Europe Solidaire Sans Frontières > English > Europe, Great Britain > European Union > Countries (EU & co.) > Health (countries, EU) > Epidemics, pandemics (health, EU) > **Pandemic (Spanish State): Madrid's Covid Class War**

Interview

Pandemic (Spanish State): Madrid's Covid Class War

Tuesday 22 September 2020, by GILMARTIN Eoghan, GULLON TOSIO Pedro (Date first published: 21 September 2020).

In Madrid, authorities have imposed a new lockdown on 850,000 people living in the city's working-class neighbourhoods - the very places where key workers at the front lines of the virus are most likely to live.

"This is a form of class segregation. It is unjust and ineffective and cannot be tolerated."

So left-wing politician Íñigo Errejón responded to the decision by Madrid's conservative regional government to impose "targeted" lockdowns as means to control the surge in Covid-19 cases in the Spanish capital. The city and its wider metropolitan area has become the epicentre of Europe's second wave of coronavirus (recording 45,000 cases in the last two weeks) but in one of the most unequal and socially polarised cities on the continent, the new restrictions have been nearly exclusively imposed on low-income neighbourhoods in southern Madrid.

Under the measures announced, 850,000 residents will be geographically confined to the boundaries of their district but with exceptions made for essential travel such as work and education. The restrictions apply only in neighbourhoods with a two week infection rate of over 1,000 per 100,000 residents, such as Puente de Vallecas – which has the highest infection rate of any district in the European Union with 1.24 out 100 residents having tested positive for Covid-19 in the last fortnight. Primary healthcare has become overwhelmed to the point of collapse in such areas while hospitals have once again begun to come under massive strain with 87 percent of all intensive care beds occupied across the region.

Protests took place across the effected districts on Sunday morning – with participants calling for the resignation of the Partido Popular [PP] regional president Isabel Díaz Ayuso. Under Spain's system of devolved autonomous communities, each region runs its own healthcare system and since the end of the country's state of alarm in June, her administration has been charged with managing the capital's reopening. Coming to power after much of PP's regional front bench had been wiped out in various corruption scandals, Ayuso is widely seen as out of her depth even in her own party. Spain's Socialist Party prime minister Pedro Sánchez has also been criticised for his lack of action – seemingly content to allow his political adversaries to flounder.

Yet talking to *Tribune*, the Madrid based social epidemiologist Pedro Gullón Tosio insists that along with the PP's immediate mismanagement of the epidemic, the situation in Madrid also has to be understood in terms of structural inequalities and state failures associated with the region's longer term economic model. Since the early 1990s Madrid has acted as the Spanish right's neoliberal laboratory — its test case for a wider project for a new Spain, which has resulted in the progressive stripping of public resources and capacities in the region, as well as in widening the class divide.

A member of the board of directors of the Spanish Epidemiological Association, as well as co-author of the book Epidemiocracia with Javier Padilla, Gullón insists the new measures being imposed on Spain's capital amount to little more than an attempt to scapegoat some of the most vulnerable sectors of society.

Eoghan Gilmartin

Eoghan Gilmartin - Right now the working class neighbourhoods in the south of Madrid have an infection rate 3-4 times higher than in the more affluent northern districts. What are the conditions producing this differential impact?

Pedro Gullón Tosio - There are two key factors here: working conditions and housing. In terms of the first, the possibility of working remotely varies greatly depending on the neighbourhood. The Madrid city council published a recent study which showed that in richer neighbourhoods 70 percent of employees could work from home while in the worst hit districts in the south only 10-15 percent of workers were able to. As a result workers from the south of the city are in contact with many more people as well as tending to do the type of work that has a greater risk of exposure. They are also much more likely to have more than one job.

You also have to take into account questions of gender and nationality. There is a much larger immigrant population – coming predominantly from Latin America – in the south of the city. Many are working as care workers, cleaners, or in home help across multiple locations and so are much more likely to come into contact with the virus than an average middle class professional. The level of precariousness within such sectors of the population also means they feel less able to take sick leave if they fall ill- either because it is informal work or even if they are legally entitled to paid leave, they fear losing their jobs.

