

Letter from Scotland

Arthur's Seat may have experienced some 300 million spring seasons but none so eerie as this one.

I walked round its southern flank the other day, one of those lovely sunny days we've been having this week. I smelt the coconut scent of the yellow gorse and looked down on the calm blue of Duddingston Loch.

All appeared normal, and yet there were clues that it wasn't normal. Walkers, joggers and cyclists went past silently, not raising their eyes, carefully giving me two metres clearance. No cars went by. The bird song was unusually loud. The city around me is in lockdown and I am locked into my own mind. Scary.



A surreal spring clouds Arthur's Seat

We are all looking to our First Minister to let us out to play and work again. But headteacher, Nicola Sturgeon, was having none of it. Although Scotland is the first of the four home nations to outline a plan for exiting the coronavirus lockdown, she's adamant that it won't be implemented any time soon. We have to wait till the death curve turns down.

The figures this week have been shocking. Over 1600 people have now died since mid-March with Covid-19 written on their death certificates.

Over three-quarters were over 75 years old and a third of them were in nursing homes. There have been 13 deaths in a nursing home just up the road from my house.

The plight of Scotland's thousand nursing homes is only now receiving the attention it deserves. It's a "front line" that should have been obvious from the start but, as usual, we were all distracted by the drama of deaths in high-tech hospitals. Only now is the government sending in the testing capacity and the protective equipment the care staff need.

The new NHS hospital, the Louisa Jordan, built in just three weeks at the "Armadillo" conference centre on the banks of the Clyde at a cost of £43m opened this week but stands empty, a silent testimony to our distraction. The same effort must now surely go into our nursing homes and to the carers looking after Covid-19 sufferers in their own homes.



NHS Louisa Jordan Photo courtesy of The Scottish Government
As to Ms Sturgeon's exit strategy, The Scottish Government

has published a [consultative plan](#) to begin what she called “a grown up discussion” about how we balance the need to keep the virus under control (ie the re-infection rate below 1:1) while limiting the damage to the economy, to people’s other health needs and their social wellbeing. She hinted at a series of small steps towards ending the lockdown eg allowing schools and some businesses to reopen. But she made it clear that social distancing and a ban on large gatherings will have to remain for perhaps the rest of this year. Testing, tracing and isolating those with the infection will have to be stepped up.

This is certainly bad news for the economy. Already this week the Scottish government’s chief economist, Gary Gillespie, estimated that our national income will fall by 33 per cent as a result of the pandemic. He didn’t put a number on unemployment but other studies have talked of it rising to 10 per cent. We know that there have been over 100,000 new applications for [Universal Credit](#) in Scotland since the start of the outbreak.

It’s also bad news for those suffering from other illnesses apart from coronavirus. The interim Chief Medical Officer, Dr Gregor Smith, is worried that people are not going to their GP surgeries to seek help for other ailments. There has been, for instance, a 75 per cent drop in the number of people being referred to hospital with suspected cancers. There’s been a sharp rise in the number of people dying from dementia. Over 70 per cent of dental practices say they can’t survive if the lockdown goes on for more than three months.

The medical advice being given to the government is therefore nuanced when these side-effects are taken into consideration.

The politicians too have to take into account the public’s frustration with the lockdown measures. How long can they be sustained, given the strain they are putting on incomes, family relationships and the worthwhileness of life. Is the

risk of infection really worth this sacrifice, people will begin to ask.

At the moment the answer is Yes, but for how long?