistreatment that occurred within care facilities and issues relating to the rights and dignity of residents. Information for the review was gathered over a 3 month period at regular meetings that were held for members of the International Network for the Prevention of Elder Abuse (INPEA). A specific survey of INPEA members that was undertaken during July demonstrated high levels of concern about increasing levels of ageism towards older people during the pandemic, the effects of the protective measures that were put in place (such as care homes being placed in lockdown) on residents and issues relating to systemic and management problems. Recommendations are made for action in the area of rights of older people, and specifically for care home residents.

This is followed by the fourth paper of the issue, by Ince Yenilmez of Yasar University in Turkey, and shifts the focus to a more general consideration of the (continuing) need to respond to situations of gender-based violence, particularly during the pandemic, when the number of people affected by such violence has increased, for a number of reasons, some of which relate specifically to the circumstances of the pandemic, such as lockdown and isolation of individuals which may result in confinement with a perpetrator. Although the focus of this review paper is Turkey, the papers analysed for the purposes of the review are from a broader sample and the implications of the findings are relevant in other countries and contexts.

Independent consultant Adi Cooper, from the UK provides the fifth paper in the issue. The paper provides a case study of the (care) sector-led response to the pandemic, with specific consideration of the situation of the first lockdown that occurred across the UK during spring 2020 and the implications of this for adult safeguarding, with a focus on what happened in the context of England both during the lockdown and the initial period afterwards. The paper provides detail on how safeguarding concerns (in the context of C-19) were identified and responded to and the resources that were developed to support such responses are examined. Although the paper refers to period between April and July 2020 recommendations of relevance to future waves of the pandemic are also explored.

The sixth and final paper in this issue also has a broader focus on adult safeguarding and is provided by Ann Anka from the University of East Anglia, and colleagues from Norfolk Adult Social Services and the university. This is also a review-based paper that considers the changes to safeguarding practice which have taken place due to the pandemic. The literature search (and review) that was undertaken accessed literature relating to

safeguarding adults/adult protection and the effects of the Covid-19 crisis both in the UK and more widely. This is followed by an exploration of the challenges and opportunities that have arisen as a consequence of the changes that have been made to practice. The review included consideration of legal and policy-related documentation in order to examine the developing knowledge about relevant issues, alongside gaps in practice. Recommendations that developed from the review comprise areas that appear to be in need of further development and research in future, particularly in terms of safeguarding practice(s) in emergency situations.

We hope that you will find much food for thought and interest in this special issue of the journal and are pleased to provide a reminder about the subsequent special issue on this topic, which will appear in the spring of next year. We hope that people can continue to stay healthy and safe and will join us again for the first issue of the coming year.

## Notes

1. Available at: <https://academic.oup.com/qjmed/advance-article/doi/10.1093/qjmed/hcaa202/5857612> (accessed 19 September 2020).
2. Available at: [www.nspa.org.uk/home/our-work/world-suicide-prevention-day-2020-2/](http://www.nspa.org.uk/home/our-work/world-suicide-prevention-day-2020-2/) (accessed 15 September 2020).
3. Available at: [www.youtube.com/watch?v=P1YKI\\_gu6wk](http://www.youtube.com/watch?v=P1YKI_gu6wk) (accessed 15 September 2020).
4. Available at: [www.channel4.com/news/factcheck/factcheck-no-evidence-for-johnson-claim-that-care-homes-failed-to-follow-covid-procedures](http://www.channel4.com/news/factcheck/factcheck-no-evidence-for-johnson-claim-that-care-homes-failed-to-follow-covid-procedures) (accessed 10 July 2020).
5. Available at: [www.ft.com/content/7fe7c2d5-24df-431b-9149-50417fa0236a](http://www.ft.com/content/7fe7c2d5-24df-431b-9149-50417fa0236a) (accessed 20 July 2020).
6. Available at: [www.theguardian.com/commentisfree/2020/jul/15/coronavirus-contracts-government-transparency-pandemic](http://www.theguardian.com/commentisfree/2020/jul/15/coronavirus-contracts-government-transparency-pandemic) (accessed 20 July 2020).
7. Available at: [www.theguardian.com/world/2020/aug/23/cross-party-mps-sue-government-for-details-of-covid-ppe-contracts](http://www.theguardian.com/world/2020/aug/23/cross-party-mps-sue-government-for-details-of-covid-ppe-contracts) (accessed 28 August 2020).

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