On top of this, if someone in these low-income groups then brings the virus into their home, their living arrangements means there is also a higher possibility that they will infect others. Overcrowding is not only down to housing in the south of the city being smaller, which it is, but it is also common that there is multi-generational occupancy or that there are two or three families living in the same apartment. I know of one case in the Usera neighbourhood in which there are currently four families living in the same apartment because of housing costs. If one person gets infected, it becomes nearly impossible for them to isolate themselves.

The sociologist and regional MP Jorge Moruno said yesterday that this second wave represents not only a failure of the Partido Popular's management of the crisis but also the failure of its broader model for Madrid. The party has been governing the region for more than 25 years - imposing a growth model that has seen income inequality sky-rocket and public services decimated. Can you talk about how these elements - the PP's neoliberal model and its crisis management - has impacted the trajectory of the pandemic in the city?

Yes. Look, many of the things that are happening in Madrid are not simply the result of the immediate handling of the pandemic but are down to longer term factors. Various studies have shown that Madrid is one of the most socially segregated cities in Europe – with the city polarised along class lines between north and south. This north-south axis also has a major impact in terms of health and life expectancy – with those in more affluent neighbourhoods living five or six years longer. The levels of obesity, diabetes and chronic respiratory conditions – which impact on the

seriousness of Covid 19 cases - are also much higher in the south of the city.

And clearly all this reflects the failure of a segregated, neoliberal model, in which one part of the population has to sustain the other and is forced to cross the city every day so as to provide low-paid services in the north. Yet while this socially imbalanced urban model creates more opportunities for outbreaks, there is a much greater possibility of controlling them – and of cutting the chance for community transmission – if you put in place an adequate test and trace system.

Health is a devolved power in Spain and some regions like Asturias, have used the months since the first wave to reinforce their primary healthcare capacity and hire contact tracers but in Madrid there has been a complete lack of action. Even after the first wave had revealed the vulnerabilities of the region's public health system, which has suffered among the deepest austerity cuts amongst Spain's regions, the PP-Ciudadanos coalition has continued with the same type of policies as over the last decade: prioritising investment in hospitals and the most technological aspects of the health system that generate large contracts for their corporate allies in the private sector while doing little to reinforce neighbourhood health centres or build up contract tracing capacity.

Ayuso's government waited until the end of summer to sign a deal outsourcing contact-tracing services [to corporate provider Quirón. In a region with a population of 6.6 million people, there are currently 800 contact-tracers according to the Madrid authorities but this figure is disputed]. Even the national government's offer to provide 2,000 contact-tracers from the army – at no cost to the region – has not been taken up because of political considerations. And so with existing services saturated and unable to cope, we are now looking at a situation of uncontrolled community transmission once again in Madrid.

How would you evaluate the new restrictions announced by Ayuso's government on Friday as a response to this?

These measures make no sense epidemiologically and are massively unfair towards working-class neighbourhoods in the south. On the face of it, they restrict mobility between districts but then allow for people to commute to work, which is the principal reason people leave their neighbourhood on a daily basis. Confining a geographically defined area only makes sense if you can control mobility in and out of that area (as in the case of locking down an entire town or municipality) but restricting mobility in a specific neighbourhood within a city where people are entering and leaving all the time is not possible. And so these types of measures are ineffective.

Beyond that, the selection of the neighbourhoods that would be placed under lock-down did not follow any clear public health criteria. There are other areas in the city which meet the criteria of 1,000 cases per 100,000 residents which have not been chosen and it is not clear why beyond a certain class bias. You also have the absurd decision to encourage indoor gatherings by closing all public parks in these areas while leaving bars open.

Instead the two things we need to be doing are reducing activities that produce a large number of contacts and a rapid and massive investment in contact tracing. But these measures offer nothing in this respect but instead seem to be designed so as to facilitate the Madrid government in laying the blame on those sectors of society who are most at risk of infection due to their labour and housing conditions.

This desire to scapegoat was particularly clear when Ayuso went so far as to blame "immigrant ways of living" for the rise in cases. The other main target for blame, however, has been young people - with the media putting a lot of focus on botellones (public drinking in large groups) and clandestine parties.

Yes, during pandemics, there is always a discourse of an Other who is held responsible for infecting us. With the HIV pandemic, it was the LGBT community and sex workers. In the case of Covid-19 there have been various phases – outsourcing responsibility onto the Chinese, for example, as well as blaming children as virus carriers or in Spain we have also talked a lot about seasonal agricultural workers. But in recent weeks there has been a lot of focus on the actions of young people. The decision to close public parks in the restricted areas feeds into this narrative of "the youth not taking responsibility" but as a public health measure it makes little sense.

Also when it comes to nightlife and hospitality we should be looking at other actors. For example places like nightclubs should not have been reopened this summer and the fact that they were is down to the pressure exerted by the tourist industry and hospitality sector – both of which have a lot of power in Spain. Young people cannot be blamed for this decision.

In fact, one of the consequences of this decision was to leave a large number of predominantly young, low wage employees working seven-eight hours in places that were full of people, in which it is hard to wear a mask correctly and which have very bad ventilation. These types of venues did not reopen in many other countries. It was an unnecessary additional risk at this stage of the pandemic – particularly for those forced to work in such conditions.

To what degree is the left-wing PSOE-Podemos coalition at a national level responsible for what is unfolding in the Madrid?

The national government has not demonstrated much leadership on the situation in Madrid so far, largely out of a desire to respect the model of regional autonomy here in Spain. They waited until things were out of control before commenting on the situation and should have intervened earlier. It is true they have offered additional financial resources and other forms of assistance to the regional communities but they need to take a more active role.

If the Madrid administration refuses to act, it will have to step in and take the reins. Given the gravity of the situation, it is now very possible it will have to declare a state of emergency in the region or even invoke article 155 of the constitution so as to revoke certain of its devolved powers. The situation has to be controlled.

More generally Spain itself has the highest levels of cases in Europe right now, 259.76 per 100,000 people. Why has Spain been disproportionally hit by this second wave in Europe?

Well, it is important to note that many countries are now on a similar trajectory to Spain – with France, for example, in a similar position to where we were three or four weeks ago. It is difficult to say why Spain has been hit first by this second wave in terms of one factor.

Certain activities linked to tourism have been permitted here which in other places have not. In Italy for example, they closed clubs and entertainment venues in mid-August. You have to remember Spain's economy and labour market are heavily dependent on the tourism and the service sector more generally. As I mentioned earlier, the quality of housing in places like Madrid is another factor.

But above all you have the failure of various regional communities to put in place adequate systems of monitoring and to hire contact tracers. At the end of June/ early July nearly every country in Europe was registering localised outbreaks but the difference has been that certain of Spain's communities – beginning in Catalonia and Aragon – have not been able to control them. And once you have uncontrolled community transmission in Madrid, it is very hard to stop it spreading elsewhere as everything in Spain passes through the city. It is the country's transport and communication hub.

It is also important to mention we are now seeing how the differential impact among classes is even greater in the second wave.

Why is that?

In the first wave, the lockdown meant that the workforce was divided between essential and non-essential workers – with only essential workers continuing to go to work. This clearly had a class dimension to it as most essential work is done by working class people. But many low-income jobs were also furloughed. Since May, however, with most people returning to work, the division within the workforce is now organised around the possibility for remote working – which ensures working class people are even more disproportionately exposed to the virus.

P.S.

- Tribune. 21.09.2020: https://tribunemag.co.uk/2020/09/madrids-covid-class-war
- Pedro Gullón Tosio is a member of the board of directors of the Spanish Epidemiological Association and co-author of the book *Epidemocracia*.

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